



WHEN EVERY SECOND COUNTS

HUMANITARIAN RESPONSE AFTER THE HERAT EARTHQUAKE

**6.3**
MAGNITUDE**275,000**
PEOPLE IMPACTED**1,482**
DEATHS**2,100**
INJURED**114,000**
PEOPLE REQUIRED
IMMEDIATE
HUMANITARIAN
ASSISTANCE

(SOURCE: WORLD HEALTH ORGANIZATION)

HERAT

OCTOBER 7, 2023

11:11 HOURS

First, you hear a distant rumble. Suddenly, the whole house starts to shake, a painting drops, glass breaks, a large crack appears in the ceiling.

The children are crying. You panic and yell at them to go outside. Your vision is blurred. You've lost your sense of equilibrium. You stumble into the street and notice the horror on your neighbour's faces. Some are covered in blood. A man is lying on the ground. His wife is screaming. She points at the rubble. A hand is sticking out.

You look at your house. It's still trembling. The walls are crumbling. It all seems surreal. Like a dream. A nightmare... The tremors stop. The screaming doesn't. The dust settles. You wipe the sweat and blood off your face. Whose blood is this?

You can't move. You stare at the remains of your house. Some clarity returns and you remember you live very remote. This is an emergency, if there ever was one.

This is Herat. This is Afghanistan.



AFGHANISTAN: STAYING RESILIENT THROUGH DECADES OF CONFLICT AND CRISIS

Afghanistan's modern history has been marked by decades of conflict and humanitarian crises, beginning with the Soviet invasion in 1979.

Ten years later the Soviets withdrew, which led to a period of chaos as rival factions fought for control, culminating in the Taliban's rise to power in 1996. The Taliban, an ultra-conservative Islamist group, imposed a harsh regime, including restrictions on the rights of women and minorities.

In response to 9/11, the U.S. and its allies launched an invasion in 2001, toppling the Taliban regime. However, the ensuing years saw a persistent insurgency, corruption, and a fragile Afghan government struggling to maintain control. The conflict led to immense human suffering, with thousands of civilians killed, millions displaced, and a severe humanitarian crisis.

In August 2021, the U.S. withdrew its forces, leading to the rapid collapse of the Afghan government and the Taliban's return to power. After a brief charm offensive, in which the Taliban promised to pursue more progressive policies, they again began to severely restrict women's rights through various decrees.

The country now faces an economic collapse, exacerbated by international sanctions, drought, and a dire humanitarian situation. Millions of Afghans need assistance, with food insecurity and poverty reaching unprecedented levels.

In this challenging context, the earthquake in Herat further devastated the lives of thousands of people. Fortunately, organisations within the Dutch Relief Alliance responded swiftly, launching a professional humanitarian intervention within 72 hours.

This rapid response was made possible by the dedicated efforts of aid workers and the cooperation of the affected communities.

Let's meet some of them.

The earthquake turned entire villages into rubble. Amidst these ruins, the population and humanitarian organisations swiftly mobilised to support people who had been affected most.

FACTS AND FIGURES

45

YEARS OF CONFLICT

TOTAL POPULATION

44.5 MILLION

PEOPLE IN NEED OF
HUMANITARIAN ASSISTANCE

23.7 MILLION

(SOURCE: UNOCHA)



FADIHA WORKS FOR CARE IN AN EMERGENCY HEALTH CENTRE WITH SPECIALISED CARE FOR WOMEN AND CHILDREN, INCLUDING PSYCHOSOCIAL SUPPORT, IN THE ZINDA JAN DISTRICT, HERAT.

FADIHA (28)

11:11

‘I was in my office in the centre of Herat City, working on some reports. The whole building started shaking and my colleagues and I ran out.

I immediately thought about the potential scale of the disaster and the need to respond. Then my thoughts went to my family. Thankfully, I quickly found out they were unharmed.’



The pharmacy at the field clinic in Zinda Jan District, supported by World Vision, plays a critical role in providing essential medications to the earthquake-affected population. Staffed by trained pharmacists, the location offers a wide range of medicines free of charge to ensure access for all who need them, from antibiotics to pain relievers and medication to treat chronic diseases.



‘THE EMOTIONAL TOLL OF THE DISASTER AND THE RESPONSIBILITY OF COORDINATING THE RESPONSE HAVE BEEN OVERWHELMING.’

11:41

THE AFTERSHOCKS

‘I have experienced minor tremors before but nothing of this magnitude. This earthquake was unprecedented in its intensity and impact. There was so much chaos. And the aftershocks... They were nerve-wracking. The constant fear of another major earthquake has been deeply unsettling, affecting our ability to focus and function effectively.’

SETTING UP THE RESPONSE

‘But there was no time to sit still. I joined a meeting and we started reaching out to local authorities and humanitarian organisations to establish a coordinated effort.’

The mobile networks were down and internet access was intermittent. We relied on satellite phones and radio communication. Once we established contact, we set up a coordination centre to streamline our efforts. The most immediate needs were medical assistance, food, water, and temporary shelter.’

THE FIRST 72 HOURS

We set up emergency response units, organised the distribution of relief supplies and worked on setting up temporary shelters for displaced families. I am proud of the strength and sense of solidarity of everyone involved in the response. At the same time, it was exhausting and emotionally draining. We worked nonstop. And we knew our work had only just begun.’

COPING WITH TRAUMA

‘The emotional toll of the disaster and the responsibility of coordinating the response have been overwhelming. I try to stay focused on the work and draw strength from the support of my colleagues and the community. Regular debriefings and sharing experiences with fellow humanitarian workers help. Other survivors rely heavily on support within the community and the assistance of humanitarian organisations. They are struggling with anxiety and trauma and need ongoing psychological support. The road to recovery will be long.’

LIFE IN AFGHANISTAN

‘The earthquake has added more adversity to the already difficult circumstances we were facing. However, the incredible strength and resilience of the Afghan people give me hope. Despite the hardship, we continue to support each other to rebuild our homes, our lives and our communities.’ ■



MATJANA (45) AND SAMI (5)

11:11

‘I was at home, preparing lunch and waiting for my husband and son to return from the fields. They had gone out early to work on our farm, and I was looking forward to them coming back. When the earthquake hit, I was overwhelmed by terror and confusion. Nothing could have prepared us for this kind of devastation. The ground shook violently, and the walls of our house began to crack and crumble. My immediate reaction was to rush outside, screaming for my husband and son. I remember thinking, “Please, let them be safe. Please, let this nightmare end.”’

Newly built earthquake-resistant houses in the Zinda Jan District. Thanks to the collaborative efforts of humanitarian organisations and local volunteers, survivors in the disaster area can leave their temporary shelters and start rebuilding their lives in a new home.



‘THAT DAY IS STILL HAUNTING ME.’

11:41

THE AFTERSHOCKS

‘The moments after were filled with chaos and dread. I started running towards the fields, hoping to find them. The landscape was unrecognisable. There was debris and destruction everywhere. My neighbours were crying out for help. I joined them, searching for survivors. It wasn’t long before I also found my husband and son. They were buried under a collapsed building. My world was shattered. Our home. Our farm. Everything was destroyed. I felt broken and hopeless.’

THE FIRST 72 HOURS

‘We stayed outside, too afraid to go near any buildings. We lived in constant anxiety and fear of aftershocks and more destruction. After ensuring the safety of my younger children, I joined other villagers to help those in need. People were providing first aid and rescuing victims trapped under debris. The solidarity was remarkable. We all came together to help each other, sharing whatever resources we had.’

COPING WITH TRAUMA

‘That day is still haunting me. I am left with a deep sense of hopelessness. I try to stay connected with other survivors, talk about our shared experiences, and seek support from humanitarians. However, the pain and trauma are so deep, finding a way forward feels almost impossible.’ ■

THE DUTCH RELIEF ALLIANCE

After the earthquake, the partners of the Dutch Relief Alliance set up an emergency response within 72 hours. The aid workers provided medical care, food, water, psychosocial support and shelter to the population who, in many cases, had lost everything they owned.

The Dutch Relief Alliance is a coalition of 14 Dutch humanitarian organisations that work in partnership with the Netherlands' Ministry of Foreign Affairs and many local organisations.

The alliance was established in 2015 and envisions a world in which people affected by crisis stand at the centre of a respectful humanitarian response that saves lives, alleviates suffering, restores dignity and contributes to resilience.

The partners work together with those most in need to develop a timely, efficient and high-quality humanitarian response based on equitable partnership.

STRATEGIC GOALS OF THE DUTCH RELIEF ALLIANCE

Collaboration

The Dutch Relief Alliance was established to improve cooperation and coordination between NGOs. This collaboration enables them to deliver greater impact and respond to major international crises in a timely and effective manner. Instead of competing for funding or working in isolation, the partners come together and use their different mandates and set-ups to design joint responses with shared goals and objectives.

Localisation

The alliance defines localisation as a process in which local actors are assigned a prominent role and stronger leadership in humanitarian assistance. Localisation contributes to more equitable partnerships between local and international actors. This in turn can increase the impact of humanitarian assistance, address power imbalances within the humanitarian system and promote sustainability and exit strategies.

Especially in complex settings, as in Afghanistan, localisation is crucial to improve the effectiveness of the response by leveraging local knowledge, context awareness and connections with communities.

Innovation

One of the key advantages of the members' close collaboration is that the alliance can share best practices and accelerate the implementation of innovative solutions, such as the smart use of data, cash programming, safety and security measures and renewable energy.

Alliance Members

The members of the Dutch Relief Alliance are CARE Nederland, Cordaid, Dorcas, Oxfam Novib, Plan International, Help a Child, Save the Children, SOS Children's Villages, Stichting Vluchteling, Tearfund, Terre des Hommes, War Child, World Vision Nederland and ZOA.

FACTS AND FIGURES ON THE HERAT JOINT RESPONSE

GOAL

Providing emergency assistance in Herat Province to people who have been affected by the earthquakes of October 2023.

LEAD ORGANISATION

Cordaid

ORGANISATIONS IN THE JOINT RESPONSE

ASLO, CARE Nederland, Cordaid, RRAA, Terre des Hommes, YVO, World Vision Nederland, WASSA

DURATION

6 MONTHS

(SOURCE: DUTCH RELIEF ALLIANCE)



TOTAL NUMBER OF INDIVIDUALS REACHED

72,025



FOOD SECURITY

2,740

PEOPLE SUPPORTED WITH:

- the provision of livestock to rebuild livelihoods
- kitchen gardening tools
- cash for food



WATER, SANITATION AND HYGIENE

14,651

PEOPLE SUPPORTED WITH:

- good hygiene practices and hygiene kits
- the installation of **100** emergency latrines
- the rehabilitation of **8** piped water systems



HEALTH CARE

55,875

PEOPLE SUPPORTED WITH:

- the rehabilitation of **3** health centres
- provision of mental health and psychosocial services and referrals
- provision of primary health care, including sexual and reproductive health care
- specialised care for survivors of gender-based violence



SHELTER/ NON-FOOD ITEMS

4,900

PEOPLE SUPPORTED WITH:

- items like blankets, shawls, scarves and sleeping mats, complemented with cash support



CASH ASSISTANCE

20,378

PEOPLE SUPPORTED WITH:

- financial assistance for buying the most urgent necessities



ZARIFA (48)

Amina (74), Hussain (3), Nilofar (6). The relief efforts in Keshk, Rabat Sangi District are multifaceted, addressing both immediate needs and long-term recovery. Cash distributions provide affected families with the autonomy to prioritise their most pressing needs, whether it be shelter, food, or medical expenses. Additionally, construction projects focus on the installation of essential infrastructure.



11:11

'I was at home, preparing lunch, waiting for my son to return from his work. I always looked forward to that moment. When I felt everything shaking and my house started to crumble around me, I was thinking of him.'

11:41

THE AFTERSHOCKS

'I was trapped under the rubble. My neighbours freed me and together we started searching for other survivors. I remember the cries for help and the sound of collapsing buildings everywhere. It was heart-wrenching. Nobody had seen my son. I was fearing the worst...'

THE FIRST 72 HOURS

'I joined the others to help people in need. And then I had to identify and bury my son.'

COPING WITH TRAUMA

'I struggle to find any reason to move forward. Coping with all this is incredibly difficult. I try to stay connected with other survivors, talk about our shared experiences, and seek support from organisations.' ■

**'I STRUGGLE TO
FIND ANY REASON
TO MOVE FORWARD.
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DIFFICULT.'**



RONA (32) AND ELAHA (1)

11:11

‘I was at the hospital, checking on patients and preparing for a meeting with the medical team. Then the building started shaking. My first thoughts went out to the patients. We all moved quickly and started the emergency protocols. Thankfully, I was able to contact my family and confirm their safety, which allowed me to focus entirely on my duties at the hospital.’

CARE SUPPORTS WOMEN AND CHILDREN AFFECTED BY THE EARTHQUAKE IN THE ZINDA JAN DISTRICT, HERAT. THE COLLABORATIVE EFFORT RESULTED IN A HEALTH CENTRE WITH SPECIALISED CARE FOR WOMEN AND CHILDREN, INCLUDING PSYCHOSOCIAL SUPPORT.



Razia (37), health worker at the medical centre in Zinda Jan District.

11:41

THE AFTERSHOCKS

'The first thirty minutes were completely frantic. We evacuated the patients. There was a lot of confusion and fear, but we quickly organised to assess injuries and provide urgent care. But the aftershocks were terrifying and made our work at the hospital even more challenging. We had to keep evacuating patients and look after everyone's safety.'

SETTING UP THE RESPONSE

'I participated in an emergency meeting with hospital administrators and medical teams to plan our response. The first steps involved setting up triage areas, ensuring sufficient medical supplies, and coordinating with other hospitals and emergency services. We also began organising transport for critically injured patients to facilities that were still fully operational. The coordination was challenging due to communication disruptions and restrictions on women's participation in some areas. However, after discussions with local authorities and proving the necessity of female medical staff, we were able to smoothen the collaboration. The hospital became a central hub for relief efforts.' ■

'THE FIRST THIRTY MINUTES WERE COMPLETELY FRANTIC.'



In disaster areas, dangerous diseases related to poor hygiene spread easily. Recognising the urgent need for sanitation facilities and hygiene maintenance, RRAA has built sanitary facilities. Additionally, they are distributing kits containing essential hygiene supplies.



'THE HOSPITAL BECAME A CENTRAL HUB FOR RELIEF EFFORTS.'





SHAFIULLAH (65)

11:11

‘I was working in the field with my brother. My wife and children were at home, preparing lunch. It was just a typical day for us, going about our daily chores and farm work.

The ground started shaking. I saw buildings collapsing in the distance. I ran back home, as fast as I could.’

11:41

THE AFTERSHOCKS

‘Our house lay in ruins. My neighbours were standing outside. They were injured and in shock. Then I saw my wife and one of my children. They were injured, but alive. My youngest didn’t survive... There was chaos all around. People were trying to rescue their loved ones who were trapped under the rubble. We used whatever tools we had to dig through the debris, calling out for survivors. The fear and helplessness. It’s indescribable.’

‘WE SHARE OUR GRIEF AND FIND SOLACE IN OUR COMMUNITY.’



THE FIRST 72 HOURS

‘Each aftershock brought new waves of panic. We stayed in the open fields, too terrified to be close to any buildings. I frantically kept searching for my family while helping others in the village. We rescued people who were trapped and provided first aid to the injured. After I found out my other family members were safe, I joined others in organising more support. We gathered water, food, and blankets from what was left of our homes and set up a temporary shelter in an open field. We all came together to support one another. The relief supplies provided by the aid organisations made a significant difference.’

COPING WITH TRAUMA

‘Many people, including myself, suffer from nightmares and constant anxiety. We can’t sleep and we don’t feel safe anywhere. We share our grief and find solace in our community.’ ■

The field clinic in Zinda Jan District, supported by World Vision, includes dedicated spaces where aid workers provide support to the youngest survivors of the earthquake. They offer a range of services aimed at addressing both physical and mental health needs. The children receive medical care, vaccinations, nutritional support, and trauma counselling, and they participate in recreational and educational activities. By creating a safe and nurturing environment, the centre plays a crucial role in fostering resilience and helping children cope with the emotional aftermath of the disaster.



WALI (48)

WASSA provides essential medical services in two clinics in the Injil District of Herat. These services included general medical consultations, maternal and child health care, immunisations and treatment of common illnesses and injuries. The clinics also offer mental health support to help survivors cope with trauma.



11:11

'I was at home. We just had breakfast. My wife and children were in the living room and my parents were visiting that day. It was a moment of peace and family togetherness. Everything happened so quickly. I remember the disbelief and horror when the house began to collapse.'

11:41

THE AFTERSHOCKS

'I was trapped under the debris, struggling to breathe. I managed to free myself and I desperately called out to my family. There was no response. My neighbours came to help me, but it was too late. I found my wife and children buried under the rubble. They were dead. Then I found my parents. They also didn't survive.'

THE FIRST 72 HOURS

'While I was in a state of shock and panic, I tried to help my neighbours and search for survivors. But it was very hard for me to think clearly. My body must have functioned on autopilot, driven both by adrenaline and despair. There was no time to rest.'

'I CAN'T SLEEP AND EVERY LITTLE SOUND MAKES ME JUMP UP.'

COPING WITH TRAUMA

'I've lost my entire family. Many of my close friends and relatives are also gone. There are no words for the pain and grief I feel. Every day is a struggle. I can't sleep and every little sound makes me jump up. The only thing that keeps me going is the support from my community and the hope that one day we might find some semblance of peace and stability again.' ■



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Ministry of Foreign Affairs