Gender update #2: Forced Returns from Pakistan

This Gender Alert was developed by the Gender in Humanitarian Action (GiHA) Working Group (GiHA WG) in Afghanistan. The document is based on reports, and updates from IOM and humanitarian actors, GiHA WG members, and women’s organizations in the Southern and Eastern regions of Afghanistan. The information was complemented with data collected during three focus group discussions (FGDs) as well as additional interviews conducted with affected women and girls in the Torkham and Spin Boldak border areas and in areas of return in Eastern region.

Background

In the last two months, since Pakistani authorities ordered all undocumented foreigners to leave the country, more than 428,000 Afghans have returned through the Torkham and Spin Boldak border crossings. 80% are women and children, 48% are women and girls, and 13% are women heads of households. While returnees are still entering Afghanistan, many returnees have already made their way to their areas of return and resettled mainly in Nangarhar, Kandahar, Kunar, Kabul, and Kunduz. As winter approaches, conditions at the borders worsen with thousands of returnees sleeping under extreme temperatures, with insufficient shelter and WASH facilities, lack of clean water and a surge in health concerns linked to these conditions. For those who have moved to areas of return, they also face precarious, uncertain conditions, including a dire economic scenario, lack of livelihood opportunities and mental health struggles. This alert provides information on the immediate and medium-term gendered needs of women and girls and men and boys, including in terms of shelter, protection services, psychosocial support and access to livelihood opportunities.

1 UNHCR REGIONAL BUREAU FOR ASIA AND PACIFIC (RBAP) EMERGENCY UPDATE #4: PAKISTAN-AFGHANISTAN RETURNS RESPONSE As of 30 November 2023 available at: https://reliefweb.int/attachments/40623711-00bc-4cc5-8052-8894c4dce8a5/UNHCR%20Pakistan-Afghanistan%20Returns%20Emergency%20Response%20Update%20%234.pdf
2 TOTAL INFLOW RETURNEES FROM PAKISTAN - 25 NOV 2023. FLOW MONITORING DATA (IOM - UNHCR Pakistan)  
3 (WHO Afghanistan: Returnees Response Health Situation Report No. 3 (23 November 2023)
4 (WHO Afghanistan: Returnees Response Health Situation Report No. 3 (23 November 2023)
Key findings

- **Returnee families are struggling to plan beyond the short term, creating additional gendered challenges:** IOM’s data on returnee intentions shows that most returnee families plan to stay with relatives in the short term but have no secure plan for the medium and long term. The Eastern (Jalalabad) and Central regions (Kabul city) were most likely to be mentioned as places of intended return. 20% of returnees were going to provinces in the Southern region, 47% to provinces in the Eastern region, 10% going to Central regions, with women and men in almost the same percentages. In these locations, both women and men plan to be hosted by family members and report being concerned about becoming a burden to their families. In the context of a humanitarian crisis that is affecting two thirds of the population, forced returns come at a time when families are already struggling to get by. Returnee families on average have six children, creating potential protection risks for girls (returnees and host families) who may not have adequate safe spaces to sleep and bathe, and are spending a lot of time inside the house in the current context of restrictions. This is likely to increase the amount of time that women (both in hosting households and returnee women) dedicate to care and unpaid labour. This situation could also be amplified for women headed households. Previous reports have shown that returning families headed by women had higher numbers of dependents compared to the ones headed by men, creating a need for additional care.

- **This uncertainty has affected women’s mental health outcomes.** In FGDs, women interviewed express frustration and sadness about their situation due to their concerns about the future. Apart from the stress linked to the situation of displacement and having to leave all their belongings behind, many women lived through distressing experiences, including being victims of illegal detention in Pakistan, witnessing their spouse or family members getting arrested or being separated with their family members as they were forced to return without them. Most returnees consulted by GiHA WG during FGDs expressed uncertainty about their future in Afghanistan in the absence of concrete plans for integration and reported feelings of heightened stress and despair. These women often face severe trauma and worry about their return, requiring specialized support and care.

- **Returnees are in need of emergency support to cover basic needs of their families.** With the harsh winter coming, women consulted asked for additional emergency support and cash assistance. In addition to the standard return packages provided by UN agencies at the border, this included wintertization support, as well as household items, nutrition services, and cash to cover basic needs, including additional cash for transportation to their final place of return, as many have endured journeys spanning several days often being compelled to part with their possessions in exchange for transportation. Although most of the women who participated in the FGDs shared they would stay initially with relatives, some explained they would still need to pay rent further highlighting their need for cash-based assistance.

- **Reeling under multiple interlocking risks and pressures, women returnees are most likely to face obstacles to rebuild savings, resources and assets in the current context of restrictions.** While emergency cash was mentioned in FGDs, it was less likely to be chosen as a top need by surveyed returnees, with most favoring longer term economic support. According to latest IOM data, returnee women and men’s priority needs are similar with most wanting to access employment, showing the need for longer term support. This is understandable considering the dire financial situation of the returnee population. Most of the women interviewed had to leave all their belongings behind, while some reported their income was taken away by Pakistani authorities. Business start-up grants were also requested by both women and men returnees. When asked about existing skills, a majority of women and men returnees reported not having any specific skills. Among women who mentioned existing skills, tailoring was the most common, followed by farming. In FGDs, women expressed need for income generating activities, including agricultural support (livestock, chicken, farming tools); toolkits and vocational equipment; jobs opportunities and education for children.

- **Women, specifically those arriving at Spin Boldak border point, mention counseling and advice on available support as a second top need, underscoring the importance of access to information and documentation.** During the week of 19-25 November, 2,700 women mentioned counseling and advice as a need when entering Afghanistan. Indeed,
all women interviewed individually and in FGDs mentioned they had no information about available support and/or aid programs. In return areas, this lack of information could be aggravated by the fact that women may have no networks to reach out to as they have been outside of the country for years and are limited by current restrictions.

- **Obstacles accessing National Identity (ID) card (tazkera) can further aggravate women’s lack of access to information and services**. Some reports have pointed to the fact that mostly returnee men were undergoing the process to obtain a tazkera, and that when delivering tazkeras, authorities had been asking about proof of linkages with the returning community. It is important to note that this type of proof will be more challenging to produce for women and WHH, with women being less likely to create social networks in communities than men due to the many restrictions they already face. This is in addition to the challenges mentioned in the Gena der Alert #1, including families prioritizing tazkeras for male members in the family due to the costs attached to it and perceived limited benefits for women. Acknowledging this obstacle to accessing aid, different humanitarian agencies have relied on the need to prove identity through tazkera to ensure humanitarian assistance reaches the extremely vulnerable, a practice which should be standardized across the response.

- **As health concerns rise, returnee women and men are also looking for medical treatment, specifically at the Torkham border point**. This was the case for 2,300 women and 2,400 men surveyed by IOM during the week 19-25 November. Extreme temperatures, and limited access to WASH facilities and clean water at border points have led to a surge of infectious diseases, malnutrition, and mental health problems. In the past month, over 3,000 cases of acute respiratory infections and 1,200 cases of diarrhea in children were recorded. For women, current restrictions also narrow access to healthcare: recent directives targeting women, current restrictions also narrow access to healthcare. Women planning to return to Eastern region, medical attention was the second highest need, much higher than advice and counseling. This may show the dire health situation of women entering through Torkham border point, which may also be related a higher number of returnees entering through Torkham, while facilities are lacking for proper disease prevention. For women returning to Southern region however, advice and counseling was the second top need, with medical needs slightly less critical.

- **Women Headed Households may be harder to locate in their areas of return and risk being excluded from assistance**. Many women at border points report that their husbands and other family members were arrested in Pakistan due to lack of documentation and that they have had to return to Afghanistan on their own. According to the latest data recorded by IOM at the border, most of these women are moving towards urban centers including Kandahar City (463 women headed households), Kabul City (426 women headed households) and Jalalabad (339 women headed households). This can be explained by the fact that these households cannot rely on a man to be the breadwinner for the family and ensure income and services and may be more comfortable in urban settings where they can rely on some existing social networks and proximity of services. Nevertheless, due to the restrictions imposed on women’s rights and mobility, they may face challenges in being identified and targeted by humanitarian actors. While this is the case for the overall returnee population which proves to be difficult to locate due to the limited tracking possibility, this is likely to be even more challenging for women headed households. While registration at the border

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12Findings from ICCG mission to Farah visiting camps where returnees from Pakistan have resettled  
13TOTAL INFLOW RETURNEES FROM PAKISTAN - 25 NOV 2023, FLOW MONITORING DATA (IOM - UNHCR Pakistan)  
14(WHO) Afghanistan: Returnees Response Health Situation Report No. 3 (23 November 2023)  
15Major outbreak of disease escalating in camps as 250,000 people, mostly children, return to Afghanistan from Pakistan, Save the Children, November 17, 2023, available at: https://reliefweb.int/report/afghanistan/major-outbreak-disease-escalating-camps-250000-people-mostly-children-return-afghanistan-pakistan  
17Ibid  
18TOTAL INFLOW RETURNEES FROM PAKISTAN - 25 NOV 2023, FLOW MONITORING DATA (IOM - UNHCR Pakistan)  
19Ibid
It was noted in the 20 years to 3 years, which indicates many fled after the Taliban took power. This creates a heightened risk of repercussions upon resettlement. Protection concerns were also present in areas of return where humanitarian actors noted an insufficient number of tents and the absence of water points, posing a challenge to safety and privacy of women.

• Reason for departure aggravate the needs of women and create protection concerns: In the case of the returnee response, understanding the needs of women who may have fled to Pakistan due to their ethnic origin or their work during the previous Afghan administration is also critical. Interviews have shed light on distressing cases of Gender-Based Violence (GBV), where women fled Afghanistan due to imminent forced marriages within the family. These women sought refuge by escaping such situations, emphasizing the complex and urgent nature of their security and safety needs when coming back. FGDs conducted at Torkham border point also seem to indicate that most women had lived a short amount of time in Pakistan, ranging from 1.5 years to 3 years, which indicates many fled after the Taliban took power. This creates a heightened risk of repercussions upon resettlement. Protection concerns were also present in areas of return where humanitarian actors noted an insufficient number of tents and the absence of water points, posing a challenge to safety and privacy of women.

• Intersectonal vulnerabilities should also be captured and mitigated to ensure they do not aggravate the situation of women. It was noted by GiHA partners that data being collected at the moment does not include information on people living with disabilities. This leaves the needs of women and girls with disabilities unmapped, including their potential challenges in accessing services and receiving humanitarian support. Finally, understanding the situation of women in male headed households is also paramount as women may have come back with different male family members due to their spouses being detained. The situation of women within these extended families is often vulnerable as their access to assistance is limited while they may not be recognized as WHH. Addressing the multifaceted challenges faced by vulnerable women, women headed households and women with disabilities who are grappling with involuntary repatriation, GBV, and security apprehensions is of utmost importance to ensure an inclusive response.

Recommendations to all humanitarian actors

[Coordination around identifying, tracking and reaching women, specifically women headed households and women with intersecting vulnerabilities]

• Identify and track areas of return for households with specific attention to WHH, and engage with women volunteers, women in communities and local women organizations to find and reach women in need and enable referrals. Engagement with local actors, women community networks and women led organizations is crucial to reaching women as they are better placed to find WHH and other women in vulnerable situations.

• Triangulate information between humanitarian agencies to ensure referrals and dedicated support, in particular for those agencies who provide dedicated services to women.

• Target areas of returns with a high number of WHH (including Jalalabad, Kabul City, Kandahar City and Kuz Kunar district) to provide dedicated and tailored support to these households.

• Collect data on women and men’s disability status, in order to keep track of their preferred area of return and provide dedicated support.

[Advocacy and engagement]

• Continue engagement with the DfA to advocate for women staff working in humanitarian agencies to fully participate across the spectrum of the response, ensuring that the situation of WHH and all women can be captured and their needs addressed, and mitigating SEAH risks in the response.

• Continue to support and facilitate the participation of women organizations in the response, including by advocating for unlocking access impediments these organizations face.

[Information sharing and guidance to returnees]

• Provide information, advice, guidance and counselling to returnee women and men in a gender-responsive manner, ensuring women and women headed households can be reached with this

32 Findings from ICCG mission to Farah visiting camps where returnees from Pakistan have resettled
information, preferably in person, through women staff.

[Winterization and basic needs]

- Ensure returnee families are receiving emergency relief to meet their basic needs, including NFIs and cash where possible. Provide emergency shelter for returnee families as well as support to those hosting returnees within the communities in overcrowded households, including with winterization support items, such as thermal blankets, plastic sheets, sleeping bags and winter clothes, covering (chador) for women and additional dignity kits. Providing cash for rent will also go a long way for returnees who have to rent out places.

[Protection]

- Continue to map out and mitigate the varied protection risks faced by women returning from Pakistan, including GBV and SEAH risks, with women staff at the forefront of efforts for service provision.

[Health and Psychosocial Support]

- Provide information and improve access to healthcare for returnee women to address increasing gender related health concerns, as well as health concerns of returnee women’s children.
- Provide psychosocial support for returnees, especially women who have experienced trauma and shock. Focus on addressing traumatic experiences of deportation as well as coping mechanisms for women facing severe restrictions on their rights and mobility.

[Livelihood Support Programs]

- Design and offer livelihood support programs for women and men returning from Pakistan to foster economic empowerment and sustainable reintegration into their communities, including cash for work by humanitarian partners, and longer-term livelihood training by development partners. With many women mentioning the have no/ limited skills, develop and expand programmes with training components to ensure women’s skills can be built and women benefit from learning. A low number of women have mentioned existing tailoring and farming skills, which should also be built upon.
- Where such programmes already exist, ensure returnee women can be referred to these through triangulating data between agencies working across the humanitarian-development nexus.