

Afghanistan

Earthquake in Paktika and Khost

Situation Report No. 10

17 July 2022

(Reporting period: from 10 to 16 July)



361,634¹

People affected



1,036²

People killed



2,949²

People injured



4,500¹

Homes affected
(partially/fully)



91³

PHC facilities provide
basic health services
in affected areas



6⁴

Hospitals accepting
referrals in the
region

HIGHLIGHTS

- A 5.9 magnitude earthquake struck the Southeastern Region of Afghanistan on 22 June 2022, devastating Paktika and Khost provinces. A 4.2 magnitude aftershock hit Giyan district in Paktika two days after.
- In the past weeks, the incidences of flash flooding increased due to the heavy rains in south-east region including Paktika and Khost provinces. Nine children died due to flash floods (six in Ghazni and three in Paktya), 14 people were injured, and close to 2,300 houses were damaged or destroyed across the four south-eastern provinces (Paktika, Ghazni, Paktya and Khost). To date, there is no information on casualties or destruction from the heavy rains in Barmal or Giyan districts in Paktika province or in Spera district in Khost province, which are the worst affected districts by the earthquake.
- During the reporting period, only 10 new earthquake-related trauma cases were received at the hospital level (six hospitals and two Comprehensive Health Centers (CHC)). However, the long-term effect on those injured is a concern. WHO continues its efforts to build national capacity for mass casualty management and enhance emergency preparedness and response and health system strengthening.
- The risk of communicable diseases, such as acute watery diarrhea (AWD)/cholera, and malaria have increased due to the fragile living conditions in the affected communities and high temperatures in summer. An upward trend of AWD cases has been observed among the affected population. From 25 June to 16 July, a total of 1708 AWD cases were newly detected in three districts (Giyan, Barmal and Spera). Among them, 14 cases were positive for rapid diagnostic test (RDT) cholera (eight from Barmal, three from Giyan, and three from Spera) to date. Those samples were shipped to the regional reference laboratory in Gardez for laboratory confirmation. The laboratory analysis is in process.
- WHO and Health Cluster (HC) partners continue providing primary healthcare (PHC) services including trauma care and mental health and psychosocial service (MHPSS). Despite all the efforts rapidly mobilized by WHO and HC partners, more funding is required to properly respond to the urgent life-saving needs of the affected people. WHO requests US\$ 6 million for three months for health and WASH interventions. US\$ 3.25 million were received, while the funding gap is US\$2.75 million.

¹ UN OCHA. (2022). Emergency Earthquake Response Plan Afghanistan

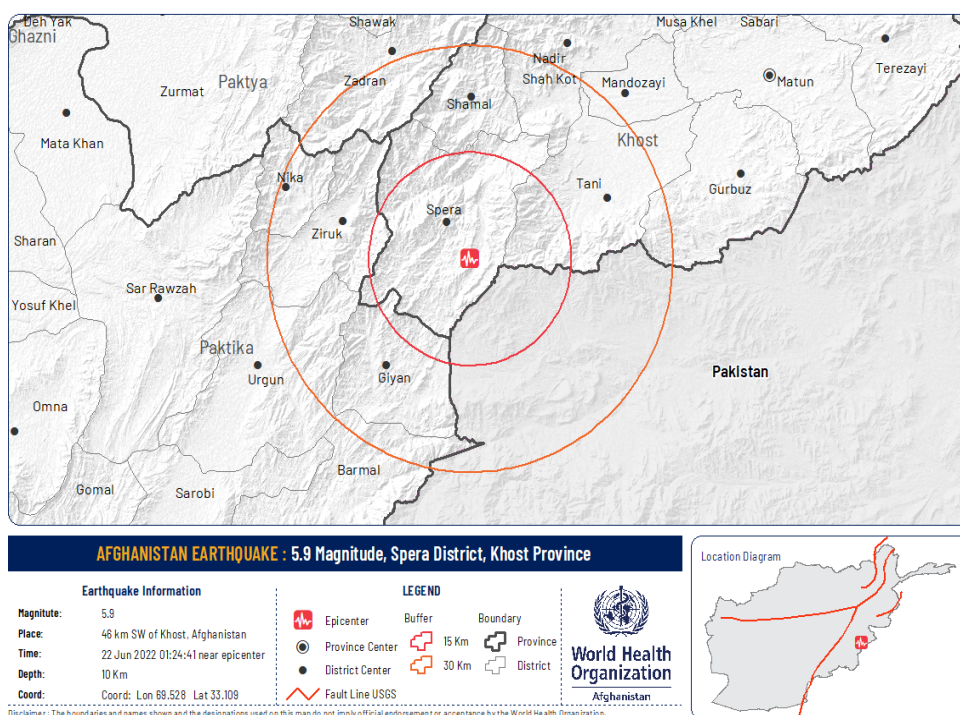
² Ministry of Public Health. (2022). Summary of Casualties in Khost and Paktika Provinces from 22 June 2022 earthquake (published on 26 June 2022)

³ Health Cluster Afghanistan. (2022). Health Facilities in (MMI V+) districts of Earthquake in Paktika and Khost Provinces (Annex 1)

⁴ Six hospitals are Paktika (Sharan) Provincial Hospital, Urgan District Hospital, and Kairkot District Hospital in Paktika province, Khost Provincial Hospital in Khost province, Ghazni Provincial Hospital in Ghazni province, and Gardez Regional Hospital in Paktya province.

SITUATION UPDATES

- A 5.9 magnitude earthquake struck the Southeastern Region of Afghanistan on 22 June 2022, devastating Paktika and Khost provinces and impacting 361,634 people in 17 districts in Paktika (10) and Khost (7) including Giyan, Barmal, Nika, and Ziruk districts in Paktika province, and Spera and Shamal districts in Khost province (Map 1).
- During the reporting period (from 10 to 16 July), only 10 new earthquake-related trauma cases were received at six hospitals and two CHCs in the affected areas. Most cases have been discharged, but some are receiving regular outpatient dressing services.
- At least 4,500 homes were damaged (fully or partially) in Paktika and Khost provinces. Still, hundreds of families are living out in temporary shelters.
- In the past weeks, the incidences of flash flooding increased due to the heavy rains in south-east region. Paktika and Khost provinces also experienced heavy rains and flash flooding, in addition to dealing with the aftermath of the earthquake. According to local reports (as of 11 July), nine children died due to flash floods (six in Ghazni and three in Paktya), 14 people were injured, and close to 2,300 houses were damaged or destroyed across the four south-eastern provinces (Paktika, Ghazni, Paktya and Khost). To date, there is no information on casualties or destruction from the heavy rains in Barmal or Giyan districts in Paktika province or in Spera district in Khost province.



Map 1: The earthquake affected area

EMERGENCY RESPONSE

Health Cluster Response

Health Cluster (HC) and WHO

- HC coordinated with the 20 HC partners to update the 4Ws in 12 districts (Annex 1&2).
- Regional HC coordinated with local partners in the flood-affected areas in Paktika and Ghazni provinces for case management of the survivors of flash floods, and provision of awareness sessions on AWD and other communicable diseases. Also, Regional HC coordinated with WASH cluster on the provision of hygiene kits and chlorine tablets to AWD cases in the south-east region.
- WHO conducted regular coordination meeting on daily basis with Provincial Public Health Directorate (PPHD) and health partners to avoid duplication and leverage the efforts of the health partners.
- Regional HC held several meetings during the reporting period with:
 - OCHA on 11 July in Khost province to discuss the 2nd multisectoral assessment in the affected area of the Eastern Region with participants from OCHA, IRC, IOM, WHO, WSTA, NRC, and HN-TPO.

- Emergency Preparedness and Response (EPR) committee on 12 July in Khost province to review the surge of AWD cases and to coordinate the response activities with the health authorities including the national disease surveillance response (NDSR) team, Khost PPHD, and PH Director as well as the HC partners (HNTPO, OHPM, HADAAF NGO and CDC).
- PPHD and OHPM on 13 July in Paktika to discuss the female medical doctors deployed by the Afghan Society of Obstetricians and Gynecologists (AFSOG). The doctors were divided into four teams and deployed to health facilities in Giyan, Barmal, Urgun and Sharan districts in Paktika province.

Health Cluster partners

- Health Cluster partners conducted several meetings at different levels:
 - The health partners delivering essential healthcare services in the affected districts attended the coordination meetings organized by the Health Cluster coordination team.
 - International Medical Corps (IMC) attended a joint stakeholder meeting with PPHD to prepare for the 2nd multi-sectoral assessment and participated in the humanitarian NGOs coordination meeting.
 - HN-TPO attended Operational Coordination Team (OCT) meetings and also conducted a health stakeholder meeting in Khost PPHD.
- OHPM (UNICEF) has provided first aid health services, general health services for outpatients, nutrition, MCH, vaccination and CDC services in Giyan and Barmal districts in Paktika province. OHPM (UNICEF) also supported referral of trauma and emergency cases to Urgun District Hospital (DH) and Sharan Provincial Hospital (PH).
- UNICEF, in partnership with HN-TPO, has distributed hygiene kits and provided health kits in Spera district in Khost province, deployed the mobile team in Spera and provided emergency health and trauma care services.
- MSF provided outpatient department service (OPD) for female patients and children under five years of age in Barmal in Paktika province.



HN-TPO conducting a meeting with community elders in Spera district, Khost province

Trauma and hospital care

- Six hospitals in Paktika, Khost, Paktya and Ghazni provinces have been operating to provide trauma care, physical rehabilitation and disability support: Paktika (Sharan) PH, Urgun DH, and Kairkot DH in Paktika province, Khost PH in Khost province, Ghazni PH in Ghazni province, and Gardez Regional Hospital (RH) in Paktya province.
- At the hospital level, including two CHCs, 10 new earthquake-related trauma cases, no death, were received from 11 – 16 July. No new earthquake-related trauma cases were received from 6 to 10 July except for reoccurring cases for rehabilitation and dressing services. A total of 7,762 trauma cases were received from 22 June to 16 July, and among them, 395 cases were fatalities (Table 1).

- To enhance mass casualty management, WHO will conduct Basic Emergency Care (BEC) course from 17 to 21 July in Gardez, to train 48 healthcare professionals from the four south-eastern provinces (Paktika, Ghazni, Paktya and Khost).

Province	Health Facility	Total OPD Cases (# of cases received 11-16 July)	Total IPD Cases	# of Orthopedic Cases (out of IPD)	# of other Surgical Cases (out of IPD)	Total Treated and Discharged (earthquake)	Total Deaths (by earthquake)	Total Referred Cases
Paktika	Paktika (Sharan) PH	84 (1)	45	16	29	129	0	15
	Urgun DH	109 (2)	30	21	9	139	0	31
	Kairkot DH	0	0	0	0	0	0	0
	Giyan CHC	4229	0	0	0	3984	245	220
	Barmal CHC	3187 (6)	0	0	0	3037	150	11
Khost	Khost PH (refer in)	14 (1)	7	6	1	22	0	1
Ghazni	Ghazni PH (refer in)	2	3	2	1	5	0	0
Paktya	Gardez RH (refer in)	30	22	15	7	52	0	3
Total		7655 (10)	107 (0)	60	47	7368	395	281
Overall Hospital Cases		7,762 (10)						

Table 1: Number of new earthquake-related trauma cases received by healthcare facilities between 22 June and 16 July 2022

- Health Cluster partners are providing trauma care through primary healthcare facilities (Annex 1&2).
- Two health camps are functioning through the joint efforts of WHO, UNICEF, OHPM, MSF, AIMA, and ARCS in Giyan and Barmal districts in Paktika with more than 100 healthcare workers (HCWs). PHC services (incl. MHPSS service and physical rehabilitation) are provided until the end of July. Two ambulances deployed by EMERGENCY NGO are stationed in those two camps.
- EMERGENCY NGO established a BHC in the camp area in Barmal, in cooperation with other agencies. 537 primary health care consultations were performed during the reporting period.
- In collaboration with Emergency NGO, MSF has set up two tents for AWD case management in Barmal district, Paktika province where MSF supports female patients, and EMERGENCY NGO supports male patients.



Trauma case provided by OHPM at Paktika Provincial Hospital, Paktika

Vaccination

- For the earthquake-affected areas, the micro plan of measles outbreak response has been developed, targeting 125,267 children between 6 months and 14 years old in six districts in Paktika province (Sarobi, Barmal, Giyan, Urgun, Ziruk, Nika) and a district in Khost province (Spera).
- Training on expanded program on immunization (EPI) for frontline workers and cluster supervisors has been started on 16 July and to be completed on 21 July. A vaccination campaign is scheduled from 23 to 28 July. WHO has procured non-vaccine supplies including masks, hand sanitizers, printed guidelines as well as recording and reporting forms to be delivered to those target provinces.

Mental health and psychosocial support (MHPSS)

- WHO plans to conduct 2-days Psychological First Aid Training (PFA) and Stress Management Training for 400 Community Health Workers (CHWs) and Community Health Supervisors (CHSs) in Paktika (109), Khost (98), Paktya (91), and Ghazni (102) from 23 July. This will enable CHWs and CHSs to help the community to reduce stress and assist in a healthy recovery after traumatic events.
- As part of the Mental Health Gap Action Programme (mhGAP), WHO will launch a series of training workshops for 100 doctors at BPHS facilities in Paktika, Khost and Paktya provinces, starting from 30 July. The training focuses on the integrated management of priority mental health and neurological conditions using algorithms for clinical decision making. This training



HN-TPO conducting psychosocial education in the community, Spera district, Khost province

will help the doctors provide non-specialized diagnoses, manage the treatment of the most common mental health problems in post-disasters.

- UNICEF, in partnership with HN-TPO, has mobilized psychosocial counselors to provide psychological first aid (PFA) and emergency counseling for 260 clients with 18 sessions in Spera in Khost Province.

Reproductive maternal and child health (RMCH)

- In coordination with the Afghan Society of Obstetricians and Gynecologists (AFSOG), WHO has deployed six female medical doctors and four midwives to Paktika province to support maternal and child healthcare service delivery in Paktika PH and Urgun DH.
- UNFPA mobilized two midwives to provide RH services at UNFPA Family Health Houses (FHH) in Giyan in Paktika province. During the reporting period, 60 pregnant women received Antenatal Care (ANC), 19 women received Postnatal Care (PNC), 70 women of reproductive age received reproductive health and awareness-raising services, and three deliveries were attended by midwives.



Women seeking healthcare services in the affected districts

**Disease surveillance/
potential diseases outbreak prevention & response**

AWD/cholera

- An upward trend of AWD cases has been observed in the affected areas (figure 1 & 2).⁵ From 10 to 16 July, a total of 739 AWD cases were newly detected in the affected districts: 473 cases were reported in Giyan district in Paktika, 202 cases in Barmal district in Paktika, and 64 cases in Spera district in Khost. All cases received treatment (IV fluid, ORS, zinc) at the health facilities, and severe cases were sent to referral hospitals.
- On 15 July, a new death case was reported in Giyan district in Paktika. The patient was a female adult 34 years old who suffered from severe dehydration.
- Among 1708 AWD cases reported in three districts (Giyan and Barmal in Paktika province, and Spera in Khost province) since 25 June 2022, a total of 14 cases were positive for RDT cholera (eight cases reported in Barmal, three in Giyan, and three cases in Spera districts). Those samples were shipped to the regional reference laboratory in Gardez for laboratory confirmation. The laboratory analysis is in process.
- WHO has delivered cholera RDTs to the affected provinces: 50 RDTs to Paktika, 10 to Khost and 40 to Ghazni.

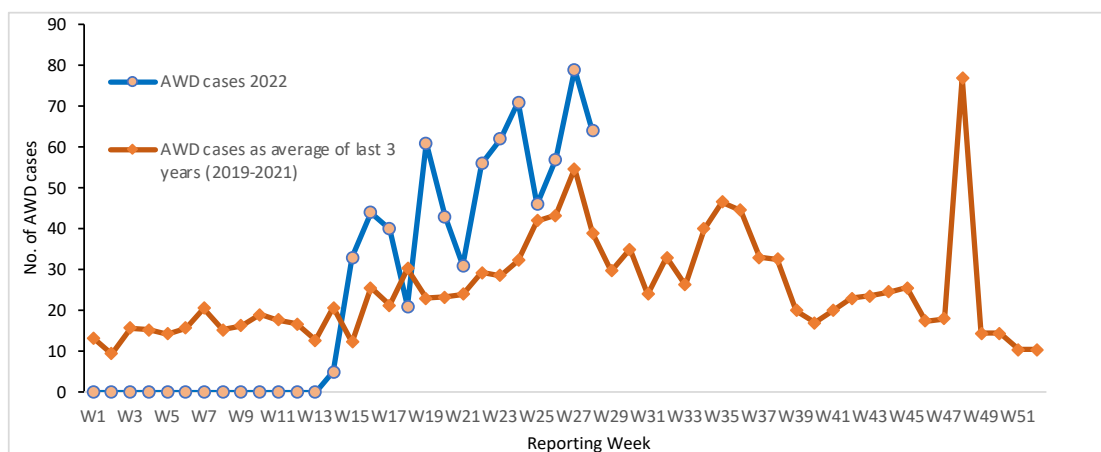


Figure 1: Number of AWD cases in Spera district, Khost (2022 and average of 2019 to 2021)

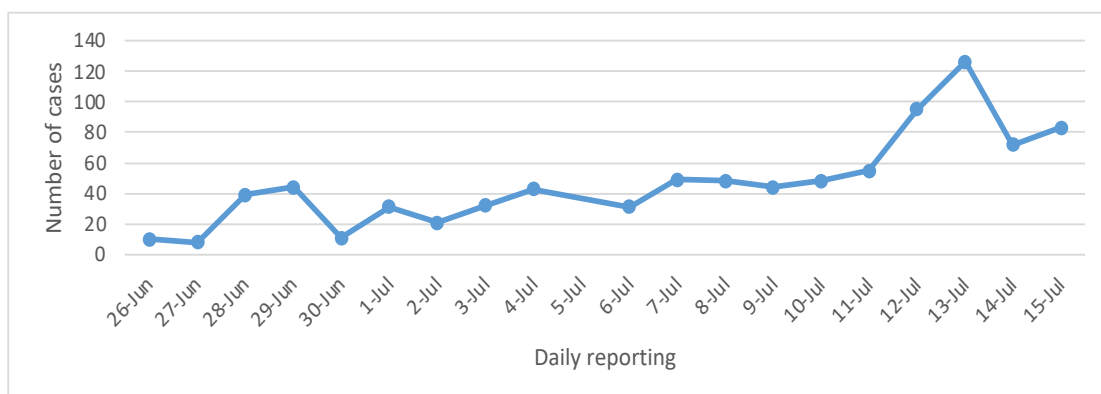


Figure 2: Number of AWD cases in Giyan, Paktika, 2022 (26 June to 15 July)

Malaria

- WHO is working on delivery of long-lasting insecticidal nets (LLINs), strengthening surveillance for malaria, and risk communication to the communities in the most-affected districts where risk for malaria and other mosquito-borne disease is high.

⁵ Fluctuations in the trend curves could be explained by delays in weekly data reporting

Operational support and logistics

- During the reporting period, WHO supports the earthquake-affected areas by:
 - Distribution of essential items to Khost PH
 - Pre-positing a Cholera Central Module Drug (for 80 severe cases and 20 moderate cases) in the WHO warehouse in Gardez
 - Delivery of three operation table to the Gardez RH and PHs in the affected provinces.
 - Preparation of contingency stock in Kabul with 220 Cholera Community Module Drugs to be cleared from custom this week, and 21 Cholera Central Module Drugs to be shipped next week from Dubai to Kabul.
- IMC has distributed 238 hygiene kits, along with hygiene-related messages to 30 families in Giyan district in Paktika.
- UNFPA has provided following items;
 - 10 Emergency RH Kit (2,000 individual Clean Delivery Kits) and 60 Dignity Kits in Giyan.
 - 29 clean delivery kits in Giyan, and 35 clean delivery kits and 67 Dignity kits in Barmal through MHTs.



IMC distributing chlorine tablet for water purification in the earthquake affected areas



UNFPA distributing Clean Delivery Kits to Pregnant Women in Paktika province

NEEDS AND GAPS

- Sustaining the health care service provision after the withdrawal of some health partners from the affected areas, especially those requiring long-term interventions, including MHPSS and physical rehabilitation.
- Urgent response to the upsurge of AWD cases in the affected areas in Paktika and Khost provinces to mitigate the further spread of AWD among the vulnerable populations residing in deteriorated living conditions and being impacted by the floods and heavy rain.
- Logistic challenges remain: the flash floods have damaged bridges and roads, which disrupted livelihoods and response activities. The poor road conditions have increased the risk of road accidents. Phone signals are still largely unavailable.
- Some health facilities (Ziruk CHC, Giyan CHC in Paktika, Spera CHC in Khost) have been partially or fully damaged, which has affected proper service provision.
- Support for referrals and secondary health care is needed. In addition, there is a need for rehabilitative services.

AREAS OF IMPROVEMENT

- Multi-sectoral coordination to be enhanced, such as WASH and Protection, to streamline responses and tackle cross-cutting areas, including AWD/cholera and communicable diseases. For example, a sustainable, safe water supply and proper WASH facilities (latrines and shower/bathrooms) are vital for preventing infectious diseases.
- Continued provision of medicine, medical supplies, and equipment to health facilities to prepare for other health risks among the affected communities, including outbreaks, malnutrition, and mental health problems.
- IPC measures and proper medical waste management to avoid further infections, including the establishment of incinerators in HFs.
- Restoring functionality of partially damaged health facilities in the affected areas.
- Expanded provision of essential medical care for mothers and children, including basic emergency obstetric and newborn care (BEmONC), comprehensive emergency obstetric and newborn care (CEmONC), and vaccinations.
- Specialized medical care, such as reconstructive surgeries, physical rehabilitation, and disability support.
- Expand the capacity of mass casualty management at healthcare facilities by training healthcare workers, equipping emergency and resuscitation rooms, and pre-posting trauma kits and supplies.
- Building resiliency of the health staff and the communities for future natural and/or man-made disasters, and public health emergencies.

FUNDING NEEDS

- Health Cluster requires at least US\$ 6 million to properly respond to the urgent and essential health needs of the affected people in Khost and Paktika during these crucial first three months (July to September 2022).
- WHO requires US\$ 6.0 million for three months for Health and WASH interventions, including medical supplies, rehabilitation, essential healthcare service, and provision of LLINs. To date, US\$ 3.25 million were received (US\$ 2.25 million from UN CERF, and US\$ 1 million from Bill and Melinda Gates Foundation), while the funding gap is US\$ 2.75 million.

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FOCUS: Future Strategies to Strengthen Afghanistan's Health System in Emergency

The June 2022 earthquake that struck Southeast Afghanistan resulted in a surge of injured patients to hospitals across the Southeast region. Between 22 June and 16 July, 7655 patients presented for outpatient care, of which 107 patients were admitted. 47 patients required surgical care and 60 required orthopedic intervention.⁶

Even though the majority of patients who reached hospitals had relatively minor injuries and the number of patients requiring inpatient care was relatively low, however, the mass casualty management caused by the earthquake has overburdened Afghanistan's already-fragile health system. The surge of injured patients placed additional burdens on health facilities; the patients often require ongoing inpatient care and continued rehabilitation at OPD. Many survivors suffer from disabilities or health impairments. This imposes long-term strain of the health sector and often draws scarce resources away from other essential health programmes.



Trauma patient with bone fractures

To prepare for increased capacity in case of further influx of wounded from aftershocks, WHO deployed a team immediately after the earthquake; assessed the health facilities and prepared patient resuscitation areas. WHO also donated additional medical supplies to replenish stocks for trauma care.

Despite these efforts, there have been significant gaps in mass casualty management in line with health system strengthening across Afghanistan due to lack of resources. While the country has experienced frequent natural and man-made disasters which has resulted in large number of casualties (e.g., terrorism, armed conflicts, road accidents, floods and earthquakes), healthcare staff have faced challenges in delivering emergency and trauma care, as day-to-day medical and surgical emergencies already burden the healthcare system in the country. Additional influxes of patients from mass casualty events have further overstretched the capacities of health facilities. Furthermore, other emergency medical condition often occurs in the aftermath of earthquakes, such as acute watery diarrhea (AWD) and acute complications of chronic health problems.

Aggressive steps to address these challenges are being taken. WHO has been proactively working on expanding mass casualty management capacity, which will lead to improvement of baseline emergency preparedness and responses. However, the process of building the health system's capacity to manage mass casualties goes beyond the usual routine work and would take time.



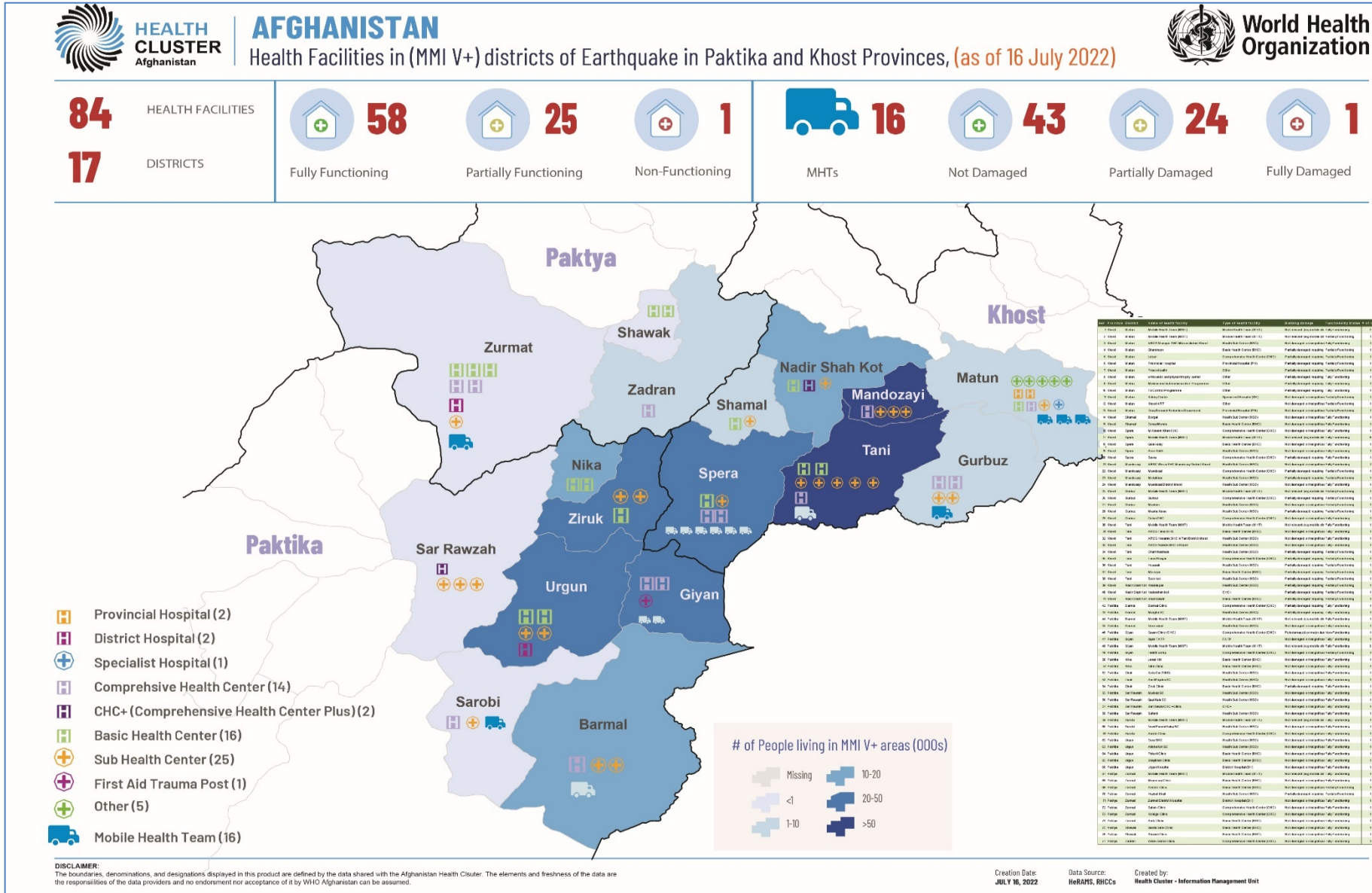
WHO conducting Basic Emergency Care training for health professionals

WHO supports the delivery of internationally recognized emergency and trauma training courses in Afghanistan, including Basic Emergency Care (BEC). From 17 to 21 July, WHO will organize a BEC course for 48 participants from the four Southeastern provinces (Paktika, Ghazni, Paktya and Khost) in Gardez. The 5-day training course for doctors and nurses focuses on the recognition, assessment and management of emergency patients, including trauma patients. Also, Mass Casualty Management (MCM) courses are planned for August 2022 for the south-east region as well and a further rollout of MCM training is planned nationally in 2022/2023. WHO's work to support the national emergency preparedness and response

capacity continues as its commitment in baseline emergency improvement process in Afghanistan. WHO continues to play a leading role in the long-term efforts to empower those professionals and to ensure that Afghanistan has the resilient health system that is capable of quickly responding to health emergencies.

⁶ Based on the health facility data collected from the implementation partners operate six hospitals and two CHCs (Table 1).

Annex 1: Health Facilities in (MMI V+) districts of Earthquake in Paktika and Khost Provinces



Annex 2: Health Cluster Partners Presence for Earthquake in Paktika and Khost Provinces

