



Country Card

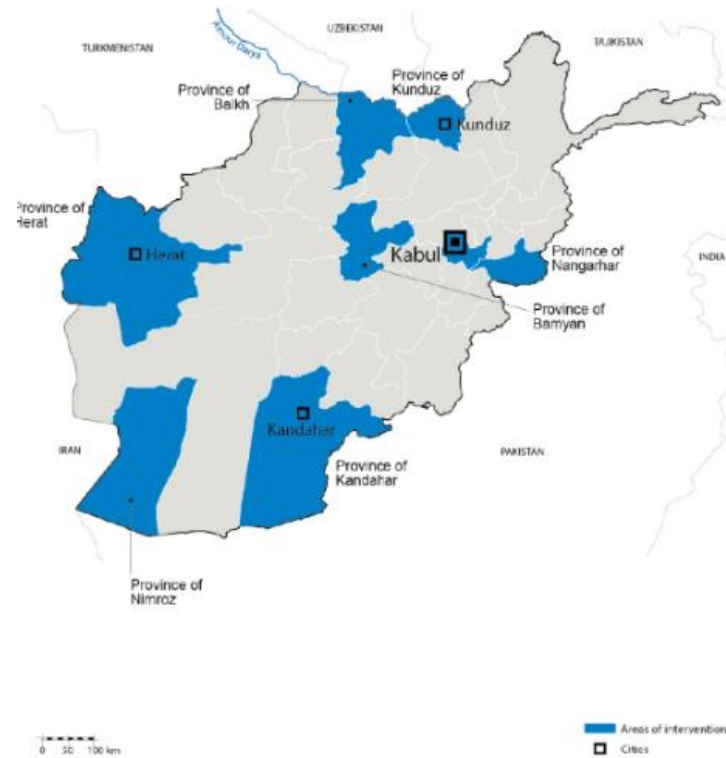
**Afghanistan**





# HI Team and Intervention Areas

HI Afghanistan programme has 255 staff members





# General data of the country

## a. General data

Country <sup>1</sup>	Afghanistan	Neighbouring country, Pakistan	France
Population	38.928.341	220.892.331	67.391.582
IHDI	0.51	0.56	0.90
Maternal mortality	638	140	8
Gender Development Index	0.859	0.745	0.987
Population under HCR mandate	72.231	1.404.019	368,352
INFORM index	8.1	6.1	2.2
Fragile State Index	102.90	92.08	30.48
GINI Index	NA	33.5	31.6
Public Social Protection	2.8	0.2	31.7

## b. Humanitarian Law Instruments ratified by the country

Humanitarian Law Instruments	Status
Mine Ban Treaty	11/09/2002
Convention on Cluster Munitions	08/09/2011
UN Convention on the rights of people with disabilities	Ratified 18/09/2012

<sup>1</sup>[https://hinside.hi.org/intranet/jcms/pl1\\_2540344/fr/2020-update-country-indicators-2ndary-data/-/donnees-secondaires-mises-a-jour](https://hinside.hi.org/intranet/jcms/pl1_2540344/fr/2020-update-country-indicators-2ndary-data/-/donnees-secondaires-mises-a-jour)



### c. Geopolitical analysis

Afghanistan's strategic position at the crossroads of many trade routes has for centuries made it vulnerable to invasion by distant as well as neighbouring powers, and this situation persists even today. Afghanistan shares borders with six different countries: China, Pakistan, Iran, Uzbekistan, Tajikistan and Turkmenistan. The current population of Afghanistan is 40.4 million, about 30% of the population is urban; the rest is living in rural areas.

Afghanistan has for long faced numerous political and security challenges: Despite having ended an internal conflict between the former Government of Afghanistan and the Islamic Emirate of Afghanistan (IEA), Afghanistan continues to be faced with the presence of armed groups jeopardising the security of civilians across the country (particularly the so-called ISIL-K).

In 2018, President Trump ordered the withdrawal of 7,000 American troops from the country, as well as signing a US-Taliban agreement, which led to a decrease in attacks on international forces. However, attacks on Afghan security forces increased sharply. The Biden administration completed the withdrawal of US troops by August 2021. Then, the Taliban had seized most major cities, including the capital of Kabul. They toppled the government and installed a new order.

The country's socioeconomic situation remains critical, with 30.5 million people in need of social assistance and 18.4 million people in humanitarian need, including the most vulnerable groups, such as persons with disabilities, female-headed households, long-term displaced people and people with mental health issues. In this context, the outbreak of COVID-19 has had a dramatic impact on Afghanistan, hitting its economy with a deep contraction, particularly due to restricted movements and border closure.



## Summary of HI presence in the country

HI started its operations in support of the Afghan population with a focus on persons with disabilities in the refugee camps in Pakistan in the mid-1980s. HI is present in Afghanistan without interruption since 1996. HI's work initially centred on mine action, particularly in the South and West regions, and physical rehabilitation via an orthopaedic-fitting and rehabilitation centre in Kandahar. During these 20 years of work in Kandahar, HI, through its community based risk education (CBRE) interventions, has established a network of more than 400 active community volunteers which have been engaged on CBRE activities and identifying/referring community members to PRC for rehabilitation.

It has since expanded the scope of its work to include support to organisations of people with disabilities and victim organizations as well as the economic and social inclusion of people with disabilities. HI is a strong actor promoting and advocating for the rights of survivors and other people with disabilities as a whole and provides technical support to Afghan authorities and other key stakeholders. These activities further engage with a better acceptance and integration of survivors and other persons with disabilities within the society and enhance their access to medical and other basic services, further improving the resilience of the region's population. HI has also provided support to the Ministry of Public Health's health facilities linked with the Basic Package of Health Services in rural communities in Herat – where HI is present since 2002, firstly to develop activities on Mine Risk Education and providing rehabilitation services- and Kandahar provinces, and trained their personnel.

HI assists in improving the service delivery and provide capacity building for local actors, as well as the Government of Afghanistan. It develops a curriculum and training courses for physiotherapy professionals.

Finally, HI has been implementing activities to cover emergency Psychosocial Support (PSS) and basic rehabilitation services in response to the recent conflict upsurge that has followed the Armed Opposition Groups' (AOGs) offensive on Kunduz city in October 2015. HI provides community-based PSS and emergency home-based rehabilitation services in key districts.



## Overview on ongoing projects

Sectors of services where HI conducts projects and focus on beneficiaries and operational partnerships

Main sectors of intervention	Objective of project in the sector	Main activities	Beneficiaries	Final Beneficiaries	Partner	Location	Dates of beginning and end of the project and Donors funding it
<b>Improving the accessibility and quality of rehabilitation</b>	Rehabilitation services + gradual handover of rehabilitation centre to Ministry of Public Health	<ul style="list-style-type: none"><li>. Provision of comprehensive rehabilitation services;</li><li>. Provision of free of charge accommodation to rehabilitation centre beneficiaries and caregivers;</li><li>. Awareness-raising and capacity building on identification and referral of patients;</li><li>. Organisation of and reporting on quarterly review of PRC integration roadmap;</li></ul>	18,150 survivors of conventional weapons and other people with disabilities	18,150 survivors of conventional weapons and other people with disabilities and 90,750 indirect beneficiaries will benefit from the intervention	Ministry of Public Health (MoPH), Provincial Directorate of Public Health and Mirwais Regional Hospital	Kandahar, Afghanistan	06.2019 – 03.2022  ECHO



		. Assessment of physiotherapy and qualifications, skills and experience; . Workshop and training on management					
<b>Improved access to quality rehabilitation in Afghanistan (TIQRA II)</b>	To support the government of Afghanistan towards the improvement of delivery of public health services	. Training of physiotherapists on three-year diploma recognised by MOPH; . Support to the GIHS for the institutionalisation of this programme; . Advocacy at MOPH national level for expansion and promotion of rehabilitation services; . Training of essential health services implementers on how to manage disability cases	75 students; 34 project-related staff including teachers and support staff; 200 clinical staff; 120 management staff	.237 students to graduate as PT; .7 staff with acquired in-depth PT long-term training capacity; .200 clinical staff benefitting from orientation training; .120 management staff benefitting from orientation training orientation	Ministry of Public Health (MoPH), Provincial Directorate of Public Health and directors of Regional Hospital/ Region IHS/ AAPT/PTI and GIHS	Kandahar and Herat, Afghanistan	07.2019 – 07.2022  INTPA (DEVCO)
<b>Contributing to the</b>	To support the Government of			Direct beneficiaries will be students of			06.2020 to 04.2021





<b>sustainability of physiotherapy course and healthier lifestyle for the female students - regional Institute of Health Sciences</b>	Afghanistan (MOPH/ PPHD /HIS) through the construction of a new physiotherapy training facility in Kandahar by the end of April 2021.			the PT training programme, who will benefit from outdoor area as well as new training facilities (classrooms, skill and computer labs).			
<b>Victim Assistance Advocacy/Live lihood</b>	<ul style="list-style-type: none"> <li>. Skills development trainings for the most vulnerable people;</li> <li>. Enable Organisation s of People with Disabilities to promote capacities of people with disabilities and improve their access</li> </ul>	<ul style="list-style-type: none"> <li>. Capacity building;</li> <li>. Support income generating initiatives;</li> <li>. Support OPDs to raise awareness on skills of people with disabilities;</li> <li>. Information sessions on disability inclusion;</li> <li>. Support stakeholder engagement and ownership of the process towards a national disability Inclusion strategy;</li> </ul>	<ul style="list-style-type: none"> <li>. Direct beneficiaries: 38 12 (55 females, 55 males)</li> <li>. Indirect beneficiaries: 20,000</li> </ul>	<ul style="list-style-type: none"> <li>. Direct beneficiaries: 110 (55 females, 55 males);</li> <li>. Indirect beneficiaries: 20,000</li> </ul>	OPDs/VOs Ministry of Labour, Ministry of Social Affairs, State Ministry of Martyrs and Disabled, Advocacy Committee for Persons with Disability, Disability Stakeholders Coordination Group	Kabul, Herat, Kandahar, Nangarhar, Bamyan, and Balkh	06.2021-05.2022  Ministry of Foreign Affairs - Norway





	to employment	. Change attitudes towards inclusion of survivors of mine and explosive remnants of war and persons with disabilities					
<b>Physical rehabilitation, psychosocial support and mine risk education</b>	To ensure availability and increase sustainability of critical rehabilitation services reducing the risks of physical impairments, mitigating the spread of Covid-19 and alleviating the psychosocial distress for ultra-vulnerable people.	<ul style="list-style-type: none"> <li>. Awareness sessions</li> <li>. PSS sessions ( individual, familial, group)</li> <li>. Physical Rehabilitation sessions</li> <li>. Risk Education sessions</li> <li>. Referral Mechanism</li> <li>. Training of community health workers/humanitarian workers on the identification of the vulnerabilities</li> <li>. Vehicle campaigning on Covid-19 and risk education messages- .</li> </ul>	In progress	<ul style="list-style-type: none"> <li>. 207,928 individuals benefit from awareness, physiotherapy (PT) and psychosocial support (PSS) sessions;</li> <li>. 98,576 individuals will benefit from risk education sessions among IDPs, returnees and conflict affected communities;</li> <li>. 235 humanitarian workers;</li> <li>714 beneficiaries referred from partners;</li> <li>. 65,000 individuals receiving vehicle</li> </ul>	MOPH, District of Public Health, DMAC, IOM Zero Point, Transit Centre Regional Hospitals, ERM actors, other humanitarian actors (ICRC, SCA, MSF)	Kunduz, Kandahar, Nimroz and Herat Province	01.2019 – 03.2022  ECHO



		Distribution of hygiene kit . Disinfection of public places		awareness campaigning;			
<b>PSS/PFA and COVID-19 RCCE services</b>  <b>Supporting healthcare staff</b>  <b>Support disability inclusion</b>	Respond to heightened levels of stress across conflict and drought-affected people; support the DIWG	COVID-19 communication plan Psychosocial support DIWG – inclusive development	In progress	12,600 people receive COVID kits; 9,000 people benefitting from RCCE sessions; 900 people benefitting from PSS kits; 6,600 people benefitting from PSS sessions; 500 PSS helpline sessions; 200 OPDs and community workers receiving g PFA training; 120 HF workers receiving PFA;	Humanitarian actors, the health cluster.	Nimroz, Kandahar, Herat	06.2021 – 12.2021  OCHA



## Donors

<p><b>United Nations Office for the coordination of Humanitarian affairs (OCHA)</b></p> 	<p><b>Norwegian Minister of Foreign Affairs</b></p> 
<p><b>European Union Civil Protection and Humanitarian Aid (ECHO)</b></p> 	<p><b>International Partnerships (INTPA)</b></p> 