SITUATION UPDATE

- Due to the upcoming elections, five health facilities are used as polling centres, which will negatively affect the provision of services.

- In May, ten attacks on healthcare were reported. These included closure of six health facilities, three incidents of looting of equipment and supplies, one health worker killed and one more detained by AGEs.

- Health Cluster partners are responding to a drought that affects the northern region. Up to 2.2 million people may be affected by food insecurity.

- Health cluster partners are also responding to a flash flood in Badghis and neighbouring provinces.

- The top two communicable diseases in the country during May were ARI (cough and cold and pneumonia) with 419,321 cases and Acute Diarrheal Diseases with 237,868 cases.

- In 2018 so far, a total of 43 cases of Crimean-Congo hemorrhagic fever (CCHF) (5 deaths) and 157 measles outbreaks (2,005 cases and 12 deaths) have been reported in 31 provinces.

- Health Emergency Risk Assessment was completed in 35 districts of the northern region and started in 38 districts of south eastern region.

- Population movement and returnees from Pakistan and Iran placed increased demand on health services. A total of 453 families (2,049 individuals) of documented and undocumented returnees returned from Pakistan and Iran through Spinboldak Gate and Milak border. In addition, 373 Families (1,474 individuals), and 24,763 single individuals were deported from Iran and Pakistan through the same gates.
In May, 49 outbreaks were reported: 24 CCHF, 18 measles, 3 chicken pox, 1 scabies, 1 mass psychogenic, 1 rabies and 1 pertussis outbreaks.

Out of the 43 CCHF cases, 5 deaths were reported.

So far in 2018, a total of 157 measles outbreaks (2,005 cases and 12 deaths) were reported from 31 provinces. Highest number of measles cases were reported from Badghis (216 cases), Zabul (179 cases), and Paktika (170 cases) provinces.

Six health facilities were closed, depriving population from access to healthcare services.

Population movement increased demand for emergency healthcare to IDPs, returnees and host communities.

Improved trauma care is needed in response to the increased insecurity.

Rehabilitation and psychosocial support is needed to support victims of conflict-related trauma.

Lack of female staff leads to lower utilization of health facilities by women.

A recent monitoring visit to Ghani Khail District Hospital at Torkham Zero Point found that the facility had inadequate RMNCAH training for key staff, lack of ambulances, inadequate space for mother and child health and lack of female doctors.

In Nimroz province, returnees and deportees at Milak Zero Point don’t have access to basic health services as there is currently no active health facility.

Trauma care service equipment was distributed to Farah Provincial Hospital and Shindand District Hospital.

Medical kits and loose medicines were distributed to two national hospitals and 17 provincial hospitals.

Replenished regional warehouses of two WHO sub offices (Bamiyan and Samangan).

43 female doctors and midwives were trained on Basic Obstetric Emergency Newborn Care (BEmONC). 37 female doctors and midwives were trained on Integrated Management of Newborn and Childhood Illness (IMNCI).

A total of 49 staff from 12 central and south east provinces including PPHD, BPHS implementing NOGs and ANDMA staff received a 2-day training on Emergency Risk Assessment Methodology.

Health Cluster and its partners are responding to a drought that affects the northern region of the country. Up to 2,2 million people may be affected by food insecurity. Health cluster partners are also responding to a flash flood in Badghis and neighbouring provinces. Number of attacks on healthcare incidences has gone up this year compared to the year previous.

Cluster partners have provided 132,453 consultations this month (52% women and girls). Trauma cases have increased by 12% this month compared to the same period as last year.

The second standard allocation of the Common Humanitarian Fund strategy is in process and to be announced. Health cluster partners including WHO may prepare their proposals.