WHO Afghanistan Monthly Programme Update: February 2016

KEY UPDATES:

- Measles outbreaks continue to be a major public health threat: 21 measles outbreaks from 13 provinces with 516 related cases and 3 deaths were reported during the first two months of 2016.
- There is an increase in the number of conflict-related incidents where health facilities and healthcare workers are deliberately targeted.
- In February there were 14 abductions of healthcare workers and four incidents against healthcare facilities, including a raid on a clinic funded by the Swedish Committee for Afghanistan and a suicide attack near a health facility in Parwan (OCHA).

PROGRAMME ACTIVITIES AND ACHIEVEMENTS:

- WHO distributed essential medical supplies and medicines to benefit 164,860 people seeking healthcare—supplies, including Diarrhoeal Disease Kit (DDK), Trauma Kits A+B, the Inter-agency Emergency Health Kit (IEHK), Supplementary Malaria Module and the IEHK Basic Unit, were delivered to provincial health directorates in Badghis, Balkh, Faryab, Kapisa, Kunduz, Logar and Parwan provinces.
- WHO supplied 11 provinces with equipment for blood banks and trained health facility focal points on the installation and use of supplies and equipment.
- WHO is supporting the reconstruction of Momand Dara comprehensive health centre in Kunar province—the health facility was badly damaged in the earthquake that struck Afghanistan on 26 October 2015.
- Support to a measles awareness campaign provided by WHO in Nangarhar province, targeting areas with low immunization coverage to reach more children with life-saving vaccines.

Capacity Building Activities in February:

- An Emergency Preparedness and Response (EPR) refresher training for 57 EPR committee members from 8 provinces.
- WHO conducted a training on Public Health in Complex Emergencies (PHCE) in Kabul for public health managers from all 34 provinces, facilitated by the Asian Disaster Preparedness Centre (ADPC).
- WHO conducted a training of trainers (ToT) on Water, Sanitation and Hygiene (WASH) in emergencies for 73 environmental health staff from 10 provinces.

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PUBLIC HEALTH RISKS AND CHALLENGES:

- 23 health facilities remain temporarily closed due to insecurity in Nangarhar, Kandahar, Helmand, Paktia, Uruzgan and Zabul provinces, hampering access to healthcare for 312,130 people.
- Measles outbreaks are reaching an epidemic status after a nationwide measles vaccination campaign, posing a serious threat to public health in Afghanistan.
- Increased attacks on health facilities and health workers, including abduction of health workers and indiscriminate attacks on ambulances.
- Continuing mass casualty incidents require serious efforts for strengthening capacity building on mass casualty management and trauma care.

KEY MESSAGES:

- All parties to conflict must abstain from actions that place healthcare workers or health facilities at risk.
- It is crucial to have a national dialogue and reach consensus on preventing attacks on health service providers.
- More resources must be allocated for strengthening mass casualty management capacity in all high-risk provinces.
- A specific strategy for Afghanistan should be formulated on the control of measles epidemics for 2016.

Medical facilities, medical personnel and those who are receiving treatment, for disease or conflict-related injuries, must never be placed at risk, let alone subject to attack.

— Mark Bowden, UN Humanitarian Coordinator and the Secretary-General’s Deputy Special Representative for Afghanistan