

# Country Profile On Nutrition 07/2024



### **AFGHANISTAN**

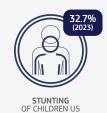
#### **Nutrition situation in Afghanistan**

#### **AT A GLANCE**

The population of Afghanistan is currently just over 42 million people<sup>1</sup>, with around 75% living in rural areas. According to the most recent nutrition survey in 2023, Afghanistan has apparently made some progress towards reaching the international stunting target for 2025 but wasting rates are worsening<sup>2</sup>. Despite this, around one third of children in Afghanistan are estimated to be stunted in the world, with substantial variation across provinces. Deficiencies in micronutrients, including iodine, Vitamin A, Vitamin D and iron, are widespread. Only 15.5% of Afghan children aged 6-23 months received a minimally adequate diet<sup>3</sup>. According to a recent analysis by WFP<sup>4</sup>, the causes of persistent malnutrition in

Afghanistan include acute food insecurity and high prevalence of communicable diseases, underpinned by poor hygiene practices and sanitation, lack of access to health services particularly at outreach and community level, low socioeconomic status, social and cultural norms, natural disasters and years of conflict. Afghanistan has a Gender Inequality Index of 0.665 with a ranking at 162 out of 166 countries (2022); reflecting a rapidly worsening situation for women in Afghanistan. Extreme restrictions imposed on women in Afghanistan since the regime change impact access to health services including reproductive maternal newborn child and adolescent health and nutrition.

#### DATA ON ALL FORMS OF MALNUTRITION<sup>5</sup>













NO PROGRESS OR WORSENING

The data reported in the 2023 EU Nutrition Country Profiles is drawn from the UNICEF/WHO/World Bank Joint Child Malnutrition Estimates and the Global Nutrition Report (GNR).

#### **NUTRITION GOVERNANCE**

- Governance structures and most high-level coordination platforms established under the previous government, such as the High-level Food Security and Nutrition Steering Committee and the Food Security and Nutrition Technical Committee, are no longer functional.
- The role of stewardship and governance for nutrition lies under the de facto Ministry of Public Health (MOPH), which is accountable for maintaining the health status of Afghans through actions to improve Infant and Young Child Feeding and care practices, management of acute malnutrition, infectious disease control, provision of micronutrients, prevention of nutrition-related illness and promotion of food safety.
- The National Nutrition Cluster is the largest forum, led by partners and chaired by UNICEF with the de facto MOPH invited to participate on an ad hoc basis. Its aim is to ensure a more coherent and effective humanitarian response in worst-affected areas, while promoting and upholding Humanitarian Principles and the Principles of Partnership, to reduce mortality, morbidity and disability. At national level, the focus is mainly on coordination and alignment of efforts of both national and international agencies. The Health Strategic Technical Working Group (H-STWG) acts as the high-level health governance and coordination forum, where donors and UN discuss challenges, opportunities and coordinate their mandates.

#### **Example of EU support**

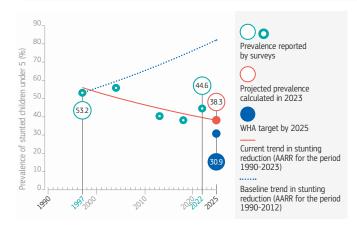
The EU invested EUR 35 million in a project to mitigate the effects of COVID-19 through nutrition, WASH and protection from January 2021 through December 2023. The project aimed to reduce nutritional risks through strengthened Maternal, Infant and Young Child Nutrition services as well as services to treat acute malnutrition.

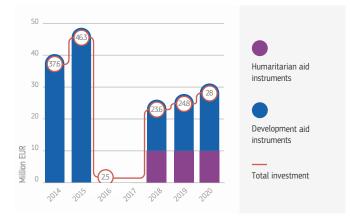
As a result, some 950 000 children and 270 000 adolescents were reached with community nutrition services; 234 000 children under five and 247 500 breastfeeding women were supported by mobile nutrition teams and 115 900 children under five were screened for acute malnutrition by community health workers (CHWs). A total of 17 800 children in urban settings benefited from inpatient and outpatient treatment for severe acute malnutrition (SAM).

In total, 50 urban day care centres were set up in Kabul, increasing access to nutrition and health services. Some 270 700 adolescent girls aged 10-19 years benefited from the weekly Iron Folic Acid Supplementation programme, in five targeted provinces. CHWs in three targeted provinces were trained in the use and distribution of Micronutrient Powders (MNPs) and more than 353 000 children aged 6-59 months received MNP supplementation.



#### Progress on the two EU pledges for nutrition





## TREND, PROJECTION AND TARGETS IN THE PREVALENCE AND NUMBER OF CHILDREN (U5) STUNTED

Within the framework of the Afghanistan Food Security and Nutrition Strategic Plan (2019-2023), the previous Government of Afghanistan committed to reduce stunting to below 24.5% by 2023. In addition, Afghanistan experienced a strong decline in the prevalence of stunting and a reduction in the number of children stunted since 2004. However, since the change of regime in 2021, it is unclear whether the current de facto authorities have committed to the nutrition strategic plan and targets developed by the previous government. Based on the reports by the UN and other humanitarian actors, acute food insecurity and high rates of communicable diseases make it unlikely that the government or WHA targets for stunting will be met if the current humanitarian situation in Afghanistan persists. Available estimates suggest that 2.3 million children will be stunted by 2025

## EU FINANCIAL COMMITMENTS TO NUTRITION BETWEEN 2014 AND 2020 - A TOTAL OF EUR 139 MILLION

EU commitments for nutrition between 2014 and 2020 included EUR 55 million in humanitarian assistance for nutrition. Commitments for nutrition-sensitive agriculture (2014 and 2015) amounted to EUR 56.9 million from development aid instruments. The project 'EU support to Agriculture and Rural Development in Afghanistan' supported the formulation of bottom-up investment packages for improved food security, increased farmers' income and the promotion, production and consumption of diversified nutrient-rich foods. Commitments for nutrition interventions in the health sector (2014, 2015, 2018, 2019 and 2020) amount to EUR 50.6 million, which includes 10.5 million for nutrition as part of the support to the COVID-19 response in 2020. During 2021, the EU invested EUR 185.8 million in nutrition-related interventions through humanitarian aid instruments and EUR 68 million through development aid instruments. 2022 saw a drop in EU investment, with EUR 15 million invested in nutrition through humanitarian aid instruments.

#### Planning for nutrition 2021-2027

In line with the first pillar of the Joint Framework for International Partner Support in Afghanistan, the Health Sector Transition Strategy (HSTS) 2023-2025 was developed and endorsed by the H-STWG in October 2023. This was developed under the leadership of the H-STWG, which brings health partners together, particularly key donors (including, to improve the quality, effectiveness and coordination of strategic, operational and financial priorities for basic needs assistance in the health and nutrition sector). The EU was engaged in this process and its current support is in line with the strategic directions of the HSTS. Strengthening and expansion of essential service coverage and utilisation and ensuring Quality of Care is the first of three strategic directions and nutrition forms a key component of this. The HSTS is a guide for actors concerned with the health sector, in developing their strategic and operational plans for the next two years. Future support from the EU is dependent on a number of factors, including developments in the political and security situation.

Priority nutrition interventions (population-level assessment for malnutrition, prevention and treatment of malnutrition, surveillance and referral) in the Basic Package of Health Service (BPHS) and Essential Package of Hospital Services (EPHS) are covered under component 1 of the Health Emergency Response (HER) project, funded by the pooled fund Afghanistan Reconstruction Fund (ARTF), to be further strengthened through additional support. Until August 2021, the EU was among the three largest donors to ARTF health project and also supported over 100 Mobile Health and Nutrition Teams through ECHO and INTPA funds provided to UNICEF. Although not currently funding the HER project, the EU intends to explore future funding possibilities. The project currently employs around 2 300 Nutrition Counsellors (NC), who provide services to mothers and children in BPHS and EPHS health facilities across the country, as well as community outreach services.

A new EUR 10 million project has been signed in November 2023, as a continuation of the previous response to COVID-19, to tackle communicable diseases through Water, Sanitation and Hygiene (WASH) interventions and respond to health and nutrition emergencies. This includes emergency nutrition support through inpatient treatment for complicated severe acute malnutrition. The EUD will also commence a new EUR 15 million nutrition and WASH project in partnership with UNICEF, which will pilot some new nutrition interventions to tackle high levels of anaemia in adolescent girls, as well as extending the existing nutrition surveillance system to additional provinces.

- 1 UNDESA World Population Prospects, population estimate of July 2023
- 2 Afghanistan SMART Survey UNICEF 2023.
- 3 Afghanistan Nutrition Landscape Information System (NLiS) 2015
- 4 https://www.ipcinfo.org/fileadmin/user\_upload/ipcinfo/docs/IPC\_Afghanistan\_Acute\_Malnutrition\_ Oct2022\_Apr2023\_report.pdf
- 5 A MICS survey was also conducted in 2023 and found different results with regards to prevalence of stunting (44.7%) and wasting (3.7%) in children under five years of age in Afghanistan. The SMART survey results have been presented in this endnote here as they have been validated by the UN Joint Malnutrition Estimates (IME).