Jhpiego
an affiliate of Johns Hopkins University

Afghanistan Country Profile

innovating to save lives

Jhpiego in Afghanistan

Quick Facts

Estimated total population:[1]
24.5 million

Maternal mortality ratio:[2]
327/100,000 live births

Infant mortality rate:[3]
74/1,000 live births

Under-five mortality rate:[3]
102/1,000 live births

Total fertility rate:[3]
5.1

Contraceptive prevalence:[3]
19.5% (modern methods)
21.2% (all methods)

HIV prevalence:[4]
<0.1%

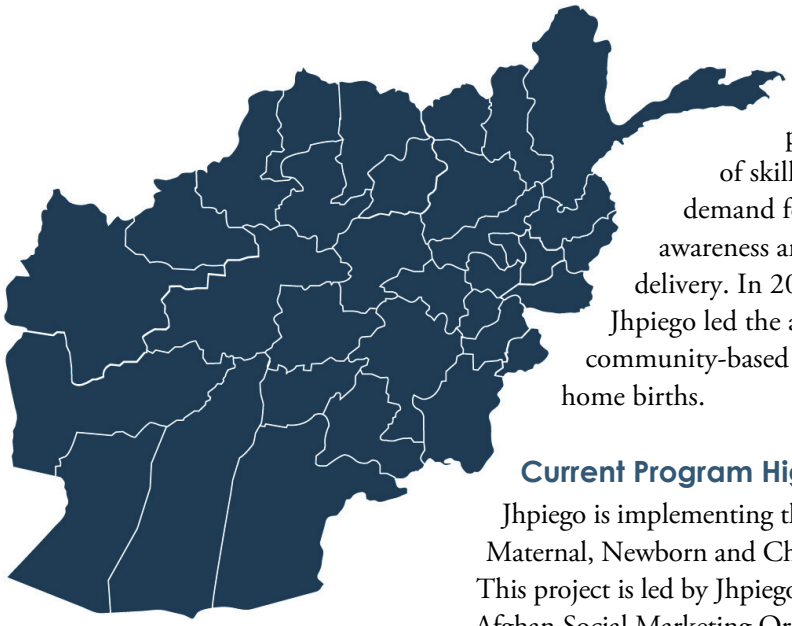
Births with skilled provider:[3]
34.3%

Sources:
[1] Central Statistics Office, Afghanistan Population Data, 2010–2011;
[2] Afghanistan Mortality Survey, 2010;
[3] *Afghanistan Multiple Indicator Cluster Survey 2010–2011;*
[4] UNAIDS *2008 Report on the Global AIDS Epidemic*.

Background

Years of isolation and conflict in Afghanistan, a landlocked country in South Central Asia, have produced some of the most alarming health indicators in the world, particularly among women and children. Since the fall of the Taliban in 2002, efforts led by the Afghanistan Ministry of Public Health (MOPH) have resulted in considerable achievements. For instance, the percentage of births attended by skilled providers rose from 8% in 2002 to 38.6% in 2010. Despite these achievements, deaths of infants and children under five years old are still high, coverage of skilled attendance at birth has remained low, contraceptive prevalence is the lowest in the region and there is a critical dearth of skilled female health workers in rural areas.

Jhpiego has been working since 2002 to improve Afghanistan's dire health care situation, initially with financial support from UNICEF and the U.S. Agency for International Development (USAID). Since then, Jhpiego has greatly expanded its work, often at significant risk to its staff and consultants, and technically supported the MOPH in women's and reproductive health. The Afghanistan program is one of Jhpiego's most creative and ambitious, drawing on the energy of the MOPH and its desire to change and rebuild the country after many years of war. From 2003 to 2006, Jhpiego worked as a partner on the Rural Expansion of Afghanistan's Community-based Health Care (REACH) Program, led by Management Sciences for Health, to establish an improved environment for reproductive and maternal health, increase numbers of skilled attendants and improve the quality of reproductive and maternal health services. In 2005, the USAID-funded ACCESS Program, led by Jhpiego, began a demonstration project to reduce mortality from postpartum hemorrhage (PPH) through the use of birth planning coupled with oral misoprostol at home births to reduce deaths from PPH where there is no skilled provider. ACCESS also supported the establishment of the Afghan Midwives Association (AMA), one of the country's first civil society institutions to focus on women's professional development. In 2009, Jhpiego, in collaboration with the MOPH and with funding from UNICEF, led a national, facility-based emergency obstetric and neonatal care (EmONC) assessment to identify needs and gaps and to inform program efforts for increasing quality, coverage, and utilization of services and critical support systems in Afghanistan. UNICEF also supported Jhpiego to conduct an assessment of EmONC training and to develop 15 teams of EmONC trainers. From 2006 to 2012, in partnership with Save the Children and Futures Group, Jhpiego led the USAID-funded Health



Services Support Project (HSSP) to: 1) improve the delivery of high-quality health care services in health facilities across 21 provinces in Afghanistan, 2) increase the number of skilled female providers, 3) generate community demand for health services, and 4) integrate gender awareness and gender-sensitive practices into health service delivery. In 2013, with support from the Arnow Family Fund, Jhpiego led the advancement of national plans to expand community-based distribution of misoprostol to prevent PPH at home births.

Current Program Highlights

Jhpiego is implementing the five-year, USAID-funded Family Planning, Maternal, Newborn and Child Health (FP/MNCH) Project in Afghanistan. This project is led by Jhpiego with partners FHI 360, Futures Group and the Afghan Social Marketing Organization (ASMO). The goal of the project is to increase utilization of high-quality FP/MNCH services through the introduction and scale-up of culturally appropriate, cost-effective and high-impact FP/MNCH interventions that strengthen and enhance existing primary care services provided through the MOPH's Basic Package of Health Services and the private sector. The project aims to achieve this by:

- Increasing access to and availability of gender-sensitive, sustainable health services at the facility and community levels;
- Improving the quality of equitable, gender-sensitive health care services;
- Increasing community, household and individual demand for health services; and
- Strengthening the MOPH's stewardship of the FP/MNCH Project's interventions.

Key Accomplishments

Selected results achieved under HSSP include:

- Implemented an education intervention on birth preparedness, complication readiness and distribution of misoprostol for prevention of PPH at home births for more than 10,210 pregnant women.
- Developed and deployed a revised national curriculum for the community midwifery education program, ensuring that community midwives are trained to competently meet the demands of their rural communities. Of the 3,340 midwives who were trained across donors since 2002, HSSP trained 1,054, representing almost 33% of the total workforce. The increase in the number of female health care providers contributed to an increase in the percentage of women delivering in a facility from 19% in 2005 to 34.3% in 2011.
- Developed the learning materials and standards for a national community health nursing education program to meet the critical shortage of nurses in rural areas.

- Built the organizational and technical capacity of the AMA to champion the profession, with more than 2,000 members across 33 provinces.
- Supported the Afghan Midwifery and Nurses Education and Accreditation Board to accredit 29 midwifery education schools across the country.
- Developed the MOPH National Reproductive Health Strategy and the National Human Resource for Health Capacity Building Strategy.
- Supported the MOPH to achieve national coverage of community-based postpartum family planning.
- Scaled up the community distribution of misoprostol and reached 10,212 women to protect them against PPH at home births.
- Trained 14,389 community health workers to deliver postpartum family planning, a significant force in helping to increase modern contraceptive use from 10% in 2005 to 20% in 2010.

Children in Kabul, Afghanistan.

Partners/Donors

All of the Jhpiego's work in Afghanistan has been and continues to be founded upon strong partnerships with the MOPH, nongovernmental organizations and Afghan professional organizations such as the AMA, the Afghan Society for Obstetricians and Gynecologists, and the Afghanistan National Midwifery and Nursing Education Accreditation Board. The FP/MNCH Project is funded by USAID and project partners include FHI 360, Futures Group and ASMO.

References

Central Statistics Office (CSO) of Afghanistan, Ministry of Public Health. 2010–2011. Afghanistan CSO Population data. Accessed at: http://afghaneic.org/Data/CSO%20Population%20Data/Afghanistan%20CSO%20population%20data%201389%20(2010%20-11)%20update%20July%208-2010.pdf

Central Statistics Organisation (CSO) and UNICEF (2012). *Afghanistan Multiple Indicator Cluster Survey 2010–2011: Final Report.* Kabul: CSO and UNICEF.

Joint United Nations Programme on HIV/AIDS (UNAIDS). *2008 Report on the Global AIDS Epidemic*.

Camel convoy, Baghlan province, Afghanistan.