

1. Summaryⁱ

<p style="text-align: center;">8</p> <p>Humanitarian crisis ranking (Sida's initial allocation analysis)ⁱⁱ</p>	<p style="text-align: center;">22 million</p> <p>Number of people with humanitarian needs (Sida's initial allocation analysis)ⁱⁱⁱ</p>	<p style="text-align: center;">106 MSEK</p> <p>Initial allocation for 2026</p>	<p style="text-align: center;">0 MSEK</p> <p>Additional allocation in 2026</p>	<p style="text-align: center;">0 MSEK</p> <p>Flexible funding in 2026</p>	<p style="text-align: center;">106 MSEK</p> <p>Total Sida funding in 2026</p>
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Afghanistan continues to face the compounded impacts of decades of conflict, high poverty, systemic gaps in critical services, widespread food insecurity and malnutrition, recurrent natural hazards intensified by climate change, and widespread human rights violations, particularly targeting women and girls. Mass cross-border returns compound needs, with more than 2.6 million Afghans arriving from neighbouring countries in 2025 alone, disrupting vital remittance flows and straining basic services and livelihoods.¹ In 2025, recurring floods and earthquakes, coupled with the fourth consecutive year of drought have further intensified needs.

On the 27th of February 2026, following a period of increased cross-border hostilities, Pakistan's minister of defence proclaimed full-scale war against the de facto government in Afghanistan. In the wake of the escalation, hundreds of civilians have lost their lives while figures as of mid-march estimates that an additional 115,000 people are newly displaced within Afghanistan. Continued returnee flows from both Iran and Pakistan will likely further exacerbate humanitarian needs and put additional pressure on organisations working on cross border responses as well as host communities. It is estimated that up to two million Afghans are currently residing in Pakistan with a corresponding figure of 2.5 - 4 million for Iran. Returnees face multiple challenges upon re-entering Afghanistan, often lacking documentation and in acute need of food, shelter and medical treatment.² In addition, the regional conflict in the middle east and ongoing hostilities with Pakistan has resulted in major disruptions in cross-border trade, high inflation and logistics shocks, notably with regards to fuel-imports from Iran on which Afghanistan's population remains overwhelmingly dependent. Humanitarian supply chains are experiencing critical delays and increased expenses as imports of humanitarian material often have to be rerouted through multiple countries.³

¹ UNHCR, *Afghanistan situation: Afghanistan returns emergency update #8*, 5 September 2025 (accessed 2026-03-23).

² UNICEF, *Afghanistan External Flash Update #2*, 26 March 2026 (accessed 2026-03-27).

³ World Bank Group, *The Potential Economic Impact of the Instability in the Middle East on Afghanistan Trade Disruptions, Inflation Pressures, and Migration Shocks*, March 2026.

In 2026, 22 million people, nearly half the population, will require humanitarian assistance while 17.5 million are expected to face particular hardship due to compound effects of acute food insecurity, multi-year drought, mass returns, disease risk and protection needs. Food insecurity has deteriorated sharply, with 4.7 million in IPC phase 4, more than double last year's figure. Acute malnutrition rates are also rising, with 3.7 million children affected and 1 million pregnant and breastfeeding women (PBW) requiring urgent nutrition support.⁴

In response, Sida funding will prioritise addressing the most acute humanitarian needs, in line with the 2026 humanitarian needs and response plan (HNRP) for Afghanistan. For 2026, Sida has allocated SEK 106 million. This represents a reduction of 45 per cent compared to the initial allocation in 2025, resulting in a consolidation of the portfolio and substantial decrease in funding for UN partners.

2. Humanitarian needs & affected population

In 2026, needs are greatest in the areas of Water, Sanitation & Hygiene (WASH), Protection, and Food Security and Agriculture (FSAC), followed by Nutrition, Health, Education and Emergency Shelter and Non-Food Items (NFI). The HNRP maps needs at district level, enabling a closer understanding of needs across and within provinces to guide prioritisation. Overall, 86 districts are categorised as level 4 out of 5 in terms of severity, spanning across 23 out of the country's 34 provinces.⁵ Needs are driven by recurrent shocks, impacting both rural and urban areas, while rural communities experience additional barriers to access services due to long distances. As in previous years, food and livelihoods remain top priority needs by affected populations, while water has risen in priority under worsening drought-like conditions.

The situation for women and girls remains deeply alarming, as the de facto authorities (DfA) continue to intensify restrictions on their rights and freedoms. A Propagation of Virtue and Prevention of Vice (PVPV) morality law adopted in August 2024 formally codified existing bans and introduced further measures, severely limiting women's and girls' access to education, employment, movement, public life, and humanitarian assistance, including participation in aid delivery.

If restrictions persists on education alone, there is a risk of a 25 per cent increase in child marriage, a 45 per cent rise in early adolescent pregnancy, and at least a 50 per cent increase in maternal mortality by 2026.⁶ This is alarming in a country that already has one of the highest maternal mortality ratios globally, with preventable complications claiming the life of a woman approximately every two hours.⁷

⁴ IPC, [Acute Food Insecurity & Malnutrition Snapshot June 2025 to September 2026 | IPC](#), December 2025 (accessed 2025-12-16).

⁵ OCHA, [Afghanistan Humanitarian Needs and Response Plan](#), December 2025.

⁶ UN Women, [Gender alert: Four years of Taliban rule: Afghan women resist as restrictions tighten](#), August 2025 (accessed 2025-12-16).

⁷ UNFPA, [UNFPA in Afghanistan | UNFPA](#) (accessed 2025-12-16).

Overall protection risks are intensifying as DFA decrees and practices are increasingly enforced. Women and girls, particularly those with disabilities, face heightened discrimination, barriers to assistance, and increased exposure to gender-based violence (GBV), while protection services continue to shrink. In 2025, 218 GBV service delivery points were suspended, affecting more than 1 million people, alongside suspension of protection services for over 3.3 million people, including more than 1.6 million children.⁸ Other groups facing elevated discrimination and barriers to access assistance include ethnic and religious minorities.

In 2026, it is estimated that nearly 10 million people still need food assistance.⁹ During the 2025 lean season, only around 1 million people received food rations covering 50 per cent of caloric needs, compared to 5.6 million during the same period in 2024. The IPC identifies the reduction in food assistance as one of the key drivers of acute food insecurity in Afghanistan with key humanitarian actors warning of the severe protection impact of aid cuts on the country's most vulnerable.¹⁰

UNICEF identifies Afghanistan among the toughest places for young children to survive and thrive, facing multiple, compounding risk. While nearly 3.7 million children under five suffer from acute malnutrition, funding cuts have forced the closure of 305 nutrition service delivery points, leaving 1.1 million children without life-saving nutrition services.¹¹ In addition, almost 1.2 million PBW are expected to require treatment for acute malnutrition, affecting child health.¹² Child marriage is also reportedly increasing, partly as a result of extreme coping strategies as families seek to address extreme poverty.¹³ Children are further exposed to widespread explosive ordnance (EO) contamination and hazardous labour. EO incidents kill or injure around 50 people each month, nearly 70 per cent of whom are children.¹⁴

Tense relations with neighbouring countries have led to deadly border clashes with Pakistan and mass return of Afghan nationals. Needs assessments show that returnees face multiple overlapping humanitarian needs, including lack of housing, food- and livelihood insecurity, limited access to basic services, and documentation gaps, with 2.3 million of returnees from Iran and Pakistan (82%) being undocumented.¹⁵ Female returnees suffer more from mental health issues and harmful coping strategies, compared to women who have not undergone displacement or return, underscoring the heightened vulnerability of women.¹⁶

⁸ OCHA, [Global Humanitarian Overview 2026: Afghanistan](#), (accessed 2025-12-16).

⁹ IPC, [Acute Food Insecurity & Malnutrition Snapshot | June 2025 - September 2026](#), (accessed 2025-12-16).

¹⁰ OCHA, [Afghanistan Humanitarian Needs and Response Plan](#), December 2025.

¹¹ UNICEF, [Afghanistan Humanitarian Situation Report #1](#), January 2026;

¹² OCHA, [Afghanistan Humanitarian Needs and Response Plan](#), December 2025.

¹³ UNICEF, [Protecting Girls in Afghanistan](#), (accessed 2026-03-17).

¹⁴ OCHA, [Global Humanitarian Overview 2026: Afghanistan](#), (accessed 2025-12-16).

¹⁵ OCHA, [Afghanistan Returnees Overview](#), (accessed 2026-03-20).

¹⁶ UNHCR, [Protection landscape for Women and Girls in Afghanistan](#), September 2025 (accessed 2025-12-16).

3. The humanitarian response

Despite subtle improvements, Afghanistan remains among the world's most severe humanitarian crises, with 21.9 million people in need (PiN). In 2026, the PiN has decreased by 4 per cent, while the target population has increased by 5 per cent to 17.5 million people. In 2026, 25 per cent of the target population, 4.6 million, is classified as living in inter-sector severity level 4 districts, of whom approximately 3.9 million, 85 per cent, are targeted under the HNRP.¹⁷

17.5 million	\$1.71 billion	11%
People targeted in the response plan (HNRP 2026)	Required to reach the target (HNRP 2026)	Of the funding secured [HNRP 2026]

The humanitarian response will focus on life-saving assistance (Strategic Objective 1), protection (Strategic Objectives 2), and essential services (Strategic Objective 3), including food, shelter, healthcare, nutrition, safe water, hygiene, and multi-purpose cash support. Priority will be given to inter-sector severity 4 areas, where life-threatening needs are most acute and intersect. This prioritisation becomes even more critical given the anticipated further decline in financial resources in 2026, requiring difficult decisions to course-correct, including shifting support away from some existing communities to ensure that those at highest risk receive comprehensive, multi-sectoral assistance. Aligned with the Humanitarian Reset, which aims to sharpen prioritisation towards the most critical life-saving needs in a context of constrained resources, the HNRP concentrates on Strategic Objectives 1 and 2, which together account for 84 per cent of total financial requirements. Essential services account for 15 per cent, largely driven by transitional shelter and livelihoods, reflecting a deliberate shift away from activities already covered under BHN frameworks.

Local and national NGOs (L/NNGOs) have long been central to delivering services, negotiating access, and managing risks. Yet a genuinely sustainable, locally-led humanitarian approach remains a pending goal. Analyses show that local partnership models remain largely transactional, with L/NNGOs often treated as subcontracted service providers rather than strategic partners in Afghanistan. Their influence over programme design, funding decisions, and long-term planning is limited, and they are frequently excluded from donor engagements. Overall, progress on power-sharing between international and local actors remains low. While L/NNGOs are trusted to deliver activities, international funders report low trust in their financial, institutional, and programmatic capacities. At the same time, L/NNGOs report carrying the bulk of legal, operational security, reputational, and financial risks, with particularly weak risk-sharing in legal and security domains.¹⁸ In 2023, a multi-stakeholder Localisation Technical Working Group (LTWG) was established in July 2023 to collectively strengthen the commitment to localisation.¹⁹ Under the UN's Resident and

¹⁷ OCHA, [Afghanistan Humanitarian Needs and Response Plan](#), December 2025.

¹⁸ ACAPS, [Afghanistan: localisation and power in humanitarian partnerships | ACAPS Analysis Hub](#), September 2025 (accessed 2025-12-16).

¹⁹ LTWG, [Localisation Technical Working Group Overview 2025 | ACBAR](#) (accessed 2026-02-12).

Humanitarian Coordinator (RC/HC), UN Women spearheaded the creation of a Women’s Advisory Group made up of Afghan women to advise the Humanitarian Country Team. This has been a key to strategically navigate the international community’s engagement with the DfA to advance the priorities of women. Moving forward, as funding shrinks, it is important to ensure that the response remains “as local as possible, as international as necessary” across all sectors. This includes embedding local leadership across the new coordination structure under the humanitarian reset, and investing in capacity building and funding of dedicated roles for L/NNGOs to lead coordination and response.

4. Sida’s humanitarian allocation

In 2026, Sida’s funding will prioritise acute humanitarian needs in line with the HNRP, directing limited resources to the most vulnerable populations in both urban and rural areas to maximise life-saving impact. Interventions will be tailored to the specific needs of persons with disabilities, women, and children, supported by disaggregated reporting. Particular attention will be given to the needs of returnees, at borders, in temporary settlements, and in areas of return.

In 2025, the most well-funded sectors were Protection (82 per cent funded) and Education (75 per cent funded), while prioritised sectors such as FSCA (13 per cent) and WASH (17 per cent) were severely underfunded. Given the deterioration of needs in these areas – and their role as key drivers of malnutrition – Sida will prioritise additional targeted funding for FSCA and WASH, with strengthened linkages to Nutrition and Health. Across all interventions, the Centrality of Protection (CoP) must remain a guiding principle, grounded in comprehensive risk analysis that accounts for gender, age, disability, and other diversity factors. As humanitarian assistance cannot meet all needs, reinforcing joint analysis and programming with medium-term BHN strategies is essential.

Sida has also identified sector-specific priorities in the selection of partners. Sida will support Food Security and Livelihood interventions with a targeted geographical focus on severely food-insecure areas classified as IPC 4. Sida will continue to support integrated nutrition interventions linked with health services, including mental health and psychosocial support, prioritising underserved areas with high needs. WASH interventions should be guided by robust assessments on access and water-supply conditions, ensuring that underserved and remote areas are prioritised and, where possible, integrated with Health and Nutrition responses. Protection interventions must be grounded in comprehensive protection and gender risk analysis. Sida will prioritise partners and activities that clearly target those facing the highest protection risks with clear protection outcomes. Child Protection, GBV, Housing, Land and Property, and Mine Action are priority protection areas.

Community consultations show that 87 per cent of households prefer direct cash assistance. Given limited resources, the cost-effectiveness of cash, and strong community preference, Sida will promote cash as the primary response modality, all the while taking into consideration the potential disruptive effects on local markets and supply-chains brought about by the impact of regional instability and cross border fighting with Pakistan. This approach is in line with the overall direction of the humanitarian response in Afghanistan. In 2025, in-kind aid declined more sharply than cash, with

female-headed households experiencing the largest reduction due to their greater reliance on in-kind support.²⁰ Sida will therefore ensure that the shift toward cash assistance is inclusive, gender-responsive, and supported by safeguards for households at heightened risk.

To support a more sustainable and localised humanitarian response, Sida will prioritise funding that reaches local responders. Given the ongoing gaps in achieving a locally-led humanitarian response, Sida recommends exploring new funding avenues to support local leadership roles within coordination forums. Recognising the unique needs of women and girls, Sida also encourages support for funding platforms such as the Women and Peace Humanitarian Fund to increase resources channelled to women-led organisations.

PARTNER	INITIAL ALLOCATION
Afghanistan Humanitarian Fund (AHF)	28,000,000
International Committee of the Red Cross (ICRC)	15,000,000
Norwegian Refugee Council (NRC)	13,000,000
Premiere Urgence Internationale (PUI)	15,000,000
United Nations Children's Fund (UNICEF)	15,000,000
World Food Programme (WFP)	20,000,000
TOTAL	106,000,000

ⁱ The 2026 initial allocation of humanitarian funding is based on Sida's humanitarian allocation analysis methodology. The analysis reflects the current humanitarian situation across crises and is being updated continuously with the latest available data. The information in the HCA is based on reports, data, and information from partner organisations and other entities, as well as observations from field visits and dialogue with partners.

ⁱⁱ Sida's initial allocation analysis consists of three dimensions that are assessed for each crisis-affected country: 1) magnitude and severity of humanitarian needs 2) capacity of the humanitarian system to respond to needs and 3) capacity of the crisis-affected country to respond to needs. The qualitative and quantitative analysis produces an index scoring for each country, where the highest ranked country is found to have the greatest proportion of unmet severe humanitarian needs globally, based on available data. Sida's initial allocation for 2026 includes a total of 25 countries with the highest scores. For more information please see Initial Allocation Methodology.

ⁱⁱⁱ Sida uses the most inclusive estimate of humanitarian needs which is available from recent sources and supported by triangulation. For Afghanistan, the source is GHO 2026.

²⁰ OCHA, [Afghanistan Humanitarian Needs and Response Plan](#), December 2025.