Situation Overview: UPDATED

MOPH Figures: MOPH data shows that 41,032 people across all 34 provinces in Afghanistan are now confirmed to have COVID-19. Some 34,217 people have recovered, and 1,523 people have died - 76 of whom are healthcare workers. 120,914 people out of a population of 37.6 million have been tested. The majority of recorded deaths were men between the ages of 50 and 79. Men account for more than 69 per cent of the total COVID-19 confirmed cases in the MOPH data, 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. WHO warns that widespread complacency and failure to follow public health advice is creating grave risks in the community with people generally not observing physical distancing or mask wearing protocols.

Second Wave: Following two months of consistently lower confirmed COVID-19 cases, MoPH tracking data is beginning to reflect previously anecdotal reports of a recent uptick in cases, with 166 cases recorded on the 21 October 2020, the highest daily figure recorded since the mid-July peak. As the winter months approach, the spike in new cases suggests a second wave of the pandemic is either looming or has already begun. While the numbers are not yet at the same level as the May/June peak, when taken together with reports of an increased number of hospital admittances of people with COVID-19-like symptoms, the need for vigilance should be reinforced. Furthermore, WHO notes that the official numbers report by MOPH are not likely to be capturing the full scale of the situation since testing remains limited to only the most severe cases. Public health experts strongly urge the public to adhere to physical distancing, mask wearing, good hygiene, hand washing and other proven strategies that mitigate the risk of COVID-19 transmission.

Protection of Civilians: The number of civilians killed and injured in the conflict in Afghanistan has failed to slow since the start of intra-Afghan peace talks, although the overall civilian casualty figure for the first 9 months of 2020 dropped by around 30 per cent compared to the same period in 2019, according to a new report released on 29 October by the UN Assistance Mission in Afghanistan (UNAMA). The Mission’s latest quarterly report documented 5,939 civilian casualties (2,117 killed and 3,822 injured) from 1 January to 30 September. High levels of violence continue with a devastating impact on Afghanistan, remaining among the deadliest places in the world to be a civilian. UNAMA supports the renewed call by UN Secretary-General Antonio Guterres for a global humanitarian ceasefire to be put in place before the end of the year. Such a pause to the conflict in Afghanistan would help the fight against COVID-19 and reinforce critical efforts to prepare humanitarian assistance before winter sets in for millions of the most vulnerable.

Ongoing Needs: At the same time as responding to COVID-19, humanitarian partners are also mobilising to respond to needs in southern Afghanistan where at least 11,00 people are so far confirmed as being displaced as a result of conflict and there has been a surge in trauma cases. The violence has stretched hospitals in Lashkargah to capacity. Furthermore, attacks on health facilities during fighting are particularly worrying with WHO reporting that 12 health facilities have been targeted. The closure of health clinics in the area due to insecurity is directly affecting more than 55,000 people. COVID-19 awareness raising and community engagement work is being incorporated into this response due to the increased risks facing people who are displaced and living in crowded conditions without proper access to hygiene facilities. For more information, please see the latest OCHA Flash Update.

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 notes that when health systems are under stress, as is being seen in Afghanistan, both direct mortality from the outbreak and indirect mortality from vaccine-preventable and treatable conditions increase dramatically. WHO also 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.

More than 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 tens of thousands of pieces of PPE and several thousand items of life-saving medical equipment to the Ministry of Public Health. 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 13 laboratories are now operating in Afghanistan, the capacity of these facilities remains limited. Humanitarian partners urge the Government 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.

Socio-economic impacts: Afghanistan is facing an ongoing food security crisis that is being compounded by the economic shock of COVID-19 and mounting personal debt. According to a recent NRC report on challenges faced by displacement-affected communities in Afghanistan during the pandemic, more than six months into the crisis, people across Afghanistan have used up savings, taken on new debt and now face additional risks such as eviction. More than 80 per cent of the most vulnerable displaced families surveyed reported that debt is leading to difficulties in paying rent or other basic housing. This has prompted increased levels of borrowing to cover food, education or rent. NRC warns that protection challenges are likely to worsen as families adopt negative coping strategies, including child labour, early marriage and decreased food consumption.

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. According to the Border Monitoring Team of the Directorate of Refugees and Repatriation (DoRR), a total of 27,524 Afghanistan nationals returned from Iran through the Milak and Islam Qala border crossing sites between 18 and 24 October, a 26 per cent increase from the previous week (21,762). 15,222 people returned voluntarily and 12,302 were deported. IOM provided post-arrival humanitarian assistance to 1,486 people or 5 per cent of all undocumented Afghanistan nationals returning from Iran at its transit centres in Hirat and Nimroz during the past week. Afghanistan’s frontier with Pakistan at Spin Boldak officially opened on 21 August and the border with Torkham on 29 September for undocumented returnees. COVID-19 restrictions remain in place and full border functionality is anticipated to resume before the end of October with a revised visa regime in place for Afghanistan nationals traveling to Pakistan. Ghulam Khan border crossing remains closed for pedestrian movement.

IOM reports that the scale of cross border returns, with over 670,000 migrants returning so far in 2020, the resumption of in-person classes at schools and universities and limited adherence to government restrictions due to prevailing economic conditions have prompted the agency to scale-up health services. Since late March, IOM’s Migration Health Unit has significantly scaled-up services under the Global Humanitarian Response Plan and IOM’s own Strategic Preparedness and Response Plan (SPRP) with support for personal protective equipment provision to government responders; deployment of Rapid Response Teams to collect COVID-19 samples for testing; health education on COVID-19 to migrant populations, government officials, school children and partner organisations; training for frontline health workers on COVID-19 prevention; secondment of over 200 healthcare staff for border level surveillance and screening; provision of ambulances and equipment; rehabilitation of medical facilities; new handwashing stations in schools, and major border crossing points and Risk Communication and Community Engagement work through IOM’s social mobilisers and Displacement Tracking Matrix field teams.

Reports from Returnees: Since April 2020, the Mixed Migration Centre (Asia) has been interviewing returned refugees and migrants in Afghanistan to better understand their experiences and needs during the COVID-19 pandemic. The deteriorating socioeconomic and political situation in Afghanistan, compounded by COVID-19, is increasing pressure on returnees to return in search of greater safety and stable employment to sustain themselves and their families. While some border closures remain in place, journeys have become more dangerous and more expensive as smugglers adapt. Nearly half of respondents (44 per cent) reported that they returned to Afghanistan due to the COVID-19 pandemic, with most (75 per cent) citing job loss as their main reason for return. Many returning migrants and refugees report having faced difficulties and challenges in securing an income upon return to Afghanistan due to lockdowns, ongoing movement restrictions and an already failing economy. Around half of all respondents surveyed (52 per cent) report that they had lost some form of income as a result of COVID-19. This is resulting in increased worry and anxiety (58 per cent) and the inability to afford basic needs including food, water and shelter (40 per cent). Overall, 42 per cent reported that they were planning to migrate out of Afghanistan once the COVID-19 situation improved, with most hoping to return to their previous country of migration (33 per cent). Only 19 per cent reported that they intended to stay in Afghanistan. Finally, as Afghanistan and surrounding countries in the region have maintained border restrictions aimed at curbing the spread of COVID-19, smugglers are reportedly looking for alternative, and often riskier, routes to avoid detection from increased border surveillance. This has knock-on effects for the cost of journeys and the likelihood of experiencing protection risks en route.
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 not operate its domestic flights and the booking offices (including email bookings) will be closed on Thursday, 29 October in observance of the Mowlood-e-Sharif holiday. However, 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, Turkish Airlines 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. Turkish Airlines has resumed flights between Istanbul and Kabul 4 days a week in October, with 7 flights per week planned in November. Similarly, Turkish Airlines will carry out 3 flights per week to Mazar-e-Sharif effective from 3 November.

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. Effective from 1 October, UNHAS flights from Doha to Kabul will depart from Doha at 0830 and arrive in Kabul at 1300; flights from Kabul to Doha will depart from Kabul at 1430 and arrive in Doha at 1540. The UNHAS airbridge connecting Doha and Kabul will operate normally during the Mowlood-e-Sharif holiday on Thursday, 29 October. The following UNHAS flight to Doha is planned for Sunday, 1 November.

More Information – Links: UPDATED

WHO
- WHO’s latest information on COVID-19
- WHO COVID-19 Global Dashboard
- Weekly Epidemiological Update
- The World Health Organization and Wikimedia Foundation expand access to trusted information about COVID-19 on Wikipedia
- Statement of the Twenty-Sixth Polio IHR Emergency Committee
- COVID-19 situation updates for week 43
- Afghanistan Attacks on Health Care

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
- OCHA: Afghanistan Humanitarian Response Plan 2018-2021 (June 2020 Revision)
- UN: Comprehensive Response to COVID-19 – September Update
- Relief Web: COVID-19 Response Page
- UNFPA: UNFPA in 2019
- WFP: Afghanistan Country Brief, September 2020
- ADB: Averti ng an Education Catastrophe for the World's Children
- UN SC: Security Council Press Statement on Terrorist Attack to Afghan refugees in Pakistan
- UNAIDS: COVID-19's impact on HIV vertical transmission services reversed
- FAO: International Day for Disaster Risk Reduction
- FAO: COVID-19 and the role of local food production in building more resilient local food systems
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.

- **IOM**: COVID-19 Rapid Response, Mobile Clinics in Afghanistan Receive New Funding Support
- **MMC**: The Impact of COVID-19 on the Smuggling of Refugees and Migrants from Afghanistan
- **NRC**: Displacement-affected communities in Afghanistan during the Covid-19 pandemic

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