

# AFGHANISTAN

## Returnees Response

Health Situation Report No. 7

31 January 2024

Based on available information as of 16:00 on 29 January 2024



World Health  
Organization  
Afghanistan



HEALTH  
CLUSTER  
Afghanistan

## Highlights



As of 13 January 2024, **500,200 returnees** have been received. Approximately **48% are females**.

**320,000 returnees arrived at Torkham** (Nangarhar Province) and **169,000 at Spin Boldak** (Kandahar Province).



WHO and its Health Cluster partners have reached **272,133 returnees** (98,017 women, 73,642 men, 52,409 girls, and 48,065 boys) with various health services.



WHO has requested **US\$ 10 million for six months**. To date, only US\$ 500,000 has been received, leaving a funding gap of **US\$ 9.5 million**.



*The female returnees are awaiting their medical consultations. (IRW)*

## SITUATION UPDATE

In response to Pakistan mandating deportation of undocumented foreigners, a total of 500,200 Afghans have returned to the country since September 2023. This influx, predominantly comprising forced returns, also involved a significant number of deportations. Moreover, there has been an increase in returnees from Iran compared to the previous year, with more than 87,000 Afghans returning only in December 2023.

Following the initial peak on around November 1st, the number of individuals crossing these official points of entry (PoEs) consistently decreased but remain higher than the pre-September 15th levels. During the period of December 31, 2023 to January 13, 2024, around 10,300 individuals returned, with 5,700 crossing at Torkham, Nangarhar and 3,400 at Spin Boldak, Kandahar.

The World Health Organization (WHO), in collaboration with the Health Cluster partners, has been actively mobilizing resources to deliver essential healthcare services to returnees. Between November 1, 2023 and January 27, 2024, Health Cluster partners provided health services to 272,133 returnees (98,017 women, 73,642 men, 52,409 girls, and 48,065 boys). These services encompass primary and secondary healthcare, mental health and psychosocial support, immunization, and trauma care.

In addition to a fragile healthcare system, Afghanistan has an elevated risk of polio, particularly since Pakistan and Afghanistan are the only two countries where the wild poliovirus remains endemic. In response, WHO has intensified oral polio vaccination (OPV) for returnees at the borders. Between December 17 and January 27, 2024, around 43,379 returnees received OPV in five regions (eastern, southern, southeastern, western, and central).

While the majority of returnees have begun to settle in various communities, primarily in Nangarhar, Kandahar, Kunar, Kabul, and Kunduz, the influx into these communities is straining the healthcare system, especially in remote and underserved areas where access to basic healthcare services is limited. Ensuring long-term support for these vulnerable returnees is crucial to addressing the healthcare needs of this population.

## Health Cluster Coordination

The Health Cluster has effectively coordinated health responses by leveraging collective efforts of all partners and stakeholders at national and regional levels.

- To ensure effective resource allocation and coordinated response to returnees, the Regional Health Cluster Coordinators in the south and eastern regions held bilateral meetings with the Directors of Provincial Public Health Directorates (PPHD) in Kandahar and Nangarhar provinces, as well as with the partners supporting the returnees' health response. As the number of returnees has been decreasing, it was agreed to reduce the number of health partners at both Torkham and Spin Boldak.
- Bi-weekly Migration Health Task Force meetings were held, where updates on the returnees' situation and response were provided. The Task Force also decided to conduct a joint mission to Kandahar and Nangarhar provinces to support the field health team and improve the health response, anticipating a possible rise in undocumented Afghan returnees. Furthermore, the Task Force committed to creating a guide for the border health package.
- A Multisectoral Needs Assessment is currently underway in the northeast and southeast regions to determine the immediate needs and gaps among returning individuals.



*Health Partners having a coordination meeting for the returnees' response, Takhtapul in Kandahar Province*

## Health Responses by Region

Between 1 November 2023 and 27 January 2024, the Health Cluster partners reached 272,133 beneficiaries (98,017 women, 73,642 men, 52,409 girls, and 48,065 boys), delivering health services across the six regions (eastern, southern, southeastern, western, northeastern and central). This includes 142,284 primary healthcare (PHC) consultations; 67,734 reached with health promotion activities; 22,255 provided with mental health and psychosocial support services (MHPSS); 20,454 receiving secondary health care services; 18,753 given maternal, newborn and child health services; and 653 receiving trauma care.

### 1. Eastern Region

- There are 12 Health Cluster partners – AADA, ARCS, JACK, IOM, IRW, PU-AMI, SCA, SCI, UNFPA, UNICEF, WHO, and WORLD – supporting 11 health facilities (HFs): a 20-bed emergency hospital with two ambulances; two comprehensive health centers (CHCs); two basic health centers (BHCs); one sub health center (SHC); one maternity clinic; and four mobile health and nutrition teams (MHNTs), to support and provide primary and secondary healthcare services.
- WHO has deployed one PoE public health team (eight members) at Torkham PoE. Between 21 December 2023 and 27 January 2024, around 94,777 returnees were screened for infectious diseases: 1,131 acute respiratory infections (ARI); 275 suspected COVID-19 infections; 223 acute watery diarrhea (AWD) cases; and two clinical measles cases were reported.
- Among 219 COVID-19 suspected cases tested with rapid diagnostic tests (RDTs), 20 were positive. A total of 29 samples were collected for COVID-19 PCR tests, with five confirmed as positive, and pending results for the eight samples. There were 13 samples of suspected dengue fever tested with RDT, and two suspected measles with PCR, all negative.
- There are 13 vaccination teams in Torkham PoE. Between 17 and 30 December 2023 (week 51 and 52, 2023), 4,765 were vaccinated with OPV and 492 received measles vaccinations.

## 2. Southern Region

Due to a decrease in the number of returnees, the returnee camps of Spin Boldak and Kandahar City (Rahmat Mina) were closed. In addition, a decision was made to reduce the number of healthcare facilities at the reception centers in Takhtapul district, Kandahar province, accordingly.

- Five Health Cluster partners (ADAA, IOM, SCI, UNFPA, and WHO) are providing healthcare services to returnees through four healthcare facilities, two BHC and two MHTs with one ambulance for referrals.
- A WHO-supported surveillance support team (SST) has been operated in Takhtapul. Between 21 December 2023 and 27 January 2024, 1,529 returnees were screened for infectious diseases; 115 suspected COVID-19 cases; 39 suspected dengue fever cases; 10 ARI cases; five AWD cases with dehydration, and one suspected Crimean-Congo Hemorrhagic Fever (CCHF) case were reported.
- A total of 114 RDTs were administered for COVID-19, resulting in 38 positives. Among those 38 RDT positive cases, confirmatory PCR testing was conducted, with only one case testing positive for COVID-19. Additionally, 39 suspected cases of dengue fever underwent RDTs, and one suspected case of CCHF had a PCR test performed, all of which returned negative results.
- In week 51 of 2023, a total of 28 vaccination teams were stationed in six repatriation centers in Kandahar (4), Hilmand (1) and Zabul (1) provinces. In week 4 of 2024, the number of teams decreased to 14 in three repatriation centers in Kandahar provinces, including in Takhtapul. Between 17 December 2023 and 27 January 2024 (week 51 of 2023 to week 4 of 2024), 33,048 returnees were vaccinated with OPV; 280 returnees received measles vaccines

## 3. Western Region

- The returnees from Iran who entered through Islam Qala PoE have been accommodated in temporary camps and communities in Herat and Farah provinces.
- There are five Health Cluster partners: IOM, JACK, ORCD, UNFPA, and WHO supporting the health response for returnees in Herat and Farah provinces through existing HF: one CHC, one BHC and three MHNTs.
- At Islam Qala PoE in Herat, WHO has supported the deployment of a public health team (composed of 7 members). Between 21 December 2023 and 27 January 2024, among 76,835 returnees screened, 108 suspected COVID-19 cases (18 samples were positive), 103 ARI cases, and 50 AWD with dehydration cases were reported.
- One vaccination team has been deployed in Islam Qala PoE. Between week 51, 2023 and week 4, 2024, a total of 1,377 returnees were vaccinated with OPV.



WHO-supported SST conducting screening for the returnees at Torkham PoE, Nangarhar.



## 4. Central Region

In the central region (Kabul, Kapisa, Logar, Wardak, Parwan, Panjsher, Daikundi, and Bamyán provinces), returnees have largely been accommodated within the communities.

- There are nine Health Cluster partners (AKHS, , ARCS, CAF, MdM-F, OHPM, Relief International, SCA, UNICEF and WHO) providing healthcare services at the existing static health facilities, distributing emergency medical kits, and deploying SSTs and vaccination teams.
- Healthcare services have continued to be provided at a static clinic established by PPHD in a transit camp in the Loway Baba Jan area in Kabul. The clinic offers outpatient consultations and immunizations, as well as reproductive, maternal, newborn, and child healthcare services.
- MdM-F has been contributing to the healthcare response for returnees in Kabul by extending support to Rahman Mina District Hospital and providing medical supplies for the clinic established in the transit camp.



*Provision of primary health care services to the returnees (OHPM)*

## 5. Southeast Region

Unofficial border crossings with Pakistan in the southeastern region, encompassing Paktya, Paktika, Ghazni, and Khost provinces, have been closed. There was no movement of returnees since 30 December 2023.

- The Multisectoral Needs Assessment is underway in Khost, Paktika, and Ghazni provinces to assess and identify the needs and gaps among the returning population.
- Between 21 and 29 December 2023, a WHO-supported SST conducted screenings of 44 returnees at Angor Ada PoE, Paktika Province; 18 suspected COVID-19 cases (all RDT negative) and 14 ARI cases) were reported.
- In week 51, there were two vaccination teams deployed to Angor Ada (Barmal district) in Paktika Province and Tana Sukhta in Paktya Province where 53 returnees received OPV. Between week 52 of 2023 and week 1 of 2024, only one team was deployed to Angor Ada and 55 individuals were vaccinated with OPV.

## 6. Northeastern Region

Health Cluster partners, such as AKHS, JACK, OCCD, and ORCD, are actively involved in supporting the healthcare response for returning individuals. This support includes utilizing existing healthcare facilities to provide essential health services to the returnees.

## 7. Northern Region

In Balkh and Jawzjan provinces, there are presently no active health activities for returnees as the returnee camps are currently unoccupied.

## GAPS and URGENT NEEDS

- **Assessment:** A needs assessment is required to identify healthcare needs and gaps in the areas occupied by returnees. This assessment will inform the development of suitable health interventions to support the healthcare response.
- **Provision of Healthcare Services:** The influx of returnees has heightened the demand for vital healthcare services in destination communities, particularly in rural areas. There is an immediate requirement for additional medications, medical supplies, and healthcare personnel, with a specific emphasis on recruiting female staff.
- **Community Engagement:** Although most returnees have resettled in their communities of origin, there is a necessity to improve community engagement with them in order to gain a deeper understanding of their needs, priorities, and existing gaps.
- **Funding Gap and Response Efforts:** WHO requested \$10 million for a six-month response plan, but has only received \$500,000, leaving a critical funding gap of \$9.5 million. Immediate additional funding is needed, especially considering the harsh winter season.

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