Afghanistan Flooding Situation Report No. 7 (24-29 May 2024)









WHO visits flood-affected community in Ghor province. © WHO

Key messages:

- WHO supported the Mobile Health Teams (MHTs) in Teshkan district in Badakhshan province with additional medicine and medical supplies including two AWD with dehydration kits covering the treatment of 200 cases and two Interagency Emergency Health Kits (IEHK) sufficient to treat 2000 patients.
- WHO concluded the 2nd training workshop on Psychological First Aid (PFA) for Community Health Workers (CHWs) and Community Health Supervisors (CHSs) from flood-affected districts of Baghlan province.
- The SSTs in Ferouz Koh district of Ghor Province conducted health awareness raising campaign on Acute Watery Diahrea (AWD). Over 1000 leaflets and brochures were provided to NDSR partner focal points for distribution to the affected communities.
- 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:

Between 10 and 11 May 10, heavy rainfall and flash floods in Baghlan, Badakhshan, and Takhar provinces affected over 60 000 people. Approximately 7800 homes were confirmed destroyed or damaged, displacing over 5000 families.

Subsequently, on 17 and 18 May, heavy rainfall in northern and western Afghanistan caused a new wave of flash floods, impacting 10 districts in Ghor province and eight districts in Faryab province. These floods resulted in the deaths of at least 120 people, with hundreds more missing, and extensive damage to private properties and civilian infrastructure.

The situation in the flood-affected provinces across northern, northeastern, and western Afghanistan remains critical, necessitating urgent mobilization of additional resources to address the escalating humanitarian and health needs.

1. Active surveillance in Baghlan:

- A total of five SSTs are deployed in the field, two originally located in Baghlan and three mobilized from neighbouring provinces. During the mentioned period, the below infectious diseases have been detected:
 - » 1383 ARI Pneumonia cases
 - » 1315 AWD with dehydration cases
 - » 130 suspected measles cases
 - » 227 suspected COVID-19 cases
- Moreover, a total of 171 RDTs were conducted for COVID-19 suspected cases; among which 29 were positive (positivity rate: 17.0%)
- Furthermore, 62 PCR samples were taken (from positive RDTs and separate samples) and sent to the laboratory; among these samples, 6 were positive out of 33 tested samples (positive rate=18.2%), while the rest are under process in the laboratory.
- In addition, 9 RDTs were conducted for AWD with dehydration cases; among which, none were positive.
- Samples were sent to the laboratory for 82 measles suspected cases; among these samples, 9 were positive among 54 tested samples (positivity rate=16.7%); while the rest of the samples are under process.

Table 1: Number of reported cases of infectious diseases in flood-affected districts of Baghlan province

Diseases	Number of reported cases during 11-28 May 2024						
	Male		Female		Total		
	<5 Years	>5 Years	<5 Years	>5 Years	Male	Female	Total
ARI-Pneumonia	438	300	326	319	738	645	1383
Suspected measles	66	11	48	5	77	53	130
AWD with dehydration	327	325	287	376	652	663	1315
Suspected COVID-19	10	56	21	140	66	161	227
Total	841	692	682	840	1533	1522	3055

2. Active surveillance in Badghis during 22 – 28 May 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 reported cases of infectious diseases in flood-affected districts of Badghis province

Diseases	Number of reported cases during 22-28 May 2024						
	Male		Female		Total		
	<5 Years	>5 Years	<5 Years	>5 Years	Male	Female	Total
ARI-Pneumonia	38	29	46	30	67	76	143
Suspected measles	0	1	0	3	1	3	4
AWD with dehydration	7	8	6	11	15	17	32
Suspected COVID-19	0	27	0	15	27	15	42
Total	45	65	52	59	110	112	221

3. Passive surveillance in the flood-affected provinces:

Below are the major diseases reported through the indicator-based surveillance system in flood-affected provinces: •

Table 3: Number of infectious diseases reported through Indicator-Based Surveillance (IBS) in 5 flood-affected provinces

Provinces	AWD with dehydration		Suspected measles		ARI-Pneumonia		COVID-19	
Frovinces	Cumulative 01 Jan-25 May 2024	Week 20 (19-25 May 2024)	Cumulative 01 Jan-25 May 2024	Week 20 (19-25 May 2024)	Cumulative 01 Jan-25 May 2024	Week 20 (19-25 May 2024)	Cumulative 01 Jan-25 May 2024	Week 20 (19-25 May 2024)
Baghlan ¹	1,077	327	605	87	18 218	618	0	0
Badakhshan ²	186	12	54	8	11 301	340	133	2
Takhar ³	0	0	88	11	3007	89	85	6
Badghis⁴	5	0	9	0	2098	50	68	3
Ghor⁵	154	1	673	10	5686	179	0	0
Faryab ⁶	191	22	329	22	9045	327	2	1

¹Data from 2 districts (Baghlan-e-Jadid, Borka, Gozargah-e-Noor, Nahreen, Pul-e-Khomri) ²Data from 4 districts (Argo, Tashkan, Faizabad city, and Yamgan) ³Data from 2 districts (Chaal and Farkhar) ⁴Data from 4 districts (Jowand, Bala Morghaab, Aab Kamari, and Qades) ⁸Data from 5 districts (Chaarsadah, Cheghcheraan, Doleena, Morghab, and Shahrak) ⁶Data from 5 districts (Almaar, Balcheraagh, Dawlatabad, Maimana, and Qaysaar)



Provision of primary healthcare services to the affected people in Ferouz Koh district of Ghor province. © BARAN/UNICEF

- As of 29 May, three metric tonnes of medicine and medical supplies have been delivered to flood-affected areas in Faryab province.
- WHO conducted two rounds of Psychological First Aid (PFA) training, benefiting 100 community health workers (CHWs) from flood-affected districts in Baghlan province. The training sessions, held in Boorka District and part of Nashreen District, were attended by 50 CHWs each, with equal representation of 25 female and 25 male CHWs in each session. This gender-balanced approach was adopted to enhance the quality and impact of the training.
- WHO supported the MHTs in Teshkan district in Badakhshan province with additional medicine and medical supplies including two AWD with dehydration kits covering the treatment of 200 mild to severe cases and two (IEHK) kits sufficient to treat 2000 patients. The supplies provided for the emergency health response to the flood-affected population were transferred by local means, due to road blockages.
- The SSTs in Ferouz Koh district of Ghor Province conducted health awareness raising campaign on Acute Watery Diarrhea (AWD). Over 1000 leaflets and Brochures were provided to NDSR focal points for distribution to the affected communities.
- WHO's efforts in disease surveillance and coordinating safe drinking water and sanitation are ongoing. SSTs are being mobilized to early detect waterborne and other communicable diseases in affected regions.
- WHO is continuously monitoring the availability of medical resources to ensure the availability of essential medicines, supplies, and consumables in health facilities serving the affected population for the next three months.

- Health services provided by the MHTs across affected districts include emergency and primary health services, vaccination, dressing (male/female), and distribution of IEC materials.
- WHO continues its lifesaving response to the flood emergency in northern, western, and northeastern Afghanistan. Emergency teams are deployed to assess the access to essential healthcare services for the affected communities, with a focus on the most vulnerable populations, including women, children, and the elderly.
- Maintaining regular meetings with Health Cluster partners to coordinate response efforts, engage with partners, and monitor casualties, with strict adherence to safety measures.
- In partnership with the AAP Working Group and UNFPA, and guided by OCHA, the PSEA network has deployed two national officers and one international specialist to coordinate the flood response. Supported by the national-level coordination mechanism, they will represent PSEA and AAP in inter-agency forums, conduct risk assessments, organize community engagement activities, and oversee capacity-building initiatives as requested by field members and partners. WHO represented the PSEA Network in the OCT (Operation Coordination Team) meeting for the flood response. They delivered a PSEA briefing to 37 individuals (35 men and 2 women). The briefing was highly appreciated for its timeliness, with OCT members stressing the importance of reminding humanitarian workers of codes of conduct and expected behaviors in situations where vulnerabilities are heightened, such as during floods.



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WHO and Health Cluster partners in flood-affected community. © WHO

Coordination

- The Regional Health Cluster Coordination Teams for the northeastern, northern, and western regions have conducted ad-hoc meetings with partners to ensure a well-coordinated health response, preventing duplication and optimizing resource utilization.
- The regional teams 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. The Regional Health Cluster Coordinators also worked with partners to expand their services in the affected areas.

Health Cluster Response activities:

- 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, Save the Children, SAF, UNFPA, UNICEF, WHO, WVI, and WYFA, supported the health response to floodaffected communities in Baghlan, Takhar, Badakhshan, Faryab, Jawzjan, Samangan, Ghor, and Badghis provinces. This support included the deployment of MHNTs, provision of medical kits and supplies, deployment of ambulances to provide first aid and referral support to affected communities, and assessment of affected areas.
- As of 26 May 2024, Health Cluster partners had deployed 60 MHNTs across Baghlan, Badakhshan, Takhar, Faryab, Ghor, and Badghis provinces. Partners supporting the deployment of MHNTs included AADA/UNFPA, ACF, AFGA, AKF, AKHS/UNICEF, ARCS, BARAN, HealthNet TPO, IOM, MOVE, MSI, Muslim Hand International, ORCD/UNFPA, SAF, SCI, WYFA, and WVI.
- Between 10 May and 25 May 2024, Health Cluster partners provided health services to a total of 38,462 flood-affected people in Baghlan, Badakhshan, Ghor,

Takhar, Faryab, Badghis, and Jawzjan provinces. The beneficiaries included 14 327 women, 8301 men. Out of the total beneficiaries, 24 806 individuals received primary health care consultations, 9192 were reached with health promotion activities, 2578 received Mental Health and Psychosocial Support (MHPSS) services, 1516 received maternal, newborn, and child health services, and 370 received trauma care services.

- ORCD extended EPI services through all deployed Mobile Health and Nutrition Teams (MHNTs) and deployed three additional MHNTs (two in Guzargai Noor district of Baghlan province and one in Kohistan district of Faryab province). World Vision International (WVI) also deployed one MHNT in Kohistan district of Faryab province.
- Furthermore, UNICEF and AKF provided tents for fully damaged health facilities, and MSF and ICRC provided sheets for deceased bodies and medical supplies to treat wounded people in Baghlan province. The needs for tents and WASH services for damaged health facilities in the western region were coordinated with the Shelter/NFI and WASH Clusters to ensure the continuity of services in these facilities.

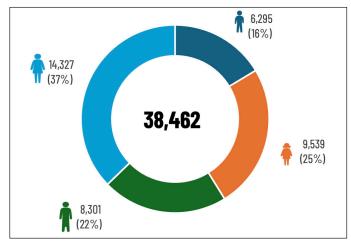


Figure 1: Beneficiaries of the Health Cluster healthcare service delivery



Provision of primary healthcare services to the affected people in Baghlan province. © AFGA



Provision of healthcare services to the affected people in Teshkan district of Badakhshan province. © IOM

Serving and nonfunctional health facilities:

As of 29 May 2024, and following the floods in the northeastern, northern, and western regions, a total of 30 health facilities were damaged in Ghor, Badghis, Faryab, Samangan, Jawzjan, Baghlan, Takhar, and Badakhshan provinces. Of these damaged health facilities, six, located in Baghaln (Guzargai Noor district), Takhar (Chal district), Faryab (Bilcheragh, Almar, and Qaisar districts), and Badghis (Qadis district) provinces, have been fully destroyed.

To ensure continuity of health services for the affected people, the health facilities have been temporarily relocated to local houses. The table below indicates the non-operational health facilities as of 29 May 2024:

Province	District	СНС	внс	нѕс	FHH
Ghor	Shahrak		2		I
	Murghab			2	
	Dawlatyar				1
	Tolk				
	Jawand	1		<u> </u>	
D . 1 1 1	Abkamary			I	
Badghis	Bala Morghab				I
	Qadis				I
	Bilcheragh		I		
Faryab	Almar	I		2	
	Qiasar			2	
Samagan	Khuram wa Sarbagh			I	
Samagan	Dara-e-Soof			1	
Jawzjan	Qushtepa			I	
	Guzargai Noor	I			
Baghlan	Baghlan Markazi		I		
	Burka		I		
Takhar	Chal				
	Talogan		I	1	
	Farkhar		I		
Badakhshan	Teshkan			I	
Dagakhshan	Yaftal Payeen			I	

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



Provision of psychosocial services to the affected people in Ghor. $\ensuremath{\textcircled{C}}$ HNTPO

Challenges:

- The shortage of safe drinking water in health facilities and across affected areas may result in exacerbating the spread of waterborne diseases, placing additional strain on the already overwhelmed healthcare infrastructure.
- Inadequate financial resources are hindering the deployment of additional mobile teams and ambulances in flood-impacted regions.
- Gap in availability of disaggregated data by sex and age within households.
- 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 primary healthcare services to the affected people in Ghor province. $\ensuremath{\mathbb C}$ WVI

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

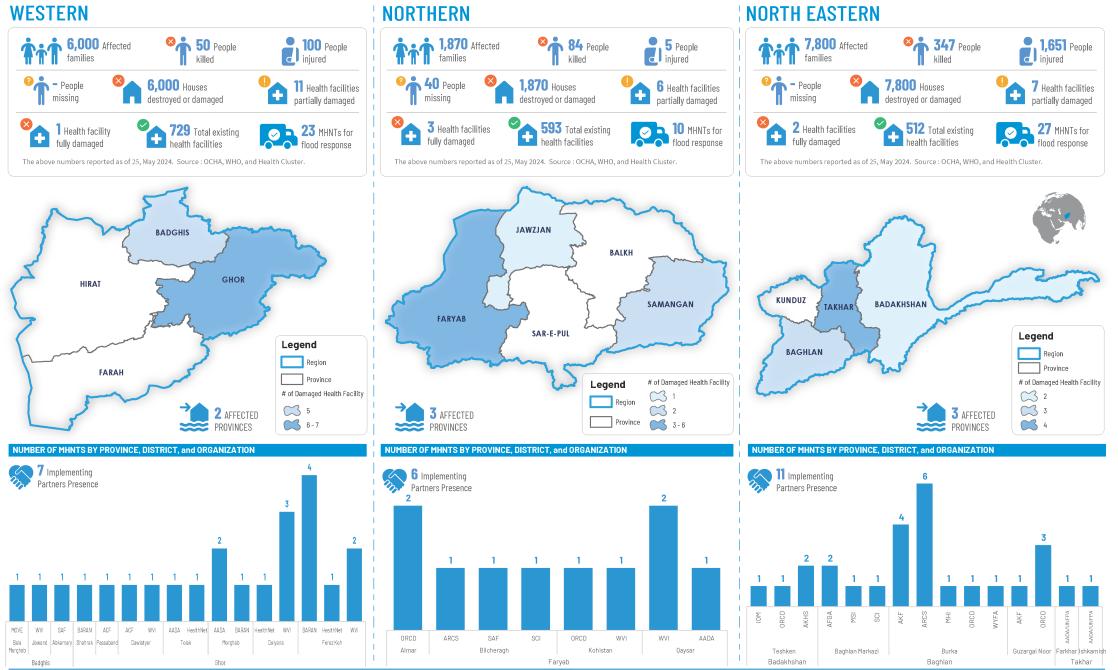
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AFGHANISTAN

SNAPSHOT OF FLASH FLOOD AFFECTED AREAS AND STATUS OF HEALTH SERVICES DELIVERY, 25 May 2024





The boundaries and names shown and the designations used on this map do not imply the expression of any opinion whatsoever on the part of the World Health Organization concerning the legal status of any country, territory, city or area or of its authorities, or concerning the delimitation of its frontiers or boundaries. Data Sources: WHO, Health Cluster & OCHA. Production Date: May 28, 2024. Feedback: khawaria@who.int Produced By: WHO Health Emergencies HIM



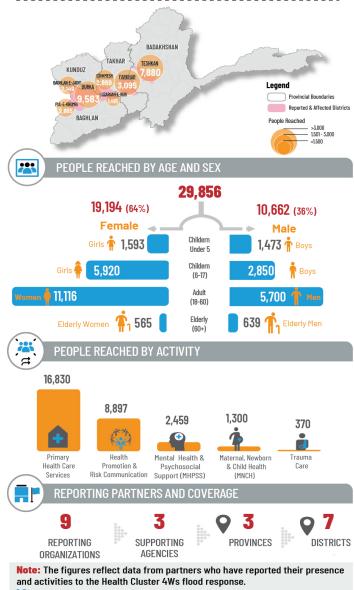
AFGHANISTAN

Health Cluster Partners Response to Flood Affected Provinces, North Eastern, Northern, and Western Regions (Reporting Period: 10-25 May 2024)



NORTH-EASTERN REGION

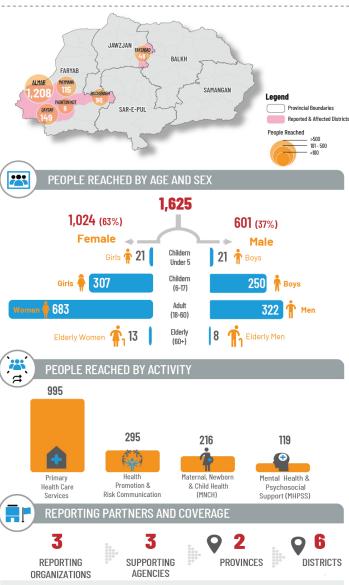
On **10 and 11 May**, heavy rainfall led to fast-flowing water and flash floods in northeastern Afghanistan **affecting 21 districts** across **Baghlan** (Baghlani Jadid, Burka, Dahnai Ghori, Doshi, Guzargah Noor, Jelga, Khost, Nahrin, Puli Khumri and Tala wa Barfak), **Badakhshan** (Darwaz, Kishem Tagab,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



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 **Faryab** province (Almar, Bilcheragh, Chehlgazi, Dawlatabad, Khaibar, Maimana, Pashtun Kot and Qaysar districts).



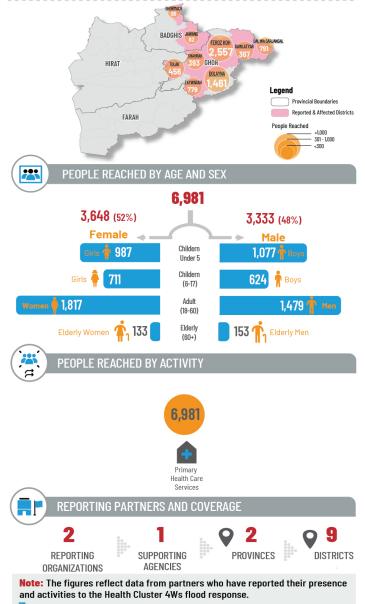
Note: The figures reflect data from partners who have reported their presence and activities to the Health Cluster 4Ws flood response.

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

WESTERN REGION

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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).



3 Health Cluster partners in the flood response through 4Ws: BARAN, WVI, WHO