World Health Organization

WHO Afghanistan Monthly Programme Update: March 2018

Health Emergencies

KEY UPDATES:

• In March 2018, 119 families (536 individuals) of documented returnees returned to Afghanistan through Spinboldak gate from Pakistan.

- Active fighting resulted in internal displacement of 36 families in Kandahar and 101 families were displaced due to a flood in the same city.
- The deteriorated security situation in the Southern region resulted in an increased number of closed health facilities. Two Comprehensive Health Centers (Maruf CHC and Nish CHC) were closed in Kandahar, and one CHC (Oshey) was closed in Urozgan.
- Eight health facilities were closed in 4 districts of Nangarhar by armed groups temporarily, and as a consequence a population of 149,400 had no access to health services during this time. All facilities have now re-opened.



Kunduz regional hospital blood bank plasma and platelet separation in process

PROGRAMME ACTIVITIES AND ACHIEVEMENTS:

- National level cluster coordinators conducted a joint supportive mission to Torkham border crossing on March 14 to review the overall status of existing reception arrangements for arrivals and to assess what would be needed to handle up to 1,000 people a day and to evaluate the number and placement of required additional health, nutrition and other relevant staff.
- WHO distributed medical kits and loose medicine to the provincial hospitals of Laghman, Kunar, Helmand, Ghazni, Khost, and Paktika as well as Greshk district hospital (DH), and the trauma centres in the national hospitals of Ibnisina, Antani, Istiqlal, Jamhoryat, Khairkhana, Wazir Akbar Khan and the Indira Ghandi Institute of Child Health.
- In March 2018, a total 14,417 people received outpatient services in Southern and Eastern regions and 2,846 children and 81 women were vaccinated in Southern and Eastern regions with WHO-supported medicines.
- WHO distributed blood bank and trauma care services equipment to Farah, Shindand and Shajoi DHs.
- 27 laboratory staff from 20 Comprehensive Health centers (CHC) and one District Hospital (DH) in Kunduz, Takhar and Faryab provinces were trained on blood bank standards and good practices.
- Mass casualty management (MCM) review and planning workshop was conducted for 66 health staff from 6 national hospitals (Wazir Akbar Khan, Jamhoriate, Isteqlal, Khairkhana, Ibnesina and Indira Gandhi Institute for Child Health).
- WHO supported the Sexually Transmitted Infection (STI) training for health facilities in hard-to-reach districts of Helmand, Zabul, Kandaharand Urozgan provinces technically and financially.
- Two trainings on Syndromic Management of Sexually Transmitted Infections (STI) were conducted for 37 female doctors and midwives.



First aid kits were received at WHO sub office in Kunduz



Health Emergency Risk Assessment (HERA) was conducted in Chakhansor district of Nimroz province.



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PUBLIC HEALTH RISKS AND CHALLENGES:

- Reported measles outbreaks in South and East have been the major public health issue of concern with low routine immunization reported as the main cause.
- During the reporting period, in addition to the reported 13 measles outbreaks, ٠ two avian flu outbreaks and one pertussis outbreak were reported in the Eastern and Southern regions.
- The expected high influx of returnees might pressurize health services in ٠ the Eastern and Southern regions.
- ٠ Ongoing active fighting in the Southern region caused closures of health facilities and population movement in March. Closure of health facilities in the Eastern and Southern regions continues to be one of the major obstacles for access to healthcare.
- Risk of the vaccine preventable and epidemic disease outbreaks and mass casualty ٠ incidents was especially high in Urozgan and Helmand provinces.

FOCUS AREAS:

- The Southern region HERA assessment was completed in 39 districts of five provinces (Kandahar, Helmand, Orozgan, Zabul and Nimroz).
- Plasma and platelet separation process was launched in March 2018 in Kunduz Regional hospital blood bank. The process helps in the blood being stored for longer and being used for patients with special needs.
- WHO assisted MoPH in development of the Environmental Health Report 2017/18.

Health Cluster Coordination:

Health cluster partners supported 127,343 beneficiaries in March. The cluster partners continued to provide trauma care for people affected by conflict, providing 4,012 consultation, a 2.87% increase from the same time last year. 2,934 women received pre and post-natal care from cluster partners.

Currently the health cluster is working on the prepositioning and planning for potential low precipitation (drought) which might affect up to 1 million population through inter-cluster coordination. The cluster also continues to prepare for repatriation of Afghan returnees from Pakistan. Health Cluster is working with NGOs and other agencies on the petition system for IDP identification and verification. The RMNCAH technical group and MHPSS working group continues to meet and support humanitarian activities.



A mission was arranged to Torkham to assess the status of reception arrangements for returnees



STI training class, Rabia Balkhi Training Center, Mazar-e-Sharif, Balkh

WHO is grateful for the continuous support to emergency humanitarian action of our generous donors: **USAID**, European **Commission's Directorate-General for European Civil Protection and Humanitarian Aid Operations (ECHO) and** the Common Humanitarian Fund (CHF)



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Programme Update

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