UNHCR
The UN Refugee Agency

VOICES OF AFGHANS WHO REMAIN IN PAKISTAN

DECEMBER 2025

Report on Ad Hoc Participatory Assessment:

Findings and Recommendations

(Assessment period: 9–16 December 2025)

UNHCR Pakistan 2025

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Summary Overview

This Participatory Assessment (PA) seeks to examine how the Government of Pakistan's Illegal Foreigners' Repatriation Plan (IFRP) for Afghan refugees and the associated deteriorating protection environment in Pakistan has affected different groups of people in the community, within the age, gender and diversity (AGD) spectrum. It also seeks to capture community-identified problems, risks, capacities, and solutions across key outcome areas; and to generate evidence to inform UNHCR and partners' protection responses, programming, and further advocacy.

In the specific context of this PA, the thematic areas focused on protection policy and law, well-being and basic needs, healthy lives, education, return and sustainable reintegration, as well as challenges currently faced with local integration. Particular attention was given to the situation of gender, ethnic and religious minorities, persons with disabilities (PWDs), and individuals with heightened protection profiles, such as human rights defenders and journalists.

This PA was conducted in the last weeks of 2025, in the deepening context of the IFRP implementation which intensified during 2025. In the second half of 2025, all Afghans in Pakistan, except those with valid visa, were considered 'illegal foreigners', and were required to repatriate to Afghanistan or face arrest and forced deportation. Additionally, in 2025, all Afghans living in Islamabad, Rawalpindi, and adjacent areas, were ordered to move out of the capital cities through relocation directives. Furthermore, 54 refugee villages were denotified in the course of the year. By December 2025, over 1.1 million Afghans had returned to Afghanistan of which 154,663 were deported and 187,547 were processed at the voluntary repatriation centres. More than 2 million Afghans have returned to Afghanistan since the start of the IFRP in 2023. In the context of the IFRP, the primary need expressed by Afghans has been access to documentation. Accordingly, UNHCR is advocating with the Government of Pakistan (GoP) to secure exemptions for individuals with heightened risk of persecution upon return and those requiring humanitarian consideration.

The participants of this assessment remained in Pakistan in December 2025 despite these contextual pressures. They described an environment characterized by intensified police checks, house raids, evictions, and deportations, generating persistent fear of arrest, detention, and forced return to Afghanistan. They further reported that the lack of valid documentation has contributed to the denial of services in hospitals and schools, as well as limited access to lawful employment and housing.

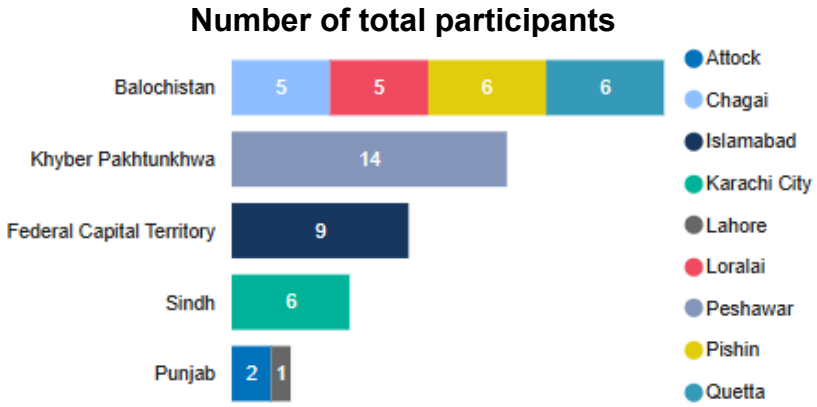
Methodology

The PA methodology was guided by UNHCR's Tool on Participatory Assessment in Operations. It was conducted by multi-functional teams (MFTs) composed of facilitators, note-takers, and interpreters (when required) from UNHCR and partner organizations. All activities follow UNHCR's ethical standards, including informed consent, voluntary participation, confidentiality, and the avoidance of any questions that could place individuals or groups at risk. All team members received training on the thematic questionnaire and data collection tools, as well as on ethical standards, confidentiality, consent, participant selection, group dynamics, facilitation techniques, and interview methodologies. Systematized findings were then consolidated and submitted by each of the MFTs via the Kobo-based UNHCR PA Tool prior to analysis and finalization of this report.

A total of 54 consultations—31 focus group discussions (FGDs) and 23 key informant interviews (KIIs)—were conducted between 9 and 16 December 2025 across the five provinces and territories. In light of the increasingly restrictive protection environment in Pakistan, a hybrid approach combining online and in-person consultations was adopted to reduce risks to their safety.

Participants' Information

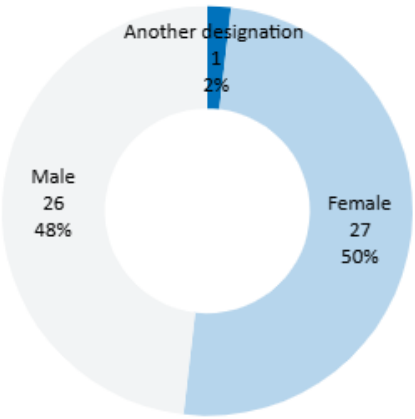
Geographical Focus



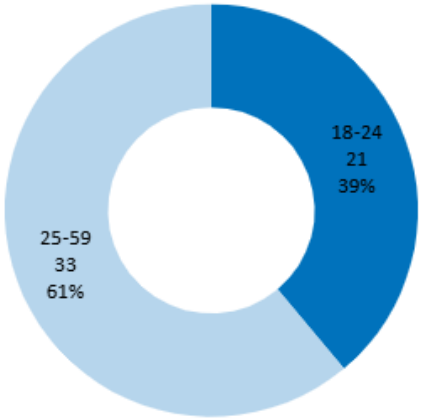
Segregation by Sex and Age Group

The PA intentionally targeted diverse age and gender groups to ensure that the voices of women, men, and young people groups were reflected.

Number of consultations by gender



Number of consultations by age group



Findings from Focused Group Discussion by Thematic Areas

Safety, discrimination and freedom of expression – Protection Policy and Law (OA3)

Given the ongoing pressure on Afghans due to the IFRP implementation, PA participants who remain in Pakistan indicated that their decision to stay is primarily driven by concerns for personal safety and the need to live free from persecution based on their beliefs, ethnicity, or past affiliations in Afghanistan. They expressed fear of returning to Afghanistan due to threats to their lives and potential persecution, particularly related to previous political, media, or civic engagement, as well as conscientious objection to military service.

Major concerns included limited livelihood opportunities, the absence of education opportunities for girls and women, and a lack of safe spaces or shelters for vulnerable individuals. The collapse of essential services in Afghanistan was also identified as a major factor influencing their decision to stay on in Pakistan. These factors collectively affect the potential for sustainable returns. Additionally, many noted that, after decades in Pakistan, their identity and sense of belonging are deeply rooted in Pakistan. Afghan children and youth, in particular, expressed stronger social and linguistic connections to Pakistan than to Afghanistan.

Key recommendations by the community

1	**Develop mechanisms for temporary protection, extended stay, or alternative legal status, including timely renewal of documentation, to reduce fear of arrest and refoulement.**

2	**Provide timely and regular updates on policy changes, rights, and available services through multiple channels including virtual—such as community meetings, trusted focal points, and digital platforms—in languages accessible to Afghan communities.**
3	**Engage with authorities to stop discriminatory practices, ensure that enforcement measures uphold international protection standards, and promote respectful treatment of refugees and asylum-seekers.**

Harmful coping strategies and child labour – Well-Being and Basic Needs (OA8)

The combined effects of the IFRP implementation, including limited opportunities for legitimate work and extortion practices have forced many families into harmful coping strategies. These include, in some cases, increased child labour—particularly where adults no longer feel safe accessing employment opportunities—resulting in boys and girls working in markets, factories, on the streets, or in domestic settings, often under unsafe and exploitative conditions; and early or forced marriages, particularly of adolescent girls, as a means of reducing household expenses or securing dowry payments. Some families rely on high-interest debt from informal lenders or shopkeepers, creating cycles of dependency and further exploitation. Others reduce the number and quality of meals, with some households skipping meals entirely, or in other cases, prioritizing adults' work-related energy needs over children's nutrition. Additionally, participants reported that individuals with few alternatives may engage in degrading or exploitative work, including survival sex. Households especially vulnerable to these pressures include those without an adult member able to work safely, female-headed households, widows, families with PWDs, and those recently evicted from their houses.

The underlying drivers of these negative coping mechanisms include legal and practical barriers to formal employment—such as the lack of work permits and fear of arrest—which push many into informal, low-paid, and often exploitative work. Limited access to cash assistance and social protection, combined with rising prices for food, rent, fuel, and basic commodities, further exacerbates the situation.

Despite these challenges, communities have identified some positive coping mechanisms and support structures. These include rotating credit schemes and mutual assistance among extended families and neighborhoods, sharing food, accommodation, and care-giving responsibilities within the community. Participants underscored the importance of cash assistance to help them cope with the most acute impacts of the current situation, as well as the need for livelihood opportunities to be adapted to the prevailing context.

Key recommendations by the community

1	**Expand cash support to vulnerable households, including those affected by disability, female-headed households and large families.**

2	**Advocate for and support access to safe, legal and dignified work opportunities for refugees, including through skills training in a safe space or virtually, home-based work and partnerships with employers who respect labour rights.**
3	**Support households engaging in child labour or early marriage, including tailored case management, conditional cash or in-kind support linked to school attendance, and family support services.**
4	**Assist community structures, including women's groups and shuras, to identify vulnerable households and coordinate local solidarity mechanisms, while ensuring these do not reinforce negative power dynamics.**
5	**Provide financial literacy, debt counselling and, where possible, small grants or loans on fair terms to reduce dependence on exploitative lenders.**

Health, including mental health and psychosocial support – Healthy Lives (OA10)

Participants reported that the IFRP implementation has created significant barriers to accessing health care, including both physical health services and mental health and psychosocial support (MHPSS). Mental health concerns are particularly pronounced, with many participants reporting anxiety, depression, insomnia, and psychosomatic symptoms linked to prolonged uncertainty, fear of deportation, and exposure to violence or harassment. Women, adolescents, and persons with disabilities highlighted the psychological burden of caring responsibilities, social isolation, and the lack of safe spaces.

Key barriers to accessing health care include the high cost of consultations, tests, and medicines for households with reduced incomes; lack of documentation, resulting in denial of services or higher non-subsidized fees; long distances to health facilities and limited transport, particularly affecting women and persons with disabilities; insufficient availability of culturally and linguistically appropriate MHPSS services, including female counsellors; and stigma around mental health, which deters individuals from seeking care. In several locations, participants noted that short-term mobile clinics or health camps organized by humanitarian actors have been highly valuable but are not regular enough to meet increasing needs.

The lack of adequate health services has contributed to the worsening of chronic illnesses, increased reliance on traditional remedies or self-medication, and delayed care for pregnant women and newborns. Untreated mental health conditions have also contributed to family tensions, domestic violence, and, in some cases, participants reported suicidal thoughts or attempts among family and community members.

Key recommendations by the community

1	**Advocate with health authorities and facilities to prevent discrimination based on nationality or documentation status and to ensure that emergency and essential care is provided regardless of legal status.**

2	**Expand partnerships with public and private health providers to offer subsidized or free services for refugees and disseminate clear information on where and how to access care.**
3	**Increase the frequency and geographic coverage of mobile clinics and outreach services, including in rural areas and neighbourhoods where movement is constrained by fear of arrest.**
4	**Establish accessible, confidential MHPSS services, including individual and group counselling, peer support, and referral pathways for severe cases, with particular attention to women, youth and persons with disabilities, including virtually where appropriate.**
5	**Provide health education on common conditions, preventive care, and available services through community workers, digital platforms, and collaboration with local leaders.**

Access to education and learning opportunities – Education (OA11)

Participants described how the IFRP and the overall protection environment have contributed to school dropouts, disrupted learning, and reduced opportunities for skills development. Communities reported that some schools have refused to enroll or re-enroll Afghan children due to lack of documentation or fear of penalties. In addition, refugee families sometimes withdraw children from school to reduce costs or because they fear arrest while travelling to and from school. Language barriers remain a challenge for some children, particularly those who have recently arrived. Girls face additional obstacles, including restrictive gender norms, safety concerns, and expectations that they contribute to household chores or income generation. The lack of accessible education for children with disabilities is also a concern, due to physical barriers and the absence of specialized support.

Participants noted that online and hybrid education options are limited by cost, poor connectivity, lack of devices, and low digital literacy. Some individuals reported that their SIM cards have been blocked and that they cannot afford to purchase Wi-Fi devices. Moreover, some expressed hesitation due to the perceived ineffectiveness of online education programmes compared to face-to-face learning. Furthermore, the limited availability of non-formal or accelerated education programmes for children who have missed years of schooling presents a significant obstacle to continuing their studies.

Key recommendations by the community

1	**Advocate with education authorities and schools to allow Afghan children to enroll and remain in school without discrimination, and to accept alternative forms of identification where possible.**
2	**Provide support for school fees, uniforms, learning materials and transport, prioritizing vulnerable households and girls at risk of dropping out.**
3	**Develop and scale up flexible education programmes, including evening classes, bridge courses, and community-based learning, to help children and youth catch up on missed schooling.**

4	**Improve access to digital devices, connectivity, and digital literacy training for students and teachers, and develop context-appropriate online learning materials and programmes.**
5	**Ensure that schools are physically accessible, provide appropriate learning aids, and train teachers in inclusive practices.**

Self-organized movements – Return and Sustainable Reintegration (OA14)

Participants noted that, while they are unable to return safely to Afghanistan, options for movements out of Pakistan to other countries remain both extremely limited and high-risk. Many said they are not actively considering third-country movement because they lack the financial means, passports, and legal documentation required to travel. While community members share information, temporary shelter, and small amounts of financial support, refugees stressed that these informal mechanisms are insufficient to enable large-scale or sustainable movement decisions. At the same time, ongoing forced returns to Afghanistan and the absence of safe, legal migration pathways are pushing some toward considering irregular routes to migrate to third countries; despite the risks, several expressed a willingness to attempt these journeys, driven by the hope of finding safety, work, and a better future elsewhere.

Irregular movement is primarily directed toward Iran and Turkey. Those interviewed reported that some youth attempted these journeys, exposing themselves to exploitation, trafficking, and other serious protection risks. Participants noted that in certain situations, families send one member ahead first, with others joining later to reduce risks—particularly for women and children—though this is usually only possible when relatives abroad can provide support. Such arrangements, however, often lead to prolonged family separation, causing emotional and social strain. It was also reported that many who attempt irregular movement ultimately face deportation back to Afghanistan. A few communities mentioned opportunities for sponsored movement or asylum in western countries, Australia, or Canada, but it was noted that these pathways are largely limited to those with family connections abroad or specific community backing.

Refugees mainly rely on informal networks and the experiences of other community members to navigate migration routes, yet this information is often incomplete and unreliable, creating additional barriers to safe movement. Overall, many Afghans feel trapped between the risks of return to Afghanistan, the shrinking protection space in Pakistan, and the dangers and unaffordability of onward irregular migration.

Key recommendations by the community

1	**Provide clear, multilingual guidance on available options for legal, regular onward movement, resettlement procedures, and awareness sessions on the dangers of irregular movement.**

2	**Advocate for more flexible, affordable visa pathways for Afghans, to reduce reliance on irregular routes and enable family-based sponsorship and safer mobility for those with ties abroad.**
3	**Provide legal status and documentation to refugees, which will reduce the necessity to undertake irregular onward movements in search of asylum, to allow people to wait for solutions in safety, and to lower exposure to arrest, fines, and extortion while other options are explored.**
4	**Provide humanitarian aid and livelihood support for refugee families remaining in Pakistan, to reduce the necessity for refugees to take irregular and dangerous journeys in order to fulfil their basic rights.**
5	**Provide safe transportation and medical support for vulnerable individuals—along with border assistance and family reunification services—to address specific risks on routes and at borders, reduce family separation, and ensure safer, more dignified movement.**
6	**Expand third-country resettlement opportunities and accelerate existing cases.**

Access to Services[1]

Access to services has been particularly challenging in the context of the IFRP in 2025. While some participants reported accessing healthcare, education, and transportation services alongside Pakistanis—often with support from landlords and neighbours—many others stated that they face difficulties accessing services alongside host communities, even when located nearby. The primary barrier is fear of documentation checks and arrest by law enforcement. For many, simply leaving home to seek services is seen as risky due to frequent house-to-house visits and street checks. These concerns are compounded by discrimination as well as economic and physical barriers. Some participants reported harassment by local residents and being questioned about their right to use services. Moreover, those without documentation endured longer waiting times and higher fees in hospitals and schools, while PWDs emphasized high transportation costs, long distances, and poor road conditions.

Key recommendations by the community

1	**Advocate with the Government of Pakistan to ensure recognition of UNHCR and its partner-issued documentation.**
2	**Scale up cash assistance and livelihoods support to help cover rent, transport, healthcare, and school fees, enabling refugees to rely on private services when access to public options is restricted.**

[1] This section is categorized under Local Integration and other Solutions (OA16)

3	**Expand community-based services and outreach directly into Afghan neighborhoods so refugees can access support without crossing checkpoints or exposing themselves to raids.**
4	**Organize awareness sessions and joint programmes for Pakistanis and Afghans—such as community dialogues, shared cultural and educational events, and youth initiatives—to reduce stigma, build trust, and ensure refugees feel safe accessing services alongside host communities.**

Findings from Key Informant Interviews

Gender Minorities (transgender)

Afghan gender minorities face pervasive harassment and discrimination linked to their gender identity, compounded by xenophobia within host communities. Moreover, the implementation of the IFRP has compounded the challenges faced by Afghan transgender minorities in Pakistan, who encounter multiple barriers in accessing basic services. While health services are ideally available, stigma and discriminatory treatment by some providers often lead individuals to avoid public facilities, pushing them toward costly private or informal care. Access to livelihoods programs and humanitarian assistance is similarly constrained, particularly when registration systems fail to recognize diverse gender identities or non-traditional household arrangements. Compared to transgender persons within the host community, Afghan transgender minorities typically have weaker informal networks and fewer connections with local organizations, limiting their access to critical information, legal aid, and safe shelter.

One participant described being routinely mocked and subjected to derogatory language. They were denied employment because of their gender identity and forced to rely on informal and degrading means of survival, including asking strangers for small sums of money in public spaces. They reported severe and long-standing psychological distress, including past suicide attempts and ongoing thoughts of self-harm, which they associated with social isolation, loss of contact with family, and persistent financial hardship. Another participant highlighted the heightened vulnerability of gender minorities to sexual exploitation and physical violence, alongside the near-total impunity enjoyed by perpetrators. One participant recounted how a man offered them money in exchange for sexual acts; when they refused, he threw hot tea on their hand, causing burns. They further reported that abuses suffered in Afghanistan—including beatings and humiliation by family members, as well as torture and ill-treatment by Taliban forces—have left them with profound fears that returning would expose them to severe violence or even death.

Key recommendations by community

1	**Advocate for the issuance of documentation that allows safe movement, reduces risk of arrest, and enables access to services while longer-term solutions are pursued.**
2	**Strengthen confidential reporting mechanisms and case management for incidents of harassment, assault and sexual exploitation, and ensure access to medical care and legal support.**

3	**Offer tailored livelihood and skills-building programs, including digital literacy initiatives, delivered in safe and accessible settings—such as home-based and online tailoring.**

Ethnic and Religious Minorities

Ethnic and religious minorities report being trapped between severe threats in Afghanistan and ongoing insecurity and discrimination in Pakistan, with their identity and faith at the core of the dangers they face. Participants noted severe sectarian tensions between Shia and Sunni in the country of origin, which contribute to serious protection risks and lack of rights by Shia in Afghanistan. Hazara Shia participants describe a general threat to life for Hazara Shias in Afghanistan, noting that the Taliban restrict their movement, prevent their children from going to school and, in some areas, stop them from going to mosques to pray. One also noted that girls from the Hazara community often go missing and Taliban forces leave Hazara families without shelter where they occupy Hazara lands.

In addition, ethnic and religious minorities reported experiencing harassment and discrimination in Pakistan on the basis of their faith. Some participants reported being turned away from private hospitals specifically because of their ethnic or religious identity. While some religious groups continue to provide solidarity and support within their communities, such as Ismailis, other ethnic or religious groups who lack such community structures face even more severe discrimination and exclusion. For example, in Karachi, Ismailis enjoy strong community support and, generally, exemption from arrest and deportation. However, some Ismaili participants also described experiencing harassment on account of their religious identity, including being subjected to abusive language directed at them and their spiritual leader. The combined impact of sectarian persecution in Afghanistan and ongoing hostility, exploitation, and police harassment in Pakistan has left many ethnic and religious minorities feeling that they have no safe options, contributing to deep distress and depression.

Key recommendations by community

1	**Expedite case processing and documentation for individuals with credible, well-founded fear of persecution due to religion, ethnicity, political profile or gender-based activism.**
2	**Refrain from returning people who face serious risks back to Afghanistan, including women from minority communities, former staff of international institutions and visible activists.**
3	**Increase resettlement quotas and other third country legal pathways and ensure prioritization of women and men from ethnic and religious minorities with high protection risks, as well as athletes, human rights defenders, community leaders and those associated with international organizations.**
4	**Advocate with authorities and service providers to prevent discriminatory fees, unlawful evictions and abusive treatment in housing, health and education systems; establish safe channels for reporting abuses.**

5	**Facilitate access to safe, documented work for minority refugees, including through recognition of professional qualifications (such as fitness training or coaching), and provide tailored livelihood support to reduce exposure to exploitation.**
6	**Provide targeted outreach on available services, legal procedures and psychosocial support, using channels accessible to minority communities, including women with limited mobility.**

Persons with Disabilities (PWDs)

PWDs described profound barriers to accessing services, livelihoods, and dignified living conditions. The current IFRP context has exacerbated the challenges already facing the community. Participants emphasized that families with PWDs face severe financial hardship, leading to harmful coping strategies such as taking on high-interest debt, resorting to child labour of family members, skipping meals and medication, and accepting degrading or unsafe temporary work. Many PWDs cannot move independently and lack access to assistive devices such as wheelchairs or crutches, while transport costs remain prohibitively high. As a result, they are largely confined to their homes, dependent on family support, and unable to participate in work, social life, or self-advocacy. Women with disabilities highlighted additional gender-specific barriers, including reliance on male relatives for mobility and near-total exclusion from employment opportunities.

Access to education is also severely limited, as assistive devices are unavailable or unaffordable. Girls and women with disabilities have very limited access to formal schooling or vocational training. Online education is generally not feasible due to high costs, poor connectivity, and limited digital literacy. Furthermore, negative attitudes and stigma within segments of the host community undermine the confidence of PWDs and further restrict their participation in public life.

Mental health concerns are widespread. Several participants reported severe anxiety, insomnia, constant overthinking, and psychosomatic symptoms linked to fears of arrest and deportation under the IFRP, as well as the stress of limited freedom, poverty, and caregiving responsibilities. However, access to consistent MHPSS and specialized healthcare remains limited due to distance, poor road conditions, lack of transport, the absence of accessible infrastructure such as ramps, and high transport costs. Fear of arrest and detention further discourages individuals from travelling to health facilities, even when transport is available. While medical and MHPSS services are appreciated, participants noted that these services are not provided on a sustained or regular basis.

Most PWDs consider return to Afghanistan impossible under current conditions, citing the lack of livelihood opportunities, the absence of education for girls and women, and the nonexistence of dedicated support structures for persons with disabilities. Although some refugees explore irregular movement to neighbouring countries such as Iran, PWDs generally view such journeys as physically unfeasible or excessively risky.

Key recommendations by the community

1	**Expand multipurpose cash assistance for households with PWDs and develop home-based livelihood opportunities, complemented by skills training that does not require long-distance travel or physical strain.**
2	**Deploy mobile health and MHPSS teams to conduct regular household visits to families with PWDs, and establish permanent, accessible services in key locations equipped with ramps, adapted facilities, and priority access for persons with disabilities.**
3	**Provide wheelchairs, crutches, and other assistive devices, and support simple home and community adaptations—such as ramps and accessible washrooms—to enhance mobility, independence, and dignity.**
4	**Establish home-based and community-based education options for children and youth with disabilities, supply adapted learning materials, and train teachers in inclusive approaches.**
5	**Facilitate access to documentation and legal stay for PWDs and their families, advocate for reduced harassment at checkpoints, and ensure that enforcement measures systematically take disability-related needs and vulnerabilities into account.**

Persons with high-risk professions

Afghans with professional affiliations that may place them at risk upon return to Afghanistan—including journalists, human rights activists, and former public prosecutors—reported high levels of stress and anxiety linked both to their profiles and to the broader environment under the IFRP. Several participants described persistent fear of arrest, harassment, and deportation, both in Pakistan and if they were to return to Afghanistan.

Many reported that their social and livelihood activities are severely constrained. A former public prosecutor, running a tuition centre noted that most students have stopped attending due to fear of arrest and financial difficulties. Similarly, an activist working with Afghan women highlighted declining participation in training activities, driven by concerns about harassment while travelling. One journalist reported relying on antidepressant medication due to the pressure of the current situation and the suspension of resettlement processing.

In addition, blocked SIM cards and limited internet access restrict participants' ability to work, stay informed, and engage in advocacy or educational activities. Participants also highlighted increasing hostility from segments of the host community. One noted that following the IFRP, many Pakistani residents are hesitant to associate with Afghans, affecting social lives. At the same time, some activists reported strong support from parts of the host community, including neighbours and local networks, particularly in certain urban areas where positive relations persist.

The Afghans with professional affiliations who participated in the sessions expressed a strong unwillingness to return to Afghanistan under current conditions, emphasizing that their past or ongoing roles as journalists, human rights defenders, or public officials would expose them to targeted threats and persecution. Several refugees indicated that using official border crossings could expose them to identification and possible reprisals. Some expressed a desire to relocate to third countries, including through resettlement or other safe

pathways, but reported that such opportunities are extremely limited due to their lack of financial and legal means.

Key recommendations by the community

1	**Advocate for the exemption of individuals with high-risk profiles from arbitrary arrest and deportation and ensure the provision of temporary stay permits.**
2	**Expedite the processing of asylum and resettlement cases or other legal pathways, with particular priority given to individuals with high-risk profiles.**
3	**Facilitate continued community activities and information sharing by supporting access to internet connectivity, digital devices, and basic operational costs.**
4	**Maintain and expand accessible MHPSS services to address the high levels of stress, anxiety, and depression reported among activists and the communities they serve.**

Top three priorities by the community

As part of the exercise, participants were invited to reflect on which issues mattered most to them among the topics discussed. The following graphs present the top priorities identified by different groups, including all participants, gender groups, PWDs, minorities (gender, ethnic, and religious), and individuals with high-risk profiles.

Top 3 priorities – All

Access to Services (27%)	Healthy Lives (27%)	Education (17%)

Top 3 priorities – Male

Access to Services (29%)	Healthy Lives (24%)	Protection Policy and Law (16%)

Top 3 priorities – Female

Healthy Lives (29%)	Access to Services (28%)	Education (18%)

Top 3 priorities – Persons with Disabilities

Healthy Lives (33%)	Access to Services (29%)	Well-being and Basic Needs (10%)

Top 3 priorities – Minorities (gender, ethnic and religious)

Access to Services (30%)	Education (25%)	Healthy Lives (19%)

Top 3 priorities – High-risk professionals

Access to Services (33%)	Protection Policy and Law (25%)	Education / Healthy Lives (17%)

Participating Partners

- INSPIRE Pakistan
- Society for the Protection of the Rights of the Child (SPARC)
- International Medical Corps Pakistan (IMC)
  Drugs and Narcotics Education Services for Humanity (DANESH)
- Balochistan Rural Support Programme

Remaining Afghan refugee students are interacting with UNHCR staff. © UNHCR/ Waseem Ahmed

VOICES OF AFGHANS WHO REMAIN IN PAKISTAN

DECEMBER 2025

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Cover photo: Afghan refugees are voluntarily returning to Afghanistan since the IFRP phase 3 due to the fear of detention, arrests or deportation.
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