SEISMIC SHIFTS: HOW A HUMANITARIAN SECTOR IN UPHEAVAL RESPONDED TO THE 2025 AFGHANISTAN EARTHQUAKE

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This report is the latest in a series of rapid reviews conducted by Humanitarian Outcomes under the Humanitarian Rapid Research Initiative (HRRI), commissioned and supported by the UK Humanitarian Innovation Hub (UKHIH)-Elrha with UK Aid from the Foreign, Commonwealth & Development Office (FCDO). The review was carried out in September 2025 and encompassed interviews with 39 informants, including 20 in-person meetings with community leaders and residents in the affected areas of Kunar and Nangarhar. The research builds on previous work conducted under the HRRI project by the Afghanistan Strategic Learning Initiative (2023) and on Navigating Ethical Dilemmas in Afghanistan (June 2023).

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EXECUTIVE SUMMARY

The earthquake that struck eastern Afghanistan on 31 August 2025 was a devastating shock for the mountain communities of Kunar and Nangarhar, and a test for the humanitarian sector operating under radically changed conditions. How would the system respond to a rapid-onset disaster in the context of severe funding cuts and a pariah host state?

A research team examined the crisis response in the weeks following the disaster, conducting on-site interviews with affected people and local responders, as well as national and international humanitarian actors and donor representatives. This report provides an initial snapshot of the response, analysing the challenges and roles of different actors in a radically altered funding landscape as well as the ethical and operational costs of the systematic exclusion of women.

COMPETENT IMMEDIATE RESPONSE, MASKING DEEPER GAPS

The rapid response to the earthquake demonstrated the commitment and professionalism of Afghan and international actors working under extraordinary constraints. Local authorities, community organisations and volunteers mobilised within hours, and most aid groups were operational within two days – an improvement over the Herat earthquake response in 2023. Most interviewees agreed that initial aid reached affected areas promptly and was distributed fairly. However, some reported instances of corruption and diversion, and more significant gaps in coverage and access became evident in the following days and weeks. Several villages took days to access, while others were de-prioritised for aid due to difficulties reaching them. Aid services were centralised in temporary camps for affected people but serious shortfalls persist in emergency shelter (tents), clean water, and medical and mental health care – especially for women – and concerns are mounting about unmet winterisation needs as temperatures drop.

DRAMATICALLY REDUCED FUNDING BASE, THREATENING RECOVERY AND ONGOING SUPPORT

The extent of damage to the international aid system caused by the US dismantling of its foreign aid programme, along with cuts from other major Western donors, is apparent in the weak funding response to the coordinated appeal, led by the United Nations (UN). Although the situation is still evolving, funding for the emergency will be markedly smaller in scale than for past disasters in the country, despite the 2025 earthquake being the deadliest and most destructive in decades. The success of the immediate response relied in part on aid organisations drawing down remaining reserves and reprogramming existing grants. Repurposed funds and depleted stockpiles are unlikely to be fully replenished, leaving future emergency needs and basic services across the country at risk. The longstanding gap between emergency response and recovery will only widen as aid budgets shrink overall. A pattern of emergency-only funding risks entrenching a cycle of crisis response without recovery, eroding the resilience of communities.

CONTINUED AND WORSENING GENDER EXCLUSION

Aid groups largely expressed relief that local authorities did not block the small number of female staff deployed for needs assessment and service provision for women in the affected areas, allowing tents and safe spaces to be set up for women to allow them to access aid and services. Because women are prohibited from interacting with unrelated men, female responders are essential to reach women affected by the disaster, yet systematic restrictions on their participation have sharply reduced their numbers. At the same time as the earthquake response was happening in the east, the female staff of UN agencies elsewhere in the country were facing new barriers. There are fears that restrictions on women could be tightened as the acute phase of the earthquake response subsides.

That the humanitarians saw the de facto authorities' initial tolerance of female aid and medical workers in the response as such good news reflects how the window of acceptability has shifted. After initial outrage and painful internal debate, most aid groups have adjusted and adapted to the Taliban's restrictions on female staff – absorbing the additional costs and delays associated with separate transport, accommodation and *mahrams* (male close relative escorts). While failing to comply would mean expulsion from the country, acceding to each new edict has left aid organisations open to pointed criticism for normalising and appearing complicit in the violation of Afghan women's human rights.

MENTAL HEALTH SEVERELY UNDER-ADDRESSED

Community members interviewed for this review universally reported the disaster's mental health impacts and the urgent need for psychosocial support among traumatised survivors. Yet meeting these needs remains highly challenging given the current funding gaps and restrictions on female aid workers. Addressing the crisis will require new approaches and alternative providers, though remote options are limited by poor internet access. Beyond direct mental health care, restarting schooling, emergency childhood education, safe spaces for women and children, disability inclusion and livelihoods programmes could help to mitigate the psychosocial toll. Mental health provision was inadequate even before the earthquake, and today the system's capacity is even more constrained.

FAILURE TO ADAPT OUTDATED STRUCTURES

This earthquake has exposed how the international humanitarian system, severely impaired by US defunding, struggles to manage medium-scale disasters when an acute shock hits populations already facing protracted crisis. With funding gaps reaching 80%, even after targets have been drastically reduced, current models for appeals, coordination and response are increasingly untenable, and alternative approaches are needed. As aid from traditional donors shrinks, the private sector, civil society and emerging donors are assuming larger roles in supporting Afghans' response to shocks. This increasingly decentralised and multipolar aid landscape will demand a rethink of strategic coordination by traditional humanitarian actors and the UN-centred aid architecture to remain relevant and advance the goals of principled humanitarian action. Area-based approaches that allowed coordinated action and pragmatic engagement with local authorities and communities were seen to be relatively effective, while the greatest shortcomings lie in the chronic funding deficit for recovery and the profoundly inadequate provision of mental health support. Above all, the unresolved tensions and ethical dilemmas of operating within a regime that systematically excludes women creates collective moral injury for the humanitarian sector, demanding change.

RECOMMENDATIONS

The findings of this review point to deeper systemic weaknesses than is possible to address with specific operational or technical fixes. The following summary recommendations are therefore necessarily indicative and aim to identify potential constructive ways forward for collective reflection and action in four key areas.

ACTION AREA 1: CONCENTRATE LIMITED CAPACITY AND RESOURCES ON LOCAL RESPONSE SYSTEMS

UN and international NGOs

- **Adopt area-based approaches to operations, coordination and appeals.** Reduce national-level offices and activities to pivot to an area-based operational approach that concentrates limited capacity in a defined geographic area rather than spreading it thin.

National and local humanitarian actors

- **Continue to build domestic capacities for search, rescue and immediate response.** Support and enable access for Afghan and international humanitarian organisations. This requires access for female first responders and aid workers so they can reach women and girls in need, as well as maintaining connectivity as a crucial lifeline for people across Afghanistan to access support.

ACTION AREA 2: DEVELOP COLLECTIVE, PRACTICAL STRATEGIES TO EXPAND WOMEN'S PARTICIPATION AND ACCESS

International and Afghan NGOs

- In collaboration with Afghan civil society actors, work to create standing cadres of trained female outreach workers and pre-established women's spaces to make women's involvement in responses a built-in feature rather than a continual subject of negotiation. Shift from an attitude of reluctant appeasement to subversive solidarity to restore women's rights, as well as the moral agency of humanitarian actors.

Afghan Red Crescent Society and other civil society actors

- Engage with the de facto authorities to defend and expand an operational space that respects humanitarian principles and enables impartiality and independence, including the ability to reach women and girls. The Afghan Red Crescent Society in particular plays a critical auxiliary and bridging role in this space.

ACTION AREA 3: BUILD CAPACITIES TO ADDRESS THE GAP IN MENTAL HEALTH AND PSYCHOSOCIAL SUPPORT SERVICES

UN and international NGOs

- Support Afghan organisations to meet the acute mental health needs of disaster-affected populations through community-based approaches, including training support to deliver it, and establish entry points for addressing the broader social and practical needs of women.

ACTION AREA 4: IDENTIFY, MOBILISE AND ALIGN A WIDER SCOPE OF FUNDING RESOURCES

Donors

- Actively coordinate to aim for coherent and complementary funding strategies and sequencing between humanitarian and recovery phases within a context of reduced resources. Prioritise contributions to pooled funds – including but not limited to the UN Central Emergency Response Fund (CERF) and Afghanistan Humanitarian Fund – and strengthen these mechanisms to better support immediate response needs while planning early for the transition to recovery financing.
- Encourage the participation of government donors outside the traditional Organisation for Economic Co-operation and Development's Development Assistance Committee ('non-DAC' donors) in pooled and anticipatory financing mechanisms to broaden the donor base and increase overall funding levels.

International financial institutions

- Prepare to engage earlier in post-disaster contexts where traditional humanitarian funding is insufficient or depleted. Work with humanitarian and donor counterparts to sequence financing instruments more deliberately, ensuring that concessional and recovery financing can follow humanitarian spending without delay. Support coherence across funding streams to sustain essential operations and enable recovery.

ACRONYMS AND ABBREVIATIONS

ADB	Asian Development Bank
ANDMA	Afghanistan National Disaster Management Authority
APDRF	Asia Pacific Disaster Response Fund
ARCS	Afghan Red Crescent Society
BHA	US Bureau for Humanitarian Assistance
CERF	Central Emergency Response Fund
DAC	Development Assistance Committee
ECHO	European Civil Protection and Humanitarian Aid Operations
FCDO	Foreign, Commonwealth & Development Office
FTS	Financial Tracking Service
HRRI	Humanitarian Rapid Response Research Initiative
IFRC	International Federation of Red Cross and Red Crescent Societies
IOM	International Organization for Migration
MHPSS	Mental Health and Psychosocial Support
MMI	Modified Mercalli Intensity Scale
MSRAF	Multi-sector Rapid Assessment Form
NGO	Non-governmental Organisation
OCHA	United Nations Office for the Coordination of Humanitarian Affairs
OECD	Organisation for Economic Co-operation and Development
PRM	US Bureau of Population, Refugees, and Migration
UAE	United Arab Emirates
UK	United Kingdom
UKHIH	UK Humanitarian Innovation Hub
UN	United Nations
UNICEF	United Nations Children's Fund
US	United States
USAID	United States Agency for International Development
WFP	World Food Programme
WHO	World Health Organization
UNFPA	United Nations Population Fund
UNHCR	United Nations High Commissioner for Refugees

1. INTRODUCTION

Aid actors in Afghanistan continue to grapple with high levels of chronic vulnerability, recurrent shocks and the challenge of maintaining basic service delivery. The Taliban takeover in 2021 and the lack of international recognition of the regime have constrained donor engagement and development financing.[1] Humanitarian actors, already struggling to meet widespread needs, including large-scale returns of refugees from Pakistan and Iran,[2] must now contend with the dissolution of USAID and huge cuts in funding.

The de facto authorities' restrictions on women's employment have further constrained aid responses and the ability of women to access services. At the global level, humanitarian leaders, faced with the loss of US funding and declining support for multilateralism, are acknowledging the urgent need for radical restructuring, but have yet to implement it. This rapid review provides a snapshot at the intersection of these immense challenges through the lens of the initial response to the earthquake of 31 August 2025.

Nearing a breaking point

Afghanistan now faces a convergence of extreme need, political isolation, a hostile operating environment and donor retreat – testing the limits of what the humanitarian system can sustain without fundamental reform.

AIM AND RESEARCH QUESTIONS

This rapid review was initiated after the earthquake crisis scored highly on the Humanitarian Rapid Research Initiative (HRRI)'s internal prioritisation matrix, reflecting its severity, information gaps, and the need to capture missing local perspectives. The research approach and tools aimed to provide an independent, time-sensitive analysis to inform decision making on the evolving crisis response. The overarching research questions explored:

- how local actors have managed in the context of severe aid cuts and a reduced international presence
- how funding cuts affected the humanitarian system's ability to surge in response
- how Taliban restrictions on women have shaped the capacity to reach women and girls with assistance.

Given the exploratory and iterative nature of this review, the scope of analysis and conclusions was broadened when initial interviews revealed the depth and breadth of the funding and structural issues facing the international aid system in Afghanistan, and the challenge of sustaining it going forward.

1. This paper refers to the Taliban government as the 'de facto authorities', in line with United Nations (UN) usage. At times, the term 'local authorities' is used to distinguish sub-national officials from central authorities in Kabul or Kandahar.
2. UN Office for the Coordination of Humanitarian Affairs (OCHA). (2024, 19 December). *Afghanistan humanitarian needs and response plan.* https://humanitarianaction.info/plan/1263

METHODS

This rapid review was conducted during the first three weeks of the earthquake response, by a five-person team of researchers — international and Afghan — managed by Humanitarian Outcomes under the HRRI.

KEY INFORMANT INTERVIEWS

The research team interviewed a total of 39 individuals, selected to ensure representation of affected people as well as the major international and local operational actors and policymakers. One Afghan team member travelled to Kunar and Nangarhar to observe the crisis conditions and response efforts and conduct in-person interviews with local residents, leaders and aid workers.[3] The global-level team conducted interviews with Afghanistan-based representatives of the UN system, NGOs, the International Red Cross and Red Crescent Movement, and a representative of the Afghanistan National Disaster Management Authority (ANDMA). Interviews with female residents and aid workers in Kunar and Nangarhar were also conducted remotely. The table below shows a breakdown of numbers. The names and affiliations of those who agreed to be included are listed in the appendix (all Afghan interviewees were anonymised for their protection).

Table 1: Interviewees

Interviewee affiliation	Kunar	Nangarhar	National	Total
Community and village representatives and elders	7	6		13
Local aid workers	2	2		4
Female residents	1	3		4
National NGO			1	1
ANDMA local representative			1	1
Donor representative			2	2
Independent expert/academic			2	2
International NGO			5	5
Red Cross/Crescent Movement			1	1
UN			6	6
Total (by province/national)	**10**	**11**	**18**	**39**

3. Interviewees provided informed consent, and careful attention was paid to safeguarding their anonymity.

DATA REVIEW

In addition to the interviews, the team analysed financial data from the UN Office for the Coordination of Humanitarian Affairs (OCHA) Financial Tracking Service (FTS) and supplementary funding information provided by a donor informant.

DOCUMENT REVIEW

The review examined 20 secondary sources, including situation reports, appeals and media coverage related to the earthquake and its aftermath.

LIMITATIONS

This was a very rapid review with interviews, analysis and report drafting taking place over a two-week period. During this time the interviewees were immersed in the crisis aftermath and response and there were challenges with connectivity. National NGOs were especially reluctant to speak with the research team, which prevented greater numbers of local representatives participating.

The research design included plans for a mobile phone survey of the affected population using random-digit dialling, but phone coverage in the earthquake-damaged area proved too limited and unstable to generate a sufficiently large sample within the timeframe. This limited the representation of local residents to those the team was able to interview in person.

2. STRONG START, EMERGING GAPS AND CHALLENGES

FIRST DAYS: CRISIS IMPACT AND IMMEDIATE RESPONSE

The 6.0 magnitude earthquake struck eastern Afghanistan just before midnight on 31 August 2025. Its epicentre was in Nurgal District, Kunar Province, near the border with Nangarhar, in one of the country's most mountainous regions. The steep and rugged terrain made for particularly severe impacts on inhabitants: the latest estimates are 1,992 fatalities, 3,631 people injured, and 8,471 homes destroyed or damaged, directly affecting 55,945 individuals.[4] In contrast, the 6.3–magnitude earthquake in Herat in 2023, though stronger, caused roughly half as many fatalities and affected about one-tenth as many people. Initial reports, confirmed by formal assessments, identified urgent needs across all sectors of aid, including basic shelter, water and food.[5] Kunar is also home to a relatively large number of returnees from Pakistan.6 A UN interviewee estimated that 20%–30% of the people affected by the earthquake were returnees, meaning they have experienced the dual shock of displacement and disaster.

Residents described the extraordinary levels of damage, with one account from a community member, typical of many, reported:

> ***"Our houses have been destroyed completely. Our roads are damaged. There is no electricity, no water reservoirs, and the irrigation canals are blocked. Our farming and crops are drying up, or they have been damaged by the rescue mission helicopter landings or the makeshift camps that have been set up with tents. All families have lost their livestock and any reserved food or other valuable items."***
>
> - Kunar resident

The large number of people experiencing psychological shock, trauma and debilitating anxiety was a theme reinforced by every local interviewee, both residents and representatives of the local authorities.

A CAPABLE EARLY RESPONSE

The immediate response consisted of search, rescue and medical evacuation, led – as is typical – by local authorities and affected communities themselves. The authorities coordinated external assistance, with rescue teams from the Afghan Red Crescent Society (ARCS) supported by more than 40 helicopter rotations. Road clearance and rescue operations in more accessible areas were backed by rapid deployments of armed forces and road-clearing equipment in coordination with ARCS.[7] Initial relief supplies were delivered via helicopter, vehicles and on foot, with communities in more remote mountain villages moving down to accessible areas to receive assistance – later forming camps.[8] Ongoing aftershocks and heightened fears of remaining near damaged structures reinforced the shift to camps, which were established within five days through cooperation between authorities and humanitarian

4. International Organization for Migration (IOM). (2025, 29 September). *Flash update #12 – Earthquake in eastern Afghanistan (Kunar, Nangarhar, Laghman)*. https://reliefweb.int/report/afghanistan/flash-update-12-earthquathatke-eastern-afghanistan-kunar-nangarhar-laghman-29-september-2025. Note: IOM's figure of 'approximately 55,945' people directly affected is taken from the results of the multi-sectcor rapid assessment form (MSRAF) and is similar to OCHA's latest estimate.
5. OCHA. (2025, 9 September). *Afghanistan: Eastern region earthquake response plan (September 2025–December 2025)*. https://reliefweb.int/report/afghanistan/afghanistan-eastern-region-earthquake-response-plan-sep-2025-dec-2025
6. By July 2025, OCHA was reporting that 248,000 Afghans had returned from Pakistan, with an estimated 39,000 resettling in Kunar. OCHA. (2025, 4 August). *Afghanistan returnees overview (as of 26 July 2025)*. https://www.unocha.org/publications/report/afghanistan/afghanistan-returnees-overview
7. International Federation of Red Cross and Red Crescent Societies. (IFRC). (2025, 19 September). *Afghanistan: Earthquake response emergency appeal DREF No MDRAF019*. https://reliefweb.int/report/afghanistan/afghanistan-earthquake-response-emergency-appeal-dref-no-mdraf019
8. The term 'collective sites' has been used extensively in reporting to refer to these sites, apparently in an attempt to avoid the use of word 'camps'.

actors. A strong but less quantifiable local response to the immediate crisis was reported by interviewees. This included mosque collections, remittances and social media–driven campaigns, while reports indicated that the authorities distributed cash assistance of varying amounts and sources.

Local interviewees were consistently satisfied with the ***immediate*** response and described local authorities, business entities and community volunteers as playing central roles. Community interviewees and aid agency staff described the same pattern of arrival: first responders arrived by helicopter along with medics (including a small number of female medics), medical supplies and shrouds/body bags; next, those travelling by vehicle arrived; and finally, those on foot.

People consulted as part of an interagency accountability mechanism also reported receiving lifesaving assistance such as health services, food, emergency non-food items, tents and psychosocial support, with some households receiving cash assistance.[9] While some interviewees made little distinction between agencies, others named a mixture of ARCS, UN and NGOs.

Local responders and residents recounting the first 48 hours noted that the search and rescue phase and medical evacuation exhibited no discrimination or concern regarding the gender of victims. Similarly, early hospital admissions, including surgical cases, reportedly reflected the expected balance between men and women. A female local aid worker spoke of working 'hand in hand' with local authorities to reach victims – something that only the acute emergency conditions made possible.

UN agencies and several international NGOs mobilised quickly to supplement the response by local actors and communities. The international NGOs already active in the area described making immediate use of the resources that were available in warehouses and employing a 'no regrets' approach that enabled a response within hours of the initial shock. International NGOs with no presence in the immediately affected areas reported mobilising stockpiles for agencies with staff in the vicinity to use. Although the full scale of the response was difficult to measure immediately after the earthquake (and uneven due to access restrictions), reports from survivors describing swift assistance were echoed by aid workers, who detailed providing hot meals, blankets, clothing, kitchen kits and tents in coordination with local authorities.

Timeline

31 AUG 2025 — 23:47 AFT (19:17 UTC)
M6.0 earthquake strikes eastern Afghanistan, with epicentre in/near Nurgal (Kunar)

EARLY HOURS AFTER 31 AUG
First responders mobilise. Community members, local de facto authorities and ARCS emergency teams deploy

1 SEP
Search & Rescue (SAR) and helicopter medevacs to Jalalabad begin;

1 – 2 SEP
De facto authorities make helicopters available; heavy machinery deployed for road clearance

2 SEP
NGO deployments supporting evacuations and clearance alongside ARCS authorities

3 – 4 SEP
Significant aftershocks; SAR ongoing

5 SEP
Critical access road partially reopens

8 SEP
MSRAF launched

9 SEP
Response plan and appeals issued

BY 14–15 SEP
Camps established in six locations in Kunar

15 SEP
MSRAF concluded. Aid to displaced medevacs and road clearance continue, early recovery activities begin.

9. United Nations Population Fund (UNFPA). (2025). *Community Voices Bulletin Kunar and Jalalabad earthquake response Afghanistan,* Edition #1. https://reliefweb.int/report/afghanistan/community-voices-bulletin-kunar-and-jalalabad-earthquake-response-afghanistan-edition-1-september-2025

NEEDS ASSESSMENT WELL COORDINATED BUT NUMBERS INITIALLY INFLATED

Most aid agency interviewees felt that the multisector, rapid needs assessment process was well organised, reflecting experience gained and lessons learned from the Herat earthquake response. Interviewees noted that OCHA was under pressure to demonstrate stronger leadership after criticism of coordination failures in that earlier response. Roles and responsibilities were more clearly defined, with tools developed in advance and a pre-established agreement that the International Organization for Migration (IOM) would lead the interagency rapid assessment.

The initial estimates of damage, the number of people affected, and those in need of humanitarian assistance, were built by layering different data sets and models, crossed-checked by reports emerging from the affected areas. These included a 'shaking intensity'[10] map overlaid with population density and typical housing/construction types.[11] This resulted in an estimated total of 499,000 people need that was published in the first coordinated funding appeal and early situation reports, and which is now considered to be significantly overstated, according to several international actors interviewed.[12] So while the system may have worked well at the process level, the product may have created confusion and undermined the credibility of the appeal.

ACCESS CHALLENGES AND REPORTS OF CORRUPTION

The more remote villages faced greater challenges in receiving aid. The region's steep terrain, a single paved road linking most affected sites, and periods of heavy rain severely constrained access. Rockslides persisted for weeks and, despite continuous clearance efforts, deliveries to the hardest-hit communities remained sporadic. Survivors from Aryet and Shumash – villages without road access – reported that many of the injured died during or while awaiting transport to hospital. Helicopters could evacuate only one or two patients at a time, and the resulting delays increased fatalities.

Community representatives mostly expressed satisfaction with the fairness of the initial distributions, although with some concerns around beneficiary selection and the long distances on foot to health clinics. Interviewees reported receiving tents, oil, flour, kitchen or household items, and cash. While the tents were appreciated, there was immediate recognition that many would be inadequate for winter conditions.

Aid workers expressed concern that the absence of updated census data created opportunities for corruption, as they had to rely heavily on information from local representatives, which was not always reliable or verifiable. Many residents, particularly women and children, also lacked identity cards or other official documents, making it difficult to verify which households had been affected by the earthquake. There were also unconfirmed reports of attempts by officers at checkpoints to divert aid.

COVERAGE AND INCLUSION GAPS

Five weeks into the response, not all areas had been accessed, especially some of the highest villages in the affected areas, and for some, access has been deemed impractical. In a recent update, OCHA acknowledged that the remoteness of affected areas and logistical bottlenecks were still delaying the delivery of food and agricultural assistance in high-need districts, which means that assistance is not reaching all 318,780 individuals identified as targeted beneficiaries.[13]

10. Based on the Modified Mercalli Intensity Scale (MMI).
11. IOM (2025, 29 September).
12. OCHA included populations in areas 'moderately shaken' (MMI 5) and above. Other aid actors constructed their estimates using MMI 6 and criticised the inclusion of the lower category. Over time, consensus has started to form around the lower estimates, but the higher numbers are still stated in appeals and sitreps.
13. OCHA. (2025, 25 September). *Afghanistan: Situation update #7 - Eastern region earthquake response.* https://reliefweb.int/report/afghanistan/afghanistan-situation-update-7-eastern-region-earthquake-response-25-september-2025

District-level health facilities remain overwhelmed, with provincial and regional hospitals facing shortages of trauma supplies, essential medicines and staff.[14] There is an urgent need to implement the Minimum Initial Service Package for sexual and reproductive health in crisis, and there are reported shortages in trauma care and rehabilitation services, reproductive health, primary healthcare and mental health and psychosocial support (MHPSS).[15] Mental health needs are consistently cited as an urgent concern among participants, and ANDMA also acknowledges this as a priority.

It should be noted that access to basic services in Afghanistan has been limited for many years and the situation, particularly for women, has worsened since the takeover of the Taliban in 2021. In particular, MHPSS provision has long been dramatically insufficient and is a problem that would need sustained support to address.

> ***"Women have suffered greatly, having lost their children. They are still in pain, living in constant worry and grief. Children have also been deeply affected, they are easily frightened and traumatised. This was a horrifying disaster, and beyond mourning their injured and martyred family members, they were mentally scarred."***
>
> - Community leader (male), Kunar

Poor shelter and inadequate sanitation have heightened the risk of disease outbreaks, including severe diarrhoeal diseases and measles.[16] The lack of potable water, especially running water, is a significant problem, raised frequently by local interviewees. In addition to drinking water infrastructure, the earthquake badly disrupted channels for irrigation. OCHA acknowledges a severe funding shortfall for water and sanitation response: "[There are] limited resources for tangible scale-up to cover identified needs in 134 assessed areas."[17] In addition, OCHA notes that some camps are in flood-prone areas, compounding the risk of disease outbreaks. While the lack of electricity is not a feature of reporting by humanitarian agencies, it was frequently raised as a critical concern in interviews with people affected by the earthquake.

While reports indicated that the immediate distribution of relief items included people with disabilities, there is a clear lack of disability inclusion in the broader response (e.g. accessible latrines and temporary shelters and specific health services). People with disabilities consulted through a joint accountability mechanism reported that aid distributions were not accessible to them and requested replacements for mobility aids such as wheelchairs.[18] The safe disposal of animal carcasses and veterinary services for livestock were immediate priorities and met with some success. The need to sustain and expand veterinary services is highlighted in reports and local interviews.

Local leadership, systemic strain

The initial response underscored the crucial role of Afghan responders and the flexibility of international actors working under difficult conditions. As days went on, coverage gaps and strains on the aid system became more evident.

14. Ibid.
15. UNFPA. (2020). *Minimum initial service package (MISP) for SRH in crisis situations.* https://www.unfpa.org/resources/minimum-initial-service-package-misp-srh-crisis-situations
16. World Health Organization (WHO) Afghanistan. (2025, 25 September). *Earthquake in eastern Afghanistan.* WHO situation report number 12. https://www.emro.who.int/images/stories/afghanistan/afghanistan-earthquake-sitatuion-report-12-25-september-2025.pdf
17. OCHA (2025, 25 September).
18. UNFPA 2025.

3. A NEW REALITY: HUMANITARIAN RESPONSE IN POST-USAID, TALIBAN-CONTROLLED AFGHANISTAN

The earthquake response was launched against a backdrop of unprecedented cuts and heightened levels of vulnerability. In interviews, humanitarian actors were clear about the severity of aid cuts in Afghanistan.

With international aid funding to Afghanistan reduced by nearly 50% in 2025,[19] operational budgets of aid agencies, in the words of one UN interviewee, have been "stripped to the bone". For that reason, the interviewee said, there is deep concern about what will happen in the next emergency, as "the ability to provide even the most basic shock response is being eroded fast." Reductions are seen across aid sectors, with cuts in health frequently cited: 44 clinics in Nangarhar and Kunar provinces closed or suspended operation in 2025 due to the USAID defunding.[20] [21] As a result, the humanitarian needs and response plan for Afghanistan underwent a process of 'urgent prioritisation' in April 2025, in which the areas later affected by the earthquake did not receive priority status. The de-prioritisation of humanitarian interventions compounds a severe shortage of direct international funding for basic services, exacerbated by the Taliban takeover and, overall, deepening systemic fragility.

UNCERTAIN RECOVERY

Donors — particularly the UK, Germany, Japan, European Civil Protection and Humanitarian Aid Operations — ECHO — and international financial institutions, such as the World Bank and Asian Development Bank (ADB), responded quickly to the earthquake appeal with permissions to reallocate funds from existing grants, and commitments for additional emergency funding. Government donors that are not members of the Organisation for Economic Co-operation and Development (OECD)'s Development Assistance Committee ('non-DAC donors') such as Qatar, UAE, China and Iran also made emergency contributions. The total amounts received, however, fell far short of the requests. As of 25 September 2025, OCHA reported that US$23.7 million had been contributed for the earthquake response, leaving a gap of US$115.9 million (83%) against assessed requirements for delivering life-saving response activities and supporting early recovery efforts (US$139.6 million).[22] A UN Central Emergency Response Fund (CERF) allocation of US$5 million was released within 48 hours through the rapid response window, half for food aid and the rest in support of UN operational agencies.[23]

As bilateral humanitarian funding declines, international financial institutions have become increasingly important for sustaining basic services and providing emergency financing in Afghanistan. ADB, in addition to a very quick triggering of crisis modifiers, supported the World Food Programme (WFP)

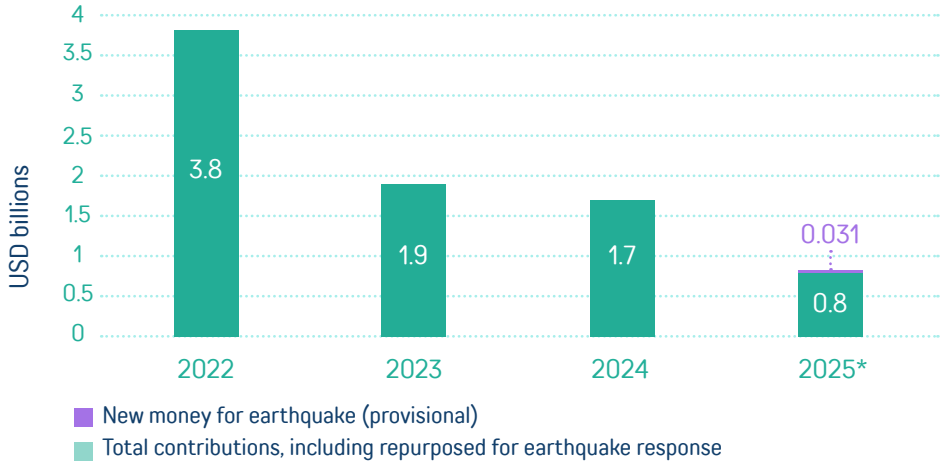
19. Mishra, V. (2025, 17 September). *Afghanistan faces 'perfect storm' of crises, UN warns.* UN News. https://news.un.org/en/story/2025/09/1165870
20. Yunus Yawar, M. and Greenfield, C. (2025, 1 September). *Funding cuts to Afghanistan obstruct earthquake response.* Reuters. https://www.reuters.com/world/asia-pacific/funding-cuts-afghanistan-obstruct-earthquake-response-2025-09-01/
21. WHO Afghanistan. (2025, 4 August). *Public health situation analysis (PHSA).* hhttps://cdn.who.int/media/docs/default-source/2021-dha-docs/phsa-afghanistan-270825-final.pdf
22. OCHA (2025, 25 September).
23. United Nations Central Emergency Response Fund (CERF). (n.d.). *CERF allocation, Afghanistan earthquake.* 1 September 2025. https://cerf.un.org/what-we-do/allocation/2025/summary/CERF-AFG-25-RR-1484

response with a US$3 million grant that will fund cash and in-kind assistance to approximately 60,000 people.[24] The grant will come from the Asia Pacific Disaster Response Fund, which provides fast-tracked grants to ADB's developing member countries for life-saving purposes in the immediate aftermath of major disasters triggered by a natural hazard.[25] Hopes have turned to the World Bank and ADB as possible sources of support for recovery and reconstruction funding, which appears unlikely to be sufficiently covered through humanitarian channels.

Governments beyond the traditional humanitarian donors of the OECD DAC also contributed funding, and several also made in-kind contributions. Qatar provided two field hospitals, food parcels, shelter materials and aid for 11,000 affected families on 4 September; Bangladesh delivered 11 tonnes of relief supplies; and UAE dispatched aid materials and a search and rescue team.[26] China provided assistance valued at 50 million yuan (about US$7 million).[27] These were largely provided directly to the de facto authorities. As DAC-donor aid diminishes, greater engagement by non-DAC donors will be increasingly essential to maintain adequate support. However, that this assistance largely took the form of one-off, in-kind donations does not demonstrate the sustained engagement needed to support recovery.

The inescapable fact remains that, despite a major earthquake occurring in a country with already severe levels of humanitarian need, the amounts raised from the international donor community in 2025 are less than half that of the prior year, and the amount of ***new*** funding that donors have contributed specifically for the earthquake response so far remains very small (Figure 1).

Figure 1: Humanitarian flows to Afghanistan



Sources: OCHA Financial Tracking Service (FTS): Afghanistan 2025 individual funding flows. Accessed 3 October 2025 from https://fts.unocha.org/countries/1/flows/2025. Estimated 'new money' figures provided by a donor representative interviewed in September 2025.

As the emergency phase has rolled out, reporting has become more regular, comprehensive and organised. While assessment has been ongoing in most affected villages, assistance efforts have been focused on the collective sites where camps have been established for displaced people. Interviews revealed a very typical tension; necessary improvements to living conditions – notably in water, sanitation and hygiene; protection; and shelter – require significant investment in what are hoped to be short-term temporary sites. Gaps in the response are being highlighted by aid agencies, due to a lack of funding. This is leading to an inability to expand operations to meet existing needs and concerns that they will not be able to address recovery needs as winter closes in.

24. World Food Programme (WFP). (2025, 2 October). *WFP responds to the earthquakes in Afghanistan amid rising humanitarian needs.* https://www.wfp.org/news/wfp-responds-earthquakes-afghanistan-amid-rising-humanitarian-needs
25. Asian Development Bank (ADB). (2025, 17 September). *ADB to provide $3 million in emergency earthquake relief for Afghanistan.* https://www.adb.org/news/adb-provide-3-million-emergency-earthquake-relief-afghanistan
26. Khyber Mail. (2025, 4 September). *Qatari Minister Dr. Maryam Al Misnad becomes first female Arab official to visit Taliban-controlled Afghanistan amid earthquake relief mission.* https://www.thekhybermail.com/qatari-minister-dr-maryam-al-misnad-becomes-first-female-arab-official-to-visit-taliban-controlled-afghanistan-amid-earthquake-relief-mission/ ; Sedayedarya. (2025, 2 September). *UAE sends search and rescue team to eastern Afghanistan,* https://sedayedarya.tv/2025/09/02/uae-sends-search-and-rescue-team-to-eastern-afghanistan/
27. People's Daily Online. (2025, 24 September). *China's aid brings relief to quake-stricken families in Afghanistan.* https://en.people.cn/n3/2025/0924/c90000-20370218.html

Coordination structures were set up according to norms that pre-date the humanitarian reset. They were broadly considered to have functioned smoothly. National-level coordination takes place through the main humanitarian leadership and interagency groups that bring together all sectors, while at the local level, OCHA's field coordination teams work with the earthquake committees established by the Afghan authorities. Some participants appreciated the functioning layers that allowed cooperation across levels. Others questioned the system's efficiency. Operational actors interviewed expressed concern about duplication, noting that the response was skewed toward more accessible areas. At the same time, coordination processes and public reporting give the impression of a stronger aid presence than actually exists, obscuring gaps in coverage.

> ***"A problem has been that cluster leads have assigned agencies to villages, and agencies have said that they will distribute, but haven't actually done it. That has created gaps and exclusion but isn't showing up [in coordination plans and maps] because clusters assume that once a village is assigned, it is covered. There is a need for a re-assignment process if agencies that have said they will cover something can't deliver."***
>
> - International NGO representative

Some operational actors are therefore advocating for a transition to an 'area-based coordination model',[28] which has been used by some international NGOs with some success.

A LOOMING CRISIS SPIRAL: RELIEF AID WITHOUT RESILIENCE-BUILDING

At the time of writing, most operational agencies were referring to the end of the emergency phase of their operations, and an ongoing assessment of markets and recovery needs, undertaken by the UN in conjunction with international financial institutions. From the onset of the response, operational actors expressed fears for the viability of the mid- to long-term response. In part, this was due to the high proportion of funding allocated for only the emergency phase, either to be spent within a relatively short period of time, and/or earmarked for emergency relief efforts only.

> ***"As we move into early recovery … I'm worried that it will be an issue. BHA [US Bureau for Humanitarian Assistance] and PRM [US Bureau of Population, Refugees, and Migration] were big, unrestricted [funding] sources, so it's left a huge gap and left us with less room to manoeuvre."***
>
> - UN agency representative

Some actors noted that they would struggle to absorb the funding received, including some large, additional allocations for only the emergency phase. This was noted as a constraint for national NGOs that had received allocations to be disbursed quickly.

28. UNICEF. (n.d.). *Eastern region earthquake response plan.* Sept 2025 – March 2026. https://www.unicef.org/afghanistan/documents/eastern-region-earthquake-response-plan

Several operational agencies expressed concern, yet to be fully tested, that significant amounts of the funding received have effectively been 'borrowed', either geographically, thematically or temporally.

> ***"The resources are really, really becoming thin. I would say with confidence that if something else happened next week, or today, or tomorrow, we will not be able to mobilise at the same speed … The cuts to Afghanistan funding have been massive."***
>
> - International NGO representative

UN and international NGO interviewees repeatedly stressed the small proportion of earthquake response funding approved by donors that represented 'new money'. Most was repurposed from existing grants or drawdowns from agency reserves that may or may not be backfilled by donors. This could leave other areas of the country, or later project phases, underserved. A few international aid actors expressed fears that the earthquake has left the aid system in Afghanistan with a heightened risk of a perpetual crisis spiral in which emergency-only funding stalls recovery and further erodes resilience.

> ***"If we [the international aid community] will help here and now, and then we cannot help for the long term – if that becomes the reality – then we're going to be in a constant emergency cycle. Every time something happens, we know we can only get money for the here and now, so we know it will happen again, and then you just keep going back [to emergency appeals] for Afghanistan. It's going to be an interesting test to see how we as a community respond to this."***
>
> - International NGO representative

"Stripped to the bone"

The humanitarian funding collapse has left agencies unable to guarantee even minimal surge capacity for the next crisis. And a lack of recovery financing leaves Afghans more vulnerable to future shocks.

4. GENDER EXCLUSION IN THE EARTHQUAKE RESPONSE AND THE ETHICAL PROBLEM OF 'WORKAROUNDS'

Most observers agreed that the initial earthquake response was not overly hindered by the national legal restrictions on women's participation. Search and rescue operations, medical evacuations and hospital admissions appeared, at least outwardly, not to discriminate by gender, and female staff participated in needs assessment and response efforts. Interviewees reported that local authorities worked alongside female aid workers in the first 48 hours, in an unusually cooperative atmosphere during the high-pressure early phase of the response. However, restrictions on women's participation continue to tighten elsewhere across the country, and any easing during the acute crisis is expected to be short-lived. In addition, interviews with female earthquake survivors revealed hidden barriers to access that the aid sector may not fully recognise or be equipped to address.

A UN Women *Gender Alert* notes that while the de facto authorities have supported women's participation in the earthquake response, the broader system of legal and social oppression they have imposed on the country has sharply reduced the number of women involved in response efforts. Women made up 17 of 44 joint assessment team members (39% of enumerators), helping identify the needs of women and girls. However, about 90% of medical staff in the response were men, with a very limited number of women treating the injured in hospitals.[29] This had serious implications for meeting the emergency medical care of women.

A female villager recounted that:

> ***"Some men who were injured were transported to Jalalabad and Kabul for treatment, but many women, including myself, still have injuries that have not received proper medical care. It is considered shameful here for women to see male doctors, and there is only one female doctor available, who is also a volunteer. The situation is so challenging that she cannot see everyone in need throughout the day. "***
>
> - Female resident, Nangarhar

Some injured women were discouraged from attempting to get medical care at all. Another female interviewee highlighted women's unmet healthcare needs:

> ***"Out of shame and because of Pashtun traditions and customs, we [women] cannot express our pain or show our hidden wounds to anyone. We use home medicines such as oils, Vaseline, and others so that our pain may ease a little."***
>
> - Female resident, Kunar

One international NGO that had the advantage of provincial offices in proximity to the affected areas and pre-existing health teams had 'no challenge at all' deploying their female health workers, facilitators and midwives to affected villages. They describe how the additional arrangements for female staff

29. UN Women. (2025). *Gender Alert: Needs of women and girls after the eastern Afghanistan earthquake.* https://reliefweb.int/report/afghanistan/gender-alert-needs-women-and-girls-after-eastern-afghanistan-earthquake

(such as *mahrams*, for example) are "now simply the cost of doing business for us, so we carried on as before, and no new restrictions were placed by authorities that created problems for our response". This reflects a rising level of tolerance that may be required for organisations to sustain their programming in the country but shows how high tolerance for the exclusion of women has increased among the international humanitarian community in Afghanistan. Additionally, for every successful intervention reported, there are other accounts of crisis-affected women facing barriers to aid.

The cumulative effect of restrictions, including the requirement for escorts and segregated accommodation, has made it so difficult for women to work that most agencies in Afghanistan now have predominantly male staff. As one international representative put it, "Simply looking at restrictions on female aid workers is too simplistic." Consultations under a joint accountability mechanism confirmed that some affected areas had little or no presence of female staff, limiting women's and girls' access to services. Women specifically requested safe spaces, separate outpatient departments and care from female staff to meet their health and protection needs.[30] Interviews for this review reinforced these findings. One community interviewee noted, "Women cannot go outside because of crowds of men and a severe lack of toilets, which especially impacts women and children."

Meanwhile, the broader national trend to further strip women of their human rights is intensifying. Unrelated to the earthquake response, new restrictions prevent female staff from entering UN compounds, amounting to a blockade.[31] A small number of interviewees voiced fears that the same restrictions may soon extend to other organisations, formerly spared. Additionally, at the time of writing, Afghanistan went offline, with no internet or mobile connectivity for over 48 hours, sparking fears that an internet blackout imposed by the Taliban would persist and expand, further isolating women and undermining aid operations.

Mixed messages from Taliban authorities further complicated the situation. A UN interviewee recalled that an initial announcement from Kabul stated that female aid workers could participate in the earthquake response – a decision that may have been a calculated risk by officials in Kabul, since it did not originate from the more hardline authorities in Kandahar. Local staff from both international NGOs and national NGOs have taken advantage of the window of opportunity to carry out their work, understanding that this could be curtailed. A local female aid worker said:

> ***"The situation was so intense that men and women, whether from our teams, communities or even authorities, were emotionally in tears, and we all worked hand in hand to save lives and assess people. At that time, we didn't think much of the restrictions and limitations."***
>
> - Female national aid worker

NO LONGER A DILEMMA? HUMANITARIANS' ACCOMMODATION TO GENDER EXCLUSION

A previous HRRI report, Navigating Ethical Dilemmas for Humanitarian Action in Afghanistan (2023), examined the initial moral anguish and 'toxic debates' within aid organisations working in Afghanistan in the face of the Taliban's decrees against women.32 The dilemma over whether to stay in Afghanistan and continue serving people in need or to take a principled stand by refusing to comply with the authorities' restrictions was, in practice, resolved in favour of the former. Outrage gradually gave way to a more pragmatic acceptance, as organisations sought ways to keep operating under the new rules. Most adopted workarounds such as relying on male intermediaries, segregating female staff or having them work remotely from home.

30. UNFPA (2025).
31. United Nations Assistance Mission in Afghanistan (UNAMA). (2025, 11 September). *UN in Afghanistan calls for lifting of restrictions on female staff accessing UN premises.* https://unama.unmissions.org/un-afghanistan-calls-lifting-restrictions-female-staff-accessing-un-premises
32. Bowden, M., Hakimi, H. Harvey, P., Moosakhel, G.R., Nemat, O., Stoddard, A., Thomas, M., Timmins, N. and Voigt, T. (2023). *Navigating ethical dilemmas for humanitarian action in Afghanistan.* UKHIH/Humanitarian Outcomes. https://humanitarianoutcomes.org/sites/default/files/publications/ho-ukhih_afghanistan_final_6_21_23.pdf

So far, access has been preserved at the cost of normalising women's exclusion. The tightening restrictions, including internet blockages that could make remote solutions impossible, raise a deeper question for the sector: will a red line between pragmatic adaptation and moral complicity ever be reached, or will it continue to recede ever further? Beyond failing to advance women's freedom in Afghanistan, such acquiescence risks damaging both the external credibility of aid organisations, which have already come under sharp criticism,[33] and the internal morale of their staff by subjecting them to moral injury.

Some answers may lie in the immediate aftermath of the earthquake, when certain local officials actively ensured women's participation in the response, and others at least refrained from obstructing it. The ability to let humanitarian instinct and solidarity override restrictive directives from central authorities was strengthened by the presence of Afghan organisations – and some international NGOs – that already had trained female staff and outreach workers in place in the affected areas. This suggests that, under the current context, adopting a localised, low-profile approach to training standby cadres of women could yield multiple benefits.

Access at the cost of principle

Gender exclusion continues to worsen, as aid organisations continue to adjust to it. Operational access has been maintained but at the price of profound compromises to human rights and humanitarian principles and programme quality. Building and defending local women's spaces and cadres of female responders offers a path toward active solidarity over passive accommodation.

33. For example, Washington Post. (2024, 28 August). *Afghanistan goes back to war — against women.* https://www.washingtonpost.com/opinions/2024/08/28/afghanistan-taliban-women-law-repression/ The Washington Post; Slim, H. (2023, 11 January). Humanitarians must reject the Taliban's misogyny. *Global Policy Journal.* https://www.globalpolicyjournal.com/blog/11/01/2023/humanitarians-must-reject-talibans-misogyny globalpolicyjournal.com

5. CONCLUSIONS AND IMPLICATIONS FOR ACTION

It should first be acknowledged that the earthquake response in eastern Afghanistan demonstrated the commitment and skill of local, national and international responders operating under extraordinarily difficult conditions.

The predictable way the international system kicked into gear in the first days, spending down the last of the stockpiles and flexible funding, belied the fact that the ground has shifted beneath it with the withdrawal of US lead donorship and the slashing of humanitarian budgets worldwide.

Given that the restructuring of the international aid sector is ongoing and uncertain, any recommendations offered here can only be indicative and provisional. Nonetheless, the crisis has underscored the need for major structural adaptations to the aid system to reflect a new reality of sharply constrained resources and reduced international engagement. Additionally, the conditions of systematic gender exclusion and denial of rights perpetrated by the Taliban regime call into question the ethics of that very engagement.

Among the elements that worked best (including in terms of gender challenges) were area-based approaches that enabled timely response operations and pragmatic engagement with local authorities to reach affected communities. The greatest gaps lay in the overall volume of funding, especially for post-acute disaster recovery, and in the provision of MHPSS. Finally, the moral issue of complicity in the subjugation of Afghan women remains unresolved, casting a shadow over the humanitarian enterprise. Taking a more active stance to challenge the exclusion of women would, of course, entail risks – for aid organisations as well as for the women they work with and advocate for. These risks, and the possibility that humanitarian access in Afghanistan could be further eroded, present an ethical dilemma, but one worth confronting to avoid complicity in an unacceptable system of exclusion.

It is beyond the scope of this rapid review — conducted in the midst of an ongoing emergency response and a profound disruption to the global aid system — to propose detailed, operational recommendations that individual organisations could readily implement. Instead, the below seek to inform collective thinking and dialogue on strategic policy and structural reform for aid to Afghanistan.

CONCLUSION: DEFUNDING HAS STRETCHED THE AID SYSTEM IN AFGHANISTAN TO THE BREAKING POINT

Action area: Concentrate limited capacity and resources on local response systems

OCHA, UN agencies, and international NGOs

Adopt focused, area-based approaches to operations and coordination. Reduce national level offices and activities to pivot to an area-based operational approach to concentrate limited capacity in a defined geographic area rather than spreading it thin.

Centralised, country-level coordination structures that mirror the UN's political/diplomatic presence in countries are no longer realistic or affordable in the current funding environment. As resources and the number of personnel contract, attempts to maintain national coverage through remote coordination emanating from Kabul only dilute capacity further. Coordination only works when coordinators are physically present and empowered at the point of delivery. Ultimately, an area-based approach acknowledges that effective operations and coordination are spatial, not bureaucratic or mandate-based – it depends on presence and the capacity to act.

The UN-led coordination structures and the emergency appeal for the earthquake were activated according to ways of working that pre-date the funding crisis and the Taliban takeover. In the latter stages of the emergency response, demand grew for area-based coordination, raising the question of how this might have been incorporated from the onset of the response and appeal phase.

National and local humanitarian actors

Continue to build domestic capacities for search, rescue and immediate response.

Build on lessons from this earthquake response to strengthen capacities for search, rescue, immediate response and recovery. Support and enable access for Afghan and international humanitarian organisations, including facilitating access for female aid workers, so that they can reach women and girls in need. Keep connectivity as a crucial lifeline for people across Afghanistan to access support from the outside world, from local actors and from the private sector. Afghan civil society actors should defend and argue for space to operate that respects humanitarian principles and enables impartiality and independence, including the ability to reach women and girls.

CONCLUSION: THE AID SYSTEM HAS HELPED NORMALISE WOMEN'S EXCLUSION AS IT CONTINUES TO WORSEN

Action area: Develop collective, practical strategies to expand women's participation and access in defiance of gender exclusion measures.

International and Afghan NGOs

Create trained female outreach cadres and women's spaces, including the adaptive use of schools or health posts, so that women's participation can be embedded in response.

While the earthquake response showed that women can and do participate when authorities permit or turn a blind eye, these openings are fragile and uneven. However, when female staff and volunteers are already embedded in operations, and when safe community spaces for women already exist, their participation becomes less vulnerable to shifting edicts. Operational actors should therefore invest in maintaining standing cadres of trained female outreach workers and pre-established women's spaces – including the flexible use of schools or health posts – in an effort toward making women's involvement a built-in feature of response mechanisms rather than a subject of negotiation.

Afghan Red Crescent Society and other civil society actors

Engage with the de facto authorities to defend and expand an operational space that respects humanitarian principles and enables impartiality and independence, including the ability to reach women and girls.

ARCS in particular plays a critical auxiliary and bridging role in this space.

All humanitarian and human rights actors should collectively explore using remote modalities aimed at women and girls, including online training and information delivery, including the use of resilient communications solutions such as satellite connectivity (e.g. Starlink). Above all, moving from a stance of cautious appeasement to one of principled, subversive solidarity in this way would not only strengthen women's participation but also help restore moral agency to aid workers who feel complicit in an unjust system.

CONCLUSION: COMMUNITIES SEE PSYCHOLOGICAL RECOVERY AS VITAL AS ANY OTHER NEED — BUT IT RECEIVES LITTLE SUPPORT

Action area: Build capacities to address the gap in mental health and psychological support services

UN and international NGOs

Support Afghan organisations to meet the acute mental health needs of disaster-affected populations through community-based approaches.

MHPSS are most appropriately and effectively delivered by trained individuals from the same communities and cultural context. Afghan organisations that prioritise these services and equip lay workers and community volunteers to deliver brief, group-based psychosocial support can help meet the acute mental

health needs of disaster-affected populations. As local aid workers note, MHPSS programming is especially well received when combined with income-generating or livelihood support, offering not only psychological relief but also tangible means for communities to endure and recover from the crisis. In addition, by establishing group spaces for women, such initiatives can also serve as entry points for addressing women's broader social and practical needs and inclusion.

CONCLUSION: NEW FINANCING ACTORS, CHANNELS AND STRATEGIES ARE URGENTLY NEEDED

Action area: Identify, mobilise and align a wider scope of funding resources

Donors

Coordinate among donor government agencies to pool humanitarian resources for rapid crisis response, and among international financial institutions to follow up on recovery and resilience financing.

The earthquake response was funded largely through reprogrammed or rapidly mobilised humanitarian resources, with little prospect of replenishment for ongoing or recovery needs. And though the absence of a bridge between short-term emergency funding and longer-term recovery support is not new, in the current environment of shrinking humanitarian budgets, the result is a cycle of stop-gap responses without sustained investment in resilience or reconstruction — a system set up for recurrent disaster. Therefore, addressing this gap will require a more deliberate sequencing of financing instruments, beginning with pooled donor funding for immediate response and followed by recovery financing from international financial institutions once engagement conditions are met. China, Gulf states and other non-DAC donors should be particularly encouraged to contribute to pooled mechanisms, whether CERF, the Afghanistan Humanitarian Fund or other anticipatory financing mechanisms.

In the context of aid cutbacks and limited resources, donors need to focus on enabling international humanitarian actors to maintain the essential foundations of the response system. They should be asking what core agencies require to continue operating and to respond effectively to new shocks. Donors should also consider how to support humanitarian diplomacy in an increasingly multipolar world, working with non-DAC donors and neighbouring states to secure financing for responses and to advocate with de facto authorities for humanitarian access, connectivity and women's rights.

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APPENDIX: PEOPLE INTERVIEWED

IN-PERSON INTERVIEWS IN AFFECTED AREAS (ANONYMOUS)

Village and community representatives

- Village representative 1, Kunar (male)
- Village representative 2, Kunar (male)
- Village representative 3, Kunar (male)
- Community representative 1, Kunar (male)
- Community representative 2, Kunar (male)
- Community representative 3, Kunar (male)
- Community representative 4, Kunar (male)
- Community representative 5, Nangarhar (male)
- Community representative 6, Nangarhar (male)
- Community representative 7, Nangarhar (male)

Community elders

- Community elder 1, Nangarhar (male)
- Community elder 2, Nangarhar (male)
- Community elder 3, Nangarhar (male)

Afghan local aid workers

- Aid worker 1, Kunar (male)
- Aid worker 2, Kunar (male)
- Aid worker 3, Kunar (female)
- Aid worker (and resident) 4, Nangarhar (female)

Residents

- Resident 1, Nangarhar (female)
- Resident 2, Nangarhar (female)
- Resident 3, Kunar (female)

REMOTE INTERVIEWS

Government and donor representatives

- Alastair Burnett – Foreign, Commonwealth & Development Office
- Francois Goemans – European Civil Protection and Humanitarian Aid Operations

International NGOs

- Charity Lukaya – Save the Children
- Hans Johansen – ACTED
- Johanne Mauger – Handicap International
- Mohammad Nasrat Hamidi – Norwegian Refugee Council
- Shahzad Jamil – Concern Worldwide
- Zia Mayar – Danish Refugee Council

National and local NGOs (anonymous)

- Aid worker (male) – National NGO
- Aid worker (female) – Local NGO, Kunar

Red Cross/Red Crescent Movement

- Joy Singhal – International Federation of Red Cross and Red Crescent Societies

UN agencies

- John Aylieff – World Food Programme
- Kate Carey – Office for the Coordination of Humanitarian Affairs
- Raul Cumba – World Food Programme
- Arafat Jamal – UNHCR
- Ana Maria Leal – United Nations Population Fund
- Tajudeen Oyewale – UNICEF

Independent experts

- Mahboob Abbasi – ACAPS
- Mark Bowden – Independent

SEISMIC SHIFTS:

HOW A HUMANITARIAN SECTOR IN UPHEAVAL RESPONDED TO THE 2025 AFGHANISTAN EARTHQUAKE

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