Afghanistan – Complex Emergency
September 30, 2020

SITUATION AT A GLANCE

<table>
<thead>
<tr>
<th>14 MILLION</th>
<th>10.3 MILLION</th>
<th>247,246</th>
<th>110,567</th>
<th>549,769</th>
</tr>
</thead>
<tbody>
<tr>
<td>People in Afghanistan Requiring Humanitarian Assistance in 2020</td>
<td>People Projected to Experience Severe Acute Food Insecurity</td>
<td>People Displaced by Conflict During 2020</td>
<td>People Affected by Natural Disasters During 2020</td>
<td>Total Undocumented Returnees to Afghanistan in 2020</td>
</tr>
</tbody>
</table>

- COVID-19 has further limited humanitarian access to the country’s remote areas and exacerbated protection concerns among vulnerable populations.
- Fighting in Kunduz in late August and early September displaced more than 75,000 people.
- Heavy rainfall across central and eastern Afghanistan in late August resulted in flash flooding and landslides that adversely affected approximately 16,600 people.

TOTAL U.S. GOVERNMENT HUMANITARIAN FUNDING
For the Afghanistan Response in FY 2020

| USAID/BHA 2,3 | $177,557,001 |
| State/PRM 4 | $99,438,966 |
| **Total** | **$276,995,967** |

For complete funding breakdown with partners, see detailed chart on page 6

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1 Projected levels of food insecurity during the June-November timeframe. Separately, the Famine Early Warning Systems Network (FEWS NET) projects that between 2.5 and 5 million people will experience acute food insecurity in November 2020.
2 USAID’s Bureau for Humanitarian Assistance (USAID/BHA)
3 Total USAID/BHA funding includes non-food humanitarian assistance from the former Office of U.S. Foreign Disaster Assistance and emergency food assistance from the former Office of Food for Peace.
4 U.S. Department of State’s Bureau of Population, Refugees, and Migration (State/PRM)
5 This total includes $33,229,130 in supplemental funding through USAID/BHA and State/PRM for COVID-19 preparedness and response activities.
KEY DEVELOPMENTS

Uneven Enforcement and Lifting of COVID-19 Containment Measures as Transmission Risks Increase

In early June, the Government of Afghanistan (GoA) announced a three-month extension of the nationwide lockdown to curb the spread of coronavirus disease (COVID-19) throughout the country. However, province-level guidelines and measures continued to vary and were frequently not enforced by authorities in the ensuing months. Complacency and poor adherence to COVID-19 prevention measures increased risk of transmission in Afghanistan between June and September, according to the UN Office for the Coordination of Humanitarian Affairs (OCHA). On September 28, the GoA announced plans to reopen schools countrywide for the first time since late March, prompting concern among relief organizations that reopenings could worsen coronavirus transmission. As of September 30, the GoA Ministry of Public Health had recorded nearly 39,300 confirmed cases of COVID-19 and 1,458 related deaths in Afghanistan. The actual number of COVID-19 cases is likely higher than recorded due to limited public health resources and testing capacity, underrepresentation of women in testing, and challenges accessing health care facilities in some areas.

COVID-19 Exacerbates Humanitarian Needs and Protection Concerns

The COVID-19 pandemic has generated additional humanitarian needs among communities in areas of the country considered difficult for relief agencies to reach due to remoteness and poor infrastructure, ongoing armed clashes, or the presence of armed groups. According to a July assessment by relief agencies of 120 hard-to-reach districts, 95 percent of key sources interviewed reported negative economic effects of the pandemic in their communities, including reduced access to food and increased debt. While more than 90 percent of surveyed communities reported residents exhibiting suspected COVID-19 symptoms, nearly 30 percent reported lack of access to a health facility and 16 percent reported insufficient access to water, complicating prevention and response efforts.

The pandemic has also exacerbated protection concerns for vulnerable populations across Afghanistan—including women, children, and internally displaced persons (IDPs), according to OCHA. Women and girls across Afghanistan have reported an increase in domestic violence in recent months. Prior to the pandemic, women and girls were already at high risk of experiencing violence due to breakdown of social structures, entrenchment of harmful gender norms, and a lack of law enforcement and livelihood opportunities in the country.

Ongoing Conflict Drives Displacement, Complicates Humanitarian and COVID-19 Responses

From July to September, fighting between Afghan National Security Forces and non-state armed groups across Afghanistan continued to generate significant displacement, limit humanitarian access, and lead to the closure of health facilities, further constraining COVID-19 response efforts. In northeastern Afghanistan’s Kunduz Province, fighting in late August and early September had displaced more than 75,100 people, killed 11 civilians, and wounded more than 30 others as of September 6, OCHA reports. As of late August, relief actors estimated nearly 28,300 newly displaced individuals required immediate life-saving assistance, primarily food, shelter, and water, sanitation, and hygiene (WASH) support. Additionally, fighting in Kandahar and Zabul provinces from September 7 to 13 displaced approximately 3,500 people and led to the closure of four health facilities in the provinces, depriving nearly 90,000 people of access to health services. Humanitarian actors are working with the GoA to conduct assessments and provide assistance, OCHA reports. With nearly 3,500 civilian casualties—including 1,282 deaths and 2,176 people injured—documented by the UN Assistance Mission in
Afghanistan (UNAMA) between January and June, the conflict in Afghanistan remains one of the world’s deadliest for civilians.

Flooding Generates Humanitarian Needs in Central and Eastern Afghanistan

Heavy rainfall and subsequent flash flooding and landslides in late August resulted in at least 177 deaths, injured more than 200 people, and generated humanitarian needs among approximately 16,600 people across central and eastern Afghanistan, according to USG partner the International Organization for Migration (IOM). Compliance with COVID-19 preventative measures is not possible for the majority of flood-displaced families, increasing the risk of spread, OCHA reports. Additionally, the flooding caused widespread damage to agricultural land, household property, and public infrastructure, including electricity networks and water supply and treatment systems. The Afghanistan National Disaster Management Authority (ANDMA), in coordination with UN and non-governmental organization (NGO) representatives, identified food, relief commodities, shelter, and WASH assistance as priority needs, in addition to long-term shelter rehabilitation efforts. As of September 8, ANDMA had distributed cash and food assistance to affected households in Kabul, Kapisa, Logar, and Wardak provinces. Humanitarian actors, including USAID partners, also distributed food assistance, shelter and WASH materials, and other relief commodities.

Food Security Concerns Remain Despite Harvest and Border Openings

Eased border restrictions, the increase d opening of local markets, and seasonal post-harvest food availability have contributed to a slight drop in the price of staple foods—including cooking oil, pulses, rice, and wheat flour—and a downward trend in food insecurity nationwide since May. However, as of September 30, staple food prices remained elevated compared to pre-pandemic levels in mid-March, USAID partner the UN World Food Program (WFP) reports. According to a May Integrated Food Security Phase Classification (IPC) analysis, nearly 10.3 million people, or 34 percent of Afghanistan’s population, are estimated to experience Crisis—IPC 3—and Emergency—IPC 4—levels of acute food insecurity during the June–November timeframe. Separately, FEWS NET reports that between 2.5 and 5 million people are estimated to experience Crisis-level outcomes or worse in November 2020.

On August 21, the Government of Pakistan (GoP) eased restrictions on the Chaman–Spin Boldak border crossing into Kandahar Province, opening the border seven days a week to commercial cargo and pedestrians and alleviating a backlog of commercial and humanitarian cargo trucks waiting to cross into Afghanistan. The GoP had restricted use of the crossing—which is critical to the transport of international humanitarian assistance and commercial goods into Afghanistan—in response to the COVID-19 pandemic. Clearance and customs delays at the port in Pakistan’s Karachi city, requirements for tracking devices in all trucks departing the port, and disinfection requirements at the border also delayed importation of critical humanitarian supplies for nearly five months; all shipments from Karachi port were in transit towards Afghanistan as of September 30, WFP reports. However, relief agencies remain concerned over potentially increased levels of food insecurity nationwide in the coming months due to recent supply chain interruptions at border crossing points with Pakistan, continued market access difficulties, elevated market prices for staple foods, and the coming winter season.

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6 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.
U.S. GOVERNMENT RESPONSE

COVID-19 PREPAREDNESS AND RESPONSE
The USG is supporting three UN agencies—including the Office of the UN High Commissioner for Refugees (UNHCR) and WFP—and five NGO partners to prevent, mitigate, and respond to the spread of COVID-19. USG partners are conducting COVID-19 awareness campaigns, training community health workers on infection prevention and control measures, and expanding delivery of WASH services. USG partner-supported mobile health teams are also conducting outpatient consultations and referring and transporting suspected COVID-19 cases to isolation and treatment facilities, as well as advising treatment facilities on proper COVID-19 protocol. UN partners have provided hygiene kits and medical equipment to frontline health workers, deployed mobile health teams, and supported risk communication and community engagement activities in 25 of Afghanistan’s 34 provinces. In response to secondary effects of the pandemic—such as increased food insecurity and protection risks—USG partners are delivering multipurpose cash assistance, increasing provision of protection services to affected populations, and supporting efforts to increase livelihoods opportunities for returning refugees.

FOOD SECURITY AND NUTRITION
With more than $103 million in FY 2020 funding to UNICEF, WFP, and three NGO partners, USAID/BHA supports the delivery of life-saving emergency food assistance across Afghanistan, providing vulnerable populations with U.S. and locally, regionally, and internationally procured in-kind food assistance; cash transfers for food; and food vouchers. In response to the COVID-19 pandemic, WFP has also expanded food assistance to support populations who have experienced reduced access to income-generating activities and staple foods in urban communities. Additionally, USAID/BHA partner the UN Food and Agricultural Organization (FAO) provides households with seeds and livestock feed to bolster agricultural livelihoods recovery and resilience. USAID/BHA also supports coordination and capacity-building activities among food security actors in Afghanistan to strengthen response efforts.

HEALTH
Through FY 2020 funding, the USG supports seven partners to implement life-saving health activities across nearly 30 provinces to improve community health awareness, bolster outpatient consultation efforts, and provide support to essential health services. USG partners aim to increase equitable access to and utilization of health services among IDPs, conflict-affected, and vulnerable host communities by supporting hospitals and clinics and deploying mobile health teams to deliver emergency and primary health care services, as well as conducting trainings for local community health workers and health care professionals, providing essential medicines, and supporting vaccination campaigns.
SHELTER AND SETTLEMENTS

Shelter needs among populations in Afghanistan remain significant due to ongoing conflict and natural disasters such as floods and landslides, resulting in displacement and damage or destruction of houses. USG partners provide emergency shelter for newly displaced people, as well as shelter repair kits, transitional shelter, and multipurpose cash assistance to support the housing needs of IDP and host community populations. Partners also conduct trainings to improve preparedness for natural hazards.

PROTECTION

Armed conflict and insecurity continue to generate serious protection concerns in Afghanistan. Protection risks have worsened during the COVID-19 pandemic, with humanitarian agencies recording increases in child labor, gender-based violence (GBV)—including early and forced marriage—and sexual exploitation and abuse. With support from State/PRM, UNHCR provides protection assistance to refugees and refugee returnees, IDPs, and other vulnerable populations in Afghanistan. Additionally, USG NGO and UN partners support mental health and psychosocial support (MHPSS) programs, including individual counseling, activities to support development of coping skills, and safe healing and learning spaces for children. USG partners also implement child protection activities and services for GBV survivors; provide legal assistance to access documentation for returning refugees; and integrate MHPSS and other protection measures into education, health, and nutrition programming.

LIVELIHOODS AND EDUCATION

State/PRM partners support returning refugees, IDPs, and host communities in Afghanistan by providing access to education, skills training, and adult literacy courses. Five USG partners deliver livelihoods programming and skills training to support sustainable refugee reintegration and boost opportunities for vulnerable host community populations; activities include delivery of courses to increase literacy, business knowledge, and skills development. Partners work to ensure IDP and returning refugee children have access to learning spaces and accelerated learning programs to help children prepare for enrollment in formal schools, as well as support initiatives to improve infrastructure in schools within host communities.
CONTEXT IN BRIEF

- 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 and natural disasters; enhance humanitarian coordination, data collection, and analysis; and strengthen and integrate national-level disaster risk reduction capacity.

- 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.

- The USG 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, returned refugees, and other crisis-affected populations.

USG HUMANITARIAN FUNDING FOR THE AFGHANISTAN RESPONSE IN FY 2020

<table>
<thead>
<tr>
<th>IMPLEMENTING PARTNER</th>
<th>ACTIVITY</th>
<th>LOCATION</th>
<th>AMOUNT</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>FUNDING IN AFGHANISTAN FOR THE COMPLEX EMERGENCY RESPONSE</strong></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>USAID/BHA</td>
<td></td>
<td></td>
<td></td>
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<tr>
<td><strong>NON-FOOD ASSISTANCE</strong></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>International Federation of Red Cross and Red Crescent Societies (IFRC)</td>
<td>Multipurpose Cash Assistance, Risk Management Policy and Practice, Shelter and Settlements</td>
<td>Balkh, Herat, Kandahar, Sar-e Pul, Zabul</td>
<td>$750,000</td>
</tr>
<tr>
<td>Organization</td>
<td>Programs/Activities</td>
<td>Location</td>
<td>Funding</td>
</tr>
<tr>
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</tr>
<tr>
<td>IOM</td>
<td>Humanitarian Coordination and Information Management, Risk Management Policy and Practice, Shelter and Settlements</td>
<td>Countrywide</td>
<td>$12,365,000</td>
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<tr>
<td>FAO</td>
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<td></td>
<td>HCIM</td>
<td>Countrywide</td>
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<tr>
<td>OCHA</td>
<td>HCIM</td>
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<td>WFP</td>
<td>Logistics Support</td>
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<td>Program Support</td>
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**FOOD ASSISTANCE**

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<th>Organizations</th>
<th>Programs/Activities</th>
<th>Location</th>
<th>Funding</th>
</tr>
</thead>
<tbody>
<tr>
<td>IP</td>
<td>Cash Transfers for Food, Complementary Services, Food Vouchers</td>
<td>Badakhshan, Badghis, Bamiyan, Daykundi, Faryab, Ghur, Jowzjan, Sar-e Pul, Uruzgan</td>
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<td>UNICEF</td>
<td>Complementary Services</td>
<td>Countrywide</td>
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<td>Local, Regional, and International Procurement</td>
<td>Countrywide</td>
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<td>Program Support</td>
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**STATE/PRM**

<table>
<thead>
<tr>
<th>Organizations</th>
<th>Programs/Activities</th>
<th>Location</th>
<th>Funding</th>
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</thead>
<tbody>
<tr>
<td>IP</td>
<td>Livelihoods, Multi-Sector Assistance, Protection</td>
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<tr>
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<td>Multi-Sector Assistance</td>
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<td>UNHCR</td>
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<td>TOTAL USG HUMANITARIAN FUNDING FOR THE AFGHANISTAN COMPLEX EMERGENCY IN FY 2020</td>
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<td>$243,766,837</td>
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FUNDING IN AFGHANISTAN FOR THE COVID-19 RESPONSE

**USAID/BHA**

**NON-FOOD ASSISTANCE**
<table>
<thead>
<tr>
<th>IPspl</th>
<th>Health, Multipurpose Cash Assistance, Nutrition, Protection, WASH</th>
<th>Badghis, Balkh, Farah, Faryab, Ghor, Helmand, Herat, Kabul, Kapisa, Khost, Kunar, Laghman, Logar, Nangarhar, Nimroz, Nuristan, Paktika, Paktiya</th>
<th>$6,400,000</th>
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<tr>
<td><strong>TOTAL USAID/BHA NON-FOOD ASSISTANCE FUNDING FOR THE AFGHANISTAN COVID-19 RESPONSE</strong></td>
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<td>$6,400,000</td>
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<td><strong>FOOD ASSISTANCE</strong></td>
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<tr>
<td>WFP</td>
<td>Cash Transfers for Food</td>
<td>Herat, Kabul</td>
<td>$12,000,000</td>
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<tr>
<td><strong>TOTAL USAID/BHA FOOD ASSISTANCE FUNDING FOR THE AFGHANISTAN COVID-19 RESPONSE</strong></td>
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<td><strong>TOTAL USAID/BHA FUNDING FOR THE AFGHANISTAN COVID-19 RESPONSE</strong></td>
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<td>IPs</td>
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<td><strong>TOTAL STATE/PRM FUNDING FOR THE AFGHANISTAN COVID-19 RESPONSE</strong></td>
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<td>$14,829,130</td>
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</table>

**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 [interaction.org](http://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: [cidi.org](http://cidi.org)
  - Information on relief activities of the humanitarian community can be found at [reliefweb.int](http://reliefweb.int).

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1. Year of funding indicates the date of commitment or obligation, not appropriation, of funds. Funding figures reflect publicly announced funding as of September 30, 2020.
2. Estimated value of food assistance and transportation costs at time of procurement; subject to change.
3. Figures represent supplemental 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 September 30, 2020.