

Afghanistan Flooding

Situation Report No. 4 (15-16 May 2024)

(Information in the report is based on available data as of reporting period)



Distribution of blanket and tarpaulin in Takhar province by UNFPA implementing partner AADA. © UNFPA

Key messages:

- As of 16 May, a total of 214 fatalities and 328 injuries have been confirmed, with 128 children under five and 202 women.
- The districts of Burka and Nahrin are facing significant access challenges and require air transportation for assistance.
- As of today, more than 200 injured people have been treated in the Trauma Centers and HF such as Baghlan and others.
- The proactive mobilization of 6 SST teams by WHE and HC to further extend surveillance efforts in the affected areas to mitigate waterborne diseases.
- Shikh Jala PHC inflicted heavy partial damage impacting the WASH system. No water is available for patients in the PHC. Cleaning is ongoing.
- WHO assessment teams maintain their presence in the field and continue delivering the required essential health care services to the population in the affected areas.
- Urgent need for capacity building of health staff with a focus on MHPSS
- A team from Kabul WHO, comprising MHPSS, trauma, WASH, and emergency experts, conducted a reassessment in Burka district to address emerging needs and gaps.

Situation update:

On 10 and 11 May, heavy rainfall and flash floods struck northeastern Afghanistan, affecting 21 districts across Badakhshan, Baghlan, and Takhar provinces. The disaster has resulted in significant human impact, with 214 fatalities and 328 injuries confirmed, including 128 children under five and 202 women.

Approximately 8696 homes have been destroyed or damaged, leaving thousands without shelter. Critical infrastructure, including roads, bridges and health facilities has been damaged. Agricultural land and livestock have also suffered, with 470 dead livestock, 700 acres of damaged agricultural land, and 20km of damaged irrigation canals confirmed in Baghlani Jadid district alone.

The districts of Burka and Nahrin are facing substantial access challenges, necessitating air transportation for assistance. Humanitarian aid distribution teams and warehouses have

been established in affected provinces, with a joint UN action plan initiated on 15 May 2024.

In response to these challenges, the collective efforts of WHO's Health Emergency (WHE) team and the Health Cluster partners have been essential. Partners, including Aga Khan Foundation (AKF), Aga Khan Health Services (AKHS), Organization for Relief, Development and Cooperation (ORCD), and JACK Kunduz, have mobilized significant response resources.

Contributions from organizations like Médecins Sans Frontières (MSF) and the International Committee of the Red Cross (ICRC) have further bolstered the health response capacity.

These collaborative efforts underline the collective resolve to mitigate the impact of disasters. Moreover, to address emerging needs, additional supplies from WHO's Kabul office were dispatched.

Epidemiological update:

The latest epidemiological update highlight a concerning increase in cases of waterborne diseases, including diarrhea and skin infections, within flood-affected areas.

Health teams are vigilantly monitoring the health situation and implementing preventive measures to control disease transmission.

Furthermore, concerted efforts are underway to address public health concerns by providing access to safe water, distributing hygiene kits, and delivering essential medical treatment.

In addition to these efforts, WHO WASH team has been providing the technical advice required for partners and

the WASH cluster members. Their expertise will contribute to the effective implementation of sanitation and hygiene measures to further enhance the overall response to the crisis.

The Active Surveillance Updates as of 15 May are:

- Eight Surveillance Support Teams (SSTs) are deployed in the field, with two originally located in Baghlan and six mobilized from neighboring provinces.
- During the period 11-15 May, the following infectious diseases have been detected and reported by the SSTs:
 - » 200 Acute Respiratory Infection (ARI) cases
 - » 230 Acute Watery Diarrhea (AWD) cases
 - » 35 suspected measles cases
 - » 15 suspected COVID-19 cases

Table 1: Number of reported cases of infectious diseases in the districts heavily affected by flood. Baghlan 11 – 15 May 2024

Diseases	Number of reported cases during 11-15 May 2024						
	Male		Female		Total		Total
	<5 Years	>5 Years	<5 Years	>5 Years	Male	Female	
ARI	56	36	45	63	92	108	200
Measles	21	1	13	0	22	13	35
AWD	72	40	57	61	112	118	230
Suspected COVID-19	0	1	0	14	1	14	15
Total	149	78	115	138	227	253	480

During week 19-2024 (05-11 May 2024), the indicator-based surveillance system in Pul-e-Khumri, Baghlan-e-Jadid, Borka, Guzareh-e-Noor, and Nahreen districts of Baghlan province detected and reported:

- 826 Acute Respiratory Infection (ARI) - Pneumonia cases
- 85 Acute Watery Diarrhea (AWD) with dehydration cases
- 60 suspected measles cases

Cumulatively, since January 2024, the same districts reported:

- 16 848 ARI-Pneumonia cases
- 592 AWD with dehydration cases
- 455 suspected measles cases
- No suspected COVID-19 cases

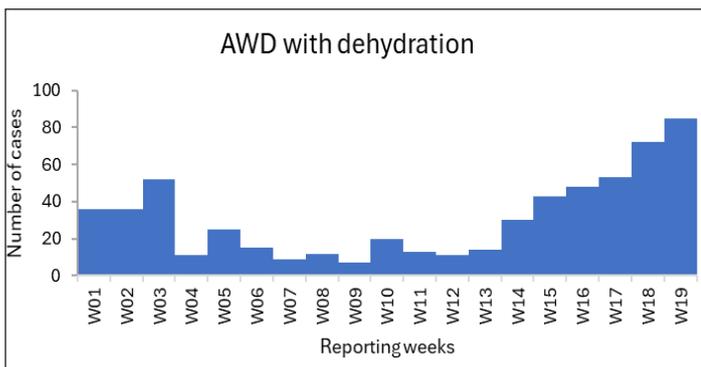


Figure 1: The epidemiological curve of AWD with dehydration cases in the five districts heavily affected by floods, Baghlan, Afghanistan – 01 Jan – 11 May 2024

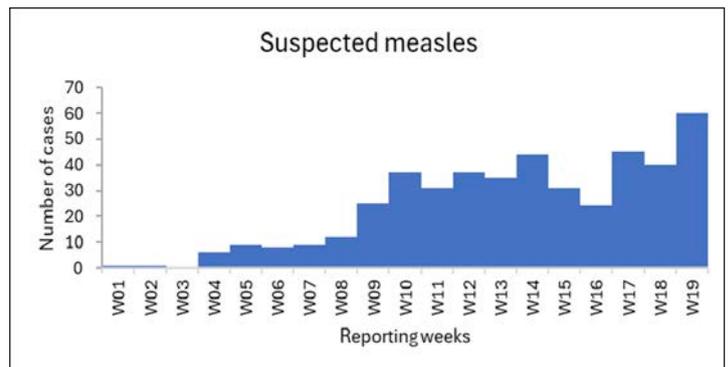


Figure 2: The epidemiological curve of suspected measles cases in the five districts heavily affected by floods, Baghlan, Afghanistan – 01 Jan – 11 May 2024

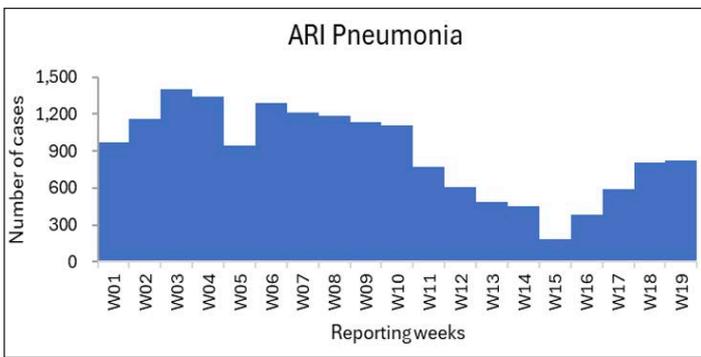


Figure 3: The epidemiological curve of ARI Pneumonia cases in the five districts heavily affected by floods, Baghlan, Afghanistan – 01 Jan – 11 May 2024

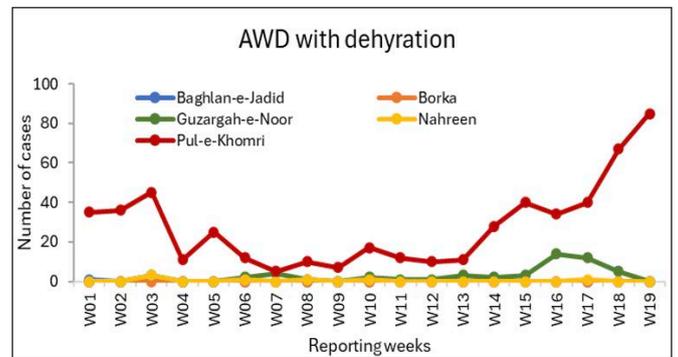


Figure 4: AWD with dehydration cases in the five districts heavily affected by floods, Baghlan, Afghanistan – 01 Jan – 11 May 2024

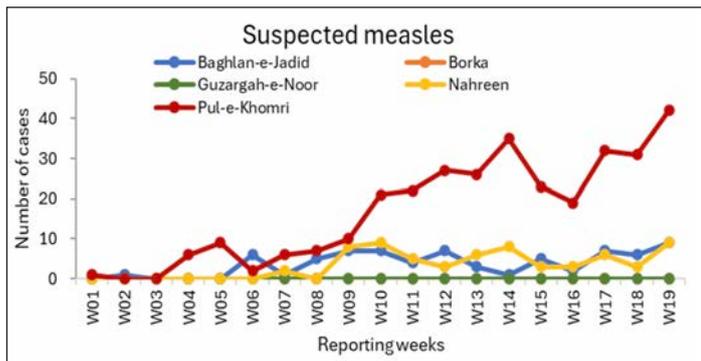


Figure 5: Suspected measles cases in the five districts heavily affected by floods, Baghlan, Afghanistan – 01 Jan – 11 May 2024

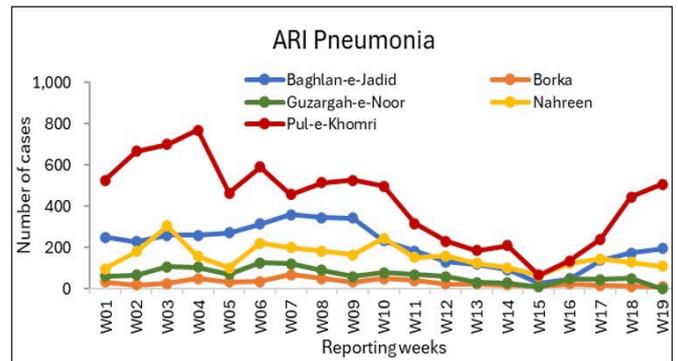


Figure 6: ARI Pneumonia cases in the five districts heavily affected by floods, Baghlan, Afghanistan – 01 Jan – 11 May 2024

WHO response:

WHO is maintaining its active response to the flood emergency in northeastern Afghanistan by distributing essential medical supplies, including trauma kits and medications, to affected areas.

Efforts are also underway to enhance disease surveillance and coordinate access to safe water and sanitation facilities. These initiatives aim to mitigate the health impacts of the floods and facilitate the rehabilitation of affected communities.

WHO Afghanistan emergency team has assured the NER WHO team that additional support will be provided promptly if needed.

As of 16 May 2024, WHO's response activities include:

- WHO has identified an absence of MHPS services, leading to stress and anxiety among affected communities, especially those with pre-existing mental disorders. A focused training for 500 Community Health Workers (CHWs) is scheduled in collaboration with other health partners to address this issue.
- WHO has ensured the provision of medicines, medical supplies, and consumables to health facilities serving the affected population enough to cover the needs for the coming 3 months. However, there is a need for additional mental health staff, including doctors, nurses, midwives etc.



- WHO teams deployed to the field have so far conducted a considerable number of joint health facility assessments. Findings include the partial damage of the Primary Healthcare Center (PHC) in Shikh Jala, impacting its water, sanitation, and hygiene (WASH) facilities. Water supply disruption has occurred, affecting inpatient care.
- Six Surveillance Support Teams (SSTs) have been mobilized by WHO's Health Emergency (WHE) and Health Cluster partners to further enhance surveillance efforts in affected areas, particularly for waterborne diseases.
- WHO emergency response teams, comprising experts in Mental Health and Psychosocial Support (MHPSS), trauma, and WASH have conducted additional reassessment visits to address emerging needs and gaps in heavily flooded areas, such as Burka district.
- WHO and Health Cluster partners maintain regular meetings to coordinate response efforts, engage with partners, and monitor casualties. Safety measures, including the provision of water from non-affected areas, are being strictly adhered to.
- WHO has delivered sufficient kits to Baghlan Markazi hospital and Burka district to maintain access to essential healthcare service delivery in these areas.
- To ensure the continuity of healthcare services in areas where health facilities are damaged, Mobile Health and Nutrition Teams (MHNTs) has been deployed
- WHO Afghanistan team efforts are ongoing to address the evolving situation and provide necessary support to the affected population.

Health Cluster response:

- As of 16 May 2024, Health Cluster partners contributed the following: AKF deployed seven mobile teams, AKHS ensured ambulance services, ORCD dispatched 4 mobile teams, and JACK Kunduz sent one team to Baghlan province, enhancing response capabilities.
- The Health Cluster coordination team collaborated with Shelter/NFI and other partners to address the need for tents in flood-affected health facilities.
- In close collaboration with the Nutrition and Shelter/NFI Clusters, the Health Cluster Team ensured the availability of essential nutrition and shelter services for affected communities. This coordinated effort aimed to meet the immediate needs of those impacted by the floods and enhance the overall crisis response.
- Health Cluster partners, including AADA, AFGA, AKF, AKHS, ARCS, ICRC, IMC, IOM, JACK, MMRCA, MoPH, MSF, ORCD, Save the Children, UNFPA, UNICEF, and WHO, supported health responses in Baghlan, Takhar, and Badakhshan provinces. This support included the deployment of 33 Mobile Health and Nutrition Teams (MHNTs), provision of medical kits and supplies, deployment of ambulances for first aid and referral support, and assessment of affected areas.
- In Baghlan, 30 MHNTs were deployed in Burka, Baghlan Markazi, and Guzargai Noor districts to deliver emergency healthcare services to affected communities.
- Between 10-15 May 2024, Health Cluster partners provided health services to a total of 7476 flood-affected individuals in the three provinces. The beneficiaries included 2905 women, 1647 men, 1898 girls, and 1026 boys. Out of these, 4456 individuals received primary health care consultations, 1903 were reached with health promotion activities, 637 received Mental Health and Psychosocial Support (MHPSS) services, 425 received maternal, newborn, and child health services, and 55 received trauma care services.

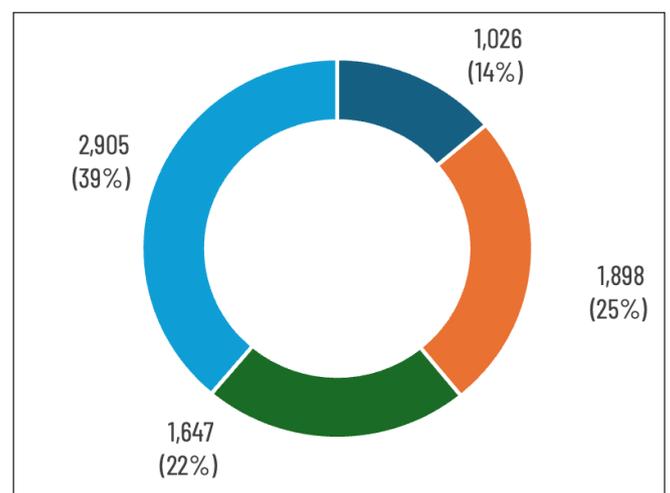


Figure 7: Beneficiaries of the Health Cluster healthcare service delivery

Partners contribution:

WHO	Provided enough Trauma kits to help those injured in the flood.
AKF	Sent out 7 mobile teams to help in different areas.
AKHS	Made sure there are enough ambulances available to take people to the hospital.
ORCD	Sent out 4 mobile teams to help in areas affected by the flood.
IMC	Sent a mobile team from Kabul to Baghlan province to provide assistance.
JACK Kunduz	Sent a mobile team from Kunduz to Baghlan province to help out.
MSF and ICRC	Provided sheets for bodies and medical supplies to treat wounded people.

Needs:

- Access to safe drinking water remains a critical requirement within the community, as highlighted by WHO Afghanistan's technical team and Health Cluster coordination partners during ICCG/OCT meetings. Urgent action is needed to address this issue.
- The reconstruction of clinics destroyed by the floods is another pressing need.
- There is a dire shortage of mental health medicine and a lack of trained doctors, midwives, and nursing staff.
- Additional support is needed for Mobile Health & Nutrition Teams (MHNTs) in terms of medical supplies and capacity to deliver quality services. WHO's field team is collecting information to determine the type and size of the required support.
- Including at least one female health worker or female psychosocial counsellor in each team is crucial, as the affected population is predominantly women and children.
- Burka and Nahreen districts face significant accessibility challenges due to the destruction of the main road, requiring support for transportation. Alternative transportation is crucial to reach these areas and deliver essential supplies.
- Rehabilitation or reconstruction of damaged health facilities is necessary to ensure the continuity of healthcare services. Prioritizing these efforts will enable healthcare services to resume effectively, providing access to care for affected individuals.
- The current ambulances/referral services in affected areas cannot reach remote and inaccessible areas within districts. Enhancing the referral system, including upgrading ambulance capabilities, is crucial to saving the lives of vulnerable individuals by ensuring timely access to healthcare services.
- There is a need for water quality monitoring coordination in affected areas, including joint assessments with UNICEF, to check for waterborne and infectious diseases.



Providing health services by UNFPA implementing partner AADA SDPs province, Takhar district, Farkhar © UNFPA

Serving and nonfunctional health facilities:

Initial assessments following the flooding in the northeastern region indicate damage to a total of nine Health Facilities across Baghlan (3 HFs), Takhar (4 HFs), and Badakhshan (2 HFs) provinces.

These include 5 Basic Health Centers (BHCs), 1 Comprehensive Health Center (CHC), and 3 Health Sub Centers (HSCs).

Among these facilities, two have been destroyed. These include:

- Gharo CHC in Guzargai Noor district of Baghlan.
- A health facility in Chal district of Takhar.

The specific facilities affected are as follows:

- Baghlan: Sheil Jalal BHC in Baghlan Markazi, and Folool BHC in Burka districts.
- Takhar: Mandara BHC in Chal, Lataband BHC and Shurab HSC in Taloqan, and Mashtan BHC in Farkhar districts.
- Badakhshan: Dai Ostayan HSC in Teshkan, and Bazar-e-Etefaq HSC in Yaftal Payeen districts.

Challenges:

As of 16 May 2024, challenges reported include:

- Scarcity of safe drinking water, leading to the spread of waterborne diseases.
- Poverty and a lack of community awareness regarding communicable diseases are significant obstacles to effective response and recovery efforts.
- Inadequate financial resources are hindering the deployment of additional mobile teams and ambulances in flood-impacted regions.
- WHO and Health Cluster partners have difficulties reaching affected populations due to severe damage to transportation infrastructure, including roads and bridges. As a result, communities are isolated, and movement between villages is hindered by flowing rivers.
- Accessibility: The towns of Burka and Nahreen pose significant accessibility challenges following the destruction of the main road.

This has necessitated the involvement of the air force for transportation, highlighting the critical need for alternative transportation methods to reach these areas and deliver essential supplies and aid.

- Collaboration Among Partners: Enhancing collaboration among partners is crucial to ensure a more coordinated and effective response to the crisis. This includes improving information sharing, coordinating activities, and leveraging each partner's strengths to maximize the impact of the response efforts. Strengthening collaboration can lead to better resource allocation, reduced duplication of efforts, and ultimately, more efficient assistance to those affected by the flood crisis.
- WHO and Health Cluster partners are challenged with reaching the affected populations due to severe damages to transportation infrastructure, including roads and bridges. Consequently, communities are isolated and unable to move between villages due to flowing rivers.



Health Cluster partners in flood-affected community. © WHO

For more information about WHO's work in flooding, contact:

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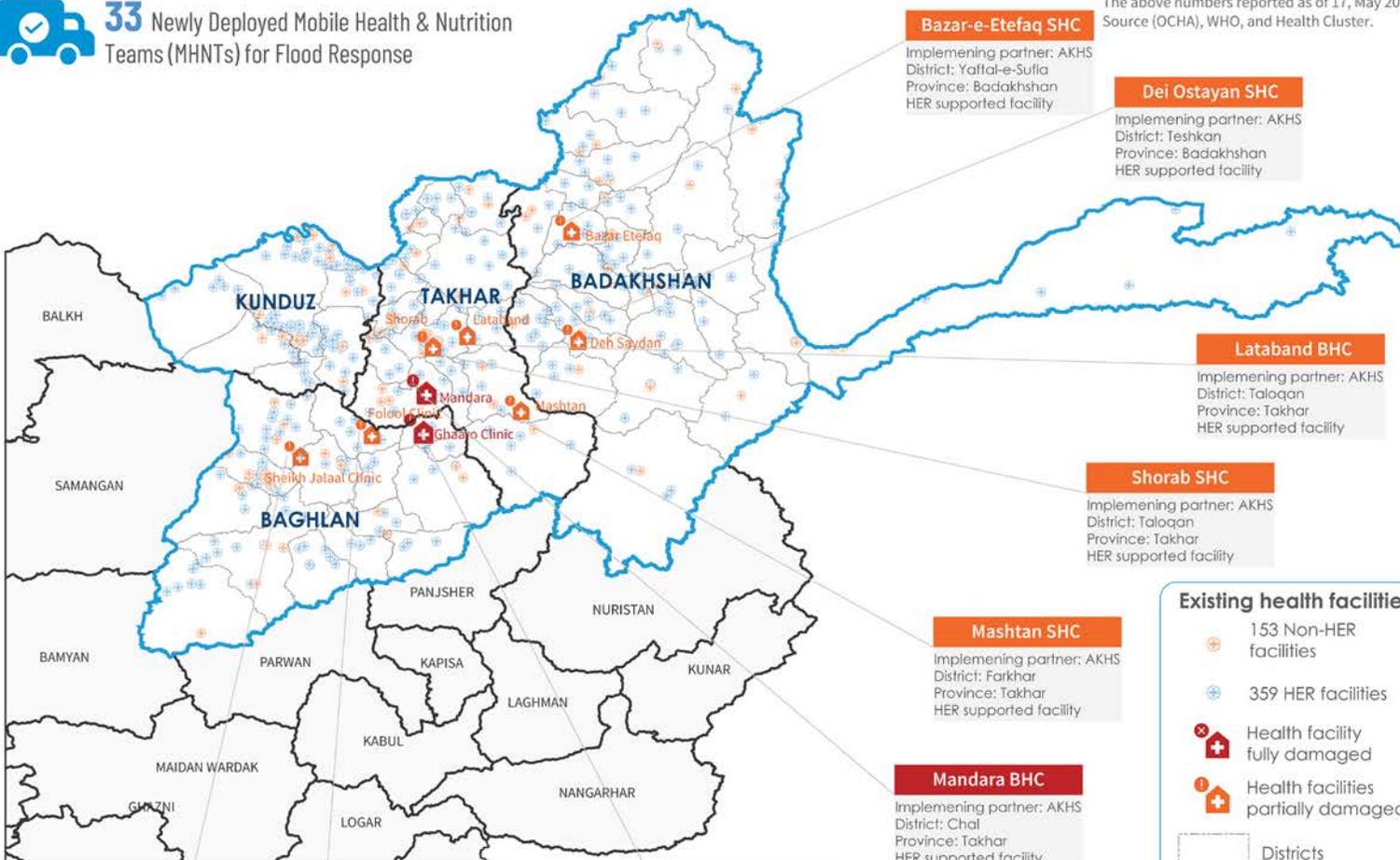
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33 Newly Deployed Mobile Health & Nutrition Teams (MHNTs) for Flood Response

The above numbers reported as of 17, May 2024. Source: (OCHA), WHO, and Health Cluster.



Bazar-e-Etefaq SHC
 Implementing partner: AKHS
 District: Yaffal-e-Sufia
 Province: Badakhshan
 HER supported facility

Dei Ostayan SHC
 Implementing partner: AKHS
 District: Teshkan
 Province: Badakhshan
 HER supported facility

Lataband BHC
 Implementing partner: AKHS
 District: Taloqan
 Province: Takhar
 HER supported facility

Shorab SHC
 Implementing partner: AKHS
 District: Taloqan
 Province: Takhar
 HER supported facility

Mashtan SHC
 Implementing partner: AKHS
 District: Farkhar
 Province: Takhar
 HER supported facility

Mandara BHC
 Implementing partner: AKHS
 District: Chal
 Province: Takhar
 HER supported facility

Sheikh Jalaal BHC
 Implementing partner: AKHS
 District: Baghlan-e-Jadid
 Province: Baghlan
 HER supported facility

Folool BHC
 Implementing partner: AKHS
 District: Burka
 Province: Baghlan
 HER supported facility

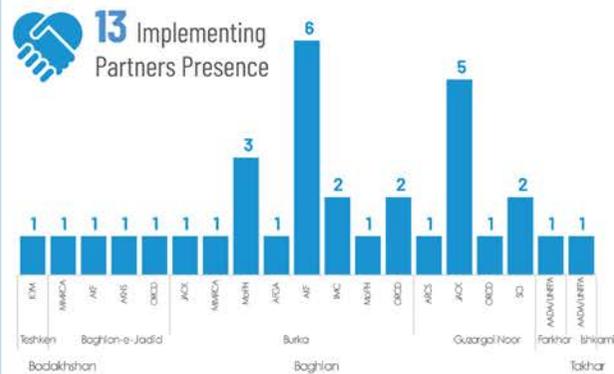
Ghaaro CHC
 Implementing partner: AKHS
 District: Guzargah-e-Nur
 Province: Baghlan
 HER supported facility

Existing health facilities

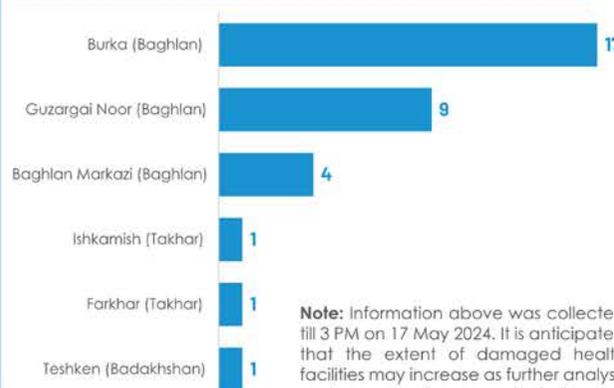
- 153 Non-HER facilities
- 359 HER facilities
- Health facility fully damaged
- Health facilities partially damaged
- Districts
- Province
- Region



NUMBER OF MHNTS BY ORGANIZATION



NUMBER OF MHNTS BY PROVINCE/DISTRICT



Note: Information above was collected till 3 PM on 17 May 2024. It is anticipated that the extent of damaged health facilities may increase as further analysis and assessments are conducted.



HIGHLIGHTS

On **10 and 11 May**, heavy rainfall led to fast-flowing water and flash floods in northeastern Afghanistan affecting **21 districts** across **Baghlan** (Baghlani Jadid, Burka, Dahnai Ghor, Doshi, Gu-zargah Noor, Jelga, Khost, Nahrin, Pul-i Khumri and Tala wa Barfak), **Badakhshan** (Darwaz, Kishem, Tagab, Teshkan and Yawan) and **Takhar** (Chall, Farkhar, Ishkamish, Kalafgan, Namak Ab and Taluqan) provinces.

214



People Killed

328



People Injured

8,696



Houses Destroyed or Damaged

9



Health Facilities Damaged

Source of Information: The above numbers reported as of 17, May 2024. Source (OCHA), WHO, and Health Cluster.



HEALTH CLUSTER PARTNERS RESPONSE



7,476

PEOPLE RECEIVED HEALTH SERVICES

4,803 (64%)

Female

2,673 (36%)

Male

Girls **319**

Children Under 5

268

Boys

Girls **1,579**

Children (6-17)

758

Boys

Women **2,759**

Adult (18-60)

1,508

Men

Elderly Women **146**

Elderly (60+)

139

Elderly Men



REPORTING PARTNERS AND COVERAGE

7

REPORTING ORGANIZATIONS

3

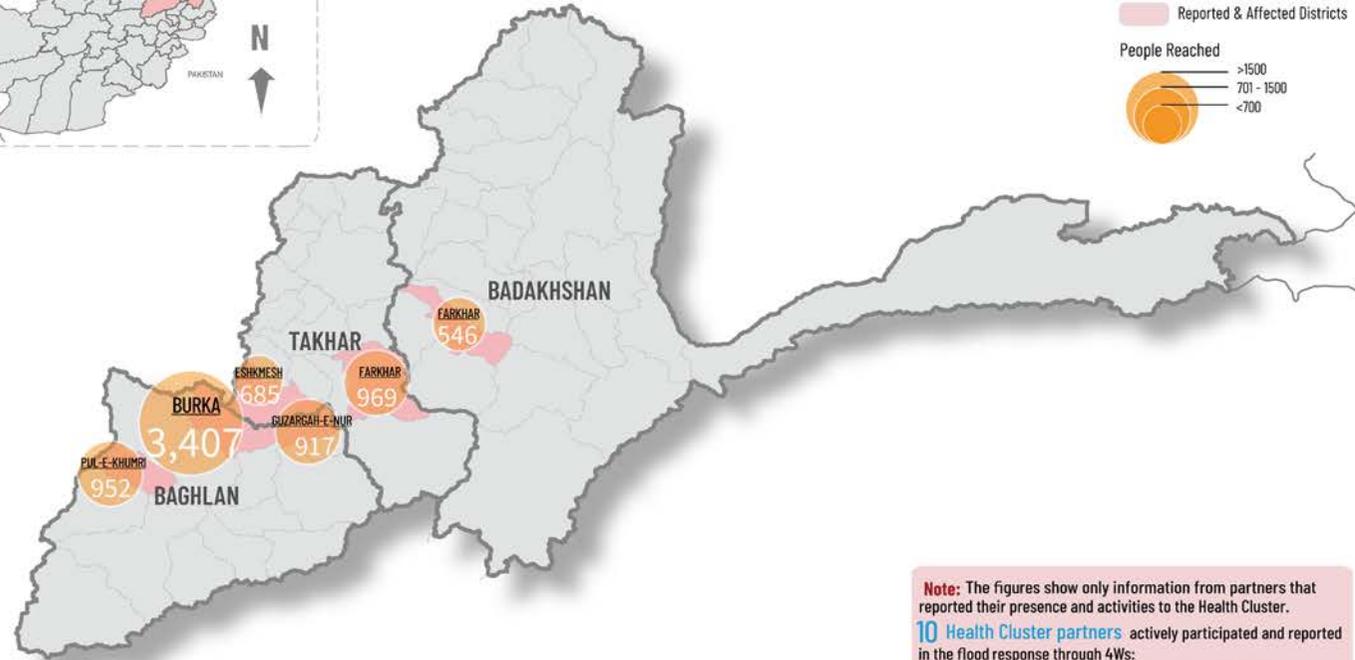
SUPPORTING AGENCIES

3

PROVINCES

6

DISTRICTS



Note: The figures show only information from partners that reported their presence and activities to the Health Cluster.
10 Health Cluster partners actively participated and reported in the flood response through 4Ws: AADA, ARCS, IOM, JACK, ORCD, SCI, UNFPA, UNICEF, WHO, WYFA.



PEOPLE REACHED BY ACTIVITY

Primary Health Care



4,456

Health Promotion & Risk Communication



1,903

Mental Health & Psychosocial Support (MHPSS)



637

Maternal, Newborn & Child Health (MNCH)



425

Trauma Care



55

Province	District	Organization Acronym (IP)	Primary health care services	Health promotion & risk communication	Mental Health and Psychosocial Support (MHPSS)	Maternal, Newborn and Child Health (MNCH)	Trauma care
Badakhshan	Teshkan	ARCS	✓				
		IOM	✓	✓	✓	✓	✓
		ARCS	✓				
Burka		JACK	✓				
		SCI	✓		✓	✓	✓
Baghlan	Farkhar	UNFPA, ORCD	✓	✓	✓	✓	
		WYFA	✓				
		UNFPA, AADA	✓				
Guzargah-e-Nur		JACK	✓				
		UNFPA, ORCD	✓		✓	✓	
Takhar	Farkhar	Pul-e-Khumri	✓	✓	✓	✓	
		Eshkmesh	✓	✓	✓	✓	
		UNFPA, AADA	✓	✓	✓	✓	

DISCLAIMER:

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