

Situation report **AUGUST 2018**

AFGHANISTAN

Emergency type: Protracted emergency









133,000 DISPLACED



68,500 REFUGEES/ RETURNEES



71 ATTACKS ON HEALTHCARE



100 OUTBREAKS

AFFE	CTED TO DISPLACED
KEY FIGURES	
394	WHO STAFF IN THE COUNTRY
16	HEALTH CLUSTER PARTNERS
2 M	TARGET POPULATION
HEALTH FACILITIES	
3,911	TOTAL NUMBER OF HEALTH FACILITIES
44	TOTAL NUMBER OF HEALTH FACILITIES CLOSED/ DAMAGED/LOOTED
25	HEALTH WORKERS KILLED/ATTACKED
02	AMBUALNCES ATTACKED
OTHER	
05	MEASLES OUTBREAKS
89	CCHF OUTBREAKS
100	TOTAL OUTBREAKS
14	TRAUMA KITS (A+B)

SITUATION UPDATE

- Volatile security circumstances and active fighting in districts of Nangarhar has continued to threaten the safety of health facility staff and has led to an increase in displaced populations in the region.
- Over 1.6 million people in the Western Region are in need of health assistance, including an estimated 150,000 droughtinduced internal displaced population (IDPs) in Herat City and Qala-e-Naw City.
- Nine Health mobile team (MHTs) (three UNICEF, 1 ARCS, 2 HNTPO/PMU, UNFPA, 3 WV) delivered health services to IDPs located in Herat city.
- Community awareness sessions on Crimean-Congo haemorrhagic fever (CCHF) were conducted through local radios, posters and brochures in 10 high risk provinces.
- 89% of all outbreaks reported in August were CCHF and a total of 100 outbreaks were reported throughout the country.
- A total of 71 attacks on healthcare were reported in August 2018, which includes 39 health facilities that were closed in July and re-opened in August. There were 23 health workers who were forced to provide healthcare services for war affected people at frontlines by the anti-government insurgents.
- IDPs and returnees continued to place pressure on health facilities across the country.
- 167 (83 Female & 84 Male) Health care providers (Medical doctors, Midwifes and Nurses) from hard-to-reach districts have been trained on Gender-Based Violence (GBV) treatment protocol in 11 provinces since February 2018.

Facebook: World Health Organization Afghanistan Twitter: @WHOAfghanistan

Web: www.emro.who.int/afghanistan

Public health concerns

- War and conflict in the country continues to impact effective provision of health services, both for displaced populations and host communities. Attacks on health workers and facilities continues to limit the availability and access for populations to basic health services.
- A total of 100 outbreaks were reported during August 2018, of which 89% of the outbreaks were CCHF, 5 outbreaks of measles and the remaining outbreaks were rabies, chicken pox and Acute Viral Hepatitis.
- CCHF cases remain the same month on month, but have significantly increased from the same period last year. Majority of the cases were reported among, butchers, house-wives and shepherds.

Health needs, priorities and gaps

- Access in Badghis Province remains a challenge; in Balamurghab and Jawand districts, non-state
 armed groups (NSAGs) have impeded the provision of supplies to 17 health facilities over the past
 three months, which has adversely affected the polio vaccination and health response in general.
- Inaccessibility and growing refusals pose a risk for the ongoing transmission of polio.
- There is a need for a comprehensive health response plan in areas of origin of drought affected locations.
- Over 18 000 people deprived of health services due to Kamdish health facility closure in Nuristan.
- 6 210 children aged under five remain unable to access routine immunization services in Kunar province due to localised ban on health facilities.
- Health service delivery in 4 districts of Nangarhar province continues to be affected by insecurity and threats made on health facility staff.

WHO action

- A medicine kit and a delivery kit have been delivered to two Comprehensive Health Centers (CHC) and the Regional Pediatric Hospital located close to IDP sites in Herat City.
- Health emergency supplies are prepared and ready in all provincial health directorates (34) in the country.
- 14 Trauma Kits (A+B) and 5 Cholera Kits were distributed based on need to 16 national, regional, provincial and district hospitals.
- ACTED and WPF have responded to 105 conflict IDPs in Tagab district in Badakhshan province.
- Supervisory and managerial health staff of Helmand, Kandahar and Zabul provinces have attended a five day Medical Ethics training.
- The Comprehensive Emergency Obstetric and New-born Care (CEmONC) training was conducted for 13 male and female doctors, surgeons and anaesthesiologists in Malalai Training Centre, Kabul.
- Minimum Initial Service Package (MISP) training conducted for 20 Provincial Reproductive Health Officers and provincial technical managers in Malalai Training Centre, Kabul Province.
- WHO trained 46 Provincial Rapid Response Team member from 10 high risk provinces with focus on CCHF.
- WHO conducting community awareness programs through local radios, posters and brochures in 10 high risk provinces

Health cluster

- Health Cluster was allocated \$3 million USD under Afghanistan Humanitarian Fund (AHF) to respond
 urgently to drought. Eight partners are now implementing drought response in 41 high priority
 districts.
- 366,000 drought affected people have received critical health services, either where they were displaced or at their place of origin. Health response for drought affected populations will continue.
- Health Cluster conducted assessment in Badghis, Herat and Ghor provinces and identified acute
 watery diarrhea, skin infection and respiratory infection as top priorities. In addition, the lack of
 antenatal care will also be addressed.
- Health Cluster conducted a workshop covering 'Attack on Healthcare and introduced the global monitoring system. Health Cluster will continue to report on incidence of attacks on health.
- Health Cluster partners are currently updating the 2019 HNO and 2019 HRP to address the current humanitarian situation.