

## Key Messages: **UPDATED**

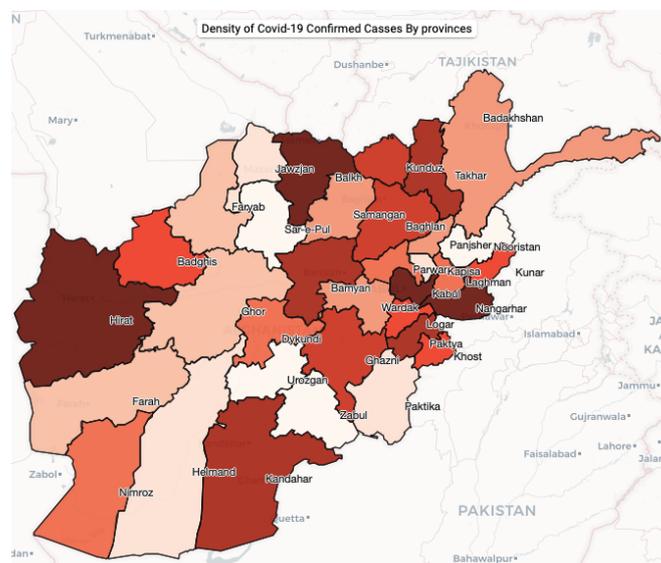
- **People confirmed to have COVID-19: 34,451** (as of 2pm, 12 July. Source: Afghanistan Ministry of Public Health - MoPH)
- **Deaths from COVID-19: 1,010**
- **Samples tested: 79,732**

**Key concerns: Border crossing areas, in-country testing capacity, protective equipment for frontline workers, commodity prices, messaging and rumour management, international air services**

## Situation Overview: **UPDATED**

MoPH data\* shows that 34,451 people across all 34 provinces in Afghanistan are now confirmed to have COVID-19. Some 21,216 people have recovered and 1,010 people have died (56 of whom are healthcare workers). 79,732 people out of a population of 37.6 million have been tested. 10 per cent of the total confirmed COVID-19 cases are among healthcare staff. Due to limited public health resources and testing capacity, as well as the absence of a national death register, confirmed cases of and deaths from COVID-19 are likely to be under reported overall in Afghanistan. Different COVID-19 models show that the peak for the COVID-19 outbreak in Afghanistan is expected between late July and early August, creating grave implications for Afghanistan's economy and people's well-being.

Hospitals and clinics continue to report challenges maintaining or expanding their facilities' capacity to treat patients with COVID-19. These challenges are related to the supply of personal protective equipment (PPE), testing kits and medical supplies, as well as the limited number of trained staff – further exacerbated by the number of frontline staff falling ill. Humanitarian partners urge the Government of Afghanistan to ensure healthcare staff have adequate personal protection and to share distribution plans for existing stocks of medical equipment and PPE with humanitarian partners. Current laboratory capacity in Afghanistan remains limited. There continues to be an urgent need for increased laboratory supplies, as well as to strengthen human capacity and operational support.



Source: MoPH

WHO notes that when health systems are overwhelmed, as is being seen in Afghanistan, both direct mortality from the outbreak and indirect mortality from vaccine-preventable and treatable conditions increase dramatically. WHO stresses the need to balance the demands of responding directly to COVID-19, with simultaneously engaging in strategic planning and coordinated action to maintain essential health service delivery, mitigating against the risk of system collapse.

## Response Activities: **UPDATED**

Humanitarians have rapidly scaled-up services to support the Government's response to the pandemic, reaching millions of people with life-saving assistance to meet both new and existing needs. For a detailed update of all cluster response activities in Afghanistan please see the latest [Operational Situation Report](#).

\* Disaggregated MoPH data currently unavailable

Due to the unprecedented scale of the COVID-19 pandemic, many countries continue to be affected by global supply shortages. Border closures and COVID-19-related movement restrictions are also affecting supply lines. Global and national-level efforts are currently underway to address pipeline issues in Afghanistan. According to the latest [ICCT Quarterly Pipeline Tracking Report](#) (covering the period between July and September 2020), some health supplies are at risk because of global shortages and high consumption rates, while supplies of water kits and chlorine drums are at risk of imminent pipeline breaks. WASH, FSAC, and Nutrition are also facing funding gaps with implications for the procurement of critical supplies. This is particularly true for certain food items that have a procurement lead time of up to 6 months. Humanitarians emphasise the critical importance of maintaining a reliable flow of traffic for humanitarian cargo and advocate for expedited movement of humanitarian food and relief items through border crossings.

The Afghanistan Joint Market Monitoring Initiative (JMMI) has released analysis from its second round of data collection. Data from the second round of the JMMI was collected between 8 and 21 June, in 29 provinces. According to the report, market access for all population groups has been impacted by the pandemic. Moreover, supply chain has been interrupted in a number of places across the country, with 19 per cent of interviewed vendors reporting difficulties in obtaining enough commodities to meet demand in the last 30 days. The cost of a [Minimum Expenditure Basket](#) has decreased by four per cent, whereas the cost of food basket has decreased by eight per cent, compared to the first JMMI round (23 April – 8 May). For additional information, please see the latest [JMMI Situation Overview](#).

Planning for the 2020-2021 winter response is well underway. In preparation, a lessons learned exercise has been conducted on last year's Joint Winterisation Strategy. The ES-NFI Cluster and the REACH Initiative have published a preliminary finding note from the [2019/2020 Winterisation Evaluation](#). According to the note, beneficiary households were better able to meet their shelter and NFI winterisation gaps than non-beneficiary households, indicating that the assistance provided was effective in helping households cope with the impact of winter.

### **Funding:** **UPDATED**

On 9 July, the [World Bank](#) approved a US\$200 million grant to help Afghanistan mitigate COVID-19 impacts and provide relief to vulnerable people and businesses. The Afghanistan COVID-19 Response Development Policy Grant comprises \$100 million from the International Development Association (IDA), the World Bank Group's fund for the poorest countries, and \$100 million from the Afghanistan Reconstruction Trust Fund (ARTF), managed by the World Bank on behalf of 34 donors. The Afghanistan COVID-19 Response Development Policy Grant will support the Government of Afghanistan to strengthen policies that promote faster recovery and keep basic infrastructure such as water, electricity, and telecommunications afloat and running. Moreover, the grant will support changes in regulations to increase access to finance for small and medium-sized enterprises, protect healthcare workers, and raise awareness on gender-based violence in schools. It will also support plans to encourage students to return to school when educational institutions reopen after the COVID-19 crisis.

The [Global Humanitarian Overview](#) (GHO) 2020 Monthly Funding Update was published on 8 July. At the beginning of 2020, global humanitarian requirements were already close to US\$30 billion, with 168 million people expected to be in need of critical humanitarian assistance. The inclusion of plans to respond to COVID-19 pushed global requirements to \$37 billion. As of the end of June, funding received for plans included in the GHO was \$7.62 billion, or 21 per cent of total requirements. An additional \$4.19 billion has been reported for activities outside the GHO or is awaiting allocation, bringing the total reported humanitarian funding to \$12.87 billion, which is \$2.67 billion higher than the \$10.20 billion reported one month ago. The Global Humanitarian Response Plan for COVID-19 will be reissued later this month to reflect changing needs. In Afghanistan, the revised [Humanitarian Response Plan](#) for 2020 requires \$1.1b to reach 11.1m of the most acutely vulnerable people. According to OCHA's [Financial Tracking Service](#), the Afghanistan HRP is currently 21 per cent funded with \$237.5m received since the start of the year.

### **Cross Border:** **UPDATED**

The Milak crossing (Nimroz) and Islam Qala-Dogharoon (Hirat) crossings are officially open to commercial traffic and movement of documented Afghanistan nationals. According to [UNHCR's latest border monitoring report](#) (covering the period between 28 June and 4 July), 32 per cent of returnees interviewed at the Islam Qala and Milak border crossing points said they faced problems during the COVID-19 outbreak in Iran, such as lost work/wages, discrimination/stigmatisation by local communities, lack of access to markets, pressure by Iranian authorities to return to Afghanistan, movement restrictions related to the lockdown, and lack of access to medical services. 88 per cent of respondents stated that they had received information about COVID-19 in Iran, mainly through TV, radio and local communities. 16 per cent of returnees interviewed at the Milak border crossing point and 24 per cent at Islam Qala reported that they had not received information about COVID-19 upon arrival in Afghanistan.

On 11 July, 4,707 citizens of Afghanistan returned from Pakistan through the Torkham border. The process was reportedly orderly and health screening procedures were followed. According to [UNHCR](#), 52 per cent of returnees interviewed at the Torkham border crossing point said they faced problems in Pakistan during the COVID-19 outbreak,

mainly lost work/wages, movement restrictions due to the lockdown, lack of access to markets, and lack of access to medical services. 95 per cent of those interviewed stated that they had received information about COVID-19 in Pakistan, mainly through TV, radio, religious leaders and local communities. 89 per cent of returnees interviewed at the Torkham border crossing stated that they had not received information about COVID-19 upon arrival in Afghanistan. The monitoring findings shows that the information gap at Torkham remains very high and further efforts are required to provide new arrivals with the information they need to stay safe. Spin Boldak and Ghulam Khan border crossings remain closed for pedestrian movement.

Pakistan continues to facilitate the movement of cargo trucks and containers into Afghanistan. Since 22 June, two border crossing points (Ghulam Khan and Torkham) have been open six days a week (every day except Saturday) to facilitate trade between the two countries. The Spin Boldak crossing point has remained closed for commercial traffic since mid-June.

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

Humanitarians emphasise the critical importance of maintaining a reliable flow of traffic for humanitarian cargo from all neighbouring countries and are advocating for special consideration to expedite humanitarian food and relief items through border crossings.

### **Operational Issues: UPDATED**

**A nationwide lockdown** remains in place. The Government has also extended the closure of schools until the end of August. According to [reports](#), while lockdown measures are in place, enforcement has been lenient. In most cities, shops and restaurants are open. Measures to contain the spread of the virus continue to differ across provinces where local authorities are responsible for implementation. Humanitarian partners remain active in responding to crises throughout the country, including flooding and conflict-related displacement, and continue to urge the Government to employ a national approach to these movement issues so that individual negotiations are not required on a case-by-case basis and assistance is not delayed. For additional information on access constraints, please see the latest [C-19 Access Impediment Report](#).

While the Afghanistan Civil Aviation Authority announced that commercial domestic flights are expected to resume, regular flights have not yet restarted. Meanwhile, the United Nations Humanitarian Air Service (UNHAS) has reduced domestic flight days from five to four days a week. UNHAS no longer conducts regular domestic flights on Mondays; however, all locations are still served during the week. UNHAS will adjust the schedule based on user demand. UNHAS will continue to support any required evacuation and relocation flights during all days of the week.

International commercial air travel has resumed with Turkish and Emirates Airlines providing round-trip international flight services to/from Kabul. Ariana Airlines and Kam Air have also resumed their international flights. On 8 July, [Emirates Airlines announced](#) that effective from 10 July, all passengers travelling with Emirates from Afghanistan have to carry a COVID-19 negative certificate issued by a local government-approved laboratory to be accepted on the flight. Where specified, a certificate from a UAE government designated laboratory in the country of origin is also acceptable. Certificates must be issued no more than 96 hours before departure. Passengers are encouraged to check with airlines on flight restrictions for international flights, as well as travel and immigration entry requirements of their destination country.

The UNHAS airbridge connecting Kabul and Doha continues to operate on Sundays, Tuesdays and Thursdays. Flights into Doha accommodate transiting passengers only. This service is planned to continue until the end of September 2020, or until regular commercial international flights consistently resume. The next flight is planned for Tuesday, 14 July.

**More Information – Links: UPDATED****WHO**

- [WHO's latest information on COVID-19](#)
- [WHO COVID-19 Global Dashboard](#)
- [COVID-19 Partners Platform](#)
- [Timeline of WHO's response to COVID-19](#)
- [Transmission of SARS-CoV-2](#)

**Government of Afghanistan:**

- [Ministry of Public Health: COVID-19 Dashboard](#)

**Inter-Agency Standing Committee**

- [IASC-endorsed COVID-19 guidance – new materials available](#)
- [Addressing Mental Health and Psychosocial Aspects of COVID-19 Outbreak \(available in \[English\]\(#\), \[Dari\]\(#\), \[Pashto\]\(#\)\)](#)

**UN and others**

- [UN: Global Humanitarian Response Plan: COVID-19 \(April – December 2020\) – GHRP May Update](#)
- [UN: Comprehensive Response to COVID-19](#)
- [Relief Web: COVID-19 Response Page](#)
- [OCHA: Asia Pacific COVID-19 - Humanitarian Data Portal](#)
- [OCHA: Afghanistan Humanitarian Response Plan 2018-2021 \(June 2020 Revision\)](#)
- [OCHA: Afghanistan Humanitarian Response Plan 2018-2021 \(June 2020 update\) - Infographic](#)
- [UNHCR: Supporting Community Leadership in the Response to the COVID-19 Pandemic](#)

- [UNDRR: COVID-19 trigger to re-examine resilience](#)
- [UNDRR: COVID-19 demonstrates urgent need for cities to prepare for pandemics](#)
- [UNHCR: Supporting Continued Access to Education](#)
- [UNAIDS: Guide for the management of people on the move living with HIV in reception centers during the COVID-19 emergency, June 2020](#)
- [WV: COVID-19 & Poverty and Hunger](#)
- [SC: It's time for a new 'social contract' for the 21st century](#)
- [WB: Safeguarding Animal, Human and Ecosystem Health](#)
- [UNFPA: Putting the brakes on COVID-19: Safeguarding the health and rights of women and girls](#)
- [UNFPA: Peace in the home](#)
- [Oxfam: How COVID-19 is fuelling hunger in a hungry world](#)
- [UN HRC: COVID-19 pandemic exposes repression of free expression and right to information worldwide](#)
- [UN HRC: UN expert calls on governments to renew their commitment for action to expand civic space](#)
- [IRC: Continuing care during COVID-19](#)
- [Health Cluster, WHO: Country Health Sector Dashboard](#)
- [UNCT Iran: UN Iran Socio-Economic Recovery Programme Against the Impact of COVID-19](#)
- [UNDP: Communities and COVID-19](#)
- [UNHCR: Afghanistan COVID-19 Border Monitoring Update](#)
- [OCHA: Afghanistan C-19 Access Impediment Report](#)
- [WB: \\$200 Million for Afghanistan to Protect People, Support Businesses Amid COVID-19](#)
- [UNHCR: Afghanistan Operational Update - May 2020](#)

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