

AFGHANISTAN: Earthquake in Herat Province

Health Situation Report No. 6

12 October 2023

(The Health Situation Report will now be issued every other day.

The next report will be published on 14 October 2023.)



World Health
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Afghanistan



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SITUATION UPDATE

Highlights

6.3 magnitude earthquake hit the western region in Afghanistan on 7 October 2023.

Another **6.3 magnitude earthquake** struck Herat at 5:11 am on 11 October, followed by at least three aftershocks.

At least, **17,000 people** have been affected across five districts: Zindajan, Gulran, Kushk/Rabat-e-Sangai, Kohsan and Injil in the western part of Herat Province.

Health Cluster reached **11,911** affected people through **15 partners** in four highly affected districts (Zindajan, Injil, Khosan and Herat).



WHO Teams are in Chayak village, Angel district of Herat, one of the earthquake affected areas, for provision of primary health care, mental health and psycho-social support, along with Health Cluster partner World Vision.

Overview:

A succession of devastating earthquakes, notably a 6.3 magnitude tremor on October 7, 2023, and a second 6.3 magnitude quake on October 11, have left people in Herat, Afghanistan, in a constant state of unease and panic.

As of 11 October 2023, more than 17,000 people are estimated to be affected across five districts: Zindajan, Gulran, Kushk/Rabat-e-Sangai, Kohsan and Injil in the western part of Herat Province. At least 1,714 homes across Zindajan (1,373), Gulran (295), and Kushk/Rabaat-e-Sangai (46) have been completely destroyed on 7 October, and a significant damage has been reported due to the earthquake on 11 October 2023.

At the 650-bed Herat Regional Hospital, which receives those injured by the earthquake, a total of 698 patients had been admitted since 7 October 2023. Currently, 17 patients are hospitalized in the regional hospital, and 53 were discharged today. Remaining patients were discharged in the previous days.

By 11 October, WHO along with 15 other Health Cluster partners, managed to reach 11,911 individuals across affected districts: Zindajan (9,170), Injil (1,296), Khosan (205) and Herat city (1,240). Affected communities continue to be supported with health care, medicines and medical supplies.

EMERGENCY RESPONSE

Health Cluster Coordination

- Since the onset of earthquake emergency, the Health Cluster has been actively engaged in planning and response activities along with the partners. So far 8 ad-hoc Health Cluster partner meetings have been conducted in Herat. The Regional Health Cluster coordination team also attended Inter Cluster Coordination Group (ICCG), Operational Coordination Team (OCT), Emergency Preparedness and Response (EPR) and Disaster Response Committee meetings.
- Regional Health Cluster Coordination team coordinated with other UN organizations and health actors working in Herat for provision of shelter, WASH services (portable toilets and safe drinking water) and medical supplies to the affected communities. The main actors working in the Regional Health Cluster coordination Team are IOM, UNHCR, CARE, WFP and UNICEF.
- The National Health Cluster coordination meeting was conducted on 10 October 2023 where health coordination and response for the Herat earthquake was discussed.
- The Health Cluster has received US\$ 1 million through Afghanistan Humanitarian Fund(AHF) for emergency health response to the affected communities of Herat province.
- A total of 11,911 people have been reached through health cluster partners. Out of these people, 9,945 beneficiaries received primary health care and mental health and psychosocial support services (MHPSS), 1,470 received trauma care and rehabilitation services, and 496 received different types of items (Mama and Baby kit, dignity kit, individual clean delivery kits), and tarpaulin sheets.



Health Cluster partner World Vision, providing health services through MHTs

Health Facility Situation

- In the earthquake-affected districts, 21 facilities have been reported damaged, which include 12 facilities that have been damaged due to earthquake and aftershocks on 11 October. The damaged health facilities are two district hospitals (DHS), seven basic health centers (BHCs), seven comprehensive health centers (CHCs) and five sub health centers (SHCs) that affected the service delivery for an estimated 580,025 people. Herat Regional hospital and Sakina Yakoubi Maternity hospitals have experienced minor damage with cracks in different buildings and needs assessment and rehabilitation.
- Karnil BHC in Zindajan district was completely destroyed, and 20 health facilities have been partially damaged and would require light rehabilitation to fix the cracks.
- WHO deploys an engineer for further detailed assessment of health facilities and the development of rehabilitation plan.

Trauma and Hospital Care

- On 12 October, there was no new case referred to the Herat Regional Hospital, and the total number of admitted cases remained 698 since 7 October 2023.
- Currently, 17 patients are hospitalized in the regional hospital, while 53 were discharged today.
- Of the two critical cases referred to the hospital yesterday, one case died, and another case was referred to Kabul.



Injured patients receiving medical care after the 11 October earthquake

Primary Healthcare Service Provision

- As of 12 October, there are 20 Mobile Health and Nutrition Teams (MHNT) deployed to affected villages in Zindajan, Khosan and Gulran in Zindajan district. The MHNTs are providing primary health care and MHPSS services in the shelters as static sites.
 - Zindajan district: 18 MHNTs deployed to Koshkak, Mahal Wardaka (Karnal), Sia Aab, Kajlal, Chahak Mirandaziha, Cheshmah, Sar Baland, Cheshma Ghor, Sanjab, Lakasang, Siha, Asyabadk, Nayeb Rafi, Ghar Mooshak, and Qasr e Shirin (WHO/OCCD, UNICEF/OHPM, WVI, IRW,IOM, ADAA and CARE)
 - Khosan district: 1 MHNT deployed to Ahmadabad village (CARE)
 - Gulran district: 1 MHNT deployed to Butan village (IOM).
- Additional 35 MHNTs from World Vision (6), CARE (2), IRC (6), IRW (6), IOM (2), AADA (3), Jhpiego (5) and IAM (5) are on standby for provision of emergency health response to affected communities, in case of needs.

Mental Health and Psychosocial Support (MHPSS)

- WHO deployed an expert for coordination of MHPSS technical working group (TWG) and capacity building activities.
- The Ad-Hoc Regional Mental Health and Psychosocial Support Technical Working Group (MHPSS TWG) was established on 12 October 2023 with attendance of Ministry of Public Health (MOPH), WHO, Action Against Hunger (ACF), and Handicap International (HI)
- MHPSS will work on identifying and coordinating MHPSS actors, coordinating the provision of Psychological First Aid (PFA) training for frontline workers and psychosocial counselors, facilitating a referral pathway through coordination with various clusters and organizations, and conducting joint field visits to assess the affected areas.
- MHPSS technical working group, in coordination with WHO, will organize a training session on 14 October 2023 on Psychological First Aid and Self Care.



MHPSS is integrated in health service delivery in MHNTs

Disease Surveillance/Potential Diseases Outbreak Prevention & Response

- Considering the fragile condition among the affected population, WHO is preparing for potential communicable disease outbreaks such as measles, acute respiratory infections (ARI), tetanus, and acute watery diarrhea (AWD), in coordination with the National Disease Surveillance Response (NDSR) team.
- NDSR and two WHO-supported with additional surveillance support teams (SST) have been deployed to Zindajan district for active surveillance in affected villages since 9 October. A total 150 cholera RDT and 500 COVID-19 RDT are available in Herat NDSR for early detection of cases.
- By 11 October, 31 ARI cases and 23 AWD cases were reported. All the cases received required treatment and health education through MHTs.
- WHO will expand the preparedness and response for outbreaks through;
 - Additional five SSTs to the earthquake-affected areas (2 teams in Regional Hospital and 3 teams in MHTs) to monitor disease of outbreak nature occurrence, collect data using line list from MHTs registers, collect samples for AWD, ARI and COVID-19 and do an investigation of cases with any surge in cases.
 - RDT tests will be conducted for suspected cases, and if positive, culture tests will also be conducted from the cases in Herat Regional Referral Laboratory using the standard SOPs.
 - Samples from Acute Respiratory Infections suspected cases will be collected weekly, and the samples will be shipped to the National Influenza Center in Kabul to be tested for influenza.
 - COVID-19 suspected cases will also be tested through RDTs in the field, and if positive, PCR tests will be conducted in Herat Regional Reference Laboratory (RRL)



Reproductive Maternal and Child Health

- WHO is deploying 21 female obstetric/gynecology healthcare workers (medical doctors nurses and midwives) from Kabul to Herat province starting 13 October, for a week. They are going to support the service delivery in mobile health and nutrition teams in the affected villages, in coordination with the partners

Operational Support and Logistics

- WHO dispatched 1000 COVID-19 RDT kits (for 25,000 tests) and 30 cholera investigation test kits (for 600 Cholera RDT and 600 Cary blair), which will arrive in Herat this weekend. This is to add to the different types of kits stockpiled to manage different kinds of infectious diseases.

Prevention and Response to Sexual Exploitation and Abuse (PRSEAH)

- The Afghanistan PSEA Network is working with partners on the ground to identify and address sexual exploitation and abuse (SEA) risks.
- So far, preliminary analysis has identified the following as SEA risks to urgently be addressed:
 - Low awareness around rights, available services, and aid distribution
 - Low awareness around feedback mechanisms and available reporting channels
 - Gendered security and safety concerns, such as limited shelters, inadequate lighting, and inadequate gender segregated facilities
 - Access concerns, especially for women, children, and people with disabilities.
- Moreover, lessons learned from the earthquake in 2022 in Afghanistan highlighted capacity building of all field staff on PSEA is a priority area.
- To address these risks as well as to support partners on the ground, the PSEA Network, the AAP Working Group, and Awaaz are deploying a joint mission team to Herat, focusing on coordination support, risk mitigation, reporting and referral mechanisms, capacity building, and community engagement.

GAPS and URGENT NEEDS

- The escalating crisis demands an increase in healthcare worker capacity, along with medicine, medical supplies, and equipment. Due to ongoing concerns linked to aftershocks, a shortage of healthcare workers has been reported.
- Displaced survivors in Herat City and affected villages are residing in temporary shelters, such as tents. These conditions, marked by inadequate sanitation, limited access to food and water, and the impending harsh winter, increase their vulnerability to communicable diseases and mental stress. Consideration should be given to sustainable solutions urgently.
- Assessments reveal damage to 21 primary healthcare centers (PHCs) in addition to some important hospitals, with one completely non-functional and 20 partially damaged. Ongoing aftershocks pose a continuous threat to these structures, necessitating immediate rehabilitation.
- Displaced individuals, suffering from trauma, loss, depression, and post-traumatic stress, require critical mental health and psychosocial support.
- Food for survivors depends on donations, creating concerns regarding inadequate nutrition in tented environments. The need for support is crucial, including nutrition screening and health promotion.
- The mobile health and nutrition teams are providing healthcare services, but proper infrastructure, including reliable electricity via solar power systems and access to clean water, is lacking.
- Water, Sanitation, and Hygiene (WASH) facilities, such as toilets and washing basins, is crucial for the well-being of healthcare workers and patients.
- In severely affected villages, there is a shortage of drinking water, with displaced people relying on limited supplies of bottled water. Sustainable water supply is urgently needed.
- Food and water distribution have been vital, particularly for those who left their homes in haste. However, the absence of waste management equipment (e.g., trash bins) has led to indiscriminate dumping of waste, including plastic and food leftovers. Given the prolonged displacement, addressing waste management is essential to maintaining public health.

Story from the Field: A Father's Promise to Bring Gifts to His Daughters

Mohammad Azam is a daily wage worker from Zindajan district of Herat province in the west of Afghanistan. At the end of every week, after working in the provincial capital, he returns home to spend the weekend with his family. The weekend is a happy time for his three daughters and a son as Azam regularly brings gifts for each of them.

However, this past week, his world has changed tragically.

He left his house for work as usual at the beginning of the week, promising his daughters toy gifts. But just a few hours later, he was unexpectedly called back home as an earthquake hit his village.

His three daughters could no longer welcome him with their smiles and hugs. His daughters are dead, along with other four members of his family. His house now is nothing but a pile of rubble. Azam could see only grief, mourning and sorrow in his village.

Azam's wife was rescued after spending almost three hours under the debris with serious injuries all over her body. She was taken to the hospital by ambulance for treatment.

Still in disbelief at the shocking turnaround of his life, Azam said he is worried about his wife and son as he stands in the rubble of the room where he had lunch with his family a week before this tragedy. The soon-approaching harsh winter puts his family, like thousands of other families affected by the earthquake, at greater risk of diseases in the absence of permanent shelter, food and clean drinking water.



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