

Health Emergencies

KEY UPDATES:

- ◆ October saw the closure of four health facilities in the Eastern region and 35 in Urogzan province. In the Southern region, 45 health facilities were partially or completely closed, and of them 15 were later re-opened. Two health facilities were destroyed.
- ◆ Mobile health services were provided by cluster partners, but some areas were inaccessible due to insecurity.
- ◆ Ongoing conflict continued to displace families and individuals.
- ◆ A total of 298 families (1,389 individuals) of documented returnees returned to Afghanistan from Pakistan through Spinboldak gate. There was a significant decline in the number of returnees from Pakistan via Torkham border crossing.
- ◆ One polio case was confirmed in Kandahar.
- ◆ 4 suspected outbreaks (2 Measles case, 1CCHF, and 1 food poisoning) occurred in the Southern region.
- ◆ Six new cases of Crimean-Congo haemorrhagic fever (CCHF) were reported in the west region, bring the total numbers of CCHF cases to 79 in 2017. 17 people lost their lives.



In October WHO donated EHA kits and medicines to the North Eastern region.

WHO Afghanistan

PROGRAMME ACTIVITIES AND ACHIEVEMENTS:

- ◆ WHO delivered emergency kits and medicines to Kunduz.
- ◆ WHO conducted a supervisory and monitoring visit to Nimroz province, mainly focused to design a health facility for undocumented returnees and deportees.
- ◆ Orientation on use and procurement of equipment was conducted for Wazir Akber Khan, Ibn Sena, and Indra Ghandi hospitals to increase their level of preparedness for mass casualties.
- ◆ WHO donated a cholera kit to Nimroz province to prepare for any emergency situations with a lack of access to adequate drinking water.
- ◆ A total of 407 documented returnees were provided primary health services by UNHCR encashment center health facility. Medicines were provided by WHO.
- ◆ In the Southern region, 34,952 returnees received outpatient services and 6,874 children received vaccination (OPV, IPV & measles).
- ◆ WHO provided trauma care service instruments to Nangarhar public health directorate to be used in Fatimatul Zohra public hospital and Nangarhar regional hospital.
- ◆ Initial preparations were made for the implementation of 2nd phase of Health Emergency Risk Assessment, including high level meetings with MoPH and ANDMA.



WHO also donated medical equipment to Fatimatul Zahra Provincial Hospital.

A. Alkozai / WHO



WHO supported the provision of orthopedic services by a specialist at the Zabul public hospital financially.

WHO Afghanistan





Health Emergencies

PUBLIC HEALTH RISKS AND CHALLENGES:

- ◆ Insecurity continues to affect health services and cause displacement. Limited access to some areas continues to hamper response to outbreaks.
- ◆ Risk of mass casualty incidents was especially high in Urozgan and Helmand provinces.
- ◆ High probability of vaccine preventable or epidemic disease outbreaks, such as dengue fever and polio. Likely increase of malaria cases due to the seasonal trend and history of the disease.
- ◆ Low coordination of health stakeholders and lack of human resources at health facilities, especially female staff.

FOCUS AREAS:

- ◆ Improving reporting and early detection and timely response to disease outbreaks.
- ◆ Winterization planning and stockpiling of medical supplies in hard to reach areas.
- ◆ Strengthening needs assessment and monitoring of activities for WHO and Health Cluster partners.
- ◆ Monitoring current closed health facilities in Uruzgan and advocating for respect of healthcare under IHL.

Health Cluster Coordination:

In October, Health Cluster partners reached 107,419 beneficiaries in 58 districts in 23 provinces. Of the beneficiaries, 53,636 were women while 16,016 were girls.

Health Cluster partners have reached 29,352 IDP and 13,472 documented and undocumented returnees. 10,174 trauma cases were seen in October.

Health Cluster is supporting documented and undocumented returnees in Nimroz through Zaranj crossing with the support of CERF Underfund. Using an intercluster approach, Health Cluster partners will provide essential health services to returnees from Iran.

Health facilities in Uruzgan continue to be closed. Hopefully, ongoing negotiation with relevant parties will result in the re-opening of the very much needed health facilities.



WHO donated mass casualty management and TCS equipment to a Shajoy hospital. WHO Afghanistan



WHO designs a health facility for undocumented returnees and deportees in Nimroz. WHO Afghanistan

WHO is grateful for the continuous support to emergency humanitarian action of our generous donors: USAID, European Commission's Directorate-General for European Civil Protection and Humanitarian Aid Operations (ECHO) and the Common Humanitarian Fund



**Programme Update
WHO Health Emergencies**

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