



World Health Organization

Situation report
04-2018

AFGHANISTAN
Emergency type: Protracted emergency

Community health worker's first aid training in Kunduz



1,6 M
AFFECTED



9,674
DISPLACED



71,279
REFUGEES



14
TRAUMA KITS



38
OUTBREAKS

KEY FIGURES

394	WHO STAFF IN THE COUNTRY
16	HEALTH CLUSTER PARTNERS
1,6M	TARGET POPULATION
HEALTH FACILITIES	
3,911	TOTAL NUMBER OF HOSPITALS
4	HEALTH WORKERS KILLED
1	HEALTH WORKERS ATTACKED
OTHER	
20	MEASLES OUTBREAKS
234,169	BENEFICIARIES
30	IEHK BASIC KITS
3	IEHK SUPPLEMENTATERY KITS

SITUATION UPDATE

In April, drought and food insecurity in large part of the country raised concern along with ongoing conflict and mass population displacement. 1 million are at risk of life-threatening food insecurity.

On April 30, two blasts killed nine journalists and many other civilians. Other explosions occurred across the country injuring and killing many in April.

Active fighting resulted in internal displacement, some IDPs being in dire need of potable water, food and health services. Population movement and returnees from Pakistan and Iran place increased demand on health services.

Four health workers were killed, and there has been an increase in the number of closed health facilities across the country, resulting in reduced access to health services to millions of people.

Cases of measles continue to rise with more than 150 reported outbreaks and more than 2,000 cases reported in the first four months of 2018. In addition to measles, major disease outbreaks included Crimean-Congo Haemorrhagic fever (8) and pertussis (4).

Routine immunization was banned in several health centres at Watapur district in Kunar province.

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Public health concerns

- Population movement increased demand for healthcare to IDPs, returnees and host communities.
- Measles outbreaks were reported in 31 provinces.
- Closure of health facilities due to insecurity has left many millions of people with reduced access to services. Attacks on healthcare are also increasing. Risk of mass casualty incidents was especially high in Urozgan and Helmand. A blast killed 9 journalists 30. April.
- Drought continues to affect up to 2 million people. 1 million are at risk of life-threatening food insecurity.

Health needs, priorities and gaps

- Emergency healthcare for population displaced by conflict and natural disaster.
- Prepositioning of medical and trauma kits and supplies to support ongoing health emergencies.
- Two new Sub Health Centres are needed in Kunar and Nangarhar to support underserved and hard to reach areas.
- 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.

WHO action

- Intreragency Emergency health kits and Trauma A+B kits and medicines were distributed to 15 provincial hospitals. Two diarrhoea kits distributed to areas affected by flash floods.
- WHO supported National Disease Surveillance and Response system in the east by establishing and assisting 73 sentinel sites.
- 129 doctors and nurses were trained in first aid. 139 community health workers in Kandahar were trained on sexually transmitted diseases, management of acute malnutrition and gender-based violence in emergencies.
- Mass Casualty Management (MCM) workshop was conducted in Nimroz and Kandahar for 82 hospital and ministry focal points.
- Construction of Mirwais Regional Hospital infection ward extension was started. WHO also provided the hospital a trauma kit for emergency and mass casualty incidents.
- Polio vaccination campaign targeted around 6 million children in high risk districts.

Health cluster

Health Cluster supported 234,169 beneficiaries (60.7% female) in April. Trauma care services provided by partners continue to increase. In total during April, partners provided a total of 4,785 consultations on trauma care, including emergency trauma care to the victims of the blast in Kabul on April 30.

Drought contingency plan is finalized and the Humanitarian Response Plan will be updated to reflect the increased demand for humanitarian response from the drought affected population. Health Cluster will support the intercluster Whole of Afghanistan Assessment to be conducted later in the summer.

WHO is grateful for the continuous support of our generous donors: USAID, ECHO, CHF, Japan, Republic of Korea, CERF

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