



2021 UN COUNTRY ANNUAL RESULTS REPORT

AFGHANISTAN



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March 2022

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Foreword

On 23 August 2021, a week after the Taliban takeover of Kabul, partial evacuation of UN's international staff from Afghanistan took place amidst chaotic scenes at the capital's international airport. The country was in a state of shock. People were in fear of their lives and for the future of their country. The gains made over the past 20 years seemed so precarious and at the point of being lost.

While operational and security imperatives necessitated the partial evacuation of UN's international personnel, over 120 dedicated professionals made a resolved decision responding the call of the Secretary-General to stay in the country to deliver the much-needed services and support to the people of Afghanistan in line with the UN's mandate. These efforts were strongly supported by tenacious Afghan national staff members. Our continued efforts in Afghanistan were further assisted by the generous offer of the Government of Kazakhstan to host the partially evacuated UN Country Team in Almaty, which allowed the core functions of the UN to stay in the country and enabled support operations managed from the region.

Post August 15 we also witnessed a halt in the delivery of direct on-budget aid, and international financial institutions also stopped their activities in Afghanistan. In this environment, and to respond to the growing needs, the UN prepared to scale up its operations. A sudden stop to funding flows for such an aid-dependent country – combined with the impacts of a severe drought and the COVID-19 pandemic – made an economic collapse and a humanitarian catastrophe all but inevitable. The country was ravaged by war, more Afghans had been forced to flee their homes in hundreds of thousands, and almost all Afghans suffered from food shortages.

To address the urgent humanitarian needs, the bulk of the UN Country Team returned to Afghanistan by mid-September. We expanded our operations with substantial support of donors who responded generously to the flash appeal issued by the UN during the pledging conference on 15th September. Together with national and international NGO partners, the UN delivered vital assistance to the most vulnerable people, reaching new locations that had not been accessed during two decades of armed conflict. Working tirelessly, we were able to deliver much needed results for the people of Afghanistan. Through this collective effort, the worst-case scenario in winter of 2021 was averted.

In this *UN Country Annual Results Report* for 2021, we choose to highlight the plights of the Afghan people, especially those of women, and how the UN and its partners were assisting them in finding the means to help themselves. Rather than listing statistics, this report focuses on conveying human stories. This choice partly reflects the fact that intensifying civil war and the subsequent power transition made it impossible to provide comprehensive and comparable data on the UN's delivery. But more importantly, I believe it is making changes at the individual level and restoring hope among those who have suffered for so long that will bring a lasting peace and prosperity to this country.

Needless to say, none of the activities of the UN Country Team would have been possible without the support of donor countries, international financial institutions and other funding partners. I would like to express my sincere appreciation of their commitments to Afghanistan.

Last, but not least, I would like to pay tribute to the Afghan national staff members of the UN family, who continued their work amidst heightened uncertainty and real risk to their own and their family's safety. My earnest hope – and determination – is that their dedication will be rewarded by the positive change the UN brings to their country in the coming years.

Ramiz Alakbarov

Secretary-General's Deputy Special Representative, United Nations Resident and Humanitarian Coordinator for Afghanistan

UN Country Team



A handicraft exhibition – organized by women in Kabul



FAO, ILO, IOM, OCHA, OHCHR, UNAMA, UNCTAD, UNDP, UNEP, UNESCO, UNFPA, UN-HABITAT, UNHCR, UNICEF, UNIDO, UNMAS, UNODC, UNOPS, UN WOMEN, WFP, WHO

Agencies under the One-UN Transitional Engagement Framework

Afghanistan was already facing a multitude of challenges before the Taliban takeover in August 2021

2021 turned out to be a tumultuous time and a turning point in the history of Afghanistan. At the start of the year, Afghanistan was already one of the poorest countries in the world with a GDP per capita of barely US\$500 and half of its population living in poverty. Even prior to the events of 15 August, the humanitarian situation in Afghanistan was already one of the worst in the world. By mid-year, some 18.4 million people were already in need of humanitarian and protection assistance, due to a combination of conflict, drought and COVID-19.

As NATO forces proceeded with a planned withdrawal from the country, fighting intensified, forcing over 740,000 more women, children and men to flee by the end of August, compounding an already large caseload of IDPs.¹ By the end of 2021, 5.8 million people were displaced inside Afghanistan, of which 4.4 million were due to conflict. A national drought – the second in four years and reportedly the worst in 27 years – was officially declared in June 2021. Meanwhile, COVID-19 continued to spread with the number of confirmed cases reaching over 153,000 by August. The number of confirmed cases is thought to be grossly underestimated due to limited testing capacity.

Economic activities were further stymied by a global increase in energy prices, adding to the country's economic hardship. As large swaths of Government-held territories fell to the Taliban, bank-runs started, draining liquidity from the country's banking system.

In an increasingly difficult environment, the United Nations continued to support the delivery essential services for the Afghan people

While the response to the humanitarian crisis was the priority, the UN Country Team continued to deliver development assistance focusing on the six key thematic areas, namely Normative; Education; Food Security, Nutrition and Livelihoods; Health; Return and Reintegration; and Rule of Law.

A cross-cutting issue for all thematic areas was the plight of Afghan women and girls. Peace and development can never be achieved without ensuring the rights of women and girls, and their full participation in the country's economy and society.

¹ Cumulative number of newly displaced population due to conflict compiled by OCHA, from January to August inclusive. <https://data.humdata.org/dataset/afghanistan-conflict-induced-displacements-in-2021>

In Afghanistan, women's participation in the labour force has been particularly low; estimated at only 22 per cent in 2019. Most women who work in Afghanistan do so in the informal sector, with nearly three quarters working in home-based craft industries. Women professionals and teachers have also been far fewer than their male counterparts. As a direct consequence, Afghan women and girls are more likely to miss out on these critical services.

While traditional norms have dissuaded Afghan women from working outside the home, for some families it is vital for their survival. However, women often struggle to earn a living as many of them lack adequate education, let alone vocational training. Access to credit is also more challenging for women. Various programmes of the UN are aimed at providing relevant support to create opportunities for Afghan women.

One such UN programme is the UNODC Alternative Development (AD) programme. In 2021, 547 farmers and entrepreneurs, of which 18 per cent were women, received agriculture inputs (e.g., seeds, fertilizer, etc) while 10,751 farmers (18 per cent women) received agriculture extension services.

Supporting families to overcome economic impact of opium addiction

Kobra lives in Zindajan District, Herat Province. When her husband, a drug addict but also the family's only breadwinner, left few years ago, Kobra had no option but to work as a cleaner in other people's homes to earn a living.

"I've lived a very hard life. My husband was an opium addict and left us. I was afraid that my children would also become addicts, like their father," she shared.

The Community Development Council (CDC) introduced Kobra to the UNODC AD programme. The programme established a 210 sqm greenhouse for Kobra and provided her with the necessary training and inputs such as seeds and fertilizer to manage the greenhouse.

"Initially, I was concerned whether the greenhouse cultivation would work well, as I didn't have the required knowledge and experience. It not only worked well, but also helped me to take my husband to a rehabilitation centre for treatment," Kobra said.

Kobra first started cultivating cucumbers, then eggplants and tomatoes. For the past two years, she has been cultivating aloe vera, which is more profitable than other crops. She sells aloe vera and earns AFN 12,000 (US\$156) per month.

"Both my sons go to school now. My husband is also helping me with the greenhouse. We are happy and thankful to the AD programme, which pulled us out of some very dark times. I now want to expand my business and help other women who have suffered like me due to drug addiction."

Women in the village now come to Kobra's farm to learn vegetable cultivation and greenhouse management. The AD interventions have provided gainful employment to youth and their households, keeping them away from opium addiction and migrating to work in southern provinces as labourers in opium fields. Many women, like Kobra, are relieved they don't have to lose their family members to opium addiction.

The UN and its partners have supported female participation in labour, not only through providing training, business “start-up” kits (often for agricultural production, e.g., vegetable cultivation, poultry farming, etc.), but also through business support to female-led enterprises.

Supporting Women-Owned Businesses in Afghanistan

Women in Afghanistan have far lower financial capacity and resources compared to men. They have little access to bank loans, as banks require financial guarantees that most women cannot provide. Few women-owned businesses in Afghanistan enjoy market support such as purchasing goods on credit.

The COVID-19 crisis has compounded the challenges women-owned businesses face by disrupting trade/business relations with major export markets. Radween Trading, a female-owned business in Kabul, exported raisins, pistachios, dry apricots and blackberries from Faryab, Kandahar, Badakhshan, and Badghis to Delhi and Mumbai, India. Amidst the COVID-19 pandemic, Anoosha Farhad, the company’s president, found herself unable to export products to India, as the country stopped imports from Afghanistan.

Unable to export, domestic sales were the only way to provide the much-needed lifeline to her business; however, she lacked support in linking her company’s products to local markets.

UNDP’s Community-Based Agriculture and Rural Development–Access to International Markets (CBARD-AIM) project was able to provide just such support. Radween Trading signed a memorandum of understanding (MoU) with the CBARD-AIM on 1 May 2021. The project’s field staff linked the company with Sohrab Sodais Farahi, a Farah-based fruit and vegetable trader. Soon after the signing the MoU, Radween Trading embarked on its first domestic sale of cucumbers, purchased 145.8 metric tonnes of cucumbers from the company worth an estimated \$20,577 and shipped them to local markets in Kabul and Ghazni provinces, enjoying a profit margin of 9 to 10 per cent in both markets.

The successful intervention allowed Radween Trading to expand its domestic sales in Kabul and Ghazni, while also stimulating demand in Farah for the province’s cucumber producers and traders. Anoosha was also introduced to the business skills development team in order to receive a personal computer to assist her in her trading initiatives. She now wants to diversify into selling new fruit and vegetable products, establishing broader linkages with local producers and traders. “It has been a great experience to add vegetables as a business product line because dry fruit is only available during specific seasons while in other seasons business is quite low,” she confirmed. “I’m now encouraged to develop and expand my business by adding other fresh fruit and vegetables to my products line, using the various support mechanisms provided by UNDP and CBARD-AIM”.

Source: [“Strengthening Women-Owned Businesses in Afghanistan: Female Traders Launch Domestic Sales”](#), UNDP Afghanistan, 25 July 2021.

In many areas of Afghanistan, access to safe drinking water is lacking, creating acute health risks. Only 28 per cent of the Afghan population have access to safely managed drinking water services. As a result, women and children often have no choice but to spend hours fetching water from distant wells, limiting their opportunities for economic participation and schooling. The UN and its partners have been working to expand the provision of basic services such as drinking water.

In 2021, the WHO, for example, supported the establishment of 17 borewells and 16 solar-powered systems for water supply across the country. UNICEF and its implementing partners reached 330,000 people to provide access to safe water.

Creating sustainable water systems in war-torn Afghanistan

During Afghanistan's civil war, Zarb Ali lost his leg. Now 60, he lives in Nahreshahi District, Balkh Province, a poor area with limited services, including access to safe drinking water. Unemployed, Ali was unable to afford to buy safe drinking water for his family. The closest well was 4 kilometres away. Given his disability, it was up to his wife and children to walk the 8-kilometre journey to fetch water in jerry cans instead. Because of the time spent in doing this, Ali's children could barely find time to study or play, often missing out on school altogether.

"My children were only able to go to school three days a week because they needed to bring clean water," says Ali. "In summer, we needed even more water, so they spent even more time bringing water home."

Like many children in Afghanistan, Ali's 11-year-old son Mustafa's right to a full, safe and healthy childhood was compromised.

"It was difficult for me to fetch water on the cold, rainy days," says Mustafa. "The jerry cans were heavy and walking 4 kilometres each way on muddy roads was quite frustrating."

Mustafa's family is not alone in their challenges; 33 per cent of people in Afghanistan do not have access to safe drinking water.

But thanks to funding from the Government of Finland and USAID, UNICEF Afghanistan, in collaboration with the Ministry of Rural Rehabilitation and Development, constructed a deep solar-powered well to provide safe drinking water to Ali's village.

"This water system changed our lives," beams Ali. "I no longer worry about my children and wife walking long distances to fetch water, or missing school, or becoming sick from contaminated water."

The clean water has also had an uplifting effect on everyone in the village, particularly the children.

"I'm so happy with these taps! Now, I have time to play with my friends and go to school every day and study," giggles Ali's son. "I want to become an engineer so that I can build good roads so that all children in Afghanistan can walk to school easily."

Source: "[Turning the tap: How sustainable water pipes and taps save lives and transform livelihoods in Afghanistan](#)", by Ajmal Sherzai, UNICEF Afghanistan, 19 May 2021.



The participation of Afghan women in the economy and communities are essential for the society to function. Afghan women are also vital partners and implementers of the UN's programmes in Afghanistan.

An Afghan midwife's commitment

"I enjoy my career. I see the positive results every day. My biggest happiness is when pregnant mothers tell me that they found my support useful."

As many other Afghan midwives, Mastura Zia, 27, has been working as a frontline responder to reproductive health support seekers in Herat city, Afghanistan. However, Mastura's work differs from those midwives who work at fixed healthcare centres. Mastura serves at the Gazargah Transit Centre to provide reproductive health support to Afghan deportees returning from Iran.

Gazargah Transit Centre is located in Herat city as a point of entry for Afghan deportees from the Islamic Republic of Iran to stay for a short period as part of their transition. Disadvantaged deportees receive reproductive health and psychosocial services through UNFPA's humanitarian emergency response programme at this centre.

In 2012, Mastura graduated from the Herat Midwifery Institute in 2012 before working with UNFPA-supported projects in 2018. "This is emergency response work and although I am usually overloaded with cases, I feel proud to see the results of my work at the end of the day", she noted. "I will never give up. I'm committed to serving and saving those women and girls who need my help."



Although many Afghan men do not allow their wives to work outside their homes due to traditional beliefs and culture, Mastura's husband supports her work.

"When I started working at the transit centre, I learned that it wasn't always the people who lived in hard-to-reach areas who needed reproductive health support. Sometime there are people from cities who are unable to access this support,

such as deportees who are the on the move."

Source: "[An Afghan midwife's commitment](#)", UNFPA Afghanistan, 6 May 2021.

Polio survivor making a difference in vaccination coverage in Herat

Parigul Mohamodi sits at her desk in the corner of a large room at the Gozara District Hospital in Herat waiting for mothers, fathers and children to come in for the daily session she holds on the importance of polio vaccinations.

As the softly spoken 36-year-old stands up, the atmosphere in the room changes. All attention is on her. Many of them had not noticed the crutches she had next to her desk. Parigul, a member of the UNICEF-supported female vaccinators team in Herat Province, was affected by polio at the age of eight months.

“I am here to show myself as an example of what could happen to your children if you don’t vaccinate them against polio,” she tells the parents. She had not been vaccinated and contracted polio which left her with a lifelong disability. For her, the fight against polio is a personal matter.

Even though she is a qualified midwife, she chose to work as a polio vaccinator to have more impact. She often talks to parents about her own challenges with her disability and what can happen if children are not vaccinated against this preventable disease.

“It was difficult for me to study and continue my education. It was difficult for me to hear all the things people said about me and my disability,” recalls Parigul. “Going to school was a real challenge. Home was far from my school. Imagine carrying a heavy schoolbag and walking in the hot or cold weather with crutches.” She speaks fondly about her nine-member family who continually encouraged her to continue with her studies.

Ten months ago, Parigul joined UNICEF’s Female Mobile Vaccinators team in Herat. At Gozara District Hospital she is already seeing the impact of her work. Vaccinations are already up by around 10 per cent, with over 140 children being vaccinated a day.

Across Afghanistan, female vaccinators are an essential part of UNICEF’s efforts to ensure children are protected from polio.

While Parigul is encouraged by the increase in vaccinated children, she still worries about the low levels of awareness amongst mothers. “Many of the women and mothers I talk to don’t have the opportunity to go to school and have many misconceptions about vaccines,” Parigul says. “Getting the correct information isn’t always easy for women due to



illiteracy and little access to media outlets. They don't always hear of the benefits of immunization unless we meet them in person.”

Source: [“Polio survivor making a difference in vaccination coverage in Herat”](#), UNICEF Afghanistan, 29 November 2021.

Despite significant gains over the past 20 years, public services in many parts of the country, especially in rural areas, remain limited. Afghanistan’s maternal mortality rate for instance was already one of the worst in the world even before the Taliban takeover. While resources are scarce, UN-supported programmes provide innovative means, including helplines, to make enhanced services available in hard-to-reach areas.

UNFPA’s Midwifery Helpline

One evening in August, Firoza, a 34-year-old mother-of-five, was rushed from her village of Chesht-Sherat in Herat Province to a UNFPA-supported Family Health House. She was in labour, but had developed complications and was in severe pain.

Family Health Houses help people in hard-to-reach areas to access otherwise scarce maternity services, supporting over 15,000 women in delivering their babies safely across Afghanistan in 2021. After being treated by staff at the health centre, Firoza was able to give birth safely. However, her midwife, Amina, noticed there was something different about this delivery – it was not over. Firoza had another baby on the way.

Family Health House guidelines advise midwives not to attempt to deliver twins alone, but Firoza’s precarious condition meant it would be too dangerous to transfer her to another facility. Nervous for the well-being of her patient, Amina quickly picked up the phone and called the Midwifery Helpline for support.

UNFPA’s Midwifery Helpline offers remote mentoring to midwives in Afghanistan, 24 hours a day, seven days a week. Launched in 2016, the toll-free number is staffed by two gynaecologists and two midwives who provide counselling, referrals and step-by-step instructions to lead health practitioners through complex, and at times life-threatening, procedures. The line receives over 30 calls a day, some 80 per cent of which are from midwives working at UNFPA’s 172 Family Health Houses across the country.



Amina was guided through the next birth by helpline staff, successfully delivering Firoza’s surprise second baby. But their joy was cut short when Firoza became unwell and started bleeding profusely.

The midwife called the helpline back, explaining Firoza’s critical condition and followed their advice on how to stop the bleeding. The new mother of twins recovered well, and was closely monitored by

Amina and the helpline team before being referred to a district hospital for further specialized treatment the next day.

“It was a difficult time for me, but I’m lucky that I was supported by the Family Health House. Now I’m feeling well, and my twins are healthy,” Firoza said when she visited the facility again a week later for postnatal care.

As more and more people turn to UNFPA-supported Family Health House services for urgent maternal and newborn care, staff themselves are also now in ever greater need of support. Despite colossal challenges, midwives across Afghanistan continue to work, risking their own lives to save those of vulnerable women and girls.

Source: "[Emergency help is a phone call away for midwives in Afghanistan](#)", UNFPA Afghanistan, 21 December 2021.

Aside from access to education and employment, an often-overlooked issue for Afghan women is their right to legal representation. As part of the UN programmes' focus on the rule of law, the UN programme supported a provider of legal aid services that enabled Afghan women prosecuted in the criminal justice system to have a defence lawyer to assist their cases.

Improving Access to Justice

20-year-old Susan was accused of murdering her husband. She was arrested by the police while she was seeking assistance. Her husband was killed by two unknown people in the Koshke Robot Sangi District of Herat Province. However, her In-laws claimed that their son was killed by Susan. She was unable to afford a private defence lawyer to represent her in court. Susan's father submitted a petition to the Herat legal aid unit for free legal aid services. However, due to lack of capacity and resources, the legal aid unit could not provide the support and referred her to the Voice of Women (VOW) office. VOW provides legal aid services at district level and remote areas through a legal aid small grants mechanism funded by UNDP's Access to Quality Justice Services (AQJS) project.

Susan explained her side of the story. "A month ago, my husband and I went to my parents' house for dinner. After dinner, my husband left for some urgent work, and never returned. I stayed with my parents for almost 20 days, and then had to call him back as my child got sick and he needed to go to the hospital. On the way to my parents' house, he was killed by two unknown people. While I was going through the trauma, and living the toughest moments of my life, my brother-in-law alleged that my parents and I carried out the murder, and the case against me was opened based on this allegation."

She further added; “when I was arrested by the police and kept in the detention centre, my family could not afford legal fees to defend me in court. I thought of selling my jewellery and part of my father’s land to secure a defence lawyer to represent me. Fortunately, I was advised by the Herat Directorate of Justice on how I could receive free legal assistance through VOW, and the organization assigned a defence lawyer to take my case on and prove my innocence.

“Without the assistance of the defence lawyer, it would have been impossible for me to prove my case,” said Susan. “Because of this support, I am now free and live with my children.”

Source: “[Improving Access to Justice: UNDP Supports Women in Remote Areas with Legal Aid Services](#)”, UNDP Afghanistan, 27 July 2021.



As fighting intensified in the summer of 2021, many providers of essential services, such as health centres, were unable to continue their operations. Some UN-supported health facilities, however, proved resilient in the face of adversity and continued to provide essential life-saving services to those in need.

Commitment to supporting childbirth amid Afghanistan’s deteriorating security situation

A mother-of-four from Zaradnay Village, Najaba, 36, visited the district hospital just before her due date on 17 August to check on the progress of her pregnancy. An ultrasound revealed that the fetus was in a transverse position, meaning it was lying horizontally rather than head-down, a dangerous complication.



The doctor told her she needed a Caesarean section, but Najaba was afraid of the operation. She left the hospital to give more thought to her situation.

“When the district hospital discharged me, I decided to give birth at home with help from my mother,” Najaba said.

But in the days that followed, growing insecurity resulted in many health facilities to close – including the district hospital. Najaba realized that if the delivery proved complicated, she would be unable to seek emergency assistance.

She called her mother in desperation. Her mother called many of the older women in their community for advice. Finally, Najaba recalled, “My relative called me and informed me about a small clinic.”

It was the nearby Ghuchan Family Health House, a UNFPA-supported facility where community midwives were still providing services to pregnant women.

Not long after, Najaba went into labour and was rushed to the family health house. When Najaba expressed anxiety about the delivery, the midwife comforted her and said she would try to deliver the baby without any surgical procedure.

Four hours later, a healthy baby was born naturally. The skilled midwife had been able to avoid a Caesarean section, and Najaba and the baby were both healthy enough to be discharged soon after. Najaba returned to the midwife for postnatal care and neonatal services for the baby.

The family health house, located in Shahristan District in Daikundi Province, provides life-saving reproductive, maternal, newborn and child health services. It is one of 172 family health houses in geographically remote villages where people have little access to health services.

With support from UNFPA and local communities, these facilities have been able to continue operating, or to reopen after a short closure, even amidst ongoing insecurity in the country.

Source: [“Commitment to supporting childbirth amid Afghanistan’s deteriorating security situation”](#), UNFPA Afghanistan, 27 October 2021.

After 15 August

The collapse of the Government in August and the subsequent sanctions compounded the humanitarian and economic crisis.

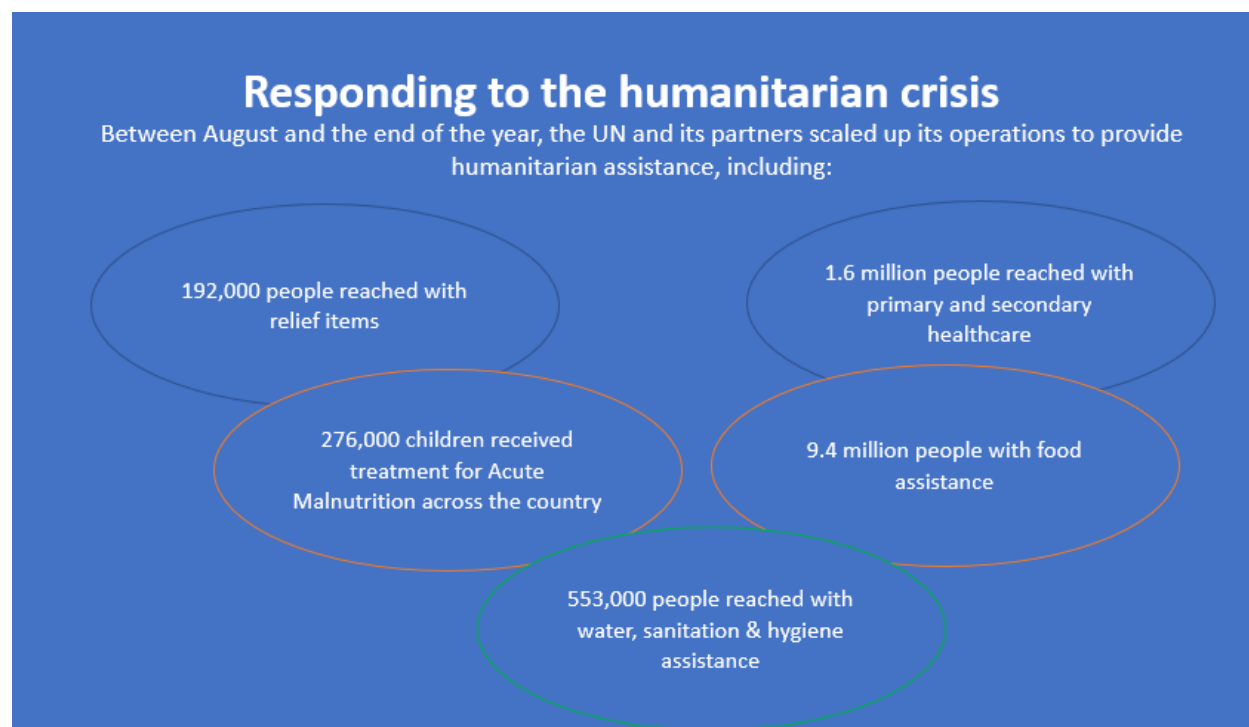
On 15 August 2021, the Government of Afghanistan collapsed. The Taliban entered the capital and subsequently extended their control over the remaining parts of the country. While major fighting was over and the security situation generally improved, economic conditions deteriorated, and the humanitarian crisis worsened. Moreover, social progress achieved over the past 20 years was curtailed, particularly with regard to the rights of women and free media.

Donor countries as well as international financial institutions halted international aid to Afghanistan. Aid had funded three quarters of public expenditures and provided the main source of foreign exchange, which had enabled the country to pay for imports worth as much as 40 per cent of the country's GDP. Moreover, the foreign reserves of the Afghan central bank (DAB) worth \$9.5 billion, mostly held outside the country, were frozen. To prevent bank-runs and stabilize the foreign exchange rate, DAB imposed strict limits on the withdrawal of the local currency and US dollars. The shortage of liquidity forced businesses to close and left more people unemployed and in poverty. DAB also restricted transfers and payments in foreign exchange to abroad. Overseas banks were reluctant to engage in transactions with Afghan entities to avoid the risk of inadvertently violating sanctions. Consequently, international trade, which Afghanistan had heavily depended on for supplies of essential items such as food and energy, was severely disrupted. GDP is estimated to have contracted by 30-40 per cent compared to the same period in 2020. By the end of 2021, almost 23 million people were facing acute food insecurity (i.e., hunger on a daily basis), while over one million children were at risk of dying from severe acute malnutrition. As the economy became further impoverished, people were even resorting to selling their kidneys on the black market to feed their families. Human trafficking for the purposes of child marriage, sexual exploitation and forced labour were also reportedly on the rise.

As the Taliban consolidated its control over the country, the security situation generally improved. However, reports of enforced disappearances, arbitrary arrests and restrictions on women and girls' fundamental rights began to emerge. Afghan journalists were increasingly harassed, and a number of media outlets ceased their operations. Additionally, sectarian attacks against religious institutions and worshippers threatened the right to exercise religious freedom.

The United Nations scaled up its operations to support the most vulnerable

Amidst the upheaval in the transition of power to the de facto authorities (DFA) led by the Taliban, the UN renewed its commitment to stay and deliver in support of the people of Afghanistan. The UN maintained – and even scaled up in some areas – its operations with thousands of staff, mostly Afghans, working on the ground. The UN continued to deliver unconditional aid to millions of Afghans based on needs, in line with the principles of humanity, neutrality, impartiality and independence.



The scale of food insecurity has risen significantly since August, with more than half the Afghan population facing crisis (IPC Phase 3) or emergency (IPC Phase 4) levels of food insecurity. In response, the UN scaled up its assistance. Since 1 September, a total of 275,584 children under five and 114,136 pregnant and lactating women have been admitted and treated for acute malnutrition. The number of children provided with treatment increased towards the end of the year. According to UNICEF's tracking data, the number of children treated for severe acute malnutrition increased from about 30,000 children in October to 54,000 children in November.

Among the UN family, UNICEF, for example, is doubling the number of nutrition counsellors and mobile health and nutrition teams so that children in the most remote areas can be tested and treated. UNICEF is also providing supplies and funding at 1,400 nutrition sites across the country, supporting more nurses and health workers to identify and treat children quickly. UNICEF plans to expand these services further in 2022.

Parwana's journey to recovery from severe acute malnutrition

Malika rolls up her 4-year-old daughter's sleeve revealing an alarmingly thin arm. Little Parwana came with her mother to the UNICEF-supported health facility in the nick of time. She has little energy, her skin is dry and wrinkled, and her cheeks are hollow. She weighs just 9 kg, while she should be twice that weight at her age and height.



As the nutrition counsellor wraps the mid-upper arm circumference (MUAC) measurement tape around Parwana's thin arm, she completes a simple measurement that allows health workers to quickly determine if a child is acutely malnourished. The diagnosis is confirmed: severe acute malnutrition.

Across Afghanistan, some 3.2 million children under the age of five are believed to suffer from acute malnutrition in 2022. Without urgent action, over 1 million children under the age of 5 are at risk of dying from severe acute malnutrition.

As soon as the nutrition counsellor diagnoses Parwana with severe acute malnutrition, her mother goes to the pharmacy to collect 28 sachets of Ready to Use Therapeutic Food (RUTF), a fortified peanut paste to help children recover from malnutrition. UNICEF, the sole provider of RUTF in Afghanistan, has been distributing hundreds of thousands lifesaving RUTF sachets all over the country.

Between August and November 2021, UNICEF helped treat an estimated 121,000 children under-five suffering from severe acute malnutrition.

Although children like Parwana are now receiving treatment, the situation is dire for millions at risk as families go hungry. After a dry winter, a weak harvest and drought, almost half of all Afghans do not have enough food to eat. Many more do not know where their next meal is coming from.

The impact of eating the nutritious peanut paste is almost immediate. Energized by her nourishing RUTF and feeling a little stronger, Parwana begins to interact with people around her. The nutrition counsellor advises Malika to return to the clinic with her daughter in seven days for more tests and more peanut paste. This cycle will continue until Parwana is healthy.

In addition to distributing the life-saving RUTF sachets, UNICEF is doubling the number of nutrition counsellors and mobile health and nutrition teams so that children in the most remote areas can be tested and treated. UNICEF is also providing supplies and funding at 1,400 nutrition sites across the country, where we will support more nurses and health workers to identify and treat children quickly. UNICEF plans to expand these services further in 2022.

Source: "[Parwana's journey to recovery from severe acute malnutrition](#)", UNICEF Afghanistan, 20 December 2021.

After a funding pause by the World Bank which put more than 2,000 health facilities at the risk of closing, the WHO and UNICEF began to jointly implement the *Sehatmandi* project in November 2021 to sustain the Afghan healthcare system. The project supported health facilities in 34 provinces to ensure the delivery of basic essential primary and secondary health care. Over 1.6 million people were reached with primary and secondary care. The UN and its humanitarian partners delivered 2,544 emergency medical kits to health facilities across 33 provinces to meet the urgent needs of 2,212,650 people over three months.

COVID-19 vaccination efforts continued throughout the year. By the end of 2021, the number of fully vaccinated Afghans reached over 4.4 million, while those partially vaccinated reached over 1.3 million.

In the area of education, too, the UN and its partners continued to provide assistance. Since 1 September:

- 4,957 new community-based classes were established across 12 provinces.
- 4,957 teachers were recruited to facilitate community-based classes across 11 provinces.
- 145,605 children were reached with Community-Based Education (CBE) activities across 12 provinces.

In the autumn of 2021, an estimated 4 million children were out of school, of which 60 per cent were girls. Schooling for girls is capped at primary level in most provinces. Most schools, higher education and technical education institutions are still not operational. Regular payments to teachers, 35 per cent of whom are women, remain disrupted.

Despite the challenges, the UN and its partners continued to support the safe and healthy return to schools for children in Afghanistan.

In Afghanistan, the Water Supply, Sanitation and Hygiene (WASH) situation in schools remains a major challenge, with over a third of schools without access to an improved water resource within school premises; half of all schools without sanitation facilities; and two thirds without hand-washing facilities. In early 2020, the need for WASH facilities has been exacerbated following the spread of COVID-19.

With funding from the Global Partnership for Education (GPE), UNICEF and partners provided 1,250 public schools in 10 provinces with handwashing stations, soap, and clean water, benefiting 625,000 students as part of the COVID-19 response. All 625,000 students and 20,000 teachers received teaching and learning materials needed to carry out their lessons with the aim to reduce the burden of school costs on households.

Improving the Water Supply, Sanitation and Hygiene (WASH) situation in schools

In mid-September 2021, schools were finally open for girls and boys in grades 1 to 6, with millions of primary school students ready to rejoin classrooms. But after months of closure due to COVID-19, immense challenges remained for the safe return of children to schools.

Nine-year-old Samira from Zabul had spent the past months at home like many of her friends from school. Now that their school was open again, they found that the water and sanitation facilities were not working after months of neglect.



“Our school didn’t have a place where I can wash my hands and we did not have clean drinking water,” says Samira. “My classmates and I were getting sick because of the water.”

Samira, often complained about her health to her parents, however, her father could barely manage to buy medicine for children, earning only AFN 3,200 (US\$ 40) per month.

Poor hygiene and sanitation conditions contribute to the high spread of diarrhoea fever and vomiting diseases amongst children, which affected their studies and school attendance.

The school where Samira is learning, is one of the 75 schools in Zabul Province receiving handwashing stations, hygiene kits, and clean drinking water supply through UNICEF support.

“Thanks to UNICEF, with the installation of hand washing and drinking water station, we have access to clean drinking water,” says Samira. “We are now practicing hand-washing with soap before entering the classroom and after using the latrine.”

Samira and other children in her school can now focus more on their studies, as their health condition has been improved.

Source: “[Returning to school safe and healthy](#)”, UNICEF Afghanistan, 6 October 2021.

While armed conflict subsided after the Taliban takeover, intense fighting had forced hundreds of thousands of people to flee, destroying homes and vital infrastructure. Working with local partner organizations, the UN responded to the needs of IDPs and returnees.

Displaced Afghan families return to destruction and hunger in Helmand

The end of the fighting in Afghanistan in the summer of 2021 came as a relief to farmer Sayed Mohammad*. It meant that he and his family could return to their house in Marja – a war-ravaged farming town in southern Helmand Province – after six years of moving between temporary dwellings every time the fighting came too close.

“This is the first time I’ve been home in six years,” says Mohammad, 70.

But the sight that greeted them on their return a few weeks ago was one of devastation. The entire back section of their house, located near a now-abandoned military base, had been reduced to rubble.

Together with his wife and six children, Mohammad has moved into the one room of their house that still has a roof, fixing plastic sheets over holes in the walls. “We’ve put the door back, but it’s freezing at night,” he says.

Like tens of thousands of other IDPs now back home in former battleground districts in Helmand and elsewhere, he faces a challenge bigger even than rebuilding: keeping his family fed.

“Sometimes we get vegetables, but mostly we are living on bread and tea,” he says. “All the children are hungry.”

Other residents in this shattered town give similar accounts. Families can no longer afford to buy enough food and those, like Mohammad, who returned in recent months will have to wait until the spring before they can start farming, and only then if the current drought eases. It is a microcosm of a nationwide crisis, with a survey undertaken in November 2021 by the UN World Food Programme (WFP) showing that across the country only 2 per cent of the population have enough food to eat, and more than half of children under five are at risk from acute malnutrition.

Every week, Dr. Mohammad Anwar sees more malnourished children in the small private clinic he runs in Marja. “Babies are being brought in half the weight they should be,” he says. He estimates that at least 2,000 children across the Marja area are now severely malnourished and at risk of dying.

Mohammad Sadiqi, an assistant liaison officer for the UN Refugee Agency (UNHCR), Helmand, says the signs are pointing to “more malnutrition cases in all districts affected by heavy fighting”.

“If the situation carries on like this over the winter, most families in Helmand will become poorer than they have ever been, and many will die,” he says.

Working with local partner organizations, UNHCR is responding to the needs of some 22,000 IDP families that have returned to Helmand. The focus has been on helping them to stay warm in winter as well as supporting them to repair their homes and reintegrate into communities.

* Names have been changed for protection purposes.

Source: [“Displaced Afghan families return to destruction and hunger in Helmand”](#), UNHCR, 10 January 2020.

The UN Transitional Engagement Framework (TEF) provides an overarching strategy for the UN system's assistance to respond to the deteriorating humanitarian crisis in 2022

Severe political and social-economic instability in a climate of heightened uncertainty created by the power-transition is set to continue in 2022. The country faces challenges on multiple fronts, including COVID-19, poverty and food insecurity.

In 2022, 24.4 million people in Afghanistan are expected to be in humanitarian need. Almost 23 million people are projected to face acute food insecurity, and over one million children risk dying from severe acute malnutrition. Poverty may become nearly universal affecting 95-97 per cent of the population.

In response to these challenges, UN agencies in Afghanistan have created the Transitional Engagement Framework (TEF) – the overarching strategic planning document for the UN system's assistance in 2022. The TEF provides strategic direction and coherence; ensures UN coordination, collaboration, and complementarity of action; and provides a basis for joint risk-sharing and accountability.

In 2022, UNCT will implement the TEF strategic priorities of i) Provide life-saving assistance; ii) Sustain essential services; and iii) Preserve social investments and community-level systems. The UN will continue to engage with the de facto authorities at the national and sub-national levels to enable their activities under the UN principles of engagement. With the support of donors, the UN will carry out its activities through implementing partners, including the Community Development Councils and other community-based organizations, national and international non-governmental organizations, faith-based organizations, and the private sector, in compliance with applicable international sanctions regimes. The implementation of TEF will be executed in close consultations with the Humanitarian Country Team (HCT), and development partners.

UN agencies in Afghanistan will continue to mainstream the rights of persons with disabilities in UN country programming, as part of implementing a Human Rights-based Approach (HRBA). Additionally, the annual review and implementation of the Business Operations Strategy (BOS) remains one of the top priorities in order to use it as a tool for monitoring and reporting of business operations. Moreover, the UNCT will oversee the implementation of the collective Protection from Sexual Exploitation and Abuse (PSEA) Strategy and Action Plan 2022 aimed to address PSEA issues and ensure that the UNCT has a strategy to fulfil its accountability to provide and facilitate assistance and support to victims of sexual exploitation and abuse.

In 2022, UN programming will focus on women, youth and vulnerable populations by promoting collaborative programming between humanitarian, development and peace-building actors. Focus will be made to strengthen the social protection foundations for all while addressing immediate needs in an inclusive manner. This will empower stakeholders to become part of their future planning.



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