AFGHANISTAN
Strategic Situation Report: COVID-19
No. 76 (13 September 2020)

OCHA — **World Health Organization**

Key Messages: UPDATED

- **People confirmed to have COVID-19: 38,716** (as of 2pm, 13 September. Source: Afghanistan Ministry of Public Health - MoPH)
- **Deaths from COVID-19: 1,420**
- **Samples tested: 106,802**

Key concerns: Border crossing areas, in-country testing capacity, protective equipment for frontline workers, maintaining essential health services, public complacency, sustained prevention and mitigation measures, messaging and rumour management

Situation Overview: UPDATED

MoPH data shows that 38,716 people across all 34 provinces in Afghanistan are now confirmed to have COVID-19. Some 31,638 people have recovered, and 1,420 people have died - 76 of whom are healthcare workers. Almost 10 per cent of the total confirmed COVID-19 cases are among healthcare staff. 106,802 people out of a population of 37.6 million have been tested. The majority of the deaths were people between the ages of 50 and 79. Men in this age group represent half of all COVID-19-related deaths. Men account for more than 70 per cent of the total COVID-19 confirmed cases, although this may be the result of over-representation of men in testing. 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. Kabul remains the most affected part of the country in terms of confirmed cases, followed by Hirat, Balkh, Kandahar and Nangarhar provinces.

Complacency and failure to follow public health advice is creating grave risks in the community with people generally not observing physical distancing protocols. Recent modelling on COVID-19 projections, developed by the Centre for Humanitarian Data in collaboration with Johns Hopkins Applied Physics Laboratory and released on 9 September, suggests cases and deaths will continue to rise over the next four weeks. Modelling further suggests a significant increase in severe cases (potentially up to 3x the number) should current preventative measures be lifted, creating grave implications for Afghanistan's economy and people's well-being.

Density of Covid-19 Confirmed Cases By provinces in Afghanistan in 2020
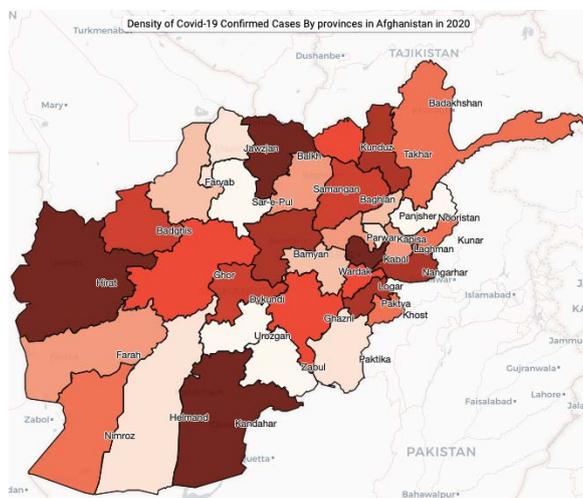
Source: MoPH

	Age 0-19		Age 20-29		Age 30-39		Age 40-49		Age 50-59		Age 60-69		Age 70-79		Age 80+		Unspecified	Total
	Girls	Boys	Women	Men	Women	Men	Women	Men	Women	Men	Women	Men	Women	Men	Women	Men		
# People confirmed with COVID-19	996	1,073	3,121	6,652	2,091	7,044	1,794	4,883	1,637	3,364	989	2,265	421	881	124	346	1,035	38,716
# Deaths from COVID-19	5	4	12	29	19	71	45	144	94	228	96	301	46	145	16	83	82	1,420

Hospitals and clinics continue to report challenges maintaining or expanding their facilities' capacity to treat patients with COVID-19 as well as maintaining essential health services. In Afghanistan, there has been a general decrease of 30 to 40 per cent in the utilisation of essential health services. Meanwhile, mobile health team consultations between April and

July increased by 83 per cent compared to the same period last year. WHO emphasises that infection prevention and control need to be improved in health facilities to encourage people to return to health services safely. WHO reiterates the importance of ensuring healthcare workers have the proper personal protection to carry out services. In addition, effective and accurate risk communication activities are needed to reassure people that it is safe to seek treatment at hospitals and health centres, and that health centres are carrying out proper infection prevention and control measures.

Current laboratory capacity in Afghanistan remains limited. Humanitarian partners urge the Government of Afghanistan to ensure laboratories are appropriately equipped and that procured supplies go to under-resourced health centres in a transparent manner, so that life-saving support can be delivered to those most in need.

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.

In a recently published statement on 11 September by the Special Representative and Head of the United Nations Assistance Mission in Afghanistan (UNAMA), Deborah Lyons, Ms. Lyons welcomes the start of face-to-face peace talks between Afghan parties in Doha, Qatar, and called for a humanitarian pause in conflict, noting that "in the context of the health and economic challenges posed by COVID-19, poverty and natural disasters, a humanitarian pause to the fighting would enable critical humanitarian support to reach the many millions requiring assistance across all areas of the country, as well as provide an opening for Afghans to start to rebuild their lives and livelihoods and give their children hope."

Response Activities: UPDATED
Humanitarians have rapidly scaled-up services to support the response to the pandemic, reaching millions of people with life-saving assistance for new and existing needs. For a detailed update of all cluster response activities in Afghanistan please see the latest Operational Situation Report.

The latest cumulative COVID-19 response figures include:
- Health Cluster partners have reached almost 4.7m people with risk communication and community engagement messages
- More than 2.3 million people have been reached with WASH assistance
- More than 564,000 people have been reached by ES-NFI partners with key messages on prevention of COVID-19
- Protection partners have reached more than 269,000 people with psychosocial support services
- Close to 327,000 people have been reached with COVID-19 specific food assistance by FSAC partners between the beginning of May and 31 July.
- More than 100,000 children have been reached with home-based learning materials
- Nutrition partners have distributed more than 87,000 IEC materials across the country since the start of the crisis.

Cross Border: UPDATED
The Milak (Nimroz) and Islam Qala-Dogharoon (Hirat) crossings with Iran are officially open to commercial traffic and movement of documented Afghanistan nationals.

According to UNHCR's latest border monitoring report (covering the period between 30 August and 5 September), 32 per cent of returnees interviewed at the Islam Qala and Milak border crossing points and 37 per cent of returnees interviewed at the Torkham and Spin Boldak border crossing points said they faced problems during the COVID-19 outbreak in neighbouring countries, such as lost work/wages, discrimination/stigmatisation by local communities, lack of access to markets, pressure from authorities to return to Afghanistan, movement restrictions related to the lockdown, and lack of access to medical services. 93 per cent of respondents returning from Iran and 83 per cent of respondents returning from Pakistan stated that they had received information about COVID-19 in the respective countries, mainly through TV, radio, religious leaders and local communities. Almost 9 per cent of returnees interviewed at the Milak border crossing point, 13 per cent at Islam Qala, more than 44 per cent at Spin Boldak, and more than 74 per cent interviewed at Torkham border crossing reported that they had not received information about COVID-19 upon arrival in Afghanistan. Ghulam Khan border crossing remains closed for pedestrian movement.

Pakistan continues to facilitate the movement of cargo trucks and containers into Afghanistan. Since 21 August, five border crossing points (Ghulam Khan, Torkham, Spin Boldak, Angor Adda and Kharlachi) have been open for trucks, six days a week (every day except Saturday).

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 movement of humanitarian food and relief items through border crossings.

Operational Issues:

Commercial domestic flights are operating. The United Nations Humanitarian Air Service (UNHAS) has reduced domestic flight days from five to four days a week. UNHAS will continue to support any required evacuation and relocation flights during all days of the week.

International commercial air travel has resumed with Air Arabia, Ariana Airlines, Kam Air, and Emirates Airlines providing round-trip international flight services to/from Kabul. Emirates Airlines announced that effective from 1 August, all passengers travelling to Dubai, including those in transit, must have a negative COVID-19 test certificate issued by an Emirates-approved laboratory to be accepted on the flight.

The UNHAS airbridge connecting Kabul and Doha continues to operate on Sundays, Tuesdays and Thursdays. Flights into Doha accommodate transiting passengers only. UNHAS remains fully committed to supporting the Doha Airbridge until 30 September, as per the initial plan. The next UNHAS flight to Doha is planned for Tuesday, 15 September.

More Information – Links: UPDATED

WHO
- WHO's latest information on COVID-19
- WHO COVID-19 Global Dashboard
- COVID-19 Partners Platform

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 July 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
- UNSDG: 5 reasons why sharing responsibility for refugees is smarter than ever in the time of COVID-19

- UN HRC: A rights-based approach to social protection in the post-COVID-19 economic recover
- IOM: Enhanced Solidarity Critical as COVID-19 Spreads in World's Most Vulnerable Communities
- IFRC: Migrants and refugees facing extraordinary risks during the COVID-19 pandemic
- IPI: The Important Role of Women Peacebuilders in COVID-19 Pandemic Response
- IDS: Key considerations for a public health response
- MC: COVID-19 effects on conflict and how to respond
- SC: The Hidden Impact of Covid-19 on Children
- IEP: Ecological Threat Register 2020
- ECHO: WHO and Commission launch the Facilitation Council to strengthen global collaboration
- FAO: FAO to continue to support G20 to address the pandemic and strengthen agri-food systems
- WV: Building sustainable, resilient and fair food systems to improve food and nutrition security for all by 2030
- IPS: A New Social Contract Needed for Children on the Move
- OCHA: Community Q&A: ACAPS
- UNHCR: Afghanistan Border Monitoring update COVID-19 Response (30 August – 5 September 2020)
- UNAMA: Statement by UN envoy Deborah Lyons on start of Afghanistan peace talks

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