

Monitoring Government's Response to COVID-19 in Nangarhar, Laghman and Kunar

Monitoring Cycle 2: August 2 – September 1, 2020

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Introduction

This policy brief is based on the second round of COVID-19 Budget Monitor in Nangarhar, Laghman and Kunar provinces as part of the COVID-19 Budget Monitoring project, funded by UNDP and Danish Embassy, to monitor the process of allocation and spending of COVID-19 funds. Data on this round of monitoring were collected through key informant interviews in the three provinces.

Background

As of October 10, 2020, more than 38,000 cases of COVID-19 infection with 1,400 deaths have been reported throughout Afghanistan.¹ The economic implications of the pandemic include reduced government revenue, disrupted business activities, weakened agricultural growth, and increased poverty.² The spike in the number of COVID-19 cases were, in part, due to the increased number of returnees from neighboring Iran and Pakistan.³

The actual registered and reported cases of COVID-19 and the number of deaths surpass the official numbers reported by the Ministry of Public Health (MoPH), with some sources suggesting that up to 90 percent of potential cases are not being tested or recorded. Further, Afghanistan's positivity rate, which is the number of positive tests divided by the total number of tests, is among the highest in the world at 43 percent.⁴

Unlike other countries, where specific budgetary provisions, monitoring and performance frameworks were established to manage the pandemic, in Afghanistan there are major concerns and grievances from multiple sources over the allocation and spending of COVID-19 funds,⁵ with media outlets disclosing misappropriation of funds and purchase of non-essential items such as furniture, television sets and equipment which are not directly linked to COVID-19 relief.⁶

This brief summarizes the findings of the second cycle of “Monitoring Government’s COVID-19 Response in Nangarhar, Laghman and Kunar” to establish how the earmarked COVID-19 relief funds are being used by local authorities and to document changes in the process of allocation and spending during the month of August 2020.

Key Findings

In July 2020, HealthNet TPO and Agency for Assistance and Development of Afghanistan (ADDA) were assigned by the World Bank and Asian Development Bank under SEHATMANDI-II project to lead COVID-19 health service delivery in the eastern provinces of Afghanistan. However, no mechanisms have been established to engage CSOs and provincial council members in monitoring COVID-19 service delivery.⁷

To tackle the pandemic, Afghan government allocated 190 million AFN. Nearly 50 percent of the budget in Nangarhar and 30 percent in each of Laghman and Kunar have remained unspent and there has been no decision on how to spend the remaining funds.⁸ Some government officials have stated that these funds will be used as a contingency to be spent on the second wave of COVID-19.⁹

Mainly due to lack of expenditure by Governor’s Office and Directorate of Public Health (DoPH), there were no monthly or weekly public hearings in Nangarhar during August 2020. The initiatives for public consultation and accountability mechanisms have largely faded in the province. There are concerns among civil society, however, that Mustofiat in the provinces do not

account on how the funds earmarked to combat COVID-19 are managed and disbursed.¹⁰

The Purchasing and Monitoring Committees are said to be operational in Laghman but do not have clear terms of reference. Procedures developed by Ministry of Finance (MoF) were being used by DoPH in Laghman to request purchases but comprehensive procedures outlining roles, responsibilities and expected results of purchases have not yet been developed.¹¹

Following allegations of corruption in COVID-19 funds, MoF has strengthened financial reporting measures and is demanding comprehensive reporting to document the budget lines and how the allocated budget has been spent.¹²

Similarly, the Supreme Audit Office (SAO) has started audits in Nangarhar, Laghman and Kunar provinces. However, there are concerns about the degree to which international best practices of audit under emergency conditions are upheld by the SAO auditors.¹³

It is also reported that in Laghman purchases worth over 11 million AFN were made from single source contracts, while only 3.9 million AFN worth of health equipment were transferred and used by COVID-19 health centers, showing 67.1 percent of purchases still not being used and stored in DoPH stocks.¹⁴ Similarly, in Kunar, fans and refrigerators were purchased for health centers but half are held at the Provincial Governor’s Office.¹⁵ Accurate and complete data was not made available by PGO and DoPH in this province to establish in precise terms how earmarked funds have been managed.

There were mixed opinions over COVID-19 health service delivery in the public health centers. While some patients believed that service delivery was adequate, others complained about insufficiency of the services, particularly with regards to availability of medicine. However, the number of doctors and health personnel were thought to be sufficient.¹⁶ Similarly, Personal protective equipment, oxygen cylinders and thermometers were available to all in-coming patients.

Recommendations

The following recommendations were generated based on the responses of key informants and available data from secondary sources.

Government Authorities

- Establish a mechanism to identify the needs and allocate funds in a timely manner.
- Establish comprehensive guidelines for local authorities, prioritizing the anti-corruption and fiscal transparency measures.
- Establish reporting procedures based on performance and expected outcomes with measurable indicators to ensure efficiency and effectiveness in the manner in which the local authorities allocate and disburse COVID-19 funds.
- Enhance coordination among DoPH, Mustofiat and the provincial COVID-19 committees for the purchases related to COVID-19 to increase effectiveness in expenditure and mitigating duplication.
- Improve transparency and accountability through reporting publicly using online portals.
- Strengthen oversight during budget execution through audits by the Supreme Audit Office.
- Ensure continuous monitoring of COVID-19 relief funds through publicly elected bodies such as Provincial Councils.

Civil Society

- Mobilize and monitor the COVID-19 emergency relief process at the national and subnational levels.

- Strengthen transparency and accountability in the allocation and disbursement of COVID-19 relief funds by demanding that local authorities to publish information related to the management of combating COVID-19 and accounting for the allocation and expenditure of earmarked funds.

International Donors

- Introduce or re-activate coordination amongst international donors to strengthen COVID-19 response strategies.
- Conduct needs assessment and allocate international assistance based on the actual needs of the beneficiaries.
- Establish clear performance indicators and expected outcomes of COVID-19 emergency relief.

Private Sector

- Given the social and societal implications of poor medical supplies, private sector associations such as Afghanistan Chamber of Commerce and Industries should ensure that its members comply with adequate degrees of transparency and integrity in the provision of public health goods and service.

COVID-19 Health Centers

- Maintain accounting records of all purchases and establish appropriate mechanisms for recording necessary health equipment.
- Initiate training programs for health officials on equipment purchased for health centers.

Endnotes

¹ Data on the number of COVID-19 cases, available from: <https://www.worldometers.info/coronavirus/country/afghanistan/>

² World Bank (2020). Afghanistan Development Update July 2020: Surviving the Storm. Available from: <http://documents1.worldbank.org/curated/en/132851594655294015/pdf/Afghanistan-Development-Update-Surviving-the-Storm.pdf>

³ UNHCR (2020). Border Monitoring Update. Available from: <https://reliefweb.int/sites/reliefweb.int/files/resources/UNHCR%20Afghanistan%20-%20Border%20Monitoring%20Update%2005SepFINAL.pdf>

⁴ SIGAR (2020). Quarterly Report to Congress: July 30, 2020. Available from: <http://www.sigar.mil/pdf/quarterlyreports/2020-07-30qr-section3-economic.pdf>

⁵ See, for example, Barroy H., Wang D. & Pescetto C. (2020). How to budget for COVID-19 response? Available from: https://www.who.int/docs/default-source/health-financing/how-to-budget-for-covid-19-english.pdf?sfvrsn=356a8077_1 and Ministry of Finance of

China (2020). Notice on Further Doing a Good Job in Guaranteeing Funds for the Prevention and Control of the Novel Coronavirus Pneumonia Epidemic. Available from: http://sbs.mof.gov.cn/zhengcefabu/202002/t20200213_3469361.htm

⁶ Pajhwok Afghan News. (2020). Ghor: COVID-19 fund mismanaged, misappropriated. Available from: <https://www.pajhwok.com/en/2020/07/19/ghor-covid-19-fund-mismanaged-misappropriated>

⁷ KI-M-LAG-GO-7.

⁸ KI-M-KUN-NG-4, confirmed by 7 KIs in Nangarhar, Kunar and Laghman.

⁹ KI-M-KUN-GO-2, confirmed by 6 KIs in Kunar.

¹⁰ KI-F-NAN-GO-8, KI-M-NAN-NG-2.

¹¹ KI-M-LAG-NG-3, confirmed by 5 KIs in Laghman.

¹² KI-M-KUN-GO-8, confirmed by 2 KIs in Kunar.

¹³ KI-M-NAN-GO-1.

¹⁴ KI-M-LAG-NG-5, confirmed by 3 KIs in Laghman.

¹⁵ KI-M-KUN-NG-6.

¹⁶ KI-M-NAN-NG-10, confirmed by 2 KIs in Laghman and Kunar.