



A plane carrying WHO medical supplies landed in Mazar-i-Sharif on 30 August. The shipment can cover the basic health needs of over 200,000 people, provide 3,500 surgical procedures and treat 6,500 trauma victims. The supplies will be delivered to 40 health facilities across 29 provinces and will help to fill urgent gaps in medical needs.



4,522

New internally displaced persons (IDPs) between 1-30 August 2021

300K+

New displaced persons in the last two months needing humanitarian aid

153K+

COVID-19 confirmed cases and 7,118 deaths as of 30 August

5%

Of the population has received at least one dose of the COVID-19 vaccine

SITUATION OVERVIEW

- **Logistics and humanitarian airbridge:** In collaboration with the Government of Pakistan, on 30 August, 12.5 metric tonnes of urgent medical supplies were flown from WHO's warehouse in the International Humanitarian City, Dubai to Mazar-i-Sharif airport due to ongoing disruptions at Kabul airport. The supplies brought in will help to partially replenish stocks of health facilities in Afghanistan. This was the first medical shipment to land in Afghanistan since 15 August and it is the first of three flights planned with Pakistan International Airlines (PIA) to fill ongoing shortage in medicines and medical supplies in Afghanistan. WHO is exploring more options to get further shipments into the country until a reliable humanitarian airbridge to scale-up collective humanitarian effort is established.
- **Sehatmandi suspension:** Funding cuts and freeze from donors is forcing many NGOs to scale down operations or close health facilities supported under the Sehatmandi project, which is the main

initiative providing the basic package of health services (BPHS) in approximately 3,000 health facilities across Afghanistan. This will leave millions of Afghans without primary and secondary health care. The range of services that will be impacted include immunization for children, antenatal care, postnatal care and child delivery for pregnant women, malnutrition care, COVID-19 treatment centers and other essential health services, which will disproportionately affect women, children, and the elderly. It is estimated that the closure of every 50 health facilities could lead to the death of 5 more women and 58 more children under 5 years of age, every day. WHO is exploring options for mitigating the impact of the scale-back in Sehatmandi activities.

- COVID-19:** Afghanistan has reported 153,220 COVID-19 cases and 7,118 deaths as of 30 August 2021 with a PCR positivity rate of around 18%. Last week, 556 new cases of COVID-19 and 40 new deaths were reported. Though this is a 27% increase in cases compared to the week before, overall, the number of cases has continued to decline in the past few weeks. This could be linked to underreporting of cases and a significant decline in testing. A 22% decrease in testing was reported last week compared to the week before. Some laboratories have stopped conducting PCR tests due to shortage of testing kits. No significant increase in admissions to COVID-19 isolation centers has been reported. Decisions linked to the scale-up of vaccination, surveillance and testing, and expediting the installation of oxygen plants in hospitals, are expected to remain on hold until a new government is in place.
- Food insecurity and malnutrition:** Prior to the developments in the recent months, approximately 12.2 million people were projected to experience food insecurity and half of all children in Afghanistan were expected to be severely malnourished in 2021. Of the 13 provinces highly affected by drought, nine far exceed the WHO emergency threshold of Global Acute Malnutrition (15 percent), with some districts reporting figures as high as 35 percent. Stunting already stands at a staggering 36 percent in the country. COVID-19, food price hikes and loss of more than 40% of the country’s crops due to this year’s drought has intensified the food insecurity and malnutrition crisis. The current situation will further worsen access to food. WHO is supporting 70 severe acute malnutrition stabilization centres across the country and providing kits to treat severe cases of malnutrition among children.
- Trauma:** Mass causality incidents remain a major concern as they could further overwhelm health facilities and rapidly deplete health supply stocks at hospitals. WHO has scaled up its trauma management support across 130 health facilities through the provision of training to health facility staff, mass causality management planning and capacity building and provision of trauma management supplies and essential medicines. WHO is also supporting 67 blood banks across the country through renovations, capacity building of technicians and provision of supply and equipment.

Figure 1: Province-wise status of WHO’s trauma care support to health facilities

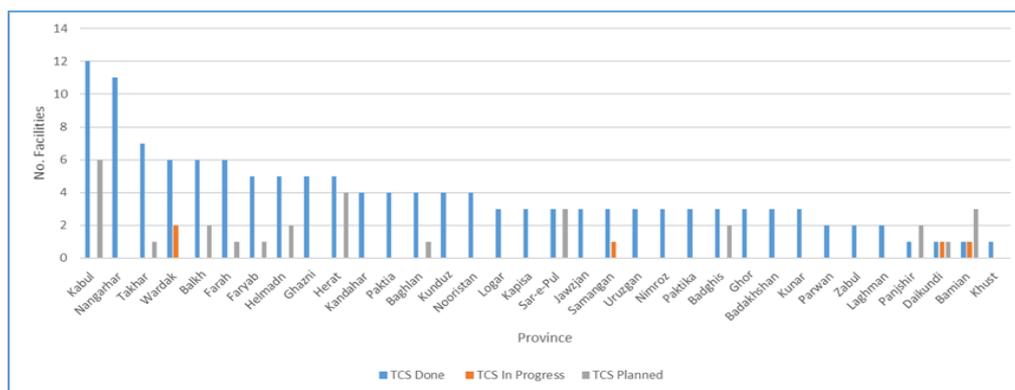


Figure 2: Province-wise status of WHO's support to blood banks

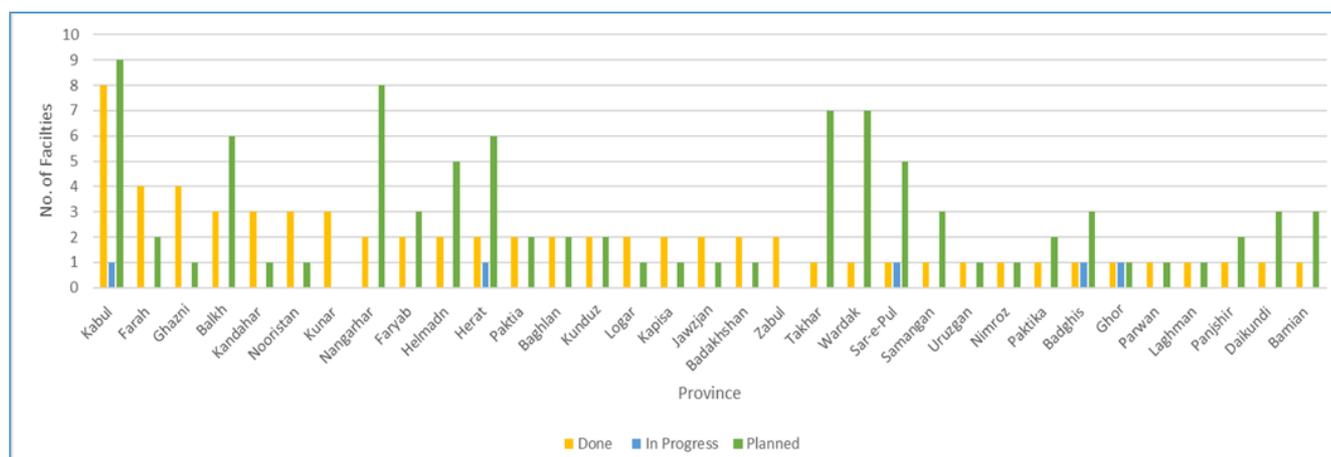
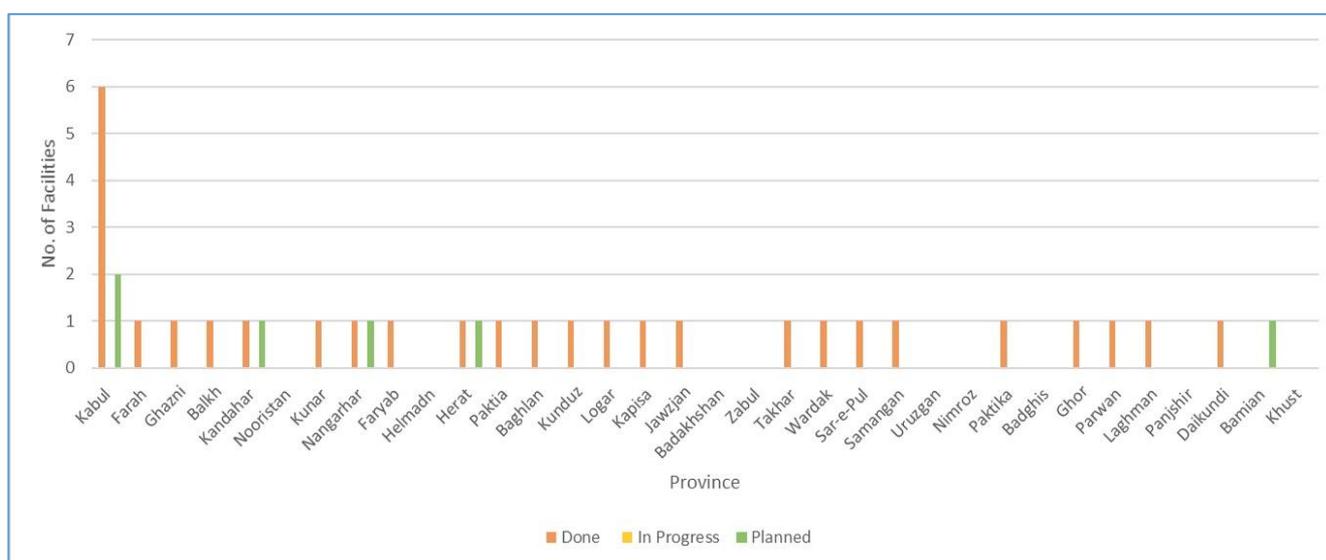


Figure 3: Province-wise status of WHO's mass causality management support to health facilities



WHO RESPONSE

1. ASSESSMENT AND PLANNING

- WHO is assessing the feasibility of supporting some priority health facilities that will be affected due to budget cuts to the Sehatmandi project so that essential health services don't stop.
- WHO is supporting the development of an addendum to the Humanitarian Response Plan to highlight needs and impacts emerging due to the current situation.

2. LOGISTICS AND SUPPLIES

- The 12.5 metric tonnes of WHO medical supplies flown into Mazar-i-Sharif in collaboration with the Government of Pakistan will be directly distributed to 40 health facilities in 29 provinces as well as provided to NGOs to support mobile health clinics and primary health provision.
- WHO provided 5 first aid kits, 25 trauma kits and 20 basic medical kits to Wazir Akbar Khan Hospital in Kabul. The supplies were provided to replenish the hospital's stock which declined due to treatment of the victims of the recent blasts in Kabul.

- WHO provided 48 basic medicine kits, 26 different modules of trauma kits and 2 cholera kits to health facilities in Kabul, Uruzgan and Zabul. The supplies are enough to cover the health needs of 38,000 people.



WHO medical supplies being loaded for distribution to health facilities in Kabul, Uruzgan and Zabul



WHO medical supplies flown in on Pakistan International Airlines being sorted to be dispatch to health facilities

3. HEALTH CLUSTER

- Health cluster partners continue to provide primary health services through mobile health clinics to IDPs in Kabul.

Health services provided to IDPs in Kabul	Total number of services provided
Number of consultations	2772
Antenatal care	147
Postnatal care	79
Family planning	95
Vaccination routine	110
Nursing care	167
Nutrition screening	224
Psychosocial services	28
Birthing	3
Measles/OPV	52
COVID-19 Screening	239
Mental health and psychological support	89
Health education	167

4. POLIO

- Virtual meeting with Taliban authorities held to discuss resumption of polio campaigns. Polio partners continue adapting to the evolving situation and are maintaining preparedness to commence the vaccination campaigns as soon as possible.

5. FUNDING

- WHO released a 2nd allocation from its Contingency Fund for Emergencies (CFE) of USD 1,950,000 to support the airlifting of urgently needed medical supplies to Afghanistan from WHO logistics hub in Dubai to the airport in Mazar-i-Sharif. This follows an earlier release in June of USD1.5 million to address the health consequences of the rapidly deteriorating humanitarian situation in the country.

HEALTH NEEDS

- Key decisions related the COVID-19 response and other health challenges pending in the absence of a government. These need to be urgently expedited.
- Budget cuts and funding freeze to the Sehatmandi project need to be urgently lifted after necessary evaluations by donors. Plans need to be put in place to ensure seamless continuity of health services supported under the project during the funding disruption.
- Shortage of COVID-19 laboratory supplies remain a key need.
- Food and medical supplies remain short in the country. Delays in shipment due to airport disruptions urgently need to be addressed.
- COVID-19 response, especially COVID-19 vaccination needs to be urgently scaled up to prevent increase in transmission.

WHO RECOMMENDATION

6. UN and international partners to continue exploring options for expediting a humanitarian airbridge.
7. Urgent feasibility assessments and coordination needed among donors and health partners to ensure health facilities and staff supported by the Sehatmandi project can continue to be supported.

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