



# AFGHANISTAN

## EMERGENCY SITUATION REPORT

No. 14/ Reporting Period: 1–15 March 2022

Key Figures	People reached with health services and supplies	Health facilities supported	Health workers trained	People reached by medical kits deployed	Rapid response teams deployed to outbreak areas
	<b>6.4M</b>	<b>271</b>	<b>238</b>	<b>5.3M</b>	<b>111</b>
Ongoing Outbreaks	Total COVID-19 confirmed cases	Acute Watery Diarrhoea cases	Dengue Fever cases	Measles cases	Malaria cases
	<b>175,229</b>	<b>5,137</b>	<b>775</b>	<b>48,366</b>	<b>468</b>



### Overview

With support from partners and donors, the World Health Organization (WHO) continues to sustain the functionality of 104 health facilities across the 34 provinces of Afghanistan. This includes 96 hospitals under the Sehatmandi Project, five COVID-19 hospitals located in Kabul, Uruzgan, Ghazni, Paktik and Nangarhar provinces, two national hospitals in Kabul, and one emergency hospital in Panjshir province. WHO has teams on-the-ground that are working with local health workers and partners to ensure delivery of health services.

To improve quality of health services and strengthen pharmaceutical and stock management at the hospital and regional levels, a delegation from WHO country office

visited Mirwais Regional Hospital, Spin-Boldak District Hospital and WHO medical stock in Kandahar sub office.

From 12 to 17 March 2021, Afghanistan launched a measles immunization campaign for 49 districts in 24 provinces aimed to cover 1.2 million children ages 6-59 months. The campaign is part of the national response measure to stop the spread of the outbreak, save lives of the young children and reduce the burden on health systems. WHO supports in the management of the vaccination, including technical advice, training of staff, funding for trainings, costs for operation as well as with provision of supplies and logistics. Oral polio drops are also given to children in combination with the measles vaccine.



WHO Representative to Afghanistan, Dr Luo Dapeng, vaccinates a child in Wardak Province, Afghanistan during the measles vaccination campaign, 12-17 March 2022

WHO continues the partnership with 14 NGOs to support the implementation of the next phase of the Sehatmandi project at the hospital level (secondary healthcare services) in 34 provinces of the country through World Bank-led Afghanistan Reconstruction Trust Fund (ARTF). WHO has already disbursed the first installment to those 14 NGOs (\$12.07 M USD), and 8277 healthcare workers have received the salary for February 2022, including 2178 female staff (26.3%).

During the last two weeks, reduction in the new cases of acute watery diarrhea (AWD) continues while the measles outbreaks cases showed slight reduction when compared to the preceding two weeks, even though new cases are reported every day. WHO maintains 111 rapid response teams (RRT) on-the-ground to support surveillance and response.

During the reporting period, WHO donated 221 emergency medical kits and trauma care equipment to the International Medical Corps (IMC) and International Rescue Committee (IRC) NGOs to run their mobile health teams (MHTs) in Kabul and Bamyan provinces and provide primary health services to vulnerable people living in underserved areas.

WHO remains committed to improving the capacity of health care workers in the country. In the last two weeks, WHO trained 238 health care workers on basic emergency care, emergency counseling, case investigation and sample collection during outbreaks, and response to survivors of violence.

Trauma and post-trauma physical rehabilitation services were provided to 13,805 people through the WHO-supported Trauma Care Units (TCUs) and physical

rehabilitation centers. Emergency primary healthcare services were extended to 132,624 people living in underserved and remote areas of Afghanistan through MHTs and sub health centers (SHCs). A total of 8,074 emergency medical supplies and kits deployed by WHO to various areas in the last two weeks that will reach more than 5.3 million people in various parts of the country.

During the last two weeks, WHO teams visited Bamyan, Faryab, Samangan, Jawzjan, Sar-e-Pul, Kandahar, provinces to monitor delivery of health services in WHO-supported health facilities. During these visits, the teams met with Governors, provincial public health directors, Basic Package of Health Services (BPHS) and Essential Package of Hospital Services (EPHS) implementing NGOs, and other health cluster partners.

Emergency reproductive, maternal and child health services are not readily accessible to a significant part of the vulnerable population due to limited provider capacity, including a weak referral system, an unprecedented level of malnutrition that is making people more vulnerable to illness and diseases like measles.

The country continues to face multiple outbreaks, including COVID-19, measles, AWD, dengue fever and malaria. Despite tremendous efforts by WHO and partners, the health system continues to struggle with shortages of supplies, fuel, and money to pay staff.

The major issue is funding to sustain health service delivery. There are still over 1200 health facilities and more than 11 000 health workers who are not covered through current support. Even the facilities WHO is supporting only have funding until the end of June 2022.



Measles vaccination reached the Nomad population of Kohsan District of Herat Province of Afghanistan during the measles vaccination campaign, 12-17 March 2022. Health workers on-the-ground take extra miles to reach the unreachable and ensure no one is left behind in the measles vaccination.







**Sustaining the Health Service Delivery**

WHO continues the partnership with 14 NGOs to support the implementation of the next phase of the Sehatmandi project at the hospital level (secondary healthcare services) in 34 provinces of the country through ARTF. WHO has already disbursed the first installment to those 14 NGOs (\$12.07 M USD). The salaries of 8277 healthcare workers for February 2022 have been paid, including 2178 female staff (26.3%).

The 20 monitoring officers hired by WHO have completed the baseline assessment in hospitals using structured assessment tool. By the second week of March 2022, 72 out of 96 hospitals in 29 provinces (75.0%) have been monitored.

During the month of February 2022, a total of 985 857 people received outpatient service and a total of 63 186 patients received inpatient health care services through the hospitals supported by WHO. In addition, 29 878 institutional deliveries, 2277 Cesarean section, and 5161 major surgeries have been performed in those 96 WHO-supported hospitals.

Services Provided through 96 WHO-supported hospitals (February 2022)		
OPD Services 985,857		IPD Services 63,186
140,408	 male under 5	12,305
132,744	 female under 5	10,031
278,546	 male, over 5	10,220
434,159	 female, over 5	30,630

Health facilities being supported by WHO			
Health Facilities (HFs) Type	Regional Hospital (RH)	Provincial Hospital (RH)	District Hospital (DH)
Number of supported HFs	2	16	78

To serve the vulnerable people and respond to the urgent needs of the people, WHO is committed to provide full support to 10 COVID-19 hospitals through the implementing partners. During the reporting period WHO is fully supporting five COVID-19 hospitals located in Kabul, Nanagarhar, Uruzgan, Paktia and Ghazni provinces from February 2022. The support to five more COVID-19 hospitals will start from March 2022.

**About the Sehatmandi Project**

Jointly implemented by WHO and UNICEF, and funded by the World Bank-led Afghanistan Reconstruction Trust Fund (ARTF), the second phase of Sehatmandi Project is implemented from February 2022 to June 2022.

During this period, WHO is responsible for secondary healthcare.

WHO is responsible for the management of equitable and uninterrupted delivery of quality secondary care health services through district, provincial and regional hospitals, aimed at improving service delivery and strengthening the Afghanistan health system and its performance.

The first phase of Sehatmadi was implemented from November 2021 to January 2022, with support from the United Nations Central Emergency Response Fund (UN CERF). During this period, WHO has provided access to health services to 17 million people (8,711,934 women and 3,555,892 children under five years of age) and ensured the functionality of 1202 health facilities.



Through the support of Sehatmandi Project in health facilities, health workers can now do surgeries at the hospitals and save lives.

Given the huge needs in provision of hospital services in the country, WHO is providing a full support to Ata Turk Hospital since January 2022, and to Panjshir Anabah Emergency Hospital since February 2022. WHO is also providing support to Infectious Disease Hospital in Kabul in terms of food for patients, fuel, gas and other logistic supplies.

Moreover, WHO is currently advocating to expand its support to other different level hospitals that remain without any support or non-functional.

To support most needy people living in underserved areas of the country, WHO deployed 23 MHTs in Helmand, Nangarhar, Laghman, Kunar, and Nuristan provinces that provide primary health care and physical rehabilitation services.



### Health Partners' Coordination

As a health cluster lead agency, WHO is in charge of health cluster partners' coordination to ensure coordinated response to the health emergencies.

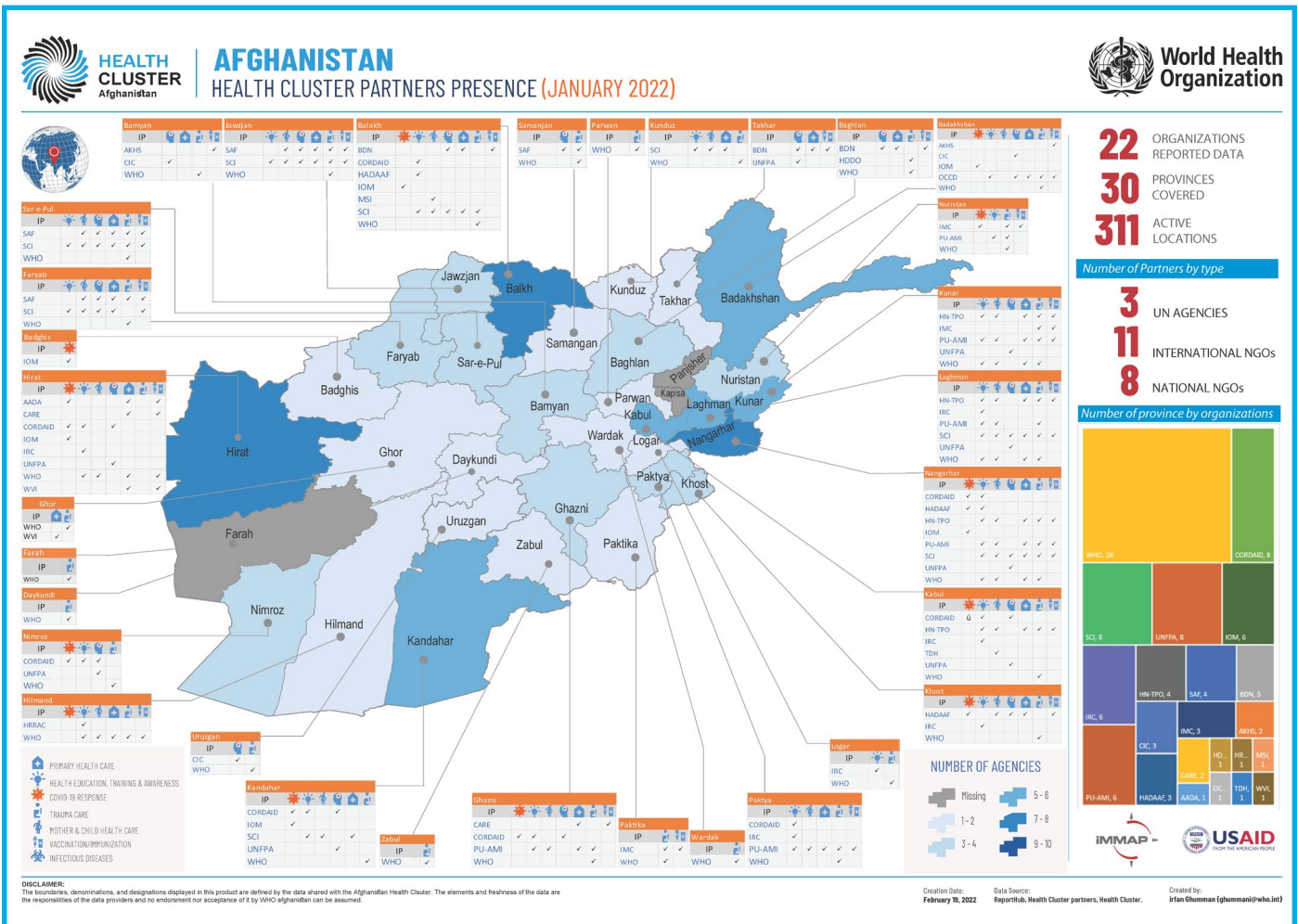
The Health Cluster partners, in a consultative workshop conducted on 2 March 2022, agreed to prioritize: essential life-saving health care services in underserved and flood-prone locations; response to COVID-19, including case management; and response to infectious diseases outbreaks, with focus on measles and AWD. Through 11 recommended projects, the Health Cluster aims to serve over 1.5 million beneficiaries with essential health services.

The Health Cluster Information Management (IM) team initiated the process to establish a registry of health assessments. The Information Management Working Group (IM WG) meeting was conducted on 6 March 2022 and discussed on ToRs and IM priorities.

The health cluster team, in coordination with WASH cluster, prepared for a joint Health and WASH Cluster partners' Sensitization Workshop on Integrated AWD/Cholera Preparedness and Response Plan 2022 and the workshop is scheduled on 27 March 2022.



WHO Health Emergency Team Lead Dr Alaa Abouzeid and WHO Health Cluster Coordinator Dr Jamshed Tanoli conducted field visits to WHO-supported health facilities, such as this physical rehabilitation center in Kunar Province. They also met with health cluster partners on-the-ground.



### Trauma and Physical Rehabilitation Care Services

During the month of February 2022, there were 13,805 people (4,444 female and 9,361 male) who received trauma care and post-trauma physical rehabilitation services through the WHO-supported health facilities and physical rehabilitation centers.

During the reporting period, 48 health care workers from eastern region of the country received training on Basic Emergency Care.

Beneficiaries Disaggregation				
Over 18		6,248 Male		2,603 Female
Under 18		3,113 Male		1,841 Female



WHO conducted Basic Emergency Care course on the management of acute illness and injury in resource-limited settings for 50 doctors, nurses, midwives and anesthesia technicians from southern provinces of Kandahar, Helmand, Zabul, Urzgan and Nimroz Provinces.

WHO continues to provide full support to five post-trauma physical rehabilitation centers through contracting out modality in Baghlan, Zabul, Kunar, Laghman, and Paktia provinces.





Over the past two weeks, WHO delivered 2,890 Trauma Emergency Surgery Kits (TESK), 12 150 liter autoclaves, 260 blood bags, 5,424 IV Fluids, and 47 examination gloves, to 98 health facilities for provision of emergency PHC services to the people living in underserved areas of Central, Western, Eastern, Northern, and Southern Regions. The supplied medical kits will benefit over 300,000 individuals in critical need of trauma care services in the next three months.

Services Provided	
3,782	blood transfusion
144	people received orthoses devices
124	people received prostheses
154	people received assistive devices and walking aids
7,364	people received physiotherapy
624	people received awareness on disability, early identification and prevention of disability, and victim assistance.



### Emergency Primary Health Care

During the month of February 2022, there were 132,624 people (51,174 female and 81,450 male) living in underserved and remote areas of Afghanistan who received emergency primary health care services through 23 WHO-supported Mobile Health Teams. WHO continues to support 23 mobile health teams in underserved areas of Helmand, Nangarhar, Laghman, Kunar, and Nuristan provinces.

Beneficiaries Disaggregation				
Over 5		68,627 Male		51,174 Female
Under 5		12,823 Male		10,073 Female

Moreover, 104 underserved areas located in central and central highland regions need primary health care services, and around 20% health facilities in eastern region do not have access to safe water supply.

The MHTs provide primary healthcare services such as EPI, Anti- and Post- Natal care, family planning, nutrition counselling/screening and referral, skilled birth attendance and other basic primary healthcare in accordance with the standard MHT package of services.

During the last two weeks WHO has provided 4,474 Interagency Emergency Medical Kits (IEHKs), 28 Pneumonia kits, 630 Non-Communicable Diseases (NCD) kits, 37 Cholera kits, and 15 Severe Acute Malnutrition Kits to 98

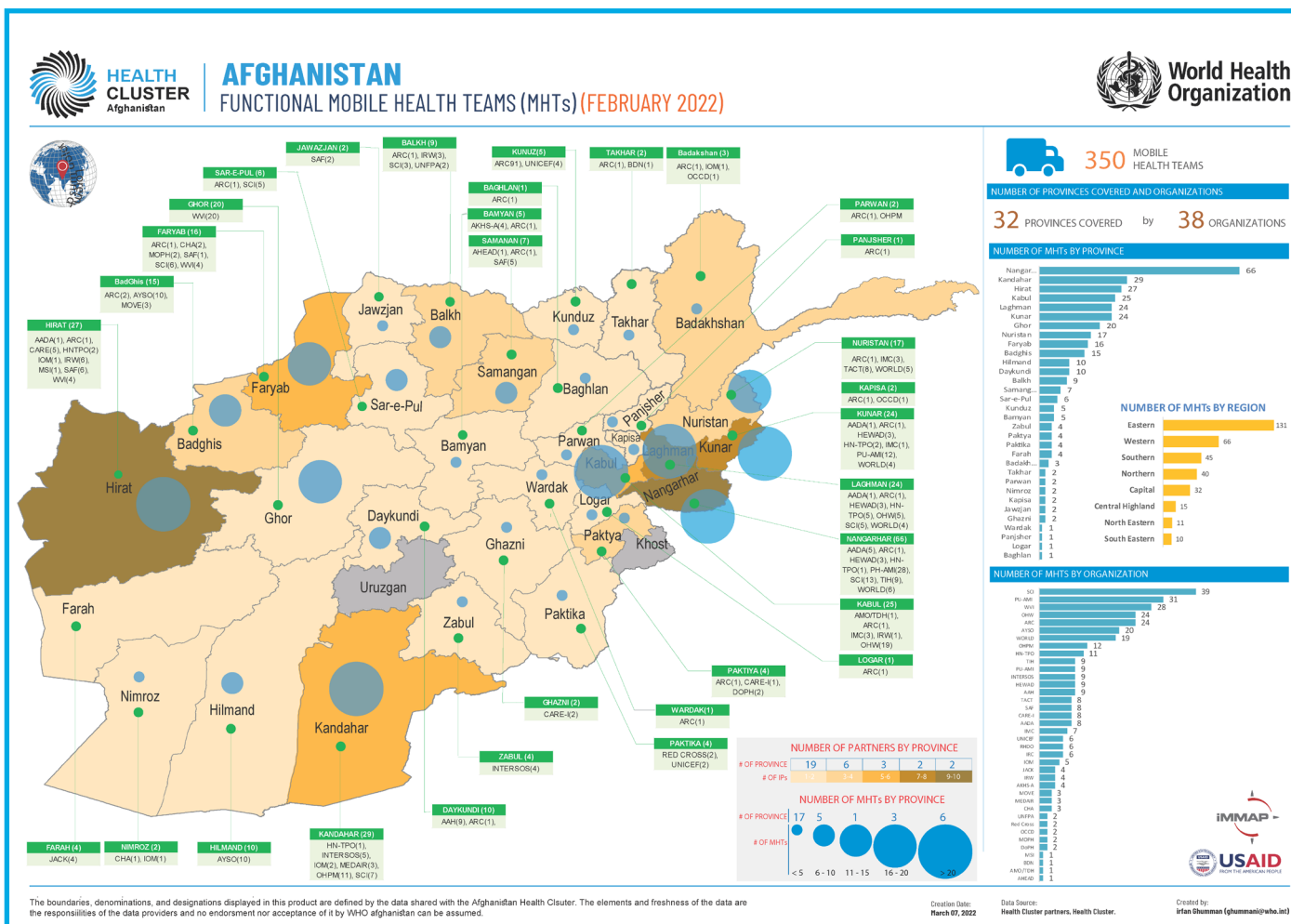
Services Provided	
2,922	Women received ANC
1,540	Women received PNC
661	CBA Women and under 5 children received TT2+, measles, and PENTA-3 Vaccination
87	Institutional deliveries
635	Women received Family planning services and awareness
46,182	People living in remote and underserved areas received health education and awareness
2,411	Pregnant and Lactating Women received nutrition screening and Infant and Young Child Feeding (IYCF) counselling
2,830	Under 5 children received nutrition screening, and referral services.

health facilities for provision of emergency PHC services to the people living in underserved areas of Central, Western, Eastern, Northern, and Southern Regions. The medical kits will benefit around 5,000,000 individuals living in underserved areas in meeting their basic healthcare needs over the next three months.

WHO also donated 221 emergency medical kits and trauma care equipment to IMC and IRC NGOs to run their Mobile Health teams in Kabul and Bamyan provinces and provide primary health services to vulnerable people living in underserved areas.



The mobile health teams provide primary health care services to people in remote and hard to areas. This MHT in Alishang district of Laghman Province is one of the many WHO-funded mobile health clinics in many parts of the country who ensure women and children can access health services.



The boundaries, denominations, and designations displayed in this product are defined by the data shared with the Afghanistan Health Cluster. The elements and freshness of the data are the responsibilities of the data providers and no endorsement nor acceptance of by WHO Afghanistan can be assumed.

Creation Date: March 07, 2022



Data Source: Health Cluster partners, Health Cluster.

Created by: Irfan Ghuman (ghuman@who.int)

### Public Nutrition in Emergencies

In February 2022, there were 1,637 malnourished children with medical complication (815 boys and 822 girls) who were admitted and treated in WHO-supported In Patient Department - Severe Acute Malnutrition (IPD-SAM) centers across the country.

WHO also conducted IPD-SAM management training in Logar and Kabul provinces and 28 health workers (12 female and 16 male) attended the training. A milk preparation kit was provided to French Medical Institute for Children (FMIC), the national referral center for complicated IPD-SAM to support in providing free-of-cost services to the referred cases.

Beneficiaries Disaggregation				
1,637 Under 5		815 boys		822 girls

WHO continues to provide regular support to 123 IPD-SAM centers located across the country in terms of medicine, medical and non- medical supplies and equipment, and staff training. The IPD- SAM centers are for management of SAM cases with medical complications which need hospitalization and specialized medical treatment.

### WHE Infectious Hazard Preparedness/ Surveillance





In the the last two weeks, surveillance activities (outbreaks investigation, reporting, and response) were in place for four major outbreaks (Acute Water Diarrhea, Dengue Fever, Measles, and COVID-19). WHO has deployed 111 Rapid Response Teams (RRTs) for outbreaks investigation, data line listing, and sample collection and management for COVID-19 and other epidemic prone diseases in the country.

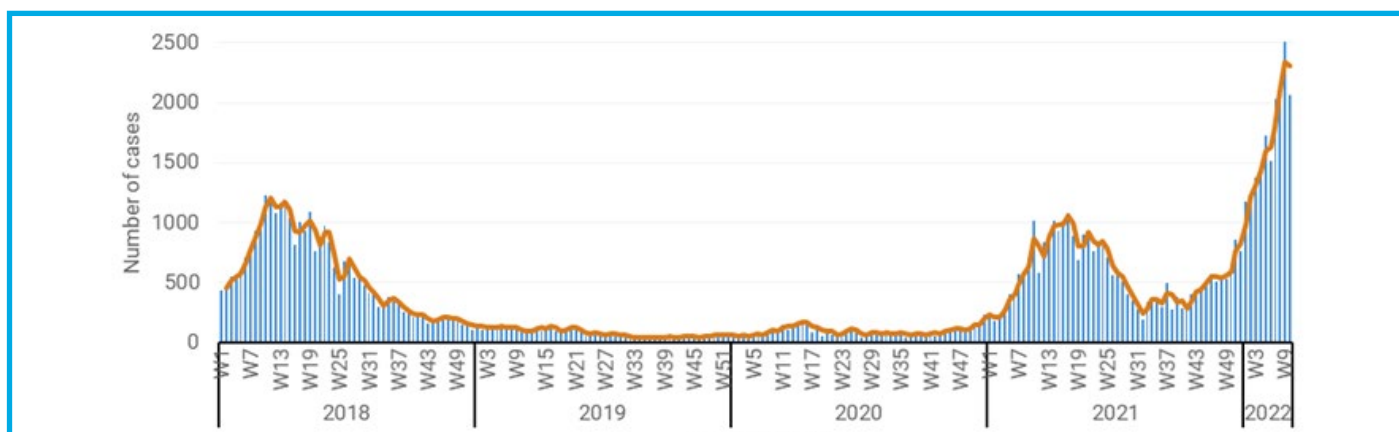
WHO continues to support disease surveillance activities (outbreak investigation, reporting and response) in Afghanistan through provision of medical and non-medical supplies, support and rehabilitation of laboratories, development of technical guidelines and Standard Operation Procedures (SoPs), and capacity building.

During epidemiological week 9, the number of new AWD cases slightly increased as compared to week 8 (33 new cases with no deaths). The most affected districts are Kabul City (3,913 cases; 76.3%) and Sorobi (819 cases, 16.0 %). Of the total 5,130 cases, 17.5% (892) are children below

5 years, while 48.9% (2,508) are females and 69.2% (3,514) had severe dehydration.

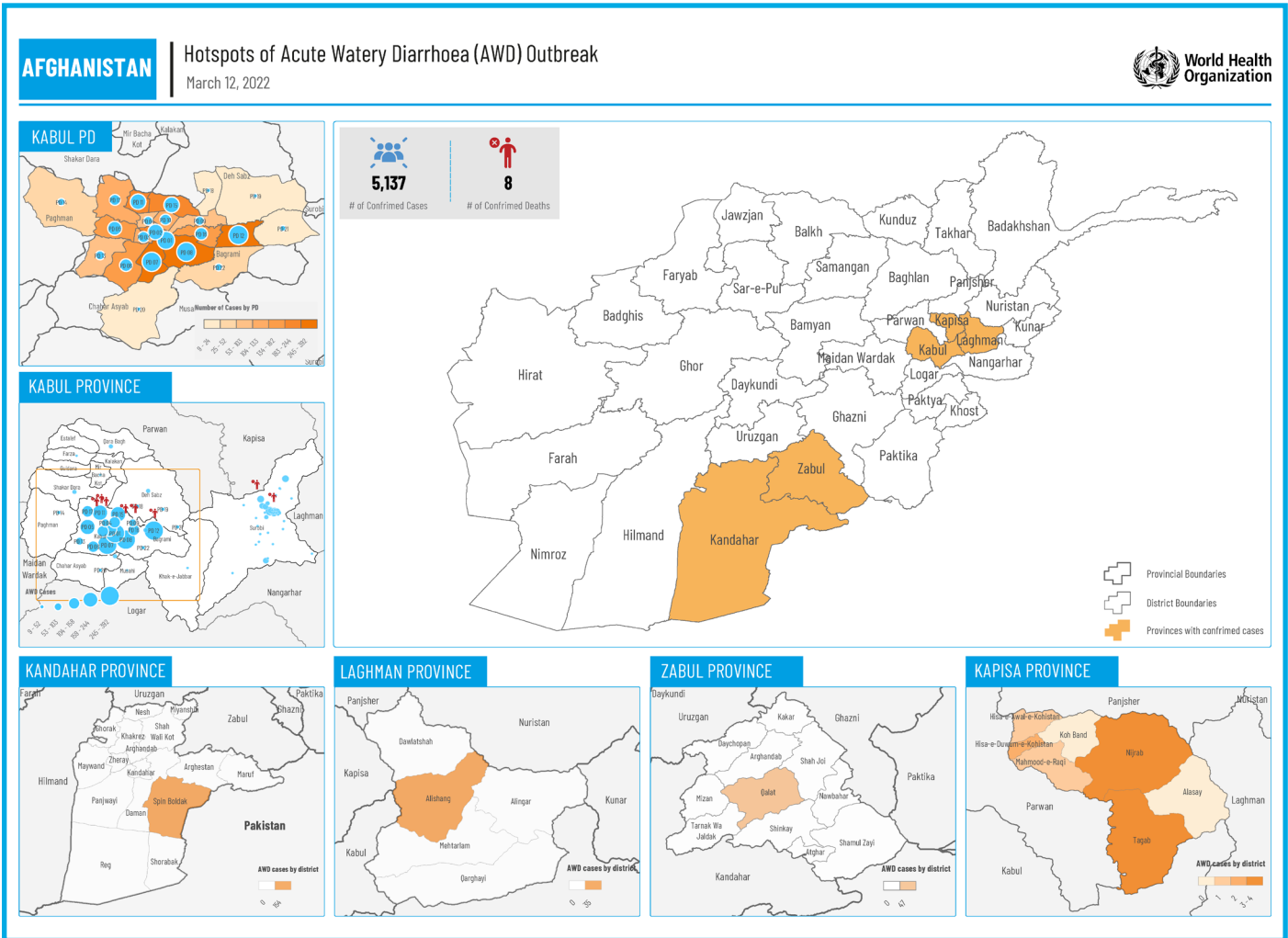
The first few cases of acute watery diarrhea were reported to the National Disease Surveillance and Response system (NDSR), Ministry of Public Health, and WHO on 12 September 2021 from Tapa village of Sorobi district in Kabul province and spread to 13 districts of Kabul, Kapisa, Zabul, Kandahar, Laghman and Logar provinces. The drivers of the epidemic are limited access to safe water, poor sanitation, and hygiene practices.

Outbreaks detected				
AWD		2,629 Male		2,508 Female
Measles		38,762 under 5		9,604 over 5

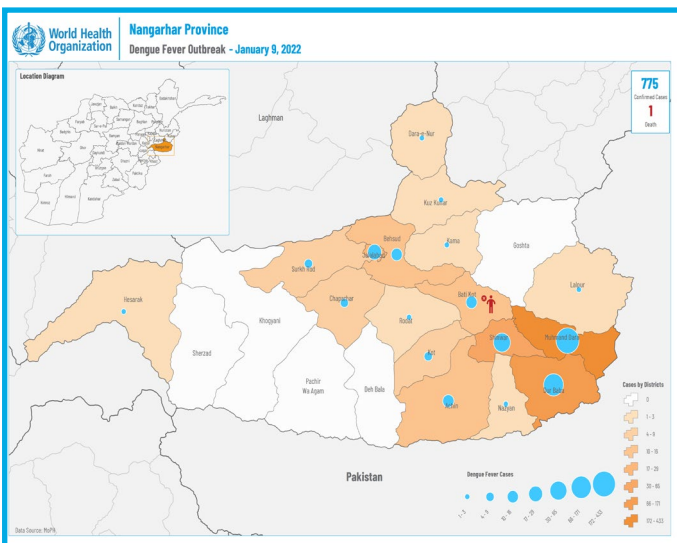


Weekly epidemiological curve of suspected measles cases in Afghanistan, 2018-2022

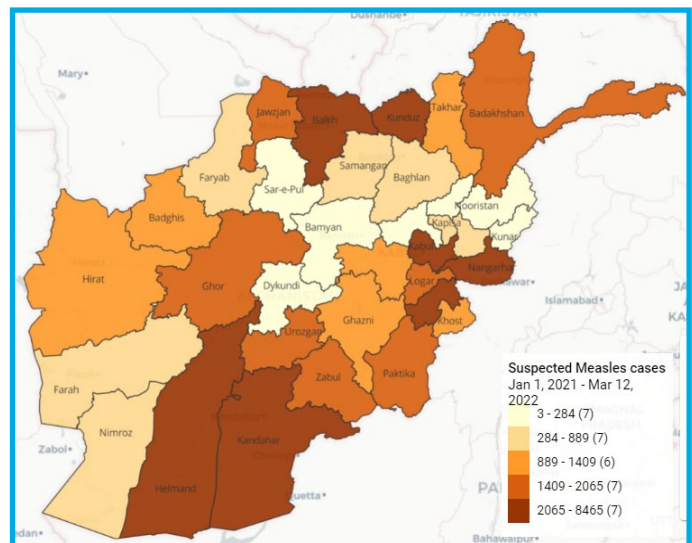




Hotspot areas of acute watery diarrhoea outbreak



Hotspot areas of dengue outbreak



Hotspot areas of measles outbreak

 **COVID-19**

Cumulatively, 176,229 confirmed cases (overall positivity of 32.1%) of COVID-19 with 7,643 associated deaths (case fatality ratio = 4.33%) have been reported in Afghanistan. As of 5 March 2022, 90.1 % of the cases have recovered.






From the 40 COVID-19 hospitals across Afghanistan, 21 hospitals offer COVID-19 treatment, with 19 others have been closed due to lack of funding. WHO is currently providing full running cost of the following COVID-19 hospitals/ health facilities starting February 2022 for 5-12 months:

1. Nangahar COVID-19 with 50 beds- Healthnet TPO
2. Ghazni COVID-19 Hospital with 25 beds- AADA
3. Uruzgan COVID-19 Hospital with 20 beds- MOVE
4. Afghan Japan COVID-19 Hospital with 100 beds- Healthnet TPO
5. Paktia COVID-19 Hospital with 50 beds- AADA

WHO is also supporting full running cost to the following hospitals:

- Kunar COVID-19 Hospital with 10 beds – with Healthnet TPO
- Zabol COVID-19 Hospital with 20 beds – with AADA
- Nimroz COVID-19 Hospital with 20 beds – with CHA
- Indonesia COVID-19 hospital in Kabul with 70 beds – with JACK, starting March 1


To improve capacity of Rapid Response teams in case investigation and sample collection, WHO conducted training for 32 RRT members from Kabul, Kunar, Laghman, Nangarahr and Nuristan provinces.

COVID-19		
Bi-weekly figures		Total figures
2,664	 COVID-19 cases	176,229
47	 Deaths	7,643
25%	 Positivity rate	32.1%
1.2%	 Fatality rate	4.33%
144,659 fully vaccinated 19,143 partially vaccinated	 Vaccination	4,346,882 fully vaccinated 1,323,210 partially vaccinated

To accelerate COVID-19 testing in the country, WHO, through support from the European Union and the Government of Canada, supplied 1657 VTM kits and 2460 amplification kits to all the COVID-19 public diagnostic centers in the country.



WHO continues to provide lab equipment and supplies to test for COVID-19, with support from the Government of Canada and the European Union. These additional supplies can make 120,000 RT-PCR tests and are on their way to the 36 WHO-supported laboratories throughout Afghanistan.


 **Water Sanitation and Hygiene (WASH) at health facilities**

As a normative agency for WASH at the facilities and as part of its global mandate, WHO is focusing on enhancing WASH, and medical waste management system in health facilities to ensure safe and hygienic environment.

WHO continues to support the following WASH activities:

- Establishment of 21-bed infectious disease ward in Laghman Provincial Hospital
- Establishment of 10-bed trauma care unit in Spin Boldak District Hospital
- Establishment of 20-bed emergency room in Infectious Disease Hospital of Kabul

During the last two weeks, the rehabilitation of nine district hospitals located in remote districts of Ghazni, Laghman, and Kabul provinces has started and targeted to be completed within the next few weeks.

 **Mental Health and Psychosocial Support (MHPSS) and Drug Addiction**

A 5-day Emergency Counseling training was conducted for 60 nurses and midwives from Bamyan, Maidan Wardak, Ghazni and Logar provinces. The training was designed to enable health workers to provide emergency counseling for people affected by emergencies and disasters whenever needed.

During the reporting period, WHO conducted Psychosocial First Aid (PFA) and Stress Management training for 20 Community Health Workers (CHWs) and Community Health Supervisors from Hilmand and Nimroz provinces.

Considering the situation in Afghanistan and need for mental health and psychosocial support, experts from WHO regional office (EMRO) and Headquarters in Geneva conducted field mission and held bilateral meetings with the Ministry of Public Health (MoPH) about the implementation of mental health Gap Action Program-Intervention Guide (mhGAP IG) in primary health care centers. They also advocated for support in establishing additional mental health centers and integration of drug demand reduction directorate within the mental department of MoPH. The delegation also visited the Mental Health Hospital in Kabul City to monitor the existing psychiatric services, and identify gaps and challenges in the hospital. They also met with Kabul Medical University to start a diploma program on mental health in close collaboration of MoPH and WHO.



WHO continues to train health workers in providing emergency counselling sessions for people affected by disasters and emergencies. This training in Kabul in early March 2022 was participated in by nurses and midwives (26 females and 4 males).



**Gender Based Violence/ Prevention of Sexual Exploitation and Abuse (GBV/ PSEA)**

During the last two weeks, there were six GBV cases that have been reported and received the required health services and treatment in national advanced GBV referral center. This included two physical violence, one emotional violence, one denial of resources, one forced marriage, and one sexual violence.

Since the start of 2022, a total of 47 GBV cases have been reported and provided the necessary health services in national advanced GBV referral center. This included 16 physical violence, seven emotional violence, six denial of resources, nine forced marriage and nine sexual violence.

From the start of 2022, there were two batches of training on “health response to survivor of violence in emergency setting”. About 78 healthcare workers in Western and Eastern region have been trained on strengthening the knowledge and skills of health care providers on key GBV health issues and understanding how to deal with GBV cases in emergency. The 78 trainees included 29 medical doctors, 23 nurses, 10 Psychosocial Counselors, and 16 midwives.



**Information Management and Monitoring**

The Health Services Availability Monitoring System (HeRAMS), an online information system platform in Afghanistan, has started to generate information on available resources on the health facilities across the country. Currently 2,865 out of 3,088 health facilities have entered their data into the HeRAMS online system.

As part of monitoring, teams from WHO, Assistance Agency for Development of Afghanistan (AADA) and Relief Humanitarian and Development Organization (RHDO) visited Herat on 24 February - 10 March to support the sub office operation. They conducted coordination meetings with provincial health teams and stakeholders and visited two WHO-supported health facilities: Guzara District hospital on 7 March and Islamqala Zero Point clinic on 8 March located in Afghanistan-Iran border.

**“** I am the only woman doctor looking after COVID-19 patients in the Afghan-Japan Hospital in Kabul. The support WHO and the European Union has provided to our hospital enabled us to take care of our patients from many provinces of Afghanistan, especially those in the intensive care unit.

During this 4th wave of the COVID-19 pandemic, we are seeing increasing number of patients coming to the hospital and majority of them have co-morbidities.

As health workers, we continue to look after them even though we operate in extremely difficult circumstances. My role is to save lives and I will continue to serve my people.”



**RAZIA GHAFARI**  
Woman Doctor, COVID-19 Wards  
Afghan-Japan Hospital



**World Health Organization**  
Afghanistan

In collaboration with the  
European Union



#IWD2022
#WHOwithAfghanWomenHealthWorkers
08 March 2022

---

**“** In my job, I do screening of malnutrition and growth monitoring in children under 5 years old. I love working with children because they are beautiful and need all our support.

For the little girls that are thinking about what to do in the future, I encourage them to study health and become nutrition nurses like me to help reduce the malnutrition levels among children in our country.”



**RAHIMA QAMBARI**  
Nutrition Nurse, Mobile Health Team  
Wali Aser IDP camp



**World Health Organization**  
Afghanistan

In collaboration with the  
European Union



#IWD2022
#WHOwithAfghanWomenHealthWorkers
08 March 2022

On International Women’s Day (8 March), and every day, the World Health Organization in Afghanistan acknowledges the dedication and bravery of Afghan women health workers as they continue to work tirelessly to deliver health services in the midst of the challenging situation in the country.

For more information about WHO’s work in emergencies, contact:

**Dr Alaa Abouzaid, Emergency Team Lead, WHO Afghanistan, Email: abouzeida@who.int**

**Ms Joy Rivaca, Head of Communications, WHO Afghanistan, Email: caminadej@who.int**