



2020

ANNUAL REPORT
UNFPA Afghanistan





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PREFACE



Despite challenges posed by COVID-19 pandemic, 2020 was an outstanding year for UNFPA programmes in Afghanistan. UNFPA continued to prioritize the needs of women and girls, as part of its overall effort to achieve the three transformative results of

- **ending unmet need for family planning,**
- **ending preventable maternal deaths, and**
- **ending gender-based violence and harmful practices by 2030.**

Despite the movement restrictions, quarantine, security challenges, and conflicts throughout the country, we were able to reach most marginalized and vulnerable segments of population, particularly women in the remotest areas of Afghanistan.

As we have been battling COVID-19, women continue to get pregnant and babies have still been born, and we continued to serve them more than the previous years, because it is not only our mission to provide them antenatal and postnatal services, but also to prevent them from contracting COVID-19.

UNFPA's Family Protection Centers (FPCs) data showed an increase of Gender-Based Violence (GBV) in the wake of COVID-19 fueled by the restriction on movement and economic downturn. Social distancing measures meant space for Afghan women and girls shrinks; limiting their contact with family and friends who provide emotional, psychosocial, and tangible support and/or protection from violence. To address ending GBV in COVID-19 and normal contexts, UNFPA in collaboration with the Government of Afghanistan – particularly the Ministry of Public Health – ensured the service delivery through FPCs and Family Response Units remained available.

Access to reproductive health services, including antenatal, postnatal care and access to safe birth is the right of all women and UNFPA has continued to support the right of women living in remote villages to have access to the services without violence and discrimination through Family Health Houses and FP interventions around the country.

Afghanistan has one of the youngest and fastest growing populations in the world – with approximately 67 percent of the entire population being under the age of 25. Young people in Afghanistan face significant challenges related to health, education, employment, and gender inequality. In the face of the COVID-19 pandemic, these issues have been exacerbated. UNFPA remained active in 2020 to support youth through different services including the toll-free Youth Health Line #120, Youth Health Corners, as well as integrated services via health and GBV response.

The 2020 annual report briefly showcases the key highlights of UNFPA and its partners, both in government and non-governmental organizations, with the generous financial support of various donors. Afghanistan still has the highest fertility rate in South Asia. As such, considerable work yet remains to ensure women and their children receive quality care before, during, and after pregnancy, especially in remote and hard to reach areas of the country. We continue to work together to ensure the needy and vulnerable population of Afghanistan receive our services and ensure no one is left behind.

Dr. Aleksandar Sasha Bodiroza

Country Representative

UNFPA Afghanistan

UNFPA AFGHANISTAN FOURTH COUNTRY PROGRAM DOCUMENT

The Fourth Country Program Document (CPD) came to an end in December 2019. An extension for two years (2020-2021) was approved by the UNFPA Executive Board in September 2019. The reason behind this extension was to link the 4th Programme with the United Nations Development Assistance Framework (UNDAF) for two years (2020-2021) and the Afghanistan National Peace and Development Framework (ANPDF).



KEY HIGHLIGHTS OF 2020

Increased national institutional capacity to deliver a coordinated supply of modern contraceptives and improved quality of family planning services in selected provinces

Developed Capacities to Ensure Availability of Good Quality, Human Rights-Based, Family Planning Services

- To strengthen the community-based Family Planning and introduce subcutaneous depomedroxyprogesterone acetate (SC-DMPA) at the community level 327 Community Health Workers (80% female, 20% male) from two provinces were trained on SC-DMPA and Family Planning counseling. At the end of each training session, 9,810 vials of SC-DMPA were distributed to support 3,270 Family Planning users which averted an estimated 860 unintended pregnancies.

Policy & Advocacy for Family Planning

- Advocated for and succeeded in having Afghanistan included in the 3rd phase of UNFPA supplies partnership program 2021-2030 with an allocation of 3 million USD for the country for family planning commodities and health system strengthening.
- Strengthen capacity through provision of one National Technical Advisor to the Family Planning department of the Ministry of Public Health to improve coordination and support to Family Planning activities on a country level.
- 11 National Family Planning Working Groups conducted under the leadership of the Ministry of Public Health and UNFPA contributed technically to the development of proposals, revision of guidelines, preparing of Family Planning 2020 annual report, and Family Planning data analysis and reporting.
- An estimated 56,797 people visited the Family Planning Facebook page of the Ministry of Public Health to access information and dispel the myths and misconceptions related to Family Planning in society. This has resulted in a level of acceptance in promoting Family Planning as a core national priority for economic empowerment and development as well as addressing maternal mortality.

Contribution to Improving the Availability and Reliability of Quality Contraceptives Supply

- UNFPA supported the public-private partnership of Ministry of Public Health via 50 private health facilities to improve access of women to family planning services. UNFPA supported these private health facilities by provision guidelines, as well as Information, Education and Communications (IEC) materials, 85,325 vials of SC-DMPA, 5,520 intrauterine devices (IUDs), 20,310 cycle pills, 3,272 male condoms, and 900 contraceptive implant sets. The donated contraceptives averted an estimated 10,304 unintended pregnancies and 11,129 abortions.



Increased national institutional capacity to deliver comprehensive maternal health services

- 35 women from very remote and underserved villages of Ghor and Herat were trained via the Community Midwifery Education (CME) program as community midwives and deployed to serve at 35 Family Health Houses in both provinces that provide essential services to 43,160 women of reproductive age, and 4,739 pregnant women living in remote and underserved villages.
- Constructed, furnished, and equipped 50 Family Health Houses in Badghis, Ghor, Herat, Nuristan, Samangan, Paktika, and Samangan provinces. The Family Health Houses provide 24/7 health services to an estimated 150,000 population living in the most remote and isolated 332 villages. During 2020, a total of 850 mothers had safe deliveries provided by these FHHs.
- Established and ran the midwifery mentorship program in Bamyan that improved the day-to-day operation of 10 FHHs.
- In total, 171 Family Health Houses were functional throughout 2020 in ten provinces. These Family Health Houses provide 24/7 health services to the population living in the most remote and underserved villages of these provinces.
- Established and ran eight Mobile Health Teams: Badghis (2), Kandahar (1), Paktika (2), Nuristan (1), and Samangan (2) providing services to an estimated 150,000 population.

Through UNFPA Afghanistan supported Family Health Houses in 2020:



213,532

women and girls support through the outpatients (OPD) services



19,285

women provided with Antenatal Care (ANC) services



14,017

women provided with Postnatal Care (PNC) services



11,573

women supported through Skilled Birth Attendants (SBA) services



7,267

women provided Family Planning (FP) services



212,295

women and girls provided with Health Education Sessions

- Established and ran five Community Midwifery Education Schools with a total of 123 students.
- 12,640 community midwives, in both private and public health facilities, were supported via the Midwifery helpline toll-free supported by UNFPA to facilitate their work and knowledge sharing, which directly contributed to delivery of quality RMNCH services and the saving of mothers and newborn children life.
- Support to the Obstetric Fistula treatment centers in Malalai Maternity Hospital, Herat regional hospital, and Nangarhar regional hospital and during the year 148 Obstetric Fistula patients received treatment through these Obstetric Fistula centers.
- Completed the Family Health Houses' Documents Package and submitted it to the Ministry of Public Health for adoption and harmonized implementation throughout the country.

Increased national capacity to provide sexual and reproductive health services in humanitarian settings

- **Provision of maternity services in emergencies:** Maintained provision of maternity services in the national, regional, and provincial hospitals in 2020 and in particular during COVID-19 via the provision of Emergency Reproductive Health kits, personnel protective equipment, medical and non-medical supplies.

- 70,000 deliveries were supported via 253 Emergency Reproductive Health kits for four regional hospitals, four provincial hospitals, two district hospitals, and 21 Mobile Health Teams in 14 provinces including Herat, Kandahar, Nangarhar, Laghman, Mazar-e Sharif, Kunduz, Nuristan, Badakhshan, Badghis, Helmand, Zabul, Nimruz, Kabul (two hospitals), and Kunar.
- 9,200 women and men received psychosocial counseling services in three COVID-19 hospitals (Herat, Kabul, Kandahar) due to the deployment of six Psychosocial Support Service counselors.
- 235 frontline health workers from three hospitals were trained in Infection Prevention and Control.
- In terms of COVID-19 response from July - December 2020 the following supplies were provided to the Malalai Maternity Hospital, Rabia Balkhi Maternity Hospital in Kabul, Herat Maternity Hospital, Kandahar regional hospital/maternity ward, Nimruz provincial hospital/ maternity ward and Fatimatu-Zahra hospital in Jalalabad:



- **Afghan Returnees Response:** 87,000 people screened in the border areas of Herat, Nimroz, and Kandahar and 22,500 Afghan returnees/deportees received health and psychosocial counseling services at the border crossing points.
- **Response to IDPs and host communities affected by crisis:** 210,000 women, girls, men, and boys were provided health, including Sexual and Reproductive Health/Gender-Based Violence, services, and information.



The increased national capacity to conduct evidence-based advocacy for incorporating the rights and needs of adolescents and youth in national laws, policies, and programmes, in particular, healthy family life education and youth-friendly services

In 2020, the overall youth project encompassed; youth-friendly services, including provision of Adolescent Sexual and Reproductive Health services via the youth health line, counseling through the Youth Health Corner, pre-marital counseling through the Youth Health Corner and support to adolescent and health working group.

- Capacity building: Different trainings on Training of Trainer methodology on pre-marriage counseling and health training for 50 School teachers. Youth Friendly Services training was also conducted for 20 health staff from 4 provinces.
- 400 young people from civil society organizations increased their knowledge and their role in harnessing the demographic dividend and the youth bulge.
- Adolescent Health Working Group: 13 group met and worked to revise the manual for youth-friendly services and developed a checklist for Youth Health Corner.
- Youth Health Line: 212,300 young people were provided counseling, information, and referral services. Out of the total calls, 58% of the callers were female/girls, and 42% were male callers from different provinces of Afghanistan. 52% of clients received counseling services, 25% of young people were provided information on different adolescent health issues, including Adolescent and Sexual and Reproductive Health, and 23% clients were referred to the different service delivery points in Afghanistan.
- Youth Health Corners: 34,000 young people were provided youth-friendly services through 24 Youth Health Corners in 9 provinces (Bamyan, Laghman, Jalalabad, Kunar, Samangan, Badakhshan, Herat, and Kabul). 65% were female participants and 62% were single.
- Pre-marriage counseling: The Ministry of Public Health worked via the Youth Health Corners to provide 4,227 young couples in 6 provinces (Samangan, Badakhshan, Kunar, Laghman, Kabul, and Jalalabad) pre-marriage counseling with a 45% of female participation.
- School Health Services: 80 school health posts were operational to provide school health services to 8,000 young people in five provinces (Kabul, Samangan, Badakhshan, Kunar, and Laghman) with 60% of the participating schools based in Kabul.



Strengthened capacities of the health sector and law-enforcement bodies for the prevention, response, and monitoring of gender-based violence and child marriage in targeted provinces

Capacity building of Health Care Providers:

- A total of 275 health care providers trained on Gender-Based Violence data collection/Standard Operating Procedures and Gender-Based Violence Psychosocial counseling using the two respective manuals. The target of 3,100 health care providers trained from 22 provinces was not possible due to COVID-19.

Expanded coverage of Gender-Based Violence prevention and response services from 22 to 26 provinces:

A total of 37 Family Protection Centers which benefit 22,747,856 million women/girls/men/boys are functional in 26 provinces including 12 new Family Protection Centers (FPCs) established in 7 provinces (4 new and 3 existing provinces) in 2020.

- Two Family Protection Centers established in April 2020 in Herat and Nimruz.
- 10 new Family Protection Centers were established in December 2020 in Takhar, Sar-i Pul, Helmand, Uruzgan, and Kandahar provinces.

Family Protection Center (Providing Essential Health, Psychosocial and Referral Services to Gender-Based Violence Survivors)

- A total of 26,289 Gender-Based Violence cases were registered and supported via 37 Family Protection centers in 26 provinces.
- A total of 4,730 Gender-Based Violence cases were referred to the Family Protection Centers. To note, the Gender-Based Violence referral happens based on the consent of the Gender-Based Violence survivor according to the guiding principles of Gender-Based Violence and survivor centered approach. Therefore, 6,940 cases were referred from Family Protection Centers to legal, police, and other support services.

- A total of 17,620 Gender-Based Violence cases were registered by Focal Points at the lower-level health facilities at Community Health Center and District Hospitals who are trained in Gender-Based Violence SoP, case management and referral.
- 195 case management committee meetings conducted at the provincial level.

Advocacy and Community awareness for Prevention of Gender-Based Violence at Community level:

39 Community dialogue campaigns conducted through media broadcasting due to COVID-19.

Advocated and mobilized support to integrate health sector response to GBV into the health system in Afghanistan:

- A high-level Steering Committee was established at the Ministry of Public Health and chaired by the Deputy Minister for Policy and Planning at Ministry of Public Health for the integration of the Health Sector Response to Gender-Based Violence into the health system of Afghanistan.
- A Technical Sub-Committee was also established and chaired by the Gender Director of Ministry of Public Health to work closely with the national consultant recruited for the integration.
- The high-level advocacy with the Ministry of Public Health resulted in the inclusion of the Health Sector Response to Gender-Based Violence into the independent assessment of the design and performance of primary health care in Afghanistan, published in November 2020. It is anticipated that the study's recommendations will be incorporated, including the integration of Health Sector Response to Gender-Based Violence, into the health system in Afghanistan by 2023.
- Developed Gender-Based Violence Sub-Cluster advocacy messages are revised per the COVID-19 context and shared with all members.

Knowledge generated for evidence-based decision making on Gender-Based Violence response:

- Developed a COVID-19 Gender-Based Violence Sub-Cluster guidance notes for all members to guide the GBV response.
- Developed a COVID-19 and Young Girls Vulnerability to Child Marriage and Teenage Pregnancy in Afghanistan guidance jointly with UNICEF, and it was shared with all partners, stakeholders, and the donor community in Afghanistan.

LOOKING FORWARD IN 2021

While maintaining current technical and financial support and the services being delivered by UNFPA across the country, UNFPA will continue to provide Reproductive Health services via Family Health Houses in ten provinces of Afghanistan in 2021 and beyond in order to reach a larger segment of the Afghan population in need. Maintaining provision of maternity services in the national, regional, and provincial hospitals, particularly during COVID-19 through the provision of Emergency Reproductive Health kits, personnel protective equipment, medical and non-medical supplies.

Other reproductive health services delivered by UNFPA shall be maintained, including the Obstetric Fistula treatment centers in Kabul, Herat, and Nangarhar provinces. UNFPA will sustain and continue to expand its humanitarian assistance during emergencies and for internally displaced persons and returnees from neighboring Pakistan and Iran. UNFPA will similarly continue to respond and address Gender-Based Violence issues and reach survivors.

Continuing provision of health including reproductive health and Gender-Based Violence prevention and response services and information to Afghan returnees and deportees from the neighboring countries at the Nimruz/Malak border, Kandahar/Spin Boldak border, Nangarhar/Torkham border by supporting six health facilities at the border crossing points and transit centers in 2021. UNFPA will also be continuing provision of Sexual and Reproductive Health/Gender-Based Violence services and information to IDPs and host communities in the crisis-affected and remote/white areas through 14 mobile health teams and one static health facilities in 14 provinces.

Provision of Personnel Protection Equipment will be procured and delivered to 12 regional and provincial hospitals/Maternity wards to protect the health workers and maintain reproductive health services.

UNFPA will also continue providing health information and counselling on sexual and reproductive health and Gender-Based Violence prevention and response and referral to young women and men, including Internally Displaced Persons and returnees via the Youth Health line and Youth Health Corners in 11 provinces of Afghanistan.

UNFPA will continue providing lifesaving services to Gender-Based Violence survivors via Family Protection Centers, Women Friendly Health Spaces and Psychosocial Mobile Outreach teams. 10 new Family Protection Centers will be established in 4 provinces (9 FPCs under the Spotlight Initiative in Herat, Kandahar, and Paktia Provinces and one FPC in Behsood District of Nangarhar Province). UNFPA will also start the pilot project of men and boys' engagement in the prevention and response to the GBV in Nangarhar province. Capacity building activities for healthcare providers will continue throughout 2021 considering the Ministry of Public Health and World Health Organization COVID-19 guidelines and recommendations for preventing the spread of coronavirus.

Additionally, UNFPA support for data availability and utilization will continue to enhance the capability of the National Statistics and Information Authority (NSIA), Kabul University, and the Afghan Parliament in data generation, analysis, and the use of data for development programs and planning in the country.



OUR DONORS

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OUR IMPLEMENTING PARTNERS IN 2020

Afghan midwives Association (AMA)

Afghan Family Guidance Association (AFGA)

Afghan Red Crescent Society (ARCS) Agency for Assistance and Development of Afghanistan (AADA)

Assistance for Health, Education & Development (AHEAD)

Bu Ali Rehabilitation and Aid Network (BARAN)

Health Net TPO

HEWAD Reconstruction, Health and Humanitarian Assistance Committee (HEWAD)

International Medical Corps (IMC)

Move Welfare Organization (MOVE)

Organization for Health Promotion and Management (OHPM)



Delivering a world where
every pregnancy is wanted,
every childbirth is safe and
every young person's potential is fulfilled

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THE UNITED NATION'S
REPRODUCTIVE HEALTH
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