The mission of the United Nations Office for the Coordination of Humanitarian Affairs is to mobilize and coordinate effective and principled humanitarian action in partnership with national and international actors.
Attacks on Health Care: Despite the heightened pressure on the healthcare system and increased need for its services due to the COVID-19 pandemic, health facilities and workers continue to suffer harm from attacks, as well as acts of intimidation by parties to the conflict. Since the start of the pandemic, there have been direct attacks on hospitals, abductions of healthcare workers, acts of intimidation, harassment and interference, looting of medical supplies, and indirect harm from the ongoing armed conflict. Between 1 January and 31 October, WHO reports there were 67 incidents in 17 provinces across 40 districts. Direct, targeted attacks on health facilities and health workers now account for 78 per cent of all incidents. During this period, Afghanistan has witnessed the closure of 38 health facilities across four provinces, with threats of additional closures. WHO fears the gap in COVID-19 surveillance due to the closure of health facilities, as well as the negative impact on maintaining essential health service delivery during the pandemic, will have serious implications for the people of Afghanistan.

Health Services: 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, especially in areas of active conflict. 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.

Almost 9 per cent of the total confirmed COVID-19 cases are among healthcare staff. Health facilities across the country continue to report shortfalls in PPE, medical supplies and equipment, further challenging their capacity to treat COVID-19 patients. In support of the Government, humanitarian partners have provided hundreds of thousands of pieces of PPE and several thousand items of life-saving medical equipment to MoPH. Additionally, frontline NGO workers have recently received new deliveries of PPE – including both surgical and N95 masks, face shields and shoe covers – from WHO. In total, since the start of the pandemic, almost 1.3 million PPE items have been delivered by humanitarian partners to both MoPH and frontline NGO workers in Afghanistan. With a second wave of the gathering pace globally, there is an urgent need to ensure a rapid distribution of medical and protective equipment to all corners of the country.

While 14 laboratories are now operating in Afghanistan, the capacity of these facilities remains limited and stocks of supplies have periodically run out. National capacity for COVID-19 testing has topped 5,500 a day, but according to WHO, lack of demand means that fewer than 400 tests are actually being conducted daily. Humanitarian partners urge the Government to ensure laboratories are appropriately equipped, staff receive timely renumeration 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. There are also reports that staff at the regional reference laboratory – which is currently a dedicated COVID-19 facility – in Hirat province are striking in response to the non-payment of salaries for the last five months.

Socio-economic impacts: The socio-economic impacts of COVID-19 are translating into a dramatic impact on food insecurity with levels now similar to those seen during the 2018 drought. An estimated 16.9 million people are in crisis or emergency food insecurity through until March 2021, 5.5 million of whom are in ‘emergency’ level food insecurity (IPC 4). According to WFP’s market monitoring, the average wheat flour price (low price and high price) increased by 11 per cent between 14 March and 18 November, while the cost of pulses, sugar, cooking oil and rice (low quality) increased by 20 per cent, 18 per cent, 32 per cent, and 20 per cent, respectively, over the same period. This price increase is accompanied by a declining purchasing power of casual labourers and pastoralists – which has deteriorated by over 10 per cent and 14 per cent respectively (compared to 14 March). These factors, combined with COVID-19 related interruptions to informal employment and decrease in remittances, are driving people into crippling debt. Data from the Whole of Afghanistan Assessment shows that household debt is rapidly escalating in terms of both the number of people in debt and the scale of that debt. Average household debt is now 46,299 AFS/US$602, up from 9,813 AFS/US$128 in 2019. Of displaced households in debt, the primary reason for taking on this debt was to pay for food (53 per cent).

Given this situation, there is an urgent need for additional funding for winterisation support to help struggling households survive the harsh weather ahead. 4.8 million people are in urgent need of support to survive the winter season. The ICCT’s $138m Winterisation Plan remains woefully underfunded with only $64m received. Support from the Government towards this plan is urgently needed.

In a recently published report on COVID-19 and the Child Protection Crisis in Afghanistan, World Vision reports that the children of Afghanistan, especially those already suffering from poverty and inequity, are among the most vulnerable to the harsh socioeconomic impact of COVID-19. Child mortality, malnutrition, forced marriages, sexual abuse, child labour and other forms of violence and exploitation and are all common challenges now facing children. With the addition of COVID-19 and its related impacts, children are now more anxious and worried than ever before and at greater risk of facing physical, sexual and emotional violence, especially as the economic impacts of the crisis set in.

The World Bank reports that Afghanistan's economy is set to contract by between 5.5 percent and 7.4 percent in 2020 because of COVID-19, exacerbating poverty, and leading to a sharp decline in government revenues. Economic activity plummeted in the first half of 2020 as COVID-19 negatively impacted the industry and service sectors. Despite continued
robust growth in agriculture following the recovery from the 2018 drought, lower outputs in industry and services, as well as declining revenues due to trade disruptions and weaker tax compliance, have put government finances under pressure. Higher food and consumer prices combined with lower incomes are expected to harm household welfare and increase humanitarian pressures. The official Government poverty rate is expected to increase dramatically as a result. Small, informal businesses are most vulnerable and have limited access to resources to mitigate against the impacts of the COVID-19 crisis. As a result, impacts on employment, both formal and informal, are expected to be severe in Afghanistan, according to another recently published report by the World Bank. According to the report, 38 per cent of the surveyed Afghan businesses marked the closure of international borders as the most significant driver of disruption to business operations and their value chains, limiting access to raw materials, immediate inputs, and finished goods needed for trade or production. While vulnerability is felt by Afghan businesses of all sizes, it is considerably higher among businesses with at least one female shareholder, exporting businesses, and businesses with a larger share of female workers.

**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. Since the beginning of the pandemic, humanitarians have implemented a multi-sectoral response to COVID-19 needs and have reached over 3 million people across the country with COVID-19-specific assistance. 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 4.7m people with risk communication and community engagement messages
- More than 2.9 million people have been reached with WASH assistance
- More than 596,000 people have been reached by ES-NFI partners with key messages on prevention of COVID-19
- Protection partners have reached more than 301,000 people with psychosocial support services
- More than 1.1m people have been reached with COVID-19 specific food assistance by WFP between 1 March and 11 November
- More than 119,000 children have been reached with home-based learning materials
- Nutrition partners have distributed more than 125,000 IEC materials across the country since the start of the crisis

**Cross Border: UPDATED**

Border Crossings: The Milak (Nimroz) and Islam Qala-Dogharoon (Hirat) crossings with Iran are officially open to commercial traffic and movement of documented Afghanistan nationals. 2020 is now on track to become the largest return year on record for undocumented Afghan migrants. According to the Border Monitoring Team of the Directorate of Refugees and Repatriation (DoRR), a total of 22,747 Afghan nationals returned from Iran through the Milak and Islam Qala border crossing sites between 8 and 14 November, a 4 per cent decrease from the previous week (23,640). More than 14,000 people returned voluntarily and more than 8,700 were deported. IOM provided post-arrival humanitarian assistance to 1,313 people or 6 per cent of all undocumented Afghanistan nationals returning from Iran at its transit centres in Hirat and Nimroz during the past week. Afghanistan’s border with Pakistan at Spin Boldak officially opened on 21 August and the border at Torkham on 28 September. Between 8 and 14 November, 147 undocumented Afghans returned from Pakistan through the Torkham (23 returnees and 25 deportees) and Spin Boldak (52 returnees and 47 deportees) borders. According to UNHCR, the Government of Pakistan has resumed issuance of visas, including visas upon arrival, for people with medical issues, which has resulted in increased population movements. Ghulam Khan border crossing remains closed for pedestrian movement.

**Operational Issues: UPDATED**

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

Commercial domestic flights are operating. The United Nations Humanitarian Air Service (UNHAS) is flying domestically four days per 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. Effective from 1 August, all Emirates Airlines 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. Given the potential for airlines to reduce their flights, passengers are encouraged to check with their airline for the latest travel and flight advisories.
The UNHAS airbridge connecting Kabul and Doha continues to operate on Sundays, Tuesdays and Thursdays. Flights into Doha accommodate transiting passengers only. UNHAS recently announced that it is committed to continuing the international airbridge until 31 December 2020. To enable and sustain this operation, urgent funding of US$900,000 is required until the end of the year. UNHAS flights from Doha to Kabul are currently departing from Doha at 0830 and arriving in Kabul at 1300; flights from Kabul to Doha are departing from Kabul at 1430 and arriving in Doha at 1540. The next UNHAS flight to Doha is planned for Sunday, 22 November.

More Information – Links: UPDATED

WHO
- WHO’s latest information on COVID-19
- WHO COVID-19 Global Dashboard
- Roadmap on human resource strategies to improve newborn care in health facilities in low- and middle-income countries
- Weekly Epidemiological Update (17 November 2020)
- Consequences of ‘chronic under-investment in public health’
- World Health Assembly charts course for COVID-19 response and global health priorities
- Afghanistan: Attacks on Health Care (January 01, 2020 - October 31, 2020)

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)
- Key Messages on Climate Change, Humanitarian Action and COVID-19 Summary

UN and others
- UN: Comprehensive Response to COVID-19 (September)
- Relief Web: COVID-19 Response Page
- OCHA: Afghanistan Humanitarian Response Plan 2018-2021 (June 2020 Revision)
- OCHA: Afghanistan Humanitarian Response Plan - 2020 Quarter Three Dashboard (Jan - Sep 2020)
- UNSDG: Gearing US$5 billion for countries, UN leaders pledge to boost efforts to save lives and livelihoods and recover better from COVID-19
- UN: Fund to address crisis in global sanitation and hygiene
- UN SG: Secretary-General Calls for Stronger Ties with Shanghai Cooperation Organization in Tackling Climate Crises, Geopolitical Tensions amid COVID-19 Recovery
- CIVICUS: Solidarity in the time of COVID-19
- HRW: Bullying, Violence Common in Schools Worldwide
- ICRC: COVID-19 vaccines and IHL
- ICRC: Healthcare stigma in the COVID-19 era
- MSP: Governments must demand pharma make all COVID-19 vaccine licensing deals public
- FAO: Global food prices continue rising in October
- FAO: Biannual Report on Global Food Markets
- FAO: Global Food Security Cluster turns 10
- FAO: Communicating food safety in the era of COVID-19
- FAO: FAO launches Food Coalition to lift food access, sustainable agri-food systems
- IOM, WFP: Implications of COVID-19 for hunger, migration and displacement
- IOM: DTM (COVID-19) Global Mobility Restriction Overview
- UNESCO: Global Education Monitoring Report 2020
- UNESCO: NGO solidarity during COVID-19
- UNHCR: Global COVID-19 Emergency Response
- CDAC: Lessons From The Humanitarian Sector Around Communication, Community Engagement And Participation
- Bond +4 more: The future of civil society organisations
- MPI: Managing the Pandemic and Its Aftermath
- UNFPA: Even amid pandemic, governments and advocates rally behind sexual and reproductive health and rights
- UNHCR: Water, sanitation and hygiene in schools
- Safe the Children: Children in Conflict October 2020
- World Vision: Experiences and recommendations of girls and boys on the impact of COVID-19
- CMC, ICBL: Landmine Monitor 2020
- World Vision: Act now for children
- USAID: The United States Provides $18 Million to Support Medical Oxygen Systems in Countries Affected by COVID-19
- Insecurity Insight: Attacks on Health Care Monthly News Brief
- NRC: Engaging Communities during a Pandemic
- Govt. UK: FCDO disability update
- World Bank: Impacts of COVID-19 on the Private Sector in Fragile and Conflict-Affected Situations
- Global Fund: COVID-19 Situation Report #32
- World Bank: COVID-19 Crisis Response Approach Paper
- DRC, MMC: Mixed Migration Review 2020
- USAID: Afghanistan - Complex Emergency Fact Sheet
- IOM: Ahmed's Story – The only option which was coming to mind was begging
- CARE: Food crisis deepens in Afghanistan with 42% of the population now facing acute hunger
- UNHCR: Voluntary Repatriation of Afghan Refugees - South Asia - Quarterly Update (July - September 2020)
- IMMAP: Afghanistan Multi-Sectoral Dashboard for Humanitarian Response Services (October 2020)
- ACAPS: CrisisInSight Weekly Picks, 12 November 2020
- IPS: Despite Conflict and COVID-19, Children Still Dream to Continue Their Education in Afghanistan
- UNICEF: Japan Provides 4 million USD for “The Project for Improving WASH Environment in Schools”
- ICRC: Hospitals on both sides of conflict show a health system in need (Afghanistan)
- REACH: Tackling information gaps in the informal settlements of Afghanistan
- IPC: Afghanistan IPC Acute Food Insecurity Analysis
- IRC, UN Women: Unlocking the lockdown gender-differentiated consequences of COVID-19 in Afghanistan
- World Bank: Supporting Inclusive Growth in Afghanistan
- Center on Intl Cooperation: Copi ng with COVID -19 and Differentiated Consequences of COVID-19 in Afghanistan
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- UN Women: Unlocking the lockdown gender-differentiated consequences of COVID-19 in Afghanistan
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- Center on Intl Cooperation: Copi ng with COVID -19 and Differentiated Consequences of COVID-19 in Afghanistan
- World Bank: Supporting Inclusive Growth in Afghanistan
- WV: COVID-19 and the Child Protection Crisis in Afghanistan
- OCHA: CERF and CBPPs COVID-19 Response
- OCHA: Afghanistan COVID-19 Multi-Sectoral Response
- OCHA: Flash Update #9 (South)

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