

## HIGHLIGHTS

- The humanitarian community is seeking US\$550 million to provide assistance to 5.7 million of the most vulnerable and marginalised Afghans in 2017.
- EMERGENCY's new maternity center in Panjshir province will help tackle Afghanistan's infant and maternal mortality rates, which remain among the highest in the world.
- Children account for 84 per cent of casualties from landmines and UXO in Afghanistan. Mine risk education is an important tool to protect people – including children and displaced families – from this potential deadly risk.
- Food insecurity in Afghanistan is on the rise. MEDAIR are assisting farmers affected by food insecurity in Bamyan.

## HUMANITARIAN RESPONSE PLAN 2016 FUNDING

**339 million**

MYR revised request (US\$)

**197.2 million**

received (US\$)

## FLASH APPEAL 2016 FUNDING

**152 million**

request (US\$)

**91.2 million**

pledges & contributions (US\$)

The Flash Appeal ended in 2016, and continuing needs for people on the move are reflected in the 2017 HRP.

(Reflects funding on Financial Tracking Service as of 31 Dec 2016)

Source: <http://fts.unocha.org>  
More on funding on page 8.



Future midwives training in Kandahar. Many women in Afghanistan, particularly in rural areas, give birth without skilled assistance, contributing to the high maternal mortality rate. Photo: UNDP

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## 2017 HRP Afghanistan: 9.3 Million in Need

In 2017, the humanitarian community in Afghanistan is seeking US\$550 million to meet, through collective and coordinated action, the acute life-saving needs of the most vulnerable and marginalised Afghans. Almost one third of the population, some 9.3 million people, will be in need of humanitarian assistance, a 13 per cent increase from last year. The principal goal of the humanitarian response remains focused on preventing loss of life, limiting preventable morbidity and human suffering and enhancing protection for displaced persons, civilians and returnees caught up in the conflict. Therefore, an estimated 5.7 million people will be targeted for assistance under the 2017 Humanitarian Response Plan (HRP) for Afghanistan.

"Afghanistan is one of the most protracted humanitarian emergencies in the world. Tragically for many Afghans, 2016 saw no let-up in the conflict," said the United Nations Humanitarian Coordinator, Mark Bowden. "This Humanitarian Response Plan is focused on meeting immediate life-saving needs; providing relief to Afghans affected by natural disaster and conflict and trauma care for war wounded patients. Treatment to children with acute malnutrition, access to skilled birth attendance and maternal and new-born care in conflict stricken and hard to access districts, and ensuring the safety and security of families fleeing violence are also priorities".

Corresponding with the growing severity and reach of the conflict, the humanitarian community identified needs across all regions, with the most severe in areas experiencing the greatest levels of violence as well as the adjacent provinces hosting the displaced.

For families facing sudden emergencies – conflict, disaster and displacement, the humanitarian response is often their only lifeline. In addition to those displaced by natural disasters, in 2016, more than 623,000 people in Afghanistan fled their homes due to conflict, the highest number on record, and a 30 per cent increase compared with 2015. This has occurred at the same time as the return of more than 600,000 Afghans from Pakistan and Iran. The 2017 HRP estimates at least another 450,000 IDPs this year, and as many as a million more returns are expected from Pakistan and Iran.



Record numbers of Afghans were internally displaced in 2016, including more than 350,000 children. Photo: UN

Around 56 per cent of the displaced are children, who face particular risk of abuse and exploitation, as well as interrupted school attendance and harmful child labour. Multiple forms of GBV, particularly early and forced marriage, domestic, psychological and sexual abuse are reported, affecting individuals in hosting and displaced communities alike.

In addition to meeting the immediate needs of the displaced, the 2017 HRP recognises that despite a decade of exceptionally high levels of international assistance, the poverty rate in Afghanistan has increased since 2011 and will likely further increase in 2017.

Over past years, the humanitarian community has been hesitant to divert limited available humanitarian funding to cover growing gaps in government delivery of basic services. But as the conflict expands, and with it the challenges in access to quality and safe healthcare, the humanitarian community is confronting heightened levels of preventable deaths. Estimates suggest over nine million Afghans have limited or no access to essential health services, including women who are pregnant and during childbirth, contributing to very high rates of infant and maternal mortality. Severe food insecurity is also on the rise: 40 per cent of the population are food insecure. In addition, severe acute malnutrition has breached emergency thresholds in 20 provinces, and over 1 million children need treatment for acute malnutrition.

While working to avoid overreliance on humanitarian services, the 2017 HRP prioritises activities with the potential to have the greatest impact on reducing loss of life, by complementing and enhancing basic service delivery to the most at risk, and in particular to those in NSAG-held territories, typically out of reach to government providers. This will ensure greater proportionality of humanitarian coverage. Years of growing insecurity in Afghanistan has had a debilitating impact on the ability and the willingness of humanitarian agencies to ensure reactive, flexible presence, which is responsive to meet the needs of people most impacted by the crisis. Insecurity too often dictates where agencies operate, resulting in unequal coverage of needs.

The 2017 HRP also addresses the changing nature of displacement. With more Afghans than ever before living an ambiguous and transitory existence in prolonged and protracted displacement, it is necessary to focus on meeting the needs of those who live in semi-permanent crisis.

Assessments continue to highlight the particular needs of protracted IDP communities, and increased competition for meagre resources with host communities. IDPs, often with rural skillsets and limited literacy, have limited access to labour opportunities. Women in particular find it very difficult to find work, or often are not permitted to work.

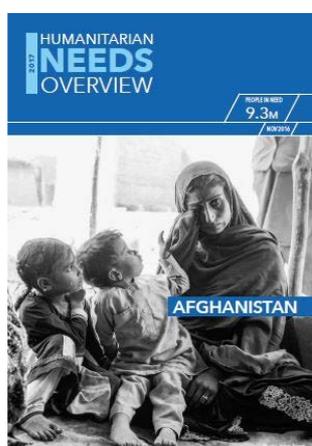
In addition, the absence of camp settings in Afghanistan and the urban nature of displacement has posed additional challenges on the humanitarian community in the identification of the humanitarian needs and the most vulnerable families. Eliminating vulnerability and ensuring safety, dignity and the ability to thrive and be self-reliant over the long term is well beyond the scope and capacity of humanitarian actions. However, greater coordination and synergy between humanitarian assistance and longer-term development efforts can ensure this extremely vulnerable population with acute humanitarian needs is not falling through the gap.

The Government and Humanitarian Community will jointly launch the 2017 HRP on 21 January 2017 at Sepidar Palace. The humanitarian community are welcome to attend this event; please contact UN OCHA Afghanistan if you are interested.

To download the 2017 HRP and the 2017 Humanitarian Needs Overview, please visit: <https://www.humanitarianresponse.info/operations/afghanistan>



*2017 Afghanistan Humanitarian Response Plan*



*2017 Afghanistan Humanitarian Needs Overview*

## EMERGENCY: Tackling Maternal Mortality

More Afghan women in Panjshir province can now safely give birth under the highest standards of care, as EMERGENCY opened a new, expanded maternity center in Anabah in mid-December.

The new maternity center expands on EMERGENCY's existing operation, which first opened in Anabah in 2003. Prior to the completion of the new center, EMERGENCY were helping deliver around 500 babies per month. The new center is capable of providing care for more than 600 women per month, and includes four delivery rooms, two operating theatres, an intensive care unit, neonatal sub-intensive care unit, outpatient clinic, and a gynaecological ward.

"One of the biggest concerns we have as a humanitarian community is the high level of maternal mortality," said Dominic Parker, Head of Office for UN OCHA Afghanistan, at the hospital's inauguration on 8 December. "The bad news is we understand the figures are getting worse, so to see this state of the art facility, it's wonderful because what it's doing is saving lives."



The new maternity center in Anabah. Photo: EMERGENCY

Years of conflict in Afghanistan have severely hampered development progress and in more remote and impoverished rural areas, where 75 per cent of women live, maternal and child health is dangerously overlooked. A recent NRC/ATR study revealed that in hard-to-access areas, 12 per cent of the population reported having no access to maternal healthcare (compared to 8 per cent in easy). 30 per cent of women in these areas also reported as being dependent on untrained midwives. This has resulted in the stark reality that too many Afghan women are dying at home, especially during childbirth.

Rates of infant and maternal mortality in Afghanistan remain among the highest in the world at 73/1000 live births and 327/100,000 live births respectively, with reports of maternal mortality ratio (MMR) rates as high as 417/100,000 in rural areas. Early reports indicate that MMR rates have risen in Afghanistan, perhaps as much as two or three times higher. With recent estimates suggesting over nine million people have limited or no access to essential health services, it is inevitable that deaths associated with childbirth will increase in 2017.

The new EMERGENCY maternity hospital however, will ensure that more women in the region have access to skilled birth attendance and maternal and new-born care. "This maternity hospital, providing quality care to the mothers in Afghanistan, I'm sure this is completely contributing to reducing maternal mortality and improving maternal health in Afghanistan," said Dr. Ferozzudin Feroz, Afghan Minister for Public Health, also at the inauguration. "This hospital is not only for people in this village, but also for the region."

On 17 December, the first birth occurred in the new center, resulting in a healthy baby boy and a happy mother. "To open with a birth like this is a good omen," said medical coordinator Eleanor Bruni. EMERGENCY has been working in Afghanistan since 1999, providing medical and surgical care to war victims, and delivering over 39,000 babies.

### QUICK STATISTICS

- *Infant mortality in Afghanistan:*  
73/100,000 live births
- *Maternal mortality in Afghanistan:*  
327/100,000 live births
- *Maternal mortality in rural areas:*  
417/100,000 live births
- *Women in rural areas with no access to maternal healthcare:*  
12 per cent
- *Women in rural areas dependent on untrained midwives:*  
30 per cent

## Mine Risk Education: Protecting Communities

After decades of war, Afghanistan remains one of the most landmine and explosive remnants of war (ERW) affected countries. More than 1,500 communities in 257 districts are affected; impeding not only crucial development by delaying new infrastructure such as roads and mines, but also posing grave risks to the safety of Afghans, in particular children, and also displaced families when forced to move across unfamiliar areas.

In July-September 2016, the Mine Action Programme of Afghanistan (MAPA) recorded 40 civilians were killed and 76 injured by landmines and other unexploded ordnance (UXO) across Afghanistan. While still an unacceptably high number, it is a significant decrease from the average of 507 casualties a month recorded in 2001. But with 2016's record numbers of IDPs – including at least 350,000 children - and the influx of returnees from Pakistan, and at least 450,000 new IDPs and potentially as many as one million more Afghan returnees from Pakistan projected for 2017, more people on the move will be exposed to this potential deadly risk.



Terre des hommes train children and adults in mine risk education in local communities in Nangarhar: Photo: Tdh.

According to UNMAS, children account for 84 per cent of the total recorded landmine and ERW casualties in Afghanistan. Due to their playful curiosity and unfamiliarity with the overall threats posed by explosive hazards, children are more prone to landmine and ERW accidents. Furthermore, displaced children are particularly vulnerable, as they are unfamiliar with their new surroundings, including the history of armed clashes and the potential for explosive contamination in areas of settlement or transit.

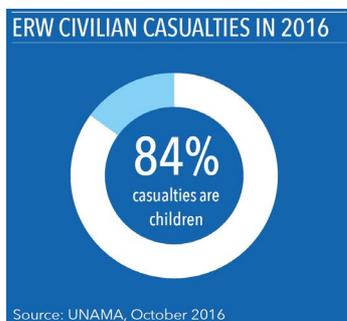
Terre des hommes (Tdh), a Swiss NGO, is working in Nangarhar and Kunar provinces to respond to the emergency influx of returnees and IDPs. As part of their 'Ishtema' project ("working with the community") Tdh is providing psychosocial activities for children, child protection support including direct assistance to families through NFIs, and mine risk education (MRE). The MRE is carried out locally by trained community based child-protection committees (CBCPC), mentored by Tdh mobile team staff.

"A lot of people are digging with shovels [to build houses] and children are collecting scrap, so we brief them on how to recognize UXO and how to behave and who to contact," explained one trainer\*. "People are also trained on how to recognize the marks on the soil: red – dangerous, blue – unclear, do not go and white – clear, ok to go".

While adults complete the MRE training in a three hour session, children attending the MRE sessions in child-friendly spaces are trained over the course of 24 sessions, held twice a week for three months. They learn how to identify mines and UXO, who to contact for help, and even where victims can be referred to for assistance.

The training can save lives – recently, some children in Durbaba district in Nangarhar that had attended Tdh MRE training identified a potential explosive device, wrapped in a piece of cloth. The children reported the mine to the trainer, and following referral, the explosive device was safely removed from the community.

*\*Interviewee not named for protection reasons.*



*84 per cent of civilian casualties of ERW in 2016 were children*

## Food Security: In Focus In 2017

Food insecurity is on the rise in Afghanistan, with almost six per cent of Afghans severely food insecure and another 34 per cent moderately food insecure. It is created by a perfect storm of national low income and vulnerability to natural disasters, high numbers of IDPs and returnees, poor infrastructure, low female participation in the labour force, high unemployment, and high fertility and dependency.

In rural areas, such as Bamyan province, the landless and smallholder farmers are the most vulnerable to shocks. Farming is the primary source of income for over 85 per cent, yet the land is among the least agriculturally productive in the country. Harsh winters shorten the growing season and there are few roads

connecting villages to larger markets. The challenges are many: heavy snow, flash floods, drought, avalanches, and environmental degradation, which destroy farmland and make it difficult to grow enough food to feed families. Chronic and widespread levels of food insecurity combine with underlying low access to

safe drinking water, as well as poor hygiene and sanitation practices. As a result, nearly half of all children in the Central Highlands are stunted due to chronic malnourishment.

This year, late rains, combined with low practice of crop rotation, contaminated wheat seed, and shared irrigation water has exacerbated normal low levels of a fungal disease (wheat rust) into a wide spread infestation destroying crops across the region.

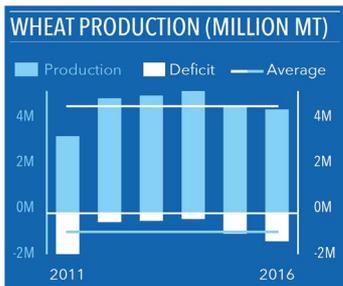
“I was really worried for winter,” one farmer, Zia, told MEDAIR, an NGO operating in Bamyan. “The shopkeeper wouldn’t lend us any flour. They wouldn’t lend anyone flour because no one had any money. Everyone in this area lost most of their crops.”

MEDIAIR provided Zia with cash assistance, enabling him to buy 20 bags of flour, but his situation appears to be common among other vulnerable farmers and families.

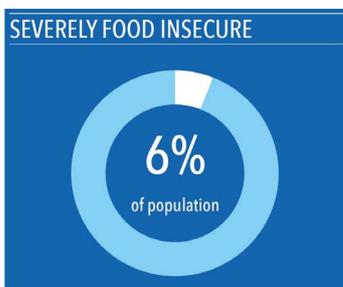
Many farmers in the Bamyan are facing a triple loss: their wheat grain; the fodder for their animals; and the seed stock for the coming planting year. A local community leader reported, “There are 170 families living in this area and over half have lost 85 per cent of their wheat or more this year. Only 10 families are in a good situation.”

In a community of subsistence farmers, they can’t afford to take expensive loans to feed their families. Many will sell precious livestock or other valuable goods to buy food, and others who have run out of options will be forced to leave. “If they can’t get food or a loan, they will be forced to leave for Kabul, Iran, or elsewhere, to look for work. Thirty-three men have already left this area in the last month,” the community leader continued.

Under the 2017 Humanitarian Response Plan (HRP), the Food Security and Agriculture Cluster (FSAC) will target 2.5 million people in 2017 of a total 3.2 million severely food insecure and acute shock-affected vulnerable people, recognising that overall chronic food insecurity needs are much higher. For more information, see the 2017 HRP. Learn more about MEDIAIR, who contributed to this report, at [www.medair.org](http://www.medair.org).



In 2016, Afghanistan’s wheat production suffered an almost 1.2 million metric ton deficit, contributing to the country’s overall food insecurity.



1.6 million Afghans are severely food insecure, and the number is on the rise.



Wheat rust destroyed many crops in Bamyan in 2016 Photo: UN

*The following article was contributed by UNICEF: by Aisling Falconer*

## Make Education in Emergencies a Priority for Every Child in Afghanistan

Afghanistan's Education in Emergencies (EiE) Response Plan estimates that 600,000 children will be affected by emergencies in 2017. And while the right to education for every girl and boy in Afghanistan is enshrined in the Constitution, the country's education system is still recovering from over 30 years of conflict.

Despite tremendous progress in enrolment, particularly for girls, and an increase in the number of schools, there are still many Afghan children who cannot claim their right to education due to insecurity, displacement; violations by parties to the conflict (school damage, occupations), and natural disasters. This situation is compounded since July 2016 by the return some 620,000 Afghans from Pakistan, 60 per cent who are children.

The provision of EiE in Afghanistan sustains children displaced by conflict, natural disasters and returnees with safe and protective learning spaces. Education also mitigates the extreme psychosocial impact on children rapidly uprooted, by giving them a sense of normalcy, stability and structure in the face of an uncertain future, and by promoting psychosocial wellbeing.

OCHA-led Rapid Assessments indicate undocumented returnee, registered refugee returnee, and IDP children do not attend school for reasons including lack of capacity of schools to enrol additional children; lack of required documentation to facilitate enrolment; and costs associated with education. A follow up assessment by Save the Children International found almost half of returnee children are not currently enrolled in school. More than 70 per cent of returnee parents and community leaders said early marriage and child labour were major risks for returnee children currently not in school.

An EiE Working Group led by the Ministry of Education (MoE) and co-led by UNICEF and Save the Children was formed in 2014. The Working Group is currently coordinating the education response to the escalating humanitarian crisis, but the returnee influx is exacerbating Afghanistan's fragile education system and threatening gains made to provide education for all children.

For its part, the MoE has reiterated its support in enrolling all children into formal schools or through the establishment of Community Based Schools (CBS) and an academic committee has been established to develop a reintegration policy for children without documentation. The Working Group has also finalised its 2017 Response Plan.

To date, UNICEF has provided 12,000 children with quality education materials and some 4,389 children gained access to temporary learning spaces and community-based schools in Eastern and Southern Regions with high-returnees. UNICEF is also providing 100 tents to be used as classrooms for overcrowded schools, and has distributed 50,000 leaflets to returnees, with key education access information.

However, this is not nearly enough. More girls and boys than ever are now displaced in Afghanistan and development partners are struggling to respond. This requires a coordinated and resourced response. The EiE Working Group continues to advocate for increased prioritisation of education by the humanitarian community and more sector funding to enable all partners to respond effectively and realise the right of every child.

For the estimated 600,000 children likely to be affected by emergencies this year, an education cannot wait.



Almost half of returnee children were found to not be currently enrolled in school.

*Photo: UNICEF*



More than 70 per cent of returnee parents and community leaders said early marriage and child labour were major risks for returnee children not in school.

*Photo: Danielle Moylan*



benefited the most, with 57 per cent and 33 per cent coverage of the HRP funding requirements, respectively.

According to reports from UN agencies in country, the Afghanistan Flash Appeal has received pledged and deposited contributions totalling US\$91.2 million against overall requirements of US\$152 million. As it stands, the Refugee & Returnee Chapter has received the highest proportion at US\$46.7 million (58%), followed by the FSAC and Protection clusters with US\$26.5 million (33%) and US\$5 million (6%) respectively.

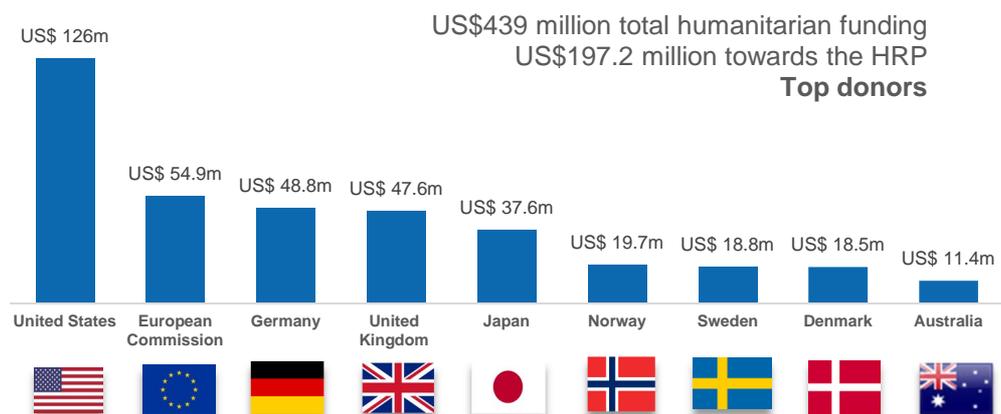


A mother with her newborn at EMERGENCY's maternity center. Photo: EMERGENCY

Under the leadership of the Humanitarian Coordinator, the Afghanistan Common Humanitarian Fund (CHF) received contributions totalling US\$59.2 million in 2016 from eight key donors dedicated to coordinated humanitarian action in Afghanistan.

These commitments represent 117 per cent achievement towards the Fund's annual target set at US\$51 million (or 15 per cent of the revised 2016 HRP funding requirement) and 30 per cent of the HRP funding received.

Strengthening the leadership of the Humanitarian Coordinator and supporting humanitarian interventions and assessments, 38 partners (4 UN, 23 INGO, 11 NNGO) received approximately US\$40 million to implement 66 projects, with a strategic focus on the HRP priorities for emergency first aid and trauma capability to treat an increasing number of conflict casualties, and the critical treatment for children under five and pregnant and lactating women with acute malnutrition, particularly targeted to underserved conflict IDPs and refugees.



Source: Financial Tracking Service (FTS) <http://fts.unocha.org>

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