



### KEY UPDATES:

- ◆ Heavy snowfall and avalanches affected hundreds of Afghans, mainly in the northern and northeastern regions in February
- ◆ Herat province suffered from flash floods in February, with over 2000 people in five districts affected. Over 4000 people in Zabul province have been affected by heavy rains (OCHA)
- ◆ Acute respiratory infections continued to be a major health challenge for Afghan children as harsh weather conditions continued
- ◆ WHO continued to support the provision of basic health services and health education to internally displaced persons through mobile health clinics

### PROGRAMME ACTIVITIES AND ACHIEVEMENTS:

- ◆ WHO-supported Trauma Care Unit (TCU) in Kunduz Regional Hospital treated 545 trauma patients, including major and minor surgeries, during February
- ◆ To support health response to people affected by a devastating avalanche in Nuristan province, WHO distributed a pneumonia kit to Bargimatal district to treat 350 pneumonia cases over 3 months
- ◆ WHO distributed a trauma kit to the Takhar Provincial Hospital Trauma Care Unit to cover 100 surgeries
- ◆ Three Interagency Emergency Health Kits (IEHK) were provided by WHO to Takhar BPHS implementer NGO to support health service provision to internally displaced persons fleeing Kunduz to Takhar—the kits can cover 3000 patients for 3 months for common diseases
- ◆ WHO distributed two trauma kits to the Kabul Emergency Hospital and two trauma kits to Ibne Sina Emergency Hospital in Kabul to cover 400 surgical cases
- ◆ Two pneumonia kits to cover 700 patients and eight Interagency Emergency Health Kits to cover 8000 patients of common diseases have been distributed to SHRDO NGO to support health service provision for IDPs in Kabul
- ◆ WHO launched a disease awareness campaign in close collaboration with the Directorate of Public Health and AADA BPHS implementing NGO in seven districts of Nangarhar with a high number of returnees; the campaign includes the dissemination of health education messages by training community health workers, broadcasting radio and TV spots and installing billboards
- ◆ WHO Kandahar sub office carried out an assessment mission to Spinboldak District Hospital to review and revise the province's mass casualty management plan



A boy received medicines to treat his respiratory infection at a WHO-supported mobile clinic in a Kabul IDP camp



A child injured in Kunduz received trauma care services at the Kunduz regional hospital



WHO delivered pneumonia kits to Nuristan as an avalanche struck the province



### PUBLIC HEALTH RISKS AND CHALLENGES:

- ◆ Internal displacement of over 450 000 people and the influx of 600 000 returnees from Pakistan by the end of 2016 have overstretched already inadequate health care services.
- ◆ Population movement, inadequate shelter and food, compromised water and sanitation services and low immunization coverage expose affected populations to a higher risk of disease outbreaks.
- ◆ Limited humanitarian access limits people's access to essential life-saving health care services and hampers effective response to disease outbreaks.

### KEY MESSAGES:

- ◆ Health facilities and hospitals should never be a target and their neutrality must be respected by all parties at all times
- ◆ Vaccination saves lives—we must ensure that all children, no matter where they live in Afghanistan, are reached with vaccines
- ◆ Tuberculosis continues to be a health risk in Afghanistan, heightened by the influx of returnees and refugees. More investment is needed in diagnosis, testing and treatment services to fight TB in the country.

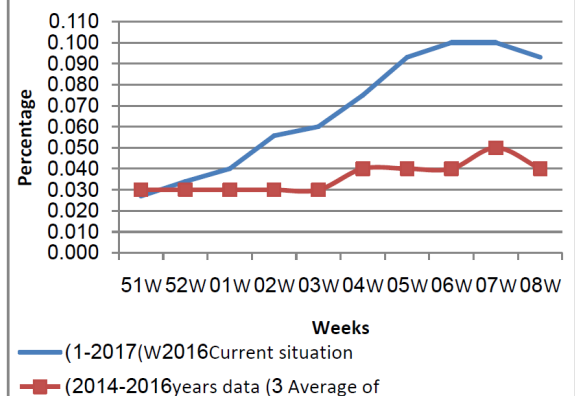


Babies receive the oral polio vaccine at WHO-supported mobile clinics for internally displaced persons in Kabul

### Health Cluster Coordination:

- ◆ A "Stop Attacks on Health Care" workshop was conducted with the participation of key humanitarian health stakeholders, including the Ministry of Public Health, ICRC, ARCS, WHO, UNFPA, OCHA, UNICEF and national and international health NGOs. The objective of the workshop was to introduce a data collection modality on attacks on health facilities and healthcare providers as well as advocacy and dissemination of information on violence against health workers and facilities. Partners agreed on data collection methods, verification processes as well as information management and dissemination modalities.
- ◆ The Health Cluster conducted a consultation workshop for organizations eligible for CHF funding to adjust concept notes and proposals according to the Cluster's strategic priorities.

Trend of Measles percentage out of total consultation in recent weeks- 2016



**Programme Update**  
Emergency Humanitarian Action WHO Afghanistan

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