



INVISIBLE CRISIS, VISIBLE CONSEQUENCES

PHOTO: CORDAID

“Invisible Crisis, Visible Consequences: Why Mental Health Investment Is Key to Stabilising Migration and Returnees in Afghanistan”

Afghanistan suffers from a silent but severe mental health and psychosocial crisis, driven by prolonged displacement, poverty and large-scale returns from neighbouring countries. Evidence from the Afghanistan Humanitarian Fund (AHF) annual report 2025 highlights growing needs alongside declining funding, with persistent critical gaps in basic services, including psychosocial support.

Returnees and displaced populations are particularly affected, facing stress and uncertainty that directly impact their ability to reintegrate. Without Mental Health and Psychosocial Support, these pressures increase the risk of secondary displacement and onward migration.

NEED

The demand for Mental Health and Psychosocial Support Services (MHPSS) and Physical Rehabilitation (PR) services is rapidly rising in Afghanistan due to several overlapping shocks. Tens of thousands of people have been displaced as a result of recent cross-border tensions; over 22.9 million people (more than half the population) need humanitarian assistance, and according to the Dutch Ministry of Foreign Affairs General Country of Origin Information Report 2025[1],

3.9 million people returned in 2025 from Iran and Pakistan, many of whom arrived with few possessions and limited access to basic services. Restrictions have prevented an estimated 1.1–1.4 million females from attending secondary school, and poverty is still pervasive, with over 90% of households facing income shocks. The Dutch Ministry of Foreign Affairs' General Country of Origin Information Report 2025 indicates that the education ban had various consequences. Not only were girls harmed in terms of their cognitive and psychosocial development and mental health, but they were also denied any future prospects other than marrying young and becoming mothers and homemakers[2].

According to surveys and evaluations, 80–87% of populations affected by conflict and returnees report acute psychosocial distress with elevated anxiety and altered behaviour.

This high frequency highlights a long-term development risk as well as an urgent humanitarian issue. Untreated mental health issues considerably impair people's capacity to work, actively participate in their communities, and develop resilience. Programming for mental health and psychosocial support services is vital and life-saving. Since Cordaid Afghanistan has implemented its Mental Health and Psychosocial Support project funded by the Dutch Ministry of Foreign Affairs in Nangarhar and three other provinces, supporting the continued MHPSS project is a strategic and cost-effective intervention that contributes to community stability and future migration management.

[1] [General Country of Origin Information Report Afghanistan December 2025](#), page 109

[2] Page 78

The Afghan Population Is Experiencing:

- Limited availability of mental health and psychosocial support services, especially in rural areas
- Economic hardship, poverty, unemployment and exposure to conflict
- Large-scale forced return of the vulnerable population increases the needs

The Dutch Ministry of Foreign Affairs identifies migration management and supporting host communities as key priorities. Cordaid integrated Mental Health and Psychosocial Support services advance these goals. Stabilising host communities through community-based psychosocial services that lower tensions between returnees and long-term residents. Without MHPSS, host communities risk becoming sites of renewed conflict and displacement.

MHPSS MATTER FOR MIGRATION

Mental health is a critical factor in migration dynamics, and returnees who are experiencing psychological distress are less able to rebuild their lives and integrate. This will increase the likelihood of onward movement and experiencing secondary displacement and is directly linked to negative coping strategies. Funding to address mental health and psychosocial support reduces push factors for migration.

Further, Cordaid's MHPSS approach actively contributes to community reconciliation and peacebuilding. Psychosocial support groups bring together returnees, internally displaced people (IDPs), and host community members in shared healing spaces like Cordaid's Community Resilience Centres (CRCs), reducing intergroup resentment and addressing trauma that otherwise fuels cycles of local conflict, particularly in Nangarhar and Herat provinces. This pre-initiative and Cordaid's foresight directly align with the Dutch Ministry of Foreign Affairs' commitment to stability and social cohesion.

"Ignoring mental health doesn't reduce migration but it delays it"

CORDAID AFGHANISTAN MHPS SERVICES

Cordaid under its Afghanistan health integrated programming:

- Provide community based mental health and psychosocial support services through the Community Resilience Centers (CRCs) (CRC) in Nangarhar, Khost Herat and Daikundi
- Supports women and girls and vulnerable groups with tailored interventions
- In its integrated model, responding to the needs of returnees and host communities
- And strengthen local capacity to deliver mental health and psychosocial support services

SUCCESS STORY A JOURNEY OF MENTAL RECOVERY

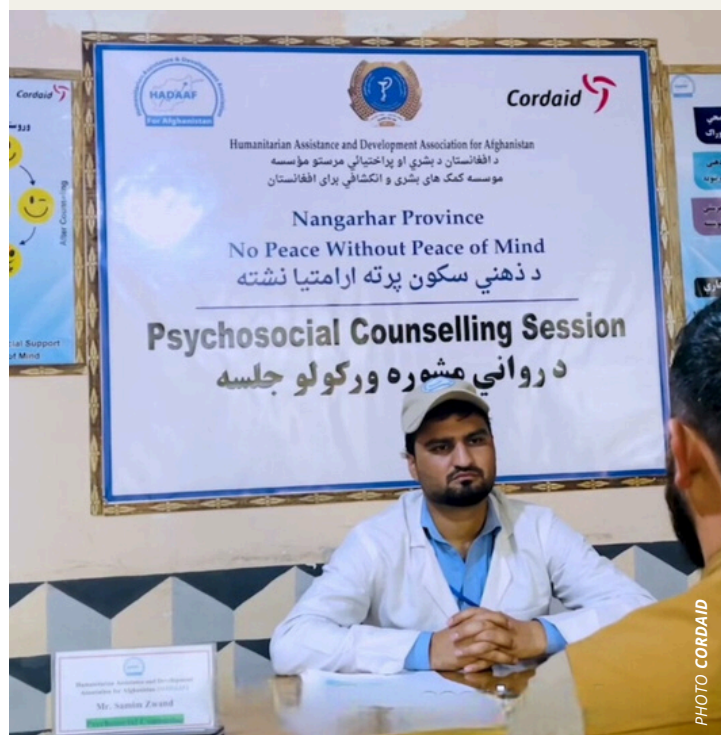
In many communities across Nangarhar, years of conflict, displacement and economic hardship have severely affected people's mental well-being. Many individuals silently suffer from anxiety, depression and emotional distress, often without access to support.

Through Cordaid community outreach, trained staff visited villages to raise awareness about mental health. They identified individuals in need and provided referrals to counselling services. Ahmad (renamed here) received structured psychosocial support, including one-on-one counselling, practical guidance on positive thinking, breathing exercises and coping techniques.

As a result, he once felt hopeless and began to regain control over his life. After several counselling sessions. He reported significant improvements in his emotional well-being and renewed hope for the future.

"I was tired of my life and felt completely hopeless. But through these sessions, I learned how to think positively and manage my feelings. Now, Alhamdulillah, I feel 100% better. Just as my life has changed, I believe others' lives can change too."

Cordaid and its partners facilitated outreach and counselling services. Early awareness raising and accessible counselling services are key to breaking stigma and enabling lasting mental health recovery.



> Cordaid community outreach.

Afghanistan Humanitarian Fund Shows:

1. **Growing but under-addressed mental health and psychosocial support.** Mental health, as one of the cross-cutting issues, remains underfunded while showing impact from a gender parity lens^[3]
2. **Funding cuts affecting integrated services.** As overall funding declines, mental health and psychosocial support services components are often deprioritised

CORDAID APPROACH CONTRIBUTES:

- To the Dutch Ministry of Foreign Affairs identified priorities on migration management and returnees.
- Stabilising host communities through community-based psychosocial services that lower tension between long-term residents and returnees.
- Improved well-being and functioning of returnees
- Increased community resilience.
- Reduced risk of secondary displacement.
- Strengthen social reconciliation and reduce inter-community tensions, thereby directly supporting the Dutch Ministry of Foreign Affairs' peacebuilding objectives.

[3] Afghanistan Humanitarian Fund Annual Report Page 15

RECOMMENDATIONS

- At this point, strategic investment presents a vital chance to control secondary displacement and migration as well as to sustain and stabilize populations. This directly supports Dutch Ministry of Foreign Affairs migration and host community priorities.
- Investing in mental health and psychosocial support services is essential and can save lives. It also delivers peacebuilding returns by reducing grievances that lead to local conflict.
- Donor assistance will be essential to guaranteeing fair access for individuals living in underserved and difficult to reach locations. Targeted funding for integrated Mental Health and Psychosocial Support Services – Physical Rehabilitation programming in border provinces (Nangarhar, Khost, Herat) addresses the highest volumes of returnees and onward migration risk.
- Funding is urgently needed due to rapidly increasing health and psychosocial requirements.

ABOUT CORDAID

Cordaid is a value-based international development and emergency relief organisation, based in the Netherlands with offices in 14 countries. We work in and on fragility and support communities in their efforts to improve health care, education, food security, and justice. Where disaster strikes, we offer humanitarian assistance.

Cordaid is deeply rooted in the Dutch society with more than 260,000 private donors. The Christian values of human dignity, justice, compassion and care for the planet guide us in our work. Cordaid is a founding member of Caritas and CIDSE, and member of the ACT Alliance.

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