



Screening of arrival passengers from countries with local transmission of COVID-19 at Mazar Entry point



3.7M
AFFECTED¹



11,391
DISPLACED^{1,2}



28,750
RETURNEES^{1,3}



4
IEHK KITS¹



21
OUTBREAKS⁵

KEY FIGURES

394	WHO STAFF IN THE COUNTRY
60	HEALTH CLUSTER PARTNERS
2.1M	OUTREACH (POPULATION REACHED)
HEALTH FACILITIES	
2,865	TOTAL NUMBER OF HEALTH FACILITIES
16	TOTAL NUMBER OF HEALTH FACILITIES AFFECTED
10	HEALTH WORKERS, PATIENTS AND OTHERS KILLED
4	HEALTH WORKERS AND PATIENTS INJURED/ DETAINED
0	HEALTH FACILITIES RE-OPENED
DISEASES ⁵	
820,932	ACUTE RESPIRATORY INFECTION CASES
124,338	ACUTE DIARRHEA CASES
49	MEASLES CASES DURING OUTBREAK
206	SCABIES CASES DURING OUTBREAK
2	CCHF CASES DURING OUTBREAK
51	MUMPS DURING OUTBREAK
40	DOG BITS DURING OUTBREAK

SITUATION UPDATE

- Conflicts forced 11,391 people from 15 out of 34 provinces to flee from their homes in January 2020
- From 1-30 January 2020, around 21,965 people were affected by natural disasters throughout Afghanistan (24 killed, 12 injured).
- 11 provinces, one 3rd, experienced natural disaster during the period, damaging 959 houses and destroying another 137 houses. Afghanistan is prone to earthquakes, flooding, drought, landslides, and avalanches⁴.
- During January 2020, 28,750 people returned to Afghanistan from Pakistan, and Iran with significant needs in health and other basic services.
- 7 attacks on healthcare were reported in January 2020, resulting in the closure of 16 health facilities, where none of them were re-opened. A total of 10 health staff and supportive staff were killed and 4 others detained.
- Total of 21 outbreaks were reported in January 2020 with a total caseload of 527 people contracting 9 different diseases
- According to the projections of Afghanistan Humanitarian Needs Overview 2020, throughout the year, 3.7 million people will be in need of emergency health services due to conflict, natural disasters and a lack of basic services.
- In January 2020, Health Cluster partners provided lifesaving trauma care services to 3,705 In-patients and out-patients around the country,
- WHO and Health Cluster implementing partners reached 148,474 beneficiaries (which included 82,240 women and girls) in January 2020
- Based on Afghanistan Humanitarian Needs overview in 2020, there will be 28% increase in the number of people seeking trauma care consultations across the country

¹ Since January 2020

² Only conflict related IDPs.

³ OCHA AFGHANISTAN Snapshot of Population Movements (Jan, 2020)

⁴ OCHA AFGHANISTAN Snapshot of Natural Disaster Events (Jan, 2020)

⁵ NDSR Reporting (Jan, 2020)

Public health concerns

- War and conflict in the country continues to impact effective provision of health services, both for displaced populations and host communities. More advocacy is needed at all levels to ensure all parties to the conflict respect International Humanitarian Law.
- Low routine Immunization coverage and polio programme that is being banned by AGEs has been counted as a public health risk in many parts of the country.
- Unavailability of trained and skilled health workers, especially female health workers, in remote and hard-to-reach areas, prevents many women from accessing health facilities.
- Increase in risk of emerging and re-emerging disease outbreaks in the next few months, particularly in preventable disease, COVID-19, dengue and CCHF.

Health needs, priorities and gaps

- The ongoing conflict in the country requires additional support for provision of collaborative emergency health services to the vulnerable population and covering the underserved areas across many provinces.
- Internal conflict and military operation in Nangarhar province forced individuals to flee their homes and settle in the Haji IDPs camp that further pressurize their health and create opportunity of outbreaks and health emergencies in the defined population.
- Attacks on healthcare workers and health facilities have deprived population from getting access to the health care services and increase risk of disease outbreaks in the insecure areas.
- Control of outbreaks in IDPs remains a major public health concern; however, confirmation of outbreaks of emerging disease such as dengue fever in some areas and declaration of COVID-19 as a PHEIC require serious efforts across the country.

WHO action

- During the reporting period, WHO provided fully support to MoPH in respect of COVID-19 preparedness and response activities, including equipping entry points with essential resources (infrared thermometer, IEC materials, PPEs, and alcohol-based hand rub), provision of rapid diagnostic kits and specimen triple package boxes & specimen carrier for CHPL, equipped isolation wards of Afghan Japan and Kabul Infections Disease hospitals, supplied the required consumable medicines and provided.
- Supported training of epidemiology and surveillance teams on case definition, screening and contact tracing for COVID-19.
- WHO supported printing of 480,000 leaflets in two local languages and distributed by MOPH to all the provinces in January.
- WHO conducted COVID-19 case management and IPC ToTs for around 172 health care staff of national regional hospitals.
- WHO conducted orientation session to health cluster members on health cluster principles, activities and priorities in southern region.
- TCS need assessment has been conducted in Kandahar technical hospital during the period.
- In the time period WHO continued support of 3 MHTs in Nangarhar, 2 SHCs and 1 FATP in Kunar provinces, and developed the monitoring plan accordingly.
- Who supplied one supplementary kits to NRH for the response of Ahin IDPs.
- Developed preparedness and response plan of COVID-19 at national and sub-national levels.
- WHO established two WASH facilities in Zurmat and Wazi Zadran districts of Paktia during the period.
- WHO distributed 5 basic kits and one complete cholera kit for Balkh province.

Health cluster

- Health cluster partners in response to conflict and natural disaster provided trauma care services to 16,702 people in need through designed mobile health teams, and reached to 106,603 beneficiaries by providing primary health care services in the country.
- Health cluster partners delivered health emergency services to the host community and vaccinated 10,472 children in the eastern region. Health and nutrition services delivered to the IDPs located in Herat and Badghis provinces through 9 health teams.

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