WHO Afghanistan Monthly Programme Update: March 2017

Emergency Humanitarian Action

KEY UPDATES:

- Civilian casualties and major attacks are increasing in many parts of Afghanistan; a devastating attack on the Sardar Mohammad Daud Khan Hospital in central Kabul on 8 March claimed dozens of lives.
- Three more health facilities were forced to close in the southern region due to conflict in March; around 1700 families were displaced.
- Flash floods in Herat province killed four people and affected 352 families. Further 795 families were internally displaced in western provinces due to conflict.
- The number of returnees and refugees from Pakistan and Iran reached 56000 by the end on February 2017: 80% of them were undocumented returnees from Iran.
- More than 115 disease outbreaks were reported in the first quarter of 2017, of which 63% were measles and 10% Crimean-Congo haemorrhagic fever (CCHF).

PROGRAMME ACTIVITIES AND ACHIEVEMENTS:

- WHO-supported Kunduz Regional Hospital Trauma Care Unit (TCU) provided trauma care services for 627 trauma cases, including 497 outpatients and 151 admissions, and conducted 84 major and 67 minor surgeries in March 2017.
- WHO supplied medical and non-medical equipment to Kunduz TCU, including orthopaedic, laparotomy and neurosurgery sets, Dynacast plaster for orthopaedic case management, along with air conditioners and water coolers.
- Flood contingency supplies were prepositioned to WHO regional hubs and provincial health directorates, consisting of 46 Interagency Emergency Health Kits (IEHK), 34 pneumonia kits and 170 000 oral rehydration salt packs with 10 200 units of Ringer’s lactate solution and 10 000 units of saline solution to support health service provision for more than 100 000 people affected by ARI and diarrhoeal diseases all over the country.
- WHO conducted a public awareness campaign in Nangarhar province targeting returnees and host communities on the prevention of measles, tuberculosis (TB) acute respiratory infections (ARI) and diarrhoeal diseases through community outreach sessions, radio and TV spots, posters, billboards and leaflets and trainings on infection prevention in health facilities.
- WHO provided medical supplies to cover the overload of respiratory and diarrhoeal disease cases in Nangarhar and Nuristan provinces.
- 60 community health workers from Kandahar province were trained on first aid by the Afghan Red Crescent Society (ARCS) in collaboration with the Public Health Directorate through financial support from WHO.
- Blood bank monitoring conducted in 23 health facilities in March 2017.
PUBLIC HEALTH RISKS AND CHALLENGES:

- Continuing conflict and attacks on civilian targets cause closures of health facilities, hampering people’s access to basic health care around Afghanistan.
- Escalating conflict and the influx of returnees and refugees will present a major challenge to the public health sector also in 2017.
- Measles outbreaks are on the rise with 73 outbreaks reported only in the first quarter of the year.
- Although the damage caused by floods this year was not as extensive as in previous years, continuing heavy rains could increase the risk of diarrhoeal diseases, acute respiratory infections (ARI) and malaria outbreaks in high-risk provinces.

Health Awareness Campaign Targeting Returnees and IDPs in Nangarhar in March 2017:

- Focus on acute respiratory infections, cholera, diarrhoea, infection prevention, TB, measles & trauma.
- 225 female community health workers (CHWs) & 336 male CHWs attended health education sessions.
- 200 returnees & refugees, 47 community elders, 26 religious leaders and 23 teachers attended outreach sessions.
- Over 1.3 million people reached.
- 1200 minutes of health messages broadcast on local radios, 650 minutes on TV.
- 2700 posters & 640 leaflets distributed.

Health Cluster Coordination:

- Health Cluster partners served 214,268 beneficiaries from 82 high-risk districts suffering from conflict, population movement and disease outbreaks during the first quarter of 2017—interventions were implemented by 12 partners providing services through 123 health facilities.
- Health Cluster coordinated the CHF project proposal development and submission process—proposals submitted by partners are currently under review.
- Health Cluster components of the Information Management System in the Command and Control Centre (CCC) for health emergencies in MoPH have been installed and CCC staff have been trained on accessing the report hub and producing updated reports.
- Health Cluster partners continue to provide basic health care services to returnees from Pakistan at the Torkham border “zero point.”

Programme Update
Emergency Humanitarian Action WHO Afghanistan

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