Key Message: UPDATED
- People confirmed to have COVID-19: 600 (Source: Afghanistan Ministry of Public Health - MoPH)
- Deaths from COVID-19: 19
- Tests completed: 4,237

Key concerns: Border crossing areas, measured lockdowns, protective equipment for frontline workers, commodity prices, floods, messaging and rumour management, international air services

Situation Overview: UPDATED
MoPH data shows that 600 people across 25 provinces in Afghanistan are now confirmed to have COVID-19. While some 38 people have recovered, another 19 people have died from the virus. Cases are expected to increase rapidly over the weeks ahead as community transmission escalates, creating grave implications for Afghanistan’s economy and people’s well-being. Hirat is still the most affected part of the country. MoPH reports that 4,237 tests have been conducted., WHO has supported the Government To scale-up testing efforts with additional testing facilities. Altogether, the Government plans to expand to 15 testing facilities across the country within the month. WHO reports that testing kits are being sent from Kabul to regional testing hubs on a need-basis.

Response: UPDATED
The Global Humanitarian Response Plan, released in March, is in the process of being updated. At the country-level, the humanitarian community has begun the process of revising of the 2020 Humanitarian Response Plan in light of COVID-19. In the meantime, activities from April-June are outlined in a $108.1m COVID-19 Multi-Sector Humanitarian Country Plan for Afghanistan, which was released in March 2020.

The health response is supported by 350 WHO polio surveillance staff, 1,000 polio surveillance focal points, and 34,000 polio surveillance volunteers within health facilities, the private sector and communities. These personnel are supporting efforts to enhance surveillance systems and early detection. This includes training of trainers in surveillance. So far, some 6,000 people have been trained in the country’s west.

Border closures and floods have temporarily affected humanitarian supply routes and caused delays in delivery of assistance. However, clusters continue to simultaneously respond to existing humanitarian needs and those brought by COVID-19. The Food Security and Agriculture Cluster (FSAC) reports that it has increased the volume of its distributions since the onset of COVID-19, with double ration measures taken to mitigate the consequences of the virus for food insecure and acutely vulnerable households. Kazakhstan, Afghanistan's neighbour and the largest exporter of the aforementioned commodities, has now allowed monthly exports with a cap of 200,000 metric tons for wheat grains and 70,000 metric tons for wheat flour. This is a positive step from the previous month where exports were withheld. FSAC is encouraged by the news noting that there is a national wheat grain deficit of at least 1 million metric tons even in a ‘normal’ year.

The Protection Cluster will be working with REACH to do assessments in informal settlements and will focus on Gender-Based Violence and COVID-19-related stigmatisation of people coming from Iran and Pakistan. The Nutrition Cluster has developed guidance for partners and nutrition care providers for the COVID-19 response. This will be published online in the coming days.

Funding: UPDATED
Development partners are undertaking efforts to re-programme some of their existing funds and activities to address humanitarian needs which are aggravated by COVID-19. The World Bank is undertaking preparations to mobilise a three phased response to COVID-19 – focused on immediate relief, recovery, and resilience. These preparations are considering how to support and sustain the health system (through the MoPH), mitigate the fiscal shock, and provide livelihood protection and/or cash or food transfers in urban and rural areas. Around $100m has been approved for the health response and the World Bank has indicated that it will frontload some $200m from its planned resource allocation to mitigate the fiscal shock. The Bank is exploring how to reprogramme funds from the existing IDA/ARTF programme towards COVID relief. The World Bank will engage with humanitarian actors to coordinate on issues such as coverage and delivery modalities especially in geographic locations outside of the Citizen’s Charter Programme. On 11 April, the European Union also announced that it is committing EUR 50 million in additional funding to strengthen Afghanistan’s health system.
WHO Guidance: Safe Burial Practices

Faith leaders can help grieving families to ensure that their departed loved ones receive respectful, appropriate funerals and burial rites, even in the midst of the COVID-19 pandemic. Knowing how to safely plan and perform such funeral rituals and services can both protect and comfort mourners, as well as show respect for those who have died without causing any infectious risk to mourners.

1. When acceptable or appropriate according to respective faith traditions, embalming, burial, and cremation should be allowed for the remains of people who have died of COVID-19.

2. Religious leaders and local religious communities can work with families to integrate appropriate religious and cultural practices with burial and funeral steps that reduce the chances of infection. For example:
   - If washing the body or shrouding are part of faith traditions, modifications will be needed to protect mourners:
     - At a minimum, people conducting these activities should wear disposable gloves.
     - If splashing of body fluids is possible, additional personal protective equipment may be required for those participating in the ritual (such as disposable gowns, face shields or goggles and medical masks).
   - If the family of the deceased wishes to view the body after its removal from the medical facility where the family member has died, they may be allowed to do so, in accordance with local physical distancing restrictions, with no touching or kissing of the body and thorough handwashing before and after viewing.
   - As modifications to burial and funeral rites are adopted, particular attention should be paid to protect children and older adults in attendance.

Cross Border Concerns: UPDATED

Borders with Tajikistan, Uzbekistan and Turkmenistan remain open only for commercial traffic and crossings of passport holders from these countries back to Afghanistan.

As of 12 April, Johns Hopkins University reports that there are 71,686 confirmed cases of COVID-19 in Iran. The Islam Qala-Dogharoon land border crossings (Hirat) remain open on both sides for both individuals and commercial traffic. The Milak crossing (Nimroz) is formally open only to commercial traffic and documented citizens of Afghanistan. The Ministry of Refugees and Repatriation (MoRR), Ministry of Public Health (MoPH) and Ministry of Transport have developed a provisional plan to transfer returnees from the borders to their provinces. The plan only focuses on Islam Qala (Hirat) and Milak (Nimroz) borders in its first phase. As a first option, the plan prioritises efforts to slow down return through negotiations with Iran. While acknowledging such political initiatives may not gain quick traction, the plan focuses on registration of returnees at the borders; coordination with provincial authorities to have returnees transferred to their respective provinces and transport to take them there; establishing mobile health centres in the borders; providing advice on home quarantine and undertaking residence tracing and health checks for 14 days after returnees’ arrival in their home.

As of 12 April, according to Johns Hopkins University there are 5,170 people confirmed to have COVID-19 in Pakistan. Between 6 and 9 April, there was a surge in people returning to Afghanistan from Pakistan. In excess of 70,000 people are estimated to have crossed into Afghanistan at the Torkham and Chaman-Spin Boldak border crossings after the border was re-opened on 6 April. While 1,327 people were initially put in quarantine camps established at the Torkham border, people who were asymptomatic were released to go to their homes after one night.

IOM is concerned about future uncontrolled waves of returnees arriving at the border after some people some people pushed their way through reception areas without undergoing health screening last week. Among those who are screened, temperature checks are performed but it is rarely observed that questions regarding contacts and other potential symptoms are asked. Registration of undocumented returnees is improving in coverage but remains incomplete due to unwillingness of many returnees to wait to register. The Government’s capacity for documenting and tracing of passport and Tazkera-holding returnees remains unclear.

After weeks of closure, two main crossing points for bilateral trade (trucks) between Pakistan and Afghanistan were opened on 10 April. Pakistan’s Ministry of Foreign Affairs had confirmed on 8 April that Pakistan would facilitate the movement of cargo trucks and containers into Afghanistan through the Torkham and Chaman border crossing points three days per week (on Monday, Wednesday and Friday). This is expected to ease challenges associated with moving humanitarian cargo. The first convoy of stranded cargo trucks started entering Afghanistan on 10 April – including four trucks carrying key food commodities. Eleven remaining humanitarian supply trucks are expected to cross in the coming days and weeks.
Operational Issues: UPDATED

A number of provinces have instituted measures to limit the exposure of residents to COVID-19. In Kabul and Hirat these include ‘measured lockdowns’ which have resulted in closures of sections of each city and/or limits on the number of people travelling together. Additional measures to contain the spread of COVID-19 came into effect in Kabul on 8 April. Initial reports suggest that newly introduced lockdown measures have impacted on mobility for some UN and NGO staff members. All Kabul residents are now required to remain at their homes, except for cases of medical emergencies or when there is a particular need to go out to purchase essential food items. According to a decree distributed by the Ministry of Interior Affairs on 7 April, all ANSF personnel patrolling Kabul have been instructed to prevent movement of all residents of Kabul, except for personnel/staff/workers of the entities working for the health sector, emergency services, media and other essential services. Staff members of these entities are allowed to move in Kabul only with valid ID cards. Details of how lockdowns are being implemented in different regions can be found in previous days’ COVID-19 Daily Briefs. Humanitarian partners urge the Government to employ a national approach to these issues so that individual negotiations are not required on a case-by-case basis. The closure of government institutions due to movement restrictions may create new coordination challenges for humanitarian agencies.

Some NGOs and UN agencies have reduced their international footprint in country and many staff are now working remotely. Others are scaling-up to respond to the COVID-19 risk and ensure continuity of existing services in the areas where they operate. UN offices remain open and staff are working to ensure life-saving assistance continues to vulnerable people. Virtual meetings are being held as much as possible to protect staff from the virus.

Commercial flight suspensions to Afghanistan are now in force and the United Nations Humanitarian Air Service (UNHAS) is urgently making arrangements for an international airbridge. UNHAS has received an initial $3.7m in funding from the Afghanistan Humanitarian Fund and is now in the process of securing flight approvals for an international service with three flights per week. UNHAS has contracted a 50-seater aircraft (EMB145) which will serve both international as well as domestic locations, depending on demand. The aircraft has now arrived and pending permissions, it should be operational later this month. Domestic UNHAS flights in Afghanistan are still operating normally and flights to Hirat are currently departing three times per week. Twice weekly UNHAS helicopter services have been introduced to move staff to and from Jalalabad.

More Information: UPDATED

WHO
• WHO’s latest information on COVID-19: https://www.who.int/emergencies/diseases/novel-coronavirus-2019

Inter-Agency Standing Committee
• Protection from Sexual Exploitation and Abuse (PSEA): the IASC 6 core PSEA principles translated into 100 languages: https://interagencystandingcommittee.org/accountability-and-inclusion/translators-without-borders-twb-support-iasc-results-group

UN and others
• IOM dashboard on impacts of the COVID-19 pandemic on human mobility: https://migration.iom.int/

Social Media Campaign
• Avaaz signature campaign in support of the UN Secretary General’s global ceasefire appeal: https://avaaz.org/campaign/en/global_ceasefire_loc/

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