



**Grassroots Assessment of Women's Access to Humanitarian Aid in Afghanistan
(2021- 2025)**

**Women's Advocacy for Equality Network
(WAEN)
March - July 2025**

Executive Summary and Findings

Since the Taliban's return to power in August 2021, Afghan women have faced an unprecedented rollback of their fundamental rights. Hard-won achievements made over the past two decades have been systematically dismantled. More than 138 Taliban-issued decrees now govern and restrict nearly every aspect of women's lives from access to education and employment to freedom of movement and healthcare. Girls are banned from secondary and higher education, women are prohibited from working with NGOs (including the United Nations), and those seeking healthcare or traveling must be accompanied by a male guardian. Women's public presence, voices, and visibility are increasingly silenced and criminalized.

In this context of political repression, economic collapse, and gender-based exclusion, access to humanitarian aid is not merely a matter of relief, it is a lifeline for survival. Yet, women's ability to access this lifeline is systematically obstructed. This study based on responses from 291 women across 20 provinces in Afghanistan, captures the lived realities of Afghan women under Taliban rule and offers grassroots insights into how they are coping, what forms of aid they receive, and the barriers they face.

Key Findings:

• Desperate Coping Mechanisms Are the Norm

Afghan women are being pushed to the brink. In the face of economic desperation and restricted freedoms:

- 49% of households have resorted to borrowing money, plunging families into long-term debt and deepening their vulnerability.
- 47% have had to cut essential expenses like food, healthcare, and education jeopardizing their children's futures and their own survival.
- 33% have been forced to sell household assets, stripping families of their last financial safety nets.
- Alarmingly, 9% of households, and 13% of female-headed households report child marriage as a direct response to economic hardship, a grave indicator of deepening crisis and the commodification of girls under pressure.

- **Humanitarian Aid Access Is Severely Limited**

While humanitarian assistance is crucial, it is out of reach for most:

- Only 26% of households reported receiving aid at all.
- Among female-headed households, reliance on aid rises to 41%, underlining their acute vulnerability.
- 68% of respondents stated that losing humanitarian assistance would have a severe impact on their lives, yet only a minority are able to access it.

- **Types of Aid Received**

Among those who did receive assistance:

- 49% received food aid (e.g., food parcels).
- 25% received cash assistance.
- 15% accessed informal education or skills training (such as sewing and beauty courses).
- 11% accessed healthcare services.

- **Healthcare Access Is in Crisis**

- A staggering 81% of women reported major difficulties in accessing healthcare, including maternal and reproductive services.
- Of those who received healthcare through aid:
 - 39% accessed vaccinations for children.
 - 20% received essential medicines.
 - 7% received treatment for common childhood illnesses.
 - Fewer than 7% of women successfully accessed maternal or reproductive health services, despite the critical nature of this care.

- **Barriers to Access Are Systematic and Discriminatory**

Multiple overlapping barriers hinder women's access to humanitarian assistance:

- 49% identified Taliban-imposed restrictions as the primary obstacle.
- Corruption, ethnic and gender-based discrimination, and favouritism in aid distribution are widespread. Many women report that aid is channelled to individuals connected to those in power or specific groups.
- 57% of respondents stated that women must present official documents, often difficult or impossible to obtain under current restrictions, in order to receive assistance.
- Physical access is also a major issue: long distances, insecure roads, high transport costs, and lack of public transport, especially in impoverished urban and remote rural areas, severely limit women's mobility and safety.

In general, this report underscores a grim reality: Afghan women are being systematically excluded from humanitarian lifelines at a time when they need them most. The voices captured here reaching from cities to remote provinces demonstrate that without urgent, gender-sensitive, and locally informed responses, the survival and dignity of Afghan women will continue to be dangerously compromised.

Table of Contents

Executive Summary and Findings.....	i
Key Findings.....	i-iii
Table of contents.....	iv
1 Introduction.....	1
2 Research Framework.....	2
2.1 Research Methodology.....	2
2.2 Research Questions.....	2
3 The Situation of Women, Taliban Restrictions, and Humanitarian Aid.....	3
3.1 Status of Women and Taliban Restrictions.....	3
3.2 Humanitarian Aid.....	3
4. Research Findings.....	5
4.1 Women's Coping Mechanisms.....	5-6
4.2 Women's Access to Humanitarian Assistance.....	6-7
4.3 Limitations and Challenges in Women's Access to Healthcare Services.....	8
4.4 Key Challenges Faced by Women in Accessing Humanitarian Assistance.....	9
4.5. Restrictions Imposed by the Taliban: The Greatest Obstacle for Women.....	9-10
4.6 Impacts of Humanitarian Aid.....	11
4.7 Challenges in Humanitarian Aid Delivery and Distribution.....	12
4.8 Restrictions Imposed on Women and the Inadequacy of Alternative Solutions.....	12-13
5 Conclusion and Recommendations.....	14
5.1 Apply Coordinated Pressure to Remove Gender-Based Restrictions.....	14
5.2 Deliver Gender-Responsive Aid That Respects Women's Autonomy	15
5.3 Put Women at the Center of Aid Planning and Delivery	15
5.4 Ensure Transparency and Accountability in Aid Systems.....	15
5.5 Invest in Women's Healthcare, with a Focus on Reproductive Rights.....	15
References.....	17

1. Introduction

Nearly four years have passed since the return of the Taliban to power, during which time Afghanistan has faced one of the most severe humanitarian crises in its contemporary history. The country's economy has contracted by one-third, while unemployment and poverty rates have sharply increased. Millions of people are struggling to meet their basic needs such as food and shelter. According to United Nations reports, approximately 12 million people in Afghanistan particularly pregnant women and children are currently experiencing emergency and crisis levels of food insecurity (Levels 3 and 4 of the food security classification). In addition to the economic crisis, climate change marked by severe droughts and an increasing frequency of natural disasters such as floods and earthquakes has further worsened the living conditions of millions of households. Among those most affected are women, who were already among the most vulnerable groups in Afghan society and are now facing compounded challenges.

The Taliban have issued over 138 restrictive decrees targeting women, ranging from banning girls from education beyond the primary level to prohibiting women's employment in formal sectors and enforcing male guardianship for travel. These restrictions have effectively erased women from public life. Beyond violating women's basic rights and individual freedoms, these policies have had significant economic consequences, pushing many households further into poverty, food insecurity, and emergency living conditions. Moreover, these restrictions have not only undermined women's personal autonomy and violated their fundamental rights, but have also had wide-ranging economic consequences for households, exposing them to increased poverty, food insecurity, and precarious living conditions.

In such circumstances, humanitarian assistance plays a vital role in sustaining the lives and livelihoods of millions, and for many families, it remains the sole means of daily survival. According to UN reports and projections indicate that by 2025, over 23 million people in Afghanistan will lack a stable source of income and will be entirely dependent on humanitarian aid to meet their basic needs.

However, evidence suggests that access to humanitarian assistance particularly difficult for certain groups, especially women. In response to this concerning situation, the present report aims to assess women's access to humanitarian aid in Afghanistan. This study analyzes the impact of the Taliban's policies on women's lives, evaluates the extent to which they are able to access humanitarian support, identifies the barriers that hinder this access, and ultimately provides practical recommendations to improve access and enhance the effectiveness of humanitarian interventions for women.

2. Research Framework

2.1. Research Methodology

This study is based on data collected from 291 respondents across 20 provinces of Afghanistan through an online survey. The participants included both women and men from the provinces of Kabul, Balkh, Bamyan, Kandahar, Daikundi, Farah, Nimroz, Faryab, Maidan Wardak, Nangarhar, Ghazni, Paktia, Herat, Ghor, Helmand, Uruzgan, Badakhshan, Jawzjan, Badghis, and Logar. Respondents were categorized into two main groups:

- Staff of humanitarian organizations involved in aid distribution.
- Recipients of humanitarian assistance.

Both groups shared their experiences regarding access to and distribution of humanitarian aid.

To ensure broad participation, the questionnaire was distributed via social media platforms targeting individuals connected to the subject matter, thereby enabling a diverse range of respondents. During data analysis, the geographic location of participants was considered, and the collected data was weighted according to provincial population size of each province to avoid bias resulting from uneven distribution of participants. The data was analyzed using R software to identify key trends and ensure that the findings are statistically valid and reliable.

2.2 Research Questions

This study seeks to address the following key questions:

- How are Afghan women navigating and coping with the severe economic hardship and social restrictions imposed by the Taliban regime?
- To what extent do women have access to humanitarian aid, and what types of assistance are they receiving in practice?
- What are the primary barriers structural, political, and logistical that prevent women from accessing humanitarian support?
- Has humanitarian aid made a tangible and sustained difference in the lives of Afghan women under Taliban rule?
- What systemic challenges and operational issues exist within the current aid delivery mechanisms, particularly as they relate to gendered access and equity?

Answering these questions can offer policymakers, humanitarian organizations, and international institutions with a deeper understanding of the challenges women face in accessing aid and support the development of more effective strategies to improve the conditions of women in Afghanistan.

3. The Situation of Women, Taliban Restrictions, and Humanitarian Aid

3.1. Status of Women and Taliban Restrictions

In addition to the economic and social hardships affecting all segments of society, the restrictions imposed on women have significantly worsened their living conditions and heightened their vulnerability. Since the Taliban's return to power, more than 138 restrictive decrees have been issued against women. Each of these decrees has targeted women's economic, social, and educational independence and appears designed to eliminate their presence in public life altogether. Some of the most critical restrictions include:

Ban on Girls' Education Beyond Primary School: The Taliban's policy and measure has blocked access to education for millions of girls and women. According to UNESCO, more than 1.4 million girls have been denied the right to education. This not only endangers their individual futures but also poses long-term risks to Afghanistan's social and economic development.

Severe Restrictions on Women's Employment: The Taliban have prohibited women from working in most sectors. While women are allowed to work in certain areas such as healthcare, even these opportunities are subject to restrictive conditions. For instance, in some provinces, women are only allowed to work in health facilities if accompanied by a male guardian (mahram), a requirement that has effectively excluded many from the workforce.

Ban on women working in humanitarian organizations: In December 2022, the Taliban banned women from working in both national and international NGOs. This decision not only rendered thousands of women unemployed but also severely disrupted the delivery of humanitarian services to women and children. Given cultural and social norms in Afghanistan, many women are only willing or able to receive aid from female humanitarian workers, meaning this restriction significantly reduces their access to vital assistance.

Severe Limitations on Women's Mobility/traveling: The Taliban require women to be accompanied by a male guardian for travel, significantly infringing on their personal autonomy. This restriction complicates access to healthcare, employment, and humanitarian aid. Many women who are heads of households and lack a mahram are thus denied the freedom of movement and access to vital resources.

3.2. Humanitarian Aid

Since the Taliban took power in August 2021, Afghanistan has received approximately \$6.7 billion in humanitarian assistance from international stakeholders. According to UN documents, this assistance was aimed at mitigating the humanitarian crisis and improving living conditions, targeting areas such as food security, drought response, and health system support. Humanitarian

aid has mainly been provided in the form of food distribution, cash assistance, healthcare services, and educational support, and has been delivered by organizations such as the World Food Programme (WFP), UNICEF, the International Organization for Migration (IOM), and various NGOs.

Although humanitarian aid has helped avert the anticipated humanitarian catastrophe over the past four years, its distribution has consistently faced significant challenges. Lack of transparency and Taliban interference in the distribution process have raised concerns about the potential misuse of aid and have contributed to donor hesitation in continuing financial support. The suspension of aid by the US's Trump Administration has further exacerbated the funding crisis, and many humanitarian organizations are now facing closure. Humanitarian assistance is declining at a time when 23 million people in Afghanistan still lack access to income-generating opportunities and remain entirely dependent on aid to meet their basic needs.

4. Research Findings

4.1. Women's Coping Mechanisms

The widespread exclusion of women from employment, education, and social services has placed them in a state of extreme vulnerability. The restrictions imposed by the Taliban have significantly increased the unemployment rate among women, depriving them of economic opportunities and independent sources of income. This situation is especially dire for female-headed households, as they bear the responsibility of supporting their families while simultaneously being denied the right to work. The lack of an independent income has left many women unable to meet their own basic needs or those of their children.

In response to this crisis, women have been compelled to adopt various coping strategies to sustain their livelihoods. Some have turned to home-based work such as sewing, carpet weaving, and cooking. However, these types of work are often accompanied by extremely low wages and expose women to high levels of exploitation.

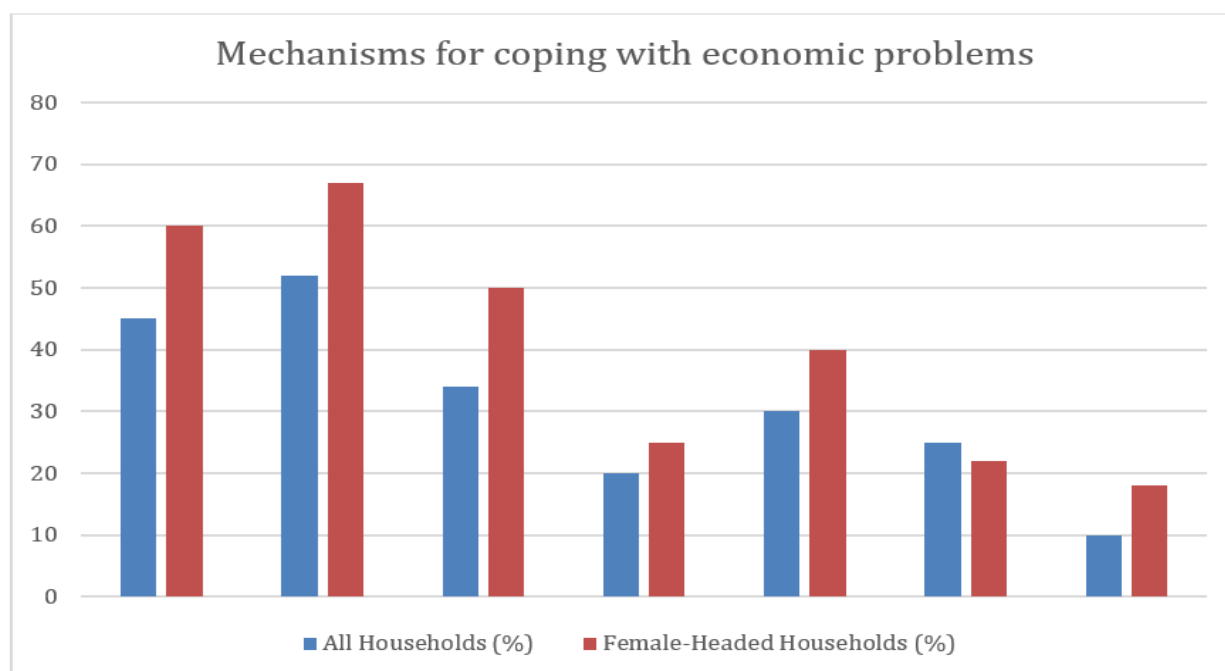


Figure 1. Coping Mechanisms in Response to Economic Hardship

As illustrated in the figure above, households have adopted one or more coping mechanisms to manage the challenges posed by the current economic crisis. The most significant strategies are as follows:

- **Borrowing Money:** 49% of households have resorted to borrowing as a way to cope with economic hardship. While this approach may offer short-term relief, it leads to heavy debt burdens in the long term, placing additional financial pressure on families and making it an unsustainable solution.
- **Reducing Living Expenses:** 47% of households have cut back on essential expenses such as food, clothing, healthcare, and education. Although this helps reduce immediate financial stress, it can result in serious consequences like malnutrition, deteriorating health, and educational deprivation. In the long term, this trend weakens the country's human capital and perpetuates chronic poverty.
- **Selling Assets:** 33% of households have sold household assets to temporarily meet their basic needs. This indicates the depth of the economic crisis, as many families are forced to liquidate their possessions. Although it may temporarily solve liquidity problems, it erodes the households' safety nets and leaves them more vulnerable to future shocks.
- **Utilization of Humanitarian Aid:** Only 26% of households reported relying on humanitarian assistance to address their economic difficulties. However, among female-headed households, reliance on aid is significantly higher, with 41% citing humanitarian assistance as their primary means of meeting basic needs. This reflects the severe vulnerability of women-headed households and their greater dependence on international support.
- **Increase in Child Marriage:** One of the most alarming coping mechanisms observed is the rise in child marriages as an economic strategy. The findings show that 9% of households reported having married off their daughters at a young age due to financial hardship. Among female-headed households, this figure increases to 13%, highlighting the extreme economic desperation these families face.

These findings illustrate that the economic crisis and the restrictions imposed by the Taliban have driven women to adopt coping mechanisms that not only increase their vulnerability but also have serious long-term social and economic repercussions for Afghan society.

4.2. Women's Access to Humanitarian Assistance

Women, particularly due to their specific biological needs such as pregnancy and breastfeeding, require proper nutrition and consistent healthcare services. Even in households that are economically better off, women continue to face various forms of deprivation due to structural gender discrimination. The current situation in Afghanistan, along with the restrictions imposed on women, has further exacerbated these needs to the extent that even securing basic necessities such as food and healthcare has become a serious challenge for many. In the absence of

government and social support systems, humanitarian assistance has become the only lifeline for many women. Despite this severe level of need, the findings of this study show that less than half of the women have had access to aid over the past three years. Only 41% of women reported having successfully received humanitarian aid, even though they were in need and had actively sought it. Among female-headed households, this figure is slightly higher at 45%, yet it still reflects a level of access far below what is required.

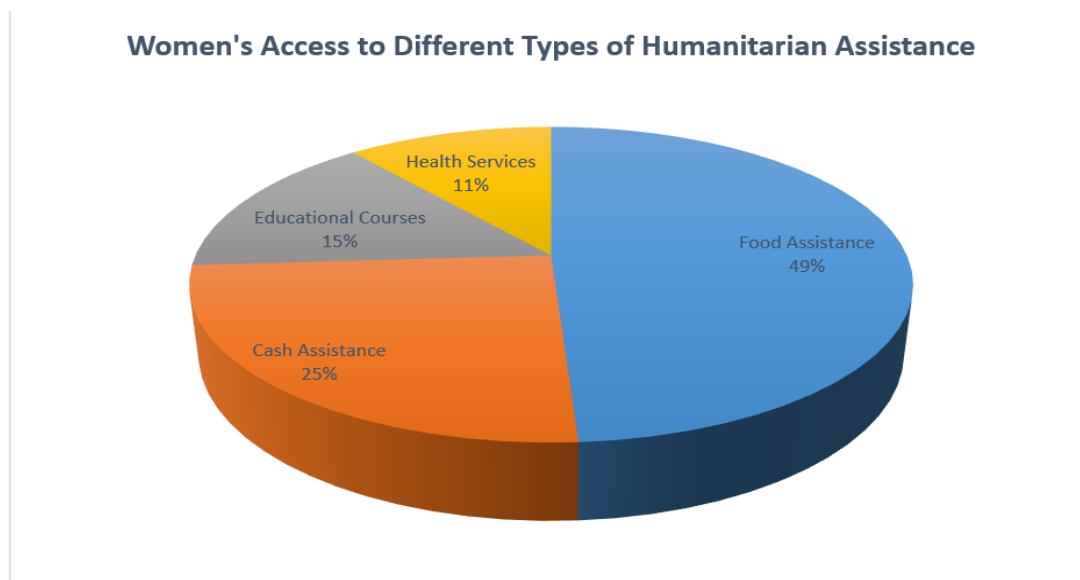


Figure 2. Types of Humanitarian Assistance Received by Women

Among the women who managed to receive assistance, the most common types of aid were as follows:

- 49% received food assistance (including food parcels).
- 25% received cash assistance (to purchase basic necessities).
- 15% participated in educational courses (including sewing and beauty courses).
- 11% received healthcare services.

These statistics demonstrate that humanitarian assistance has primarily focused on addressing immediate needs such as food and cash. However, women's access to educational and healthcare services remains severely limited. While vocational training and skills development programs have the potential to empower women and reduce their long-term dependence on humanitarian aid, the share of such assistance is very modest relative to the existing need.

4.3. Limitations and Challenges in Women's Access to Healthcare Services

The restrictions imposed on women in Afghanistan have had a profound and detrimental impact on their ability to access healthcare.

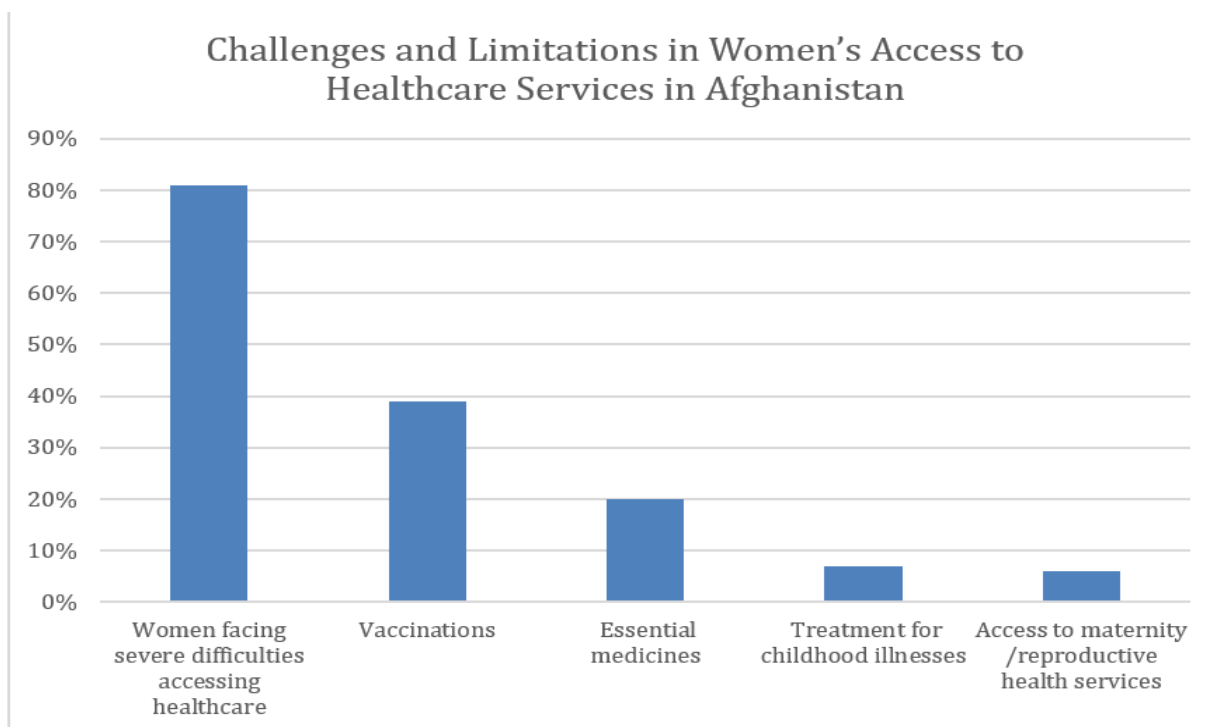


Figure 3. Challenges and Limitations in Women's Access to Healthcare Services in Afghanistan

The restrictions imposed on women have had a considerable negative impact on their access to healthcare services. According to the findings of this research, 81% of women reported facing severe difficulties in obtaining medical care an alarming statistic that highlights the urgent need for intervention and support.

Among the women who, despite the restrictions, managed to access healthcare services provided by aid organizations, most received child-related services such as vaccinations (39%), provision of essential medicines (20%), and treatment of common childhood illnesses (7%). In contrast, the reported access to maternity care and reproductive health services an essential need for women was severely limited, with less than 7% reporting successful access. The lack of access to maternity care can lead to increased maternal mortality, a rise in high-risk births, infant malnutrition, and the exacerbation of postnatal health problems among women. Moreover, being deprived of reproductive health services restricts women's ability to make informed decisions regarding their health and family planning, potentially resulting in broader societal repercussions. In addition,

insufficient support in this area not only endangers individual women's health but also contributes to an increased burden on Afghanistan's healthcare system as a whole.

4.4. Key Challenges Faced by Women in Accessing Humanitarian Assistance

Women's access to humanitarian assistance in Afghanistan is hindered by numerous structural, social, and security-related barriers. Restrictions imposed by the Taliban, entrenched gender inequalities, corruption, lack of adequate information, and bureaucratic obstacles have collectively created significant challenges, particularly for female-headed households. These limitations have not only reduced women's access to essential aid but have also increased their dependency on male family members, thereby diminishing their ability to independently manage their lives.

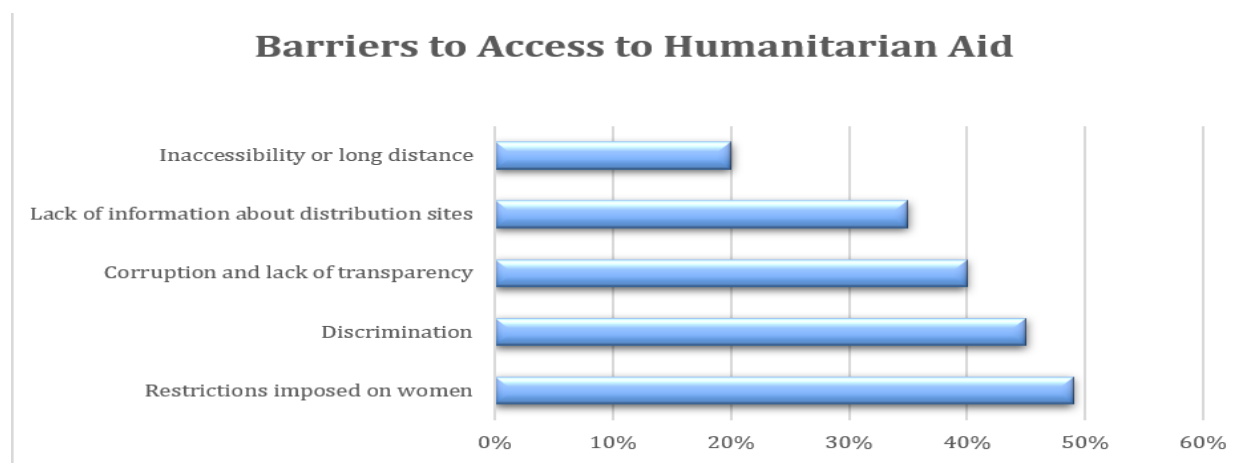


Figure 4: Key Barriers to Women's Access to Humanitarian Aid

4.5. Restrictions Imposed by the Taliban: The Greatest Obstacle for Women

According to the findings of the research, nearly half of the women (49%) identified the restrictions imposed by the Taliban as the primary challenge in accessing humanitarian assistance. Following the imposition of these limitations, women's freedom of movement has been severely curtailed, with many areas now requiring women to be accompanied by a male guardian in order to leave their homes. These prohibitions have significantly hindered women's ability to reach aid distribution centers, placing them at a distinct disadvantage compared to men.

In addition, the reduction in funding for humanitarian organizations and the closure or limited operations of many international agencies have led to the relocation of aid distribution centers to areas that are even less accessible to women. The lack of safe transportation, poor inter-city security, and fear of Taliban officials have further discouraged women from seeking assistance. In

practice, these policies have deprived many women of their fundamental right to receive humanitarian aid.

Corruption and Discrimination in Aid Distribution

Corruption, as well as ethnic and gender-based discrimination in the aid distribution process, present significant obstacles for women. Some women reported that aid is distributed unfairly, favoring individuals connected to certain groups or acquaintances of those in charge. In some cases, women were forced to pay bribes or offer personal favors in exchange for aid, creating a serious ethical crisis. In addition to financial corruption, some aid agencies have excluded women from aid priority lists or limited distribution to male heads of households. This has left female-headed households especially vulnerable, as they often have no male relatives to collect aid on their behalf.

Requirement for Male Identification Documents: A Major Barrier for Female-Headed Households

In the current administrative system under the Taliban, women are not recognized as independent individuals with rights, and this perception is deeply entrenched in society. Under Taliban rule, women are dependent on a male guardian even to receive humanitarian aid, requiring them to present identification documents of their husband, father, or another male family member. Without these documents, they cannot access any humanitarian aid. This requirement reflects a view that women lack individual agency and need male guardianship, a perspective that disregards women's independence even in critical situations. According to the study findings, 57% of respondents stated that women must provide male family members' identification or names to receive aid. This obligation poses a significant challenge for widows, divorced women, and those separated from their families, many of whom either have no male relatives or cannot use male family members' IDs due to social or security reasons. Additionally, because official registration of women in Afghanistan's administrative and identification systems has historically been limited for cultural reasons, some women lack any form of personal identification documents.

Lack of Information and Challenges Accessing Aid Distribution Centers

A lack of awareness about how to receive aid, frequent changes in distribution locations, and the absence of effective communication channels have prevented many women from even knowing that aid is available. Insufficient outreach by humanitarian organizations, limited access to communication tools (such as mobile phones or the internet), and cultural restrictions on women leaving home have exacerbated this problem.

Additionally, the long distances between aid centers and residential areas, high transportation costs, and security risks particularly in underprivileged urban areas with limited public transportation have become serious barriers to women's access to humanitarian assistance.

4.6. Impacts of Humanitarian Aid

Over the past four years, humanitarian assistance has played a critical role in preventing a humanitarian catastrophe in Afghanistan. The positive effects of such aid on household-level indicators such as food security, healthcare access, shelter, and even small business support have been highlighted in numerous international reports. At the household level, cash and food assistance are particularly important, as they enable women to meet their basic and urgent needs. In a context where economic opportunities for women are scarce, such support helps mitigate extreme poverty and hunger. Moreover, if sustained, these resources can allow women to better plan and manage essential expenses such as food, healthcare, and personal needs.

To evaluate the impact of humanitarian aid, respondents were asked how the cessation of aid would affect their lives. Although only 41% reported having received aid, 68% stated that losing humanitarian support would severely impact their lives. This indicates that even individuals who have not directly received aid have benefited from its indirect positive effects within their communities.

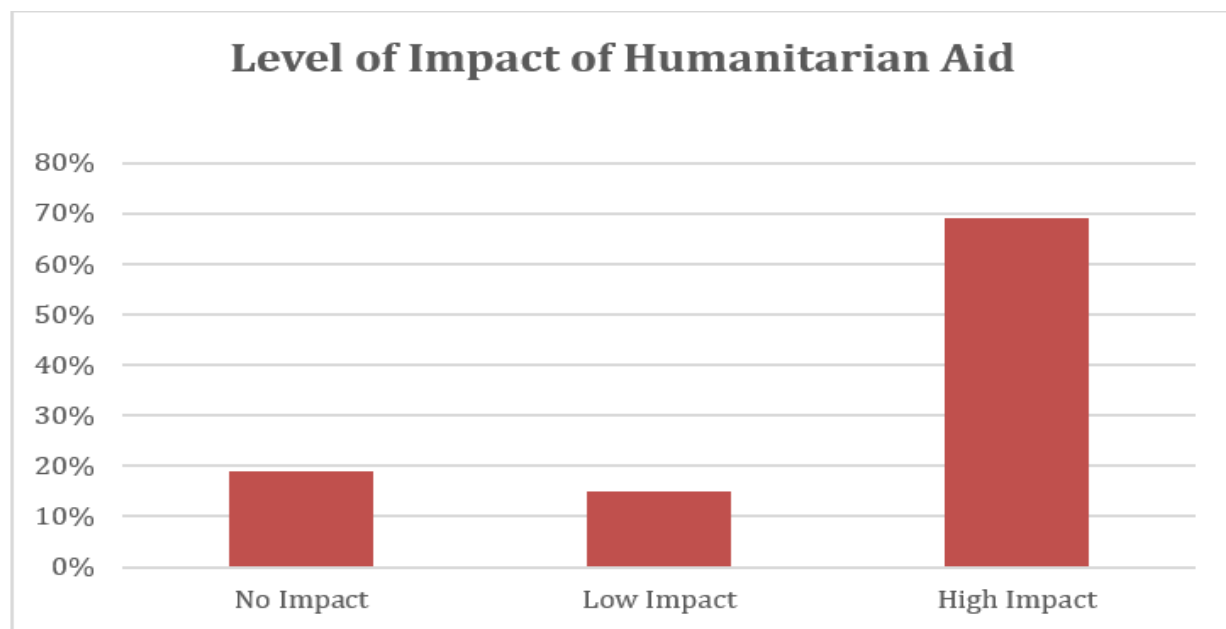


Figure 5: The Impact of Aid on People's Lives

The data analysis also reveals that households led by women and women in marginalized areas have the highest dependency on humanitarian aid. Consequently, any reduction or cessation of these supports could result in an increase in the economic and social vulnerability of these groups.

4.7. Challenges in Humanitarian Aid Delivery and Distribution

The Taliban, through various interventions and the imposition of severe restrictions on the activities of humanitarian organizations, have significantly disrupted the delivery of aid to vulnerable groups. In December 2022, the Taliban banned women from working in non-governmental organizations, which decreased the ability of these organizations to provide essential services to women and children. To better understand the barriers to effective humanitarian aid, this study also examined the challenges from the perspective of aid providers. In this research, 40 humanitarian workers both male and female were interviewed to assess their views on the obstacles faced in aid delivery.

As shown in Figure 7, security concerns are the primary challenge faced by aid workers, with 59% of participants citing it as the main obstacle to delivering aid. Taliban direct interference in the aid delivery process is another major challenge, cited by 48% of aid workers. These interventions include restrictions imposed on distribution procedures, shifting aid priorities, and enforcement of strict regulations governing humanitarian activities. Additionally, budget cuts and the restrictions on women have further complicated aid efforts. These challenges have been particularly detrimental for organizations that rely on female staff for delivering humanitarian services.

4.8. Restrictions Imposed on Women and the Inadequacy of Alternative Solutions

Despite international organizations being aware of the restrictions imposed on women and attempting to adjust their distribution methods accordingly, such measures have proven insufficient. For instance, one such initiative involved setting up women-only aid distribution centers. However, only 38% of humanitarian workers reported that their organizations had established such facilities. The lack of women-only distribution centers can be attributed to several factors, including a shortage of female staff, the requirement to separate male and female working environments, and the anticipation that the Taliban might eventually ease restrictions. These issues have prevented some organizations from taking concrete steps to improve women's access to humanitarian assistance.

Barriers of Humanitarian Aid Delivery

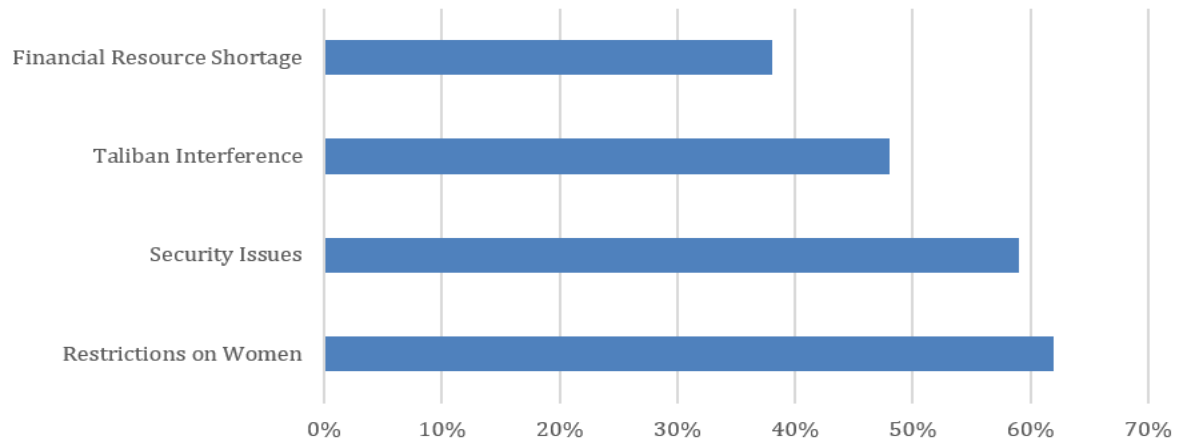


Figure 6. Barriers to Humanitarian Aid Delivery from the Perspective of Aid Organization Staff

Suggested Solutions for Improving Women's Access to Aid from the Perspective of Humanitarian Workers

In response to the question of what measures could enhance women's access to humanitarian aid, aid workers identified two key strategies: increasing political pressure on the Taliban and scaling up the volume of humanitarian assistance. On the other hand, technology-based solutions such as the use of mobile payment systems received less attention from respondents. This lack of emphasis is understandable given the widespread unfamiliarity with such methods and the limited technological infrastructure in many of the regions where aid is delivered.

5. Conclusion and Recommendations

This report documents the far-reaching consequences of the Taliban’s gendered policies, which have institutionalized the erasure of women from public life, and systematically dismantled their rights to education, work, mobility, and healthcare. Under this regime of gender-based persecution, Afghan women are not only facing an economic crisis but are also enduring a humanitarian emergency shaped by political violence and structural discrimination.

Women across Afghanistan, particularly those in remote and underserved areas—are bearing the brunt of this compounded crisis. They are responding with resilience, but also under enormous strain. Many have been forced into desperate measures: cutting food, borrowing money, selling assets, and even marrying off their daughters to survive. These are not merely “coping mechanisms”; they are acts of last resort in a system that has abandoned them.

Yet, the very humanitarian aid intended to support them remains out of reach for most. Access is blocked not just by logistical obstacles but by a political system designed to render women invisible. In this context, neutral or transactional humanitarianism is not enough. Aid delivered without gender consciousness, without challenging the structures that exclude women—risks reinforcing the very system that created the crisis.

What is needed is a principled humanitarian response, one that is feminist in practice, not just in intent. This means refusing to normalize the Taliban’s gender apartheid. It means designing and delivering aid that centers Afghan women’s agency, meets their real and specific needs, and challenges the structures that make them dependent in the first place.

The following recommendations arise directly from the findings of this research and from conversations with women across Afghanistan:

5.1. Apply Coordinated Pressure to Remove Gender-Based Restrictions

The international community must stop treating the Taliban’s exclusion of women as a cultural issue or an internal matter. These are deliberate policies designed to destroy women’s autonomy and strip them of dignity. Diplomatic recognition or engagement that ignores this reality risks legitimizing gender apartheid.

Recommendation: Use coordinated diplomatic and political pressure, including conditionality for any form of engagement to demand the removal of gender-based restrictions. Frame these policies as violations of international law and human rights, not just obstacles to aid delivery.

5.2. Deliver Gender-Responsive Aid That Respects Women's Autonomy

Humanitarian actors must ensure aid reaches women without empowering the regime that oppresses them. Aid should not be contingent on women's visibility in Taliban-controlled spaces, nor should it be filtered through systems that marginalize them further. It must affirm women's autonomy, not reduce them to passive recipients.

Recommendation: Prioritize partnerships with **local, women-led organizations** who understand the risks and realities on the ground. Ensure aid includes not only food and cash, but access to **education, healthcare, and income-generating opportunities**—elements that restore choice, not dependency.

5.3. Put Women at the Center of Aid Planning and Delivery

Women must not be treated as “vulnerable beneficiaries” but as **co-creators of humanitarian strategy**. They are experts on their own lives and communities. Excluding them from planning processes replicates the same hierarchies that keep them voiceless.

Recommendation: Involve women, especially those from rural, ethnic, and economically marginalized communities, in the **design, implementation, and monitoring** of all aid programs. Establish **women-only distribution centers**, mobile delivery services, and safe feedback mechanisms to ensure aid is accessible and accountable.

5.4. Ensure Transparency and Accountability in Aid Systems

Unfair aid distribution, corruption, and discrimination, whether based on gender, ethnicity, or political affiliation, undermine both trust and impact. Women should not have to plead, bribe, or risk safety to access what is a basic human right.

Recommendation: Develop independent oversight systems that include women's civil society groups. Deliver aid directly to women via digital or cashless platforms, eliminating the need for intermediaries. Regularly publish data on aid allocation and create safe reporting channels for misuse or discrimination.

5.5. Invest in Women's Healthcare, with a Focus on Reproductive Rights

Access to healthcare especially maternal and reproductive care is not a luxury but a matter of life and death. The near-total collapse of women's health services under Taliban rule is a gendered form of structural violence. Women's bodies are being regulated, neglected, and put at risk.

Recommendation: Prioritize the establishment of women-only clinics, recruitment and training of female healthcare providers, and deployment of mobile health services to reach isolated communities. Invest in community education campaigns that protect reproductive rights and raise awareness about available services.

This report makes it clear that humanitarian assistance without a gender lens is not neutral, it is complicit. Aid that fails to account for the political conditions under which Afghan women live can inadvertently sustain the systems that silence and marginalize them.

Afghan women are not voiceless, they are being silenced. They are not powerless—they are being disempowered by design. It is not enough to feed women while ignoring their erasure. Humanitarian aid must be a vehicle for restoring rights, dignity, and visibility, not a temporary patch to endure injustice.

Any response that does not place women's agency, leadership, and rights at its core will fail. And that failure will not be theirs, it will be ours.

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