WHO Afghanistan Monthly Programme Update: June 2016

Emergency Humanitarian Action

KEY UPDATES:

- Active fighting between government forces and anti-government elements resulted in population movements in the Kot district of Nangarhar province – 251 families have been displaced.
- Two major blast incidents caused more than 100 casualties in Kabul during June.
- Crimean-Congo haemorrhagic fever (CCHF) and measles outbreaks were on the rise this month.
- The number of reported malaria cases has increased in the first half of 2016.

PROGRAMME ACTIVITIES AND ACHIEVEMENTS:

- Household water filters, safe storage items and hygiene promotion materials were distributed to communities as part of an emergency WASH project implemented by ARCS with the support of WHO. The project reached over 41,000 beneficiaries, targeting households with pregnant and lactating women and children under 2 in provinces affected by high rates of malnutrition and diarrhoeal diseases.
- An Emergency Operations Centre (EOC) has been constructed with WHO support in the Kunduz Provincial Public Health Directorate to coordinate timely response to emergencies in the Northeastern Region.
- EOCs established in Kabul, Kandahar, Balkh and Kunduz will facilitate data collection and analysis, reporting, coordination, decision making and response before, during and after emergencies.
- Physical improvements to establish a trauma care unit and construction of two trusses in Kunduz Regional Hospital completed.
- The first phase of Health Emergency Risk Assessment (HERA) for Afghanistan has been initiated by WHO in collaboration with the Ministry of Public Health, ANDMA and other relevant stakeholders.
- Supplies provided to blood banks in 11 provinces with necessary training provided for technicians—WHO also supplied 20 electricity stabilizers and wiring extensions with high capacity electricity to enable blood banks to safely use the new equipment.
- WHO conducted a mass casualty management (MCM) simulation exercise in Kandahar for 122 community health workers, 152 staff from Kandahar Regional Hospital and 43 staff from the fire brigade and Afghan National Police.

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PUBLIC HEALTH RISKS AND CHALLENGES:

- Insecurity continues to pose challenges for healthcare providers and health centres—31 health facilities were forced to close in Nangarhar, Helmand, Kandahar and Uruzgan. This might affect an estimated 400,000 people in the provinces by depriving them from access to basic health services.
- Circulation of the wild poliovirus continues to be a concern for public health in Afghanistan—6 polio cases have been confirmed in 2016.
- Increasing notification of malaria cases might be an early indicator for the increasing risk of malaria in the country.
- Increasing outbreaks of CCHF (17), measles (15) and pertussis (10) in June could overburden the Afghan National Public Health Institute (ANPHI) in the coming months.

KEY MESSAGES:

- All children under the age of five need two drops of the oral polio vaccine every time it is offered during immunization campaigns.
- Enhancing mass casualty management skills is crucial as Afghanistan faces increasing levels of violence and conflict.
- High-level negotiations are needed for the prevention of closure of health facilities as well as improving vaccination coverage and access to health services.
- Joined efforts to control zoonotic diseases such as CCHF must be strengthened around the country.

Programme Update
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