

EUROPE, MIDDLE EAST, AND CENTRAL ASIA



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Left Photo
Flooding damaged a bridge in the Czech Republic.
(Photo by USAID/OFDA staff)

Right Photo
Emergency shelter kits are unloaded in Afghanistan.
(Photo by Jim Nuttall, USAID/OFDA)

Afghanistan

Complex Emergency

A decade-long Soviet occupation and ensuing civil strife left Afghanistan impoverished and mired in an extended humanitarian crisis. Government infrastructure, including the ability to deliver the most basic health, education, and other social services, collapsed. Severe restrictions by the ruling Taliban, including a ban on women working outside the home, added to the effects of poverty, particularly on the many households lacking working age men. A devastating regional drought compounded the humanitarian situation. The drought dried up wells, parched agricultural land, killed off livestock, collapsed rural economies, and eventually exhausted the coping mechanisms of many Afghans, forcing them to leave their homes in search of food and potable water. More than one million Afghans were internally displaced by the drought and civil war.



Afghan villagers inspect a USAID/OFDA-funded solar water heater unit (photo by Tom Dolan, USAID/OFDA).

Following the terrorist attacks against the United States on September 11, 2001, fear of a U.S. reprisal against al Qaeda and their Taliban hosts triggered a new exodus from major Afghan cities, adding to the number of internally displaced Afghans. Further exacerbating the crisis, the Taliban ordered the departure of all foreigners, including the expatriate staffs of international humanitarian relief agencies. Those relief programs that were able to continue to function with local staffs were impeded in their

work by rising lawlessness and Taliban harassment. Relief agencies predicted that the growing crisis would severely affect up to six million Afghans, making them reliant on international humanitarian assistance.

On October 7, 2001, the U.S.-led Coalition began a military campaign in Afghanistan against al Qaeda and Taliban forces. At the same time, the military forces of the Northern Alliance based in the northeast of the country intensified their war efforts against the Taliban. Several hundred thousand Afghan refugees crossed into Pakistan, and much larger refugee flows that had been anticipated did not materialize. Despite the onset of war, WFP managed to resume its emergency food operation in October with the goal of delivering 50,000 MT of food per month.

By December 2001, Taliban rule had collapsed. The new Afghan Interim Authority (AIA) led by Hamid Karzai was sworn in on December 22, 2001. With the Taliban's fall, humanitarian access to the country greatly increased and the process of rehabilitation and recovery began.

More than 100,000 Afghans formerly displaced along the front lines of the civil war in the northeast spontaneously returned to their homes to rebuild from near total devastation. Another 230,000 Afghans internally displaced in the northern, western, and central highland provinces by drought were assisted in returning to their places of origin by IOs and NGOs providing transport and reintegration packages of food and non-food relief items.

In the months following the fall of the Taliban, several hundred thousand Afghan refugees living in Pakistan, Iran, and other areas of Central Asia spontaneously returned to Afghanistan. An additional 1.7 million Afghan refugees, 1.5 million living in Pakistan, were assisted by UNHCR in returning home through its program of voluntary repatriation. One of the greatest challenges for the international community and the new Transitional Islamic State of Afghanistan, inaugurated after the emergency *Loya Jirga* (Grand Council), in June 2002, was to provide sufficient reintegration assistance to returned Afghans in their villages

to prevent a new wave of displacement as winter approached.

A famine was averted at the end of 2001, and crop yields increased 82 percent during the summer of 2002. Afghans, however, continued to be vulnerable to the adverse impacts of drought, rural indebtedness, loss of productive assets, lack of purchasing power, water shortages, insecurity, and ethnic persecution.

On October 4, 2001, U.S. Assistant Secretary of State for South Asian Affairs Christina B. Rocca redeclared a disaster for FY 2002 due to the continuing humanitarian crisis in Afghanistan. USAID/OFDA responded with emergency humanitarian assistance in the form of grants and in-kind contributions to U.N. agencies, IOs, and NGOs totaling \$113.3 million. A USAID/DART, which had deployed to Pakistan in June 2001, coordinated humanitarian assistance with the Pakistan-based Afghanistan international relief community. Other USAID/DARTs were deployed to Tajikistan, Turkmenistan, and Uzbekistan to coordinate logistics and the delivery of relief assistance into Afghanistan. In January 2002, the USAID/DART in Pakistan relocated to Kabul, where it continued to coordinate and assess humanitarian needs until being deactivated on June 7, 2002. The USAID/DART was replaced by the USAID/OFDA Program Office in Kabul.



Residents of Bagram, Afghanistan constructed a well as part of a USAID/OFDA-funded water program (photo by David Plack, USAID/OFDA).

USAID/OFDA supported the basic needs of IDPs and other vulnerable Afghans through funding for the emergency provision of food, water, shelter, and non-food necessities by its NGO and IO implementing partners including: \$2.5 million to ICRC for emergency assistance nationwide; \$6.9 million to ACTED for assistance in the northeastern region; \$988,087 to CRS and \$1.4 million to Focus/Aga Khan Foundation for assistance in the central highlands; \$3.3 million to SCF/US for assistance in the central and northern areas; \$3.9 million to CARE for assistance in the central and southern regions; \$3 million to Mercy Corps for assistance in the northeast and southern regions; \$7.1 million to GOAL for assistance in the northern region; \$4.6 million to IOM and \$6.9 million to IRC for assistance in the northern and western areas; and \$3.6 million to Shelter For Life (SFL) for assistance in the western and northeastern regions.

USAID/OFDA also supported health and nutrition programs, including: \$4.2 million to UNICEF for nutrition, health, vaccinations, and water and sanitation programs nationwide; \$8 million to IMC for primary and mother/child health care in the central and western regions; \$1.7 million to ACF/F for health, nutrition, and water programs in the central highlands; \$2.3 million to SCF/US for health and nutrition programs in the central and northern regions; \$1 million to CARE for water and health programs in the central and southern regions; and \$201,868 to Tufts University for a food security and livelihoods assessment.

USAID/OFDA supported the agricultural sector and other income-generating rehabilitative work in rural areas, including: \$4.2 million to FAO for seed distribution and locust eradication in the north; \$2.5 million to the International Center for Agricultural Research in Dry Areas (ICARDA) for seed multiplication; \$3.7 million to Mercy Corps for rural rehabilitation in the southern and northeastern regions; \$2.9 million to CONCERN for agricultural rehabilitation and income generation in the northeastern region; \$1.7 million to Solidarities for rural rehabilitation in the central highlands; \$1.5 million to GOAL for rural rehabilitation and to improve winter access in the northern area; \$1.3 million to IRC for rural rehabilitation in the northern