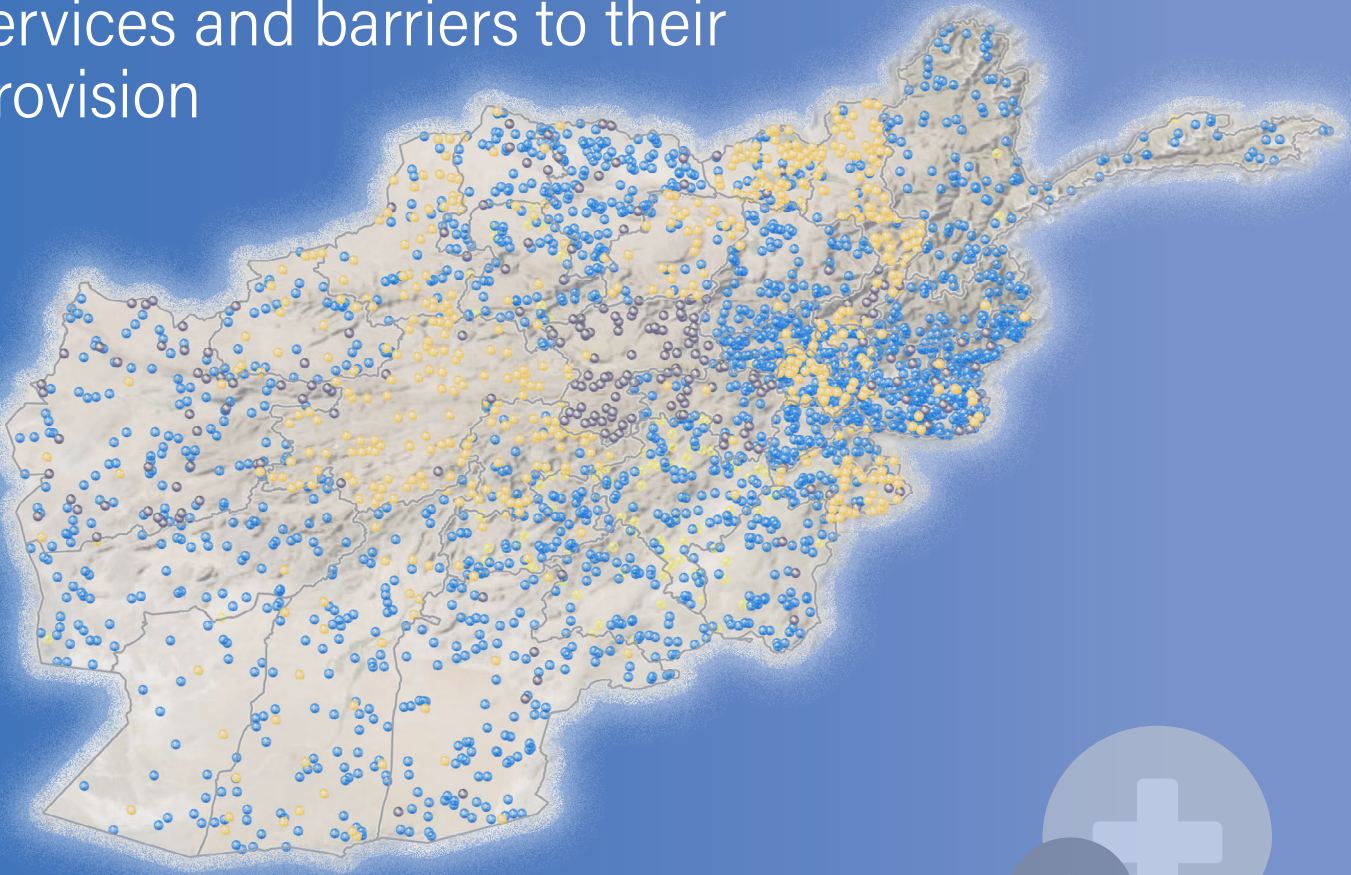


# HeRAMS Afghanistan Baseline Report 2022



## NON-COMMUNICABLE DISEASE AND MENTAL HEALTH SERVICES

A comprehensive mapping  
of availability of essential  
services and barriers to their  
provision



March 2022



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# HeRAMS AFGHANISTAN

## BASLINE REPORT 2022

### Non-communicable disease and mental health services

A comprehensive mapping of availability of essential  
services and barriers to their provision

March 2022

# ACRONYMS

<b>BHC</b>	Basic Health Center
<b>BHC+</b>	Basic Health Center Plus
<b>CHC</b>	Comprehensive Health Center
<b>CHC+</b>	Comprehensive Health Center Plus
<b>COPD</b>	Chronic Obstructive Pulmonary Disease
<b>DH</b>	District Hospital
<b>FATP</b>	First Aid Trauma Post
<b>FHH</b>	Family Health House
<b>HeRAMS</b>	Health Resources and Services Availability Monitoring System
<b>ICE</b>	Information, Education and Communication
<b>ICE</b>	Information, Education and Communication
<b>MHT</b>	Mobile Health Team
<b>NH</b>	National Hospital
<b>NCD</b>	Non-communicable Disease
<b>PH</b>	Provincial Hospital
<b>RH</b>	Regional Hospital
<b>SH</b>	Specialist Hospitals
<b>SHC</b>	Sub Health Center
<b>WHO</b>	World Health Organization

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# DISCLAIMER

Disruptions to health systems can impede provision of and access to essential health services. Communities' vulnerability to increased morbidity and mortality substantially increases when a lack of reliable information prevents sound decision-making, especially in rapidly changing environments requiring continued assessment. The Health Resources and Services Availability Monitoring System (HeRAMS) aims to provide decision-makers and health stakeholders at large with vital and up-to-date information on the availability of essential health resources and services, help them identify gaps and determine priorities for intervention.

HeRAMS draws on the wealth of experience and knowledge gathered by the World Health Organization (WHO) and health sector actors, including nongovernmental organizations, donors, academic institutions and other technical bodies. It builds on a collaborative approach involving health service providers at large and integrating what is methodologically sound and feasible in highly constrained, low-resourced and rapidly changing environments such as humanitarian emergencies. Rapidly deployable and scalable to support emergency response and fragile states, HeRAMS can also be expanded to - or directly implemented as - an essential component of routine health information systems. Its modularity and scalability make it an essential component of emergency preparedness and response, health systems strengthening, universal health coverage and the humanitarian development nexus.

HeRAMS has been deployed in Afghanistan since November 2021 and has allowed for the assessment of 2730 health facilities across the country, against a total estimate of 3012 to date.

This analysis was produced based on the data collected up to March 22<sup>nd</sup> 2022 and while the deployment of HeRAMS, including data verification and validation, continue. Hence, this analysis is not final and is produced solely for the purposes of informing operations.

This is the sixth report of the **HeRAMS Afghanistan Baseline Report 2022** series focusing on the availability of non-communicable disease and mental health services. It is a continuation of the first report on the operational status of the health system<sup>1</sup> and should always be interpreted in conjunction with results presented in the first report. Additional reports are available on essential clinical and trauma care services<sup>2</sup>, child health and nutrition services<sup>3</sup>, communicable disease services<sup>4</sup>, and sexual and reproductive health services<sup>5</sup>.

Caution must be taken when interpreting the results presented in this report. Differences between information products published by WHO, national public health authorities, and other sources using different inclusion criteria and different data cut-off times are to be expected. While steps are taken to ensure accuracy and reliability, all data are subject to continuous verification and change.

For additional information, please see <https://www.who.int/initiatives/herams> or contact [herams@who.int](mailto:herams@who.int)

<sup>1</sup> HeRAMS Afghanistan Baseline Report - Operational status of the health system: A comprehensive mapping of the operational status health facilities, <https://www.who.int/publications/m/item/herams-afghanistan-baseline-report-2022-operational-status-of-the-health-system>.

<sup>2</sup> HeRAMS Afghanistan Baseline Report - General clinical and trauma care services: A comprehensive mapping of availability of essential services and barriers to their provision, <https://www.who.int/publications/m/item/herams-afghanistan-baseline-report-2022-general-clinical-and-trauma-care-services>.

<sup>3</sup> HeRAMS Afghanistan Baseline Report - Child health and nutrition services: A comprehensive mapping of availability of essential services and barriers to their provision, <https://www.who.int/publications/m/item/herams-afghanistan-baseline-report-2022-child-health-and-nutrition-services>.

<sup>4</sup> HeRAMS Afghanistan Baseline Report - Communicable disease services: A comprehensive mapping of availability of essential services and barriers to their provision, <https://www.who.int/publications/m/item/herams-afghanistan-baseline-report-2022-communicable-disease-services>.

<sup>5</sup> HeRAMS Afghanistan Baseline Report - Sexual and reproductive health services: A comprehensive mapping of availability of essential services and barriers to their provision, <https://www.who.int/publications/m/item/herams-afghanistan-baseline-report-2022-sexual-and-reproductive-health-services>.

# PART I:

## AVAILABILITY OF NCD AND MENTAL HEALTH SERVICES





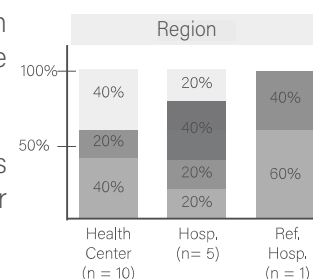
# INTERPRETATION GUIDE

## Service availability

This chapter aims to provide an overview of availability of non-communicable (NCD) and mental health services. It should be noted that the analysis was limited to operational health facilities. A summary of health facilities evaluated and their operational status is available on page 5. Further details on the operational status of health facilities can be found in the first report of the **HeRAMS Afghanistan Baseline Report 2022** series.

### Bar chart

Overall availability of NCD and mental health services is shown disaggregated by region and health facility type. The number of health facilities included is displayed below the health facility type name.



It should be noted that the number of services included was limited to health services expected based on national guidelines and depends on the type of health facility. Further details on services included for each type of health facilities is shown in [annex I](#).

### Service availability per population (heat map)

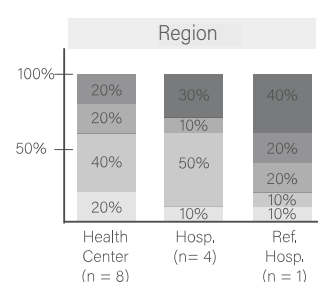
Service 1	0.9	0	0.4	2.1	0.7
Service 2	0.4	0	0.9	3.5	0.7
Service 3	0.3	0	0.7	0.3	0.2
Service 4	0.8	0	0.4	0.8	0.6
Service 5	0.5	0	0.9	1.9	0.8
	Province A	Province B	Province C	Province D	Province E

A more detailed overview of availability of individual services is shown as heat maps. Each cell indicates the number of health facilities providing a given service in relation to the catchment population. It should be noted that different catchment areas were used for referral and specialized health services (i.e. provincial vs. regional population estimates). For more details on population estimates, see [annex II](#).

To account for partially available services, a weighing was applied with a weight of 1 given to services reported as fully available and 0.5 for partially available services.

## Main barriers impeding service availability

### Bar chart



For services not or only partially available, main barriers impeding service delivery are displayed as percentage of all barriers reported. Unlike for service availability, bar charts display main barriers disaggregated by health facility type and region with the number health facilities reporting at least one barrier indicated below the health facility type name. Note that for each service, up to three barriers could be reported. Hence, the percentages shown in these charts should not be used to make any conclusion on the frequency at which a barrier was reported nor on the percentage of health facilities having reported a barrier. For a conclusion on the overall frequency at which a given barrier was reported, please refer to the heat map below.

### Heat map

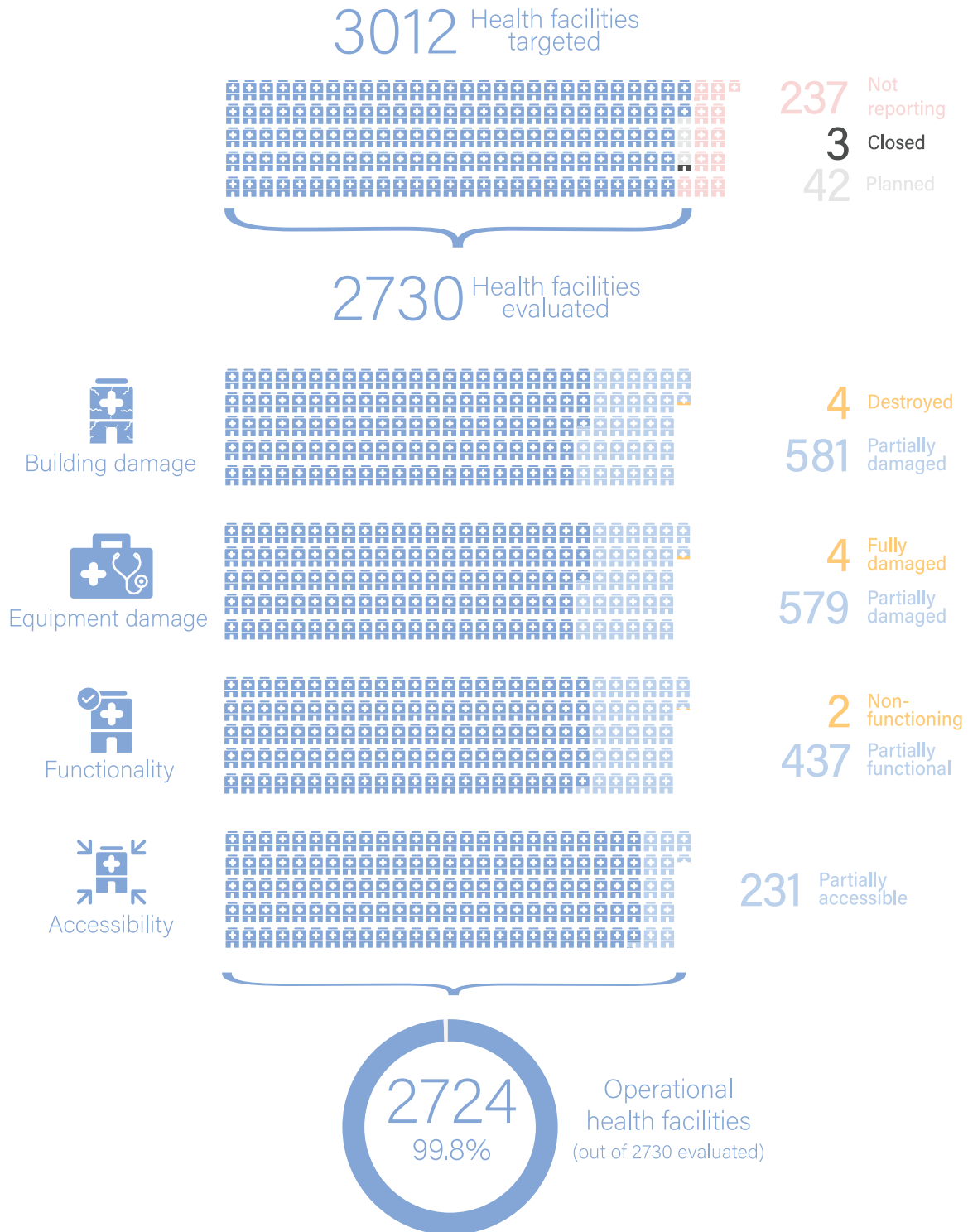
Heat maps provide additional insights on main barriers for individual services by catchment area. Cell opacity levels indicate the percentage of health facilities in the catchment area reporting a given barriers. The integer inside the cell denotes the number of health facilities reporting a given barrier while the percentage indicates the percentage of health facilities reporting the barrier. Note that health facilities not reporting a barrier (i.e. health facilities where the service is fully available or not normally provided) were excluded from these charts.

Service 1	2 20%	3 30%	5 50%	1 10%	5 50%
Service 2	6 60%	2 20%	1 10%	5 50%	7 70%
Service 3	8 80%	4 40%	4 40%		2 20%
Service 4	3 30%	7 70%	1 10%		5 50%
Service 5	1 10%	3 30%	2 20%		3 30%
	Province A	Province B	Province C	Province D	Province E



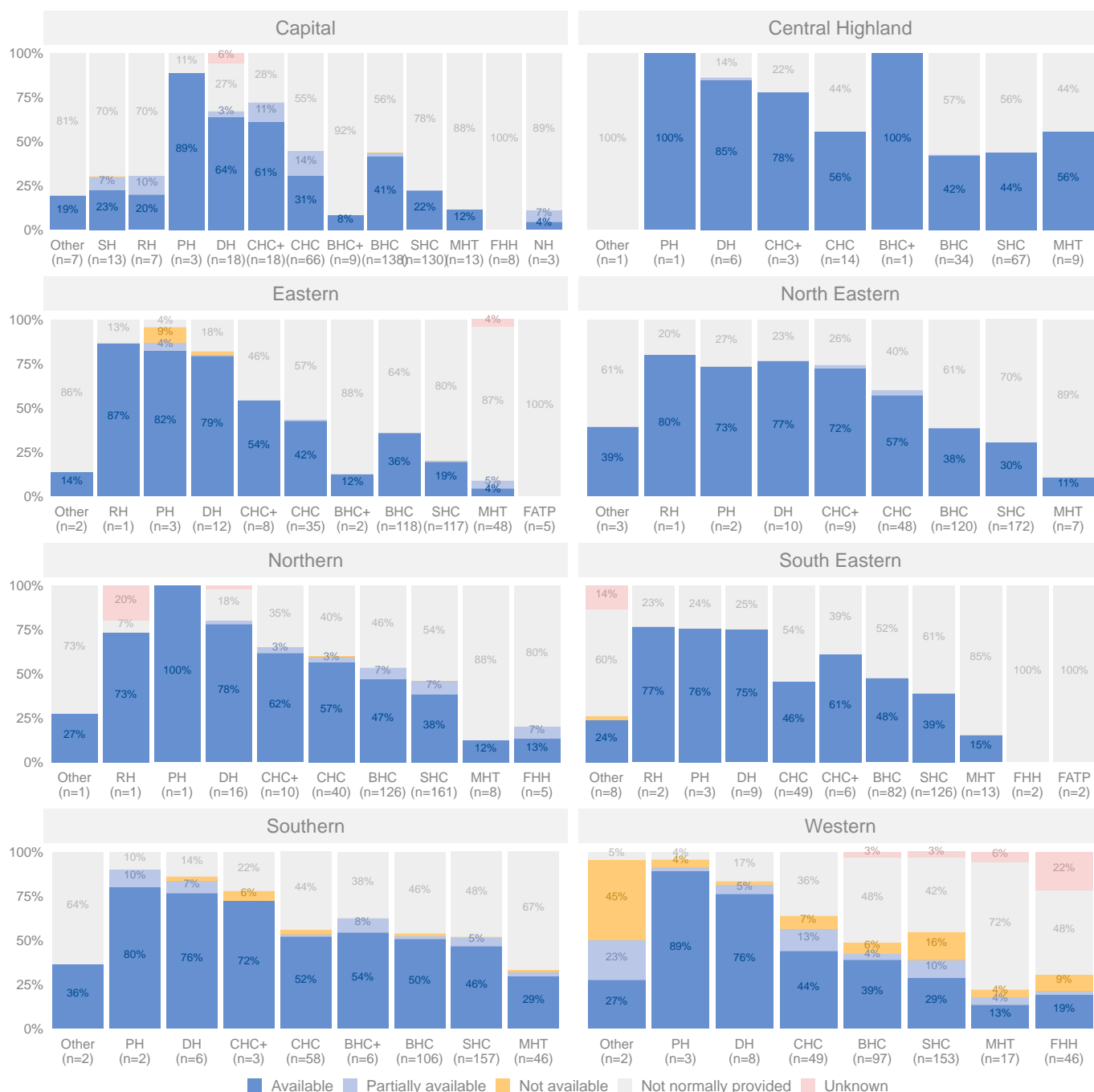
# OVERVIEW OF HEALTH FACILITIES EVALUATED

Summary of health facilities evaluated



# SERVICE AVAILABILITY BY HEALTH FACILITY TYPE

Availability of essential services by region and health facility type<sup>6</sup>



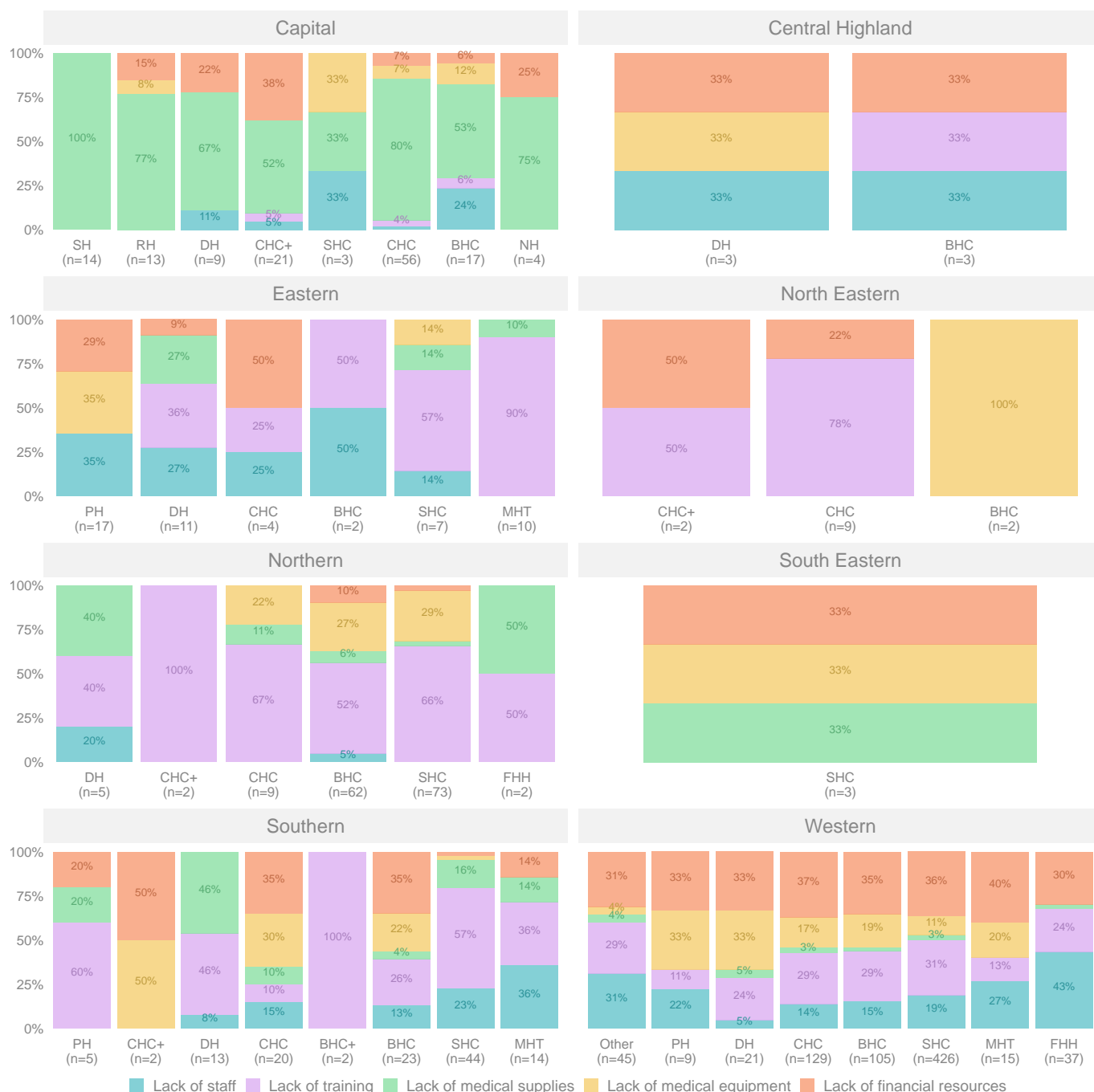
Number of services included by health facility type<sup>6</sup>

NH	SH	RH	PH	DH	CHC+	CHC	BHC+	BHC	SHC	MHT	FHH	FATP	Other
15	14	15	15	12	6	5	4	4	4	4	3	2	11

<sup>1</sup> See annex I for a comprehensive description of services included for each health facility type.

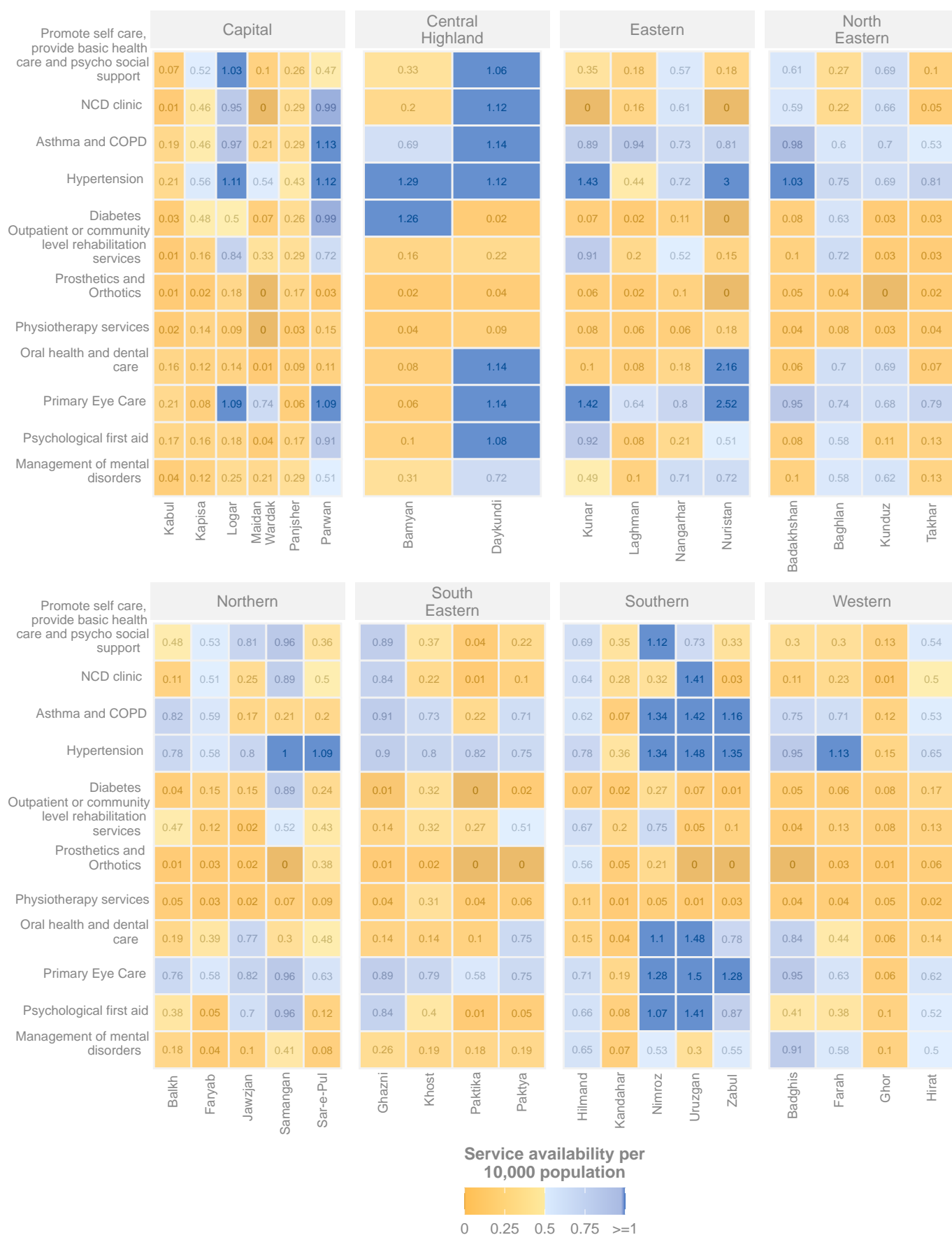
# MAIN BARRIERS BY HEALTH FACILITY TYPE

Main barriers impeding availability of essential health services by region and health facility type



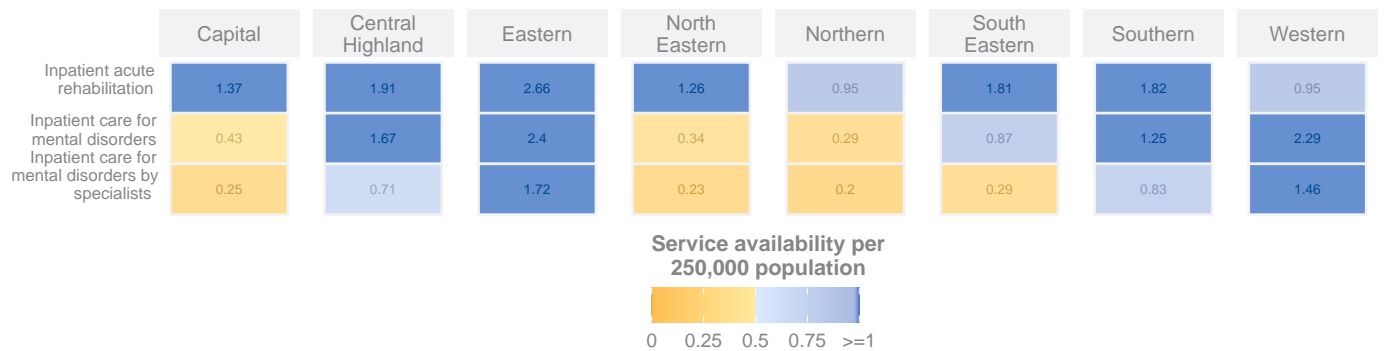
# SERVICE AVAILABILITY BY CATCHMENT POPULATION

Number of health facilities providing essential community and primary services per 10,000 population<sup>7</sup>



<sup>7</sup> See annex II for an overview of provincial and regional population estimates.

### Number of health facilities providing specialized services per 250,000 population<sup>8</sup>

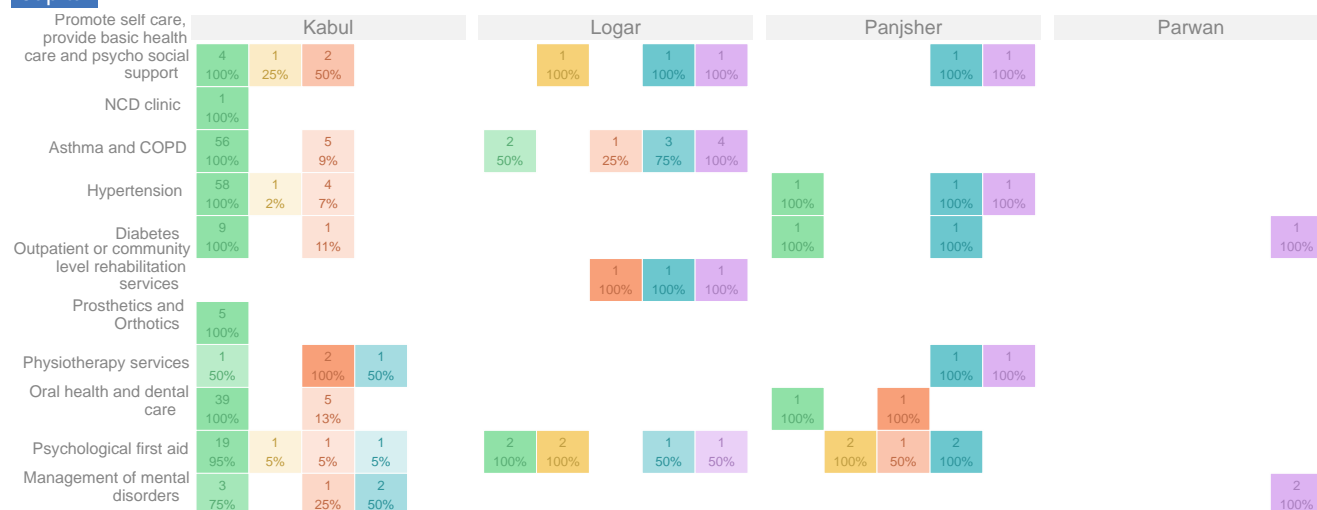


<sup>8</sup> See annex II for an overview of provincial and regional population estimates.

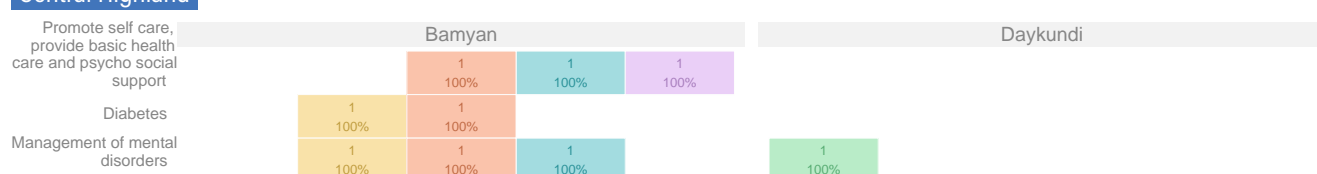
# MAIN BARRIERS IMPEDING SERVICE DELIVERY

Main barriers impeding availability of essential community and primary health services by province

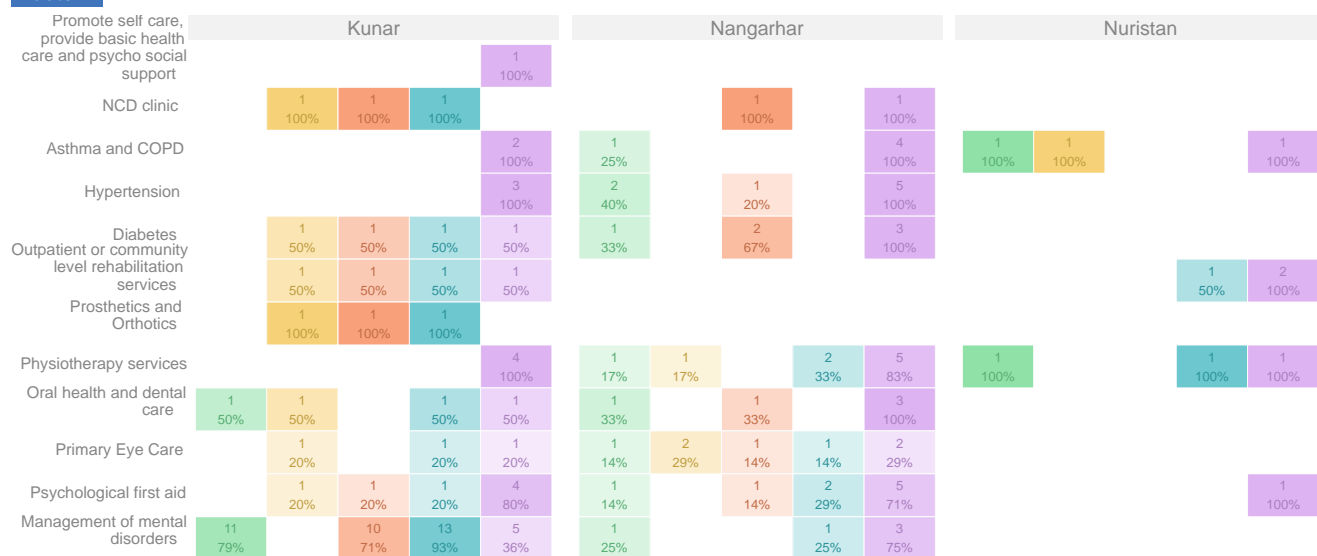
## Capital



## Central Highland



## Eastern



### Type of barrier



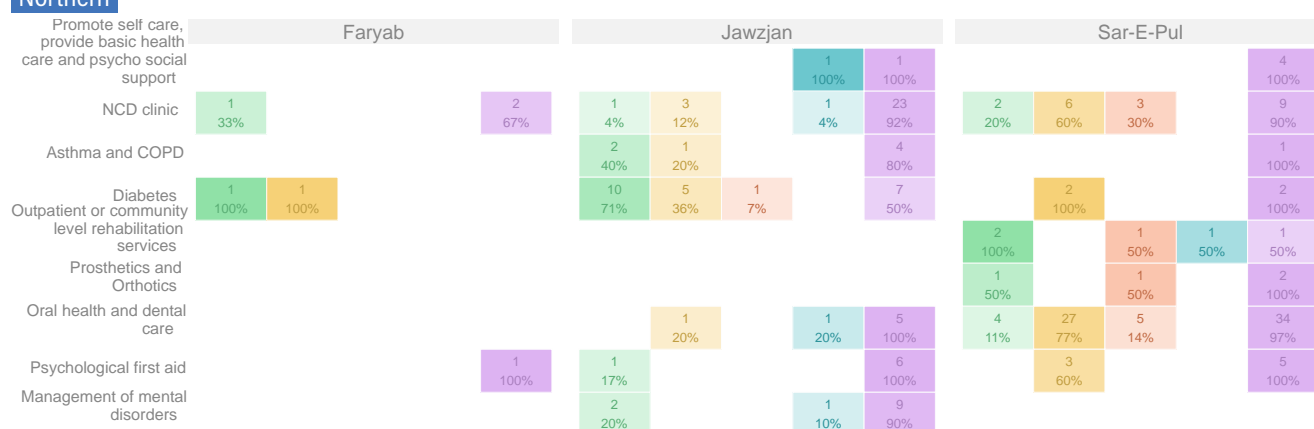
### % of health facilities reporting a barrier



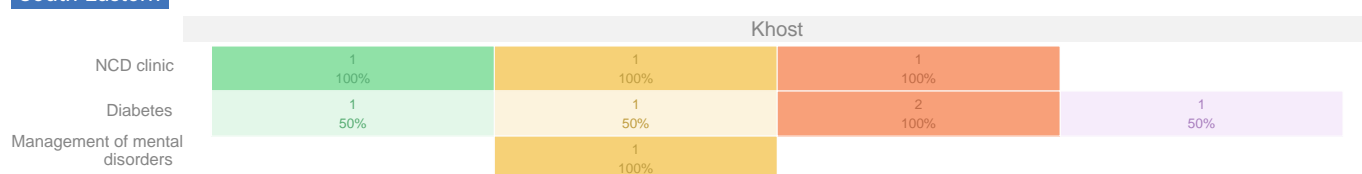
## North Eastern



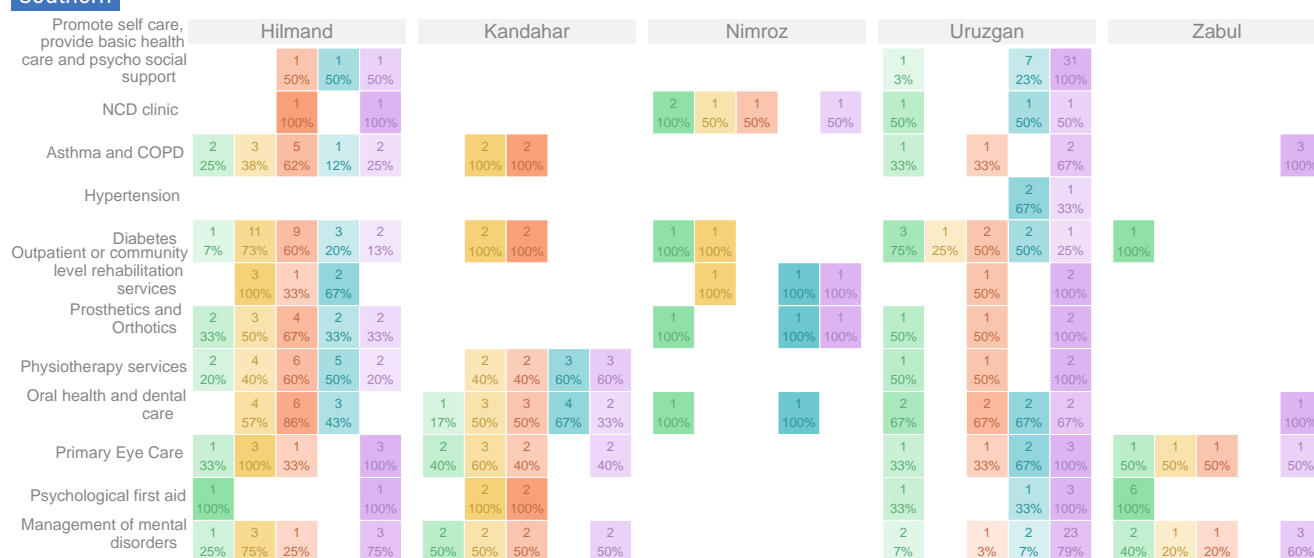
## Northern



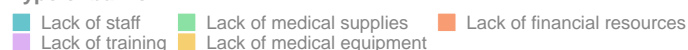
## South Eastern



## Southern



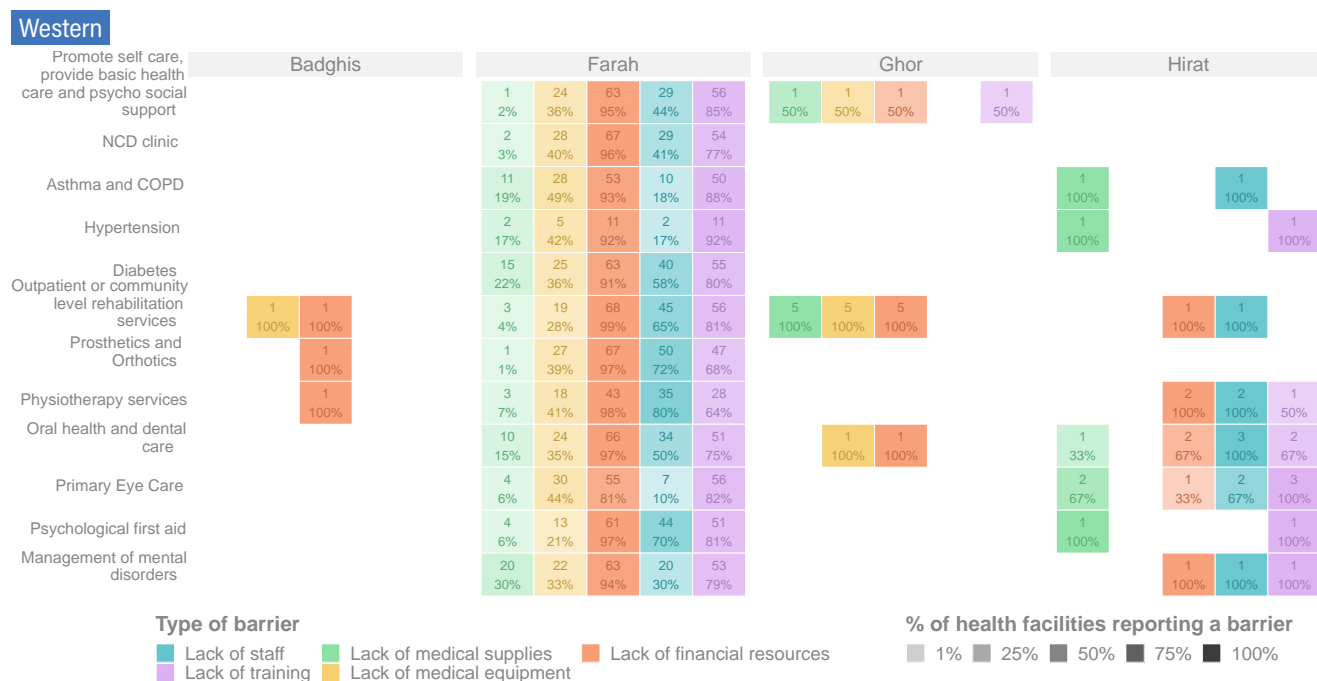
### Type of barrier



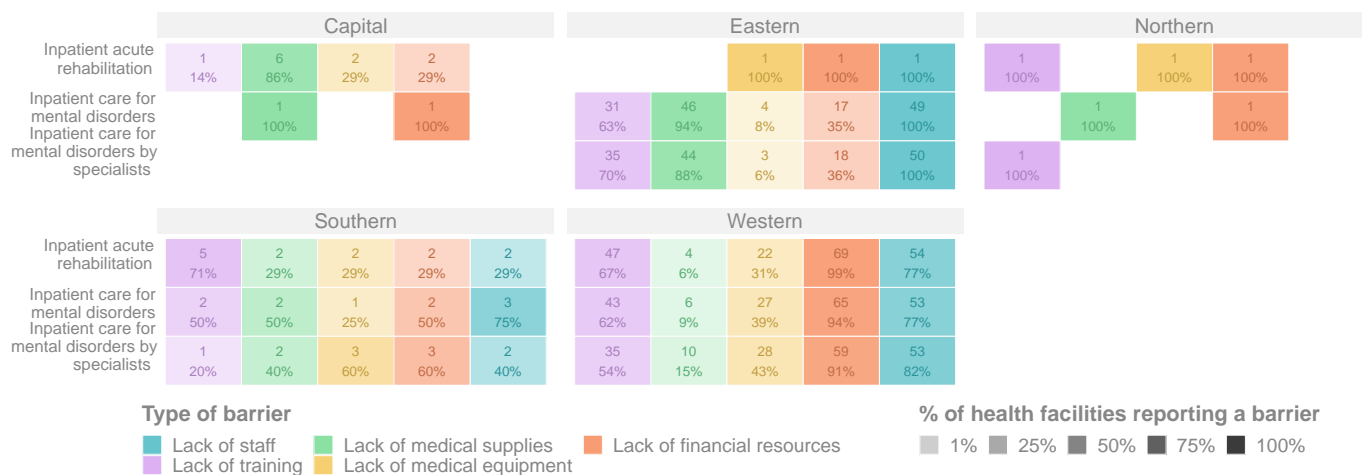
### % of health facilities reporting a barrier







## Main barriers impeding availability of specialized services by region



# PART II:

## IN-DEPTH ANALYSIS BY HEALTH SERVICE

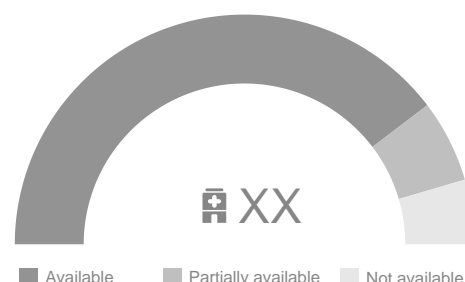


# INTERPRETATION GUIDE

## Indicator status

### Arc charts

An arc chart provides an overview of the overall availability of a health service. The number shown inside the arc chart indicates the total number of health facilities included in the analysis of a services. It should be noted that the analysis of service availability and main barriers impeding service delivery was limited to operational health facilities (see page 5 for details).



### Column charts

Column charts present the status of a health service by region or by region and health facility type. The number of health facilities per region is shown below the region's name.

Note, these charts exclude health facilities where the service is not normally provided or availability is unknown.



### Donut charts

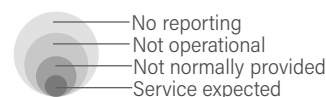
Each donut chart represents a type of health facility. The percentage of health facilities for which a service was fully or partially available is shown inside the donut while the total number of health facilities is shown at the bottom of the chart, below the health facility type name. Note, if a service was not available in any health facility, the values inside the chart will display the percentage of health facilities where the service is partially or not available.



## Maps

To highlight areas not reporting, respectively the impact of non-operational health facilities, maps depict all health facilities included in the HeRAMS assessment. Each circle corresponds to the cumulative number of health facilities in a province and may be divided in up to four smaller circles. The innermost circle denotes the number of health facilities evaluated with the color indicating the percentage of health facilities where the service is fully available. In cases where a service is not normally provided in all health facilities a gray circle reflects the proportion of health facilities where the service is not expected. The outer two circles represent non-reporting and not-operational health facilities, displayed distinct colors.

In the example shown on the right, the size of the outer circles corresponds to the total number of health facilities in a region. The smallest circle indicates the proportion of health facilities expected to provide the service followed by the proportion of health facilities evaluated but not expected to provide the service. The two lighter shades of gray indicate the proportion of non-operational and non-reporting health facilities.



### Map label:

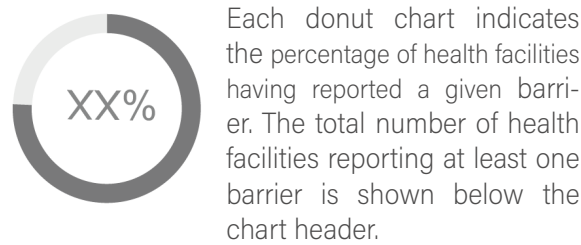
Province name  
X / X%

For each circle, the corresponding province name is shown in the map label together with the total number of health facilities evaluated (excluding health facilities where the service is not expected) and the percentage of evaluated health facilities for which the service is fully available.

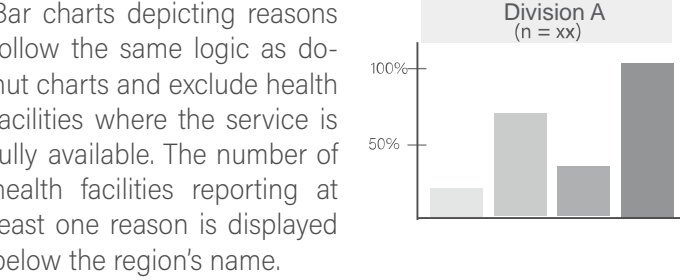
## Reasons of unavailability

If a service was not or only partially available causes of unavailability (i.e. barriers to service provision) were gathered.

### Donut charts



### Bar chart

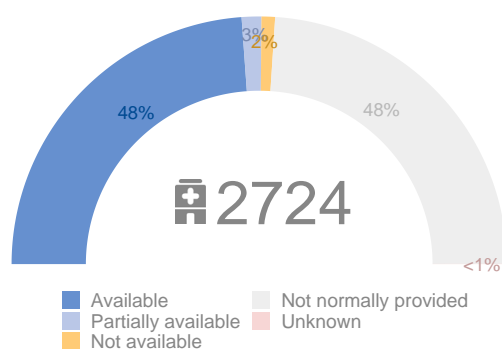


**Important:** The denominator for reasons charts excludes health facilities where the service was fully available. It should further be noted that health facilities could report up to three barriers for each service. Thus, the sum of all reasons may exceed 100%.

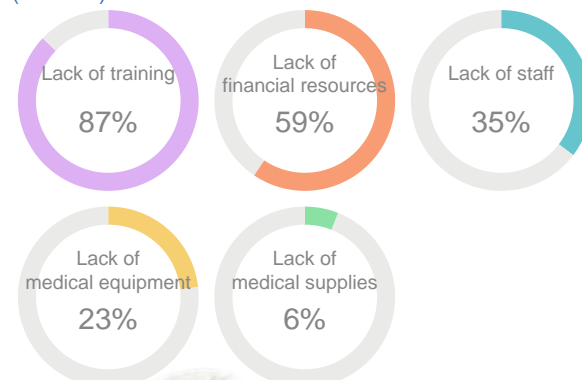


# PROMOTE SELF-CARE, PROVIDE BASIC HEALTH CARE AND PSYCHO-SOCIAL SUPPORT

Service availability

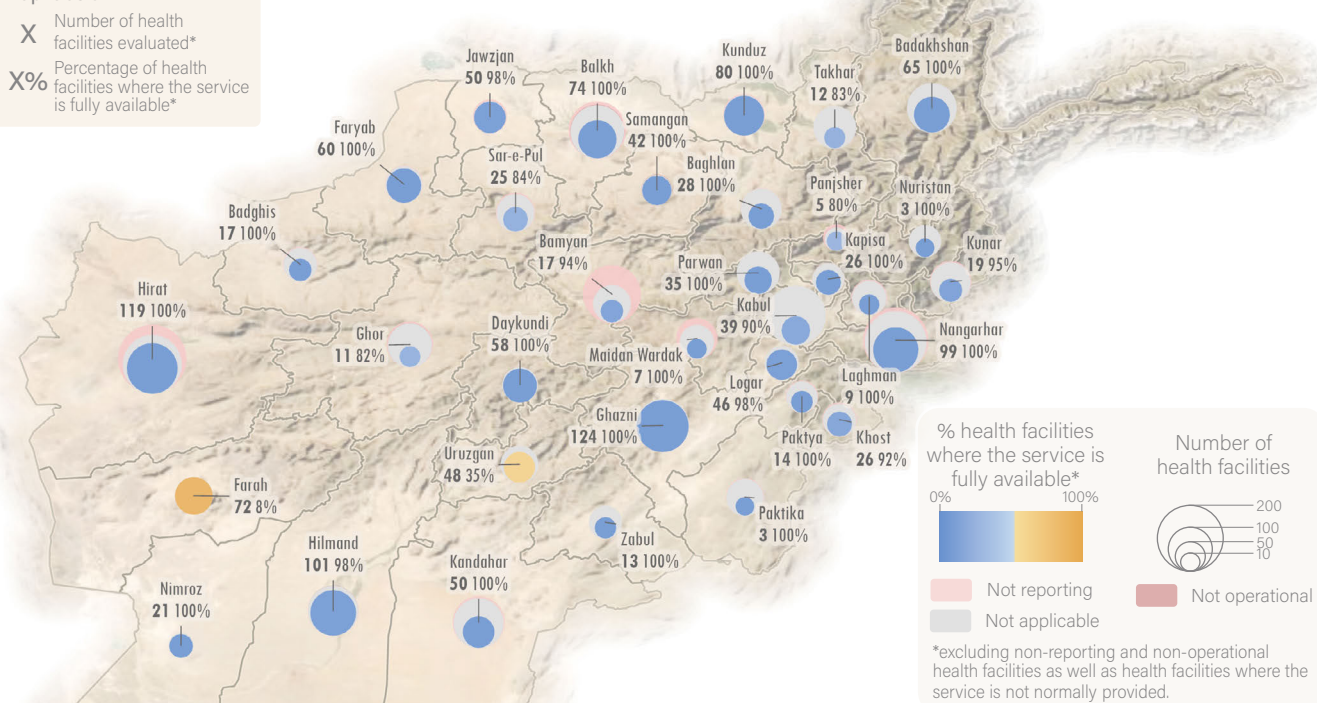


Main barriers impeding service delivery (n = 116)

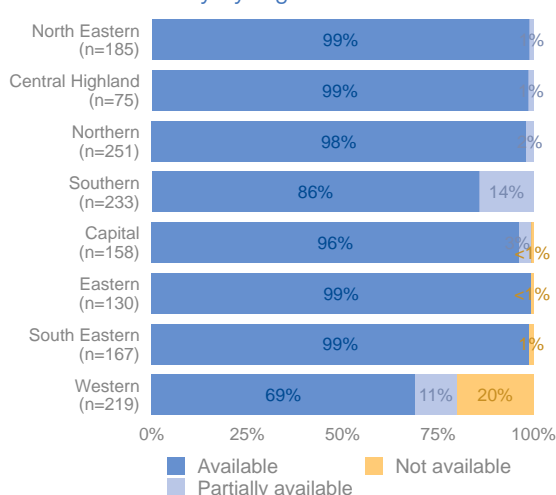


Map labels

- X Number of health facilities evaluated\*
- X% Percentage of health facilities where the service is fully available\*



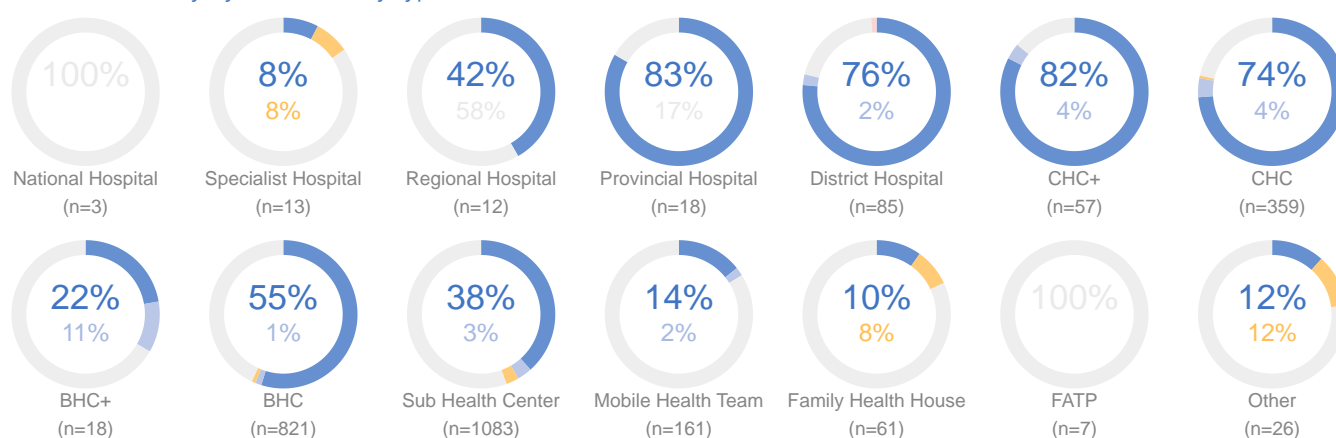
Service availability by region\*



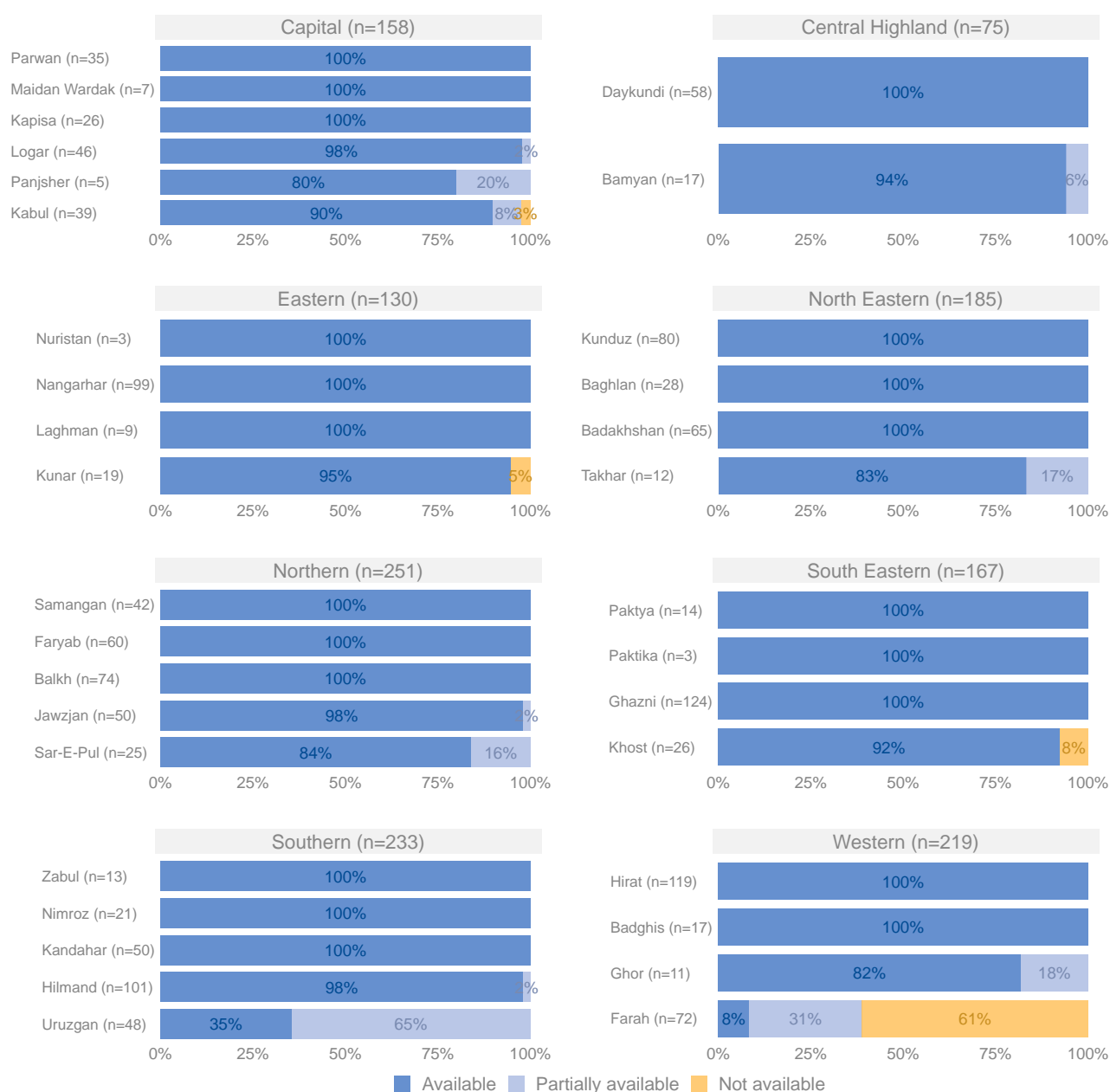
Main barriers impeding service delivery by region



### Service availability by health facility type



### Service availability by province†

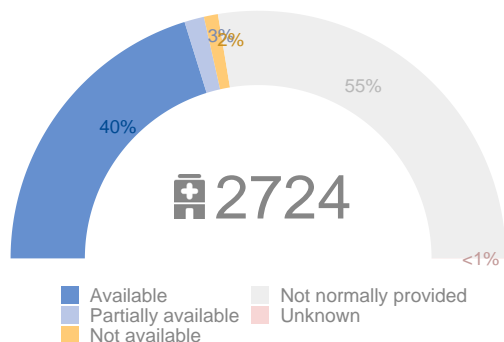


† Chart excludes health facilities where the service is not normally provided or availability is unknown.

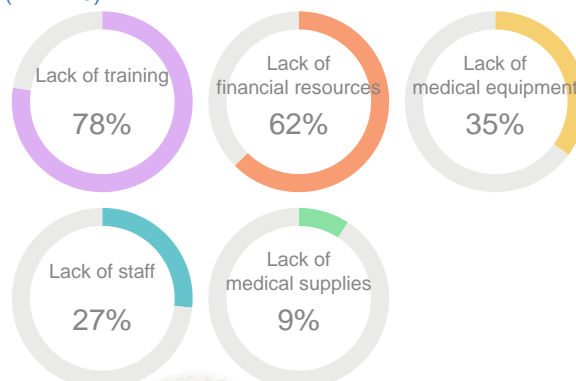


# NCD CLINIC

## Service availability

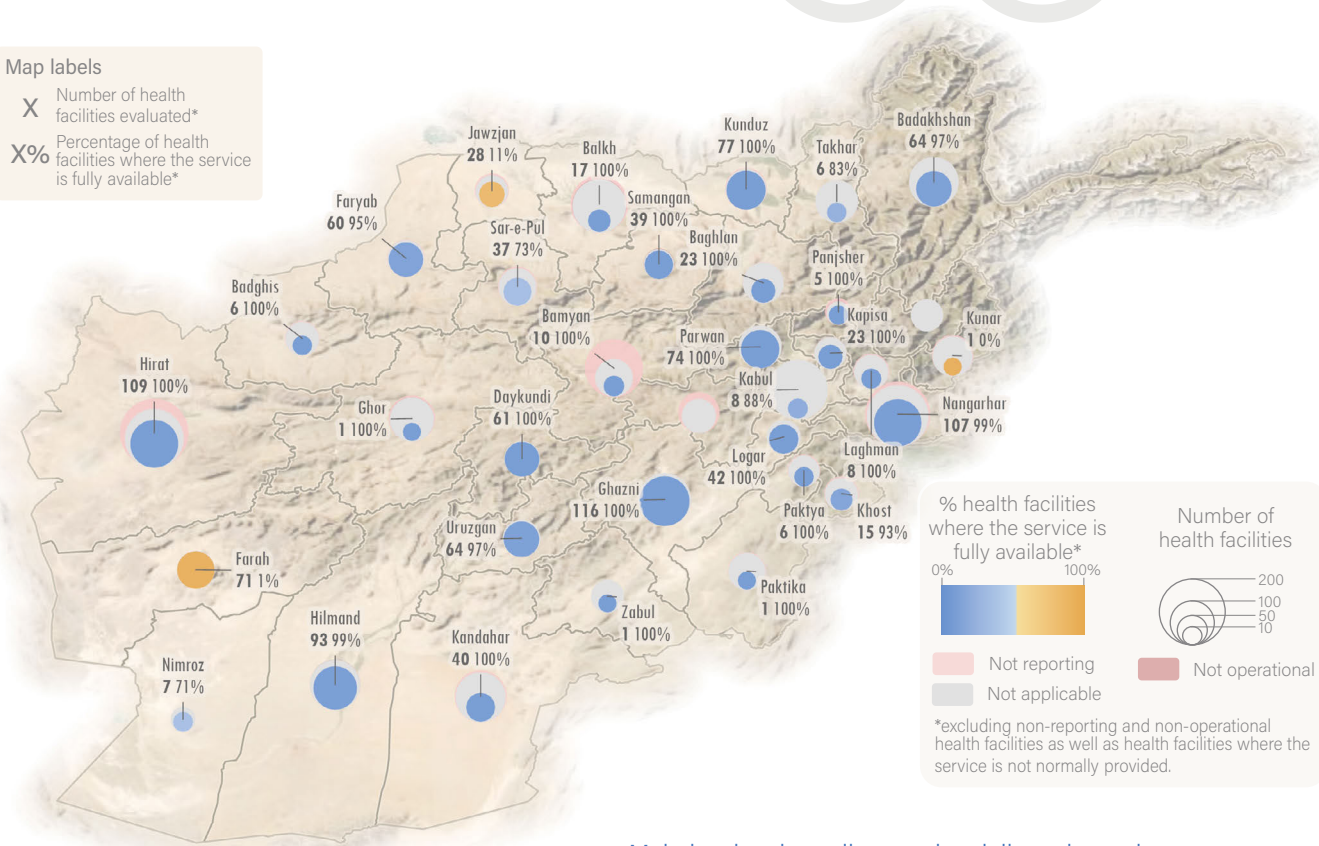


## Main barriers impeding service delivery (n = 120)

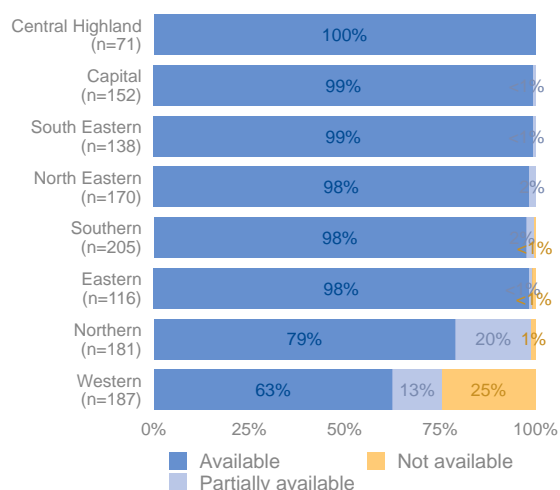


### Map labels

- X Number of health facilities evaluated\*
- X% Percentage of health facilities where the service is fully available\*



## Service availability by region†

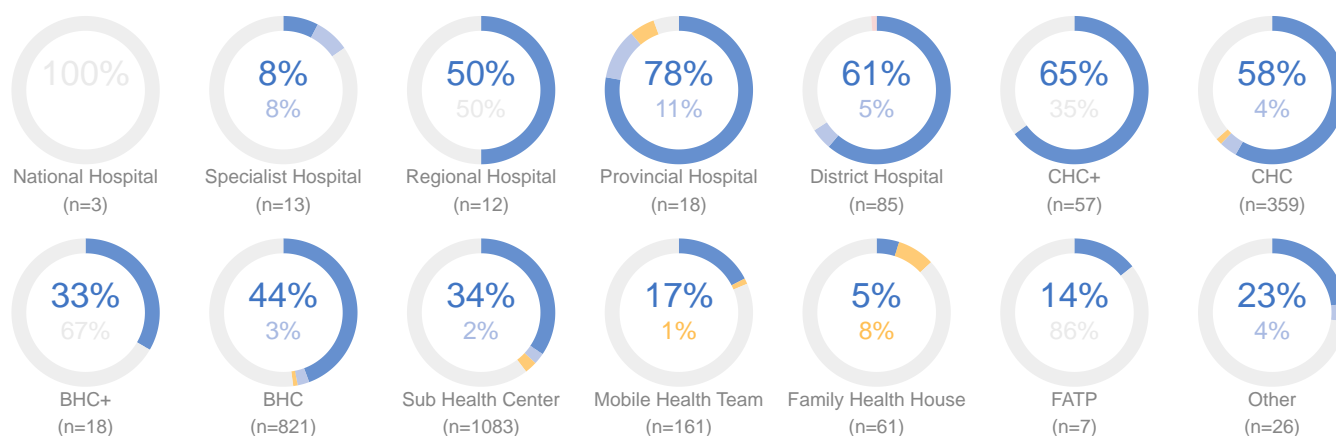


## Main barriers impeding service delivery by region

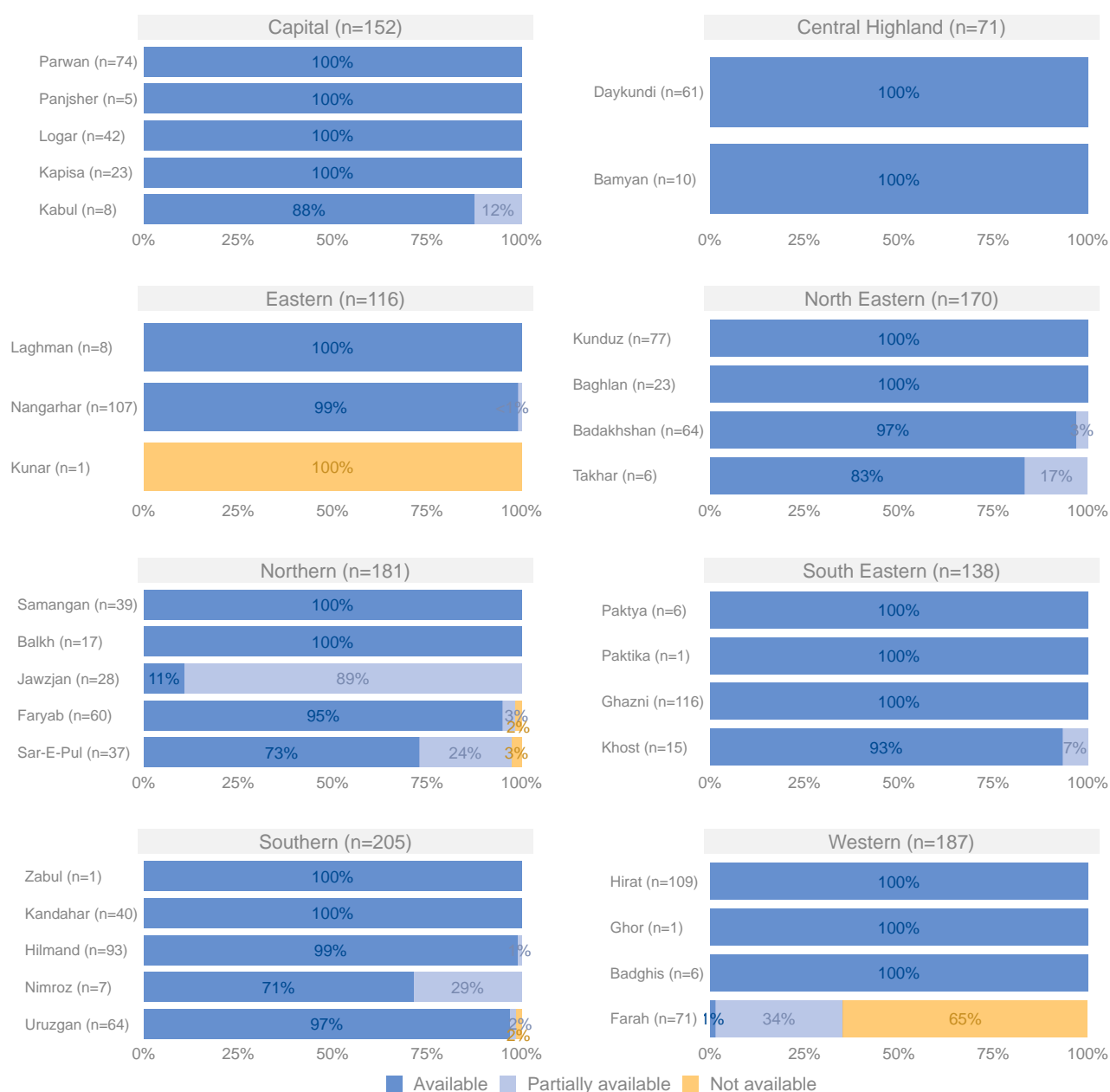




### Service availability by health facility type



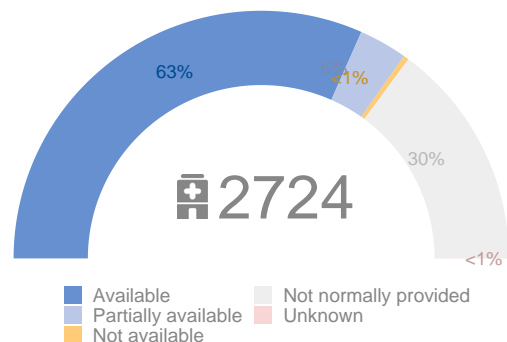
### Service availability by province†



† Chart excludes health facilities where the service is not normally provided or availability is unknown.

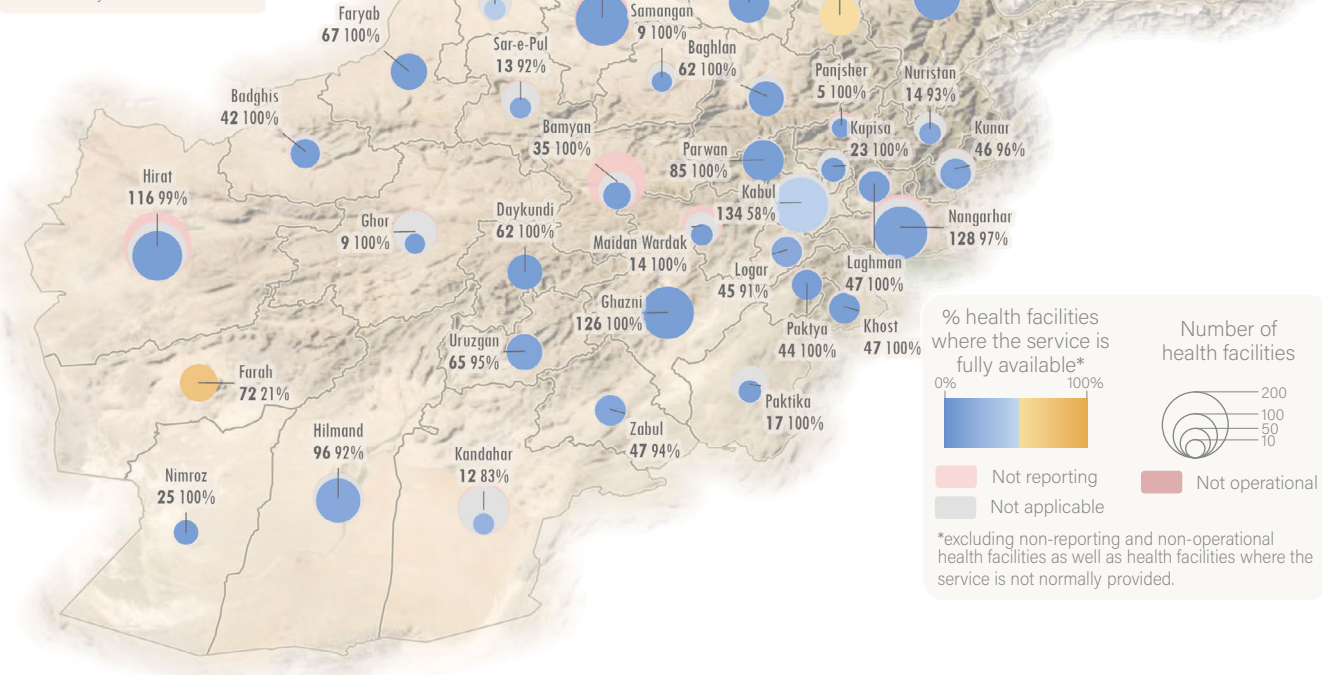
# ASTHMA AND COPD

## Service availability

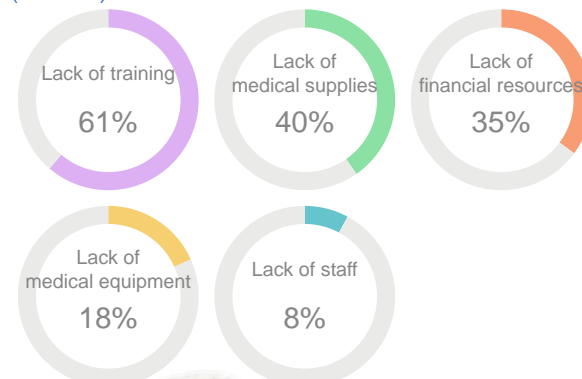


### Map labels

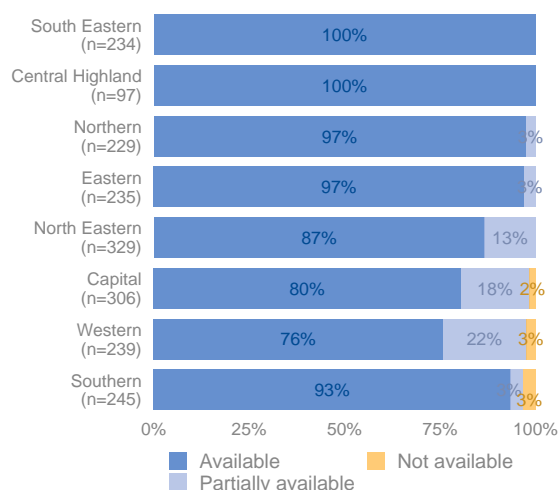
- X Number of health facilities evaluated\*
- X% Percentage of health facilities where the service is fully available\*



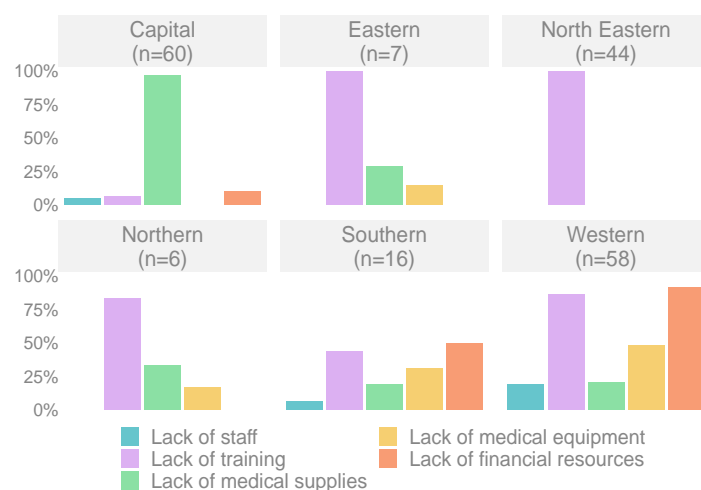
## Main barriers impeding service delivery (n = 191)



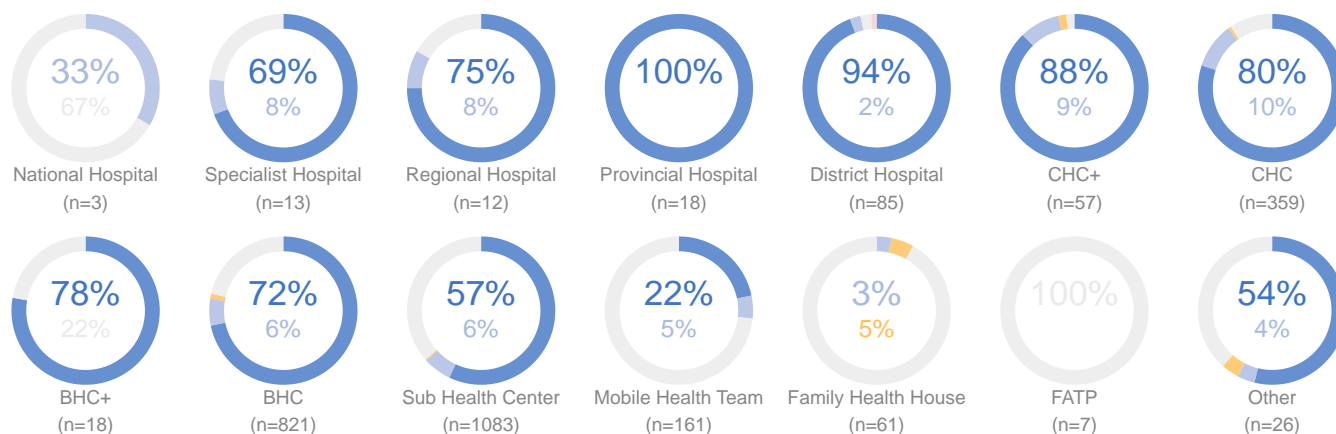
## Service availability by region\*



## Main barriers impeding service delivery by region



### Service availability by health facility type



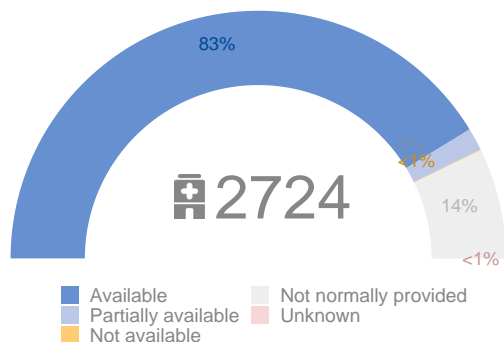
### Service availability by province†



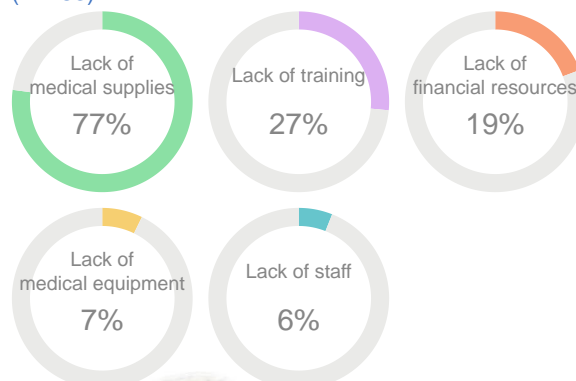
† Chart excludes health facilities where the service is not normally provided or availability is unknown.

# HYPERTENSION

## Service availability

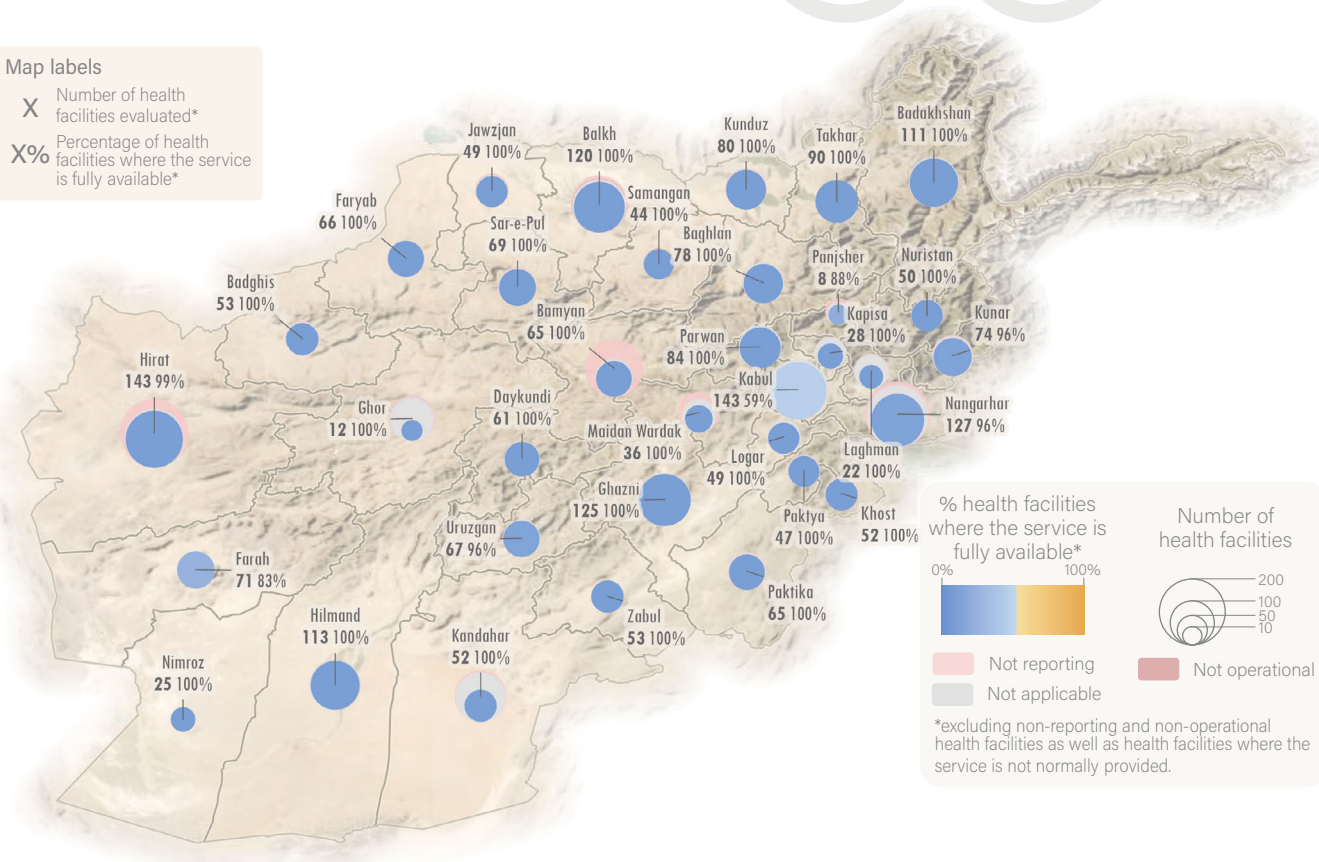


## Main barriers impeding service delivery (n = 83)

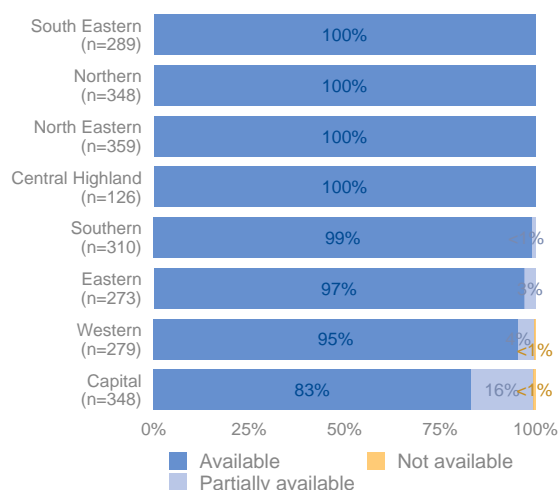


### Map labels

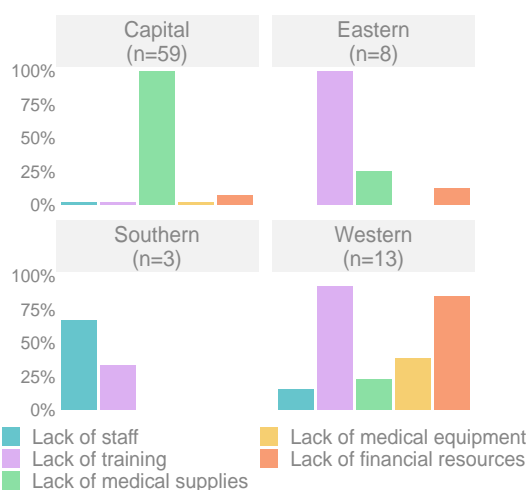
- X Number of health facilities evaluated\*
- X% Percentage of health facilities where the service is fully available\*



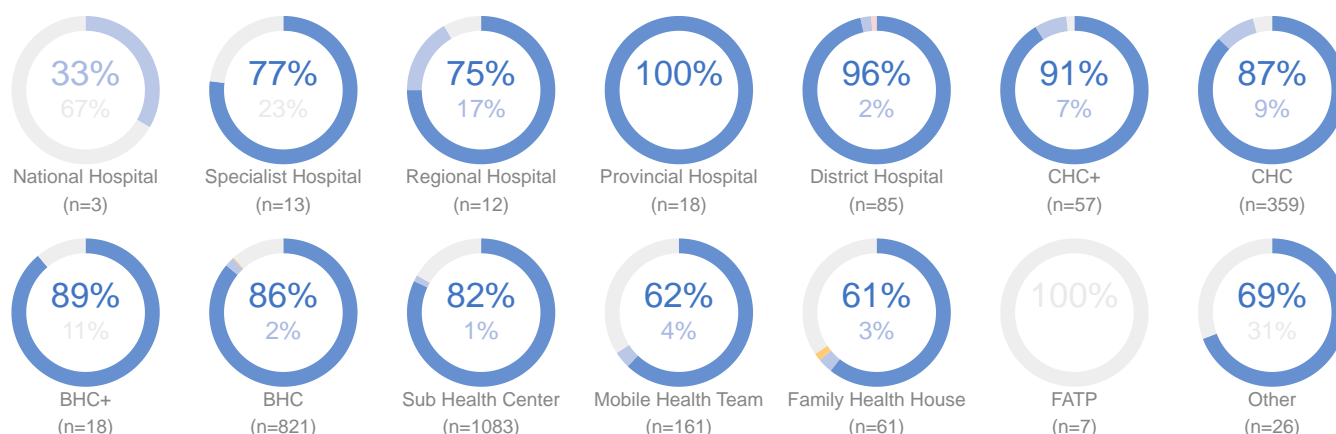
## Service availability by region†



## Main barriers impeding service delivery by region



### Service availability by health facility type



### Service availability by province†

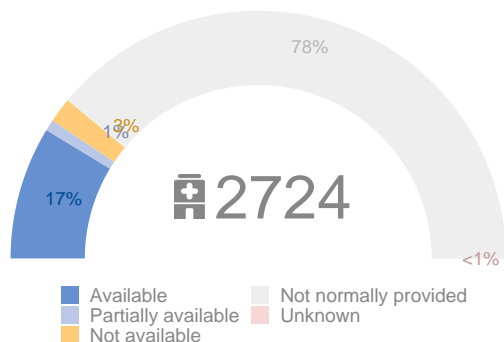


† Chart excludes health facilities where the service is not normally provided or availability is unknown.



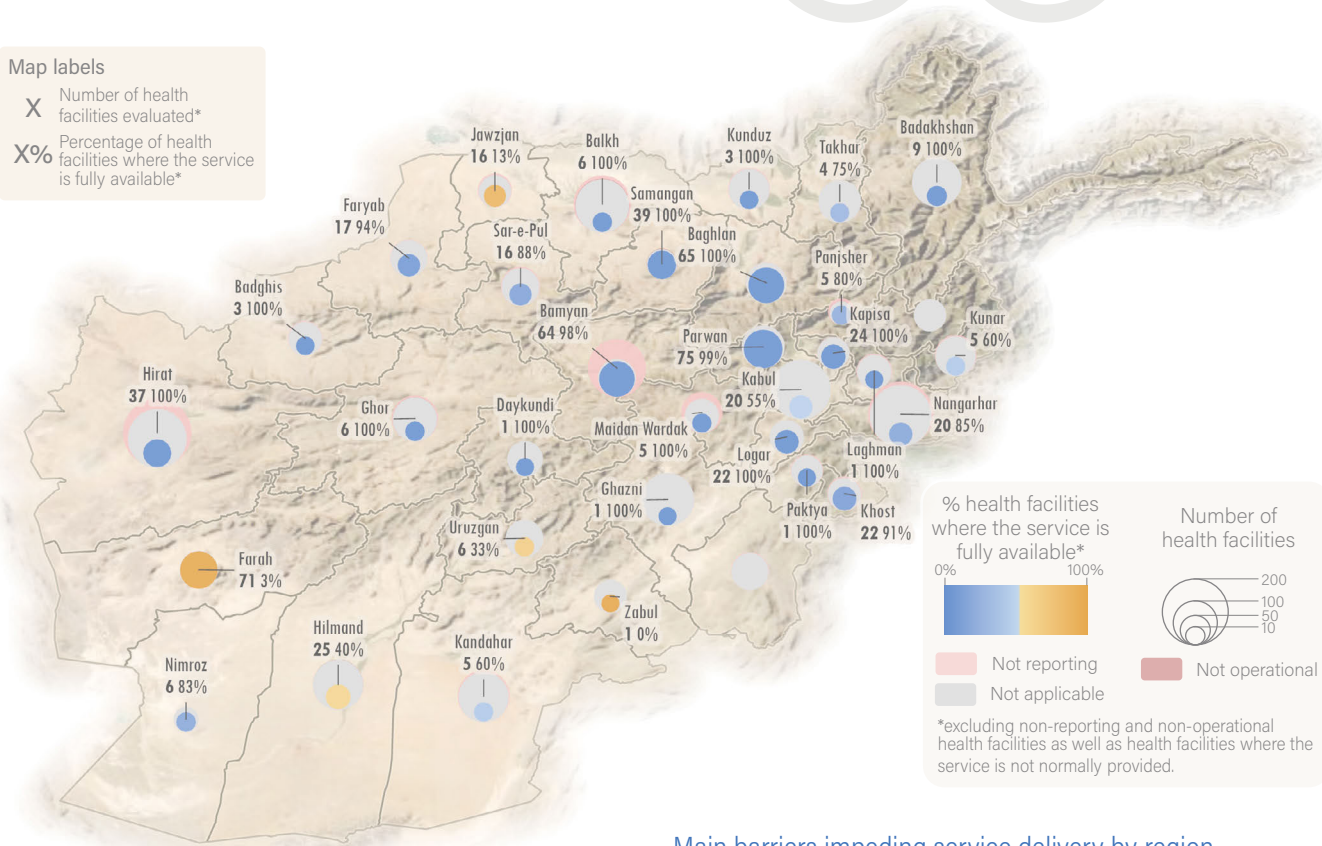
# DIABETES

## Service availability

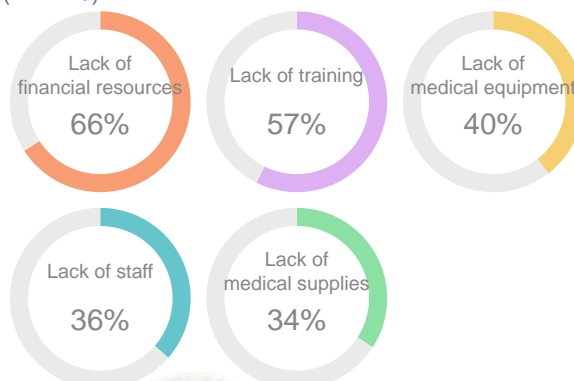


### Map labels

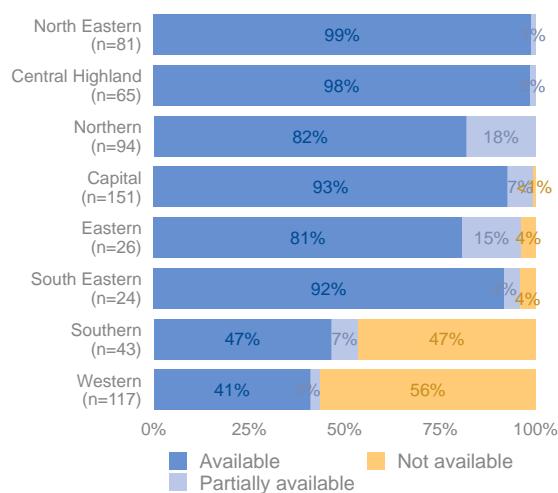
- X Number of health facilities evaluated\*
- X% Percentage of health facilities where the service is fully available\*



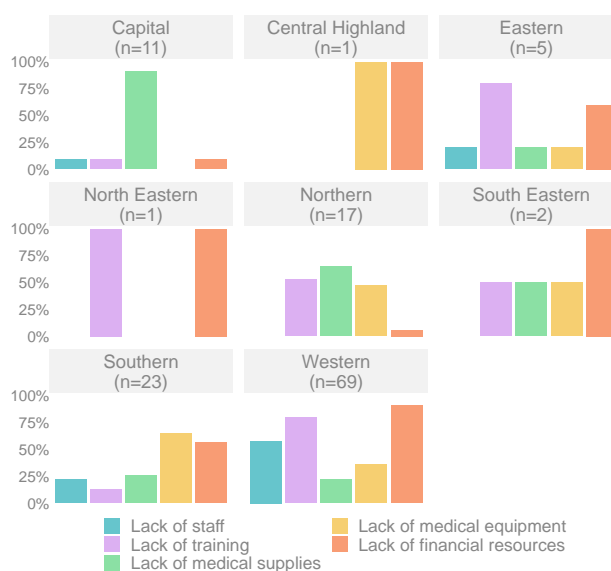
## Main barriers impeding service delivery (n = 129)



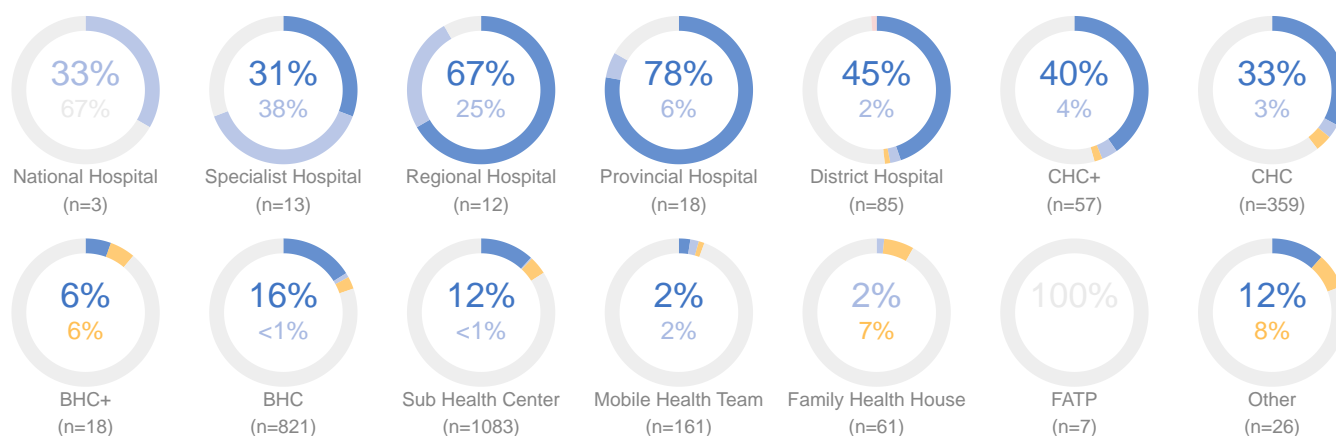
## Service availability by region\*



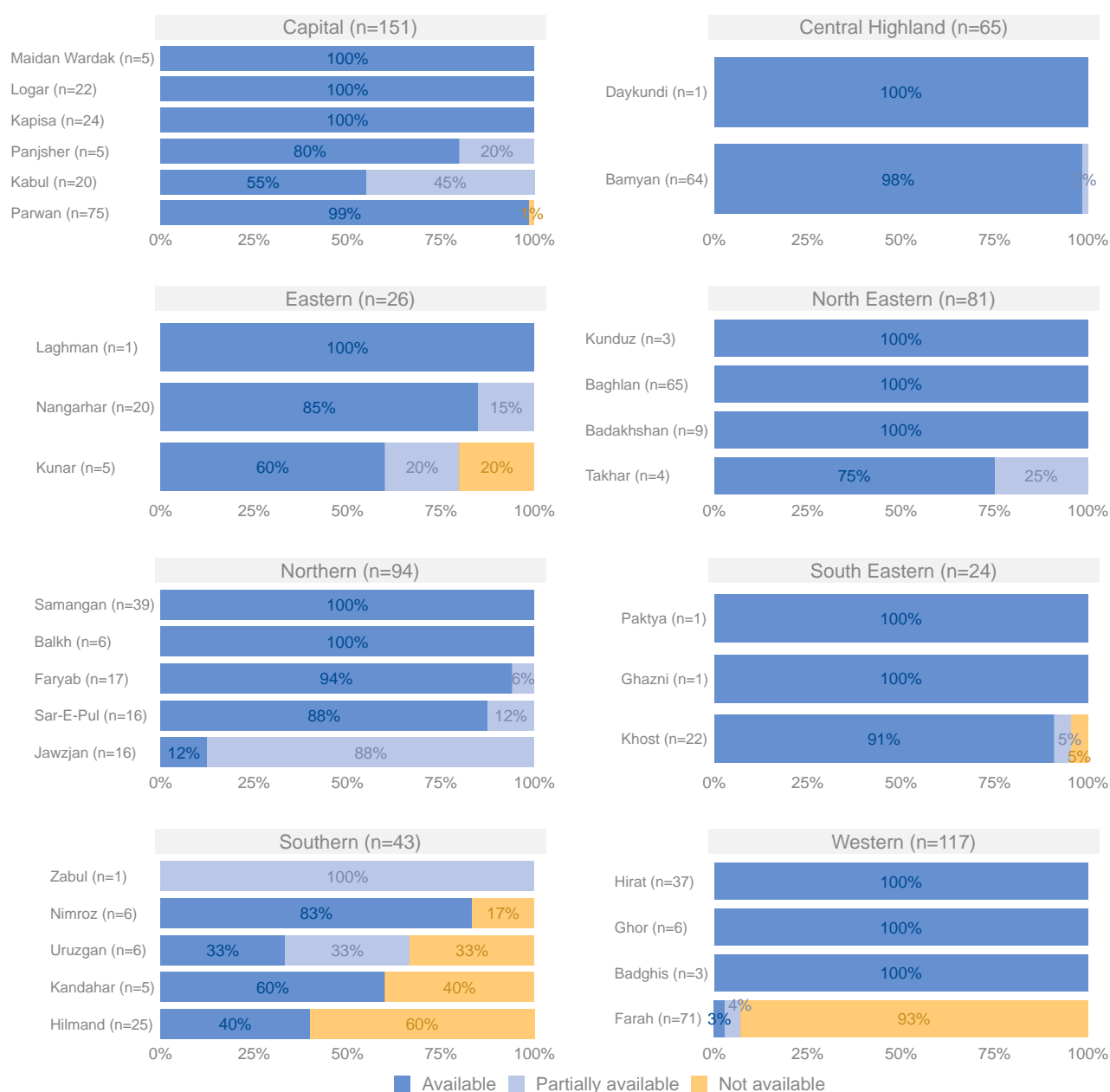
## Main barriers impeding service delivery by region



### Service availability by health facility type



### Service availability by province†

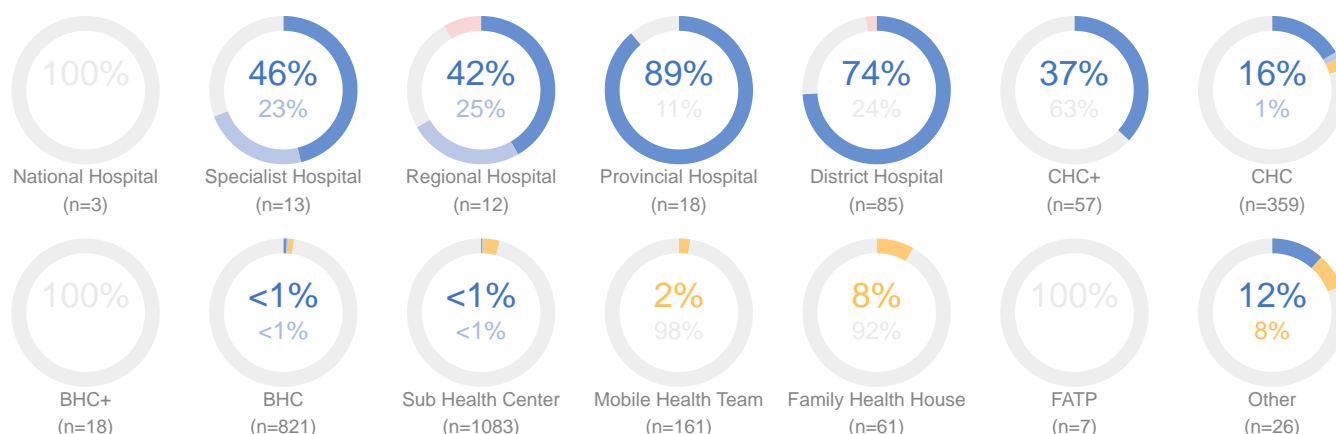


† Chart excludes health facilities where the service is not normally provided or availability is unknown.





### Service availability by health facility type



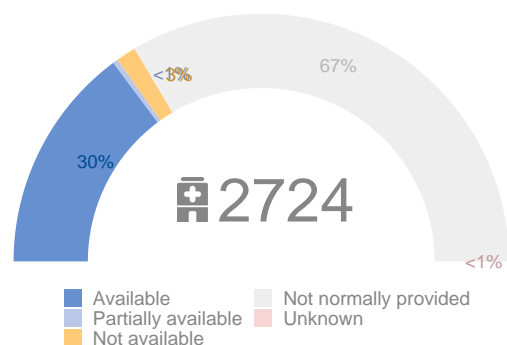
### Service availability by province†



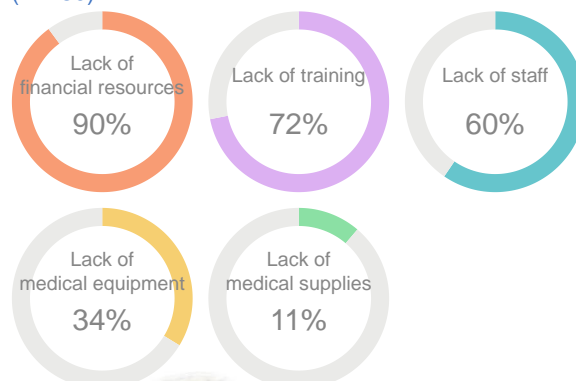
† Chart excludes health facilities where the service is not normally provided or availability is unknown.

# OUTPATIENT OR COMMUNITY LEVEL REHABILITATION SERVICES

## Service availability

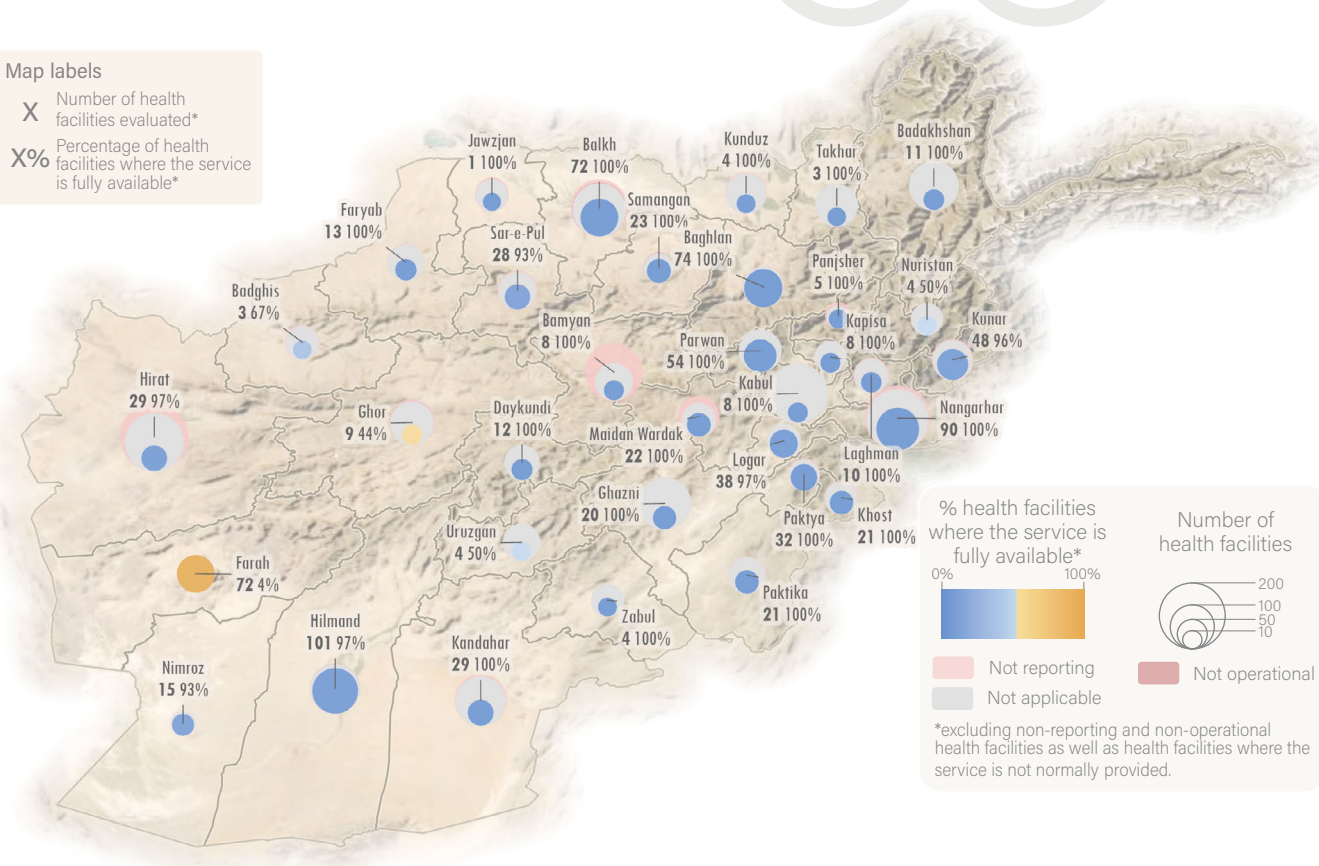


## Main barriers impeding service delivery (n = 89)

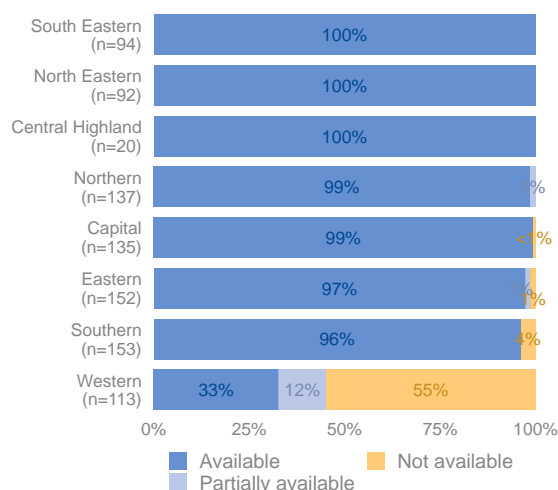


### Map labels

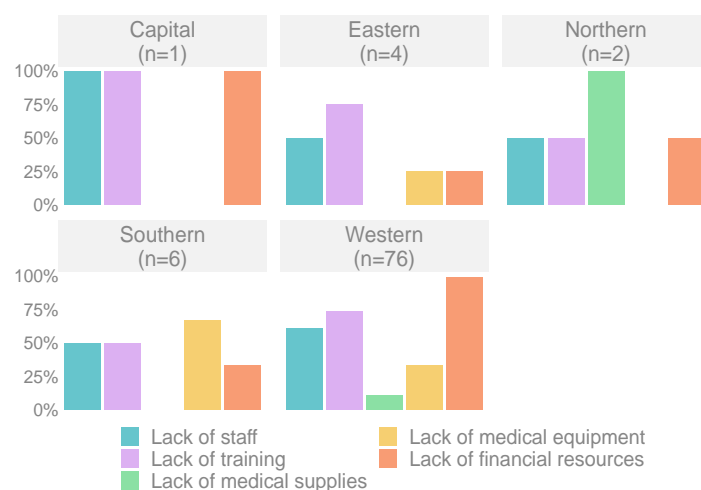
- X Number of health facilities evaluated\*
- X% Percentage of health facilities where the service is fully available\*



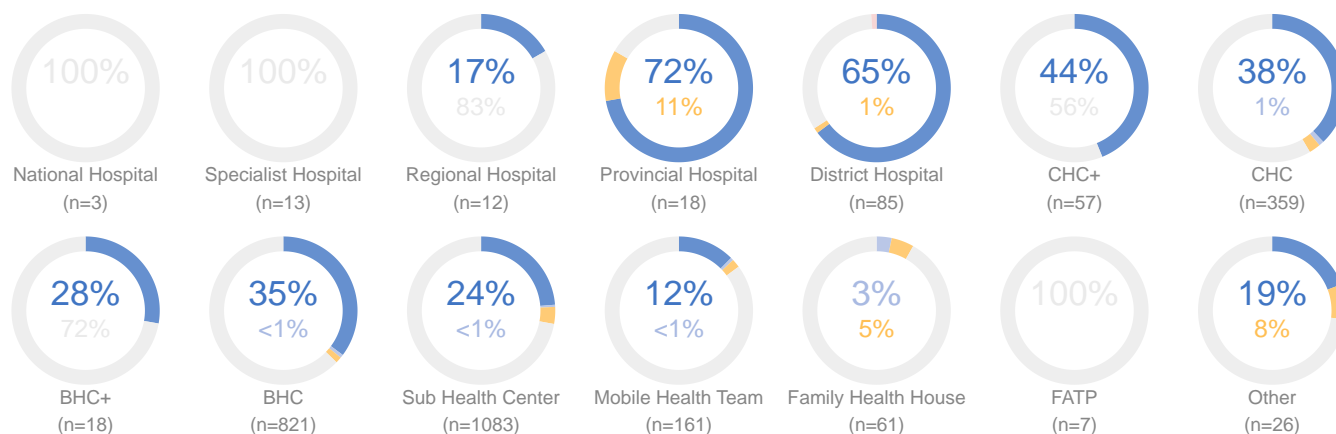
## Service availability by region\*



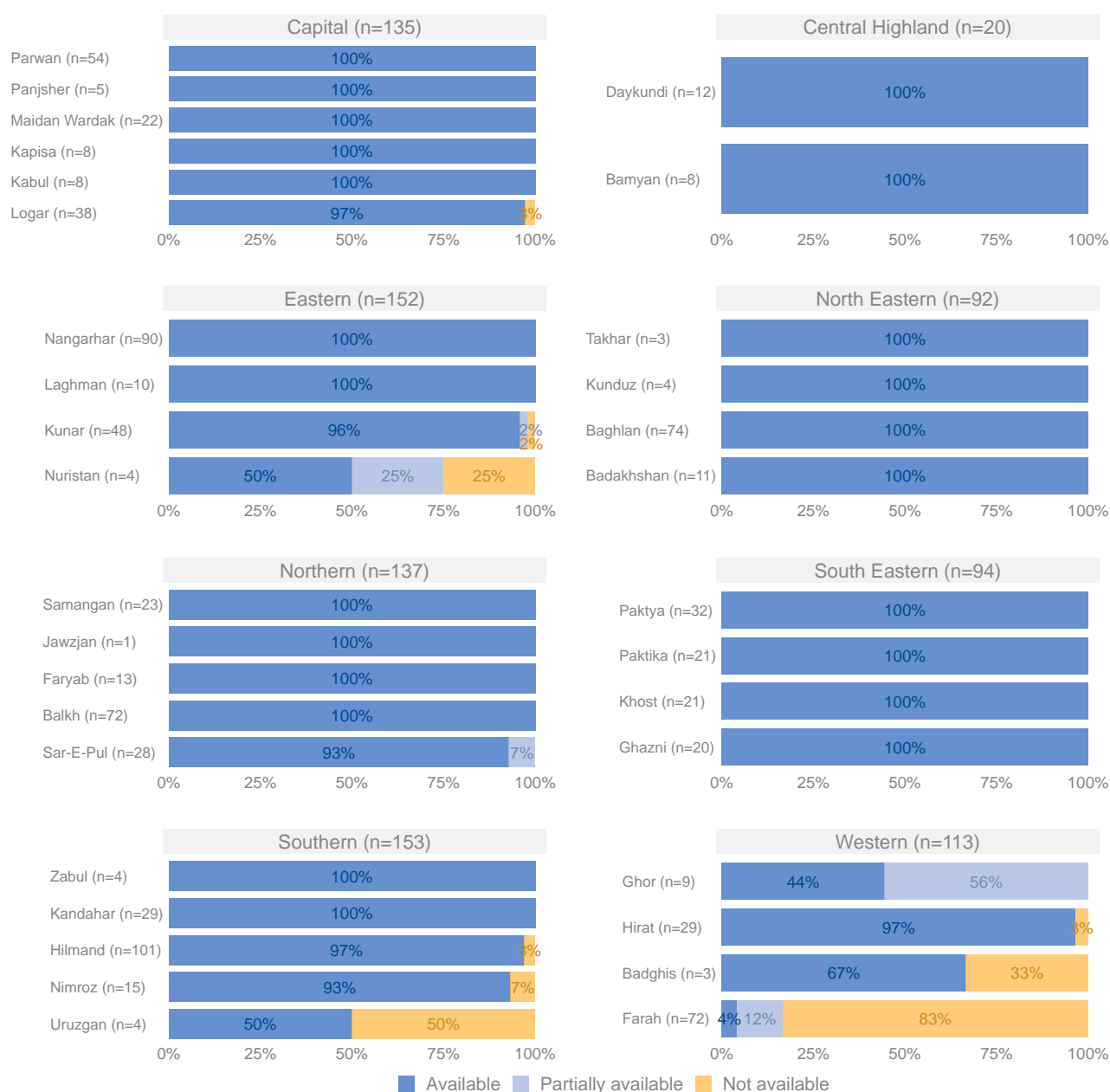
## Main barriers impeding service delivery by region



### Service availability by health facility type



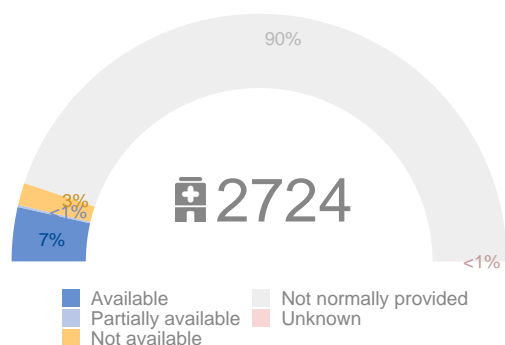
### Service availability by province†



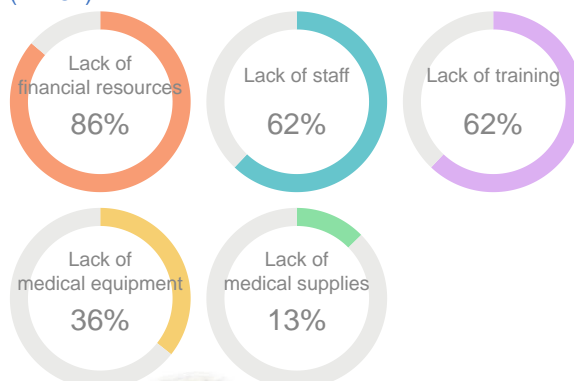
† Chart excludes health facilities where the service is not normally provided or availability is unknown.

# PROSTHETICS AND ORTHOTICS

## Service availability

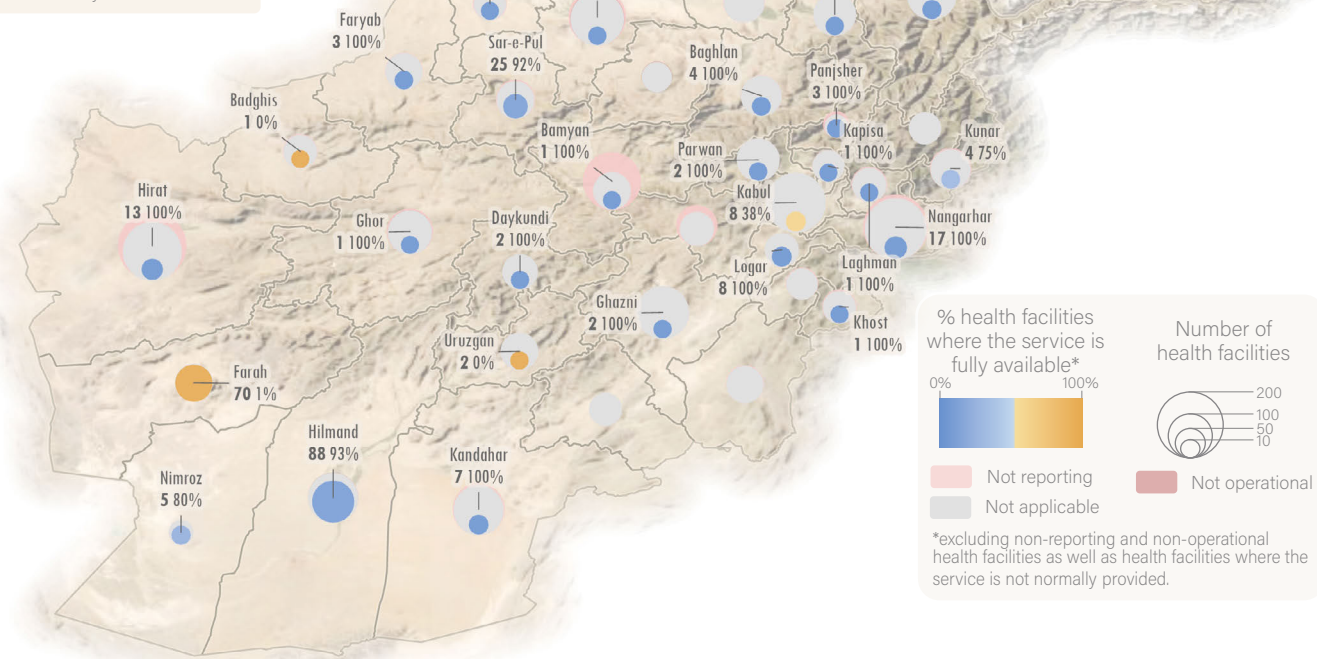


## Main barriers impeding service delivery (n = 87)

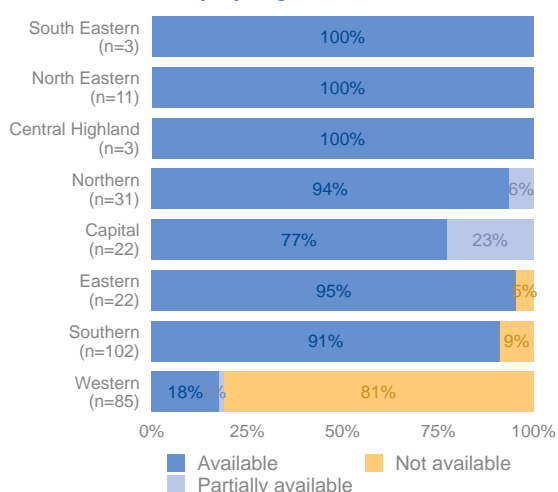


### Map labels

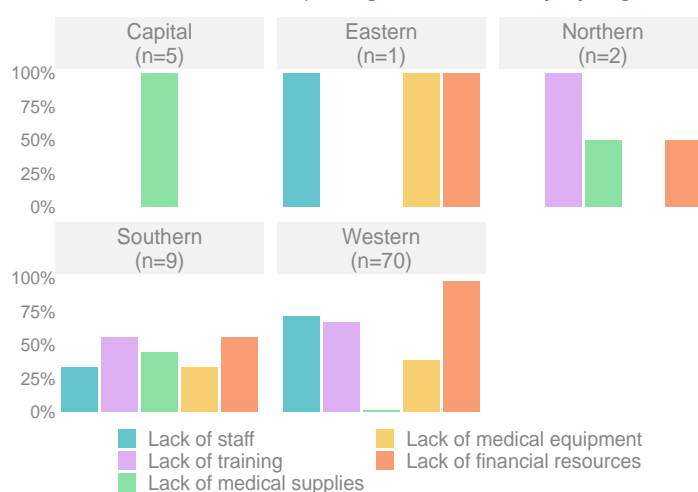
- X Number of health facilities evaluated\*
- X% Percentage of health facilities where the service is fully available\*



## Service availability by region†

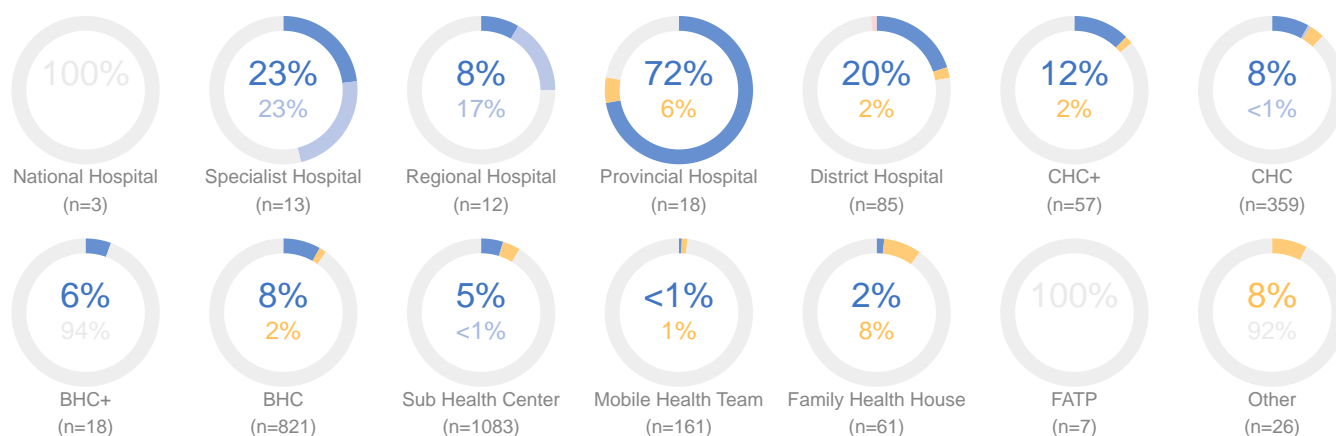


## Main barriers impeding service delivery by region

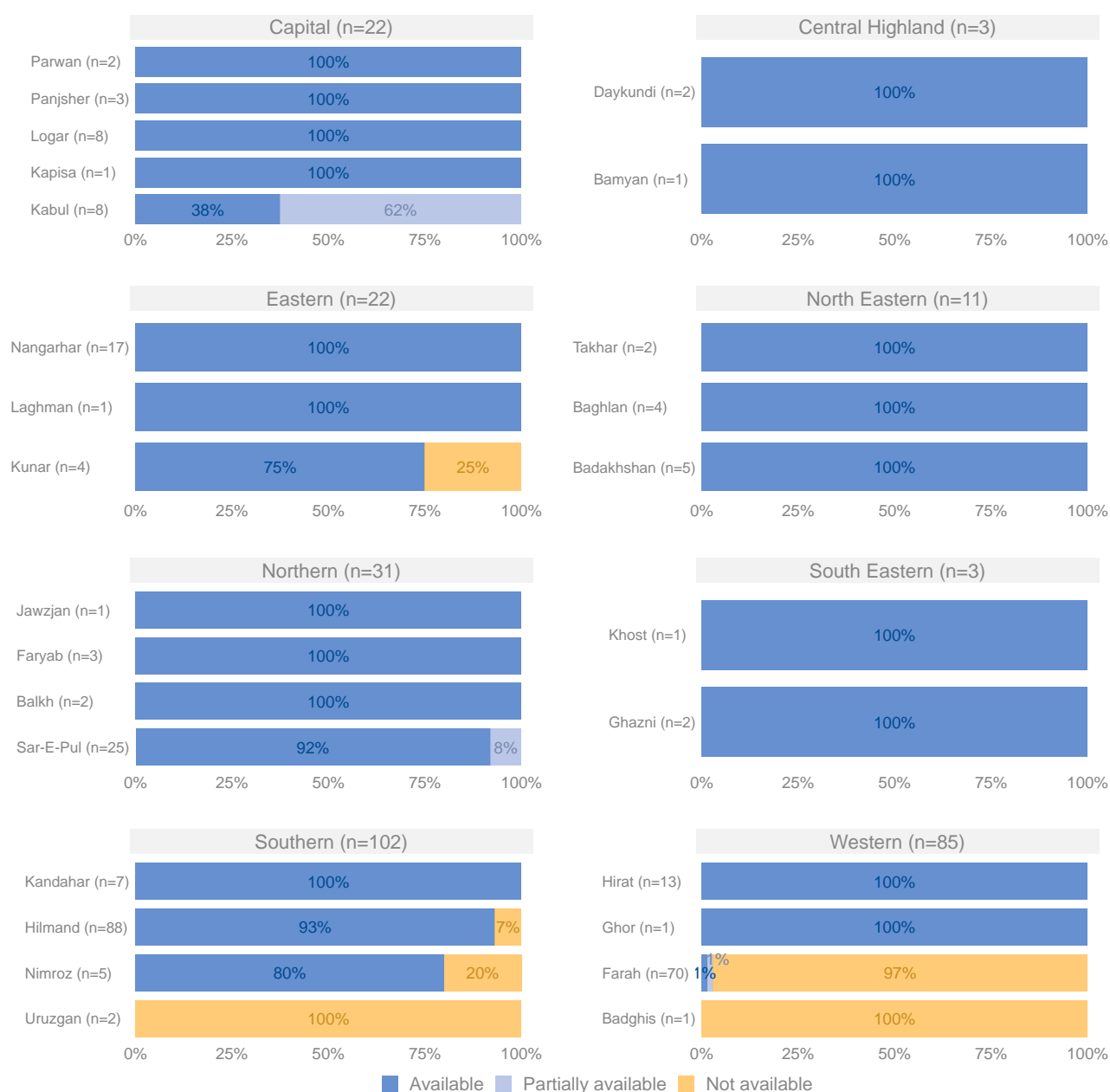




### Service availability by health facility type



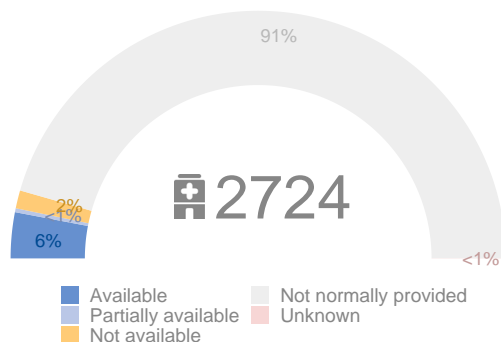
### Service availability by province†



† Chart excludes health facilities where the service is not normally provided or availability is unknown.

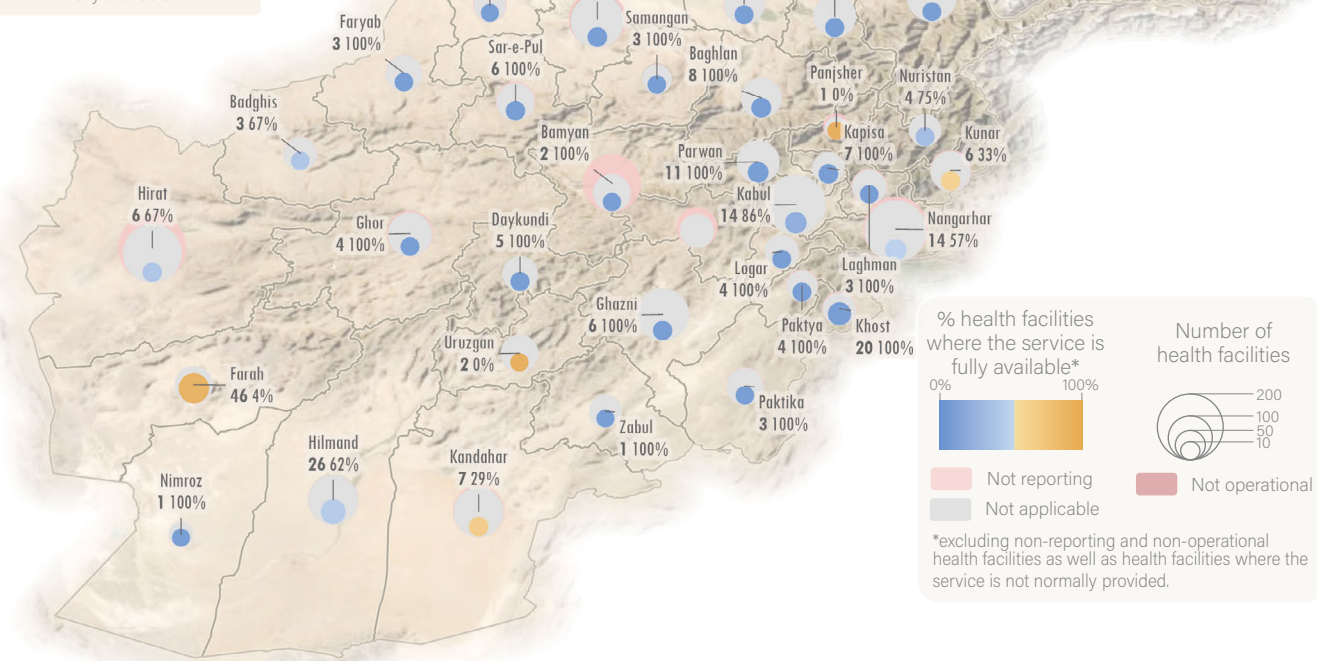
# PHYSIOTHERAPY SERVICES

## Service availability

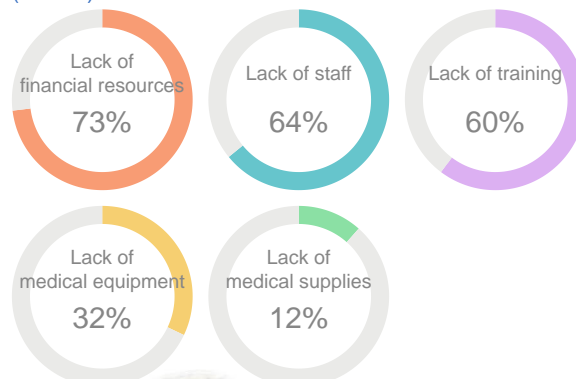


### Map labels

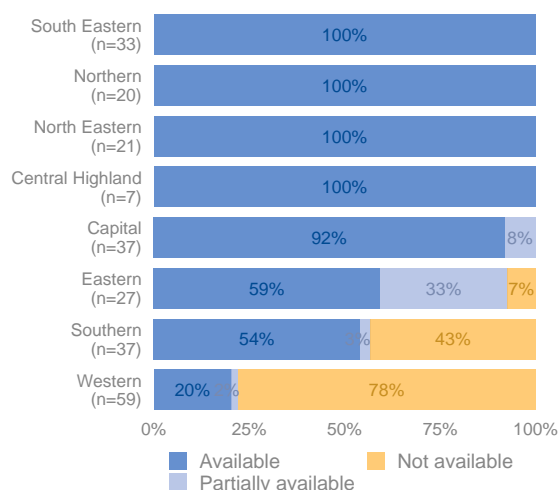
- X Number of health facilities evaluated\*
- X% Percentage of health facilities where the service is fully available\*



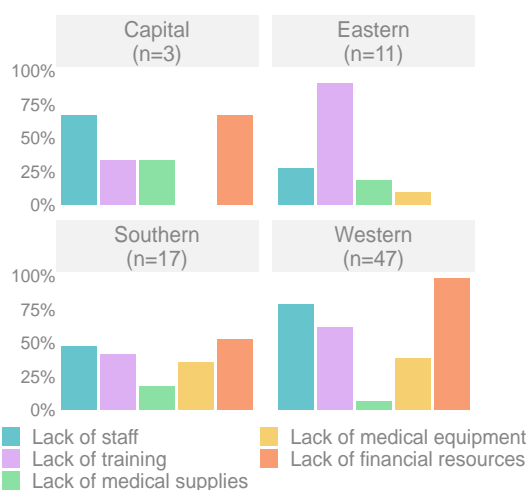
## Main barriers impeding service delivery (n = 78)



## Service availability by region†

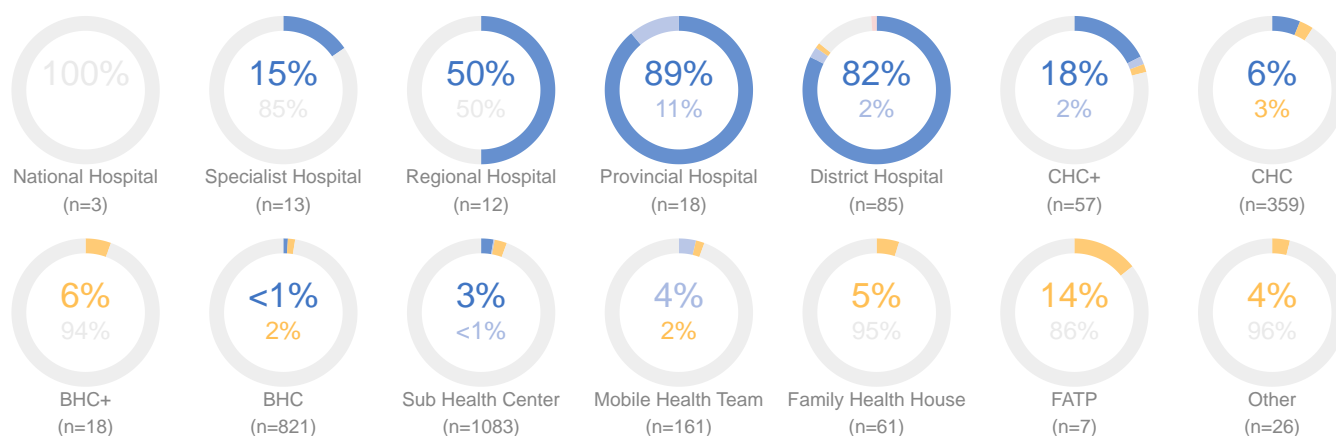


## Main barriers impeding service delivery by region

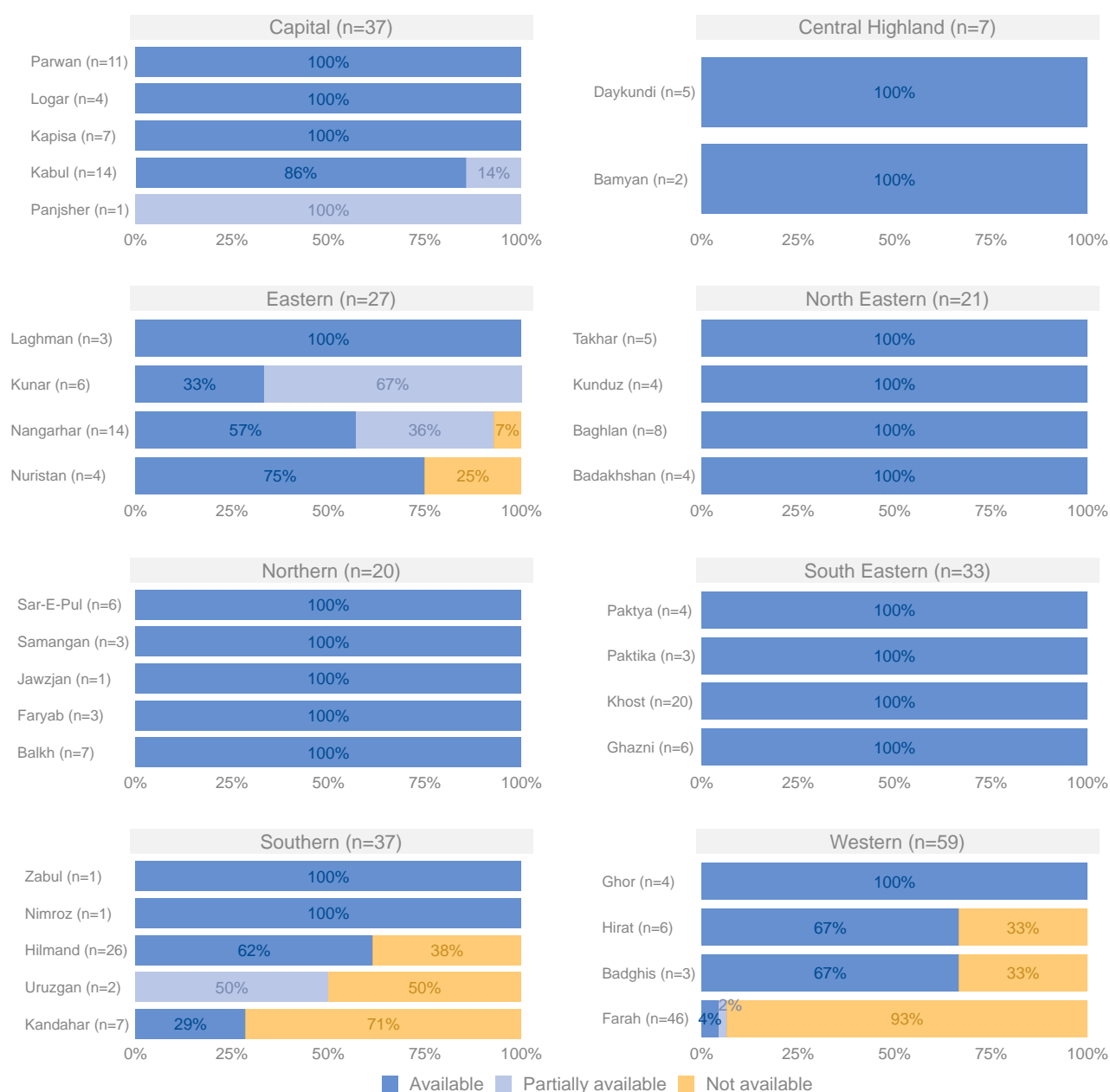




### Service availability by health facility type



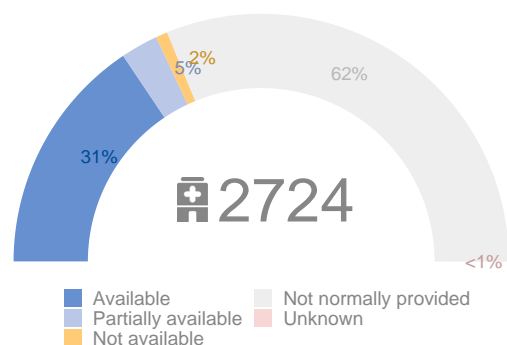
### Service availability by province†



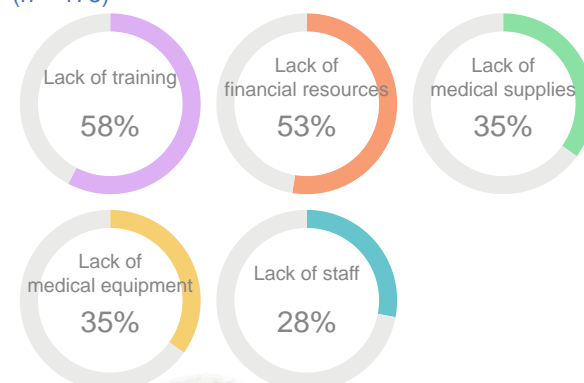
† Chart excludes health facilities where the service is not normally provided or availability is unknown.

# ORAL HEALTH AND DENTAL CARE

## Service availability

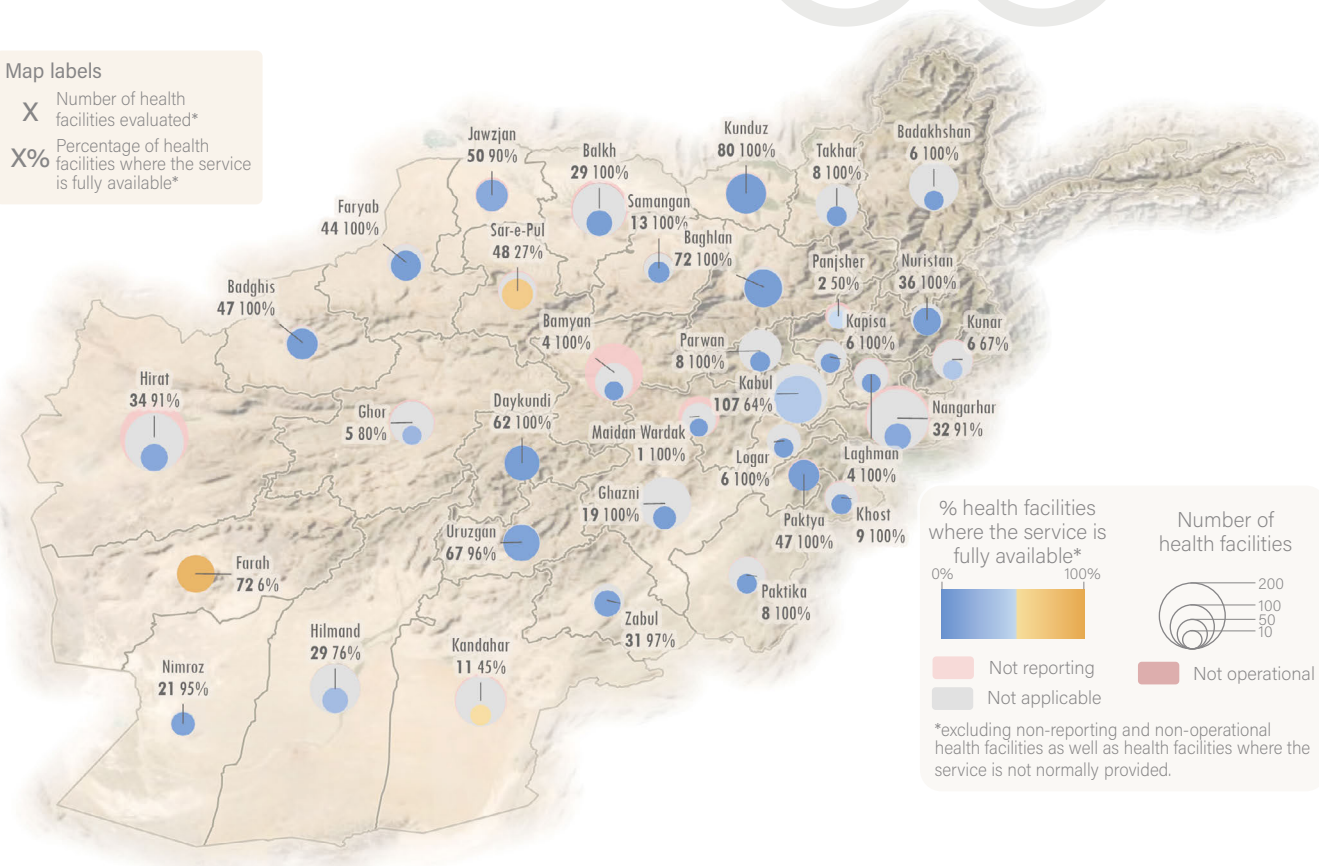


## Main barriers impeding service delivery (n = 175)

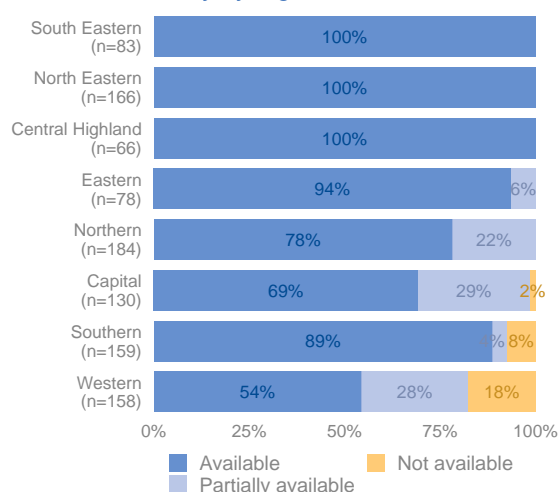


### Map labels

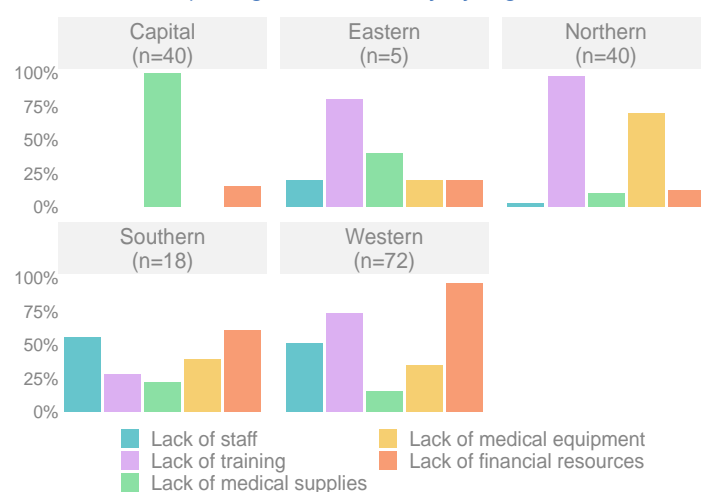
- X Number of health facilities evaluated\*
- X% Percentage of health facilities where the service is fully available\*



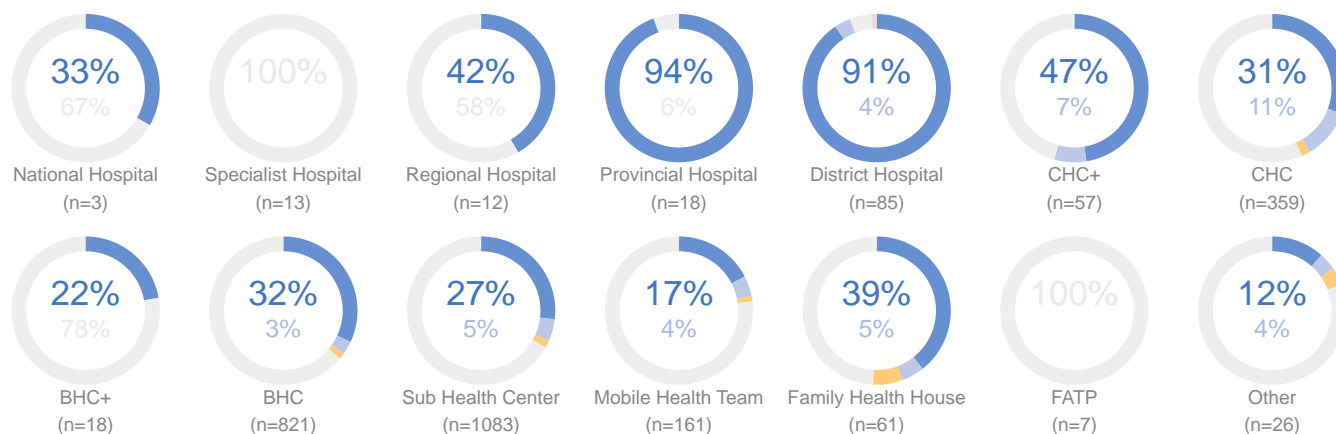
## Service availability by region\*



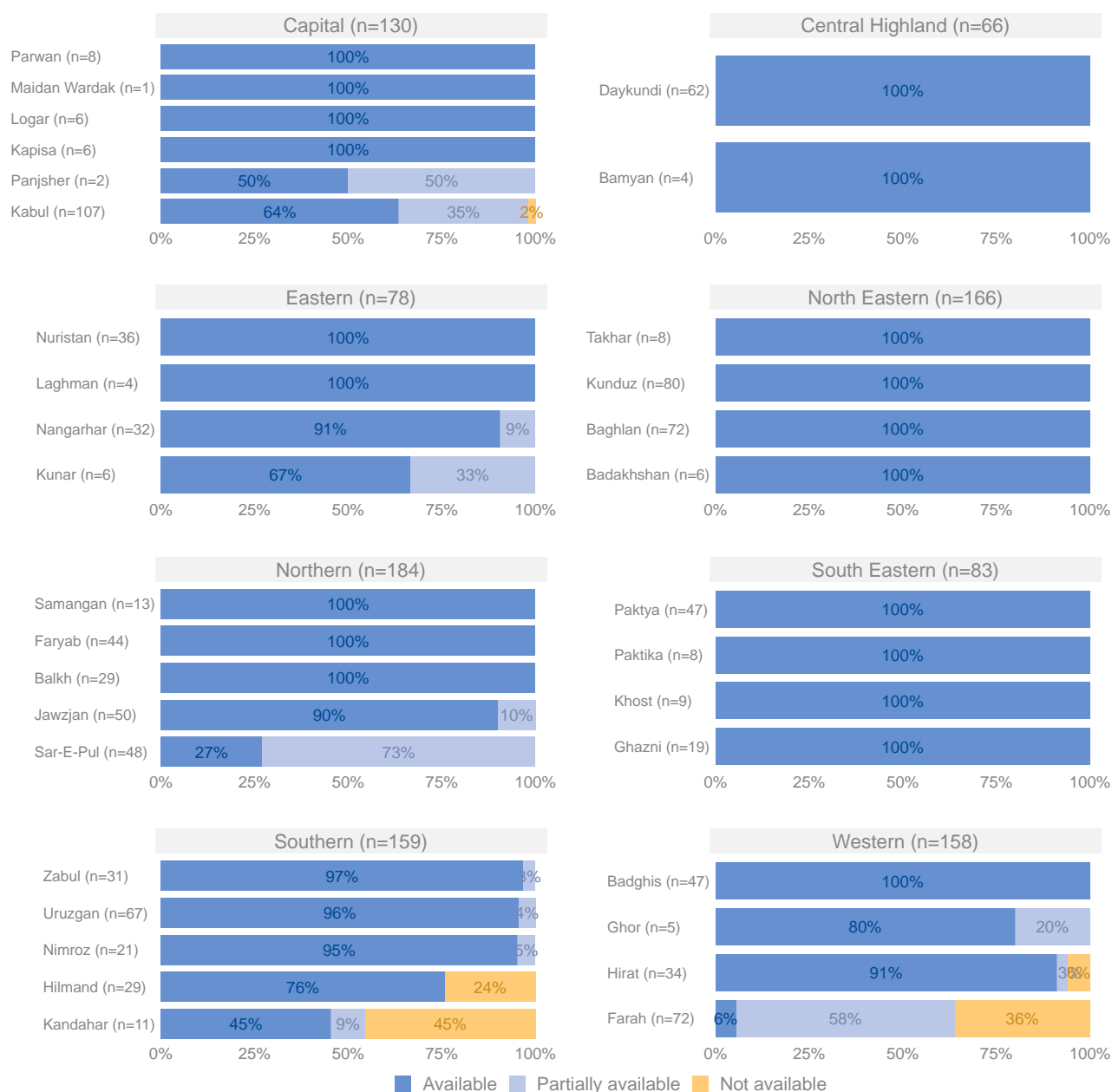
## Main barriers impeding service delivery by region



### Service availability by health facility type



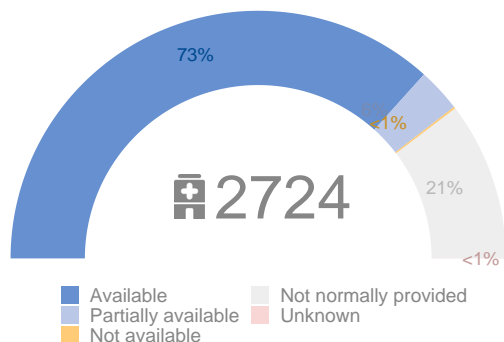
### Service availability by province†



† Chart excludes health facilities where the service is not normally provided or availability is unknown.

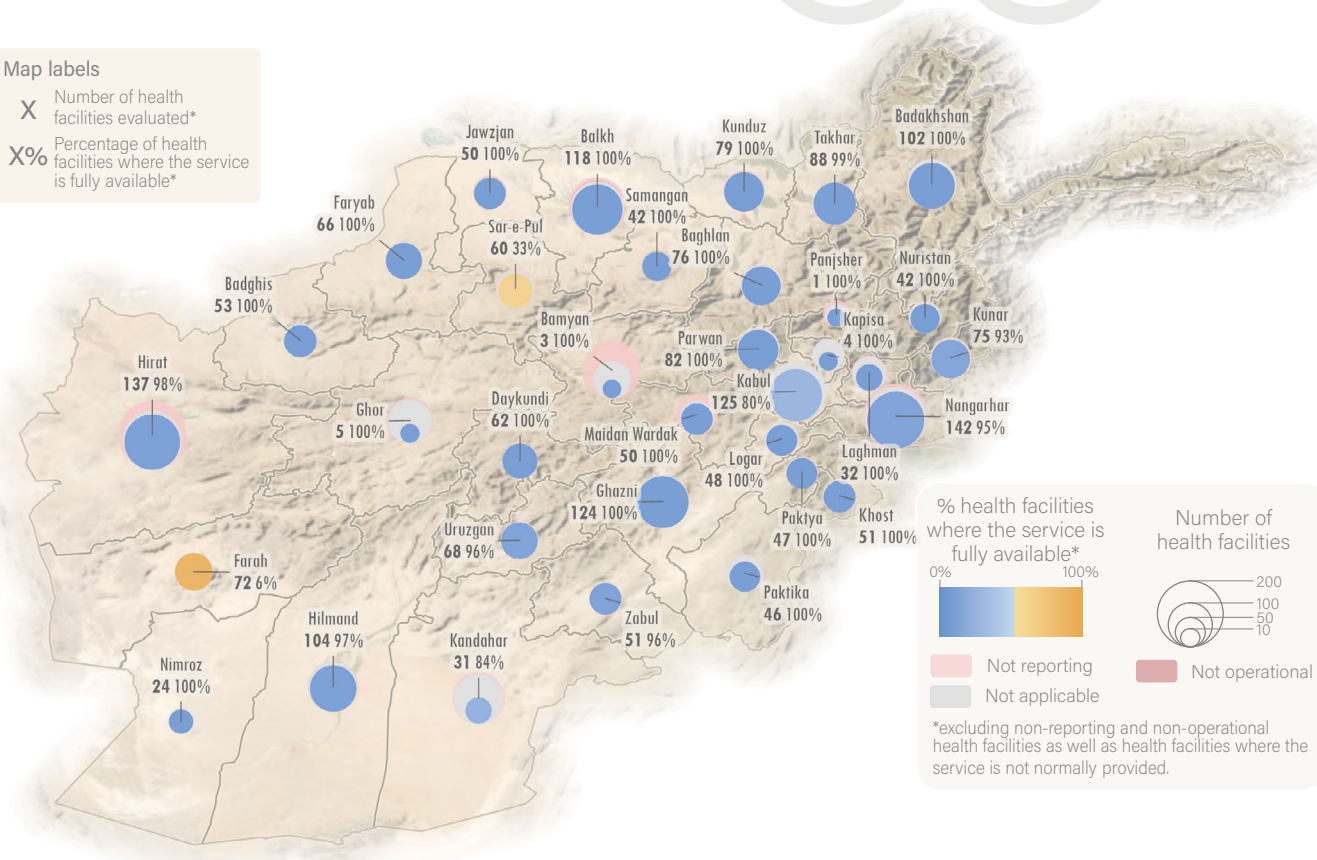
# PRIMARY EYE CARE

## Service availability

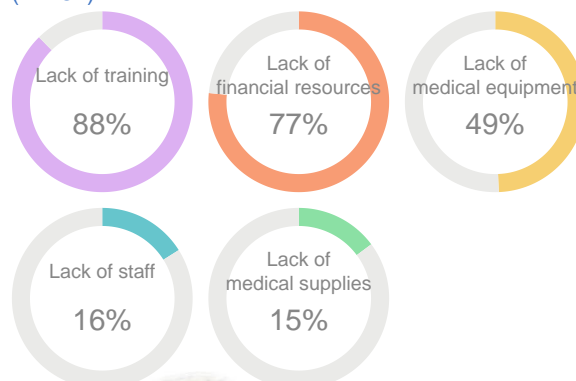


### Map labels

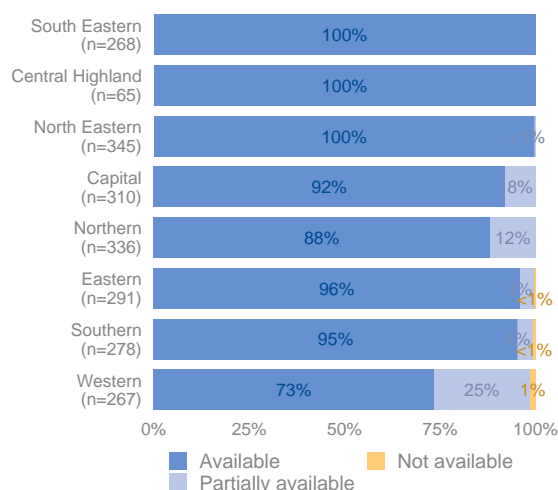
- X Number of health facilities evaluated\*
- X% Percentage of health facilities where the service is fully available\*



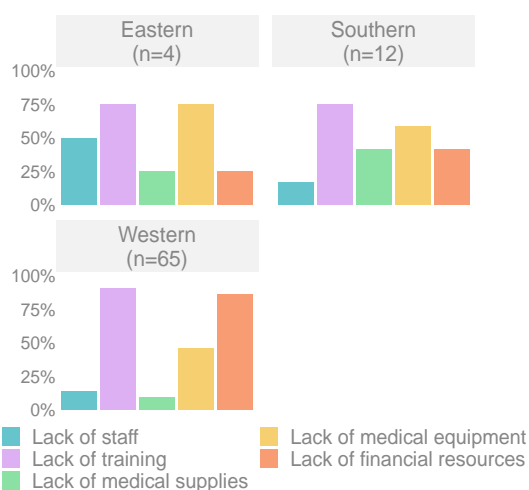
## Main barriers impeding service delivery (n = 81)



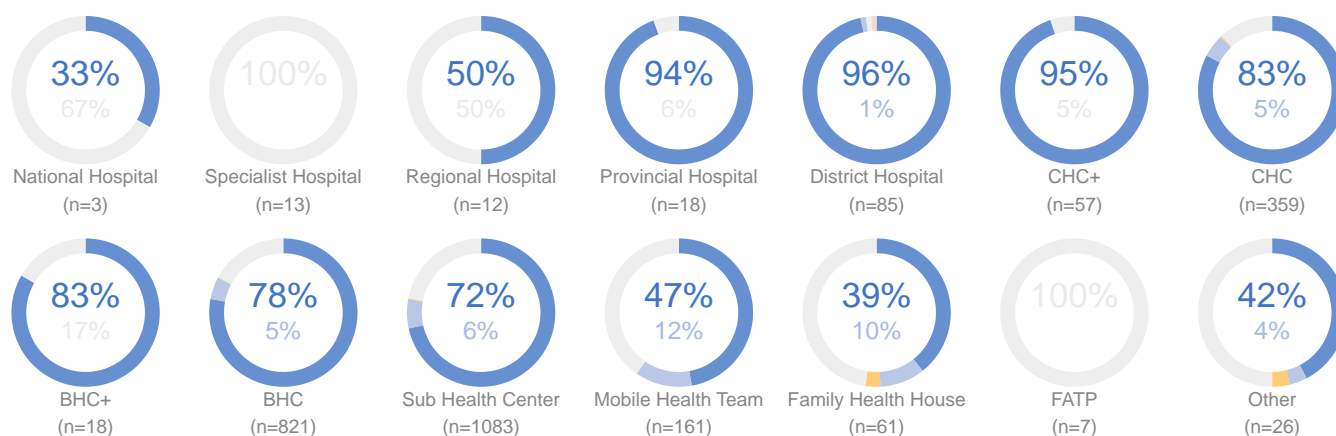
## Service availability by region†



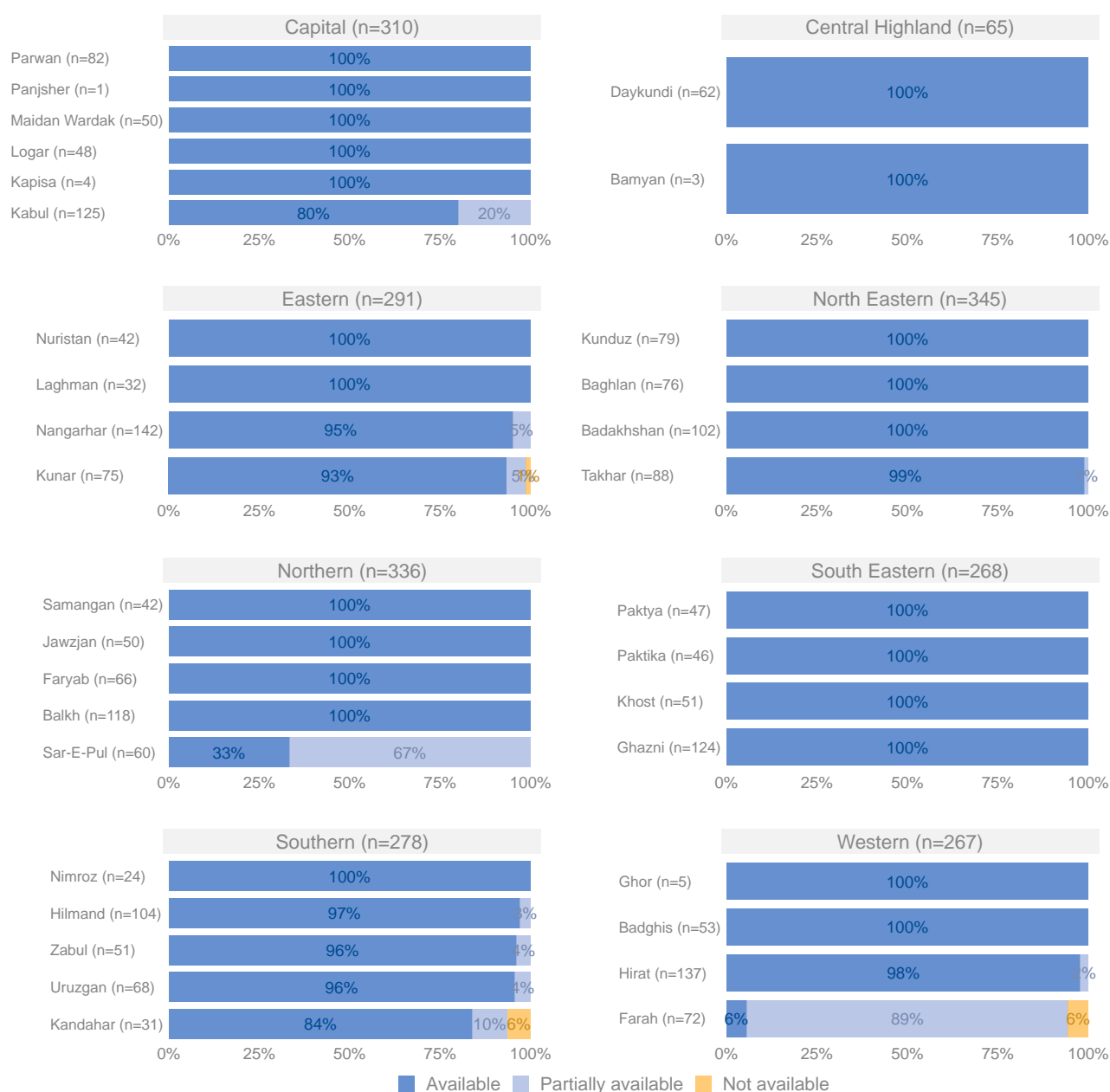
## Main barriers impeding service delivery by region



### Service availability by health facility type



### Service availability by province†

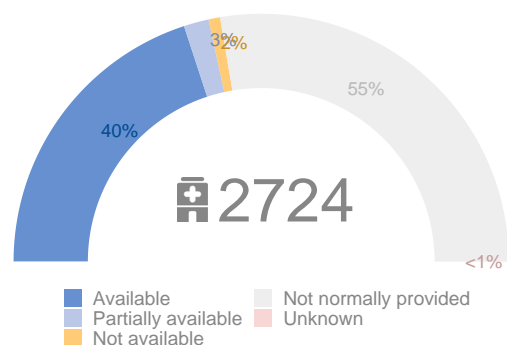


† Chart excludes health facilities where the service is not normally provided or availability is unknown.

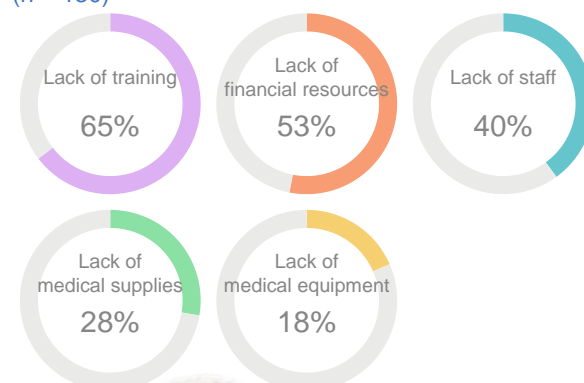


# PSYCHOLOGICAL FIRST AID

## Service availability

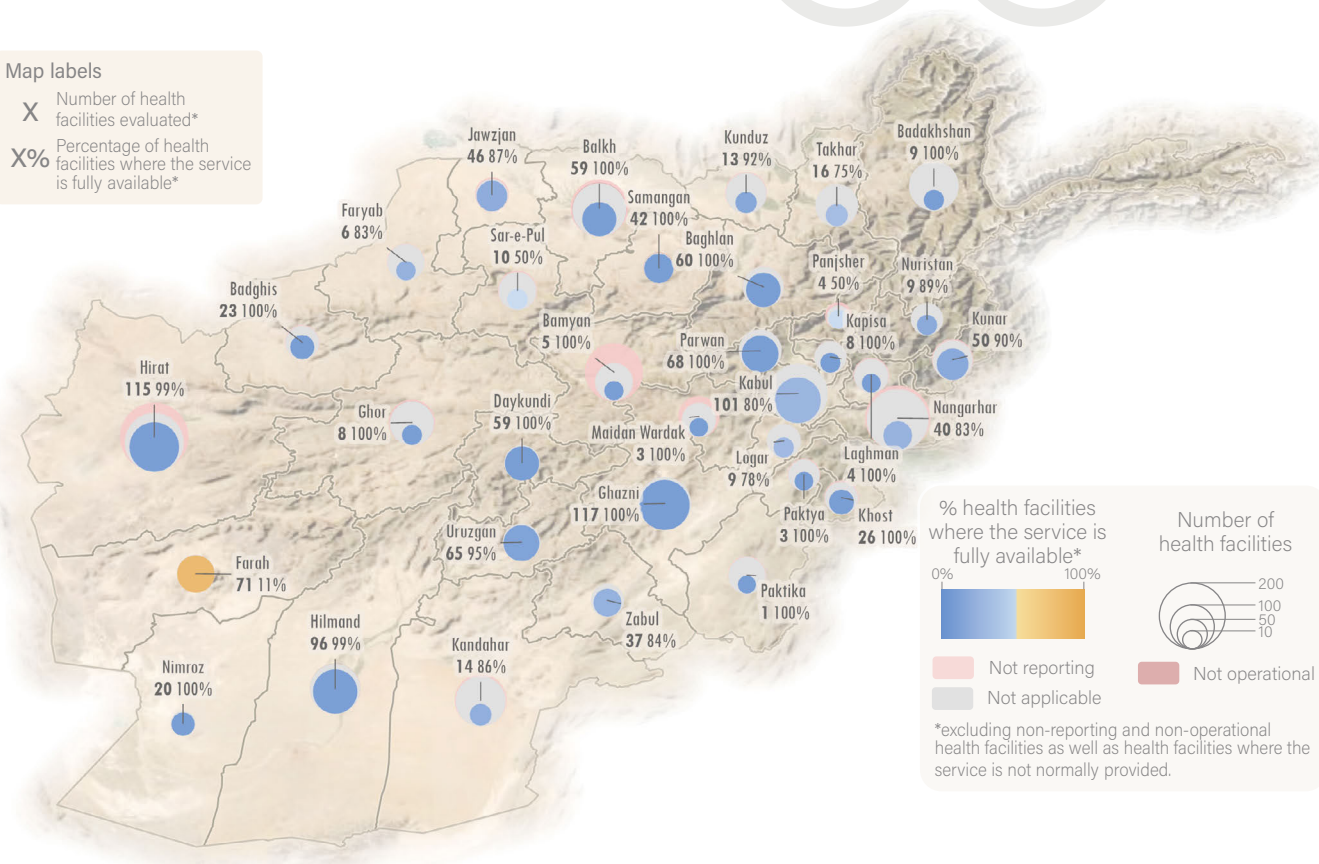


## Main barriers impeding service delivery (n = 130)

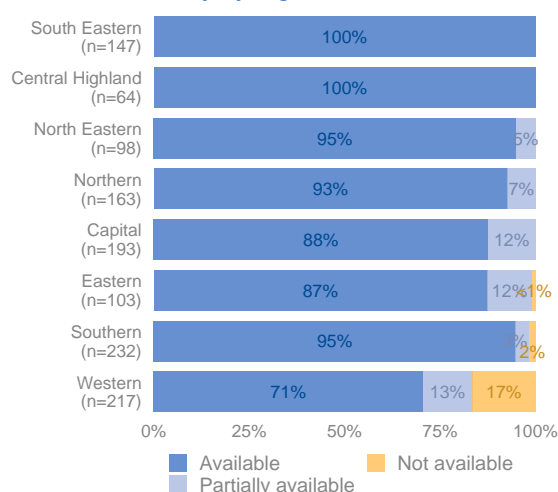


### Map labels

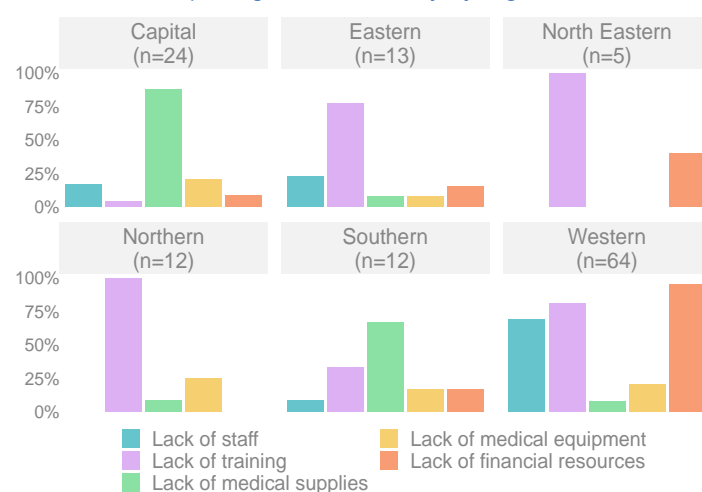
- X Number of health facilities evaluated\*
- X% Percentage of health facilities where the service is fully available\*



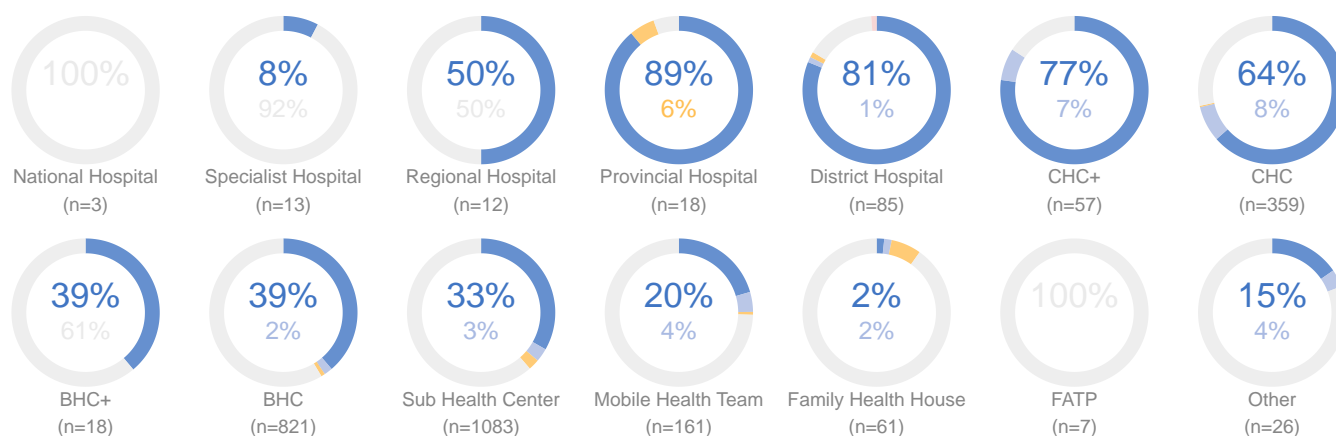
## Service availability by region†



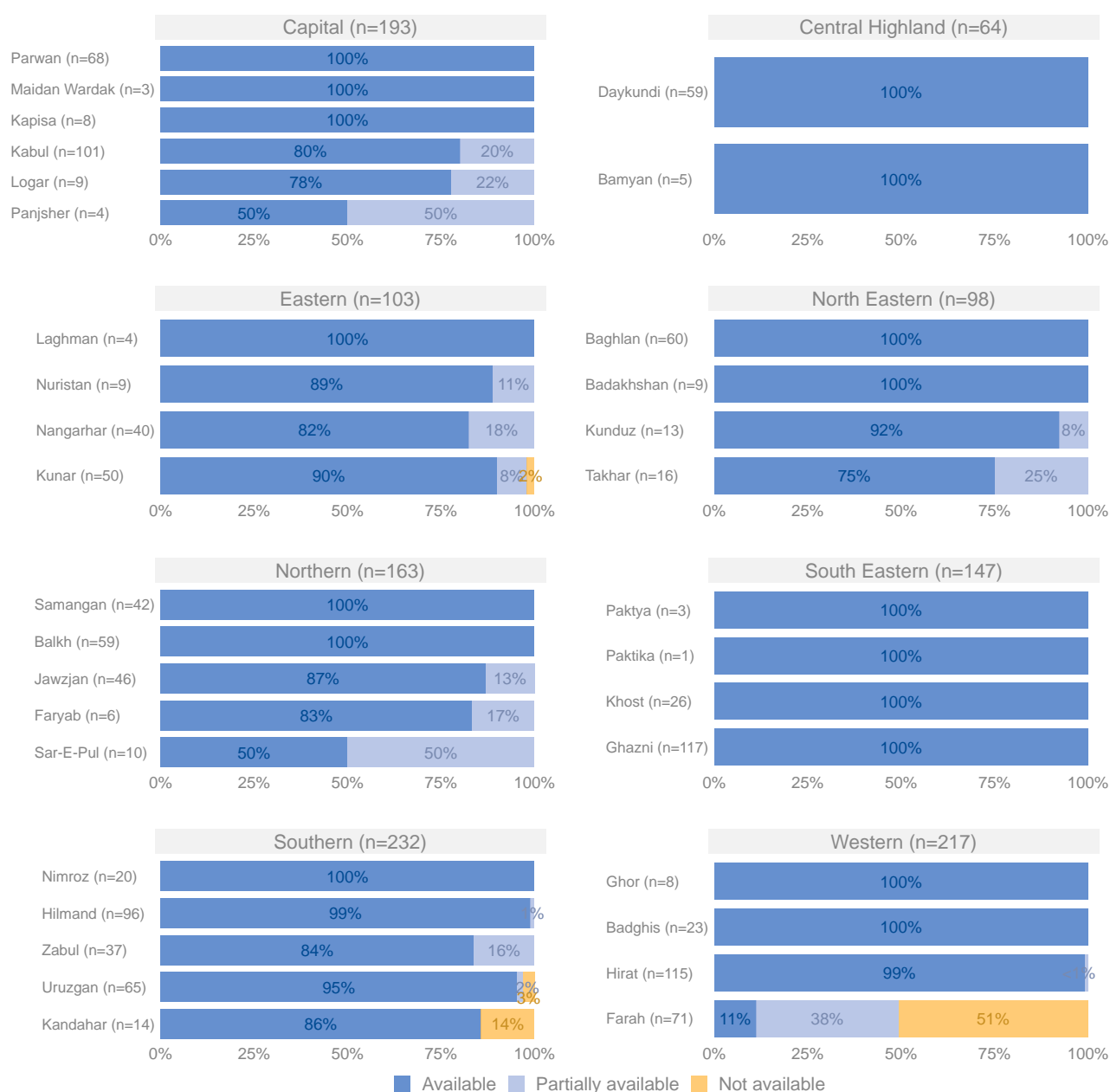
## Main barriers impeding service delivery by region



### Service availability by health facility type



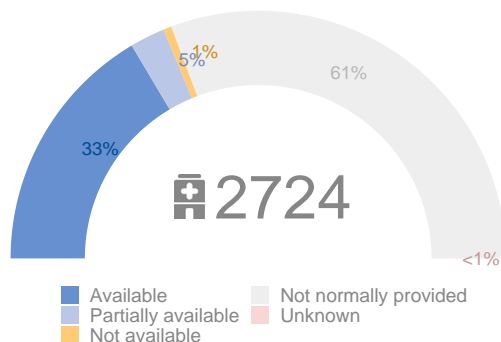
### Service availability by province†



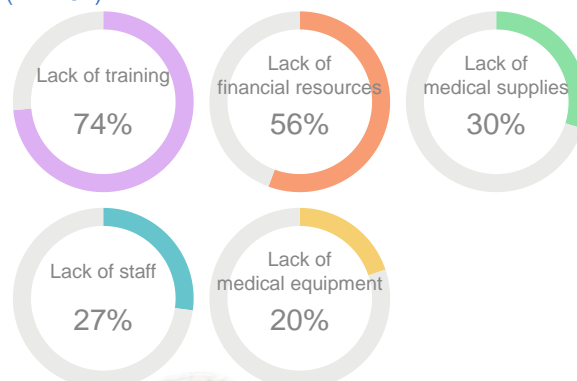
† Chart excludes health facilities where the service is not normally provided or availability is unknown.

# MANAGEMENT OF MENTAL DISORDERS

## Service availability

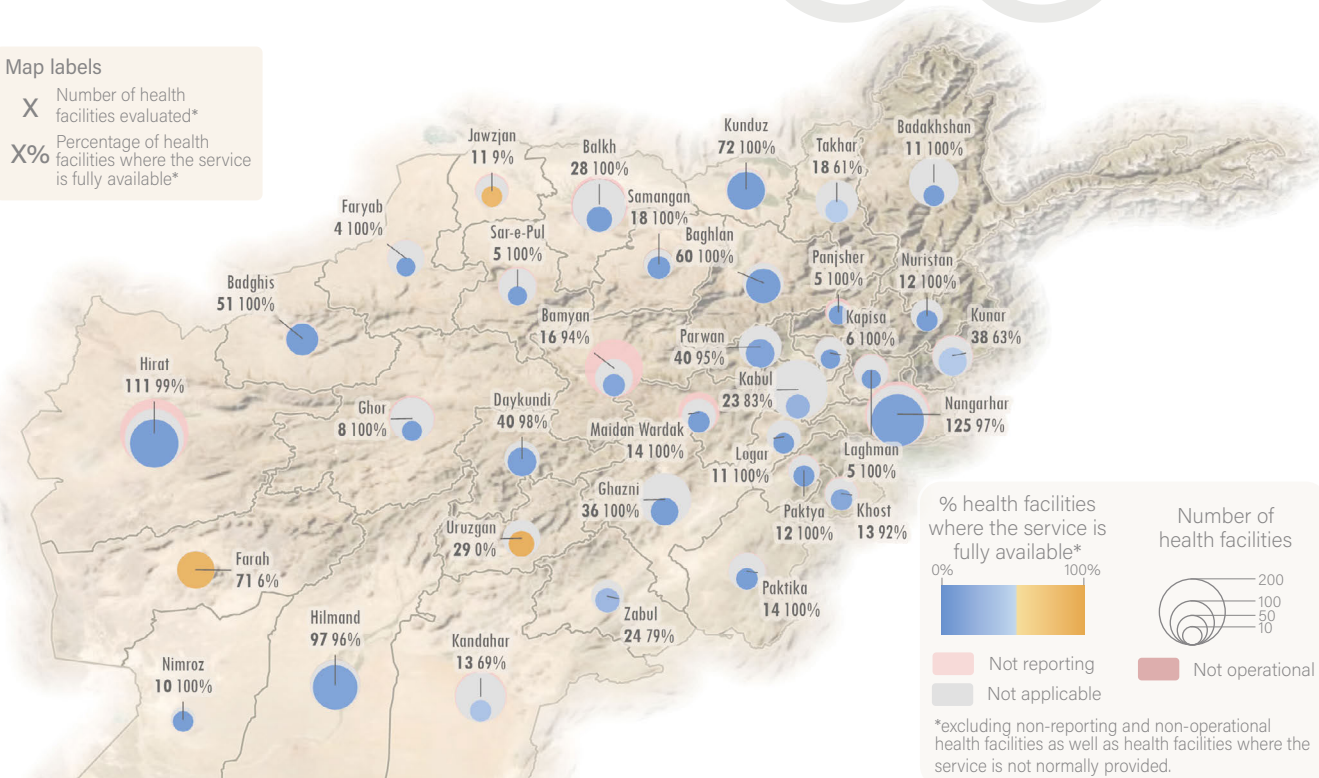


## Main barriers impeding service delivery (n = 151)

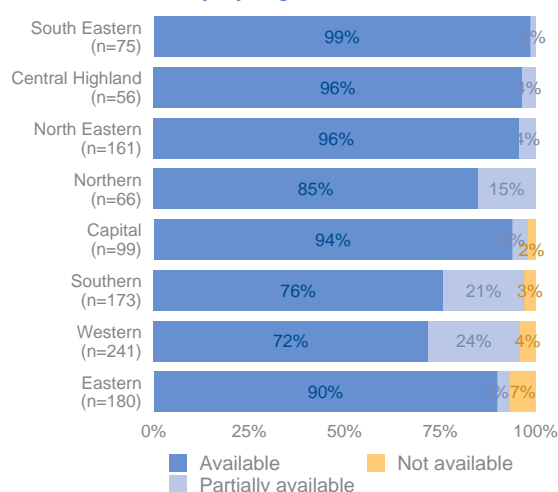


### Map labels

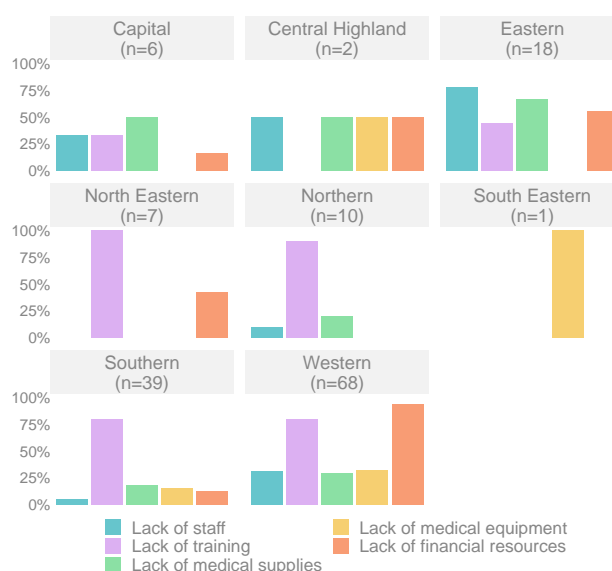
- X Number of health facilities evaluated\*
- X% Percentage of health facilities where the service is fully available\*



## Service availability by region†

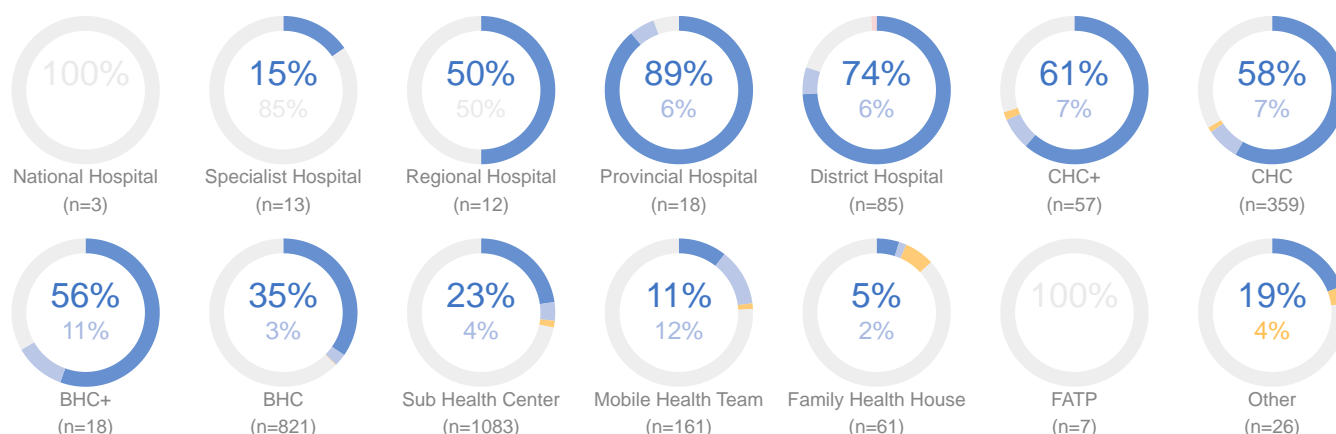


## Main barriers impeding service delivery by region

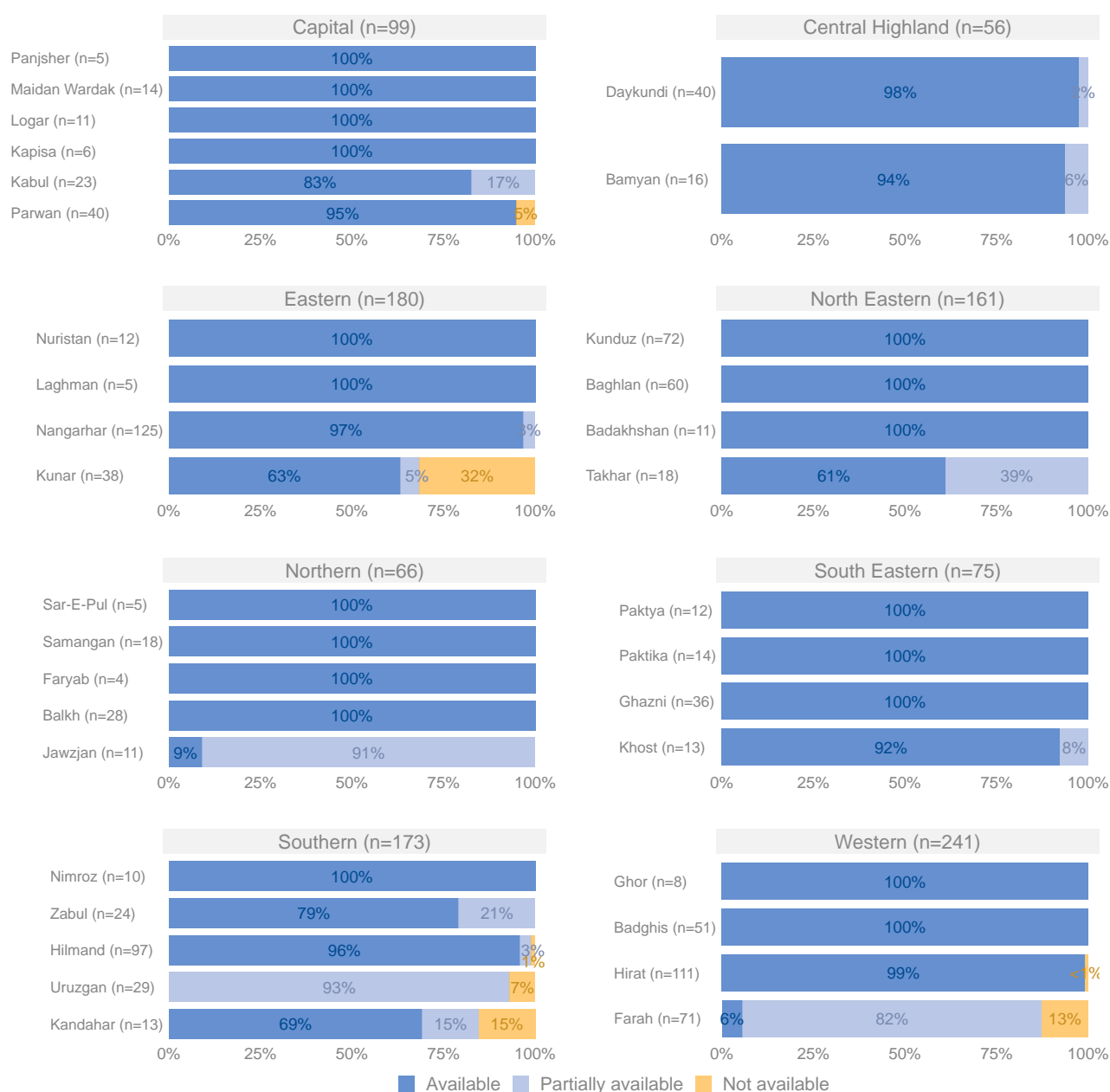




### Service availability by health facility type



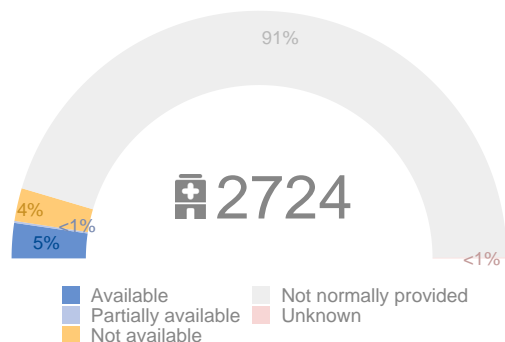
### Service availability by province†



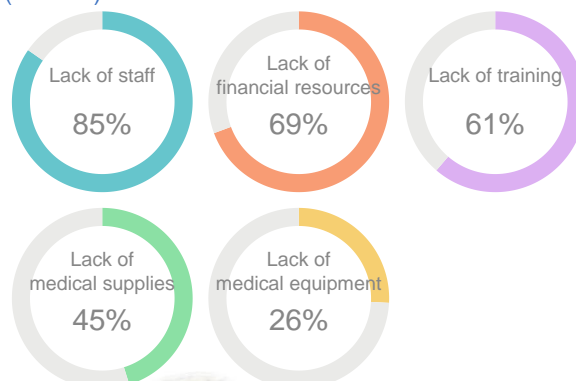
† Chart excludes health facilities where the service is not normally provided or availability is unknown.

# INPATIENT CARE FOR MENTAL DISORDERS

## Service availability

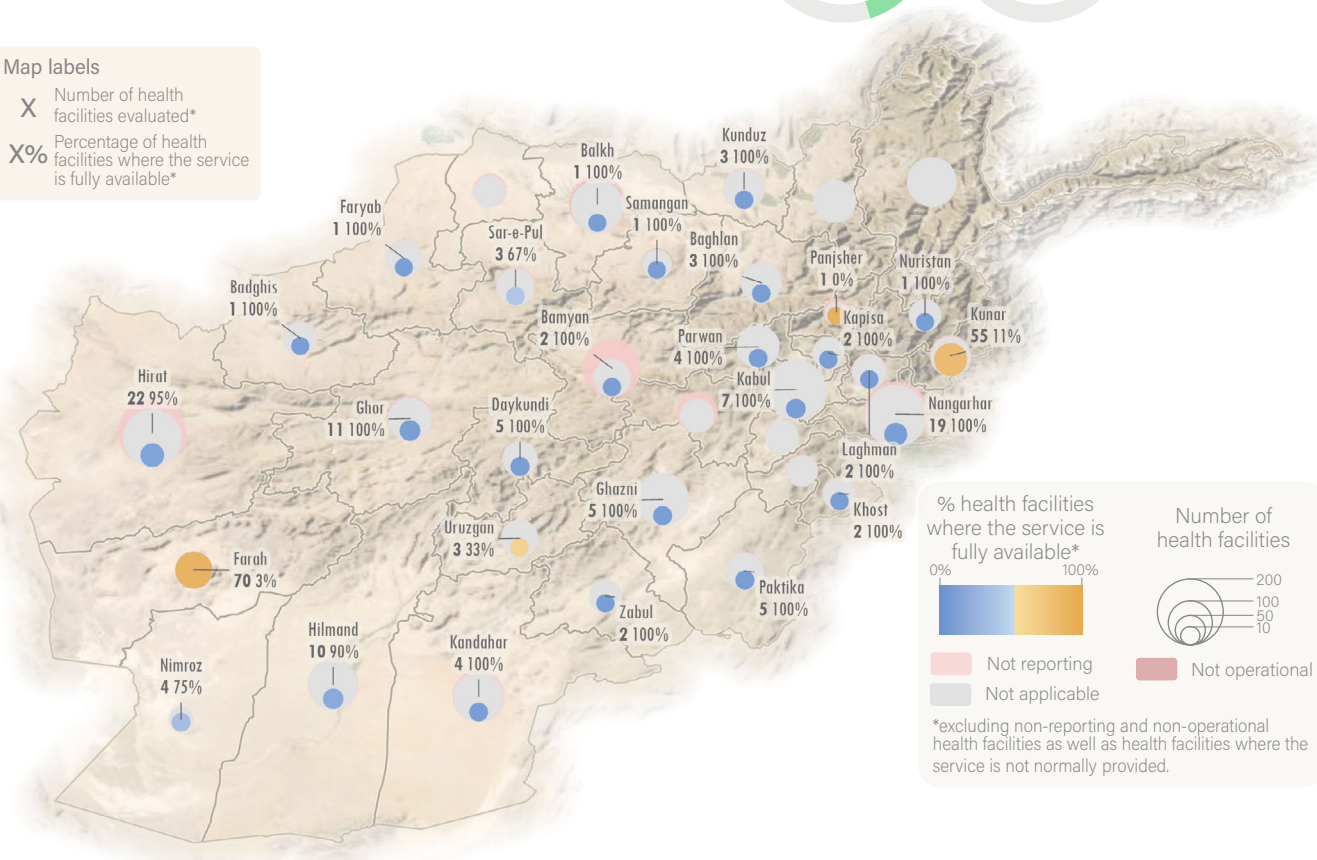


## Main barriers impeding service delivery (n = 124)

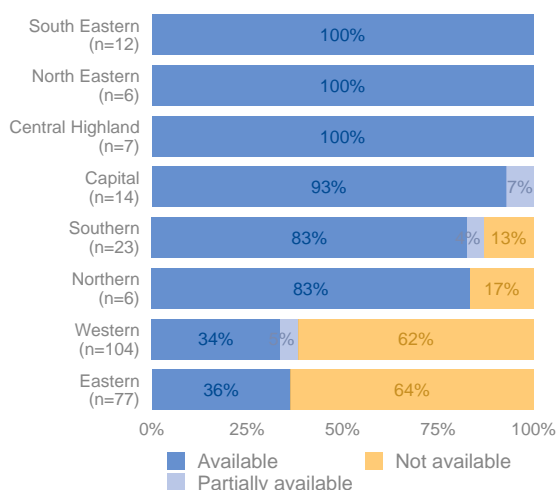


### Map labels

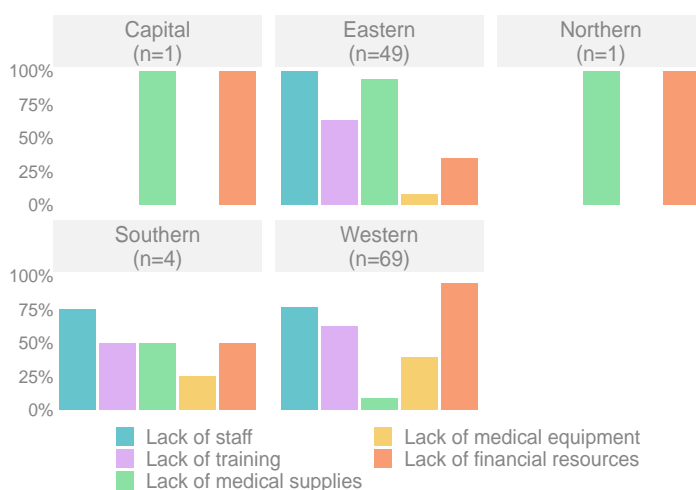
- X Number of health facilities evaluated\*
- X% Percentage of health facilities where the service is fully available\*



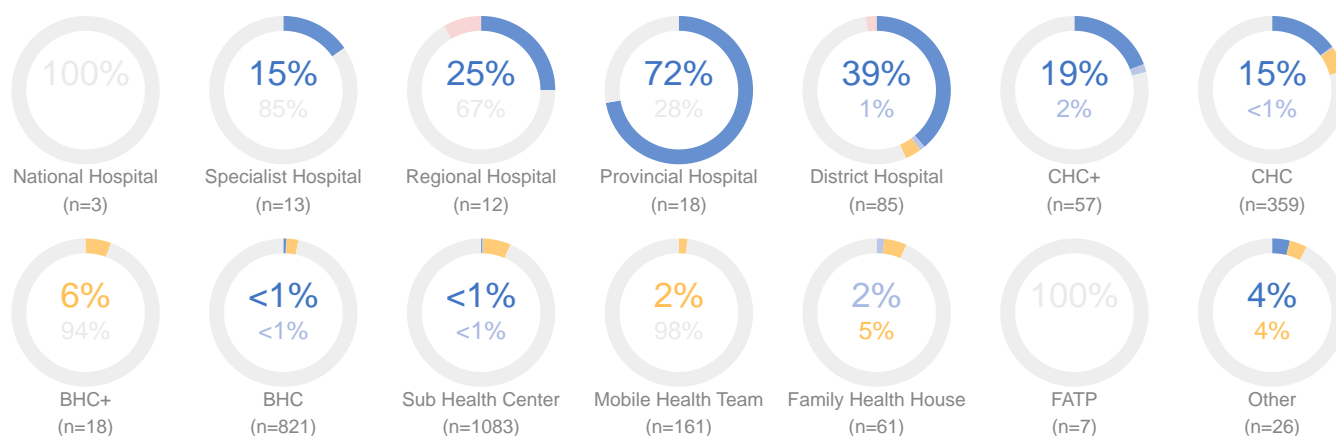
## Service availability by region†



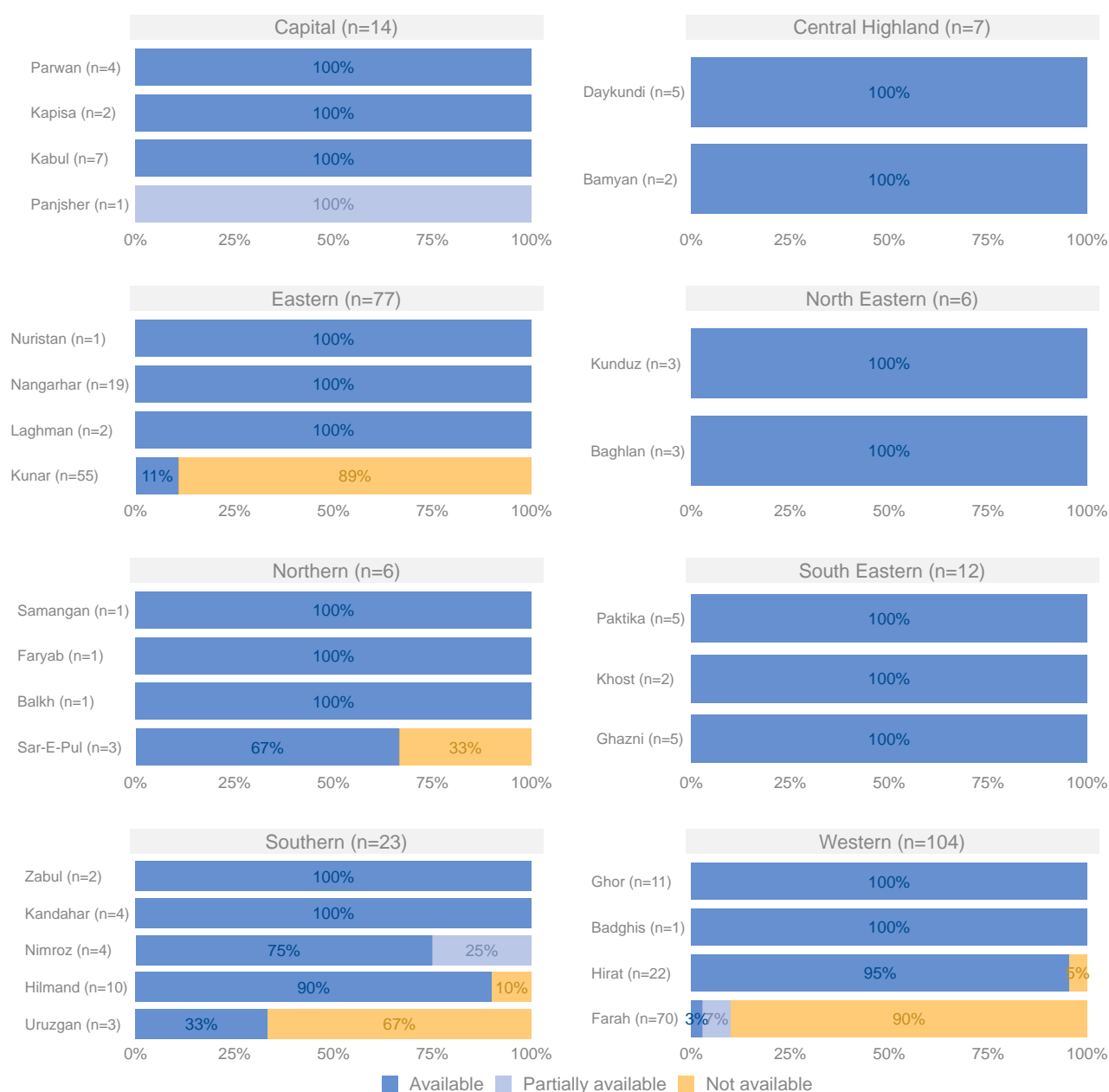
## Main barriers impeding service delivery by region



### Service availability by health facility type



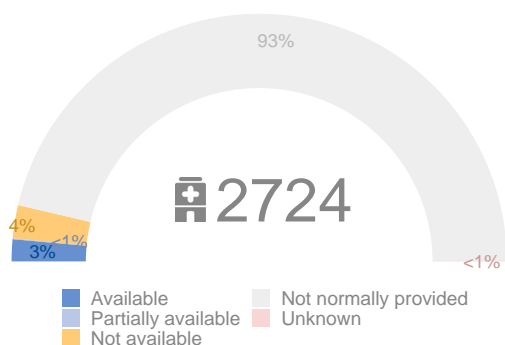
### Service availability by province†



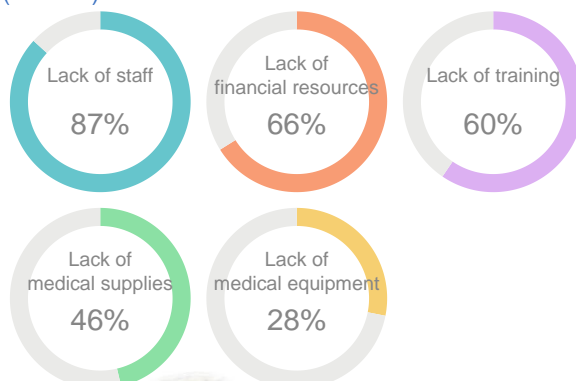
† Chart excludes health facilities where the service is not normally provided or availability is unknown.

# INPATIENT CARE FOR MENTAL DISORDERS BY SPECIALISTS

## Service availability

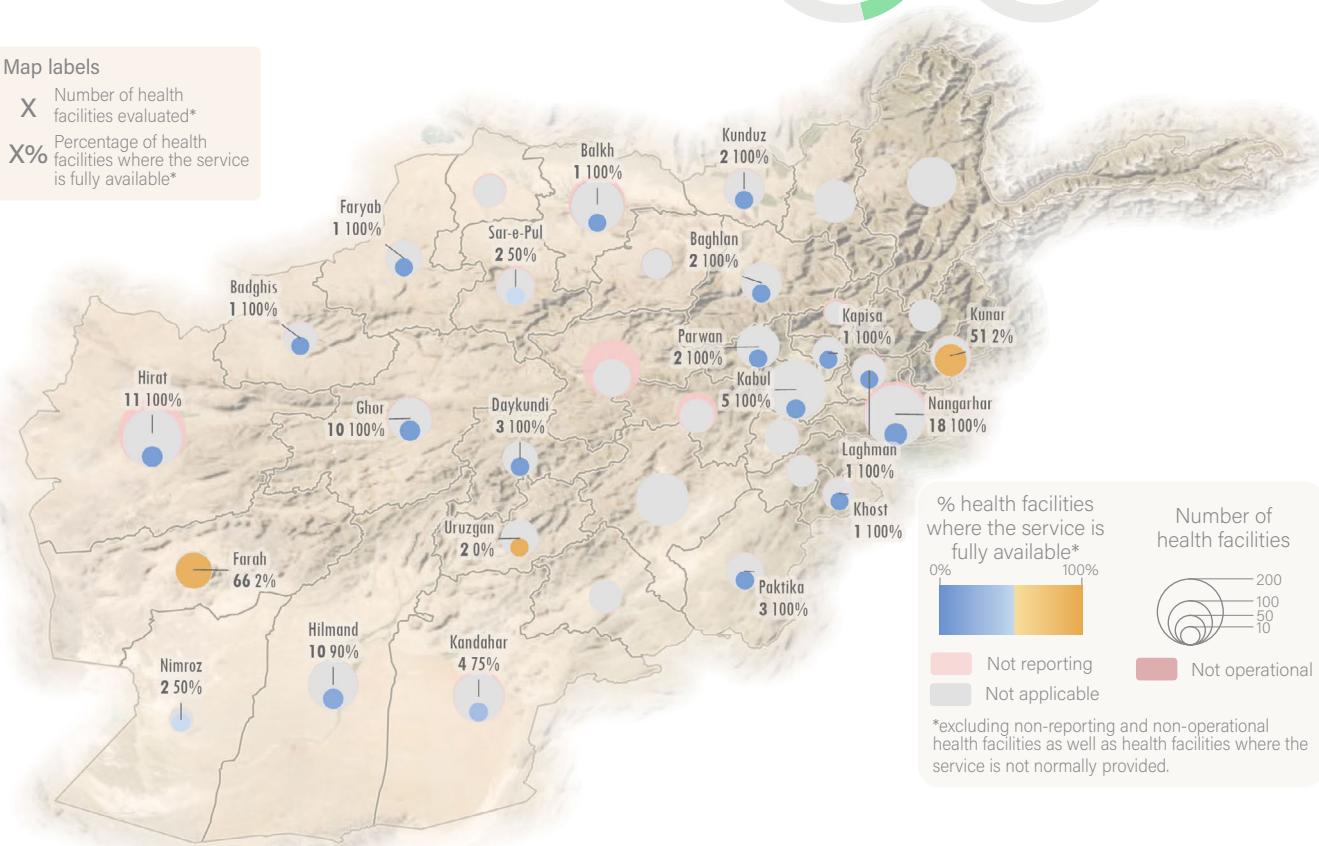


## Main barriers impeding service delivery (n = 121)

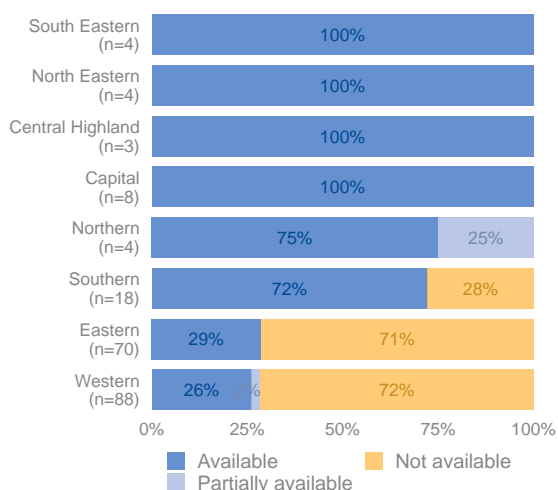


### Map labels

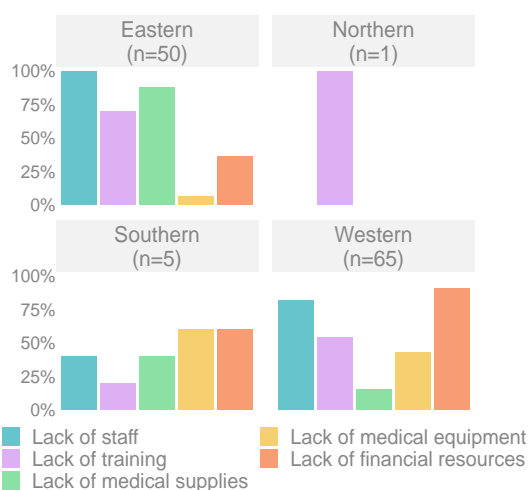
- X Number of health facilities evaluated\*
- X% Percentage of health facilities where the service is fully available\*



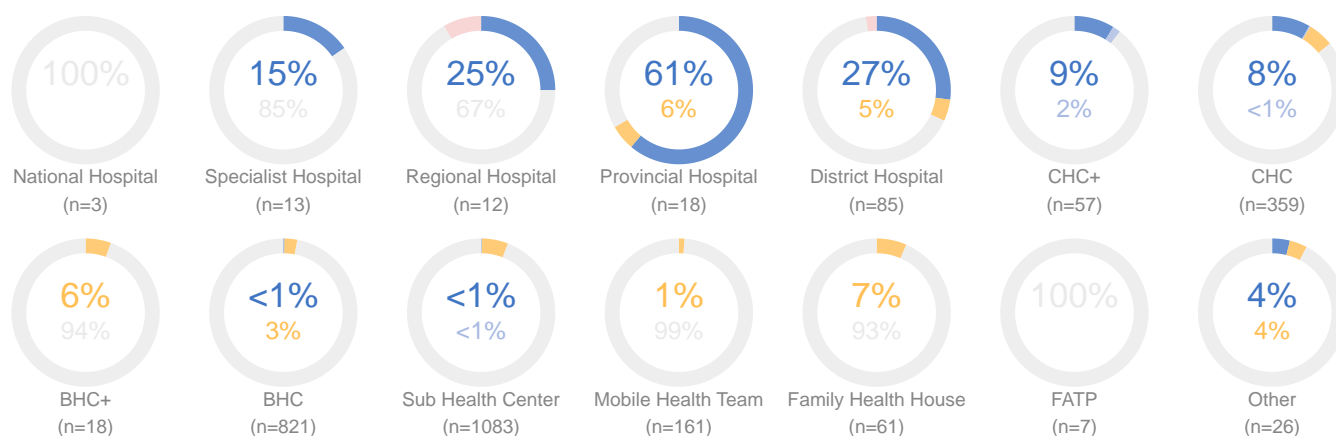
## Service availability by region†



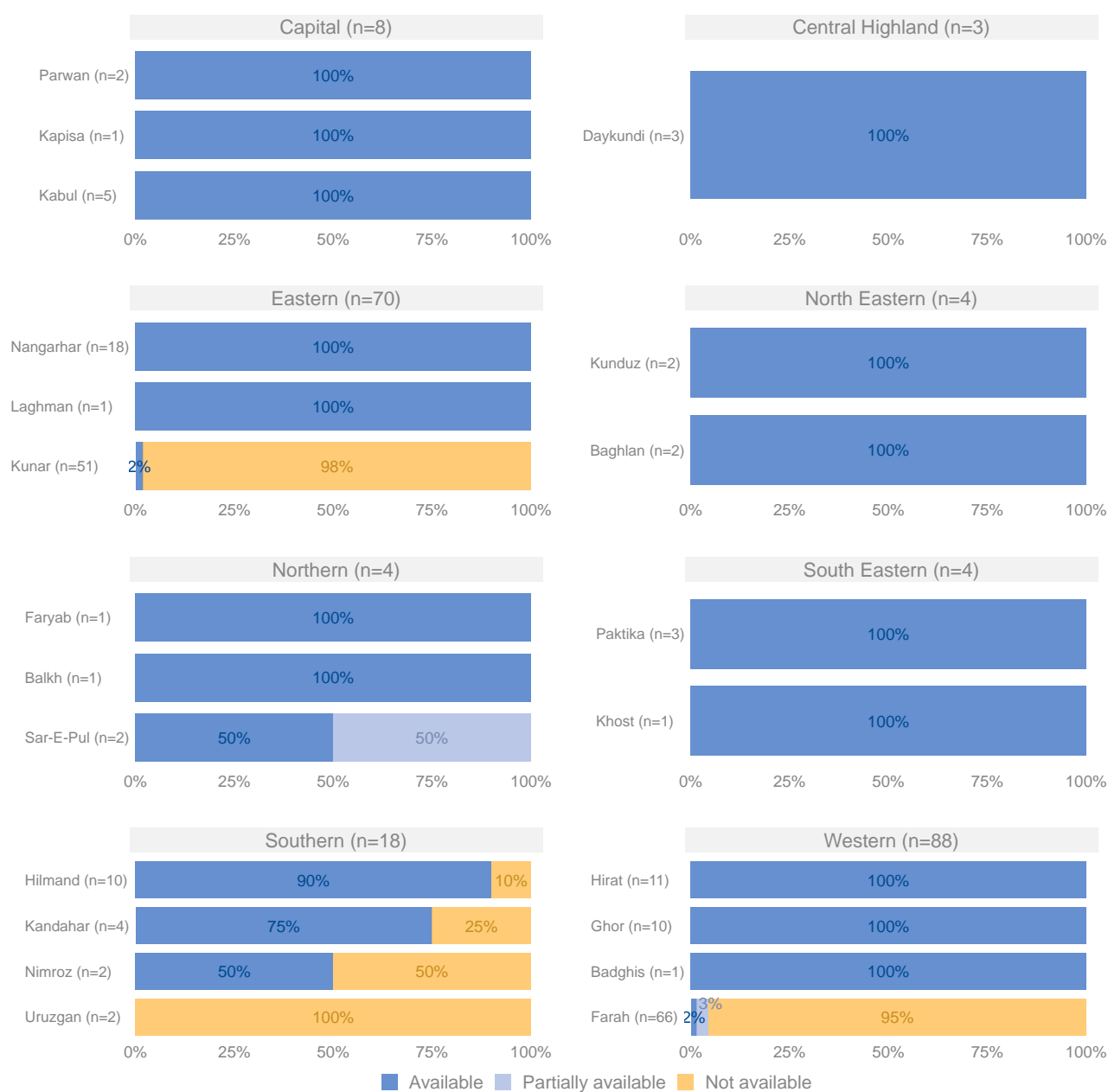
## Main barriers impeding service delivery by region



### Service availability by health facility type



### Service availability by province†



† Chart excludes health facilities where the service is not normally provided or availability is unknown.



# ANNEX





# ANNEX I: HeRAMS SERVICE DEFINITIONS

SERVICE NAME	DEFINITION	SERVICE EXPECTED													
		NH	SH	RH	PH	DH	CHC+	CHC	BHC+	BHC	SHC	MHT	FHH	FATP	Other
PROMOTE SELF-CARE, PROVIDE BASIC HEALTH CARE AND PSYCHO-SOCIAL SUPPORT	Identify and refer severe cases for treatment, provide needed follow-up to people discharged by facility-based health and social services for people with chronic health conditions, disabilities and mental health problems	X	X	X	X		X	X	X	X	X	X			X
NCD CLINIC	Brief advice on tobacco, alcohol and substance abuse, healthy diet, screening and management of risks of cardiovascular disease, individual counselling on adherence to chronic therapies, availability of blood pressure apparatus, blood glucose and urine ketones test strips, and essential NCD drugs as per national list	X	X	X	X	X	X	X	X	X	X	X	X		X
ASTHMA AND COPD	Classification, treatment and follow-up of Asthma and chronic obstructive pulmonary disease (COPD)	X	X	X	X	X									X
HYPERTENSION	Early detection, management, counseling (including dietary advice), and follow-up of hypertension	X	X	X	X	X	X								X
DIABETES	Early detection, management (oral anti-diabetic and insulin available), counselling (including dietary advice), foot care, and follow-up of diabetes	X	X	X	X	X									
INPATIENT ACUTE REHABILITATION	Inpatient rehabilitation for people with acute injury or illness, delivered by rehabilitation professionals as part of multi-disciplinary acute care, including the provision of assistive devices such as crutches or wheelchairs	X	X	X	X	X									
OUTPATIENT OR COMMUNITY LEVEL REHABILITATION SERVICES	Outpatient or community level rehabilitation services provided by a rehabilitation professional via an outpatient, mobile, or post-acute inpatient rehabilitation service, often as part of follow up care, including assistive device provision or maintenance	X	X	X	X	X									X
PROSTHETICS AND ORTHOTICS	Prosthetics and orthotics manufacture, fitting and training to use prosthetic and orthotic devices	X	X	X	X										X
PHYSIOTHERAPY SERVICES	Physiotherapy services	X	X	X	X	X	X	X							X
ORAL HEALTH AND DENTAL CARE	Oral health and dental care	X	X	X	X	X	X	X	X	X	X	X	X	X	X
PRIMARY EYE CARE	Eye care education, prevention and awareness, common eye diseases detection and referral and simple treatment	X	X	X	X	X									X
PSYCHOLOGICAL FIRST AID	Psychological first aid for distressed people, survivors of assault, abuse, neglect, domestic violence, and linking vulnerable individuals/families with resources, such as health services, livelihood assistance etc.	X	X	X	X	X	X	X	X	X	X	X	X	X	X
MANAGEMENT OF MENTAL DISORDERS	Management of mental disorders by specialized and/or trained and supervised non-specialized health-care providers, availability of fluoxetine, carbamazepine, haloperidol, biperiden, and diazepam	X	X	X	X	X									X
INPATIENT CARE FOR MENTAL DISORDERS	Inpatient management of mental disorders by specialized and/or trained and supervised non-specialized healthcare providers	X	X	X	X	X									
INPATIENT CARE FOR MENTAL DISORDERS BY SPECIALISTS	Inpatient care for mental disorders by specialists: Inpatient management of mental disorders by specialized health-care providers	X		X	X										

## ANNEX II: POPULATION ESTIMATES

REGION	PROVINCE	POPULATION ESTIMATES
<b>Capital</b>		<b>7,920,155</b>
	KABUL	5,385,526
	KAPISA	496,840
	LOGAR	442,037
	MAIDAN WARDAK	671,817
	PANJSHER	172,895
	PARWAN	751,040
<b>Central Highland</b>		<b>1,049,237</b>
	BAMYAN	504,312
	DAYKUNDI	544,925
<b>Eastern</b>		<b>1,661,077</b>
	KUNAR	508,224
	LAGHMAN	502,148
	NANGARHAR	1,735,531
	NURISTAN	166,676
<b>North Eastern</b>		<b>4,379,842</b>
	BADAKHSHAN	1,072,785
	BAGHLAN	1,033,760
	KUNDUZ	1,160,124
	TAKHAR	1,113,173
<b>Northern</b>		<b>4,356,890</b>
	BALKH	1,543,464
	FARYAB	1,129,528
	JAWZJAN	613,481
	SAMANGAN	438,235
	SAR-E-PUL	632,182
<b>South Eastern</b>		<b>3,446,404</b>
	GHAZNI	1,386,764
	KHOST	647,730
	PAKTIKA	789,079
	PAKTYA	622,831
<b>Southern</b>		<b>1,541,929</b>
	HILMAND	1,452,766
	KANDAHAR	1,431,876
	NIMROZ	186,963
	URUZGAN	443,804
<b>Western</b>		<b>4,097,494</b>
	BADGHIS	559,297
	FARAH	573,146
	GHOR	777,882
	HIRAT	2,187,169
<b>Total</b>		<b>32,069,160</b>

