HEALTHY MOTHERS HEALTHY BABIES

Country Profile: Afghanistan

Introduction

Afghanistan is one of the world's low-resource, conflict-affected countries, with high rates of stunting and wasting among children under five. UNICEF reported that one in three adolescent girls suffers from anemia,[1] and 31.6% (292,700) of pregnant women suffer from anemia as well.[2] While 6.6% of women are underweight.[3] The country constantly suffers from malnutrition and micronutrient deficiencies, especially among pregnant women and women of reproductive age (WRA). This raises the risk of low birth weight, stillbirths, and a high prevalence of other adverse birth outcomes that are also reflected in the national birth outcome data. Data available from the World Health Organization's Global Health Observatory indicate that several birth outcome indicators remain elevated: stillbirths were at 28.02 per 1,000 total births in 2023,[4] and infant mortality was at 50.36 per 1,000 live births in 2023.[5] Thus, there is a need for a more comprehensive program to address these nutritional challenges.

Nutrition International's policy brief in Afghanistan on the transition from IFA to MMS shows that the transition is expected to avert 449,523 disability-adjusted life years (DALYs) over 10 years, prevent the deaths of an additional 5,203 children, and yield benefits that are 906 times greater than the cost. The brief emphasizes that MMS is an intervention with a high return on investment.[1]

This country profile presents a concise overview of Afghanistan's status in transitioning from IFA supplementation to MMS for pregnant women. This document aims to inform policymakers, partners, and stakeholders on the current progress, challenges, and opportunities for scaling up MMS as a part of maternal nutrition and health strategies.

MMS Policy and Regulatory Status

Data and information on MMS policy and regulatory status are scarce. Nevertheless, national protocols or other clinical guidelines for treating anemia during pregnancy have been developed in the country.[6] UNICEF reported that the national nutrition strategy documents for the prevention of anemia include MMS to all pregnant women and diet counselling. Currently, three interventions are implemented to prevent anemia in pregnant women: daily MMS, preventive deworming, and counselling on a healthy diet. The report also states that treatment for anemia with therapeutic IFA supplementation for adolescent girls and pregnant women is available as an Essential Package of Hospital Services at the facility level under programs.[7]

Implementation Status

In 2025, UNICEF reports that in the past two years, Afghanistan has transitioned from daily IFA to daily MMS for all pregnant women as a part of the standard ANC.[7] In addition, national and/or subnational operational plans included the transition from IFA to MMS for pregnant women.[6]

Formative research and landscape analysis are underway; stakeholder mapping is underway. UNICEF is collaborating with Johns Hopkins University to carry out implementation research on MMS.

UNICEF has conducted several capacity-strengthening initiatives for primary caregivers of children aged 0-23 months on maternal, infant, and young child nutrition (MIYCN). UNICEF has also trained health workers in the integrated management of acute malnutrition (IMAM).[7] In addition, capacity-building efforts are underway: job aids, counselling tools, and supervision efforts have been introduced.[6]

In 2024, following awareness-raising activities were implemented to scale up MMS programmes in Afghanistan:

- Demand creation through advocacy, communication, and social mobilization (ACSM),
- Meetings, seminars, and/or workshops on MMS, maternal nutrition (UNICEF NutriDash).[8]

In addition, several strategies have been implemented to optimize MMS outcomes as the program scales up.

- Ongoing monitoring systems track program performance, while outcome evaluations assess acceptability, feasibility, and sustainability.
- Active engagement of community health workers and midwives in MMS promotion, which enhances community trust and supports consistent use throughout pregnancy.[6]

MMS Coverage and Utilization

In 2024, UNICEF NutriDash reported that MMS was delivered freely through ANC facilities to a total of 1,411,033 pregnant women in Afghanistan[8]. To improve adherence and compliance with MMS, individual and group counselling are provided at the healthcare center.[6]

Furthermore, Afghanistan is among the 16 countries that may receive packages of nutrition services, including MMS, under the UNICEF Maternal Nutrition Acceleration Plan.[9] The target is for 3,000,000[1]

[1] United Nations Children's Fund (UNICEF). Improving Maternal Nutrition: An Acceleration Plan to Prevent Malnutrition and Anaemia during Pregnancy (2024–2025). UNICEF, New York, 2024 (Table 1: Target numbers of pregnant adolescent girls and women to receive the package of nutrition services, including MMS, by the end of 2025)

pregnant, adolescent girls and women in Afghanistan to receive nutritional services, including MMS, by the end of 2025.[10]

Key Program Actors and Partners

UNICEF NutriDash reported that the government of Afghanistan has established an MMS standalone coordination mechanism that supports the planning and implementation of MMS programmes and activities in the country.[8] Multiple national and international partners are collaborating to implement and scale up MMS in Afghanistan, as presented in Table 1.

Table 1: List of national and international partners working to scale up MMS in Nigeria.[6]

National partners	International Partners
UNICEF Afghanistan	BMZ
	KfW Development Bank
	Kirk Humanitarian
	Johns Hopkins Bloomberg School of Public Health

Supply Chain

In Afghanistan, MMS are procured through global supply mechanisms and are fully imported. Procurement and stock management are facilitated via the international procurement facilities of the UNICEF Supply Division. According to UNICEF, the tracking, supply, and distribution of MMS and iron–folic acid (IFA) across the country are centrally managed by UNICEF to ensure uninterrupted availability at health facilities.[7] The current MMS supply is provided in-kind by Kirk Humanitarian, with funding support from German Development Bank (KfW) and BMZ.[6]

Monitoring, Evaluation, and Research

UNICEF Afghanistan has aggregated coverage data and program monitoring elements (including community-based nutrition surveillance and the number of pregnant women reached) for MMS. Thus, confirming UNICEF's central role in national tracking, supply, and distribution.[11]

Financing and Sustainability

Donations fund MMS supplements, and all implementation and financial aspects are funded by donors.[7] UNICEF is the only organization in the country to provide MMS supply and distribution to health facilities. Since 2022, UNICEF has been working on MMS supplementation.[6]

Challenges and Next Steps

Technical and programmatic support remain vital for the effective scale-up of MMS. The support is primarily needed to conduct further implementation research and coordinate with pharmaceutical suppliers to improve national-level access to MMS. The major barriers identified by UNICEF are financing for MMS.[6]

MMS Tools and Resources

1. **Costing and Economic Analysis Tools**

These resources provide guidance for policymakers and health program managers considering a transition from Iron-Folic Acid Supplementation (IFAS) to Multiple Micronutrient Supplements (MMS). They offer practical tools and costing aids to support effective decision-making and planning.

a) A tool to aid decision-making transitioning from IFAS to MMS
b) Policy Brief: Afghanistan | Cost-Effectiveness of Transitioning from Iron and Folic Acid to Multiple Micronutrient Supplementation for Pregnancy, Nutritional International, October 2019
c) Results for Development. "Multiple Micronutrient Supplements (MMS) Introduction and Scale-up Roadmap Costing Tool."

2. **Situation and Policy Analyses and formative research**

These documents provide an overview of the country's situation analysis and technical analysis, which examine existing strategies, evidence, and programmatic efforts to strengthen maternal nutrition outcomes nationwide.

a) Afghanistan Humanitarian Situation Report 1-31 October 2024 Report
b) Review of policies, data, and interventions to improve maternal nutrition in Afghanistan

3. **Other important resources on MMS**

These documents outline the urgent need to accelerate nutrition action in Afghanistan and the government's adoption of a national strategy, providing a framework to guide and strengthen nutrition policies and programs across the country.

a) Nourishing Afghanistan: A UN Call to Accelerate Nutrition Action
b) Afghanistan Takes Major Step to Address Undernutrition: Launching of the National Nutrition Strategy

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The information and country-level data provided herein were received from our partners as of 2025 and are shared with permission for public dissemination. This profile will be updated periodically. If you have updates or additional information to share, please fill out this feedback form. For questions, contact us at HMHB@micronutrientforum.org.

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