



Distribution of PHC services to IDPs, returnees and host community through MHTs in Qalat District, Zabul Province.



**2M**  
AFFECTED



**436,935**  
DISPLACED<sup>1</sup>



**496,526**  
RETURNEES<sup>1,2</sup>



**511**  
IEHK KITS<sup>1</sup>



**744**  
OUTBREAKS<sup>1</sup>

## KEY FIGURES

394	WHO STAFF IN THE COUNTRY
60	HEALTH CLUSTER PARTNERS
1.6M	OUTREACH (POPULATION REACHED)
HEALTH FACILITIES	
2,865	TOTAL NUMBER OF HEALTH FACILITIES
192	TOTAL NUMBER OF HEALTH FACILITIES AFFECTED
43	HEALTH WORKERS, PATIENTS AND OTHERS KILLED
125	HEALTH WORKERS AND PATIENTS INJURED/DETAINED
34	HEALTH FACILITIES RE-OPENED
DISEASES <sup>4</sup>	
6,715,577	ACUTE RESPIRATORY INFECTION CASES
2,619,607	ACUTE DIARRHEA CASES
293	MEASLES CASES DURING OUTBREAK
585	SCABIES CASES DURING OUTBREAK
583	CCHF CASES DURING OUTBREAK

## SITUATION UPDATE

- Conflicts forced 6,772 people to flee from their homes in December, bringing the total number of Internally Displaced People (IDPs) to 436,935 in 2019.
- From January to December 2019, 295,743 people were affected by natural disasters throughout Afghanistan (149 killed, 165 injured).
- 32 provinces out of 34 experienced natural disaster during the period damaging 24,959 houses and destroying another 14,121 houses. Afghanistan is prone to earthquakes, flooding, drought, landslides, and avalanches<sup>3</sup>.
- Since January 2019, 496,526 people returned to Afghanistan from Pakistan, Iran and Turkey with significant needs in health and other basic services.
- 121 attacks on healthcare were reported since January 2019, resulting in the closure of 192 health facilities, where only 34 of them were re-opened. A total of 51 healthcare workers, patients and supportive staff were killed and 142 others injured.
- Total of 8 outbreaks were reported in December 2019 with a total caseload of 65 cases from 5 different diseases; bringing the total number of outbreaks to 744 outbreaks with a total caseload of 3722 in 2019.
- According to the projections of Afghanistan Humanitarian Needs Overview 2019, throughout the year, 1.9 million people were in need of emergency health services due to conflict, natural disasters and a lack of basic services.
- Since January 2019, Health Cluster partners provided lifesaving trauma care services to 180,251 In-patients and out-patients around the country, excluding road traffic accident and occupational injuries.
- WHO and Health Cluster implementing partners reached 1,622,845 beneficiaries (which included 965,425 women and girls) in 2019 in 342 districts across 34 provinces.

<sup>1</sup> Only conflict related IDPs.

<sup>2</sup> OCHA AFGHANISTAN Snapshot of Population Movements (Jan—Nov 2019)

<sup>3</sup> OCHA AFGHANISTAN Snapshot of Natural Disaster Events (Jan to Nov 2019)

<sup>4</sup> NDS Reporting (Jan—Nov 2019).

## Public health concerns

- Increasing trend of attacks on healthcare facilities and healthcare workers in terms of their frequency, severity and deadliness have continued. More advocacy is needed at all levels to ensure all parties to the conflict respect International Humanitarian Law.
- Unavailability of trained and skilled health workers, especially female health workers, in remote and hard-to-reach areas, prevents many women from accessing health facilities.
- With a current immunisation rate of 50 per cent, the risk of disease outbreaks in IDP sites is increasing. Scaling-up disease surveillance and response is necessary to prevent large-scale public health crises.
- First outbreak of Dengue fever reported In November 2019, with 11 lab confirmed cases and one associated death in the country. With a total of 744 outbreaks reported in 2019, the first outbreak of Dengue remains a cause for concern.

## Health needs, priorities and gaps

- The ongoing conflict in the country requires additional support for trauma care, mass casualty management, and blood banks across many provinces.
- Assistance for individuals with disabilities, often because of trauma, remains a significant gap that needs comprehensive action. The continuum of trauma care including rehabilitation and psychosocial support continues to be a major gap in health service provision for an expanding section of the population.
- Attacks on healthcare workers and health facilities have reduced the access to healthcare and strained health facilities in insecure areas.
- Control of outbreaks in IDPs remains a major public health concern; however, confirmation of outbreaks of emerging disease such as dengue fever in some areas requires serious efforts.

## WHO action

- WHO provided health/nutrition services to IDPs in Herat province through five mobile health teams.
- During the reporting period two Sub Health Centres (SHC) were deployed to Ghazni and Paktika provinces, and one CHC was upgraded to CHC+Level in Paktika province..
- Conducted 5 days training on blood bank standards and implementation for health personnel, and one-day MCM simulation exercise in Mirwais RH of southern region.
- Monitoring visits have been done from Ghazni PH and Qarabagh DH of Ghazni province.
- Health services provided to returnees coming from Iran through zero point health post located in Islam Qala border.
- Supply of one IEHK kit has been done to Nangarhar regional hospital.
- ETAT assessment was carried out in 5 provincial hospitals (Ghazni provincial hospital , Ghor PH, Badghis PH and Herat Regional hospital paediatric ward)
- PHC services have been provided and delivered to IDPs, returnees and host community through Mobile Health Teams (MHTs) in Qalat district of Zabul.

## Health cluster

- In response to conflict and natural disasters, the health cluster provided trauma care services through the assigned mobile health teams for people in need and delivered emergency health services to the returnees/IDPs and host communities in the country.
- Health cluster provided health emergency response to the IDPs from Achin district in Nangarhar through mobile teams and fixed HFs of BPHS partners.

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