GENDER ALERT:
NEEDS OF WOMEN AND GIRLS AFTER THE EASTERN AFGHANISTAN EARTHQUAKE

GENDER IN HUMANITARIAN ACTION
Afghanistan

11 September 2025

"We lost our homes and all our belongings, so now we have nothing." Woman from Chawkay district, Kunar province.

This Gender Alert has been developed by the national Gender in Humanitarian Action Working Group (GiHA WG) in Afghanistan and the GiHA Working Group in the eastern region of Afghanistan. The Gender Alert is based on an analysis of primary data collected through a Multi-Sectoral Rapid Assessment Form (MSRAF) in the affected districts of Kunar, Laghman and Nangarhar, field visits to affected areas in Kunar and Nangarhar, focus group discussions with affected women and girls in Nurgal (Kunar), Chawkay (Kunar) and Dara-e-Nur (Nangarhar) districts, focus group discussions with women and men humanitarian workers, as well as updates, information and reports received from humanitarian actors, women-led organizations and members of the Women Advisory Group to the Humanitarian Country Team on the ground.

On 31 August 2025, at 23:47 local time, a 6.3 magnitude earthquake struck eastern Afghanistan, with an epicenter in Kama District, Nangarhar Province, near the Pakistan border. The shallow 8-10 km depth amplified the impact of the earthquake across Kunar, Laghman, Nangarhar and Nuristan provinces, resulting in damage to housing and infrastructure across 29 districts,[1] mainly in Nurgal (Kunar), Chawkay (Kunar), and Dara-e-Nur (Nangarhar). Landslides and blocked roads left many communities accessible only by foot, delaying search and rescue.[2] There have since been additional earthquakes on 2 September (5.3 magnitude), 4 September (4.7 magnitude and 5.6 magnitude), 5 September (5.2 magnitude) and 7 September (4.6 and 4.3 magnitude). There have also been continuous aftershocks as frequently as every 20 to 30 minutes, compounding trauma, instability and access issues. By 9 September, joint UN and NGO humanitarian assessments reported 1,978 deaths, 3,477 injuries, 7,537 homes destroyed, and 47,771 people affected.

Most affected communities are in remote areas with limited access – even under normal circumstances. Damage from the successive earthquakes, including landslides and road blockages, has made roads to these villages impassable.[3] The lack of network coverage has also impacted information sharing. This has delayed search and rescue, assessments and delivery of assistance. Many communities have relocated to flatter areas lower in the valley, often walking for hours on foot to find a safer space and gather in informal settlements.

[1]REACH WOAA preliminary data : «Unmet Needs in Eastern Afghanistan Prior to the Nangahar Earthquakes», 02 Sep 2025
[2]OCHA Flash Update 1 ,1# Sept
[3]OCHA Flash Update 1 ,1# Sept

Women and girls are disproportionately impacted by the earthquake

Initial findings from the joint assessments have shown that **more women and girls have been affected by the recent earthquakes than men and boys.** In the villages that have been assessed, between 1 and 10 September 2025, 24,894 women and girls (females) were affected by the earthquakes in Kunar, Laghman and Nangarhar compared to 22,877 men and boys (males)[4]. **Among the fatalities were 1,025 women and girls, and 953 men and boys (52 per cent women and 48 per cent are men) while among the injured, 54 per cent are women, and 46 per cent are men.**[5]

A possible reason for the disproportionate impact on women – including a higher percentage of women among the reported deaths and injuries – is the timing of the disaster. The earthquake struck around midnight and men may have been sleeping on the roofs of buildings, while women and children were inside.[6] This is a common practice in some communities in Afghanistan, in the summer. Sleeping indoors means that women and children may have been more likely to be injured or killed during the earthquake. Moreover, some reports mentioned that women may have waited longer to seek assistance due to fear of leaving the home at night without a 'mahram', or male guardian.[7]

Another reason for this discrepancy could be that women have limited access to information about how to prepare for, or respond to, an earthquake due to cultural norms and bans on awareness-raising activities which have been implemented in the past few years. Indicative data exploring disaster readiness shows that only 13 per cent of people surveyed in the eastern region had received any information regarding natural disasters (the third lowest across all regions) and only 14 per cent felt prepared if they were to experience a natural disaster in the future.[8] As such, information access is low for both women and men generally in the eastern region. Women's access to information may be further compounded by the current restrictions.

Further, cultural norms could have impeded the rescuing of some women and girls, in certain locations. Some districts impacted by the earthquake have more conservative gender norms.[9] This seemed to be the case particularly in Chawkay, where some women reported they were not comfortable being rescued by men, and asked men not to touch them, while men may not have been comfortable having direct contact with women.[10] However, the reported number of women airlifted to the Nangarhar Regional Hospital suggests women were not systematically excluded from rescue and care efforts.

Women who survived the earthquake will also face a heightened risk of gender-based violence – as violence typically increases when communities and families are under stress – and child marriage, given the lack of security in informal settlements for those displaced by the disaster. Damage to water and sanitation infrastructure compounds the risks to their safety. With limited shelter, inadequate access to latrines, and the need to walk outside informal settlements for water or other basic needs, they are more exposed to violence against women and the hazard of unexploded ordnance.

Specific vulnerabilities of affected population

367 women-headed households and 915 pregnant women are among the affected population in Kunar, Nangahar and Laghman. Women-headed households (WHH) are mostly located in Nurgal district (280 WHHs).[11] As seen in previous earthquakes and disasters in Afghanistan, the numbers of pregnant women and WHH are likely to be higher than those reported, due to the methodology used by MSRAF, where figures are often collected from men community leaders. As such, UNFPA estimates that up to 12,555 pregnant women could be among the most-affected population.[12] Moreover, the affected population comprises Afghan returnees from both Pakistan and Iran who have just resettled in the areas impacted by the earthquake. Women and girl returnees, in particular, have compounded vulnerabilities as they often already face challenges relating to protection, livelihoods and access to information, which could be worsened by the earthquake.

Access to aid and women's participation in the humanitarian response

Women's access to assistance is a critical challenge for the response to the earthquake in the conservative context of Kunar and Nangarhar. Prior to the earthquake, only 34 per cent of women-headed households reported knowing how to access humanitarian aid in eastern region.[13] This

[4]MSRAF, Earthquakes in Eastern region 2025
[5]MSRAF, Earthquakes in Eastern region 2025
[6]Discussion with hospital staff, Nangarhar regional hospital
[7]Discussion with women and findings from members of the Women Advisory Group to the Humanitarian Country Team
[8]Ground Truth Solutions for GiHA Working Group, July 2025: Many families marry their daughters off at the age of 10.https://static1.squarespace.com/static/62e895bdf6085938506cc492/t/6888ed06da19f677caaa1753804038096/2672/Environmental_hazards_report_AFG.pdf
[9]Findings from field missions, Chawkay district
[10]FGDs in communities and at the regional hospital
[11]MSRAF, Earthquakes in Eastern region 2025
[12]UNFPA Flash Update, 2 September, available at: https://www.unfpa.org/sites/default/files/resource-pdf/Flash%20Update%20%20%201-%20Afghanistan%20Earthquake.pdf
[13]Whole of Afghanistan Assessment 2025

is likely higher for women in men-headed households, because in these families, men are often the ones to receive information on assistance available. During focus group discussions, women shared that they do not receive information on assistance. With many having been displaced, they have also lost their information and support networks as women are culturally required to stay inside tents and struggle to find information outside their close circles. For families who have stayed in affected areas, reports highlight that men are leaving communities to go in search of aid while women are required to stay and wait for assistance to reach them. At the Nurgal humanitarian hub, humanitarian workers highlighted that women do not come to distributions at the hub as they prefer not to interact or be seen by men from other villages. Humanitarians mention that distribution in the affected villages would ensure better access for women, women-headed households and people living with a disability.

Women in these conservative communities are also less likely to engage with the aid system as the numbers of women humanitarian workers have remained low in the eastern region. While authorities have supported women's participation in the earthquake response, previous de facto authorities (DFA) restrictions on women working with non-governmental organizations, 'mahram' requirements (women needing to travel with a male relative), and ongoing physical access issues in the landscape have drastically impacted the numbers of women contributing to the response. Access to some of the affected areas notably requires walking for several hours, with organizations sometimes not sending women staff to support as these harsh conditions are deemed inappropriate for women. Hours spent on the road also mean that humanitarian workers spend long days in the field, leaving home very early in the morning and returning late at night, – or even choosing to sleep overnight due to the remoteness of affected areas - which may be more challenging for women due to their household duties and care responsibilities. It will be critical to ensure spaces for women humanitarian workers in the humanitarian hubs being set up. For the women who are part of the response, conditions remain difficult, with some women reporting not having signed contracts due to the emergency situation and not receiving mahram support costs.

UN Women and the International Organization for Migration have focused on ensuring that women are part of the joint assessment teams. Women made up 39 per cent of enumerators in the 22 joint assessment teams, with 17 women humanitarians among the total 44 assessors, ensuring the mapping of women's and girls' needs in the aftermath of the earthquake and showing the possibility of continued engagement of women in the response, despite ongoing restrictions.

Sectoral needs

Emergency Shelter and Non-Food Items

Shelter is the main concern raised by communities and by women in focus group discussions. Families staying in the open are facing harsh conditions, with some areas experiencing rain. Women in a community of Dara-e-Noor (Nangarhar) mention that they have not yet received tents and that 15 families only have one tent to share, meaning that many of them sleep outside. The earthquake has damaged homes in a context where 20 per cent of women-headed households (and 11 per cent of men-headed households) had already reported – prior to the earthquake – that they would like to receive shelter-related humanitarian assistance.[14] In Nurgal district, some women travelled more than five hours on foot to resettle in flatter areas deemed 'safer'. However, these areas are prone to flashfloods and landslides due to aftershocks.

In Chawkay district, many families share tents. **With women and girls spending most of their time inside the tents, these conditions create a lack of privacy and can lead to protection risks for women and girls.** This is also a particular concern for women-headed households, and for women in close proximity to men from other families, as contact with men outside of women's households is usually avoided due to strict cultural norms.

During focus group discussions, **women ask for non-food items such as clothes, as many have left all their belongings behind.** Women mention they are wearing the same clothes as the day of the earthquake and have not been able to change since. They urgently need access to clothing including hijab (head covering) as women are culturally, and through DFA decrees, required to be covered. Women also mention in focus group discussions not owning appropriate clothing as they come from areas higher in the valley where temperatures are lower – as such, the distribution of appropriate clothes for the current heat is urgently needed.

Food Security and Livelihoods

Before the earthquake, 79 per cent of women-headed households and 69 per cent of men-headed households in the eastern region reported they did not have access to sufficient quantity or quality of food, with 87 per cent of women-headed households and 81 per cent of men-headed households reporting wanting to receive food assistance.[15] Food is also a key priority cited by women during recent post-earthquake focus group discussions.

[14] Whole of Afghanistan Assessment 2025
[15] Whole of Afghanistan Assessment, 2025.

Women in informal settlements mention receiving warm food daily from the DFA but say that this is not enough to support their families. **Women also need cooking utensils to be able to cook food themselves, as there are currently no utensils and no places to cook.** As women and girls are often in charge of cooking, some burn plastic outside the tents to warm up meals or cook rice and are exposed to further respiratory diseases. Women and girls are also bringing wood from the forest to cook, which could expose them to protection risks and explosive ordnance.[16]

Moreover, many have lost their livelihoods and ask for financial support including cash with 90 per cent of households mentioning they do not have money for food.[17] Even for those households that have money for food, 64 per cent do not have access to markets due to the remoteness of impacted areas.[18] In communities impacted by the earthquakes, farming, livestock and agriculture was a primary source of income, and an activity where both women and men were involved. Many women mention in focus group discussions having been involved in farming prior to the earthquake. However, 79 per cent of affected families in Kunar report injuries to livestock, which means a massive loss of livelihoods for women and girls.[19] Women in informal settlements in Chawkay district mention being so worried about their livelihoods that they risk their lives, travelling back every day to damaged or destroyed homes in earthquake-affected areas, to feed their surviving livestock.

Health

Access to health services has been constrained in the earthquake-affected areas due to physical access challenges. Many of the injured were air lifted by DFA helicopters to Nangahar Regional Hospital, as this was the only route out. Overall, numbers from the regional hospital show that 56 per cent of the injured received through rescues were men, and 44 per cent were women.[20] **This shows that injured women may have been slightly less likely to be rescued,** considering that women make up 55 per cent of those injured.[21] This may be linked to conservative gender norms in some affected districts. As noted above, women were more likely to be inside houses during the earthquake, meaning they could be buried more deeply under rubble and harder to reach, while men on rooftops or outside could be rescued more quickly. Differences in mobility and injury patterns, as well as prioritization of those who are easiest to evacuate, may also have influenced outcomes. **The fact that 44 per cent of those airlifted to the regional hospital were women suggests they were not systematically excluded.**

A key condition for women's access to health is the presence of women health workers at health facilities. The World Health Organization estimates that around 90 per cent of medical staff in the earthquake response are men, with the remaining 10 per cent being largely midwives and nurses.[22] A very limited number of women surgeons are treating the injured in hospitals, but hospital staff have highlighted there are not women surgeons available to handle all surgical specialties, and some affected women have had to be referred to men surgeons.[23]

For women who have survived the earthquakes, **access to key maternal and reproductive health services remains paramount,** with pregnant women making up almost two per cent of the affected population.[24] A previous GiHA WG and Ground Truth Solutions (GTS) report found that following disasters in Afghanistan, pregnant and lactating women's health were at great risks due to the lack of medical care, with some women giving birth without healthcare access, putting maternal and infant well-being at risk.[25]

Mental Health and Psychosocial Support (MHPSS)

Immediate MHPSS is also requested by women and girls, and men and boys, as recurring aftershocks and additional earthquakes have triggered trauma responses among community members. The lack of essential supplies such as women's clothing leaves women both physically exposed and psychologically vulnerable. Women in focus group discussions also mention facing an additional care burden due to the fact that they are sharing tents with multiple families; and unique challenges in fulfilling childcare responsibilities, including maintaining their children's health and hygiene due to the lack of basic sanitation and resources for proper care, which creates additional stress. Some women mention having to care for the children of women who have been injured or killed by the earthquake. One woman in Nurgal said she now had to care alone for the four children of her sister-in-law who died in the earthquake. At the Nurgal hub, women mention that they would like to access MHPSS services delivered by women counsellors. In Chawkay districts,

[16]FGDs, 9 September 2025
[17] MSRAF, Earthquakes in Eastern region 2025
[18] Ibid
[19]MSRAF, Earthquakes in Eastern region 2025
[20]Data shared by the Nangarhar Regional Hospital, 8 September 2025
[21]MSRAF, Earthquakes in Eastern region 2025
[22]Reuters, 8 September2025: WHO asks Taliban to lift female aid worker restrictions following earthquakes. https://www.reuters.com/world/asia-pacific/who-asks-taliban-lift-female-aid-worker-restrictions-following-earthquakes-08-09-2025/
[23]Discussion with staff, Nangarhar Regional Hospital
[24]MSRAF, Earthquakes in Eastern region 2025
[25]Ground Truth Solutions for GiHA WG, July 2025: Many families marry their daughters off at the age of 10 https://static1.squarespace.com/static/62e895bdf6085938506cc492/t/6888ed06da19f677caaa1753804038096/2672/Environmental_hazards_report_AFG.pdf

women MHPSS counsellors report receiving many women patients, **showing the need for continued investment in MHPSS** provided by women staff.

Protection

Women and girls are exposed to various protection risks in the aftermath of the earthquake including gender-based violence (GBV). Many women and girls do not have access to shelter and there are limited latrines available. They are sleeping in the open and in some cases have to walk to find places to go to the bathroom or perform ablutions. **This lack of private spaces creates significant protection risks.** Women and girls are also exposed to landmines as 25 square kilometers – covering 12 earthquake affected districts in Kunar Nangarhar and Laghman – is reported to contain mines and girls are in charge of collecting water in some affected communities.[26] This vulnerability is compounded by women's exclusion from some awareness sessions, including on mine risks.

As seen in previous earthquakes, violence typically increases when communities and families are under stress. With families not having enough money to cover basic needs and sharing shelters with other households, there is a likelihood of an increase in the severity and frequency of existing gender-based violence within households due to additional stress. A recent GiHA WG and GTS report found that although natural hazards impact the majority of the population, **women are more likely to face security and protection concerns in their aftermath due to displacement in makeshift shelters.** The report finds that girls in Afghanistan are notably more likely to be exposed to risks of child marriage and that women and girls face risks of sexual violence in displacement settings.[27] At the Nurgal humanitarian hub, there are currently no protection or safeguarding staff. Humanitarian workers highlight this as a key gap due to the many protection issues faced by women in particular, and **call for the deployment of protection specialists, including women staff.**

Finally, another protection issue for women is the lack of civil documentation. The majority of households across the three affected provinces reported that at least one female member lacked civil documentation in mid-2025. REACH found that, "this may limit their movements and abilities to access services and assistance in the aftermath of the earthquakes."[28]

Water Sanitation and Hygiene (WASH)

With some communities having relocated to informal settlements lower in the valley, **access to clean water and latrines remain a key challenge.** Many women mention not knowing where to go to the bathroom, wash themselves or to perform ablutions and having to look for places outside the informal settlements, which can expose them to protection risks and risks of unexploded ordnance. This aligns with MSRAF data which finds that 90 per cent of affected people practice open defecation.[29] Only a small number of latrines are available in informal settlements and communities report queuing for a long time to access the bathroom. This is particularly detrimental to women as they have to manage personal hygiene and periods. While latrines are being built, women mention not always being consulted and share concerns regarding the location of new bathrooms. Due to the current emergency, bathrooms being built do not always have locks or hard doors and lack lighting.

Accountability to Affected Populations and Protection from Sexual Exploitation and Abuse

Access to information is challenging for women impacted by the earthquake. **Many women in FGDs mention not having access to information on assistance,** while some of them also said they are even lacking information about the whereabouts of their family members who have been transported to hospitals. One woman in Chawkay district mentioned she does not know where her injured husband has been taken and when he would be back. With the earthquake having impacted communities in rural areas, most women mention not owning phones, while some mention previously owning a phone but having lost it during the earthquakes. When asked how they would prefer to receive information on available assistance, women say that in-person communication through women humanitarian workers would be the most appropriate way to contact them, while some say they would be able to use the phones of men family members if needed. In the eastern region, before the earthquake, 20 per cent of women-headed households reported not knowing how to give feedback on humanitarian aid and the behavior/misconduct of humanitarian workers, compared to nine per cent of men-headed households.[30] This means tailored information will be required to ensure information reaches women and women-headed households in a safe manner.

[26]OCHA flash update # 3 – p.2
[27]Ground Truth Solutions for GiHA WG, July 2025: Many families marry their daughters off at the age of 10.https://static1.squarespace.com/static/62e895bdf6085938506cc492/t/6888ed06da19f677caaa1753804038096/2672/Environmental_hazards_report_AFG.pdf
[28]REACH «Unmet Needs in Eastern Afghanistan Prior to the Nangahar Earthquakes, pages 2 and 3
[29]MSRAF, Earthquakes in Eastern region 2025
[30]Whole of Afghanistan Assessment 2025

A girl inspects a home damaged by the earthquake in Nurgal–one of the worst affected districts in Kunar province, northeastern Afghanistan. Photo: UN Women/Araya Arayawuth.

Protection from Sexual Exploitation Abuse and Harassment Network noted that there are fears of trafficking of individuals including young people and adults who have lost family members. These individuals are currently under community care, but there is uncertainty about who is responsible for their protection and what will happen in the coming months. Sexual exploitation and abuse risks for women, men, girls and boys are increased by the presence of volunteers from other provinces who are not officially contracted. Their involvement may pose safeguarding risks, especially for unaccompanied victims due to lack of training on minimum standards on safeguarding. Humanitarian workers also mention specific risks for women-headed households who have to rely on community elders to receive assistance and who may be particularly vulnerable.

Recommendations

For donors including UN agencies and INGOs:

- Provide funding to support the cost of women humanitarians working in the earthquake response as included in the earthquake response plan. This will help to ensure reach to women and girls across sectors. Ensure the allocation of enabling costs for women's participation – such as mahram and transportation costs – across all interventions for the earthquake response.
- Closely monitor women's participation in partner projects through field missions and technical guidance to partners.
- Work with, and fund, women-led organizations who are on the frontline of the earthquake response and have safe access to women and girls.

For all humanitarian actors:

Enable the participation of women staff and women-led organizations in the response

- Ensure continued support to women and girls through the participation of women staff, advocacy with the DFA to enable women's access to the field, and continued investment in the quality of the response including supporting women staff through transportation costs and 'mahram' costs.
- Link up, work with and coordinate with women-led organziations to tap into their understanding of the communities and their access to women and girls.
- Provide information to women staff to enhance their understanding of the terrain and ensure they are appropriately equipped to reach affected areas (for example, appropriate walking shoes, clothes and information on the duration of trips).
- Establish an inclusive humanitarian hub where women staff and their 'mahrams' can stay to avoid long hours on the road, travelling back and forth, including separate and dedicated spaces for women staff, and a space for their 'mahrams'.

Adapt the response to better reach the most vulnerable women and girls

- Take into account different gender norms in the affected districts and adapt approaches to women's engagement in the response.
- Plan specific interventions for women-headed households, through women staff, specifically in Nurgal district which has the highest number of these households.
- In Nurgal district, plan distributions directly in affected villages to ensure women and women-headed households – who may be less likely to make

their way to the humanitarian hub due to cultural restrictions – are still reached.

Respond to the specific sectoral needs of women and girls including health, MHPSS, non-food items, protection and WASH

- Provide clothes for women that are appropriate for the weather, as well as culturally appropriate hygiene kits (for instance, women in affected districts report using cloths during menstruation).
- Continue to deploy women counsellors to provide MHPSS to affected women and girls.
- Set up safe spaces for women and girls where they can connect with other women.
- Where needed, embed MHPSS and safe spaces within other sectors and raise community awareness on the specific needs of women and girls to ensure acceptance of these activities.
- Invest in responding to urgent women's health issues through maternal and reproductive health services.
- Deploy protection specialists to the Nurgal hub and in various informal settlements and take key protection considerations for women, girls and women-headed households into account when designing interventions: consult women on the location of latrines, add locks and lights to the latrines to ensure their safety, ensure private sleeping spaces for families, especially women-headed households and unaccompanied women and girls.
- Deploy women humanitarian workers to provide information in person to women and girls on available assistance, feedback and complaint mechanisms and PSEA information and reporting channels.
- Deploy trained safeguarding staff to ensure that humanitarian workers sign and adhere to a code of conduct, and raise awareness amongst communities on their rights, reporting channels and PSEA commitments of humanitarian organizations.

For further information, please contact:
UN Women – Anouk Heili, anouk.heili@unwomen.org
CARE International – Kristina Jovanoska, Kristina.jovanoska@care.org

Bibliography:

REACH, 2 September 2025: Unmet Needs in Eastern Afghanistan Prior to the Nangahar Earthquakes
OCHA, 1 September 2025: Flash Update #1
IOM, Multi-sector Rapid Assessment Form. (https://afghanresponse.iom.int/report)
Ground Truth Solutions for GiHA WG, July 2025: Many families marry their daughters off at the age of 10.https://static1.squarespace.com/static/62e895bdf6085938506cc492/t/6888ed06da19f677caaa2672/1753804038096/Environmental_hazards_report_AFG.pdf
Whole of Afghanistan Assessment, 2025
Reuters, 8 September2025: WHO asks Taliban to lift female aid worker restrictions following earthquakes. https://www.reuters.com/world/asia-pacific/who-asks-taliban-lift-female-aid-worker-restrictions-following-earthquakes-2025-09-08/
UNFPA, Flash Update, 2 September