AFGHANISTAN: Earthquakes in Herat Province

Health Situation Report No. 10 20-26 October 2023





SITUATION UPDATE

Highlights

Series of earthquakes

hit Herat Province in western Afghanistan between 7 and 15 October 2023.

As of 19 October:

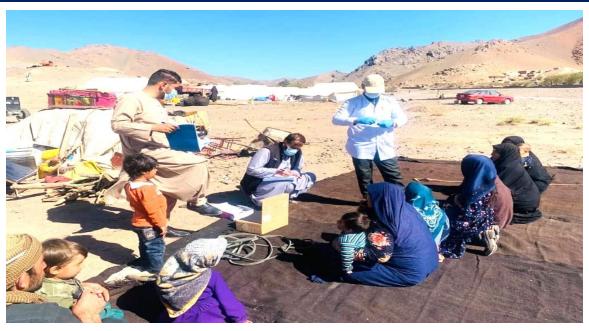
- **1,482** deaths
- **2,100** injuries
- **3,330** homes destroyed
- 40 health facilities damaged

Around **43,400** people are directly affected across six districts: Injil, Kushk/Rabat-e-Sangai, Zindajan, Gulran, Herat and Kohsan of Herat Province.

An estimated **114,000** people are in need of humanitarian assistance.

Health Cluster reached **36,709** people in highly affected districts.

Health Cluster appeals for **US\$7.9 million** to cover life-saving health services in the next six months.



WHO is working with the National Disease Surveillance & Response (NDSR) team to enhance preparedness for disease outbreaks such as measles, acute respiratory infections (ARI), acute watery diarrhea (AWD) and COVID-19.

Overview:

The three major earthquakes and multiple aftershocks that struck Herat province in Western Afghanistan between 7 and 15 October directly affected 43,400 people, with almost 23% being children under the age of five. Significant damage was reported in six districts: Injil, Kushk/Rabat-e-Sangai, Zindajan, Gulran, Herat and Kohsan. The reported casualties include at least 1,482 deaths and more than 2,100 injuries.

The displacement of people and overcrowding in temporary shelters, as well as the harsh winter, could potentially increase health risks for already vulnerable communities and could lead to increase in incidence of communicable diseases and other outbreak-prone diseases.

In coordination with local authorities, WHO and Health Cluster partners have intensified emergency response efforts to provide critical health assistance to those in need. By October 23, there have been 36,709 individuals reached across multiple districts.

Due to continued displacement, health-related needs of the people are growing, including for primary health care, trauma care and rehabilitation, mental health and psychosocial support, and maternal and child health.

The Health Cluster faces an increasingly pressing challenge. The multi-sectoral Herat Earthquake Response Plan targets approximately 114,000 people living in high-intensity impact areas (MMI 6+), with 48% being children, including 27.2% who are children under the age of five.

An estimated US\$7.9 million is urgently needed by the Health Cluster to reach 114,000 people in need of immediate health assistance for the next six months. Additional funds are required to reconstruct and rehabilitate almost 40 damaged health facilities.

EMERGENCY RESPONSE

Health Cluster Coordination

- Since the onset of the crisis, 10 coordination meetings, including one joint Health and Nutrition Clusters meeting, have been conducted.
- The Regional Health Cluster Coordination Team participated in Inter Cluster Coordination Group (ICCG), Operational Coordination Team (OCT) and Emergency Preparedness and Response (EPR) committee meetings.
- The Health Cluster Coordinator, along with the regional health cluster focal points, visited the areas affected by the earthquake, participated in meetings with the health partners and met with the leadership of Provincial Health Department, Herat Regional Hospital and Sakena Yacoobi Hospital to ensure comprehensive and coordinated emergency response.
- By 23 October, WHO and Health Cluster partners have reached 36,709 individuals across multiple districts: Zindajan (27,056), Herat City (4,167), Injil (3,078), Kohsan (1,270), Kushk (822), and Gulran (316). These services include the following:
 - 30,437 people provided with primary health care (PHC), communicable disease outbreak response activities, and mental health and psychosocial support services (MHPSS)
 - 2,552 individuals received trauma care and rehabilitation services
 - 3,720 people received different kits, including mama and baby kits, dignity kits, and individual clean delivery kits
- WHO participated in Emergency Preparedness and Response (EPR) meetings on 21 and 23 October which were chaired by PPHD and attended by UN agencies and international and national NGOs. Key points discussed:
 - To prevent duplication, the number of health teams will be reduced from 24 to 8 (4 WV, 2AADA,2 OCCD). These 8 teams will be in Zindajan (2), Kohsan (2), Robat Sangi (2) and Injil (2). These teams are expected to provide a full package of Basic Package of Health Services (BPHS), including OPD-MAM and OPD-SAM.
 - Improve Water, Sanitation and Hygiene (WASH) facilities in healthcare facilities.
 - Implement supportive supervision by PPHOs and NGOs.
 - Include Targeted Supplementary Feeding Program (TSFP) in clinics where it is currently not available.
 - Shift temporary clinics, such as mobile health teams and nomad clinics, to their permanent duty stations.
 - Improve the immunization system, especially ensuring that vaccinators have access to vaccines.



Provision of primary health care services to the earthquake affected people - Credit IRC

Health Facility Situation

- Based on assessments conducted, 40 healthcare facilities have been damaged in Herat City and 13 surrounding districts (Injil, Guzara, Herat city, Zindajan, Gulran, Kushk/ Rabat-e-Sangai, Ghoryan, Karokh, Kohsan, Obe, Pashtun Zarghun, Kushk-e-Kohna, and Farsi). The damage encompasses 35 primary health care (PHC) facilities and five hospitals: Herat Regional Hospital, Herat Maternity Hospital, Sakena Yacoobi Hospital, and Ghoryan and Golran District Hospitals.
- WHO conducted the assessment of damages to the building structures of Herat Regional Hospital, Maternity Hospital, Sakena Yacoobi Hospital, Karnil Basic Health Center (BHC) and Kushk/Rubat-e-Sangi Comprehensive Health Center (CHC) for rehabilitation and re-construction plans.
- To restore the functionality of the health facilities damaged by the earthquake, WHO and UNHCR initiated the installation of tents, while UNICEF is working on establishing WASH facilities. The installation of tents has been successfully completed at Herat Regional Hospital, with support from WHO.
- UNDP has initiated an assessment of the affected/damaged health facilities with the objective of implementing solarization systems and conducting minor renovations.



Tents have been set-up by WHO outside the Herat Provincial Hospital and other health facilities in Herat to provide health services, including for mental health and psychosocial support.

Trauma and Hospital Care

- There have been 876 injured patients received at the Herat Regional Hospital. From 20 to 25 October, there have been no new referrals of injured patients from Herat city and districts. Currently, no trauma/injured patient is admitted in Herat Regioal Hospital.
- WHO has provided 11,000 liters of fuel for functioning of 18 ambulances for a month and support the Herat pre-hospital referral and ambulatory service.
- Herat ambulance staff actively participated in rescue and pre-hospital referral healthcare for earthquake victims and transferred 1480 patients and 524 dead bodies.
- Trauma-related activities during the reporting period included the assessment of the emergency unit, operation theater, surgical IPD, blood bank, and visits for ambulance centers.
- In line with the commitment, WHO has ensured sufficient emergency supplies in both the central stock in Kabul and the regional stock in Herat to effectively respond to emergencies. Additionally, WHO team is actively involved in activities such as tent distribution, coordination, monitoring, trainings, and providing consultation to the regional hospital and other stakeholders.

Primary Healthcare Service Provision

- As of 26 October, a total of 39 health teams have been mobilized to 35 earthquake-affected villages in Gulran, Herat City, Kohsan and Zindajan districts, providing primary health care and MHPSS services. These deployments were made possible with the support of 11 Health Cluster partners, including World Vision (10), IRW (5), AADA (5), CARE (4), WHO/OCCD (4), AFGA (3), IOM (2), IRC (2), UNICEF/OHPM (2), OHW (1) and WASSA (1).
 - In Zindajan district: 19 health teams were deployed to Koshkak, Mahal Wardakha (Karnal), Sia Aab, Kajlal, Chahak Mirandaziha, Cheshmah, Sar Baland, Cheshma Ghori, Sanjab, Lakasang, Qala-e-Turk, Asyabadk, Butan, Nayeb Rafi, Ghar Mooshak, Qasr-e-Shirin, Ahamadabad, and Zghzalak villages
 - In Khosan district, one health team was established in Ahmadabad village
 - in Gulran district, one health team was established in Butan village
 - In Herat City, 18 health teams were deployed
- In the past seven days, the assigned Mobile Health Teams (MHTs) have conducted a total of 17,601 consultations. It is important to note that all trauma cases have been successfully treated and discharged. Below are the details of services provided by MHTs:

Total Consultations	17601
Others	10254
Death	0
Refer out	110
Nutrition	189
Child Vaccination	77
Women Vaccination	180
Institutional delivery	15
MCH (ANC-PNC FP)	1984
IMCI	1891
PSC	2355
Dressing / Trauma	546

Mental Health and Psychosocial Support (MHPSS)

- Action Against Hunger (AAH) continues to deliver MHPSS services to the affected communities via a toll-free hotline (753).
- WHO has deployed MHPSS experts to engage in capacity-building activities, provide technical assistance including technical supervision, and coordinate the MHPSS Technical Working Group (TWG) to leverage the efforts of the partners providing MHPSS services.
- WHO has started the MhGAP training for 30 doctors to support management of patients with mental health conditions.
- UNDP is providing MHPSS services to 100 households affected by the earthquakes in Herat province.

Disease Surveillance/Potential Diseases Outbreak Prevention & Response

- WHO is working with the National Disease Surveillance & Response (NDSR) team to enhance preparedness for potential communicable disease outbreaks such as measles, acute respiratory infections (ARI), tetanus and acute watery diarrhea (AWD).
- Five WHO-supported surveillance support teams (SST) have been deployed in Zindajan district for active surveillance in affected villages since 9 October.
- By 25 October:
 - 2,296 ARI cases, 475 AWD cases and one suspected measles case have been reported
 - 316 suspected cases of COVID 19 were tested (99 RDTs and 217 PCR samples) in Herat Regional Reference Laboratory). Of these, 27 PCR samples, including 1 RDT, tested positive for COVID-19, showing case positivity rate of 12.4%
 - 6 RDTs were conducted for AWD cases, all were negative
- To prevent measles outbreaks among the earthquake-affected areas, vaccinators are assigned at MHNTs to administer one dose of measles vaccine to all children under 10 years of age. To date, MHTs have vaccinated 56 children under 10 years.

Table: Detection and reporting of infectious disease cases in Zandajan district, Herat province (as of 25 October 2023)

Districts	Diseases	Number of reported cases During 9-25 Oct 2023						
		Male		Female		Total		
		<5 Vacus	>5	<5 Vac:re	>5	Male	Female	Total
		Years	Years	Years	Years			
Zinda Jan	ARI	431	660	370	835	1091	1205	2296
	Measles	1	0	0	0	1	0	1
	AWD	110	122	111	132	232	243	475
	Tetanus	0	0	0	0	0	0	0



Disease surveillance and rapid response teams are on the ground to conduct case investigation, contact tracing and provide case management support, including for cases of COVID-19.

Reproductive Maternal and Child Health

- In collaboration with the Afghanistan Society of Obstetrics and Gynecology (AFSOG), WHO has deployed a dedicated team of 21 female healthcare workers from Kabul to Herat. The team comprised 11 midwives and 10 medical doctors, including one OB/GYN. They have completed their deployment on 24 October.
- The team has been deployed to the affected villages of Kashkak, Cheshmah Ghori, Sia Aab, and Sar Baland, extending reproductive maternal and child healthcare services at health facilities operated by the health partners, including IOM, OCCD, OHPM, AADA, IRW, and WVI.

Risk Communication and Community Engagement (RCCE)

- WHO is working with a Ministry of Public Health (MOPH) team on assessing the RCCE needs in earthquake affected communities in Herat and will be implementing interventions to reach people with life-saving health information to protect themselves from outbreak-prone diseases. The team visited six villages in Zindajan and Injil districts in addition to having consultation meetings with Herat Provincial Public Health Directorate as well as health partners and communities.
- Awareness campaigns by WHO, MOPH and health partners will be conducted as soon as the information needs assessment is completed.
- WHO conducted RCCE training with 12 participants from Ghor, Badghis, Farah and Herat provinces and also organized a one-day RCCE social listening focus group discussion with 15 participants from seven districts, including the capital of Herat province.



WHO is provides technical support in conducting RCCE needs assessment that will be critical in community engagement interventions for earthquake-affected areas.

Prevention of Sexual Exploitation and Abuse (PSEA)

To raise awareness of implementing partners, there have been three batches of training sessions for health workers and responders on the prevention and response to sexual exploitation an abuse. Around 50 participants have been trained.

Operational Support and Logistics

- WASH cluster partners have currently covered over 36,793 people with safe drinking water and for domestic use by chlorinated water trucks. Worth noting that only 24,082 people have received full WASH packages.
- Emergency latrines have been installed for 15,050 people while 300 families have benefitted from emergency bathing facilities.
- 3,090 families have received hygiene kits along with hygiene promotion.

Funding Needs

- WHO's immediate response to the Herat earthquakes has been made possible through the support of the Afghanistan Humanitarian Fund and ECHO. Subsequent efforts have been made feasible by the Asian Development Bank, the World Bank, the German Federal Government, USAID and the Bill & Melinda Gates Foundation.
- As WHO and the Health Cluster partners scale up response, an appeal for 7.9 million USD was launched to
 ensure directly affected communities are provided with urgent and essential health services in the next six
 months.
- The link to the appeal is here: <u>WHO EMRO | WHO-led Health Cluster appeals for \$7.9 million to provide health services to 114,000 people most affected by earthquakes in western Afghanistan | Afghanistan-news | Afghanistan</u>

GAPS and NEEDS

- Damaged health facilities resulted in provision of health interventions in tents and temporary shelters and putting people at risk of diseases due to the harsh cold weather.
- Health care providers are facing difficulties in managing patients especially in cracked buildings. They are
 worried about collapsing buildings from aftershocks or poor infrastructure. There is a dire need to
 rehabilitate/construct the infrastructure so that comprehensive services are provided in the areas affected
 by earthquakes.
- Many people, including children, are experiencing signs and symptoms of mental health conditions such as fear, depression, anxiety, lack of sleep (insomnia), psychosomatic disorders, etc. Mental health and psychosocial support services need to be scaled up to cater to the needs of the affected communities.
- The risk of outbreaks and epidemics is high in earthquake-affected areas, including Herat city, due to
 overcrowding of people, poor hygiene and sanitation conditions. Immediate action is required in the
 provision of appropriate living facilities (shelter, WASH), medicines and medical supplies. It is needed to
 implement RCCE activities for awareness creation and sensitization among the community to take efficient
 actions for prevention of these outbreaks/epidemics.
- There is a lack of safe and suitable accommodation for volunteers and staff from humanitarian partners, hindering the ability to maintain and expand response efforts. It is urgently needed to have appropriate accommodations for humanitarian responders, volunteers and staff.

Letting people express their pain: a mental health expert's story from the field By Dr Fawzia Rahimi, Mental Health Officer at the Provincial Public Health Directorate of Herat

Two days after the first of the series of Herat earthquakes, I decided to join the response team in Zindajan district -- the epicenter of the first earthquake.

At Seya Aab village, fear has spread all over my body as I saw damaged villages. Bodies were found among the ruins for at least five days after the earthquakes. I saw a woman's half body stuck under the rubble -- she broke both hands and legs and lost five members of her family. Her daughter survived with a broken leg. The residents were traumatized, and they wouldn't eat or drink for days. They were just breathing but they seemed like dead souls.

In the neighboring Naeb Rafi, the entire village disappeared in a blink of an eye. Only a dozen people survived.

It was the first time in my life that I experienced such a deep tragedy. I felt like it's happening to me and my family. Some women told me they didn't want to live anymore because they lost their whole families. As a mother, a sister and a wife, I could never imagine the pain of losing so many members of the family, including your own child.

I want to be there for these women.



I provide psychosocial support and counseling. I let them share their stories with me. I patiently and passionately listen to them. I want to enable them to express their pain. I want them to focus on their strengths. I want them to heal.

I know it is not easy. I know it takes time. But that is the least I can do for them.



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