



AFGHANISTAN

Western Region Drought Response Humanitarian Situation Report # 2

SITUATION IN NUMBERS

30 September 2018

Highlights

- As of 30 September, 142,632 people reached (92% of target) with safe drinking water through water trucking, and 44,120 people (55% of target) including women and children gained access to functional toilets.
- Through mobile health and nutrition teams in Herat and Badghis provinces, 6,326 (18% of target) severely acutely malnourished (SAM) and 2,622 moderately acutely malnourished (MAM) children have been admitted to the UNICEF supported treatment programme provided.
- Given the low vaccination rate in the areas of origin, measles Supplementary Immunisation Activity (SIA) conducted in Badghis and vaccinated 28,757 (37% of target) children 9 months to 10 years old. 18,514 children under 5yrs have received polio vaccination in Herat and Badghis.
- Quality education services were provided to over 4,510 children (23% of target) and adolescents (50% of girls) in Herat and Badghis provinces, by establishing 112 Temporary Learning Space(TLS), providing teaching and learning materials and facilitating the recruitment of 49 teachers.
- 7,685 children (52% of target) were also reached with psychosocial support and 246 children were referred to case management services.

214,453

of children in need of humanitarian assistance in Western provinces (Afghan humanitarian country team-HCT report 8 august 2018)

397,135

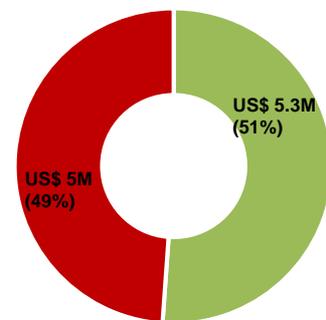
of people in need of humanitarian assistance in Western provinces (Afghan HCT report 8 august 2018)

1.7 million (*Herat, Badghis and Ghor Provinces*)

of people affected by drought (Afghan HCT Report -8 August 2018)

UNICEF 2018 Drought Response Needs: US\$ 10.3 million

2018 Funding Status for Drought Response in the Western Region



■ Funding Available ■ Gap

Situation Overview & Humanitarian Needs

The total number of registered IDPs both in Badghis and Herat remained stable in the last few weeks, with 15,560 families (95,365 individuals) reportedly in Badghis, and 11,954 families (83,678 individuals) registered in Herat IDP sites. In late September, the Afghan National Disaster Management Agency (ANDMA) in Herat, received petitions from 12,000 families as new arrivals. These new arrivals have settled among previous IDPs in the various sites and are receiving assistance in water, sanitation and hygiene (WASH) and health/nutrition as they await registration to receive food, cash and NFIs.

The situation of shelter and food remains a critical gap. A major concern is IDPs sites in Badghis, which are located on dry river beds and prone to flash flooding risk in the fast approaching rainy and winter season. As such, the poor shelters combined with cold nights, windy and dusty conditions in the IDPs sites exposes children, especially the very young to the risk of Acute Respiratory Infections (ARIs). As per mobile health teams (MHTs) registration data, in Herat number of ARI cases reduced from 1,176 cases in August to 817 cases in September however, in Badghis 18% of referred patients are ARI cases. As a result of scale up in WASH response number of diarrhoea decreased from 720 cases in August to 602 cases in September 2018.

In Herat, the proportion of severe acute malnourished children among MUAC screened IDPs decreased from 13% in August to 9% in September, while the proportion of moderate acute malnourished children remained unchanged at around 17%. The limited coverage of general food distribution both at place of origin and at displacement sites have contributed to persistently high proportion of moderate acute malnourished cases. A household survey was undertaken in Herat and Badghis to identify school aged children (6-18yrs). It indicated around 10,000 school-age girls and boys (6-18 years old) are out of school in the seven IDP sites. Most of these IDP children were reported to have had no access to education prior to their displacement, i.e. at their places of origin.

Humanitarian leadership and coordination

UNICEF is an active participant in the Humanitarian Country Team and Inter-Cluster Coordination mechanism, with full responsibility for the WASH and Nutrition clusters. OCHA leads on overall coordination. At sub-national level in the Western Region, UNICEF cluster focal points lead the WASH, Nutrition Clusters and co-leads Education Cluster with the Norwegian Refugee Council (NRC) in the Western Region of the country. UNICEF also leads the Child Protection in Emergencies sub-cluster; whilst a WHO focal point leads the Health Cluster. The cluster focal points support cluster coordination in Herat and Badghis, and meetings are organized on ad-hoc basis. Government line departments attend WASH and Health Cluster meetings on regular basis.

Humanitarian Strategy

UNICEF's support focuses on the provision of life-saving interventions through an integrated approach that responds to the needs of both drought-affected IDPs and people in the drought-affected areas of origin. For the nutrition response, UNICEF provides treatment services for children with acute malnutrition through existing health facilities at place of origin. At area of displacement, a full package (treatment and prevention) of emergency nutrition services such as treatment of acute malnutrition, micronutrient supplementation, counselling services on appropriate infant and child feeding practices are being provided to children under five, pregnant and lactating women (PLW) through integrated mobile health and nutrition teams. Since many of the children and women are living under extremely stressful conditions. UNICEF supports the provision of child protection services including integrated psychosocial support, child protection case management, and referral services to assist the most vulnerable children. On WASH, the strategy focuses on the prevention and management of water-borne disease outbreaks amongst the drought-affected population by providing lifesaving WASH services to those displaced and living in informal settlements, and those at the place of origin. WASH continues to prioritize durable solutions in place of origin wherever possible so that families are encouraged to stay where they are. For health, the strategy is to reduce mortality/morbidity in IDPs communities through the establishment of integrated mobile/fixed health and nutrition teams to render Emergency Basic Health Care services and implementation of measles and polio SIAs. To increase awareness of IDPs communities on health-related issues, communication activities are planned through engagement of community based groups, polio community mobilizers and hygiene promoters and dissemination of emergency related IEC materials. Using an integrated approach, education will be the entry point for delivering inter-sectoral activities within learning spaces, including child protection through psychosocial training of teachers, and WASH through gender-segregated latrines and hygiene training).

Summary Analysis of Programme Response

Nutrition

UNICEF and its implementing partners have been responding to need of drought-affected children, especially those under five, as well as pregnant and lactating women in both areas of displacement and areas of origin.

As of 30 September, 6,326 severely acutely malnourished (SAM) and 2,622 moderately acutely malnourished (MAM) children have been admitted into the treatment program, provided through 21 Mobile Health and Nutrition Teams (MHNT) in Herat and Badghis IDP settlements respectively; of which 7 are UNICEF supported (3 in Herat & 4 in Badghis). UNICEF provides RUTF to all nutrition partners in Herat and Badghis to respond to the nutrition interventions in the IDP camps. A total of 6,747 mothers have been reached through infant and young child feeding (IYCF) counselling services since the month of August.

UNICEF and partners are also providing emergency nutrition support in areas of origin. Currently, there are 94 nutrition facilities (1 in Badghis, 38 in Ghor, 39 in Herat and 16 in Farah) providing treatment services to acutely malnourished children and women in the drought-affected districts of Western Region.

Although the treatment of SAM services have been interrupted in 23 nutrition facilities across Badghis province since June 2018 due to access impediments caused by NSAG (Non- State Armed Groups), as at early September these facilities are now operational.

Health

To date, there have been no reports of outbreaks of vaccine-preventable diseases in IDP settlements. As measles is a concern due to the low vaccination coverage of the disease in the areas of origin, a measles Supplementary Immunization Activity (SIA) for IDP camps started on 29 Sep 2018 and lasted for 8 days in Herat. In Badghis the measles SIA was conducted in IDP camps from 22-29 September 2018, and 28,757 children aged 9 months to 10 years (37% coverage) received measles vaccine. In addition, around 6,590 pregnant/lactating women and children (82 % coverage) received essential health services through functional Mobile Health Team. Around 18,514 children received polio vaccine during Polio SIA in Badghis. The provided services will reduce mortality rate among women and children and support proper management of childhood illness.

WASH

UNICEF response scaled up by end of September, more latrines are constructed in Qala-i- Now central to where majority of drought displaced IDPs are settled. By end-September, in Western Region UNICEF has reached 142, 632 people with safe drinking water through water trucking. For sanitation, 44,120 people including women and children gained access to functional toilets. To stop displacement, as many as 38,073 people were also assisted in their place of origin in three affected districts of Badghis province. To reduce the burden of disease, community based hygiene promotion sessions are underway and to date 107,500 people received WASH specific messages particularly handwashing with soap during the critical times. UNICEF is also distributing family hygiene kits and to date some 78,680 people benefitted from these kits. UNICEF is consistently monitoring the situation on the ground, including through end-user monitoring, and scaling up the response efforts to reach the most affected population who remain in dire need of humanitarian assistance. UNICEF is leading the WASH cluster at national and sub-national level. In order to have better coordination among WASH partners and their response, UNICEF is conducting monthly meetings at the national level and weekly WASH coordination meetings at the provincial level.

Education

In the Western Region, UNICEF supported the Provincial Education Directorate (PED) with the establishment of 112 Temporary Learning Spaces (TLS) within the provinces of Badghis and Herat (IDP sites), which benefited some 4,510 children (out of which 50 percent girls). Establishment of TLS included the provision of 29 tents and 28 make-shifts (used in multi-shifts), and the distribution of teaching and learning materials. Furthermore, the MoE/PEDs with the support of UNICEF, has identified locations to address potential additional needs for education, should the displaced population return to their places of origin. Throughout the response, UNICEF's education and child protection (CP) teams have been closely working together, to give children a sense of normalcy, stability, structure and hope in their daily lives, as well as to mitigate possible negative psycho-social impact. In locations where learning or recreational spaces are limited, the teams alternatively use a child friendly or teaching/learning space in shifts. All 134 identified teachers have received orientation sessions on EiE teaching and how to use distributed learning materials.

Limited funding for EiE and capacity of partners on the ground remain key challenges in the sector. Additionally, insufficient number of qualified teachers, teaching and learning materials, and limited learning spaces have impacted the capacity to significantly scale-up the education response.

UNICEF alongside NRC is supporting PEDs in the coordination of the sub-national EiE response (sub-national EiEWG). Since June 2018, the EiEWG has been regularly meeting biweekly in Herat and a joint EiE/CPiE coordination mechanism has been established in Badghis.

Child Protection

UNICEF Child Protection response is focusing on the provision of community-based psycho-social support (PSS), and timely and appropriate case management services that are age and gender-sensitive. Monitoring reports by two child protection monitoring teams in Herat and 4 in Badghis from all the settlements in these two provinces, showed prevalence of negative coping mechanisms amongst families especially child marriage triggered by the impact of the drought affected populations with girls being given in marriage to repay household debts or relieve the financial burden in many areas of the country). There is an increase in child labour and an increasing number of street children in Herat.

UNICEF reached 7,685 children with psychosocial support out of the targeted 14,794, and 246 children with case management services out of the targeted 4,025. 18,482 community members were reached through awareness raising activities out of 22,609 targeted largely reached through the 13 CFS (4 in Herat and 9 in Badghis), using two Psychosocial Counsellors and 12 CP monitoring teams.

The CP response capacity is quite limited compared to the number of children in need of services in Badghis and Herat, mainly due to significant funding gaps to respond to the evolving context. There is need for more resources to establish adequate number of CFS, expand CP monitoring/Case Management and community dialogues activities. Additionally, UNICEF child protection supported the provision of Non-food Items (including blankets, tarpaulin and kitchen sets) for 1,706 IDP families

C4D

As part of the awareness raising campaign for education enrolment, the School Management Shuras (SMSs) conducted training for 22 SMSs (containing 88 members) in Qale Naw district of Badghis province. Aside from the routine work of the SMSs, they were also assigned to meet the IDP families and elders and mobilize the enrolment of children in Temporary Learning, as well as Child Friendly Spaces.

A community engagement workshop was also completed for 172 IDP elders. This is in addition to another 180 already trained, bringing the total to 352 of whom 30% are women. The thrust of the campaign was engagement through focus group discussion on needs, current response as well as the participation of IDPs in decision makings on issues affecting their wellbeing, including further response and winterization. As an action plan of the workshop, 15 self-help groups were established among the IDP elders to communicate between responding agencies and local IDP communities, and provide support on the sites during service delivery.

The awareness raising campaign also supported service uptake amongst the IDPs including health care, proper hygiene, prevention and treatment of malnutrition, polio vaccination. Referral of children and women to the mobile health teams has been strengthened through house to house visits by hygiene promoters.

Security

The general security situation in the Western Region remains unpredictable. Armed clashes continue to account for majority of security incidents, followed by IED detonations. However, rise in electoral related incidents across the country is also affecting the region. So far, the use of armed escort has been mandatory to conduct visits to most of the IDP settlements. This has hampered the number and frequency of visits to project sites to ensure good quality of services and effective monitoring of programmes.

Funding

In line with Afghanistan's multi-year inter-agency 2018-2021 Humanitarian Response Plan, UNICEF has revised its appeal in July to US\$38.8 million to meet the increased humanitarian needs of children and women due to drought. Specifically, for the response in the Western Region, US\$10.3 million is needed to meet needs across all sectors. The significant population displacement due to the drought has increased the need for safe water, health, child protection, education and winter responses. A 49% funding gap to respond to drought needs remains and without additional funding, UNICEF Afghanistan will not be able to support children and their families who are affected by the continuous nutrition crisis, and

will not be able to provide critical WASH services to the drought-affected displaced people, especially children, facing the risk of disease outbreak and harsh winter.

| Funding Requirements for the Drought Response in the Western Region* | | | | | |
|--|-------------------|-----------------------------|------------|------------------|------------|
| Appeal Sector | Requirements | Funds available | | Funding gap | |
| | | Funds Received Current Year | Carry-Over | \$ | % |
| Nutrition | 811,000 | 651,680 | | 159,320 | 20% |
| Health | 962,000 | 261,483 | | 700,517 | 73% |
| WASH | 6,034,500 | 3,527,170 | | 2,507,330 | 42% |
| Child Protection (<i>inc. NFIs and Winter Support</i>) | 1,658,000 | 784,113 | | 873,887 | 53% |
| Education | 900,000 | 75,000 | | 825,000 | 92% |
| Total | 10,365,500 | 5,299,446 | | 5,066,054 | 49% |

*These needs are included in the 2018 Afghanistan HAC which requires an overall US\$38.8 million.

UNICEF Afghanistan: www.unicef.org/afghanistan

UNICEF Afghanistan Humanitarian Action for Children Appeal: <http://www.unicef.org/appeals/afghanistan.html>

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Annex A

SUMMARY OF DROUGHT RESPONSE PROGRAMME RESULTS July-Sep 2018

| High Frequency HPM Indicators | Overall needs | UNICEF and IPs | | | | Cluster/Sector Response | | | |
|---|---------------|----------------|---------------|--------------------------|-----------------------------|-------------------------|----------------|--------------------------|-----------------------------|
| | | 2018-19 Target | Total Results | % of the target achieved | Change since last report ▲▼ | 2018 - 19 Target | Total Results* | % of the target achieved | Change since last report ▲▼ |
| NUTRITION | | | | | | | | | |
| Number of children under 5 with SAM admitted for treatment | - | 35,836 | 6,326 | 18% | 706 | 35,836 | 6,326 | 18% | 706 |
| Number of PLW counselled on IYCF | - | 4,536 | 6,747 | 149% | 1,890 | 4,536 | 6,747 | 149% | 1,890 |
| HEALTH | | | | | | | | | |
| Number of children who received measles vaccination | - | 78,400 | 28,757 | 37% | 17,457 | | | | |
| Number of pregnant/lactating women and children benefited from essential health services and health education (through MHTs) | - | 8,000 | 6,590 | 82% | 536 | | | | |
| Number of Pregnant women & new-borns who benefited from distribution of NFI (new-born kits, family kits, clean delivery kits) | - | 8,960 | 404 | 5% | 75 | | | | |
| WATER, SANITATION & HYGIENE | | | | | | | | | |
| Number of people accessing safe drinking water | - | 155,000 | 142,632 | 92% | 1,500 | 250,000 | 195,538 | 78% | 5,940 |
| Number of people accessing functional latrines | - | 80,000 | 44,120 | 55% | 16,100 | 120,000 | 49,560 | 41% | 18,100 |
| Number of people reached with key Hygiene messages | - | 155,000 | 107,500 | 69% | 23,500 | 250,000 | 107,500 | 35% | 23,500 |
| Number of people covered with family hygiene kits | - | 80,000 | 78,680 | 98% | 23,800 | 120,000 | 84,000 | 56% | 25,800 |
| CHILD PROTECTION | | | | | | | | | |
| Number of children accessing psychosocial supports through child-friendly spaces | - | 14,794 | 7,685 | 52% | 4,106 | 15,851 | 8,028 | 51% | 3,049 |
| Number of children supported through case management | - | 4,025 | 246 | 6% | 127 | 4,529 | 251 | 6% | 115 |
| Number of caregivers and children sensitized and prevented from resorting to the use of negative coping strategies | - | 22,609 | 18,482 | 82% | 7,975 | 25,435 | 19,222 | 76% | 8,715 |
| Number of affected children and their families receive winter clothes and Non-Food Item (includes blankets and kitchen sets) | - | 35,000 | 2,126 | 6% | 420 | 119,000 | 476 | 0% | |
| EDUCATION | | | | | | | | | |
| Number of children and adolescents who accessed Non-Formal/formal education | - | 20,000 | 4,510 | 23% | 1,513 | 40,000 | 4,880 | 12% | 1,513 |
| No of Teachers trained on EIE | - | 325 | - | 0% | | 650 | - | 0% | - |