



Council of the
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NOTE

From:	General Secretariat of the Council
On:	2 February 2023
To:	Working Party on Humanitarian Aid and Food Aid (COHAFA)
Subject:	Afghanistan - presentation by MSF

Following the COHAFA meeting of 2 February, delegations will find in Annex the presentation made by the Médecins Sans Frontières ⁽¹⁾⁽²⁾.

¹ Médecins Sans Frontières International, identification number in the EU Transparency Register: 928308827208-10.

² This document contains a presentation by an external stakeholder and the views expressed therein are solely those of the third party it originates from. This document cannot be regarded as stating an official position of the Council. It does not reflect the views of the Council or of its members.



AFGHANISTAN

MSF



MSF in Afghanistan: 2022 at glance



- 323,000 ER admissions
- 70,000 OPD consultations
- 48,000 patients hospitalized
- 14,000 surgeries
- 43,000 deliveries
- 26,000 TB patients consulted
- 16,000 malnourished children
- 15,000 measles.



To do that:



- 3,000 people (+/- 110 Int'l)
- +/- 40% women
- + 50% of medical and paramedical are women
- A Common frame: Secondary and/or specialised medical care



A man-made disaster



- US and NATO debacle
- At the cost of the Afghans
- Abrupt cut on fundings
- Political and financial sanctions
- “Int’l community” hiding behind the UN and aid organizations
- Humanitarian assistance can’t fix it
- IEA Government (Kabul bypassed, Kandahar, Cohesion, other militant groups, ...)



Tough policies and social control



- General population
- Civil society organisations
- Political parties
- Media
- Women:
 - Ban on education
 - Ban on social activities
 - Ban on leisure
 - Ban on work: civil servant, NGOs
 - ...



Ban on female NGO workers



- A lot of meetings, little result
- No unified position within IEA but...
- Some NGOs who suspended, slowly resuming
- Health sector (for now) exempted
- Donors hiding behind the HCT
- MSF:
 - Not affected but impacted
 - Raising our concerns to the IEA



Health exemption obviously not satisfactory



- Direct engagement with the IEA
- Trying to reach out to the decision makers
- Stating our concerns and impact of the directives
- Trying to build 'alliances'
- Sectorial / regional differences
- Ban unlikely to be reversed



Approach?



- **Do not comply with what we were not asked to**
 - What we don't want to implement
 - What we can't implement
- **Access to medical care to all, how to do it if:**
 - Segregation patients / staff
 - Gender based discrimination
 - Men-only teams
 - Dress code: male & female
 - Taliban presence: Vice and Virtue
 - Chaperon (Mahram)
 - ...



Tough times ahead



- **Ongoing reflexion:**
 - What, where, how, ... but not at any cost.
 - Discussion on redlines / red flags
 - Principled but not dogmatic
 - Pragmatic but not cynical
 - Prospect?

