



Radiology Ward, Paktia Regional Hospital. Digital X-Ray machine provided by WHO.

AFGHANISTAN

Emergency type: protracted emergency



2M
AFFECTED¹



115,467
DISPLACED^{1,2}



167,700
REFUGEES^{1,3}



70
IEHK KITS¹



87
OUTBREAKS¹

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
87	TOTAL NUMBER OF HEALTH FACILITIES CLOSED
09	HEALTH WORKERS AND PATIENTS KILLED
13	HEALTH WORKERS AND PATIENTS INJURED/ DETAINED
27	NUMBER OF HEALTH FACILITIES RE-OPENED
DISEASES	
2,519,706	ACUTE RESPIRATORY INFECTION CASES
409,191	ACUTE DIARRHEA CASES
149	MEASLES CASES DURING OUTBREAK
279	SCABIES DURING OUTBREAK
145	CHICKEN POX CASES DURING OUTBREAK

SITUATION UPDATE

- In April 2019, 20,521 people fled their homes due to conflict bringing the total number of IDPs in 2019 to 115,467 people.
- The flood season in Afghanistan primarily runs between March and June due to snow melt and rain. According to iMMAP analysis, 190,789 households (1,335,00 people) are living in areas that are vulnerable to flood impact. As of April 2019, floods affected over 203,873 people across 16 provinces resulting in 95 deaths and over 189,000 people in need of humanitarian support. There are serious concerns about increasing food insecurity, malnutrition and the spread of communicable diseases, including AWD/cholera, if the needs of flood-affected families are not addressed in a timely manner.
- 14 health teams were deployed on April 7 to investigate measles cases and review the status of measles vaccination among the IDP population in Herat
- Based on projections, there is a funding gap of 1 million USD for health humanitarian support in 2019.
- Humanitarian support for Badgis IDPS will end by June 2019, but limited health services, with a focus on scaling-up permanent facilities (BPHS) rather than mobile teams. There will be provision of malnutrition screening and treatment with a focus on fixed health facilities.
- During the month of April 2019 total 570 families of Pakistan north Waziristan refugees were displaced from Laman area Bermal district of Paktika province to Gulan refugees camp of Khost province.
- In the first four months of 2019, 47 attacks on healthcare were reported resulting in the closure of 98 health facilities, where only 27 of them re-opened. 13 healthcare workers and patients have been killed and 13 others injured.

¹ Since January 2019

² Only conflict related IDPs

³ OCHA Afghanistan Snapshot of Population Movements (Jan-Apr 2019).

Public health concerns

- Since the beginning of 2019, 82 deaths have been attributed to diarrhea (Case Fatality Rate at 0.8% - higher than normal). Recently, there have been disturbing increases in cases of AWD (Cholera TBC), Measles and malnutrition among IDPs in Hirat. All IDP sites report cases of acute watery diarrhea and/or acute bloody diarrhea.
- Unavailability of trained and skilled health workers in remote and hard-to-reach areas, especially female health worker prevent many women's access health facilities.
- Low routine Immunization coverage and bans on polio programme are counted as public health risk in the country, i.e. in East region there have been consecutive vaccine preventable disease outbreaks.

Health needs, priorities and gaps

- There is funding gap for healthcare services to Pakistani refugees in southeast region.
- According to Inter Cluster Quarterly pipeline tracking Report, there is \$1 million USD deficit where Health cluster will divert resources to avert full break. This funding gap lead to availability of on average 50% of the projected health needs in terms of Health KITs.
- Attacks on healthcare workers and health facilities contribute to a reduction in the access of people to healthcare.
- According to the 2019 Afghanistan Humanitarian Needs Overview, 1.9 million people will be in need of emergency health services due to conflict, natural disasters and a lack of basic services.
- War and conflict in the region affected the health services and caused displacement of people from their homes to safe places , increasing the number of IPDs.

WHO action

- WHO distributed 70 Inter-agency Emergency Health KITs' basic module for replenishment of regional warehouses in East, South and West regions.
- WHO conducted a two-day workshop with 17 participants from MoPH GDCM, GDPP, GDHR and blood bank to mental health policy, organogram and SOPs in the presence of EMRO mission
- WHO monitored Paktia Regional Hospital and Paktika Provincial Hospital on April 04, and April 21, 2019, where they found that the shortage of medicines and medical supplies were one of the major issues.
- WHO trained 9 nurses in Southeast region on Traige as part of preparedness to any mass casualties in April 2019.
- WHO constructed a 12 bed infection ward in Jawzjan, and started two 12 bed wards, each in Zabul and Takhar Provinces in April.
- WHO attended and facilitated the RMNCAH strategy mid-term review meeting.
- WHO introduced Trauma Care Services SOPs to all relevant staff of Kunduz Regional hospital.

Health cluster

- Health cluster continued to provide support to IDPs across Afghanistan. 112,600 people are expected to be in need of health services.
- One of the main challenges to providing humanitarian support to relocation in Badghis is that the allocated site has been rented for a period of only one year, while IDPs are likely to need solutions for a longer period.
- For drought response, the health, education and nutrition sector responses have now all exceeded their targets.

WHO is grateful for the continuous support of our generous donors: USAID, ECHO, CHF, Japan, Republic of Korea and CERF

Contact: Dr. Dauod Altaf, Team Leader Health Emergencies, altafm@who.int

FB: World Health Organization Afghanistan TTR: @WHOafghanistan
Web: www.emro.who.int/afghanistan altafm@who.int