Afghanistan Flooding









Field visit to flood-affected area of Bilcheragh district in Faryab province. © RHCC for the northern region

Key messages:

- On 1st June, WHO provided support to the flood-affected district of Yamgan by supplying additional medical resources, including Pneumonia and IEHK kits.
- The fourth batch of Psychosocial First Aid (PFA) and Stress Management training commenced in Baghlan on 3rd June targeting 48 Community Health Workers (CHWs) and Community Health Staff (CHS) from floodaffected districts in Baghlan province.
- Field assessment visits and coordination meetings with health partners and stakeholders continue in the northeast region provinces to assess the required emergency response. Partners involved include IMC, AADA, SCI, SAF, ORCD, and World Vision.

Situation update:

The almost 10 days of torrential rains that hit many parts of Afghanistan since May 10 have severely affected provinces in the north, northeast, and west regions of the country, causing extensive damage to thousands of agricultural land and homes. This has also resulted in significant damage to over 30 health facilities, highlighting the critical need for humanitarian support, especially in healthcare.

The current situation is stable, but there is a pressing need to restore normalcy and provide ongoing health support in affected areas. WHO is actively collaborating with health cluster partners and stakeholders to maintain health response efforts, including the prepositioning of additional medical stock to address emerging health needs.

Surveillance Support Teams (SSTs) are also actively engaged in affected areas, enhancing disease surveillance and detecting waterborne illnesses. Many other health response efforts are underway to restore essential services to the affected population, with a focus on meeting immediate health needs. Coordination with partners and stakeholders remains crucial for a comprehensive and effective response to this ongoing humanitarian crisis.

Epidemiological update:

1. Active surveillance in Baghlan province:

- Five Surveillance Support Teams (SSTs) are deployed, with two originally located in Baghlan and three mobilized from neighboring provinces. During this period, the following infectious diseases have been detected:
 - 1383 cases of Acute Respiratory Infections (ARI) pneumonia
 - 1322 cases of Acute Watery Diarrhea (AWD) with dehydration
 - 196 suspected cases of measles
 - 297 suspected cases of COVID-19
- Furthermore, 239 Rapid Diagnostic Tests (RDTs) were conducted for suspected COVID-19 cases, with 41 positive results (positivity rate: 17.2%).
- Approximately 91 Polymerase Chain Reaction (PCR) samples were taken (from positive RDTs and separate samples) and sent to the laboratory. Of these samples, 9 tested positive out of 62 processed samples (positivity rate: 14.5%), while the remaining samples are still being processed.
- Sixteen RDTs were conducted for AWD with dehydration cases, with only one positive result. A sample was taken for culture and sent to the laboratory (positivity rate: 6.3%).
- Samples from 149 suspected measles cases were sent to the laboratory, with 9 positive results out of 54 tested samples (positivity rate: 16.7%). The remaining samples are still being processed in the laboratory.

Table 1: Number of reported cases of infectious diseases in flood-affected districts of Baghlan province, from 11 May – 4 June 2024

Diseases	Number of reported cases during 11 May - 04 Jun 2024							
	Male		Fen	nale	Total			
	<5 Years	>5 Years	<5 Years	>5 Years	Male	Female	Total	
ARI-Pneumonia	438	300	326	319	738	645	1383	
Suspected measles	96	18	75	7	114	82	196	
AWD with dehydration	327	328	287	380	655	667	1322	
Suspected COVID-19	10	72	25	190	82	215	297	
Total	871	718	713	896	1589	1609	3198	

2. Active surveillance in Badghis during 26 May to 2 June 2024:

- During the mentioned period, the below infectious diseases have been detected:
 - 143 ARI Pneumonia cases
 - 32 AWD with dehydration cases
 - 4 suspected measles cases
 - 42 suspected COVID-19 cases

Table 2: Number of infectious diseases reported through Indicator-Based Surveillance (IBS) in 6 flood-affected provinces

Provinces	AWD with dehydration		Suspected measles		ARI-Pne	umonia	COVID-19	
	Week 22 (26 May – 01 Jun 2024)	Cumulative 01 Jan - 01 Jun 2024	Week 22 (26 May – 01 Jun 2024)	Cumulative 01 Jan - 01 Jun 2024	Week 22 (26 May – 01 Jun 2024)	Week 22 (26 May – 01 Jun 2024)	Cumulative 01 Jan-25 May 2024	Cumulative 01 Jan - 01 Jun 2024
Baghlan¹	290	1367	71	676	543	18 761	0	0
Badakhshan ²	9	195	7	61	480	11 781	2	135
Takhar³	0	0	2	90	109	3116	4	89
Badghis⁴	0	5	2	11	70	2168	7	75
Ghor⁵	2	156	14	687	193	5879	0	0
Faryab ⁶	41	232	19	348	389	9,434	0	1

¹ Data from 5 districts (Baghlan-e-Jadid, Borka, Gozargah-e-Noor, Nahreen, Pul-e-Khomri)
2Data from 4 districts (Argo, Tashkan, Faizabad city, and Yamgan)
3 Data from 2 districts (Chaal and Farkhar)
4 Data from 4 districts (Aab Kamari, Jowand, Bala Morghaab, and Qades)
5 Data from 5 districts (Chaarsadah, Cheghcheraan, Doleena, Morghab, and Shahrak)
6 Data from 6 districts (Almara Palcharasafa, David Labed, Majorgasa, and Oswaari)

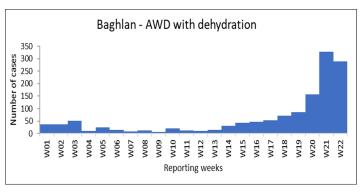
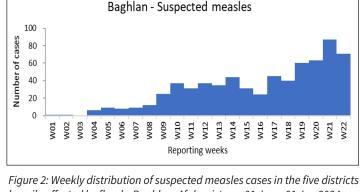


Figure 1: Weekly distribution of AWD with dehydration cases in the five districts heavily affected by floods, Baghlan, Afghanistan - 01 Jan - 01 Jun 2024



heavily affected by floods, Baghlan, Afghanistan – 01 Jan – 01 Jun 2024

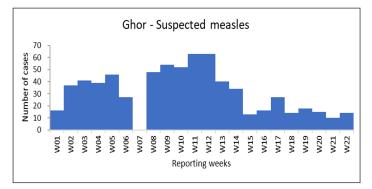


Figure 3: Weekly distribution of AWD with dehydration cases in the five districts heavily affected by floods, Ghor, Afghanistan – 01 Jan – 01 Jun 2024

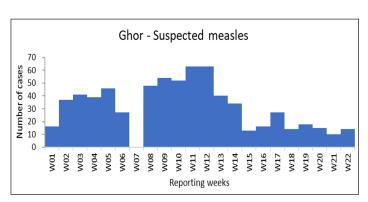


Figure 4: Figure 4: Weekly distribution of suspected measles cases in the five districts heavily affected by floods, Ghor, Afghanistan – 01 Jan – 01 Jun 2024

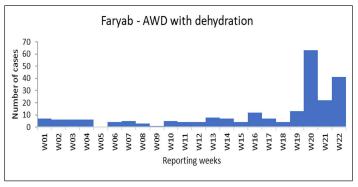


Figure 5: Weekly distribution of AWD with dehydration cases in the five districts heavily affected by floods, Faryab, Afghanistan - 01 Jan - 01 Jun 2024

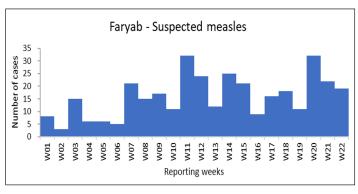


Figure 6: Weekly distribution of suspected measles cases in the five districts heavily affected by floods, Faryab, Afghanistan - 01 Jan - 01 Jun 2024

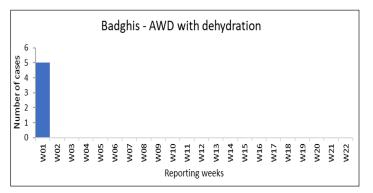


Figure 7: Weekly distribution of AWD with dehydration cases in the four districts heavily affected by floods, Badghis, Afghanistan - 01 Jan - 01 Jun 2024

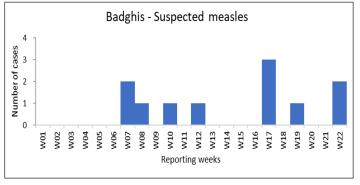


Figure 8: Weekly distribution of suspected measles cases in the four districts heavily affected by floods, Badghis, Afghanistan – 01 Jan – 01 Jun 2024

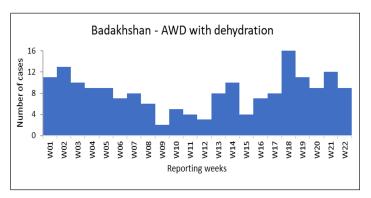


Figure 9: Weekly distribution of AWD with dehydration cases in the four districts heavily affected by floods, Badakhshan, Afghanistan – 01 Jan – 01 Jun 2024

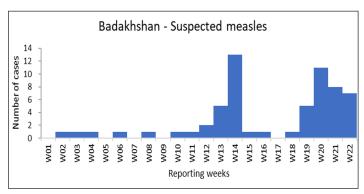


Figure 10: Weekly distribution of suspected measles cases in the four districts heavily affected by floods, Badakhshan, Afghanistan – 01 Jan – 01 Jun 2024

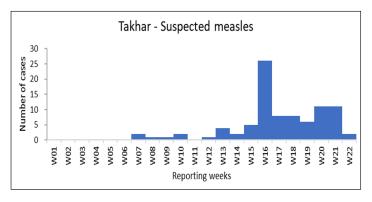


Figure 11: Weekly distribution of suspected measles cases in the two districts heavily affected by floods, Takhar, Afghanistan – 01 Jan – 01 Jun 2024

WHO response:

- who provided support to the flood-affected district of Yamgan by supplying additional medical resources, including Pneumonia and Interagency Emergency Health Kits (IEHK). This assistance also comprised pneumonia awareness messages, which will be disseminated to the affected population through Information, Education, and Communication (IEC) materials provided to Mobile Health and Nutrition Teams (MHNTs) operating in the district.
- The fourth batch of Psychosocial First Aid (PFA) and Stress Management training commenced in Baghlan on 3rd June targeting 48 Community Health Workers (CHWs) and Community Health
- Supervisors (CHS) from flood-affected districts in the mentioned province. This training equipped them with crucial skills to provide psychosocial support to affected individuals, helping them address emotional distress, build resilience, and aid in community healing. These dedicated health workers are now ready to support their communities with renewed commitment and expertise, serving as beacons of hope in challenging times.
- Health services provided by the MHNTs across affected districts include emergency and primary health services, vaccination, dressing (male/ female), and distribution of IEC materials.



WHO delivers donation to flood-affected community in Badakhshan province. © WHO

Health Cluster response:

Coordination

- The Regional Health Cluster Coordination Teams (HCCTs) in the northeastern, northern, and western regions have effectively coordinated the health response for flood-affected populations by streamlining efforts among health partners and stakeholders at the regional level. Ad-hoc meetings were conducted with partners to ensure a well-coordinated health response, prevent duplication, and optimize resource utilization.
- The Regional Health Cluster Coordinators (RHCCs) actively participated in various coordination platforms, including the Inter-Cluster Coordination Group (ICCG), Operational Coordination Team (OCT), and Emergency Preparedness and Response (EPR) committee meetings, ensuring a comprehensive multi-cluster response.
- To ensure efficient resource use and avoid duplication of efforts, the RHCCs, in consultation with partners, reassessed the deployment of Mobile Health and Nutrition Teams (MHNTs) in flood-affected areas. As a result, the number of deployed MHNTs was decreased from 60 to 37 teams across the flood-affected areas of the northern, northeastern, and western regions.

Health Cluster Response activities:

- The Health Cluster partners, including AADA, AFGA, AKF, AKHS, ARCS, ACF, BARAN, HealthNet TPO, ICRC, IMC, IOM, IRC, JACK, MMRCA, MOVE, MSF, Muslim Hand International, MSI, ORCD, SCI, SAF, UNFPA, UNICEF, WHO, WVI, and WYFA, supported the health response for flood-affected communities in Baghlan, Takhar, Badakhshan, Faryab, Jawzjan, Samangan, Ghor, and Badghis provinces. Their support included deploying Mobile Health and Nutrition Teams (MHNTs), providing medical kits and supplies, deploying ambulances for first aid and referral support, and assessing affected areas.
- As of 4 June 2024, the total number of MHNTs decreased from 60 at the beginning of the response to 37 across Baghlan (8), Badakhshan (4), Takhar (1), Faryab (5), Ghor (16), and Badghis (3) provinces. Partners supporting the MHNT deployment include AADA/UNFPA (5), ACF (3), AFGA (2), AKF (1), AKHS/UNICEF (2), ARCS (2), BARAN (1), HealthNet TPO (3), IOM (1), MOVE (1), ORCD/UNFPA (5), SAF (1), SCI (2), and WVI (8).

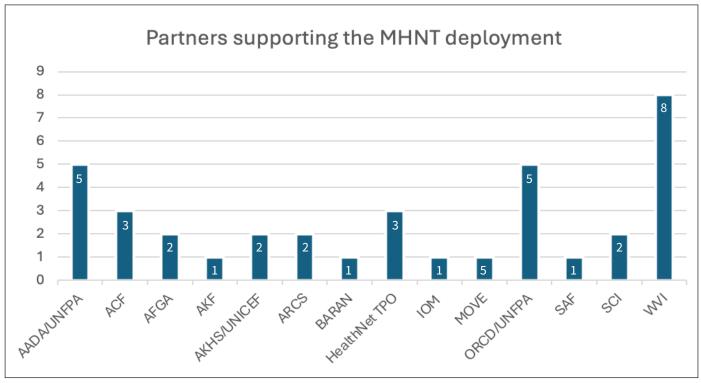


Figure 12: Partners supporting the MHNT deployment



Provision of primary healthcare services to the flood affected people in Bilcheragh district of Faryab province. © Save the Children

Between 10 May and 3 June 2024, the reported Health Cluster partners provided health services to a total of 56 518 flood-affected people in Baghlan (19 892), Badakhshan (12 450), Ghor (11 576), Takhar (7383), Faryab (4992), Badghis (177), and Jawzjan (48) provinces. The beneficiaries included 21 705 women, 11 752 men, 14 046 girls, and 9015 boys. Of the total beneficiaries, 34 892 individuals received primary healthcare consultations, 15 504 were reached with health promotion activities, 3358 received Mental Health and Psychosocial Support (MHPSS) services, 2370 received maternal, newborn, and child health services, and 394 received trauma care services.

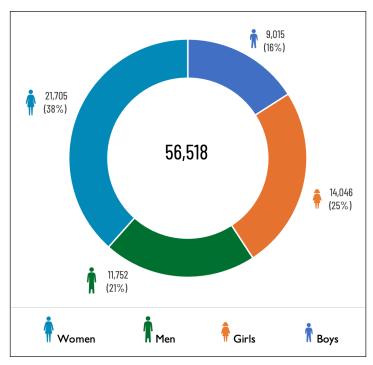


Figure 13: Beneficiaries of the Health Cluster healthcare service delivery



Primary healthcare services to the affected people in Baghlan province. © AFGA

Serving and non-functional health facilities:

Following the floods in the northeastern, northern, and western regions, a total of 31 health facilities (HFs) were damaged, including 3 Comprehensive Health Centers (CHCs), 8 Basic Health Centers (BHCs), and 15 Health Sub Centers (HSCs), as well as 5 Family Health Houses (FHHs). The affected provinces include Ghor (7 HFs), Badghis (5 HFs), Faryab (6 HFs), Samangan (2 HFs), Jawzjan (1 HF), Baghlan (4 HFs), Takhar (4 HFs), and Badakhshan (2 HFs).

Of the damaged health facilities, seven have been fully destroyed, located in Baghlan (Guzargai Noor and Burka districts), Takhar (Chal district), Faryab (Bilcheragh, Almar, and Qaisar districts), and Badghis (Qadis district) provinces.

To ensure continuity of health services for the affected population, the health facilities have been temporarily relocated to local houses.

The table below indicates the non-operational health facilities as of 5 June 2024:

Province	District	СНС		ВНС		HSC		FHH	
		Fully	Partially	Fully	Partially	Fully	Partially	Fully	Partially
Ghor	Shahrak				2				1
	Murghab						2		
	Dawlatyar								1
	Tolk								1
Badghis	Jawand		1				1		
	Abkamary						1		
	Bala Morghab								1
	Qadis							1	
Faryab	Bilcheragh			1					
	Almar		1			1	1		
	Qiasar					1	1		
Samagan	Khuram wa Sarbagh						1		
	Dara-e-Soof						1		
Jawzjan	Qushtepa						1		
Baghlan	Guzargai Noor	1							
	Baghlan Markazi				1				
	Burka				1				
						1			
Takhar	Chal			1					
	Taloqan				1		1		
	Farkhar				1				
Badakhshan	Teshkan						1		
	Yaftal Payeen			1	1	1	1		1

Needs:

- Access to safe drinking water remains a critical need within the affected communities. Immediate action is required to address this issue.
- Additional support is required for MHNTs in terms of medical supplies and capacity to deliver quality services. WHO's field team is gathering information to determine the type and scale of the required support.
- Provision of MHPSS services in affected areas and the need to include at least one female health worker or female psychosocial counsellor in each response team is essential, as the affected population is predominantly women and children.
- The need for 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 coordination of water quality monitoring in affected areas, including joint assessments with WASH, to check for waterborne and infectious diseases.



Provision of primary healthcare services to the flood affected people in Badakhshan province. © IOM



Provision of primary healthcare services to the flood affected people in Badghis province. © ORCD/UNFPA

Challenges:

- Significant challenges in accessibility due to the destruction of the main roads and bridges necessitate alternative transportation methods to reach isolated flood-affected areas with essential supplies.
- Damage of medical and non-medical equipment and non-availability of space for health service delivery in affected HFs.
- Limited health education activities and lack of community awareness regarding communicable diseases are significant obstacles to effective response and recovery efforts.



Provision of healthcare services to the flood affected communities in Ghor province. © BARAN/UNICEF

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

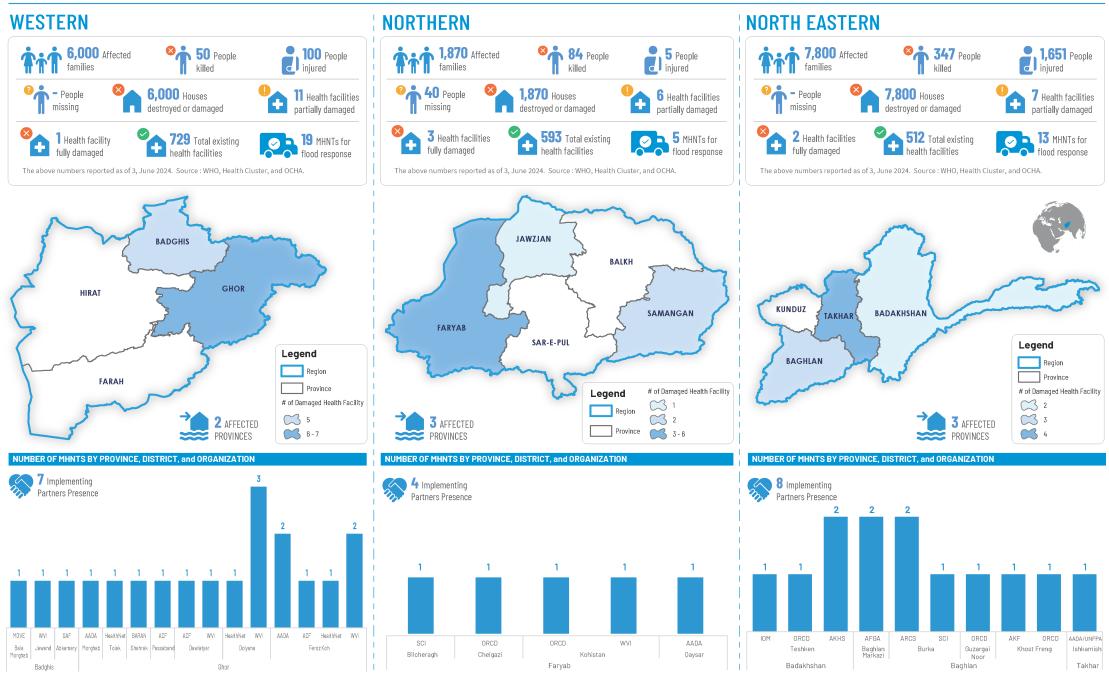
Dr Jamshed Tanoli, Health Emergencies Team Lead, WHO Afghanistan, Email: tanolij@who.int **Ms Ajyal Manssour Al-Sultany,** OIC, Communications, WHO Afghanistan, Email: sultanya@who.int **Mr Mohamed Kakay,** External Relations & Partnerships Lead, WHO Afghanistan, Email: kakaym@who.int **Dr Shah Mansoor Staniczai,** OIC, Health Cluster, WHO Afghanistan, Email: staniczais@who.int



AFGHANISTAN

SNAPSHOT OF FLASH FLOOD AFFECTED AREAS AND STATUS OF HEALTH SERVICES DELIVERY, 3 June 2024







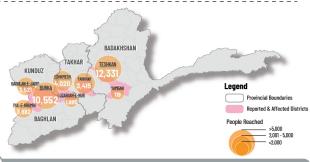
AFGHANISTAN

Health Cluster Partners Response to Flood Affected Provinces, North Eastern, Northern, and Western Regions (Reporting Period: 10 May - 3 June 2024)

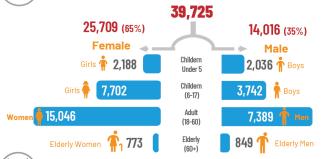


NORTH-EASTERN REGION

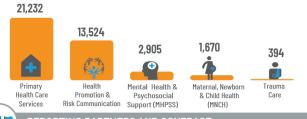
On 10 and 11 May, heavy rainfall led to fast-flowing water and flash floods in northeastern Afghanistan affecting 21 districts across Baghlan (Baghlani Jadid, Burka, Dahnai Ghori, Doshi, Guzargah Noor, Jelga, Khost, Nahrin, Puli Khumri and Tala wa Barfak), Badakhshan (Darwaz, Kishem Tagab, Teshkan and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



PEOPLE REACHED BY AGE AND SEX



PEOPLE REACHED BY ACTIVITY



REPORTING PARTNERS AND COVERAGE



Note: The figures reflect data from partners who have reported their presence and activities to the Health Cluster 4Ws flood response.

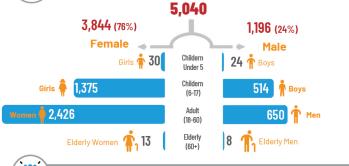
12 Health Cluster partners in the flood response through 4Ws: AADA, AFGA ARCS, AKHSA, IOM, JACK, ORCD, SCI, UNFPA, UNICEF, WHO, WYFA.

NORTHERN REGION

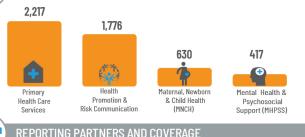
On 17 and 18 May, heavy rainfall led to flash floods in the Northern region of Afghanistan, impacting 8 districts in Farvab province (Almar, Bilcheragh, Chehlgazi, Dawlatabad, Khaibar, Maimana, Pashtun Kot and Qaysar districts).



PEOPLE REACHED BY AGE AND SEX



PEOPLE REACHED BY ACTIVITY



REPORTING PARTNERS AND COVERAGE



PROVINCES

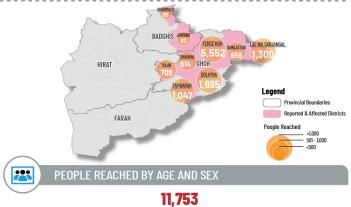


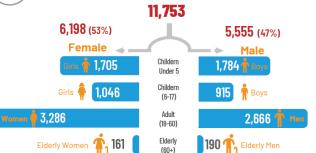
Note: The figures reflect data from partners who have reported their presence and activities to the Health Cluster 4Ws flood response.

6 Health Cluster partners in the flood response through 4Ws: AADA, ORCD SAF, UNFPA, UNICEF, WHO

WESTERN REGION

On 17 and 18 May, heavy rainfall led to flash floods in the Western region of Afghanistan, impacting 10 districts in Ghor province (Charsada, Dawlatyar, Dolayna, Ferozkoh, Lal Wa Sarjangal, Murghab, Pasaband, Saghar, Shahrak, and Tolak districts).





















Note: The figures reflect data from partners who have reported their presence and activities to the Health Cluster 4Ws flood response.

b Health Cluster partners in the flood response through 4Ws: AADA, BARAN WVI, UNFPA, WHO