

AFGHANISTAN - COMPLEX EMERGENCY

FACT SHEET #3, FISCAL YEAR (FY) 2020

JUNE 12, 2020

NUMBERS AT A GLANCE

9.4 million

People in Afghanistan Requiring Humanitarian Assistance in 2020
UN – December 2019

10.9 million

People Projected to Experience Severe Acute Food Insecurity
UN – May 2020

84,780

People Displaced By Conflict in 2020
OCHA – June 7, 2020

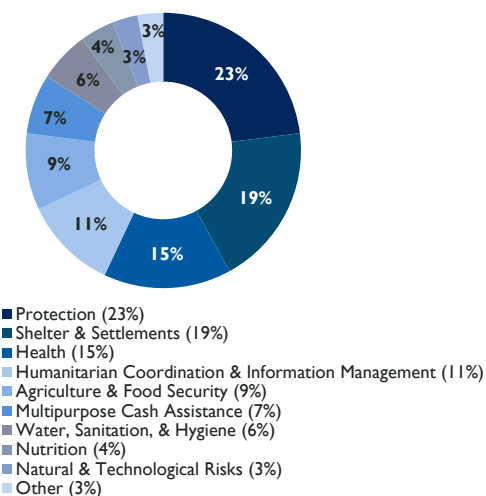
41,530

People Affected By Natural Disasters in 2020
UN – June 7, 2020

300,512

Total Undocumented Returnees to Afghanistan in 2020
IOM – May 30, 2020

USAID/BHA NON-FOOD ASSISTANCE FUNDING BY SECTOR IN FY 2020



USAID/BHA FOOD ASSISTANCE FUNDING BY MODALITY IN FY 2020



HIGHLIGHTS

- GoA reports nearly 22,900 confirmed COVID-19 cases as disease mitigation measures limit humanitarian access
- Armed conflict, attacks continue to kill and injure civilians, disrupt relief efforts
- Seasonal flooding, other natural disasters affect nearly 42,000 people to date in 2020

HUMANITARIAN FUNDING FOR THE AFGHANISTAN RESPONSE IN FY 2020

USAID/BHA ¹	\$91,127,352
State/PRM ²	\$15,555,000
\$106,682,352³	

KEY DEVELOPMENTS

- The rapid spread of coronavirus disease (COVID-19) in Afghanistan is exacerbating humanitarian needs among vulnerable populations, with health needs and food insecurity across the country projected to increase in the coming months, relief agencies report.
- Armed conflict continues to generate civilian casualties and adversely affect humanitarian operations in Afghanistan. From January to March 2020, conflict had resulted in at least 1,293 civilian casualties, including 533 deaths, the UN Assistance Mission in Afghanistan (UNAMA) reports.
- To date, the U.S. Government (USG) has provided nearly \$107 million in FY 2020 humanitarian funding for Afghanistan. The funding from USAID/BHA and State/PRM supports the ongoing multi-sector response to the complex emergency in Afghanistan, as well as specific measures to prepare for and respond to COVID-19.

¹ USAID's Bureau for Humanitarian Assistance (USAID/BHA). Total USAID/BHA funding includes non-food humanitarian assistance from the former Office of U.S. Foreign Disaster Assistance (USAID/OFDA) and emergency food assistance from the former Office of Food for Peace (USAID/FFP).

² U.S. Department of State's Bureau of Population, Refugees, and Migration (State/PRM)

³ This total includes approximately \$8 million in funding through USAID/BHA and State/PRM for COVID-19 preparedness and response activities under the Supplemental Funding to Prevent, Prepare for, and Respond to COVID-19 Abroad.

COVID-19 SITUATION, PREPAREDNESS, AND RESPONSE

- The Government of Afghanistan (GoA) had reported nearly 22,900 confirmed COVID-19 cases and 426 related deaths as of June 11, according to the UN World Health Organization (WHO). The GoA Ministry of Public Health has acknowledged that limited testing capacity—with only eight labs countrywide conducting COVID-19 testing as of May 5—is hampering disease surveillance efforts and expressed concern that case numbers may increase in the coming weeks as community transmission accelerates. In response, WHO is coordinating with the GoA to construct new laboratories in Badakhshan and Bamiyan provinces to increase testing capabilities. On March 26, WHO also established the COVID-19 Risk Communications and Community Engagement Working Group to support the GoA in countering COVID-19 misinformation and engage community and religious leaders to develop localized early warning and prevention mechanisms.
- On March 24, the UN released the Multi-Sector Humanitarian Country Plan for COVID-19, requesting approximately \$108 million—including more than \$71 million in new COVID-19-related programming requirements, as well as approximately \$37 million in funding already requested in the Afghanistan Humanitarian Response Plan—to reach more than six million people with COVID-19 preparedness and response activities. The plan covers activities from April through June and is designed to permit adaptation as Afghanistan’s COVID-19 outbreak develops.
- COVID-19 mitigation measures continue to limit humanitarian access, the UN reports. All but one of Afghanistan’s 34 provinces had implemented lockdown measures to prioritize physical distancing as of April 25, though restrictions and the level of adherence to the measures vary by province. As of April 30, lockdown measures were decreasing regular population movement by an estimated 21 percent, insufficient to contain community spread of the disease, according to WHO. Although the GoA has expressed a commitment to ensuring freedom of movement for humanitarian staff during the lockdown, national authorities had not implemented a countrywide approach as of April, leaving provincial authorities to enact regulations, which are reportedly limiting relief workers’ movements. In addition, the closure of nearly all GoA ministries since March 27 and complex bureaucratic processes have impeded timely visa issuances to humanitarian staff. The Humanitarian Access Group—a forum comprised of non-governmental organizations (NGOs), UN agencies, and other stakeholders to negotiate and provide technical assistance regarding humanitarian access in the country—continues to advocate for safe, timely, and unhindered access for relief actors to support the COVID-19 response.
- The Government of Pakistan (GoP) continues to facilitate the movement of commercial traffic into Afghanistan through the Spin Boldak and Torkham border crossings, which have remained open for commercial purposes six days each week since May 16; the GoP had initially closed the border crossings in March in an attempt to prevent the spread of COVID-19. As of May 31, there were no restrictions on the number of trucks allowed to pass through the border crossings per day. However, relief actors continue to emphasize the need to maintain a reliable flow of traffic for humanitarian cargo and advocate for special consideration to expedite the passage of food and relief commodities through the border crossings.
- In response to the suspension of commercial flights to Afghanistan, the UN Humanitarian Air Service (UNHAS) recently arranged an international air bridge for humanitarian personnel and relief commodities. UNHAS received an initial \$3.7 million in funding from the Afghanistan Humanitarian Fund and secured approval to launch an international service between Kabul and Doha, Qatar. UNHAS was operating three flights per week as of May 17.
- To respond to the new challenges posed by the COVID-19 outbreak, USAID humanitarian partners in Afghanistan are adapting health and water, sanitation, and hygiene (WASH) programming to also address the COVID-19 outbreak, through activities such as conducting awareness campaigns, distributing informational materials and WASH supplies, and promoting COVID-19 prevention measures during ongoing relief activities. For example, despite movement constraints, a USAID NGO partner’s mobile health teams conducted nearly 3,400 outpatient consultations, more than 550 community health awareness sessions, and trainings for nearly 80 community health workers in March. In April, a second USAID NGO partner continued COVID-19 prevention and hygiene promotion activities for internally displaced persons (IDPs) in western Afghanistan, conducting more than 5,800 household visits to raise awareness of the disease in six IDP settlements and distributing more than 11,600 bars of soap in the IDP sites during the month.
- USAID partners are also adjusting existing multi-sector programming to mitigate COVID-19 risks. USAID partner the UN World Food Program (WFP) is reorganizing food assistance distributions to incorporate physical distancing

guidelines, constructing hand washing stations near cash and food distribution points, and distributing hygiene promotion materials in local languages. In March, a second USAID partner began implementing measures to reduce close contact with beneficiaries during nutrition activities, including distributing double rations of ready-to-use therapeutic and supplementary foods for children ages five years and younger experiencing acute malnutrition, enhancing hand washing procedures, using protective equipment, instituting systematic health screening and triage procedures, and adapting information materials to focus on hygiene promotion and the prevention of coronavirus transmission.

- With State/PRM funding, the International Organization for Migration (IOM) is supporting national preparedness and response efforts to mitigate the spread of COVID-19 in Afghanistan. Since the beginning of the COVID-19 outbreak in February, IOM has provided critical medical supplies to frontline health workers and supported risk communication and community engagement activities in 25 of the country's 34 provinces. The UN agency has also deployed mobile health teams to refer and transport suspected COVID-19 patients to isolation facilities, where they can receive lifesaving support.
- In response to the COVID-19 outbreak in Afghanistan, USAID has provided nearly \$5 million to prevent, mitigate, and respond to the spread of the disease in vulnerable communities in 16 provinces across the country with limited access to basic health services. USAID partners are supporting health facilities to accommodate the needs of COVID-19 patients, engaging community leaders to address rumors and misinformation concerning the disease, and training local health workers in infection prevention and control measures. USAID is also supporting partners to expand local access to WASH services, as well as provide cash assistance to help low-income households in affected communities meet their basic needs.

NATURAL HAZARDS

- Natural disasters adversely affected more than 41,500 people across Afghanistan from January 1 to June 7, the UN reports. As of May 17, USG partner IOM reported that natural disasters had resulted in the deaths of 41 people and damaged or destroyed approximately 5,500 houses. Seasonal flooding in April and May due to heavy rainfall and melting winter snowpack has resulted in significant displacement and humanitarian needs; for example, from May 4 to 10, more than 900 people were affected by severe flooding in Baghlan, Badakhshan, and Takhar provinces, according to the UN Office for the Coordination of Humanitarian Affairs (OCHA). As of May 12, IOM had provided humanitarian assistance—including cash assistance, hygiene kits, shelter materials, and other relief commodities—to nearly 22,000 people affected by seasonal flooding in 2020. The UN agency had also conducted nearly 300 joint assessments in affected areas in coordination with the GoA National Disaster Management Authority, NGOs, and other UN organizations.
- A USAID partner is continuing to implement recovery activities for drought-affected households in western Afghanistan. In Herat Province, the partner conducted technical assessments of water sources in 15 villages, organized hygiene promotion activities for seven villages, and provided food assistance to nearly 3,000 beneficiaries in March. During the same month, the partner also conducted agricultural capacity-building trainings for smallholder farmers in 18 villages in Ghor Province.

CONFLICT, DISPLACEMENT, AND RETURNS

- Armed conflict and insecurity continue to generate protection concerns and exacerbate humanitarian needs in Afghanistan. At least 1,293 civilians—of whom nearly one-third were children—were killed or injured as a result of conflict between Afghan National Security Forces (ANSF) and non-state armed groups (NSAGs) between January 1 and March 31, UNAMA reports. The total includes 533 people killed and 760 people injured. While the January-March casualty figures represent a nearly 30 percent decrease compared to the first quarter of 2019 and the lowest first-quarter civilian casualty total since 2012, preliminary figures indicated a trend of increasing civilian casualties in April, the UN reports.

- Between January 1 and June 7, conflict displaced nearly 84,800 people in Afghanistan, OCHA reports. Recent fighting between ANSF and NSAGs has continued to generate new displacement, including approximately 1,400 people in Badghis Province on May 14 and more than 6,000 people in Logar and Paktiya provinces from May 4 to 10, according to OCHA.
- Insecurity remains a critical challenge facing relief organizations operating in Afghanistan. On May 12, unknown armed actors attacked the maternity ward in Kabul's Sad Bistar Hospital, resulting in the deaths of at least 24 civilians, international media report. The 100-bed hospital is supported by several international NGOs. The UN Security Council released a press statement on May 13 condemning the attack and reiterating UN Secretary-General António Guterres's call for a global ceasefire to support the international effort to contain the spread of COVID-19.
- More than 4,680 undocumented Afghans returned from Iran between May 24 and May 30, according to IOM. In response, the UN agency provided post-arrival humanitarian assistance to more than 1,850 Afghans—approximately 40 percent of the returnees—at IOM transit centers in Herat and Nimroz provinces. From January 1 to May 30, more than 300,000 undocumented Afghans had returned from Iran and Pakistan, according to IOM; in addition, nearly 350 registered Afghan refugees had returned to Afghanistan from other countries in 2020 as of June 6, according to the Office of the UN High Commissioner for Refugees (UNHCR). Many returnees cited the COVID-19 outbreaks and loss of employment in Iran and Pakistan as factors driving their returns, UNHCR reports.
- With State/PRM funding, UNHCR continues emergency response for IDPs, returnees, host communities, and refugees in Afghanistan. As of May, UNHCR is increasing emergency assistance in response to COVID-19, prioritizing the provision of hygiene kits, medical equipment, and tents to hospitals, local authorities, and relief organizations; working to expand WASH facilities; conducting awareness raising campaigns; and providing cash assistance and hygiene kits to vulnerable households.

FOOD INSECURITY AND NUTRITION

- The number of people experiencing Emergency—IPC 4—levels of acute food insecurity in Afghanistan is projected to increase from nearly 3.3 million to nearly 4 million during the June–November 2020 timeframe, according to an April IPC analysis.⁴ The analysis attributes the increase to the effects of the COVID-19 pandemic—including increased food prices, movement restrictions, and a reduction in remittances from abroad—and ongoing conflict. Furthermore, the analysis projects that residents of urban areas will face increased challenges in meeting minimum food needs during this period due to insufficient food reserves, heavy reliance on inaccessible markets to purchase food commodities, and a lack of employment opportunities.
- COVID-19 mitigation measures have disrupted food access since March, resulting in higher prices for essential food commodities, including cooking oil, pulses, rice, and wheat flour, according to WFP. The price of wheat flour—a staple food in low-income households—had increased by as much as 20 percent countrywide between mid-March and mid-May. In addition, protocols enacted to limit coronavirus transmission are restricting access to income-earning activities and markets, further reducing household purchasing power. In response, low-income households are increasingly purchasing food and agricultural inputs, such as fertilizer, seeds, and tools, on credit, WFP reports. Casual labor opportunities have also declined, and the purchasing power of individuals employed in casual labor has deteriorated in recent months as the number of working days per week for daily laborers decreased, according to WFP.
- WFP continues to meet the needs of food-insecure communities in Afghanistan, despite COVID-19-related lockdowns and movement restrictions. In April, WFP reached approximately 1.3 million Afghans with nearly 12,400 metric tons (MT) of in-kind food assistance and over \$485,000 in cash transfers for food in 30 provinces. WFP also distributed seasonal support through the winter months to more than 871,000 highly vulnerable people in 19 provinces and assisted nearly 24,000 people displaced by conflict.
- USAID partners are continuing efforts to prevent and treat acute malnutrition among vulnerable groups in Afghanistan. From January to March, USAID partner the UN Children's Fund (UNICEF) tested more than 45,000 children ages

⁴ The Integrated Food Security Phase Classification (IPC) is a standardized tool that aims to classify the severity and magnitude of acute food insecurity. The IPC scale, which is comparable across countries, ranges from Minimal—IPC 1—to Famine—IPC 5.

6–59 months. A USAID NGO partner also provided nutrition assistance to more than 900 children and nearly 460 pregnant and lactating women during the same period. In April, another USAID NGO partner provided nutrition treatment to nearly 160 children ages 6–59 months experiencing moderate acute malnutrition.

CONTEXT

- Ongoing conflict and frequent natural disasters continue to displace populations and generate humanitarian needs throughout Afghanistan. The UN estimates that conflict has displaced an estimated 1.5 million people since 2017, while natural disasters, such as avalanches and floods, affect approximately 250,000 Afghans each year.
- USAID/BHA supports a three-pronged approach to improve humanitarian response efforts in Afghanistan: address the emergency needs of individuals affected by conflict, drought, and natural disasters; strengthen and integrate national-level disaster risk reduction capacity building efforts; and enhance humanitarian coordination, data collection, and analysis.
- USAID/BHA's food assistance and disaster readiness programs are designed to respond to the food security and nutritional needs of IDPs and returnees, as well as people affected by economic stress; to support the recovery of communities affected by shocks; and to prevent and treat moderate and severe acute malnutrition among children and pregnant and lactating women.
- State/PRM supports the sustainable voluntary return of Afghan refugees while preserving asylum space in host countries through humanitarian diplomacy and assistance, as well as initiatives that ensure that areas hosting returning refugees can support all members of the community.
- On September 27, 2019, Chargé d'Affaires, a.i., Karen Decker re-declared a disaster for FY 2020 for Afghanistan due to the ongoing complex emergency.
- USAID is supporting humanitarian partners to adapt and increase programming, particularly in the health, protection, and WASH sectors, to mitigate the risk of COVID-19 and respond to the outbreak in Afghanistan, especially for IDPs and other crisis-affected populations.

USG HUMANITARIAN FUNDING FOR THE AFGHANISTAN RESPONSE IN FY 2020¹

IMPLEMENTING PARTNER	ACTIVITY	LOCATION	AMOUNT
FUNDING IN AFGHANISTAN FOR THE COMPLEX EMERGENCY RESPONSE			
USAID/BHA			
NON-FOOD ASSISTANCE			
Implementing Partners (IPs)	Agriculture and Food Security, Economic Recovery and Market Systems, Health, Humanitarian Coordination and Information Management, Multipurpose Cash Assistance, Natural and Technological Risks, Nutrition, Protection, WASH	Badghis, Balkh, Farah, Ghazni, Helmand, Herat, Kabul, Kandahar, Kunar, Laghman, Logar, Nangarhar, Nuristan, Paktiya, Zabul	\$23,113,386
International Federation of Red Cross and Red Crescent Societies (IFRC)	Multipurpose Cash Assistance, Risk Management Policy and Practice, Shelter and Settlements	Balkh, Herat, Kandahar, Sar-E Pul, Zabul	\$750,000
IOM	Humanitarian Coordination and Information Management, Risk Management Policy and Practice, Shelter and Settlements	Countrywide	\$9,590,000
FAO	Agriculture and Food Security, Economic Recovery and Market Systems,	Badakhshan, Laghman, Nuristan	\$2,000,000
	HCIM	Countrywide	\$550,000
OCHA	HCIM	Countrywide	\$700,000
		Program Support	\$23,966

TOTAL USAID/BHA NON-FOOD ASSISTANCE FUNDING FOR THE AFGHANISTAN COMPLEX EMERGENCY			\$36,727,352
FOOD ASSISTANCE²			
UNICEF	Local, Regional, and International Procurement	Countrywide	\$1,367,632
	U.S. In-Kind Food Aid	Countrywide	\$4,132,368
WFP	Cash Transfers for Food	Countrywide	\$3,300,000
	Local, Regional, and International Procurement	Countrywide	\$30,700,000
	Complementary Services	Countrywide	\$10,000,000
TOTAL USAID/BHA FOOD ASSISTANCE FUNDING FOR THE AFGHANISTAN COMPLEX EMERGENCY			\$49,500,000
TOTAL USAID/BHA FUNDING FOR THE AFGHANISTAN COMPLEX EMERGENCY			\$86,227,352
STATE/PRM			
UNHCR	Multi-Sector Assistance	Countrywide	\$4,600,000
UNHCR	Multi-Sector Assistance	Pakistan	\$4,000,000
UNHCR	Multi-Sector Assistance	Regional	\$3,900,000
TOTAL STATE/PRM FUNDING FOR THE AFGHANISTAN COMPLEX EMERGENCY			\$12,500,000
TOTAL USG HUMANITARIAN FUNDING FOR THE AFGHANISTAN COMPLEX EMERGENCY IN FY 2020			\$98,727,352
FUNDING IN AFGHANISTAN FOR THE COVID-19 RESPONSE			
USAID/BHA			
NON-FOOD ASSISTANCE			
IPs	Health, Multipurpose Cash Assistance, Protection, WASH	Badghis, Farah, Ghor, Helmand, Herat, Kabul, Kapisa, Khost, Kunar, Laghman, Logar, Nangarhar, Nimroz, Nuristan, Paktiya	\$4,900,000
TOTAL USAID/BHA NON- FOOD ASSISTANCE FUNDING FOR THE AFGHANISTAN COVID-19 RESPONSE			\$4,900,000
TOTAL USAID/BHA FUNDING FOR THE AFGHANISTAN COVID-19 RESPONSE			\$4,900,000
STATE/PRM			
IOM	Humanitarian Assistance - COVID-19 Preparedness and Response	Countrywide	\$700,000
UNHCR	Humanitarian Assistance - COVID-19 Preparedness and Response	Countrywide	\$2,355,000
TOTAL STATE/PRM FUNDING FOR THE AFGHANISTAN COVID-19 RESPONSE			\$3,055,000
TOTAL USG HUMANITARIAN FUNDING FOR COVID-19 OUTBREAK PREPAREDNESS AND RESPONSE IN AFGHANISTAN IN FY 2020			\$7,955,000
TOTAL USAID/BHA FUNDING FOR AFGHANISTAN IN FY 2020			\$91,127,352
TOTAL STATE/PRM FUNDING FOR AFGHANISTAN IN FY 2020			\$15,555,000
TOTAL USG HUMANITARIAN FUNDING FOR AFGHANISTAN IN FY 2020³			\$106,682,352

¹ Year of funding indicates the date of commitment or obligation, not appropriation, of funds as of June 12, 2020.

² Estimated value of food assistance and transportation costs at time of procurement; subject to change.

³ Figures represent International Disaster Assistance (IDA) and Migration and Refugee Assistance (MRA) funding committed for the COVID-19 response under the Supplemental Funding to Prevent, Prepare for, and Respond to COVID-19 Abroad as of June 12, 2020.

PUBLIC DONATION INFORMATION

- The most effective way people can assist relief efforts is by making cash contributions to humanitarian organizations that are conducting relief operations. A list of humanitarian organizations that are accepting cash donations for disaster responses around the world can be found at www.interaction.org.
- USAID encourages cash donations because they allow aid professionals to procure the exact items needed (often in the affected region); reduce the burden on scarce resources (such as transportation routes, staff time, and warehouse space); can be transferred very quickly and without transportation costs; support the economy of the disaster-stricken region; and ensure culturally, dietarily, and environmentally appropriate assistance.
- More information can be found at:
 - USAID Center for International Disaster Information: www.cidi.org.
 - Information on relief activities of the humanitarian community can be found at www.reliefweb.int.