

## Conflict-induced displacement in the southern provinces

### CRISIS IMPACT OVERVIEW

- The Taliban and the Afghan National Security Forces (ANSF) have been fighting in Helmand province since 11 October (OCHA 13/10/2020, Ministry of Defense Afghanistan 10/11/2020). Since 28 October, the fighting has moved across southern Afghanistan, affecting Kandahar and Uruzgan provinces (OCHA 05/11/2020).
- Initial reports suggested that 35,000 people had been displaced in Helmand province; humanitarian assessment teams have subsequently verified 15,236 displaced people (BBC 15/10/2020; AlJazeera 19/11/2020; OCHA 18/11/2020). Three health facilities remain closed and ten are partially open, providing limited services. Over 87,000 people are directly affected by the closure of health facilities with a further 195,000 only able to access limited services (OCHA 05/11/2020).
- In Kandahar province, 16,000 people have been displaced from various districts into Kandahar city and Dand district, with 3,500 people verified by humanitarian assessment teams. Mobile health teams, which were originally operating in the area, have suspended their operations, limiting 20,000 people from accessing essential health services (OCHA 05/11/2020).
- In Uruzgan province, 10,000 people were confirmed displaced on 18 November but the current number remains unclear. Active conflict has destroyed Dehrawud district hospital, affecting some 30,000 people. The suspension of humanitarian activities in the district is likely to severely affect access to WASH, shelter, and COVID-19-related support (OCHA 05/11/2020; Ministry of Defense Afghanistan 12/11/2020).
- Although a number of IDPs are reported to have returned home since the start of the fighting, actual numbers and needs remain unclear. Based on available data, those displaced have largely moved across districts within their province of origin (OCHA 23/11/2020).
- The effect of active conflict on those living in the area is unknown. Humanitarian assessment up until this point has focused on the immediate needs of IDPs.

### HUMANITARIAN CONSTRAINTS

- In Helmand province, roads between Lashkargah and Nawa-e-Barakzai, Nad-e-Ali, and Nahr-e-Saraj, as well as the Lashkargah-Kandahar highway, remain closed or are blocked by armed checkpoints controlled by non-state armed groups (Al Jazeera 19/11/2020; OCHA 18/11/2020).
- IEDs are present on major roads in all three provinces, constraining humanitarian operations. Humanitarian workers report they have used side roads, which increases the risk of being targeted (Ministry of Defense Afghanistan 24/11/2020; OCHA 18/11/2020; Counter-IED Report 30/11/2020).
- Phone networks across the three provinces are limited or non-existent, preventing the smooth flow of information (OCHA 18/11/2020).

### ANTICIPATED SCOPE AND SCALE

The fighting that started on 11 October is ongoing, with no signs of abatement. Both the Taliban and ANSF continue to launch offensives against each other. The fighting may cause further displacement and continue to hinder access to essential health services, shelter, food, and livelihood opportunities. Throughout Afghanistan, humanitarian response and the provision of essential services to those most in need is already limited given continuing conflict, the high number of returnees, seasonal flooding throughout August, and the COVID-19 pandemic. These factors are expected to persist.

### KEY PRIORITIES

#### **61,000 people displaced**

the number remains to be verified

#### **Closure of health facilities**

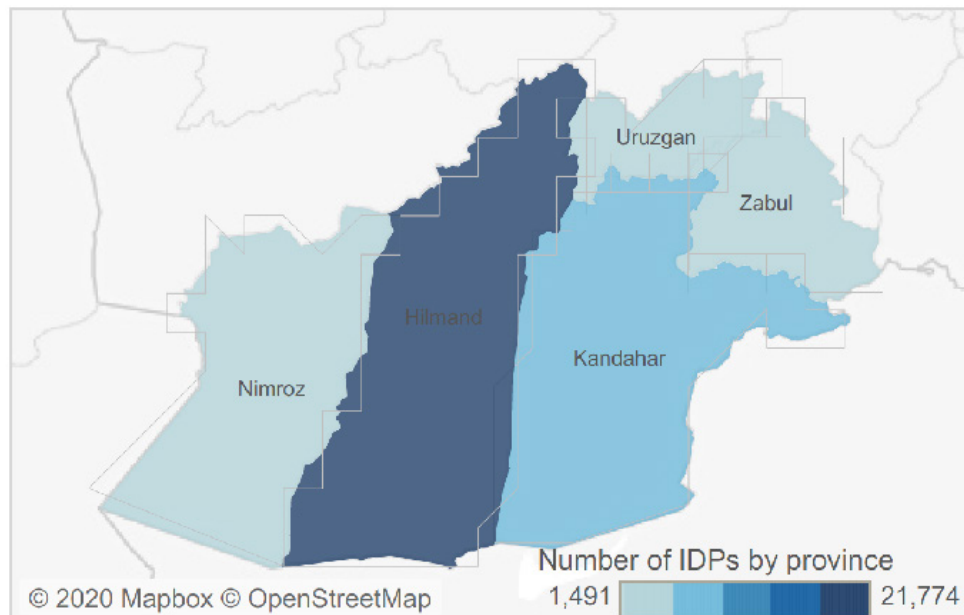
preventing thousands from accessing services

#### **Long-term food insecurity**

is a major concern with 1.5 million people across Helmand, Kandahar and Uruzgan facing Crisis level or above (IPC Phase 3)

## CRISIS IMPACT

### Province of displacement



Source: OCHA 29/11/2020

### Health

- At 5 November, three health facilities were closed and nine partially open in Helmand province, though this remains to be confirmed (BBC 15/10/2020; Al Jazeera 19/11/2020). The total closure affects 87,000 people, with more than 195,000 only having access to limited services (OCHA 18/11/2020).
- Five mobile health teams have temporarily suspended their activities in Maywand and Zharey districts, Kandahar province. This affects 20,000 people, who will be temporarily unable to access essential health services (OCHA 18/11/2020)
- In Uruzgan province, active conflict and airstrikes destroyed Dehrawud district hospital, affecting 30,000 people's access to essential health services (OCHA 21/10/2020; Ministry of Defense Afghanistan 12/11/2020).
- Civilians are continuously targeted across the three provinces. Victims of the conflict have included pregnant women, journalists, and human right defenders (MSF 15/10/2020; HRW 12/11/2020; BBC 15/10/2020). The total number of civilian casualties is unclear but

the WHO estimated that between 11 and 20 October some 300 civilians were wounded, giving an indication of the scale of the direct impact on civilians (OCHA 21/10/2020; RiV Monitoring 30/11/2020). Rocket attacks, car bombs, and airstrikes continue across all three provinces (Reporterly 11/20/2020)

### WASH

- WASH needs have increased due to active conflict and the number of displaced people (BBC 15/10/2020; OCHA 22/11/2020). The partial or total suspension of humanitarian activities has increased pressure on a reduced number of humanitarian actors.
- Verified IDPs have received support; however, several thousand remain unidentified and are likely to need WASH assistance.
- Only 10% of IDPs surveyed had access to soap and/or hand sanitiser across the three provinces in October according to data assessing the needs of displaced people (Emergency Response Mechanism (ERM 10) HEAT Assessment Data, 2020, available from: **Reach Resource Centre**). Access to water did not seem to be an issue, with a majority of IDPs stating they had access to a hand pump less than 500 metres away. The lack of access to soap is particularly concerning given that almost all those surveyed understood the importance of handwashing as good practice to prevent exposure to COVID-19.

### SHELTER and NFI

- Shelter availability and access to adequate shelter remains limited (Al Jazeera 19/10/2020). The government has established temporary shelter for people displaced by the fighting, but the number of shelters and the exact location of these is unclear (OCHA 01/11/2020; OCHA 21/10/2020).
- A number of IDPs are staying in markets. It is unclear whether these are open or closed markets and to what extent they will be exposed to the upcoming winter weather (OCHA 21/10/2020).
- IDPs displaced throughout October in Kandahar and Helmand provinces, the majority of whom are living in makeshift shelters, are either renting, squatting, being hosted by extended family/friends/communities, or living in tents (Emergency Response Mechanism (ERM 10) HEAT Assessment Data, 2020, available from: **Reach Resource Centre**).
- The biggest concern for those squatting or living in tents is the lack of insulation. This is particularly concerning given the upcoming winter. For those renting or being hosted, the biggest concerns are being evicted and the size of the shelter (Emergency Response Mechanism (ERM 10) HEAT Assessment Data, 2020, available from: **Reach Resource Centre**).



- All those surveyed need gas cylinders and mattresses, and a large majority need tarpaulin, cooking pots and utensils, water containers, and clothes (Emergency Response Mechanism (ERM 10) HEAT Assessment Data, 2020, available from: [Reach Resource Centre](#)).
- Only 3 of 130 households surveyed in October in Kandahar and Helmand provinces had received any form of assistance since being displaced (Emergency Response Mechanism (ERM 10) HEAT Assessment Data, 2020, available from: [Reach Resource Centre](#)). The majority had taken on debt to pay for food or rent.

## Food

- IDPs reported relying heavily on bread, rice, potatoes, and pulses/nuts, as they were unable to afford fruit, meat, fish, eggs, or milk or dairy products. This is partly linked to above average livestock prices, and access constraints (The New Humanitarian 07/04/2020; FEWS NET 26/11/2020; Emergency Response Mechanism (ERM 10) HEAT Assessment Data, 2020, available from: [Reach Resource Centre](#)).
- In the seven days prior to the HEAT survey, IDPs used coping mechanisms such as relying on less expensive food, borrowing food, limiting portion size, restricting adult consumption to cater for children, or reducing the number of meals per day (Emergency Response Mechanism (ERM 10) HEAT Assessment Data, 2020, available from: [Reach Resource Centre](#)).
- In Arghandab district, Kandahar province, fighting has severely disrupted the harvesting of pomegranates – a major source of livelihood for farmers in the area (NYT 22/11/2020). This is likely to have wider impacts on the export to India and Pakistan, and to increase financial hardship on people in Arghandab district.
- IDPs in urban areas often rely on irregular daily wage labour and unsustainable sources of income, which often results in an inability to buy food and consequently reduced food intake (IPC 11/2020).

## Education

- Two schools in Uruzgan province, one of which is in Dehrawud district and the other unknown, have been affected by clashes (Pajhwok News 13/11/2020, OCHA 05/11/2020). It remains unclear whether they were destroyed, damaged, or simply closed due to insecurity.
- In Kandahar and Helmand, none of the children that have been displaced in the last month have attended school. This is due to lack of documentation and distance from the nearest functioning school (Emergency Response Mechanism (ERM 10) HEAT Assessment Data, 2020, available from: [Reach Resource Centre](#)).

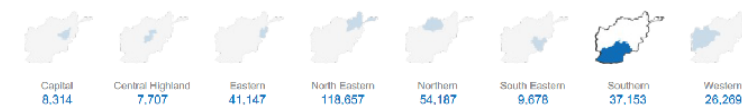
## AGGRAVATING FACTORS

### Violence in the rest of the country

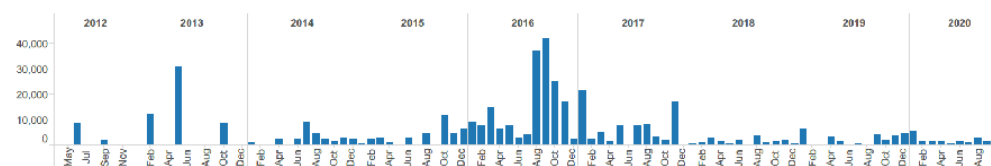
Between 1 January and 30 September 2020, 5,939 civilian casualties (2,117 killed and 3,822 injured) were recorded across Afghanistan due to conflict (UNAMA 27/10/2020). Children account for 1,848 of these casualties (Save The Children 27/10/2020). Active conflict has caused internal displacement across the whole country, particularly northern, northeastern, eastern, and western regions. Between March and July, the geographical pattern of violence shifted, with more violence in the north and west. Recent violence in the south has increased rates of displacement similar to those observed in November 2017, when Helmand was at the epicentre of fighting (Afghanistan Analysts Network 16/08/2020).

### Displacement over time in southern provinces

Regional overview (click on the maps below to filter by region)



Monthly trends (2012 to 2017)



Source: OCHA 29/11/2020

### Food security

Food insecurity across Afghanistan is widespread. Across the country 13.1 million people are expected to face Crisis levels (IPC Phase 3 or higher) between November 2020 and March 2021. See Table 1 below for a breakdown of the Crisis phase each province is facing. The projection across these three provinces is primarily (but not exclusively) driven by a deterioration of the security situation in recent months, resulting in a loss of assets, loss of livelihood opportunities, and reduced wages (IPC 11/2020).



## IPC population table for projection period November 2020–March 2021

PROVINCE (TOTAL POPULATION ANALYSED)	CRISIS (PHASE 3)		EMERGENCY (PHASE 4)		PHASE 3+	
	# PEOPLE	%	# PEOPLE	%	# PEOPLE	%
Helmand (urban) (10,361)	40,144	40	15,054	15	55,198	55
Helmand (1,345,869)	538,348	40	201,880	15	740,228	55
Kandahar (urban) (4,459,463)	156,978	30	104,652	20	261,630	50
Kandahar (876,335)	175,267	20	131,450	15	306,717	35
Uruzgan (436,079)	109,020	25	109,020	25	218,040	50

Source: IPC 11/2020

### Winter season

The upcoming winter season is expected to bring distress to IDPs who lack food, fuel and insulation within their shelters. Households tend to adopt negative coping mechanisms when they are unable to meet needs, which, in addition to reduced food consumption, include borrowing and becoming trapped in debt (REACH 06/2020). Winter also brings increased transportation costs and difficulty in accessing certain areas, which results in increased overall cost of food (IPC 11/2020). There is a need for winterisation assistance, particularly for 30,000 people in Lashkargah as reported by local authorities (OCHA 22/11/2020).

### Refugee returnees

There have been 324,124 voluntary (39.1%) returns and deportations (60.1%) from Iran at the Nimroz border since 1 January 2020 (IOM 14/11/2020). Nimroz province borders both Helmand and Uruzgan provinces, meaning that returnees face high levels of insecurity upon their return (The New Humanitarian 30/09/2020). This limits their ability to move around freely, particularly if they wish to continue their travel to other provinces. Reports from returnees suggest they left either Pakistan or Iran due to lost work and wages, discrimination, restrictions on movement (voluntary returnees), and lack of access to medical services (OCHA 22/10/2020). Returnees often face debt and struggle to reintegrate due to lack of employment and housing opportunities (UNHCR 08/2020). When they do receive services, these often lack in reliability and quality (UNDP 06/2020). Since the start of 2020, the number of returnees have increased, despite the closure of several border crossings due to COVID-19

(IOM 14/11/2020). It is particularly difficult to keep track of these returns due to the fluidity of the movement. A number of recent returnees lack formal documentation and, in most cases, go back to Iran within a month of their return to Afghanistan (UNHCR 31/10/2020). This raises concerns regarding access to assistance due to a lack of documentation in both Afghanistan and the country of residence.

### COVID-19

Fighting since October has further compounded the issue of restricted access to healthcare owing to the COVID-19 pandemic. Health facilities have struggled to cope with the number of positive cases since March, and are now also dealing with injuries and trauma cases (BBC 15/10/2020; MSF 15/10/2020; OCHA 05/11/2020). There is a shortage of PPE, medical supplies, and equipment, which were already limited prior to the COVID-19 outbreak (OCHA HRP 06/2020). Since the end of November, the number of COVID-19 cases in Afghanistan has increased, with the government unlikely to enforce strict containment measures. COVID-19 is likely to continue to affect people's ability to earn income or receive remittances, while their healthcare costs increase (FEWS NET 26/11/2020).

## CONTEXTUAL INFORMATION

### Peace talks

The Taliban and the US signed a peace deal on 29 February 2020, after more than two years of negotiations. The deal outlined a timeline for the release of 5,000 Taliban political prisoners held by the Afghan government in exchange for 1,000 members of the Afghan security forces held prisoner by the Taliban (France24 06/07/2020). In addition, over the past few months the US has withdrawn thousands of troops, with the last expected withdrawal on 15 January 2021. This would leave 2,500 US troops in the country, down from the current 4,500 (BBC News 18/11/2020).

After several months of disagreement over the deal, particularly surrounding prisoner release and the Afghan government not being present in the discussions, the peace deal paved the way for intra-Afghan talks. The official talks – which brought officials from the Afghan government and the Taliban together for the first time in over 19 years – started on 12 September (Al Jazeera 05/10/2020). The peace talks are currently stalled, with no solution in sight. This is partly the result of the Taliban unofficially launching their spring offensive – the seasonal renewal in fighting that has occurred since 2005. Violence has subsequently increased, with the number of unclaimed attacks rising, and ground exchanges intensifying. As the US has withdrawn troops, the Taliban has launched counter offensives to claim land



that has been in government control for years (The Liaison Office 11/2020; Washington Post 21/11/2020). The government continues to deploy forces across the three provinces. It was supported by US airstrikes in Helmand province in October and now in Kandahar province (ICG 11/08/2020; Washington Post 21/11/2020).

In an effort to bring donor attention back to Afghanistan, the 2020 Afghanistan Conference held in Geneva between 22 and 23 November brought 66 countries and 32 organisations together (The New Humanitarian 23/11/2020). Participants continued to stress the importance of a peace process being Afghan-led, Afghan-owned, and supported by the international community. In addition, inclusivity was argued as key to a long-lasting peace, and both political and humanitarian participants argued for the inclusion of women, youth, and ethnic and religious minorities in discussions (UNAMA 24/11/2020).

The Taliban has not yet commented on the event, co-hosted by the UN, the Finnish government, and the Afghan government.

### **Local and national response capacity**

Afghan Planning Agency, Afghanistan National Disaster Management Authority, Department of Refugees and Repatriation, Humanitarian Action for People of Afghanistan (OCHA 22/11/2020).

### **International response capacity**

OCHA, WFP, IOM, IRC, UNHCR, UNICEF, NRC, DRC, MSF, Action Against Hunger, Danish Committee for Aid to Afghan Refugees (OCHA 22/11/2020).

## **INFORMATION GAPS AND NEEDS**

- Information gaps include the number of health facilities that are partially or totally closed, and the location of these health facilities. The number affected by the closure of health facilities is not exact and only provides a rough indication of the scale of the effect of the conflict on health services. Lastly, the exact location of those displaced is unclear based on the secondary data available. Due to the nature of the conflict, the number of displaced is constantly changing as well as the needs associated with those displaced.
- The effects of active conflict on those that live in the affected area is unclear with little to no information on their needs and the protection concerns they face.

It is unclear to what extent those surveyed in the Emergency Response Mechanism in October and early November were previously displaced or are those verified as displaced by OCHA due to current conflict across the three provinces. However, the data from the Emergency Response Mechanism gives a clear indication of the needs associated with short-term displacement and provides an important insight into gaps in response.

This report provides an overview of the conflict in the southern provinces of Afghanistan as at 30 November 2020. The situation is being closely monitored and any significant changes will result in an updated version of this report.