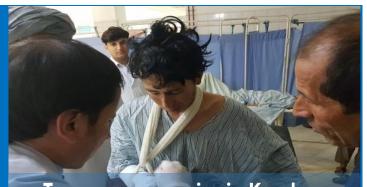


World Health Organization

Situation report **JULY 2018**

AFGHANISTAN

Emergency type: Protracted emergency



Trauma care service in Kunduz **Regional Hospital**

AFF		132,00 DISPLACE		68,617 REFUGEES/ RETURNEES	İ.	71 ATTACKS ON HEALTHCARE	Х	79 OUTBREAKS
К	KEY FIGURES			SITUATION UPDATE				
394	WHO STAFF IN TH COUNTRY	-			ers are responding to a drought in the re up to 2.2 million people may be affected			
16	HEALTH CLUSTER PARTNERS		 by water- and vector-borne diseases and malnutrition. The top two communicable diseases during July were acute 					
2 M	TARGET POPULAT	ON	diarrheal diseases (356,940 cases) and acute respiratory infections (346,407 cases).					
HE	HEALTH FACILITIES		• Seventy-one (71) attacks on healthcare were reported in July,					
3,911	TOTAL NUMBER OF HEALTH FACILITIES		 including 42 attacks/closures of health facilities, 27 attacks on health personnel and two attacks on ambulances. A Community Midwifery Education Centre was attacked in Jalalabad where causalities reported. In 10 districts of southern Zabul province, 39 out of 46 health facilities closed, depriving more than 300,000 people from basic healthcare services. Population movement and returnees from Pakistan and Iran continues to place increased demand on health services. In July, a total of 68,617 documented and undocumented individuals 					
42	TOTAL NUMBER OF F FACILITIES CLOSED/ DAMAGED/LOOTED	EALTH						
27	HEALTH WORKERS							
2	AMBUALNCES ATT	ACKED						
	OTHER		returned through Tourkham, Spinboldak, Islam Qala and Milak border crossings, bringing the total returns from Pakistan in 2018					
18	MEASLES OUTBRE	AKS	 to 19,859 and from Iran to 428,264 individuals. Ten essential Standard Operating Procedures (SOPs) were developed for Mass Causality Management and Trauma Care with technical support of WHO in July 2018. A two day pharmaceutical warehouse management training was conducted in Kabul. A twenty-five-day training program on Comprehensive Emergency Obstetric and Newborn Care (CEmONC) for 14 male and female doctors started in Kabul. 					
47	CCHF OUTBREAKS							
79	TOTAL OUTBREAK	S						
5	INTER-AGENCY EMERGENCY HEAL KITS (IEHK) BASIC SUPPLEMENTARY							

Public health concerns	 Attacks on health continue, limiting the availability and access for populations to basic health services. 					
	 Caseload and deaths due to Crimean-Congo haemorrhagic fever (CCHF) have decreased in July compared to previous months in 2018 but significantly increased from the same period of last year. Majority of the cases this month were reported from Herat, Ghazni, Faryab, Balkh, Helmand, and Kabul provinces. 					
	• Eighteen (18) cases of Measles outbreaks were reported in July. More cases and outbreaks of measles have been reported in 2018 so far compared to 2017.					
	 Two cases of Mass Psychogenic outbreaks were reported in Kapisa in July 2018. The cases were symptomatically treated and health education sessions were conducted. 					
Health needs, priorities and gaps	 Drought and conflict in various locations of the country has resulted in more internal displaced persons (IDPs) and increased demand for emergency healthcare for IDPs, returnees and host communities. 					
	 Closure of health facilities continues to increase the burden to the neighboring provinces' health facilities reducing the access to healthcare services. 					
	 Improved trauma care is needed in response to the increased insecurity. 					
	 Rehabilitation and psychosocial support is needed to support victims of conflict-related and drought-affected IDPs. 					
	 Lack of female staff continues to show lower utilization of health facilities by women. 					
	 Access to basic primary healthcare services lacking for populations in underserved and hard-to- reach districts. 					
WHO action	 Mobile Health Teams have started delivering support for IDPs in Badghis who have been displaced due to drought. 					
	 Four basic Inter-agency Emergency Health Kits (IEHK) and 1 IEHK supplementary Kit were delivered to Qarabagh District Hospital of Ghazni province. 					
	 Ambulance equipment and supplies were delivered to Kabul Ambulance Service to strengthen their capacity. 					
	 Blood bank equipment were distributed for three district hospitals (Spindboldak, Muqur and Dari Peach) 					
	 A twenty-five-day training program on Comprehensive Emergency Obstetric and Newborn Care (CEmONC) commenced. 14 male and female doctors, surgeons and anaesthesiologists from Takhar, Ghazni, Kunar, Paktika, Faryab, Zabul, Nangarhar and Urozgan provinces are participating. 					
	• Ten (10) essential SOPs for Mass causality Management and Trauma Care were developed during a three-day consultative workshop in July.					
Health cluster	• In the month of July, Health Cluster partners have provided service to 436,243 beneficiaries, 57% of which are women and girls. The top priority remains trauma care and reproductive and maternal care.					
	 Health Cluster has currently re-prioritized the geographic region for drought response. This includes 44 priority districts that will be responded to with 30 days and an additional 22 districts that would be responded to within 90 days. 					
	 Health Cluster hosted a mission from WHO headquarters on Gender Based Violence (GBV) and will implement a work plan on strengthening GBV activities with Health Cluster partners. 					
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