

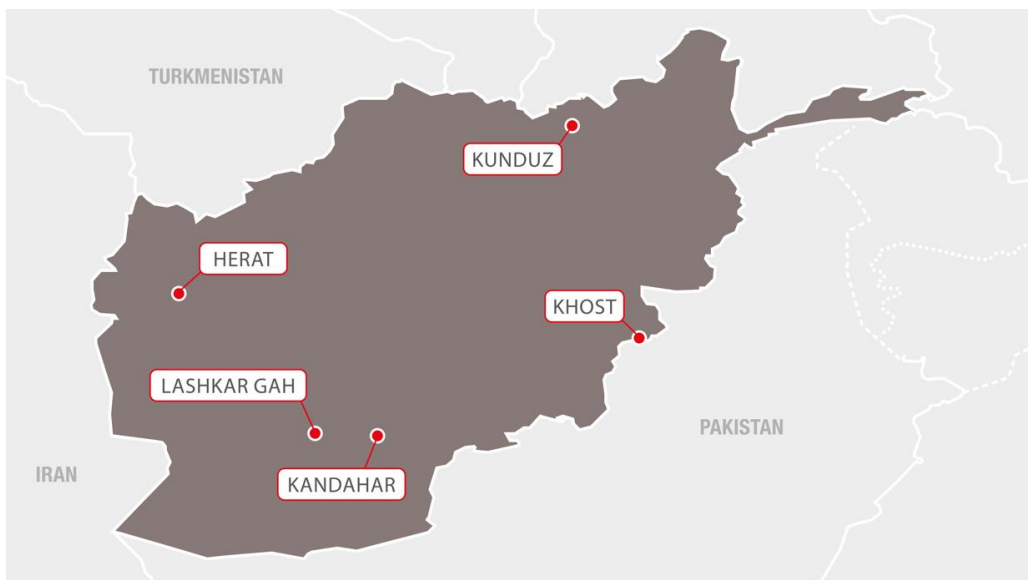
Afghanistan Crisis Info #1

10 August 2021

RECENT DEVELOPMENTS

General background on our activities in Afghanistan can be found later in this document

Since the beginning of the year, fighting has steadily increased in Afghanistan, with a considerable deterioration in security since May. The US and NATO forces are both withdrawing their troops, and the Afghan forces and the Islamic Emirate of Afghanistan (IEA; also known as the Taliban) are fighting for territory. These clashes continue to claim thousands of lives while crippling public infrastructure. A [UNAMA report](#) published in July stated that the number of civilian casualties during May and June was the highest for those months since it began systematic documentation in 2009. And the Afghan Independent Human Rights Commission estimates that as many as 938,000 people have been newly displaced from their homes by conflict over the past three months, and approximately five million people have been internally displaced in total.



Lashkar Gah

NOTE: The situation is very fluid and may change at short notice

The situation in Lashkar Gah is very tense, and fighting has entered the city. On 9 August a rocket exploded in the compound of Boost hospital where we work, very close to the Emergency Room. Fortunately there were no casualties.

The main trauma facility has at times been overwhelmed by the number of war wounded but recently many people have fled the city, and there are fewer patients presenting at the MSF-supported Boost hospital. [The team are currently living in the basement of the hospital and are continuing to treat patients](#), but are working amid the sounds of shelling, gunfire, war planes and helicopters.

War-wounded and MSF's regular patients are finding it more difficult to access healthcare, though their medical needs remain. People are forced to wait for the fighting to die down before trying to reach hospital, which results in influxes of patients with severe conditions.

Between May and the end of July, the MSF team treated 482 war-wounded people, nearly all (92 per cent) for injuries caused by shells and bullets, and around a quarter (26 per cent) aged under 18. In one day in early August, 23 surgeries were performed.

Key figures:

- 652 war-wounded treated from 3 May to 6 August, 170 between 1 and 6 August
- 71 surgical interventions between 1 and 6 August

Kunduz

Fighting had also been taking place around the outskirts of the city of Kunduz until 7 August when the IEA made large territorial gains and the fighting moved into the city itself, with gunfire, rocket-propelled grenades, mortars and airstrikes in densely populated areas. On 8 August the city fell to the control of the IEA, apart from the airport that at the time of writing remains under government control. MSF activities continue.

To address the most immediate needs, on 6 July MSF opened a temporary clinic for displaced people providing outpatient consultations for women, children and the wounded in the Sar Dawra area of Kunduz city. The clinic saw around 300 patients per day. Those who needed further care were referred to the Kunduz regional hospital. The teams also provided safe drinking water. These activities were handed over to another organisation in early August, so that the team could concentrate on trauma activities.

On 26 July, the MSF office space was transformed into the Kunduz Emergency Trauma Unit (KETU), providing emergency surgical care to people injured by the fighting. The facility, which has an initial capacity of 25 beds, has an emergency room, operating theatre, inpatient department (including high dependency beds), dressing and procedure room and pharmacy. MSF supports the regional hospital with supplies for sterilisation, surgery, and wound care. The support to the District Advanced Post located in a district outside of Kunduz city also continues, and there has also been an increase in wounded in recent weeks. An MSF team provides first aid and stabilisation to trauma patients and ensures referrals for those with more severe health needs.

Key figures:

- 126 patients treated in the District Advanced Post between 1 and 8 August
- 127 patients treated in the KETU between 1 and 9 August, including 27 children aged under 16. 48 surgeries were performed over the same period

Kandahar

Kandahar has seen an increase in fighting in recent weeks, and MSF has adapted its activities to respond. The drug-resistant tuberculosis (DR-TB) project is continuing, and patients have been offered remote consultations and provided with buffer stocks of medication to avoid them having to cross frontlines to access care.

The fighting has also displaced thousands of people, and many have sought shelter inside the city. MSF has set up a temporary clinic in Haji camp, Kandahar city, where 500 people are currently living and is offering primary healthcare for children under 5 years. The team have also undertaken rehabilitation of water points and have ensured access to showers and toilets.

Key figures:

- 170 patients under five treated in the temporary clinic since 28 July

Herat

Fighting has not yet entered the city centre but continues to be intense in parts of the periphery, and this has forced MSF to put its outreach activities on standby. MSF activities are continuing in the Inpatient Therapeutic Treatment Centre (ITFC), in the Gazar-Gah COVID-19 Treatment Centre in Herat city, and in the primary healthcare clinic in Kahdestan camp for the internally displaced.

We have begun to see the consequences of the fighting on our patients and some people have delayed bringing their child to the ITFC due to the violence. The Kahdestan clinic has seen a big reduction in the number of people arriving for consultations, there are around 160 per day rather than the 450 we would previously expect.

Khost

MSF activities continue in the maternity in Khost, and in the eight supported comprehensive health centres (CHCs). In July there were 1,450 deliveries in the Khost maternity hospital and over 870 in the CHCs that MSF supports.

KEY MESSAGES

1. In nearly all our project locations we are seeing the consequences the conflict is having on the Afghan population: people are being killed and injured in the crossfire or by explosions, they find it increasingly difficult to reach medical facilities, and thousands are being forced from their homes.
2. Movements of people and increasing numbers of casualties are putting health structures under increased pressure, meaning patients cannot access the care they need. The Afghan health system was already under-funded and under-resourced but now it is at breaking point.
3. Conflict severely affects access to healthcare. People cannot travel safely to be treated or are delayed by active fighting or increased security checks on the roads. This leads to them arriving very late and severely ill.
4. As violence increases around the country, all parties to the conflict must take all necessary measures to ensure that health facilities, patients and staff are not attacked or threatened and that patients can safely access medical care.

MSF REGULAR ACTIVITIES

KHOST

MSF opened a maternity hospital in Khost in 2012 to provide safe, high quality and free maternal and neonatal care to women and their babies in the southeastern part of the country. Since 2016, MSF has also supported five MoPH health comprehensive health centres (CHCs) in the province, and this expanded to eight in 2021. Increasing the capacity of these centres will allow them to stay open 24/7, and also means they can assist with non-complicated deliveries, enabling more patients to give birth closer to home.

The hospital services comprise an inpatient department of 60 beds, a 10-bed delivery unit, a 28-bed newborn unit that includes a 10-bed neonatal intensive care unit and a dedicated kangaroo mother care area, two operating theatres, vaccinations for newborn babies, family planning, and health promotion.

In July there were 1,450 deliveries in the Khost maternity hospital and 871 in the CHCs that MSF supports.

KUNDUZ

See recent developments

BOOST HOSPITAL, HELMAND PROVINCE

See recent developments

MSF has been supporting Boost provincial hospital in Lashkar Gah, the capital of Helmand province, since 2009. The hospital serves a population of approximately 1.3 million and is the only referral hospital in the province.

MSF supports the emergency room, the surgical unit, the inpatient department, the maternity department, the neonatology unit, laboratory and radiology department, as well as the 82-bed paediatric department and an Inpatient Therapeutic Feeding Centre.

HERAT

Since December 2019, MSF has been supporting the Herat Regional Hospital's 40-bed Inpatient Therapeutic Feeding Centre (ITFC). The majority of the patients and caretakers travel more than 15km to come for care, and some from as far away as Badghis, Ghor and Farah.

MSF has also been running a clinic for internally displaced people (IDPs) and the local population in Herat since December 2018. The clinic offers general consultations, including for non-communicable diseases, screening and treatment of malnutrition, ante- and post-natal consultations, as well as childhood vaccinations and health promotion sessions to the displaced people living in Shaidayee (currently on standby) and Kahdestan.

MSF has been assisting the pandemic response by triaging COVID-19 cases in Herat Regional Hospital since April 2020 (although due to the fighting, we recently scaled down this part of the activity to reduce our teams' exposure), as well as establishing a COVID-19 treatment centre in Gazer Gah. This centre helps to increase the region's bed capacity for patients in need of oxygen and has so far been operational three times, opening in response to different waves of the pandemic. The centre provided treatment to patients with severe COVID-19 symptoms from June to September 2020, December 2020 to February 2021 and most recently from 9 June 2021.

KANDAHAR

See recent developments

In Kandahar, MSF works in partnership with the Ministry of Public Health to diagnose and treat patients with drug-resistant tuberculosis (DR-TB). MSF runs a TB centre, which includes a laboratory, an outpatient clinic and 10-beds for inpatients who are suffering from DR-TB. MSF provides mental health support and undertakes health promotion activities.