

In Afghanistan, every two hours a mother dies from pregnancy-related complications

The current crisis could make the situation worse



Four decades
of conflict



Natural
disasters



High levels
of poverty



Food
insecurity



COVID-19

AFGHANISTAN HAS LONG FACED MULTIPLE HUMANITARIAN CRISES. Now, the ongoing increased insecurity and instability is only worsening the situation, particularly for women and girls.

IN ALL, 18.4 million people ARE IN NEED OF HUMANITARIAN ASSISTANCE IN 2021, according to the latest estimates.

THE CURRENT CRISIS RISKS DISRUPTING FUNDING FOR BASIC SERVICES. MANY WOMEN AND GIRLS WILL BE LEFT WITHOUT ACCESS TO HEALTH SERVICES, INCLUDING REPRODUCTIVE HEALTH AND PROTECTION SERVICES. International funding has supported 70% of health, education and infrastructure budgets. Women and girls are always disproportionately affected by crises, lacking access to maternal health services and at increased risk for gender-based violence.

IN AFGHANISTAN, EVERY TWO HOURS A MOTHER DIES BECAUSE OF PREGNANCY-RELATED COMPLICATIONS - the highest maternal mortality rate in Asia at 638 per 100,000 live births. With close to 1 in 3 girls married before the age of 18, child marriage and adolescent pregnancy exacerbate maternal mortality and morbidity.

THE TOTAL FERTILITY RATE OF 5.1 IS ONE OF THE WORLD'S HIGHEST, RESULTING IN AN OVERWHELMINGLY YOUNG POPULATION - almost 68% of the population is under the age of 25, with just over a third of the population between 10 to 24. Young people's lack of access to reproductive health information and services, combined with pervasive gender inequality, are drivers for rapid population growth.

IN AFGHANISTAN, ONE IN EVERY TWO WOMEN WILL EXPERIENCE SOME FORM OF GBV THROUGHOUT THE COURSE OF HER LIFE.

Gender-based violence is widespread in Afghanistan. Of women who have ever been married, 51% have experienced physical and/or sexual violence by an intimate partner at some point in their life. Adding emotional violence, 56% have experienced one of these three forms of violence in their lifetime.

\$29.2 million is needed to respond to immediate humanitarian needs

SINCE THE TAKEOVER, INDEPENDENT SOURCES HAVE DOCUMENTED VIOLENCE DIRECTED AT WOMEN AND GIRLS AND IMPOSITION OF RESTRICTIONS ON THEIR CAPACITY TO FUNCTION INDEPENDENTLY IN SOCIETY.

REPORTS FROM 16 PROVINCES REVEAL THAT THE MAJORITY OF WOMEN ARE FACING RESTRICTIONS, WHICH IMPACT THEIR ABILITY TO PROVIDE AND ACCESS HEALTH CARE, EDUCATION AND MORE.

THIS ROLLBACK OF FUNDAMENTAL RIGHTS AND RESTRICTED ACCESS TO SERVICES RISKS THE PROGRESS OF THE LAST 20 YEARS. THIS INCLUDES THE SIGNIFICANT REDUCTIONS IN PREVENTABLE MATERNAL MORTALITY - IN 20 YEARS THE MATERNAL MORTALITY RATE WAS REDUCED FROM 1,600 PER 100,000 LIVE BIRTHS (2002) TO 638 (2017).



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

To respond to the lifesaving humanitarian needs of women and girls, **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 expansion and scaling up of UNFPA's existing service delivery points.

This includes building on UNFPA's services which reach vulnerable women and girls living in remote areas with little access to any social services and addressing the needs of IDPs and returnees in border areas through static clinics and mobile health teams.

The package links its services with health facilities by establishing a strong referral network at different levels.

UNFPA'S STRATEGIC PRIORITIES FOR WOMEN AND GIRLS:



PROVIDING LIFESAVING MATERNAL HEALTH CARE SERVICES, including basic emergency obstetric and newborn care, as well antenatal and postnatal care services



STRENGTHENING ACCESS TO REPRODUCTIVE HEALTH INFORMATION through telehealth initiatives



ENSURING A CONSISTENT SUPPLY of lifesaving maternal health drugs



PROVIDING LIFESAVING MEDICAL AND PSYCHOSOCIAL SUPPORT to women and girls



CO-LEAD COORDINATION OF WOMEN'S PROTECTION RESPONSE through the GBV sub-cluster



PROVIDING AWARENESS raising and ensuring supply of PPE in response to COVID-19

UNFPA'S RESPONSE - BUILDING ON EXISTING SERVICES

Over the past decade, UNFPA has been providing lifesaving RH & GBV services throughout Afghanistan via contextualized service delivery points that address the unique challenges faced by Afghan women and girls. These services are tried and tested in the Afghan context and continue to provide services that can be scaled up and adapted to the evolving humanitarian needs of the country.

HEALTH 37(37) **FAMILY PROTECTION CENTERS (FPC)** are located in provincial and district-level government hospitals. These female-staffed, one-stop clinics provide free, confidential health and psychosocial counselling services for survivors of gender-based violence. **ALL 37 FAMILY PROTECTION CENTERS (FPC) ARE CURRENTLY OPERATING IN 26 PROVINCES.**



SUPPORT 17(17) **WOMEN FRIENDLY HEALTH SPACES (WFHS)** are located at the district level and provide safe spaces for women and girls to gather. **ALL 17 WFHSs ARE OPERATIONAL AND ARE PROVIDING SURVIVOR-CENTERED PSYCHOSOCIAL COUNSELLING SERVICES TO WOMEN AND GIRLS.**



HEALTH 172(171) **FAMILY HEALTH HOUSES (FHH)** are community based, owned and sustainable facilities run by a community midwife from the same locality, providing essential lifesaving RMNCH health services to people living in underserved areas. **171 OUT OF 172 FHH ARE CURRENTLY OPERATING IN NINE PROVINCES.**



HEALTH 5(5) **MOBILE HEALTH TEAMS (MHT)** provide integrated reproductive health and gender-based violence response services. Currently there are **THREE MHTS IN PAKTIKA AND KANDAHAR PROVINCES, AND ANOTHER TWO IN KABUL**, to respond to the needs of IDPs, with one more to be launched in Kabul.



HEALTH 4(3) **EMERGENCY CLINICS - THREE OUT OF THE FOUR STATIC EMERGENCY CLINICS HAVE BEEN SET UP ALONG BORDER AREAS** to provide integrated reproductive health, gender-based violence response and psychosocial support services to returnees, IDPs and host communities.



SUPPORT 34 prov. **YOUTH HEALTH LINE (YHL)**, a telehealth initiative, **IS A NATIONWIDE TOLL-FREE PHONE LINE ACCESSIBLE FROM ALL 34 PROVINCES** of Afghanistan. Staffed with male and female counselors, the YHL provides young people with immediate, anonymous and professional reproductive health information and advice. It also provides information, counseling, and referral services to IDPs on RH, GBV and COVID-19.



SUPPORT 26(26) **YOUTH HEALTH CORNERS (YHC)** are an integrated approach within the structure of public regional, provincial, and district hospitals, which provide vital health advice and services for young people. **THE 26 YHCs ARE YOUTH-FRIENDLY SPACES SPECIFICALLY DESIGNED TO ALLOW YOUNG PEOPLE, ESPECIALLY YOUNG WOMEN AND GIRLS, FEEL COMFORTABLE AND WELCOMED.**



HEALTH 34 prov. **MIDWIFERY HEALTH LINE IS A TOLL-FREE NUMBER ACCESSIBLE BY ALL MOBILE NETWORKS ACROSS AFGHANISTAN AND IS FUNCTIONAL 24/7.** The helpline is staffed with two gynecologists and two expert midwives. The helpline provides RMNCAH technical information, consultation, and guidance to midwives and other health workers on duty. The helpline center is located in a national maternity hospital in Kabul.



UNFPA's Funding Requirement

TOTAL COST:

\$29,222,608

POPULATION COVERAGE:

1,600,000+

Source: UNFPA Afghanistan Country Office

► ESTABLISHMENT, EXPANSION AND ADAPTATION OF SERVICE DELIVERY POINTS



Establishment, continuation and expansion of integrated PSS/Mobile Health Teams in targeted provinces



Integrated youth and midwifery health lines



Pilot establishment of FPCs and FHH integrated to provide GBV & health services



Technical support to integrated GBV/SRH/PSS service provision



Apportioned costs (security, etc)

Quantity	36	4	37	1	1
Cost	\$2,160,000	\$240,000	\$1,626,651	\$352,835	\$83,528
Duration	12 months	12 months	12 months	12 months	12 months

► EXPANSION OF INTEGRATED YOUTH AND MIDWIFERY HEALTH LINES



Community mobilization using community health workers and community volunteers; radio messages; IEC materials and BCC sessions



Technical support to community mobilization and engagement



Humanitarian coordination and service monitoring cost



Apportioned costs (security, etc)

Quantity	1	1	36	1
Cost	\$240,000	\$163,506	\$151,200	\$9,827

► AVAILABILITY OF SUPPLIES FOR EMERGENCY SITUATIONS



Availability of dignity kits for the emergency



Availability of ERH kits (1 to 12) for the emergency



Protection kits (customized COVID-19 kits)



Winterized Kits



Technical support to community mobilization and engagement



Apportioned costs (security, etc)



Operations Support Cost

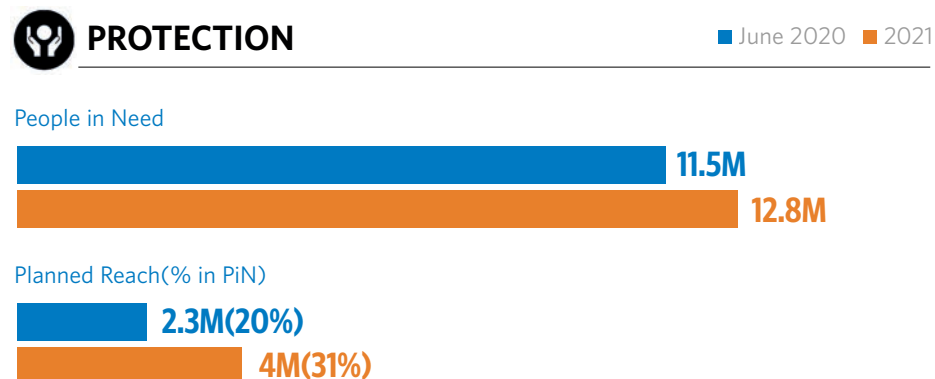
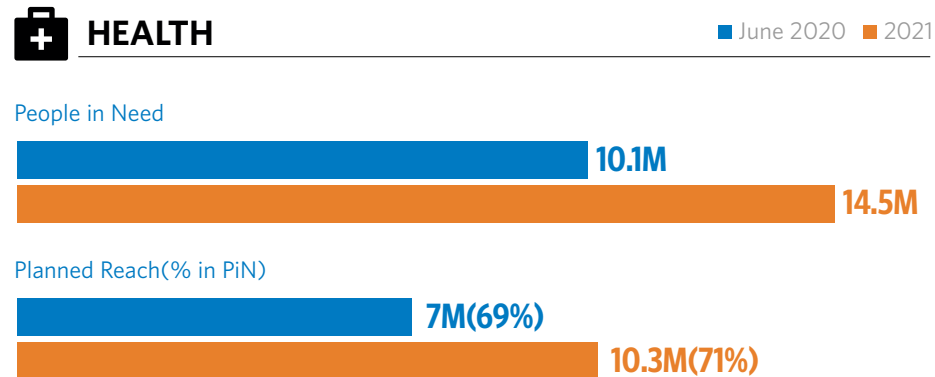
Quantity	528,000	4,920	246,000	20,000	1	1	1
Cost	\$9,504,000	\$3,870,000	\$3,960,000	\$4,000,000	\$298,438	\$397,985	\$2,164,637



Humanitarian Needs

People in Need (PiN) 2020 & 2021

THE NUMBER OF PEOPLE IN NEED HAS INCREASED ACROSS ALMOST EVERY SECTOR OVER THE PAST YEARS. Ongoing conflict, natural disasters, and the COVID-19 pandemic have contributed to increased mass displacement, increasing the humanitarian need.



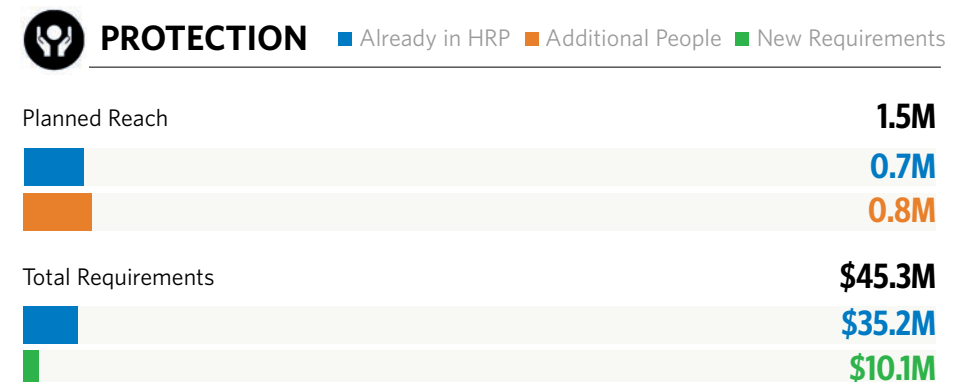
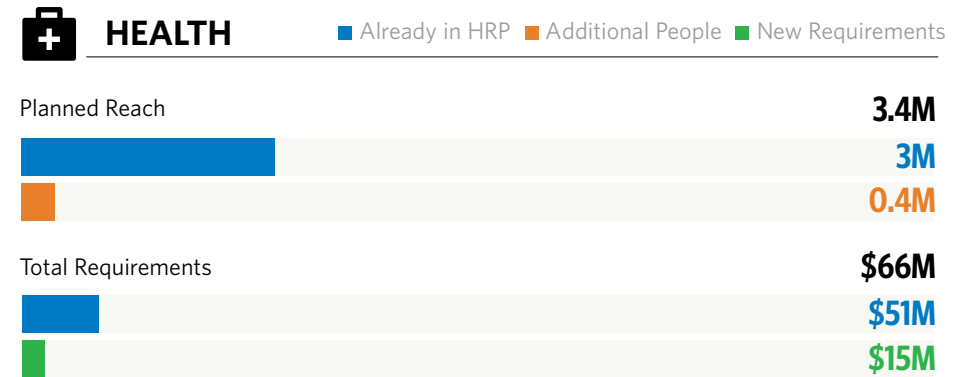
PRIORITY PLANNED REACH AND REQUIREMENTS BY SECTOR (HRP, SEPTEMBER - DECEMBER 2021)

TOTAL PLANNED REACH:

10.8 million

TOTAL REQUIREMENTS(US \$)

\$606.2 million



Supplies to meet humanitarian needs

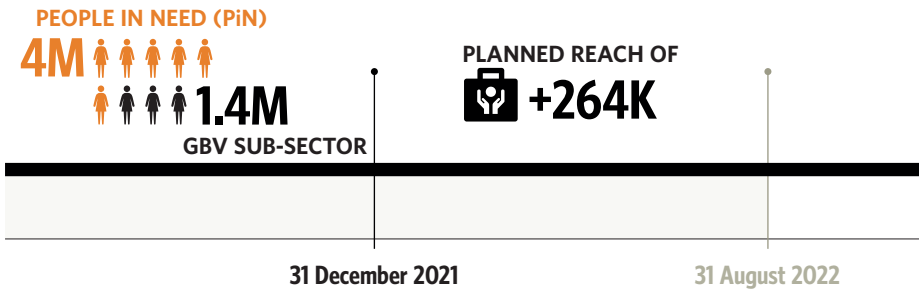
PROTECTION

According to the HRP, the number of people in need (PiN) of protection assistance is 4 million; of these, the GBV sub-cluster has planned to reach 1.4 million women and girls with integrated services by December 31, 2021.

The essential contents of dignity kits can connect survivors to life-saving GBV services, provide tools for GBV risk mitigation and enable their access to other humanitarian aid.

DIGNITY KITS (DK)

Based on the persons in need (PiN) estimates for the next 12 months, an estimated **264,000 WOMEN IN ESPECIALLY VULNERABLE CIRCUMSTANCES NEED TO BE REACHED TWICE WITH DIGNITY KITS**. The kits will be distributed via UNFPA service delivery points (FHH, FPC, MHT).



WINTERIZATION ASSISTANCE (WINTERIZED KITS)

ACCORDING TO THE EMERGENCY SHELTER AND NFI CLUSTER, THE TOTAL NUMBER OF PEOPLE TO BE REACHED BY DECEMBER 31, 2021 IS 1 MILLION, OF WHOM 195,000 ARE WOMEN. These kits are in response to the expected harsh winter season and prolonged lean season which increase the vulnerability of women and girls, especially those without shelter.

UNFPA WILL PRIORITIZE FEMALE-HEADED HOUSEHOLDS FOR WINTERIZED KITS, WHICH WILL PROVIDE ASSISTANCE TO 6 INDIVIDUALS PER HOUSEHOLD.

i SINCE THIS ESTIMATION WAS DONE BEFORE THE CURRENT CRISIS, UNFPA ESTIMATES THAT AN ADDITIONAL 0.6 MILLION WOMEN HAVE BEEN DISPLACED IN RECENT MONTHS AND ARE IN NEED OF GBV RELATED ASSISTANCE. THIS BRINGS THE TOTAL NUMBER OF PiN TO 2 MILLION. NOTING THAT THIS APPEAL GOES BEYOND DECEMBER 31, 2021 WITH A 12-MONTH DURATION, UNFPA ASSUMES THAT THE TOTAL NUMBER OF WOMEN IN NEED WILL INCREASE UP TO 6 MILLION BY AUGUST 31, 2022.

NOTING THAT THIS APPEAL GOES BEYOND DECEMBER 31, 2021 WITH A 12-MONTH DURATION, UNFPA ESTIMATES THAT THE TOTAL NUMBER OF WOMEN WHO WILL HAVE TO BE REACHED WITH REPRODUCTIVE HEALTH ASSISTANCE BY AUGUST 31, 2022 IS 3 MILLION.

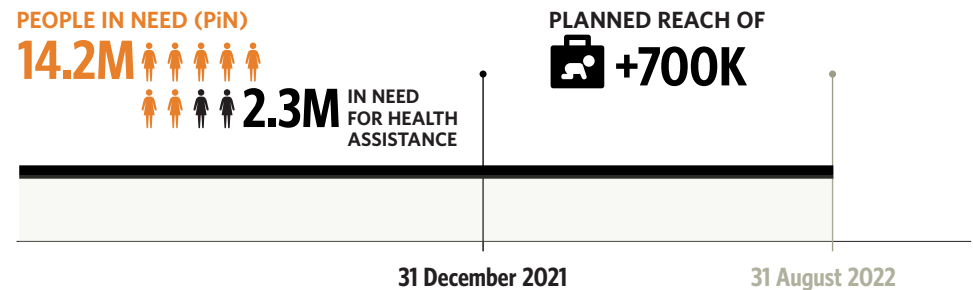
HEALTH

To ensure that the reproductive and maternal health needs of women are met during crises, Emergency Reproductive Health (ERH) kits, which contain essential medicines and commodities and equipment, are used to facilitate the provision of lifesaving reproductive health services - ensuring safe pregnancy and childbirth - during humanitarian crises.

According to HRP, the number of persons in need (PiN) of health assistance is 14.2 million and the health cluster has planned to reach 2.3 million women with health assistance by December 31, 2021. Based on this, the number of women to be covered by ERH kits is estimated to be 700,000.

REPRODUCTIVE HEALTH (RH) KITS

The Afghanistan health system is already overburdened and the provision of IASC-endorsed Emergency Reproductive Health (ERH) kits allows facilities to provide safe RH support and services. These services are provided via 12 unique types of kits which cover needs related to clean delivery, STIs and the clinical management of rape, among other urgent needs.



+ IN ADDITION TO DIGNITY KITS CUSTOMIZED PROTECTION KITS

In view of the vulnerability of displaced women and girls during these crises with the upsurge of COVID-19 cases, UNFPA will distribute customized COVID-19 protection kits to the same number of beneficiaries under dignity kits (DK) distribution. This is intended to shield vulnerable women and girls from community transmission.

