Afghanistan is in desperate need of humanitarian assistance. Drought, recent earthquakes, unseasonal rainfall and a collapsing economy have led to increased food insecurity that persists across Afghanistan, depriving nearly 20 million people of food and creating food-insecurity situations that are classified as being in Crisis or Emergency (IPC Phases 3 or 4). Overall projections estimate that 13 million will likely be in Crisis (IPC Phase 3) and 6 million people in Emergency (IPC Phase 4) between June and November 2022.1

Flash flooding has increased in the central, northern, and southeastern regions of Afghanistan, causing further damage to infrastructure. There is a dire need for multi-sectoral assistance to provide support to affected communities, to rehabilitate their destroyed houses and provide medical supplies, shelter and cash assistance to needy families. During the last month, acute watery diarrhea cases were reported in various provinces, including Ghazni, Jawzjan, Kabul, Kandahar, Laghman, Paktika and Zabul.2

International Medical Corps Response

International Medical Corps continues to provide humanitarian assistance to people in Afghanistan's north, eastern and southern provinces, and has been running mobile health teams to respond to increasing humanitarian needs since August 2021.

Health

In July, International Medical Corps continued to respond to health needs across Afghanistan by supporting the health system, strengthening community capacity and providing services in remote, hard-to-reach areas in Faryab, Kunar, Laghman, Nangarhar, Nuristan and Paktika provinces. International Medical Corps supports 49 mobile health teams, five first-aid trauma posts, 17 static health centers and one 50-bed COVID-19 hospital, providing vital healthcare services, including outpatient consultations, trauma care, malnutrition screening and diagnosis, antenatal and postnatal care for women, and health and hygiene awareness.

Through the 17 static health centers, International Medical Corps provided 18,211 people with outpatient consultations. Clinics helped 639 women with family planning, 978 women attended antenatal care and 1,164 patients received minor and major surgeries. In addition, the clinics provided 2,036 people with trauma care services. In July, the mobile health teams reached 23,521 people through outpatient consultations. The teams also carried out health education sessions for 30,140 people in 15 provinces of Afghanistan.

1 IPC Acute Food Insecurity Analysis, March–November 2022
2 UNOCHA/health cluster bulletin
Water, Sanitation and Hygiene (WASH)

In July, 28,466 people attended hygiene promotion sessions, where they learned about how to prevent acute watery diarrhea and water treatment at the household level. International Medical Corps also distributed handwashing supplies and educational materials about sanitation, food hygiene, handwashing, personal care and environmental hygiene. Additionally, we distributed 3,746 water kits and 5,388 hygiene kits in Balkh, Faryab, Kunar, Nangarhar, Paktika and Sari-Pul provinces.

Protection

In July, we reached 6,096 men and women through one-on-one and group mental health and psychosocial support (MHPSS) assistance in Balkh, Faryab, Kabul, Laghman, Nangarhar, Nuristan and Sari-Pul provinces. In addition, International Medical Corps continued to deliver community-based health education sessions, reaching 30,140 people. We also provided communication materials on various topics, including COVID-19, psychosocial support, and stress and mental health. We have distributed 17,562 leaflets on mental health and hygiene, 12,019 pens, 2,000 notebooks and 1,150 brochures that educate people on how to maintain good personal and environmental hygiene and good mental health, helping communities to prevent the spread of contagious diseases and to learn how to better cope with stress.

Nutrition and Food Security

International Medical Corps’ mobile health and nutrition teams provided vital nutrition services in remote areas of Afghanistan. Staff received training on integrated management of acute malnutrition (IMAM), which covered several topics, including malnutrition and its causes, assessment of acute malnutrition through various anthropometric measurements, and admission and discharge criteria for the outpatient severe acute malnutrition (SAM) program. The mobile nutrition teams provided nutrition education, nutrition screening for children 6–59 months, admission of identified children in the outpatient department (OPD) SAM program for treatment, and established mother-to-mother support groups at the community level for the promotion of optimal maternal, infant and young-child feeding practices. The number of screened children aged 6–59 months in July was 1,448 (including 734 girls). Out of these, 123 (57 boys and 66 girls) were identified with SAM and admitted to OPD SAM for treatment.

MHPSS

International Medical Corps is providing MHPSS awareness and psychoeducation group sessions to promote mental health and wellbeing among those who experienced loss, grief, stress and anxiety, and is providing individual psychosocial support, including case identification and referral, psychological first aid, case management and more intermediate psychosocial support for those in need. During the last month, we provided 10,325 people in seven provinces with these services.