

Ministry of Public Health Afghanistan: 2021 Integrated Package of Health Services



Islamic Republic of Afghanistan Ministry of Public  
Health

**Integrated Package of Essential Health Services**

**2021**

Health for All

Ministry of Public Health Afghanistan: 2021 Integrated Package of Health Services



## Ministry of Public Health, Afghanistan

Integrated Package of Essential Health Services 2021:  
Health, Medical, and Surgical Interventions

Table 1

Community health post 16,510*	Mobile health teams 309*	Sub-health centre (SHC) 1,001*	Basic health centre (BHC) 874*	Comprehensive health centre (CHC) 433*	First referral hospital 85*	Second referral hospital 27*
2 Community health workers (CHWs), one female and one male	*Staff: 1 male physician; 1 Community Midwife; 1 vaccinator; 1 Nutrition Nurse; 1 Driver (with vehicle)  *Can provide Family Health Home (FHH) as alternative for MHTs in remote areas with difficulties in physical access	*Staff: 1 male nurse; 1 community midwife; 1 cleaner/guard, 1 Nutrition counsellor, 1-2 vaccinators	*Staff: 1 female physician; (To be optional) 1 male nurse; 1 community midwife; 1 pharmacy technician; 1 CHS; 1 Nutrition Counsellor; 2 Vaccinator; 2 cleaner/guard	*Staff: 1 male physician; 1 female physician; 1 male nurse; 1 female nurse; 2 (M, F) psychosocial counsellors (nurse); 2 community midwives; 1 Nutrition counsellor; 1 community health supervisor; 2 laboratory technician; 1 microscopies for TB; 1 pharmacy technician; 1 administrator; 4 cleaners/guards; 2	*Staff: 1 Hospital Director; 1 Nursing Director; 1 Administrator; 2 Surgeons; 1 Obstetric and Gynaecologist; 1 Pedestrian; 3 General Practitioners; 3 Operating theatre and sterilization (nurse); 5 Midwives; 8 Ward Nurse; 2 Aesthetic Nurse; 2 nurses for emergency room and outpatient department; 2 Physiotherapist; 2 Pharmacist; 2 x-ray technician; 3 Laboratory Technician; 1 blood bank	*Staff: 1 Hospital Director; 1 Nursing Director; 1 Administrator; 4 surgeons; 2 anaesthetist; 4 obstetrician /gynaecologists; 2 paediatricians; 3 medical specialists; 1 ophthalmologist; 1 orthopaedist/traumatologist; 10 general practitioners; 1 dentist; 5 nurses; 9 midwives; 16 ward nurses; 3 anaesthetic nurses; 6 nurses for emergency room and outpatient department; 1 psychiatrist; 2 psychologist

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				drivers (with ambulance)	technician, 1 Dental Technician; 2 Nutrition counsellor; 2 psychosocial counsellor; 4 Vaccinator; 2 Administration (procurement, accounting, human resource, medical record, clerk); 1 Community Health Supervisor; 1 Maintenance; 5 Cleaner, waste management and grounds (gardener); 3 Laundry; 2 Cook; 2 Driver; 4 Guard (porter)	(1 male and 1 female), 2 psychosocial counsellor; 4 physiotherapist; 4 pharmacists; 1 radiologist; 2 x-ray technicians; 4 laboratory technicians; 2 blood bank technician; 2 dental technician; 2 Nutrition counsellor; 4 vaccinators; 2 technical assistants; 4 Administration; 2 Storekeeper; 4 Maintenance; 20 Cleaners, waste management, and grounds (gardeners); 4 Laundry; 4 Cook; 2 tailor, 1 mullah, 4 Drivers (and porters); 2 tailors; 8 Guards
<b>A. Reproductive, Maternal and Newborn Health Interventions = 33 of which 20 are MoPH high priority for implementation</b>						
**C1. Family health action groups especially for support when there is domestic violence, for newborn care, and nutrition education	<i>See also mental health section</i>	<i>See also mental health section</i>	<i>See also mental health section</i>	<i>See also mental health section</i>		

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^C2. Provision of appropriate vitamin and mineral supplementation (including vitamin D), iron folic acid tablets, albendazole, and vitamin A to pregnant and lactating women and refer eligible women for tetanus vaccination	MHT1. Provision of mineral supplementation (including vitamin D and calcium), iron folic acid tablets, albendazole, and vitamin A and tetanus vaccination	S1. At least 4 antenatal care visits by pregnant women that includes essential education on maternal health and family planning, support for those experiencing domestic violence, recognition of danger signs for hypertensive disorders and gestational diabetes, promotion of healthy diet and relevant vitamin and mineral supplementation (including vitamin D), iron folic acid tablets, albendazole, and vitamin A. HIV education and counselling, and tetanus vaccination	B1. At least 4 antenatal care visits by pregnant women that includes essential education on maternal health and family planning, support for those experiencing domestic violence, recognition of danger signs for hypertensive disorders and gestational diabetes, promotion of healthy diet and relevant vitamin and mineral supplementation (including vitamin D), iron folic acid tablets, albendazole, and vitamin A. HIV education and counselling, and tetanus vaccination	^CHC1. Comprehensive antenatal care for complicated pregnancy including management of hypertensive disorders, gestational diabetes, PMTCT of HIV, vitamin and mineral supplementation (including vitamin D), iron folic acid tablets, albendazole, and vitamin A and nutrition interventions	^DH1. Comprehensive antenatal care for complicated pregnancy, including management of hypertensive disorders, gestational diabetes, PMTCT of HIV, vitamin and mineral supplementation (including vitamin D), iron folic acid tablets, albendazole, and vitamin A and relevant nutrition interventions	^PH1. Comprehensive antenatal care for complicated pregnancy, including management of hypertensive disorders, gestational diabetes, PMTCT of HIV, vitamin and mineral supplementation (including vitamin D), iron folic acid tablets, albendazole, and vitamin A and nutrition interventions
C3. Information on recognition of signs of pre-term labour	^MHT2. Early detection of pre-term labour and premature rupture of membranes with timely referral and first dose of antibiotic if indicated	^S2. Early detection of pre-term labour and premature rupture of membranes with timely referral and first dose of antibiotic if indicated	^B2. Early detection of pre-term labour and premature rupture of membranes with timely referral and first dose of antibiotic if indicated	^CHC2. Early detection of pre-term labour and premature rupture of membranes with timely referral and first dose of antibiotic if indicated	^DH2. Management of preterm labour and pre-term pre-labour rupture of membranes with antenatal corticosteroids and antibiotic as indicated	^PH2. Management of pre-term labour and pre-term pre-labour rupture of membranes with antenatal corticosteroids and antibiotic as indicated
	MHT3. Early detection of signs of pre-eclampsia with timely referral	S3. Early detection of signs of pre-eclampsia with timely referral	^B3. Initial stabilization and management of eclampsia with intra-muscular injection of magnesium sulphate, and transfer to hospital	^CHC3. Initial stabilization and management of eclampsia with intra-muscular or intravenous loading dose of magnesium	^DH3. Comprehensive management of eclampsia [FLH4]	^PH3. Comprehensive management of eclampsia

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				sulphate, and transfer to hospital		
	^MHT4. In remote areas, initial treatment of obstetric or delivery complications prior to transfer	^S4. In remote areas, management of labour and delivery in low-risk women and adolescents (BEmONC), including initial treatment of obstetric or delivery complications prior to transfer	^B4. Management of labour and delivery in low-risk women and adolescents (BEmONC), including initial treatment of obstetric or delivery complications prior to transfer	^CHC4. Management of labour and delivery in low-risk women and adolescents (BEmONC), including initial treatment of obstetric or delivery complications prior to transfer	^DH4. Management of labour and delivery in high-risk women and adolescents including caesarean delivery (CEmONC)	^PH4. Management of labour and delivery in high-risk women and adolescents including caesarean delivery (CEmONC)
^C4. Promotion of kangaroo care and early breastfeeding and helping babies breathe interventions	MHT5. Helping babies breathe interventions	^S5. Helping babies breathe interventions	^B5. Helping babies breathe interventions	^CHC5. Helping babies breathe interventions and management of newborn complications, including jaundice, neonatal meningitis, and other very serious infections requiring continuous supportive care (intravenous fluids, oxygen, etc.)	^DH5. Helping babies breathe interventions and management of newborn complications, including jaundice, neonatal meningitis, and other very serious infections requiring continuous supportive care (intravenous fluids, oxygen, etc.)	^PH5. Helping babies breathe interventions and management of newborn complications, including jaundice, neonatal meningitis, and other very serious infections requiring continuous supportive care (intravenous fluids, oxygen, etc.)
C5. Post-natal home visit within 24 hours	^MHT6. Referral for clinical signs of pre and post natal maternal and neo-natal danger signs especially maternal sepsis	^S6. Early recognition and referral for clinical signs of pre and post natal maternal and neo-natal danger signs especially maternal sepsis	^B6. Early recognition and referral for clinical signs of maternal sepsis	^CHC6. Early recognition and referral for clinical signs of maternal sepsis	^DH6. Management of maternal sepsis, including early detection	^PH6. Management of maternal sepsis
C6. Post-natal reproductive health visit in home or family health house (FHH) that includes distribution of family planning commodities, resumption of	MHT7. Distribution of family planning commodities	S7. Post-natal visit that includes advice about birth spacing, family planning, resumption of sexual activity and pelvic floor	B7. Post-natal visit that includes advice about birth spacing, family planning, resumption of sexual activity, and pelvic floor exercises, and	CHC7. Post-natal visit that includes advice about birth spacing, family planning, resumption of sexual activity, and pelvic	DH7. Post-natal visit that includes advice about birth spacing, family planning, resumption of sexual activity, and pelvic floor exercises	PH7. Post-natal visit that includes advice about birth spacing, family planning, resumption of sexual activity, and pelvic floor exercises

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sexual activity and pelvic floor exercises		exercises, and complete the TD vaccine schedule	complete the TD vaccine schedule	floor exercises, and complete the TD vaccine schedule		
	MHT8. Counselling and referral for miscarriage or incomplete, or missed abortion	S8. Counselling and referral for miscarriage or incomplete, or missed abortion	^B8. Management of miscarriage or incomplete or missed abortion and post abortion care [HC2]	^CHC8. Termination of pregnancy for medical reasons including by manual vacuum aspiration	^DH8. Surgical termination of pregnancy for medical reasons by manual vacuum aspiration and dilation and curettage	^PH8. Surgical termination of pregnancy for medical reasons by manual vacuum aspiration and dilation and curettage
					^DH9. Operative treatment for ectopic pregnancy or ovarian cyst torsion	^PH9. Operative treatment for ectopic pregnancy or ovarian cyst torsion [
					^DH10. Hysterectomy for uterine rupture or intractable postpartum haemorrhage	^PH10. Hysterectomy for uterine rupture or intractable postpartum haemorrhage
C7. Provision of condoms and hormonal contraceptives including emergency contraceptives	MHT9. Administration of long-acting contraceptive methods	^S9. Referral for, or where available, administration of, long-acting contraceptive methods	^B9. Insertion and removal of long-acting contraceptives	^CHC9. Insertion and removal of long-acting contraceptives	^DH11. Surgical methods of contraception including tubal ligation and vasectomy	^PH12. Surgical methods of contraception including tubal ligation and vasectomy
					DH12. Repair of obstetric fistula	PH13. Repair of obstetric fistula
				^C10. Post gender-based violence care, including provision of emergency contraception, and rape response referral (medical and judicial) [	^DH13. Post gender-based violence care, including provision of emergency contraception, and rape response referral (medical and judicial)	^PH14. Post gender-based violence care including provision of emergency contraception, and rape response referral (medical and judicial)
C8. Promotion of maternal nutrition by nutrition situation assessment through BMI, MUAC, and height, weight measurement	MHT10. Promotion of maternal nutrition by nutrition situation assessment through BMI, MUAC, and height, weight measurement and giving	SHC10. Promotion of maternal nutrition by nutrition situation assessment through BMI, MUAC, and height, weight measurement and giving	B10. Promotion of maternal nutrition by nutrition situation assessment through BMI, MUAC, and height, weight measurement and giving	CHC11. Promotion of maternal nutrition by nutrition situation assessment through BMI, MUAC, and height, weight	DH14. Promotion of maternal nutrition by nutrition situation assessment through BMI, MUAC, and height, weight measurement and giving	PH15. Promotion of maternal nutrition by nutrition situation assessment through BMI, MUAC, and height, weight measurement and giving

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and giving proper nutrition counselling accordingly	proper nutrition counselling accordingly	proper nutrition counselling accordingly	proper nutrition counselling accordingly	measurement and giving proper nutrition counselling accordingly	proper nutrition counselling accordingly	proper nutrition counselling accordingly
<b>B. Child and Adolescent Health and Development Interventions = 12 of which 7 are MoPH high priority for implementation</b>						
<i>For treatment of acute infections see infectious disease section and emergency care section</i>						
C9. Monthly growth monitoring and health promotion for children under 5 with referral for malnutrition or other complications and screening (oedema, MUAC measurement)	MHT11. Screening (oedema, MUAC, weight per height measurement) and referral for malnutrition or other complications	S11. Screening (oedema, MUAC, weight per height measurement) and monthly growth monitoring and health promotion for children under 5 with referral for complicated malnutrition cases	B11. Screening (oedema, MUAC, weight per height measurement) and monthly growth monitoring and health promotion for children under 5 with referral for complicated malnutrition cases	CHC12. Screening (oedema, MUAC, weight per height measurement) and monthly growth monitoring and health promotion for children under 5 with referral for complicated malnutrition cases	DH15. Screening (oedema, MUAC, weight per height measurement) and monthly growth monitoring and health promotion for children under 5 with referral for malnutrition or other complications	PH16. Monthly growth monitoring and health promotion for children under 5 with referral for malnutrition or other complications
C10. Recognition of danger signs per IMCI protocols and referral as indicated	MHT12. Recognition of danger signs per IMCI protocols and referral as indicated	S12. Recognition of danger signs and management per IMCI protocols and referral as indicated	B12. Recognition of danger signs and management per IMCI protocols and referral as indicated	CHC13. Recognition of danger signs and management per IMCI protocols and referral as indicated	DH16. Triage of children on arrival with validated instrument (e.g., WHO/ICRC triage tool) and syndromic management as indicated	PH17. Triage of children on arrival with validated instrument (e.g., WHO/ICRC triage tool) and syndromic management as indicated
		S13. Routine visits to promote early child development, monitoring for expected developmental milestones and referral for delay in development	B13. Improve early child development through introduction of early child development services	CHC14. Improve early child development through introduction of early child development services	DH17. Targeted therapeutic programmes for children referred with developmental delays including motor, sensory, and language stimulation	PH18. Targeted therapeutic programmes for children referred with developmental delays including motor, sensory, and language stimulation
C11. Promotion of relevant childhood nutrition interventions		S14. Promotion of relevant childhood nutrition interventions and	^B14. Management of moderate and severe acute malnutrition	^CHC15. Management of moderate and non-complicated severe acute malnutrition	^DH18. Management of moderate and severe acute malnutrition associated with serious infection	^PH19. Management of moderate and severe acute malnutrition associated with serious infection

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		management of moderate acute malnutrition		associated with serious infection		according to clinical feeding protocols
C12. Promotion of initial breastfeeding, complementary breastfeeding, food demonstration, complementary feeding and micronutrient powder distribution and maternal nutrition	MHT13. Promotion of initial breastfeeding, complementary breastfeeding, food demonstration, complementary feeding and micronutrient powder distribution and maternal nutrition	SHC15. Promotion of baby friendly initiative (BFI)	B15. Promotion of baby friendly initiative (BFI)	CHC16. Promotion of baby friendly initiative (BFI)	DH19. Promotion of baby friendly initiative (BFI)	PH20. Promotion of baby friendly initiative (BFI)
^C13. Education on hand washing and safe disposal of children's faeces	^MHT14. Basic treatment of acute diarrhoea including oral fluids and zinc tablet	^S16. Basic treatment of acute diarrhoea including oral fluids	^B16. Basic treatment of acute diarrhoea including oral fluids	^CHC17. Advanced treatment of severe diarrhoea including IV fluids	^DH20. Advanced treatment of severe diarrhoea including IV fluids	^PH21. Advanced treatment of severe diarrhoea including IV fluids
C14. Periodic outreach initiatives for age appropriate child vaccination or refer for vaccination	^MHT15. Routine age appropriate immunization or refer for vaccination	^S17. Routine age appropriate immunization	^B17. Routine age appropriate immunization	^CHC18. Routine age appropriate immunization	^DH20. Routine age appropriate immunization	^PH22. Routine age appropriate immunization
C15. Promotion of child safety including prevention of road traffic injury, falls and poisoning		S18. Promotion of child safety including prevention of road traffic injury, falls and poisoning	B18. Promotion of child safety including prevention of road traffic injury, falls and poisoning	CHC19. Promotion of child safety including prevention of road traffic injury, falls and poisoning		
			B19. Early identification of lead poisoning and counselling of families to reduce or prevent exposure to lead in the environment	CHC20. Early identification of lead poisoning and counselling of families to reduce or prevent exposure to lead in the environment	DH21. Early identification of lead poisoning and counselling of families to reduce or prevent	PH23. Early identification of lead poisoning and counselling of families to reduce or prevent



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C16. Treatment of acute pharyngitis in children to prevent rheumatic fever	MHT16. Treatment of acute pharyngitis in children to prevent rheumatic fever	S19. Treatment of acute pharyngitis in children to prevent rheumatic fever	B20. Treatment of acute pharyngitis in children to prevent rheumatic fever	CHC21. Treatment of acute pharyngitis in children to prevent rheumatic fever	DH22. Treatment of acute pharyngitis in children to prevent rheumatic fever	PH24. Treatment of acute pharyngitis in children to prevent rheumatic fever
<i>C. Infectious Diseases Interventions = 18 of which 11 are MoPH high priority for implementation</i>						
		S20. Targeted age based and risk-based vaccinations for adults including tetanus, pneumococcus, influenza, hepatitis B, and any other relevant vaccinations	B21. Targeted age based and risk-based vaccinations for adults including tetanus, pneumococcus, influenza, hepatitis B, and any other relevant vaccinations	CHC22. Targeted age based and risk-based vaccinations for adults (including tetanus, pneumococcus, influenza, hepatitis B, and any other relevant vaccinations	DH23. Targeted age based and risk-based vaccinations for adults including tetanus, pneumococcus, influenza, hepatitis B, and any other relevant vaccinations	PH25. Targeted age based and risk-based vaccinations for adults including tetanus, pneumococcus, influenza, hepatitis B, and any other relevant vaccinations
^C17. Mass helminthiasis medicine administration	^MHT18. Mass helminthiasis medicine administration	^S21. Mass helminthiasis medicine administration				
		^S22. Early detection and treatment of leishmaniasis	^B22. Early detection and treatment of leishmaniasis	CHC23. Clinical diagnosis and treatment of Leishmaniasis with sodium stibogluconate (SSG) based on guideline	DH24. Clinical diagnosis and treatment of Leishmaniasis with sodium stibogluconate (SSG) based on guideline	PH26. Clinical diagnosis and treatment of Leishmaniasis with sodium stibogluconate (SSG) based on guideline
		^S23. HIV education and counselling, and provision of condoms for high-risk individuals	^B23. Provider initiated testing and counselling for HIV, sexually transmitted infections, and hepatitis, including for adolescents, with rapid treatment of sexually transmitted infections, and referral for the immediate starting of treatment for those testing positive for HIV	^CHC24. Provider initiated testing and counselling for HIV, sexually transmitted infections, and hepatitis, including for adolescents, with immediate treatment of sexually transmitted infections, provision of PrEP where	^DH25. Provider initiated testing and counselling for HIV, sexually transmitted infections, and hepatitis, including for adolescents, with immediate treatment of sexually transmitted infections, provision of PrEP where relevant, preventive therapies for children born to mothers	^PH27. Provider initiated testing and counselling for HIV, sexually transmitted infections, and hepatitis, including for adolescents, with immediate treatment of sexually transmitted infections, provision of PrEP where relevant, preventive therapies for children born to mothers

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				relevant, and starting and on-going monitoring of appropriate treatment for those testing positive for HIV	with HIV, and starting and on-going monitoring of appropriate treatment for those testing positive for HIV	with HIV, and the starting and on-going monitoring of appropriate treatment for those testing positive for HIV
				CHC25. Following a new diagnosis of HIV, initial and annual screening for latent tuberculosis infection, initiation of isoniazid preventive therapy among all with positive screen but no evidence of active tuberculosis	DH26. Following a new diagnosis of HIV, initial and annual screening for latent tuberculosis infection, initiation of isoniazid preventive therapy among all with positive screen but no evidence of active TB	PH28. Following a new diagnosis of HIV, initial and annual screening for latent tuberculosis infection, initiation of isoniazid preventive therapy among all with positive screen but no evidence of active tuberculosis
				^CHC26. Provider initiated diagnosis of tuberculosis using sputum smear, and initiation of first line and second line treatment per current WHO guidelines for drug susceptible tuberculosis; referral for confirmation, assessment of drug resistance, and treatment of drug resistant tuberculosis	^DH27. Confirmation, further assessment of drug resistance, and treatment of drug resistant tuberculosis	^PH29. Drug susceptibility testing for cases of treatment failure and tertiary referral as needed; enrolment of those with MDR-TB for treatment
				CHC27. For PLHIV and children under 5 who are close contacts	DH28. For PLHIV and children under 5 who are close contacts of individuals	PH30. For PLHIV and children under 5 who are close contacts of individuals

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				of individuals with active TB, perform symptom screening, chest x-ray, and preventive therapy	with active TB, perform symptom screening, chest x-ray, and preventive therapy	with active TB, perform symptom screening, chest x-ray, and preventive therapy
	MHT19. Referral for HIV testing for diagnosed TB cases	S24. Referral for HIV testing for diagnosed TB cases	B24. Referral for HIV testing for diagnosed TB cases	^CHC28. Screening for HIV in all individuals with a diagnosis of active tuberculosis; if HIV present, initiation of ARV treatment and HIV care	^DH29. Screening for HIV in all individuals with a diagnosis of active tuberculosis; if HIV present, initiation of ARV treatment and HIV care	^PH31. Screening for HIV in all individuals with a diagnosis of active tuberculosis; if HIV present, initiation of ARV treatment and HIV care
^C18. In high and low prevalence areas use of rapid diagnostic test for the P. vivax and P. Falciparum malaria with treatment with relevant anti-malarial medicines based on National Treatment Guideline (NTG)	^MHT20. Treatment of malaria diagnosed by rapid diagnostic test with relevant oral/rectal anti-malarial medicines based on NTG	^S25. In high prevalence areas diagnosed by rapid tests and treatment with relevant anti-malarial medicines based on NTG	^B25. Treatment of malaria diagnosed by rapid diagnostic test with relevant oral/rectal anti-malarial medicines based on NTG	^CHC29. Treatment of malaria diagnosed by microscopy with relevant oral anti-malarial medicines based on NTG	^DH30. Management of non-complicated and severe malaria including parenteral artesunate and full course of ACT based on NTG	^PH32. Management of non-complicated and severe malaria including parenteral artesunate and full course of ACT based on NTG
C19. Provision of insecticide-treated nets to households in Malaria high-risk areas through mass campaign	MHT21. Provision of insecticide-treated nets to households in Malaria high-risk areas through mass campaign	S26. Provision of insecticide-treated nets to children and pregnant women in high-risk areas through Ante Natal Care visits (ANC)	B26. Provision of insecticide-treated nets to children and pregnant women in high-risk areas through Ante Natal Care visits (ANC)	CHC30. Provision of insecticide-treated nets to children and pregnant women in high-risk areas through Ante Natal Care visits (ANC)	DH31. Provision of insecticide-treated nets to children and pregnant women in high-risk areas through Ante Natal Care visits (ANC)	PH33. Provision of insecticide-treated nets to children and pregnant women in high-risk areas through Ante Natal Care visits (ANC)

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C20. In the context of an emerging infectious outbreak, disseminate advice and guidance on how to recognise early symptoms and signs and when to seek medical attention	MHT22. Only at time of risk for outbreak, basic case-based syndromic surveillance and reporting with contact with bodily fluids precautions	S27. Only at time of risk for outbreak, basic case-based syndromic surveillance and reporting with contact precautions	B27. Only at time of risk for outbreak, basic case-based syndromic surveillance and reporting with contact precautions	CHC31. Only at time of risk for outbreak, basic case-based syndromic surveillance and reporting with contact precautions	DH32. Case-based syndromic surveillance in emergency rooms/units and reporting with basic communicable disease isolation	PH34. Case-based syndromic surveillance in emergency rooms or units and reporting with advanced communicable disease isolation
					DH33. Diagnosis and vaccination for rabies	PH35. Diagnosis and vaccination for rabies
C21. Health education and counselling on HIV, TB and Malaria	MHT23. Health education and counselling on HIV, TB and Malaria	S28. Health education and counselling on HIV, TB and Malaria	B28. Health education and counselling on HIV, TB and Malaria	CHC32. Health education and counselling on HIV, TB and Malaria	DH34. Health education and counselling on HIV, TB and Malaria	PH36. Health education and counselling on HIV, TB and Malaria
C22. Identification and referral of presumptive TB cases	MHT24. Identification, referral, and sample transportation of presumptive TB cases	S29. Identification, referral, and sample transportation of presumptive TB cases	B29. Identification, referral, and sample transportation of presumptive TB cases	CHC33. Identification and diagnosis of presumptive TB cases, including identification of drug resistant TB strains	DH35. Identification and diagnosis of presumptive TB cases, including identification of drug resistant TB strains	PH37. Identification and diagnosis of presumptive TB cases, including identification of drug-resistant TB strains

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C23. Treatment and follow up of diagnosed TB cases and provision of IPT to TB contacts	MHT25. Treatment and follow up of diagnosed TB cases and provision of IPT to TB contacts	S30. Treatment and follow up of diagnosed TB cases and provision of IPT to TB contacts	B30. Treatment and follow up of diagnosed TB cases and provision of IPT to TB contacts	CHC34. Treatment and follow up of diagnosed TB cases and provision of IPT to TB contacts	DH36. Treatment of diagnosed TB cases and provision of IPT to TB contacts	PH38. Treatment of diagnosed TB cases and provision of IPT to TB contacts
C24. Active contact tracing of all Drug susceptible and Drug Resistant TB cases through household visits	MHT26. Active contact tracing of all Drug susceptible and Drug Resistant TB cases through household visits	S31. Active contact tracing of all Drug susceptible and Drug Resistant TB cases through household visits	B31. Active contact tracing of all Drug susceptible and Drug Resistant TB cases through household visits	CHC35. Active contact tracing of all Drug susceptible and Drug Resistant TB cases through household visits		
<i>D. Chronic Non-Communicable Disease Interventions = 7 of which 3 are MoPH high priority for implementation</i>						
			^B32. Screening for diabetes among at-risk adults, and continuation of prescribed treatment, including for control of glycaemia, blood pressure and lipids, and consistent foot care	^CHC36. Screening and management of diabetes among at risk adults, including initiation of prescriptions for glycaemic control, and management of blood pressure and lipids	^DH37. Screening and management of diabetes among at risk adults, including initiation of prescriptions for glycaemic control, and management of blood pressure and lipids	^PH39. Screening and management of diabetes among at risk adults, including initiation of prescriptions for glycaemic control, and management of blood pressure and lipids
	MHT27. Blood pressure measurement in those aged 40 years and above	S32. Periodic screening for hypertension for all adults and continuation of prescribed treatment	B33. Periodic screening for hypertension for all adults and continuation of prescribed treatment	CHC37. Initiation of treatment among individuals with severe hypertension, evidence of associated end organ changes or other high-risk factors	DH38. Initiation of treatment among individuals with severe hypertension, evidence of associated end organ changes or other high-risk factors	PH40. Initiation of treatment among individuals with severe hypertension, evidence of associated end organ changes or other high-risk factors
				^CHC38. On-going management and monitoring of chronic	^DH39. On-going management and monitoring of chronic	^PH41. On-going management and monitoring of chronic

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				cardiovascular disease with continuation of prescribed treatment to reduce risk of further events	cardiovascular disease with continuation of prescribed treatment to reduce risk of further events	cardiovascular disease with continuation of prescribed treatment to reduce risk of further events
			B34. Chronic management of asthma and chronic obstructive pulmonary disorder with low dose inhaled corticosteroids and long acting bronchodilators	CHC39. Chronic management of asthma and chronic obstructive pulmonary disorder with low dose inhaled corticosteroids and long acting bronchodilators.	DH40. Management of acute exacerbations of asthma and chronic obstructive pulmonary disorder  <i>See also emergency care section</i>	PH42. Management of acute exacerbations of asthma and chronic obstructive pulmonary disorder
				^CHC40. Secondary prophylaxis with penicillin for rheumatic fever or established rheumatic heart disease	^DH41. Secondary prophylaxis with penicillin for rheumatic fever or established rheumatic heart disease	^PH43. Secondary prophylaxis with penicillin for rheumatic fever or established rheumatic heart disease
				CHC41. Screening for breast cancer in all chronic disease diagnosis	DH42. Screening for breast cancer in all chronic disease diagnosis	PH44. Screening for breast cancer in all chronic disease diagnosis
				CHC42. Early detection by visual inspection of early-stage cervical cancer, with referral	DH43. Early detection by visual inspection and treatment by cryotherapy and colposcopy of early-stage cervical cancer	PH45. Early detection by visual inspection and treatment by cryotherapy and colposcopy of early stage cervical cancer.
			B35. Awareness and referral of suspected cancer patients to the regional Hospital Oncology Wards for diagnosis and treatment	CHC43. Awareness, screening, and referral for suspected cancer patients to the regional Hospital Oncology	DH44. Awareness, screening, and referral for suspected cancer patients to the regional Hospital Oncology Wards for diagnosis and treatment	PH46 Awareness, screening, and referral for suspected cancer patients to the regional Hospital Oncology Wards for diagnosis and treatment

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				Wards for diagnosis and treatment		
<b><i>E. Mental, Neurological, and Substance Use Disorders Intervention = 18 of which 7 are MoPH high priority for implementation</i></b>						
C25. Awareness, detection and referral of Common and severe mental health disorders	MHT28. Awareness, Detection, Basic psychosocial counselling, pharmacological treatment and referral of Common and severe mental health disorders					
			B36. Detection of anxiety disorders for all age groups using validated interview-based tools and referral for initiation of pharmacological treatment, referral for psychosocial support.	^CHC44. Detection and referral for initiation of pharmacological treatment of all mental disorders for all age groups and continuation of psychosocial counselling  <i>See emergency section for clinically unstable patients</i>	^DH45. Detection of common and severe disorders for all age groups and continuation of psychosocial counselling or psychotherapy with timely referral for initiation of pharmacological treatment  <i>See emergency section for clinically unstable patients</i>	^PH47. Initiation of pharmacological and psychosocial counselling or psychotherapy for all mental health conditions
			B37. Detection of substance use disorders for all age groups using validated screening tools, and referral to drug demand reduction programme for pharmacological treatment and referral for psychosocial counselling	CHC45. Detection of substance use disorders for all age groups using validated screening tools, and referral to drug demand reduction programme for pharmacological treatment and	DH46. Referral to drug demand reduction treatment facility programme for pharmacological treatment and referral for psychosocial counselling or psychotherapy  <i>See emergency section for clinically unstable or acute (e.g.,</i>	PH48. Referral to drug demand reduction treatment facility for pharmacological treatment and referral to mental health hospital for psychosocial counselling or psychotherapy  <i>See emergency section for clinically unstable or acute (e.g.,</i>

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				psychosocial counselling	<i>overdose, drug-induced psychosis, suicide, self-harm, and violence)</i>	<i>overdose, drug-induced psychosis, suicide, self-harm, and violence)</i>
			B38. Detection and follow up of psychotic disorders using validated interview-based tools with timely referral for management	CHC46. Detection, basic counselling and follow up of psychotic disorders using validated interview-based tools with timely referral for management, and continuation of psychosocial counselling for psychotic disorders	^DH47. Prescription of pharmacological and psychosocial counselling for psychotic disorders especially bi-polar and schizophrenia conditions <i>See emergency section for clinically unstable e.g., severe acute agitation, suicide, self-harm, violence</i>	^PH49. Prescription of pharmacological and psychosocial counselling for psychotic disorders especially bi-polar and schizophrenia conditions
C26. Community education to limit exposure to violence, including gender-based violence and conflict, and referral for appropriate care	MHT29. Active detection of exposure to gender-based violence and referral for appropriate care	S33. Active detection of exposure to gender-based violence and referral for appropriate care	B39. Active detection of exposure to gender-based violence and referral for appropriate care	^CHC47. Psychosocial counselling for those exposed to violence  <i>See also emergency care section for medical support)</i>	^DH48. Advanced management for effects of exposure to violence  <i>See also treatment for anxiety, depression, and emergency care section for medical support</i>	^PH50. Advanced management of effects of exposure to violence  <i>See also treatment for anxiety, depression, and emergency care section for medical support</i>
				CHC48. Continuation of prescribed pharmacological medicines and psychosocial counselling for epilepsy  <i>See emergency section for clinically unstable (e.g., active seizures)</i>	^DH49. Prescription and initiation of pharmacological and psychosocial interventions for epilepsy  <i>Also see emergency section for clinically unstable (e.g., active seizures)</i>	^PH51. Prescription and initiation of pharmacological and psychosocial interventions for epilepsy  <i>Also see emergency section for clinically unstable (e.g., seizures)</i>



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				CHC49. Initiation of self-managed treatment using migraine protocol in acute phase	DH50. Initiation of self-managed treatment using migraine protocol in acute phase	PH52. Initiation of self-managed treatment using migraine protocol in acute phase
					DH51. Psychosocial support for patients with cancer	PH53. Psychosocial support for patients with cancer
<b>F. Emergency Care Interventions = 28 of which 13 are MoPH high priority for implementation</b>						
<sup>^</sup> C27. <i>Pre-hospital care:</i> User activated dispatch of basic ambulance services from district level	<sup>^</sup> MHT30. <i>Pre-hospital care:</i> User activated dispatch of basic ambulance services from district level	<sup>^</sup> S34. <i>Pre-hospital care:</i> User activated dispatch of basic ambulance services from district level	<sup>^</sup> B40. <i>Pre-hospital care:</i> User activated dispatch of basic ambulance services from district level	<sup>^</sup> CHC50. <i>Pre-hospital care:</i> User activated dispatch of basic ambulance services from district level	DH52. <i>Pre-hospital care:</i> User activated dispatch of basic ambulance services from district level	PH54. <i>Pre-hospital care:</i> User activated dispatch of basic ambulance services at provincial level
<sup>^</sup> C28. <i>Pre-hospital care:</i> WHO basic emergency care - Initial syndrome-based management at scene by pre-hospital providers for difficulty in breathing, shock, altered mental status, and poly trauma	<sup>^</sup> MHT31. <i>Pre-hospital care:</i> WHO basic emergency care - Initial syndrome-based management at scene by pre-hospital providers for difficulty in breathing, shock, altered mental status, and poly trauma	<sup>^</sup> S35. <i>Pre-hospital care:</i> WHO basic emergency care - Initial syndrome-based management at scene by pre-hospital providers for difficulty in breathing, shock, altered mental status, and poly trauma	<sup>^</sup> B41. <i>Pre-hospital care:</i> WHO basic emergency care - Initial syndrome-based management at scene by pre-hospital providers for difficulty in breathing, shock, altered mental status, and poly trauma	<sup>^</sup> CHC51. <i>Pre-hospital care:</i> WHO basic emergency care - Initial syndrome-based management at scene by pre-hospital providers for difficulty in breathing, shock, altered mental status, and poly trauma	<sup>^</sup> DH53. <i>Pre-hospital care:</i> WHO basic emergency care - Initial syndrome-based management at scene by pre-hospital providers for difficulty in breathing, shock, altered mental status, and poly trauma	<sup>^</sup> PH55. <i>Pre-hospital care:</i> WHO basic emergency care - Initial syndrome-based management at scene by pre-hospital providers for difficulty in breathing, shock, altered mental status, and poly trauma
<sup>^</sup> C29. <i>Pre-hospital care:</i> Direct provider monitoring during	<sup>^</sup> MHT32. <i>Pre-hospital care:</i> Direct provider monitoring	<sup>^</sup> S36. <i>Pre-hospital care:</i> Direct provider monitoring during	<sup>^</sup> B42. <i>Pre-hospital care:</i> Direct provider monitoring during	<sup>^</sup> CHC52. <i>Pre-hospital care:</i> Direct provider	<sup>^</sup> DH54. <i>Pre-hospital care:</i> Direct provider monitoring	<sup>^</sup> PH56. <i>Pre-hospital care:</i> Direct provider monitoring

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transport to appropriate health facility and structured handover to hospital personnel	during transport to appropriate health facility and structured handover to hospital personnel	transport to appropriate health facility and structured handover to hospital personnel	transport to appropriate health facility and structured handover to hospital personnel	monitoring during transport to appropriate health facility and structured handover to hospital personnel	during transport to appropriate health facility and structured handover to hospital personnel	during transport to appropriate health facility and structured handover to hospital personnel
	^MHT33. Recognition of danger signs in neonates, children and adults, including early recognition of signs of serious infection and referral	^S37. Recognition of danger signs in neonates, children and adults, including early recognition of signs of serious infection and referral	^B43. Recognition of danger signs in neonates, children and adults, including early recognition of signs of serious infection and referral	^CHC53. Recognition of danger signs in neonates, children and adults, including early recognition of signs of serious infection and referral	DH55. Triage of children and adults on arrival at facility with validated instrument (e.g. WHO/ICRC triage tool)	PH57. Triage of children and adults on arrival at facility with validated instrument (e.g. WHO/ICRC triage tool)
					DH56. Implementation of checklists for management of critically ill and injured patients in designated resuscitation area (WHO emergency and trauma care checklists)	PH58. Implementation of checklists for management of critically ill and injured patients in designated resuscitation area (WHO emergency and trauma care checklists)
^C30. First aid: Interventions include airway positioning, choking interventions, and basic external haemorrhage control (direct pressure, tourniquet)	^MHT34. First aid: Interventions include airway positioning, choking interventions, and basic external haemorrhage control (direct pressure, tourniquet), stabilization and referral	^S38. Basic life support, plus protocol-based administration of oral fluids with adjustment for age and condition including malnutrition, stabilization and referral	^B44. Basic syndrome-based management of difficulty breathing, shock, altered mental status, and poly trauma in dedicated emergency unit for neonates, children and adults {interventions include manual airway manoeuvres, oral/nasal airway placement, oxygen administration, bag-valve mask ventilation, temperature management, emergency administration of essential medications, including antibiotics for	^CHC44. Basic syndrome-based management of difficulty breathing, shock, altered mental status, and poly trauma in emergency unit for neonates, children and adults {interventions include manual airway manoeuvres, oral/nasal airway placement, oxygen administration, bag-valve mask ventilation,	^DH57. Advanced syndrome-based management of difficulty breathing, shock, altered mental status, and poly trauma in emergency unit, including for neonates, children and adults. (Interventions include intubation, mechanical ventilation, surgical airway, and placement of chest drain, haemorrhage control, defibrillation, administration of	^PH59. Advanced syndrome-based management of difficulty breathing, shock, altered mental status, and poly trauma in emergency unit, including for neonates, children and adults. (Interventions include intubation, mechanical ventilation, surgical airway, and placement of chest drain, haemorrhage control, defibrillation, administration of

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			serious infection, stabilization and referral	temperature management, emergency administration of essential medications, including empiric antibiotics for serious infection, stabilization and referral	intravenous fluids via peripheral and central venous line with adjustment for age and condition, including malnutrition; emergency administration of essential medicines)	intravenous fluids via peripheral and central venous line with adjustment for age and condition, including malnutrition; emergency administration of essential medicines
				CHC45. Management of severe acute exacerbations of asthma and chronic obstructive pulmonary disease {using systemic steroids, inhaled beta-agonists, and, if indicated, oral antibiotic and oxygen therapy	DH58. Management of acute ventilatory failure due to acute exacerbations of asthma and chronic obstructive pulmonary disease with use of bilevel positive airway pressure preferable	PH60. Management of acute ventilatory failure due to acute exacerbations of asthma and chronic obstructive pulmonary disease; in chronic obstructive pulmonary disease use of bilevel positive airway pressure preferable
			B45. Basic management of cardiovascular emergencies, including provision of aspirin for suspected acute myocardial infarction and external defibrillation after initial survey/assessment	CHC56. Basic management of cardiovascular emergencies, including provision of aspirin for suspected acute myocardial infarction and external defibrillation after initial survey/assessment	^DH59. Advanced management of cardiovascular emergencies, including myocardial infarction, heart failure, acute arrhythmia, tamponade, and acute critical limb ischemia. {Interventions include aspirin, unfractionated heparin and thrombolytics, pacing and synchronized cardioversion, pericardiocentesis }	^PH61. Advanced management of cardiovascular emergencies, including myocardial infarction, heart failure, acute arrhythmia, tamponade, and acute critical limb ischemia. {Interventions include aspirin, unfractionated heparin and thrombolytics, pacing and synchronized cardioversion, pericardiocentesis

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			B46. Recognition of, and referral for, clinical hypoglycaemia	CHC57. Recognition and initial management of hypoglycaemia and hyperglycaemia	DH60. Recognition and management of hypoglycaemia and hyperglycaemia, including treatment of diabetic ketoacidosis	PH62. Recognition and management of hypoglycaemia and hyperglycaemia, including treatment of diabetic ketoacidosis
				CHC58. Recognition of symptoms due e.g. to opioids/narcotics, sedative hypnotics or hallucinogens, including poisoning, acute intoxication and withdrawal symptoms, with referral for management	DH61. Recognition and management of symptoms due e.g. to opioids/narcotics, sedative hypnotics or hallucinogens, including poisoning, acute intoxication and withdrawal symptoms,	PH63. Recognition and management of symptoms due e.g. to opioids/narcotics, sedative hypnotics or hallucinogens, including poisoning, acute intoxication and withdrawal symptoms,
^C31. Initial wound care, including bleeding control, cleaning and dressing	^MHT35. Basic wound care, including bleeding control and suturing of simple lacerations	^S39. Basic wound care, including bleeding control and suturing of simple lacerations	^B47. Basic wound care, including bleeding control and suturing of simple lacerations	^CHC59. Advanced wound care, including suturing of complex lacerations	^DH62. Advanced wound care, including suturing of complex lacerations	^PH64. Advanced wound care, including suturing of complex lacerations
				^CHC60. Minor soft tissue surgical procedure (drainage of simple abscess and removal of foreign body)	^DH63. Minor soft tissue surgical procedure (drainage of simple abscess and removal of foreign body)	^PH65. Minor soft tissue surgical procedure (drainage of simple abscess and removal of foreign body)
^C32. Splinting of acute fractures and dislocations	^MHT36. Splinting of acute fractures and dislocations	^S40. Splinting of acute fractures and dislocations	^B48. Splinting of acute fractures and dislocations	^CHC61. Reduction and non-operative management of acute fractures and dislocations	^DH64. Reduction and non-operative management of acute fractures and dislocations, including traction	^PH66. Reduction and non-operative management of acute fractures and dislocations, including traction

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					DH65. Management of ENT emergencies, including foreign body removal, peritonsillar abscess and epistaxis	PH67. Management of ENT emergencies, including foreign body removal, peritonsillar abscess and epistaxis
					DH66. Management of acute trauma of the eye, including acid and alkali burns	PH68. Management of acute trauma of the eye, including acid and alkali burns
<i>See also community based first aid and pre-hospital care</i>				CHC62. Rapid scale up of service delivery capacity through provincial coordination	DH67. Protocol based mass casualty management and rapid scale up of service delivery capacity	PH69. Advanced protocol response based on provincial coordination for mass casualty management and rapid scale of service delivery capacity
<b><i>G. Surgical Interventions (not including obstetric surgery-- see maternal health) = 17 of which 11 are MoPH high priority for implementation</i></b>						
					^DH68. Burr hole to relieve acute elevated intracranial pressure	^PH70. Burr hole to relieve acute elevated intracranial pressure
				CHC63. Debridement and other treatment of soft tissue infection of small wounds	^DH69. Debridement and other treatment of soft tissue infection (including diabetic foot) and osteomyelitis	^PH71. Debridement and other treatment of soft tissue infection (including diabetic foot) and osteomyelitis
					DH70. Escharotomy or fasciotomy	PH72. Escharotomy or fasciotomy
					^DH71. Trauma related amputations	^PH73. Trauma related amputations
	<i>See emergency care section above</i>				^DH72. Reduction of acute fractures and dislocations, placement of external fixator and use of traction for fractures	^PH74. Urgent surgical management of orthopaedic injuries (for example, by open reduction and internal fixation)

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					^DH73. Irrigation and debridement of open fractures	^PH75. Irrigation and debridement of open fractures
					^DH74. Management of septic arthritis	^PH76. Management of septic arthritis
					DH75. Basic skin grafting and release of contractures, including for burns	PH77. Basic skin grafting and release of contractures, including for burns
					^DH66DH76. Relief of urinary obstruction by catheterization or suprapubic cystostomy	^PH78. Relief of urinary obstruction by catheterization or suprapubic cystostomy
					^DH77. Abdominal surgery including hernia repair, management of acute abdomen, removal of gallbladder, appendectomy, colostomy, management of hydatid cyst	^PH79. Abdominal surgery including hernia repair, management of acute abdomen, removal of gallbladder, appendectomy, colostomy, management of hydatid cyst
					^DH78. Trauma laparotomy	^PH80. Trauma laparotomy
			B49. Early recognition and referral for congenital anomalies		DH79. Early recognition and referral for congenital anomalies	^PH81. Management of cleft lip/palate, club foot
					DH80. Simple ocular procedures e.g. foreign body removal	PH82. Basic ocular surgery, including cataract removal
					DH81. Basic dental procedures (treatment of caries, extraction, drainage of simple dental abscess)	PH83. Comprehensive dental procedures (treatment of caries, extraction, drainage of simple dental abscess)
H. Palliative Care Interventions = 3						

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	MHT37. Oral palliative care and pain control measures with non-opioid agents		B50. Oral palliative care and pain control measures with non-opioid agents	CHC64. Oral and parenteral palliative care and pain control measures with non-opioid agents	DH82. Treatment of severe acute pain including in association with procedures, including with opioid and non-opioid agents	PH84. Treatment of severe acute pain with opioid and non-opioid agents
					DH83. Procedural sedation	PH85. Procedural sedation
<b>I. Rehabilitation Interventions = 2</b>						
	MHT38. Identification of people with disabilities and referral to nearest services for physical rehabilitation or physiotherapy treatment in mobile vehicle	S41. Identification of people with disabilities and referral to nearest services for physical rehabilitation	B51. Identification of people with disabilities and referral to nearest services for physical rehabilitation	CHC65. Identification of people with disabilities and referral to nearest services for physical rehabilitation	DH84. Physical mobilization and strengthening activities following acute injury or illness and guidance in use of rehabilitation equipment (e.g., crutches, wheelchair etc.)	PH86. Physical mobilization activities and provision of appropriate rehabilitation equipment (e.g., crutches, wheelchair etc.)
Sub-total number of interventions at the 7 levels of the health system outlined in this table 1 = 331						
25 interventions at community level: 9 = HPI *** 9 = EUHC**** 7 = country context specific	27 interventions by mobile health team: 15 = HPI 5 = EUHC 7 = country context specific	34 interventions at sub-health centre level: 16 = HPI 8 = EUHC 10 = country context specific	42 interventions at basic health centre level: 17 = HPI 10 = EUHC 15 = country context specific	54 interventions at comprehensive health centre level: 27 = HPI 17 = EUHC 10 = country context specific	74 interventions at district hospital level: 41 = HPI 23 = EUHC 10 = country context specific	75 interventions at provincial hospital level: 41 = HPI 25 = EUHC 9 = country context specific
Some of the sub-total of all 331 interventions at the 7 levels of the health system in the above table 1 are repeated at different levels of the health system e.g. see number S1 at the sub-health centre which is also an intervention (B1) at the basic health centre level in section A, the reproductive, maternal and newborn health section. So a total of the different types of interventions is given below.						

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TOTAL NUMBER OF DIFFERENT INTERVENTIONS = 149 (138 in table 1 + 11 population-based interventions in table 2) many of which were previously in the BPHS and the EPHS. The interventions reflect the epidemiological profile in the country and the fact that there are still too many deaths among mothers and the newborn. Of the 138 different types of interventions in table 1, 92 constitute essential universal health care interventions (EUHC as defined in DCP3), of which 81 are high priority for implementation. The 92 EUHC interventions are based on international and/or local evidence of effectiveness, cost-efficiency, and feasibility of implementation. If implemented effectively there should be an improvement in equitable access and significant outcomes; they will also contribute to adding quality to health services. The remaining 43 interventions are country context specific. Plus 15 inter-sectoral inter-ministerial policy interventions to reduce behavioural and environmental risks for early design and implementation - see table 3. The costs of the inter-sectoral inter-ministerial policy interventions are not included in the cost of the IPEHS. Only the interventions in tables 1 and 2 have been costed.

\* As of BPHS and EPHS staffing – the list of staff will be reviewed by the MoPH to determine if there are sufficient types and numbers of staff to implement the IPEHS. Once it is decided if, the ministry may need to have discussions with the Civil Service Commission as there may be cost and formal recognition of some disciplines of staff

\*\* The letter in capital letters at the beginning of an intervention refers to the level of the health system or type of health facility e.g. C = community, DH = district hospital etc.

^**BOLD**. Where and/or when there is on-going armed conflict or resources are low those interventions or a component of an intervention in **bold** are **high priority interventions (HPI)** for the Ministry of Public Health – listed as highest priority platform (HPP) in tables 1-4 in DCP3 Annex 3C, 2017, Essential Universal Health Coverage: Interventions and Platforms in Disease Control Priorities. DCP3. World Bank, Washington. <http://dcp-3.org/>

\*\*\*\*EUHC = Essential universal health care in Disease Control Priorities (DCP3), World Bank, Washington. <http://dcp-3.org/>



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## Population-based Interventions

Table 2

- P1. Mass media messages, especially radio and television, concerning healthy eating, physical activity, and mental well being\*\***
- P2. Systematic identification of individuals with TB symptoms among high risk groups**
- P3. Mass media messages concerning use of tobacco, alcohol, and other addictive products
- P4. Mass media messages, concerning awareness about hand washing and health effects of household/indoor air pollution
- P5. Conduct simulation exercises with, and awareness raising among, health personnel for disease outbreaks including outbreak investigation, contact tracing, and emergency response
- P6. Ensure plan in place to ensure ability to cope with large increase of patients due to infectious diseases e.g. stockpiles of disinfectants, equipment for patient care, and personal protective equipment
- P7. Ensure influenza vaccine available at all levels of the health system
- P8. In high malaria transmission settings, targeted vector control strategies
- P9. Develop plans and legal standards for reducing interactions between infected persons and uninfected population, and implement and evaluate infection control measures
- P10. Conduct simulation exercises for response to armed conflict emergencies
- P11. Ensure preparedness strategy to have all in place for surge capacity in hospital beds, stockpiles of disinfectants, equipment for supportive care and personal protective equipment

\*\*The two population based interventions written in **bold** are those that where and/or when there is on-going armed conflict and/or resources are low are highest priority interventions (HPI) for the Ministry of Public Health – listed as highest priority platforms (HPP) in annex 3C 1-4 in DCP3 Annex 3C, 2017, Essential Universal Health Coverage: Interventions and Platforms in Disease Control Priorities. DCP3. World Bank, Washington. <http://dcp-3.org/>  
Population-based interventions numbers 1-9 are also in Table 3 annex 3C, DCP3 2017. Numbers 10 and 11 are country specific because of the extent of emergencies and trauma in the country

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## Top Priority Inter-Sectoral, Inter-Ministerial Policy Interventions

**Table 3**

In this table 3 is a list of 15 highest priority urgent inter-sectoral policy interventions for early implementation for the prevention of ill health and to reduce health related poverty. They also address the SDGs. The interventions were decided at inter-ministerial meetings in Kabul during 2018 using DCP3 volume 9 in which table 2.3 has a total of 29 early policy interventions. At the time of the publication of this document policy intervention number 1 below is the highest priority to be addressed based on the high levels of air pollution in the country especially in cities. The remaining policy interventions are not in order of priority and ideally all need to be addressed concurrently.

The policy interventions have the strongest international evidence and the highest likely magnitude of health effect in the country. In some countries the policies have quickly and directly resulted in a measurable decline in mortality. The interventions are also likely to provide best value for money and be feasible in the low income context of Afghanistan.

### Top priority inter-sectoral, inter-ministerial policy interventions\*

1. **Air pollution: regulate transport, industrial, power, and household generation emissions**
2. *Public transportation:* build and strengthen affordable public transport systems in urban areas
3. *Substance use:* impose high taxes on tobacco, cigarettes and other addictive substances
4. *Substance use:* impose strict regulation of advertising, promotion, packaging, and availability of tobacco, cigarettes and other addictive substances, with enforcement
5. *Smoking in public places:* ban smoking in public places
6. *Food quality:* ensure that foods have adequate nutritional value
7. *Iron and folic acid:* fortify food
8. *Iodine:* Fortify food
9. *Trans fats:* ban and replace with polyunsaturated fats
10. *Salt:* impose regulations to reduce salt in manufactured food products
11. *Sugar sweetened drinks:* tax to discourage use
12. *Salt and sugar:* provide consumer education against excess use, including product labelling
13. *Vehicle safety:* enact legislation and enforcement of personal safety measures, including seat belts in vehicles and helmets for motorcycle and bicycle users
14. *Pesticides:* enact strict control and ban highly hazardous pesticides
15. *Water and sanitation:* enact standards for safe drinking water, sanitation and hygiene within households, institutions and business companies

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