SITUATION UPDATE

FAST FACTS

- International Medical Corps reached 236,203 people with WASH, health, nutrition and protection services in October.
- In the last month, we have distributed 3,148 water kits in Balkh, Nangarhar and Paktika provinces.
- We reached 14,175 people with mental health services.
- We screened 10,821 children aged 6 to 59 months for nutrition status.

The fast-approaching winter period poses significant threats to the Afghan population’s health and well-being. Risks include increased probability of road accidents, hypothermia, frostbite, carbon monoxide poisoning and heart attacks. The incidence of acute respiratory infections are expected to increase, especially in children, and can lead to severe pneumonia, while other chronic respiratory diseases, such as asthma, are exacerbated during winter. Other infectious diseases, such as tuberculosis, measles, scabies, etc., spread more during winter due to overcrowding and less ventilation. Among the 18.1 million people in Afghanistan in need of health services, 1.1 million are considered to be critically in need during the upcoming winter.

Food insecurity and malnutrition also are anticipated to increase, as those engaged in wage labor are particularly likely to find it difficult to work and provide for their families. Findings in the final SMART survey results, shared by the nutrition cluster on October 26, indicate that acute malnutrition remains at high levels across the country, with Badakhshan, Farah, Ghazni, Jawzjan, Kabul, Kunar, Laghman, Nangarhar, Nuristan and Paktika provinces the most affected among the surveyed provinces. Based on the prevalence of severe acute malnutrition (SAM), 29 out of 32 provinces were experiencing levels of SAM above 2%.

Seasonal risks related to protection also are concerning, along with a possible increase in natural disaster-related displacement owing to winter weather conditions as well as other phenomena, including floods and earthquakes. That, accompanied by constraints in access to lifesaving services (particularly for women and girls), leads to an increase in cases related to gender-based violence (GBV) and could result in a rise in negative coping mechanisms and a range of consequences, including death. Continuing restrictions throughout the country on women and girls are expected.

Finally, the continued effect of water scarcity during the winter period in drought-affected areas with decreased water tables will continue to be an issue over the coming months. Based on OCHA’s 2022 mid-year Whole of Afghanistan Assessment report findings, continued reported cases of acute watery diarrhea are expected, especially affecting children under 5.

International Medical Corps Response

In the face of these challenges, International Medical Corps has continued its work to relieve the suffering of the most vulnerable people in Afghanistan with health, nutrition, protection, and water, sanitation and hygiene (WASH) services.

Health

In October, International Medical Corps continued to support the health system, strengthen community capacity and provide services in remote, hard-to-reach areas in Balkh, Faryab, Kabul, Kunar, Laghman, Nangarhar, Nuristan and Paktika provinces. In addition, we expanded services to support cholera-affected people in Balkh province. International Medical Corps currently supports 46 mobile health teams, five first-aid trauma posts, 17 static health centers and two
hospitals. We provided vital healthcare services, including outpatient consultations, trauma care, malnutrition screening, antenatal and postnatal care for women, and awareness raising about health and hygiene.

Through the 17 static health centers we support, International Medical Corps provided 26,690 people with outpatient consultations. Clinics helped 278 women with family planning, while 1,544 women received antenatal and postnatal care, 56 patients received minor and major surgeries, and 691 people received trauma care. In addition, the clinics provided 3,063 people with trauma-care services.

Mobile health teams reached 60,807 people through outpatient consultations in October. The teams also provided health education sessions for 67,417 people in 15 provinces of Afghanistan.

**Water, Sanitation and Hygiene (WASH)**

In October, 89,975 people attended hygiene promotion sessions where they learned how to prevent acute watery diarrhea and treat water in their households. International Medical Corps also distributed handwashing supplies and educational materials about sanitation, food hygiene, handwashing, personal care and environmental hygiene.

We distributed 3,148 water kits and 44 hygiene kits in Balkh, Nangarhar and Paktika provinces, and are working to construct 17 piping systems in Faryab, Kunar, Nangarhar and Paktika provinces that will provide clean water to the affected communities.

**Mental Health and Protection**

In October, we reached 14,175 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 97,297 people.

International Medical Corps is providing MHPSS awareness and psychoeducation group sessions to promote mental health and well-being among those who have experienced loss, grief, stress and anxiety. We are also providing individual psychosocial support, including case identification and referral, psychological first aid and case management.

**Nutrition and Food Security**

International Medical Corps’ mobile health and nutrition teams continued to provide key curative and preventive nutrition services, screening 10,821 children aged 6 to 59 months in October. Out of these, 591 (including 357 girls) were identified with severe acute malnutrition and admitted to outpatient SAM treatment. We formed 11 new mother-to-mother support groups and held meetings across all the existing support groups within the four provinces to discuss optimal maternal, infant and young-child nutrition practices. These sessions offer pregnant and lactating women a forum to share breastfeeding experiences and seek advice from trained nutrition counselors on how they can achieve optimal feeding practices. We also organized five days of maternal, infant and young-child nutrition training for 21 midwives and two nutrition counselors. As part of preventive services, we provided 477 children aged 6 to 59 months and 1,295 pregnant women with vitamin A, iron and folic acid supplementation.