

General data of the country

a. General Data

Country	Afghanistan
Population ¹	34.6 million (2018, estimate)
HDI (2017)	0,498
IHDI	0,350
Maternal mortality (2018)	396
Gender-related	0.625
Development Index	0,025
Population within UNHCR	2378305
mandate	
INFORM index	7,8
Fragile State Index (2017)	107.9
GINI Index ²	27,8
Net official development	4 239
assistance received	4 233

b. Humanitarian law instruments ratified by the country

→ Mine Ban Treaty / Status: Ratified 11/09/2002
 → Convention on Cluster Munitions / Status: Ratified 08/09/2011
 → UN Convention on the Rights of Persons with Disabilities / Status: Ratified 18/09/2012

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 neighboring powers, and this situation persists even today. Afghanistan has borders with six different countries: China, Pakistan, Iran, Uzbekistan, Tajikistan and Turkmenistan. The current population of Afghanistan is 37 millions. 26.7% of the population is urban; the rest is living in rural area.

Afghanistan faces numerous political challenges as it fights the insurgency. In 2018, President Trump ordered the withdrawal of 7,000 American troops from the country.

Presence of HI 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

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¹ https://data.worldbank.org/indicator/SP.POP.TOTL,Data

² https://data.worldbank.org/indicator/SI.POV.GINI

1996. HI's work initially centered on mine action, particularly in the South and West regions, and physical rehabilitation via an orthopedic-fitting and rehabilitation center (PRC) in Kandahar. During these 21 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.

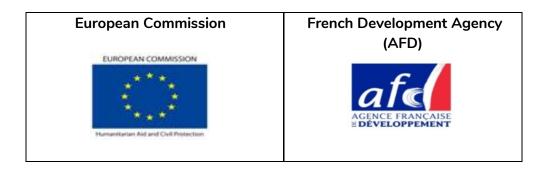
It has since expanded the scope of its work to include support to disabled people's organizations and victim organizations as well as the economic and social inclusion of people with disabilities. HI is a strong actor promoting and advocating for the rights of survivors and other people with disabilities 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 (MoPH) health facilities linked with the Basic Package of Health Services (BPHS) in rural communities in Herat – where HI is present since 2002, firstly to develop activities on Mine Risk Education (MRE) and providing rehabilitation services- and Kandahar provinces, and trained their personnel.

HI has improved service delivery and provided capacity-building for local actors, and is now moving forward by helping the Government of Afghanistan develop a curriculum and training courses for physiotherapy professionals and prosthesis and orthotics technicians based on recognized international standards.

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.

Projects

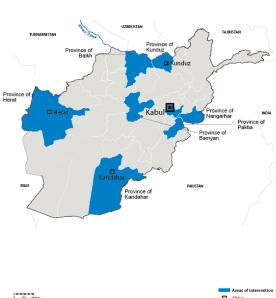
Designate	Areas of	Starting	Ending	Main donor(s)
Projects	intervention	date	date	with % funding
Strengthening P&O services in Underserved Area	Rehabilitation	01-12-	31-06-	EU (100%)
of Afghanistan (P&O)		2015	2019	
Emergency mental health, psychosocial support	Emergency	20-12-	19-06-	AHF (100%)
and physical rehabilitation services for drought	response	2018	2019	
affected	(Health &			
communities in Herat Province	Prevention)			
(Urgent physical rehabilitation and psychosocial support services for drought affected communities in Herat Province)				



HI team in Afghanistan

HI Afghanistan Program consists of 7 international and 181 national staff members.

Afghanistan



Overview of ongoing projects: Sectors of services where HI conducts projects and focus on operational partnerships

Sector	Objective of project in the sector	Main activities	Beneficiaries	Final Beneficiaries	Partner	Location
	Functional	Provision of comprehensive rehabilitation	4500 survivors	4500 survivors of	Ministry of	Kandahar,
	rehabilitation services	services, Provision of free of charge	of Conventional	Conventional	Public Health	Afghanista
	+ Gradual Handover	accommodation to PRC beneficiaries and	weapons and	weapons and other	(MoPH),	n
	of rehabilitation center	caregivers , Awareness-raising and capacity	other people	people with	Provincial	
Improving the	to Ministry of Public	building on identification and referral of patients,	with disabilities	disabilities and	Directorate of	
accessibility and	Health	Organization of and reporting on quarterly		24230 indirect	Public Health	
Quality of		review of PRC integration roadmap, Assessment		beneficiaries will	and Mirwais	
Rehabilitations		of PTs and PTAs' qualifications, skills and		benefit	Regional	
services		experience,			Hospital	
		Follow-up workshop on the Sustainability				
		Analysis Process (SAP), Organization and				
		implementation of training on rehabilitation				
		services´ management system (RMS)				
	To support the	-Training of physiotherapy cadre for On year	75 Students,	237 students to be	Ministry of	Kandahar
	government of	Diploma recognize by MOPH.	34 staff working	graduated as PT,	Public Health	and Herat,
	Afghanistan towards	-Support to the GIHS for institutionalization of	in this project	7 staff will get huge	(MoPH),	Afghanista
	the improvement of	this program	including	capacity on PT long	Provincial	n
Toward	delivery of public	-Advocacy toward central MOPH for expansion	teachers and	term training.	Directorate of	
Improved Access	health services	and promotion of rehabilitation services	support staff.	200 of clinical staff	Public Health	
to Quality		-Training of BPHS and EPHS implementers on	200 of clinical	and 120 staff of	and directors	
Rehabilitation in		how to manage disability cases including	staff and 120	Management will	of Regional	
Afghanistan		identification, counselling and referral	staff of	receive training	Hospital/	
(TIQRA)			Management	orientation	Region HIS/	
					AAPT/PTI and	
					GIHS	

	To Improve the	-Training of P&O technologist On year Diploma	19 Students	39 students to be	Ministry of	Herat
	coverage, availability	recognize by MOPH.	followed eligible	graduated as PT,	Public Health	province
	and quality of public	-Support to the GIHS for institutionalization of	criteria from	17 staff will get	(MoPH),	
	health services	this program	remotest area	huge capacity on	Provincial	
Strengthening	provided by the	-Advocacy toward central MOPH for expansion	12 staff working	P&O long term	Directorate of	
P&O services in	Government of	and promotion of rehabilitation services and	in this project	teaching skill.	Public Health	
Underserved	Afghanistan	Integration of P&O services in to EPHS	including		and directors	
Area of		-Training of BPHS and EPHS implementers on	teachers and		of Regional	
Afghanistan		how to manage disability cases including	support staff.		Hospital/	
(P&O)		identification, counselling and referral			Region HIS/	
		-Support the rehabilitation of WAK Hospital			AAPT/PTI and	
		including renovation and equipment's			GIHS	
	In Afghanistan,	-Institutional capacity building trainings:	Direct	Direct beneficiaries	DPOs, MMDA	Kabul,
	strengthen the rights	-Enhancing knowledge trainings:	beneficiaries	220		Herat,
	and the response to	-Empowering DPOs:	220	(100 female, 120		Kandahar,
	the needs of persons	-Support to line ministries and organizations:	(100 female,	male) and indirect		Nangarhar,
Victim	with disabilities and of	The line Ministries (MMDA, Ministries of Foreign	120 male) and	beneficiaries		Paktia,
Assistance	survivor's victims of	Affairs,	indirect	35000		Kunduz,
Advocacy	mines and explosive	-Strengthen coordination and collaboration	beneficiaries			Bamyan,
	remnants of war	among stakeholders:	35000			and Balkh
	through awareness	- Support the finalization of the MMDA Strategy				
	raising and capacity	2017-2026 and the disability law				
	building of disability	-Changing attitudes towards inclusion of				
	stakeholders.	survivors of mine and explosive remnants of war				
		and persons with disabilities into society				
		-Joint celebration of VA/disability events:				
		-Media coverage for the "Joint celebration of				
		VA/disability events":				
		-Community based disability awareness				
		campaigns				
		- support to Afghan Disability Network				
		-Emergency and Trauma Care Trainings:				
		-Lobbying with senior decision-makers and				

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	To provide relief to individuals and communities,	university/Ministry of Higher Education -Internship support to DPOs: -Mentoring and coaching DPOs: Awareness sessions PSS session (individual, familial, group)	In progress	7.875 individuals will benefit from Awareness, PT and	Ministry of Public Health, District of	Kunduz, Kandahar and Herat
	alleviating psychological distress, promoting autonomy and strengthening positive coping	Physical Rehabilitation session Risk Education sessions Referral Mechanism		PSS sessions 26.460 from risk education session to promote and adopt safe behaviors	actors, other	Province
Emergency PSS and home-based rehabilitation services	mechanisms, as well as to prevent the development of longer-term physical and mental impairments and reduce the risk of secondary complications			among IDP, returnees and the conflict affected communities at risk of mine/ERW/pressure plate-IED.	humanitarian actors (ICRC, SCA, MSF)	
Emergency PSS and rehabilitation services for drought affected populations in Herat Province	To provide relief to individuals and communities, alleviating psychological distress, promoting autonomy and strengthening positive coping mechanisms, as well as to prevent the development of longer-term physical	1Enhancing the existing health facilities to response to the increased needs. 2 Deploying emergency mobile teams that would treat those who cannot access the existing services 3 Establishing referral pathways between the mobile teams, the health structures and/ or other partners providing basic health care or basic needs (wash, nutrition, food, etc.) For this, four gender-balanced technical teams would be working part time in the IDP settlements and part time in the health structures in the following	In progress	7665 individuals. An individual can be benefited more than one services thus total estimated number of individual Beneficiaries with double counting are 18675.	AHF, MOPH, PPHD; ERM actors (DRC, NRC) Other humanitarian actors (ICRC, IRC, MSF, WV)	Herat Province
		<u> </u>				

	impairments and reduce the risk of	Gozara District: District hospital and IDP settlements				
	secondary complications	Herat City: Regional hospital, Naw Abad Public Health Clinic and IDP settlements				
	complications	Injil District: Kahdestan Public Health Clinic and IDP settlements				
Sector	Objective of project in the sector	Main activities	Beneficiaries	Final Beneficiaries	Partner	Location
Improving the accessibility and Quality of Rehabilitations services	Functional rehabilitation services + Gradual Handover of rehabilitation center to Ministry of Public Health	Provision of comprehensive rehabilitation services, Provision of free of charge accommodation to PRC beneficiaries and caregivers, Awareness-raising and capacity building on identification and referral of patients, Organization of and reporting on quarterly review of PRC integration roadmap, Assessment of PTs and PTAs' qualifications, skills and experience, Follow-up workshop on the Sustainability Analysis Process (SAP), Organization and implementation of training on rehabilitation services' management system (RMS)	4500 survivors of Conventional weapons and other people with disabilities	4500 survivors of Conventional weapons and other people with disabilities and 24230 indirect beneficiaries will benefit	Ministry of Public Health (MoPH), Provincial Directorate of Public Health and Mirwais Regional Hospital	Kandahar, Afghanista n
Toward Improved Access to Quality Rehabilitation in Afghanistan (TIQRA)	To support the government of Afghanistan towards the improvement of delivery of public health services	-Training of physiotherapy cadre for On year Diploma recognize by MOPHSupport to the GIHS for institutionalization of this program -Advocacy toward central MOPH for expansion and promotion of rehabilitation services -Training of BPHS and EPHS implementers on how to manage disability cases including identification, counselling and referral	75 Students, 34 staff working in this project including teachers and support staff. 200 of clinical staff and 120 staff of Management	237 students to be graduated as PT, 7 staff will get huge capacity on PT long term training. 200 of clinical staff and 120 staff of Management will receive training orientation	Ministry of Public Health (MoPH), Provincial Directorate of Public Health and directors of Regional Hospital/ Region HIS/ AAPT/PTI and GIHS	Kandahar and Herat, Afghanista n

	To Improve the	-Training of P&O technologist On year Diploma	19 Students	39 students to be	Ministry of	Herat
	coverage, availability	recognize by MOPH.	followed eligible	graduated as PT,	Public Health	province
			_	_		province
	and quality of public	-Support to the GIHS for institutionalization of	criteria from	17 staff will get	(MoPH),	
	health services	this program	remotest area	huge capacity on	Provincial	
Strengthening	provided by the	-Advocacy toward central MOPH for expansion	12 staff working	P&O long term	Directorate of	
P&O services in	Government of	and promotion of rehabilitation services and	in this project	teaching skill.	Public Health	
	Afghanistan	Integration of P&O services in to EPHS	including		and directors	
Underserved		-Training of BPHS and EPHS implementers on	teachers and		of Regional	
Area of		how to manage disability cases including	support staff.		Hospital/	
Afghanistan		identification, counselling and referral			Region HIS/	
(P&O)		-Support the rehabilitation of WAK Hospital			AAPT/PTI and	
		including renovation and equipment's			GIHS	
	In Afghanistan,	-Institutional capacity building trainings:	Direct	Direct beneficiaries	DPOs, MMDA	Kabul,
	strengthen the rights	-Enhancing knowledge trainings:	beneficiaries	220		Herat,
	and the response to	-Empowering DPOs:	220	(100 female, 120		Kandahar,
	the needs of persons	-Support to line ministries and organizations:	(100 female,	male) and indirect		Nangarhar,
	with disabilities and of	The line Ministries (MMDA, Ministries of Foreign	120 male) and	beneficiaries		Paktia,
	survivor's victims of	Affairs,	indirect	35000		Kunduz,
	mines and explosive	-Strengthen coordination and collaboration	beneficiaries			Bamyan,
	remnants of war	among stakeholders:	35000			and Balkh
\wedge	through awareness	- Support the finalization of the MMDA Strategy				
	raising and capacity	2017-2026 and the disability law				
	building of disability	-Changing attitudes towards inclusion of				
Victim	stakeholders.	survivors of mine and explosive remnants of war				
Assistance		and persons with disabilities into society				
Advocacy		-Joint celebration of VA/disability events:				
,,		-Media coverage for the "Joint celebration of				
		VA/disability events":				
		-Community based disability awareness				
		campaigns				
		- support to Afghan Disability Network				
		- Support to Algrian Disability Network -Emergency and Trauma Care Trainings:				
		,				
		-Lobbying with senior decision-makers and				

		university/Ministry of Higher Education				
		-Internship support to DPOs:				
	T	-Mentoring and coaching DPOs:		7.075		
	To provide relief to	Awareness sessions	In progress	7.875 individuals will	Ministry of	Kunduz,
	individuals and			benefit from	Public Health,	Kandahar
	communities,	PSS session (individual, familial, group)		Awareness, PT and	District of	and Herat
	alleviating	Physical Rehabilitation session		PSS sessions	Public Health,	Province
	psychological distress,			26.460 from risk	DMAC,	
	promoting autonomy	Risk Education sessions		education session to	Regional	
	and strengthening			promote and adopt	hospitals, ERM	
Emorgonov	positive coping	Referral Mechanism		safe behaviors	actors, other	
Emergency PSS and home-	mechanisms, as well			among IDP,	humanitarian	
	as to prevent the			returnees and the	actors (ICRC,	
based	development of			conflict affected	SCA, MSF)	
rehabilitation	longer-term physical			communities at risk		
services	and mental			of		
	impairments and			mine/ERW/pressure		
	reduce the risk of			plate-IED.		
	secondary					
	complications					
	To provide relief to	1.Enhancing the existing health facilities to	In progress	7665 individuals.	AHF, MOPH,	Herat
	individuals and	response to the increased needs.		An individual can be	PPHD;	Province
	communities,	2. Deploying emergency mobile teams that		benefited more than		
	alleviating	would treat those who cannot access the		one services thus	ERM actors	
Emergency	psychological distress,	existing services		total estimated	(DRC, NRC)	
PSS and	promoting autonomy	3. Establishing referral pathways between the		number of individual	Other	
rehabilitation	and strengthening	mobile teams, the health structures and/ or other		Beneficiaries with	humanitarian	
services for	positive coping	partners providing basic health care or basic		double counting are	actors (ICRC,	
drought	mechanisms, as well	needs (wash, nutrition, food, etc.) For this, four		18675.	IRC, MSF,WV)	
affected	as to prevent the	gender-balanced technical teams would be				
populations in	development of	working part time in the IDP settlements and				
Herat Province	longer-term physical	part time in the health structures in the following				
Tierat Flovilice	and mental	locations:				

HI -Afghanistan Country Card- 2019 07

impairments and	Gozara District: District hospital and IDP
reduce the risk of	settlements
secondary	Herat City: Regional hospital, Naw Abad Public
complications	Health Clinic and IDP settlements
	• Injil District: Kahdestan Public Health Clinic and
	IDP settlements