

Disease Outbreaks	AWD (May-Nov 2022)	COVID-19 (Feb 20-Nov 2022)	Measles (Jan-Nov 2022)	Dengue fever (Jun-Nov 2022)	CCHF (Jan-Nov 2022)	Pertussis (Jan-Nov 2022)	Malaria (Jun-Nov 2022)
<b>Cumulative Cases</b> <small>(Data from 613 surveillance sentinel sites)</small>	<b>225,756</b>	<b>205,663</b>	<b>74,010</b>	<b>1,056</b>	<b>384</b>	<b>836</b>	<b>2,591</b>
<b>Deaths "CFR (%)"</b>	<b>83 (0.04)</b>	<b>7,833 (3.8)</b>	<b>383 (0.5)</b>	<b>2 (0.2)</b>	<b>15 (3.9)</b>	<b>15 (1.8)</b>	<b>0 (0.00)</b>

### Acute Watery Diarrhea (AWD) with Dehydration Outbreak (01 May to 26 Nov 2022)

Current Week	Cumulative Figures
<b>3,419</b> new cases (54.5% under 5)	<b>225,756</b> cases (<5 years, 55.2%)
<b>3</b> new deaths	<b>83</b> deaths (77.1% < 5 years), CFR=0.04%
<b>0</b> new district reported new alert	<b>173</b> districts in all 34 provinces
<b>22</b> samples collected	<b>2,600</b> samples collected

- During week 47-2022, a total of 3,419 new AWD cases with dehydration and 3 new death were reported which indicates 8.4% decrease and 200% increase in the number of cases and deaths, respectively, compared to the previous week (Figure 2).
- The highest number of new AWD cases were reported from Kabul (1,181, 34.5%), followed by Baghlan (446, 13.0%), Helmand (208, 6.1%) and Parwan (178, 5.2%) provinces.
- The newly reported deaths were all females, children below 5 and from Nimroz (2) and Kabul (1) provinces.
- Cumulatively, Kabul (50,803, 22.5%), Helmand (38,859, 17.2%), Baghlan (15,672, 6.9%), Nangarhar (12,481, 5.5%), Kandahar (12,088, 5.3%), Jawzjan (8,887, 3.9%) and Paktya (8,142, 3.6%) are the most affected provinces (Figure 1).
- Out of the total 225,756 cases, 124,678 (55.2%) were children below 5 years and 112,886 (50.0%) were females (Figure 3).
- The first few cases of AWD were reported to the National Disease Surveillance and Response System (NDSR), MoPH and WHO on 04 May 2022 from Kandahar city of Kandahar province and spread to 173 districts in 34 provinces.

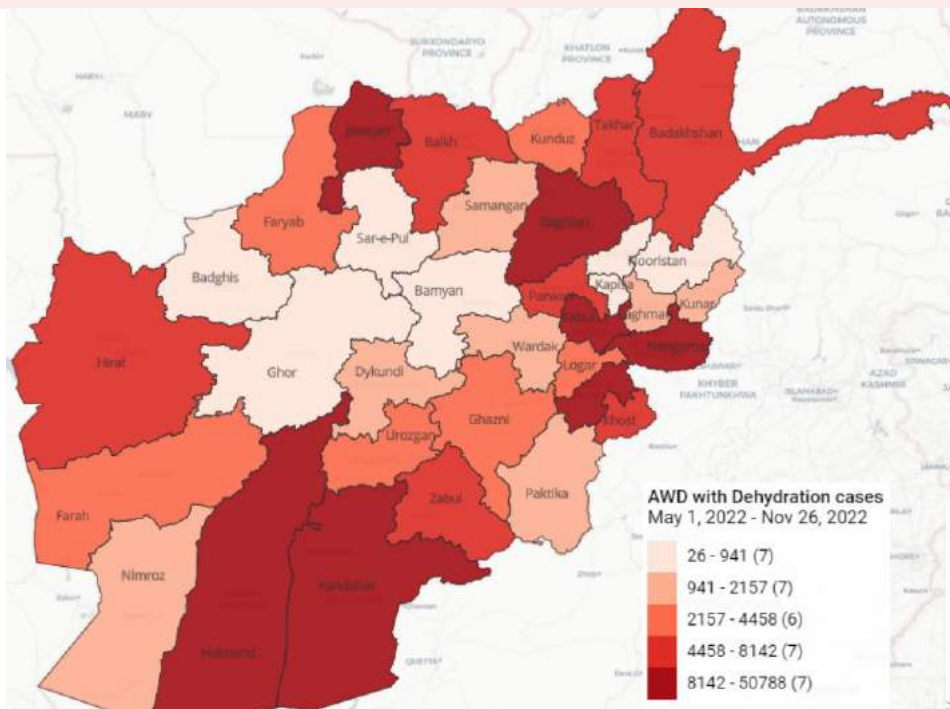


Figure 1. Hotspot areas of AWD with dehydration cases in Afghanistan, May-Nov 2022 (N=225,756)

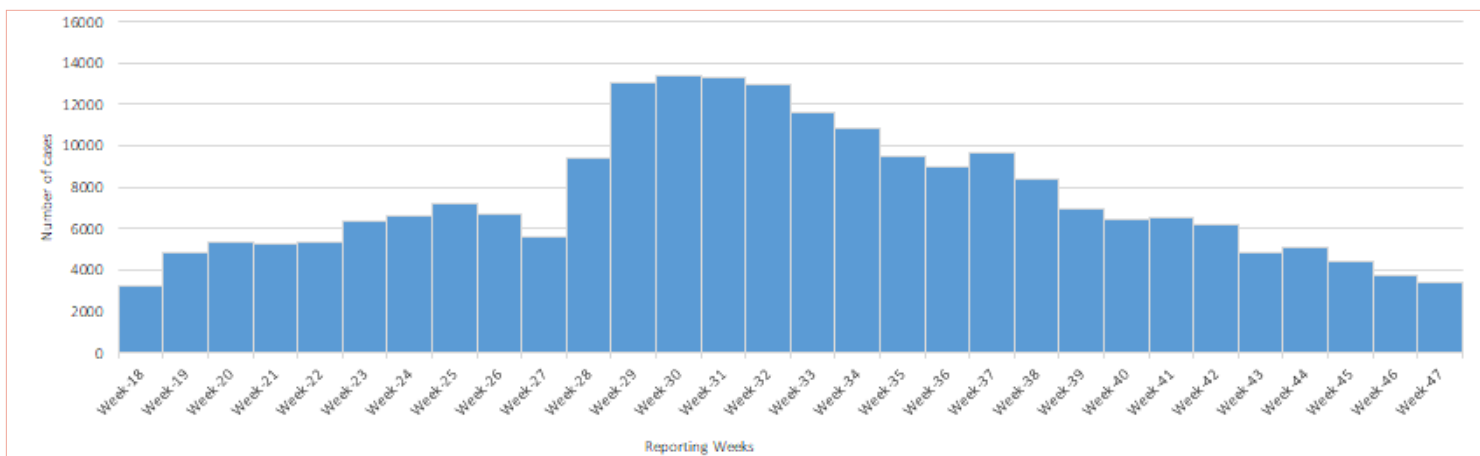


Figure 2. Weekly distribution of AWD with dehydration cases in Afghanistan May-Nov 2022 (N=225,756)

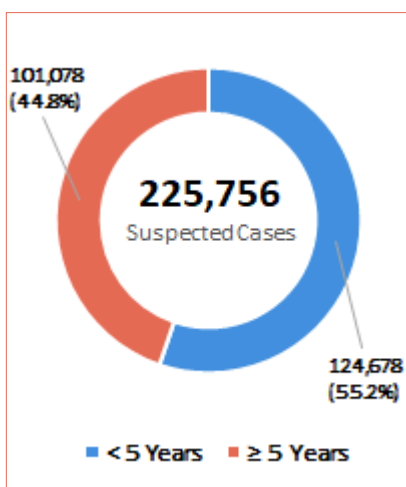


Figure 3. Distribution of AWD with dehydration cases by age groups in Afghanistan, May-Nov 2022

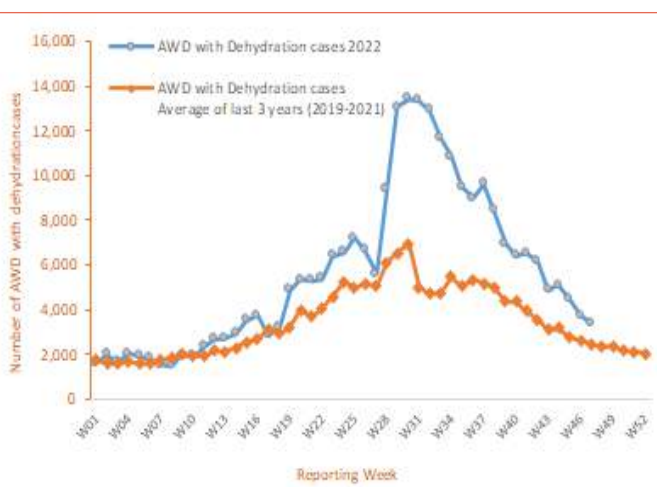


Figure 3.a. Comparing trend of AWD with dehydration cases using 3 years average (2019-2021) vs 2022, in Afghanistan

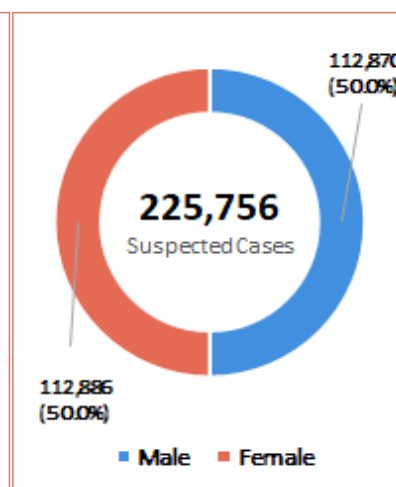


Figure 3.b. Distribution of AWD with dehydration cases by sex in Afghanistan, May-Nov 2022

Response to the AWD outbreak



Figure 4. Training of AWD with dehydration case management to HCWs in Kandahar province, November 2022



Figure 5. Training session of Community Health Supervisors (CHSs) and medical officers on signal detection, triage, verification and risk assessment Kabul province, Nov 2022

**Leadership and Coordination**

- Emergency and Preparedness Response Committees (EPR) are active at the provincial level.
- Coordination meetings are conducted with Health-WASH partners on a biweekly basis to strengthen AWD preparedness and response activities.

**Surveillance**

- During the last week, 120 community health supervisors (CHSs) and medical officers of Bamyan province were trained on procedures of event-based surveillance (EBS); signal detection, triage, verification and risk assessment in Kabul province.
- A total of 170 SST members from 33 provinces have been trained on surveillance, response, sample collection, storage and transportation in Kabul.
- Surveillance support teams (SSTs) are actively participating in outbreak investigation and response activities in 34 provinces.
- Supervisory visits have been conducted at different provinces to strengthen early detection and timely response to AWD outbreaks.

**Case Management**

- During the last week, 112 HCWs were trained on AWD case management in two provinces: Kandahar (66) and Nimroz (46). The total number of HCWs trained on AWD case management reached to 1,584 in 32 provinces.

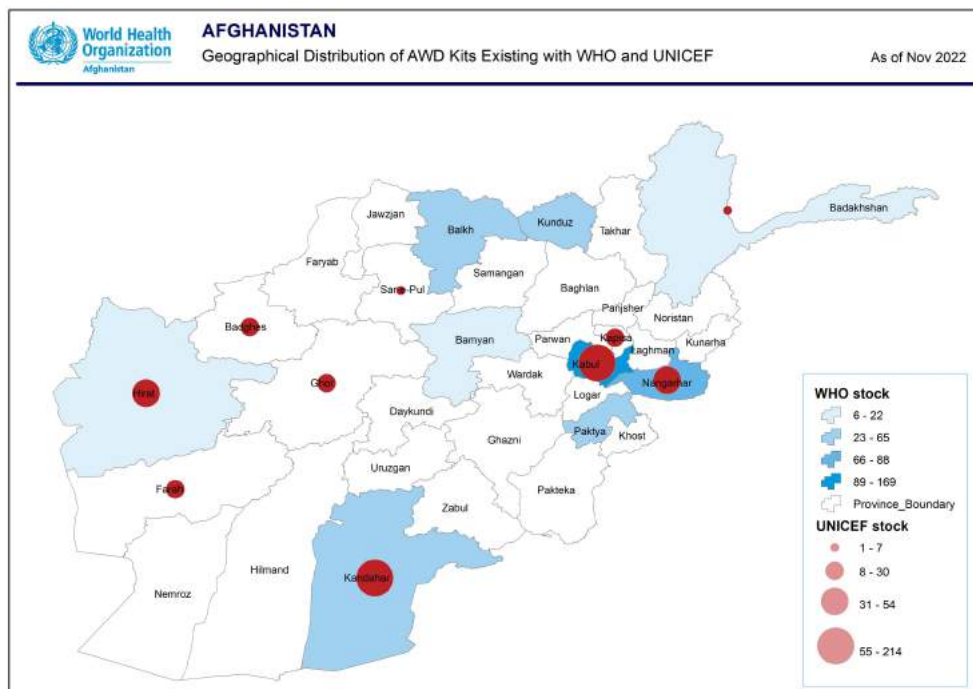
**Laboratory and Supplies**

- During the last week, 235 packs of disposable cap and 239 packs of disposable shoes cover were distributed to NDSR offices in 34 provinces.

- A total of 20 case management kits have been supplied to Helmand province to support AWD case management.
- A total of 396 different kits (37 central kits, 334 community kits, 45 ORP kits), 700 RDTs and 1,058 Cary Blairs have been distributed to all outbreak affected areas.

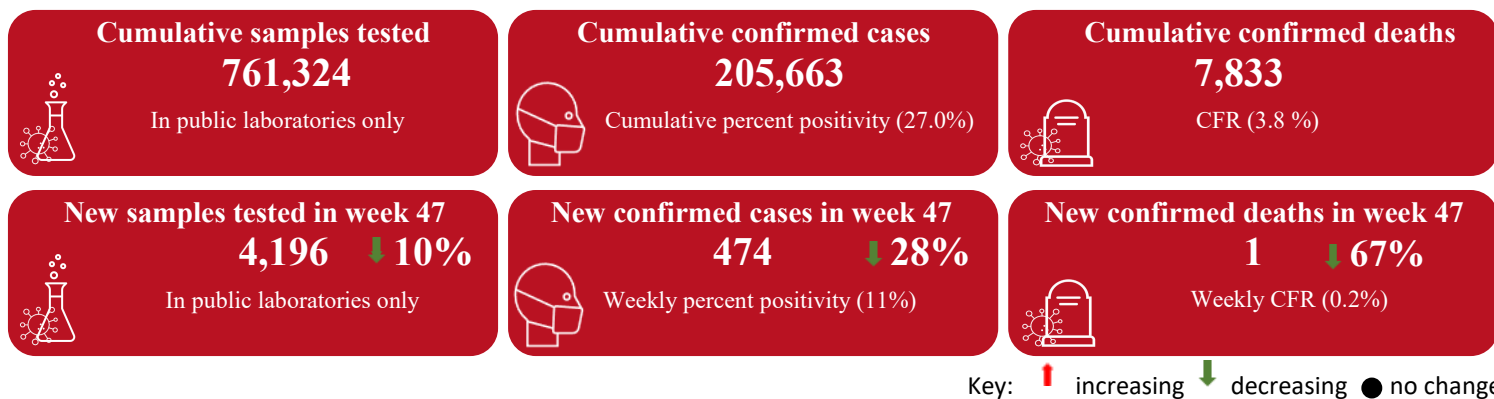
**WASH and RCCE**

- Safe drinking water has been provided through water trucking to 18,250 people in flood and drought affected areas (high risk for AWD) of Farah, Logar & Parwan provinces.
- Provision of sanitation facilities and essential WASH supplies to 14,000 people in Paktika province.
- Conducting environmental sanitation campaign on removing solid waste in Khost and Paktika provinces. As a results, 1,500 families received necessary tools to ensure solid waste management in their communities.
- More than 12,500 hygiene kits have been distributed in 8 provinces reaching almost 80,000 individuals in November 2022.
- Hygiene promotion in 9 provinces benefited around 115,000 individuals.
- More than 4,000 wells were chlorinated in 6 provinces reaching more than 180,000 individuals.
- Water supply system rehabilitation in Kunduz supported 500 individuals & water trucking in Badghis supported 38,000 individuals.
- Emergency latrines installations & rehabilitations in 12 provinces supported around 10,000 individuals.



**Figure 6.** Distribution of existing AWD kits of WHO and UNICEF by province in Afghanistan, Nov 2022

**COVID-19 (24 Feb 2020 – 26 Nov 2022)**



**COVID-19 Vaccination highlights**



\*Total population: 39,269,174\*(Ref: UN estimation, AFG CMYP 2022)

**Table 1: Summary of COVID-19 indicators in the last 8 weeks in Afghanistan (1 Oct – 26 Nov 2022)**

Indicators	W40-22	W41-22	W42-22	W43-22	W44-22	W45-22	W46-22	W47-22	Epi-curve
Samples tested (in public Lab)	6,617	5,930	6,275	5,099	5,123	5,110	4,655	4,196	
Confirmed cases	949	824	913	844	739	800	657	474	
Percent positivity (%)	14	14	15	17	14	16	14	11	
Confirmed deaths	4	5	7	3	5	3	3	1	
CFR (%)	0.4	0.6	0.8	0.4	0.7	0.4	0.5	0.2	

**Highlights of the week**

- Since the beginning of the pandemic in Feb 2020, a total of 761,324 samples have been tested for COVID-19 through the public laboratories.
- In week 47-2022, 4,196 samples were tested in public labs, of which 474 samples were positive for COVID-19 (test positivity of 11%) and 1 new death was reported. This represents 28% and 67% decrease in the number of newly reported cases and deaths, respectively, compared to week 46-2022 (Table 1).
- This is the first time to rescored below 500 confirmed cases/week for the last 21 weeks.
- The weekly number of deaths is below 10 for the last 12 weeks.
- Cumulatively, 205,663 confirmed cases (overall test positivity of 27.0%) of COVID-19 with 7,833 associated deaths (case fatality ratio = 3.8%) have been reported in Afghanistan since Feb 2020.
- As of 26 Nov 2022, 88.8% of cases have recovered.

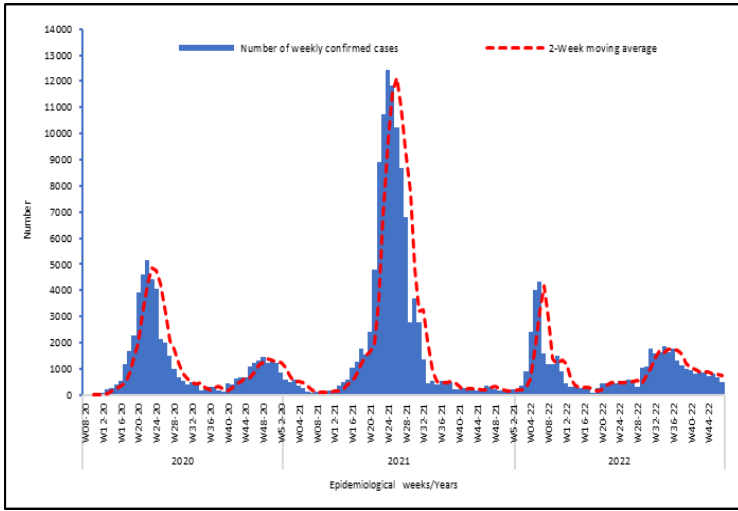


Figure 7: Weekly distribution of confirmed COVID-19 cases in Afghanistan (24 Feb 2020 - Nov 2022)

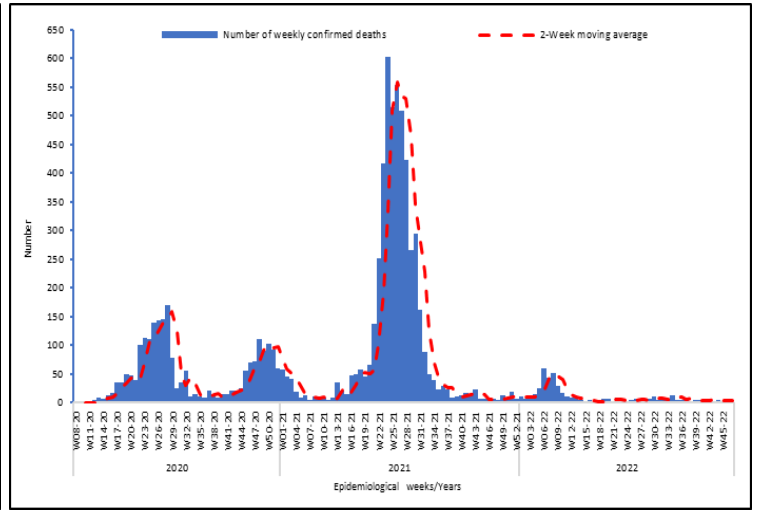


Figure 8: Weekly distribution of COVID-19 associated deaths in Afghanistan (24 Feb 2020 - Nov 2022)

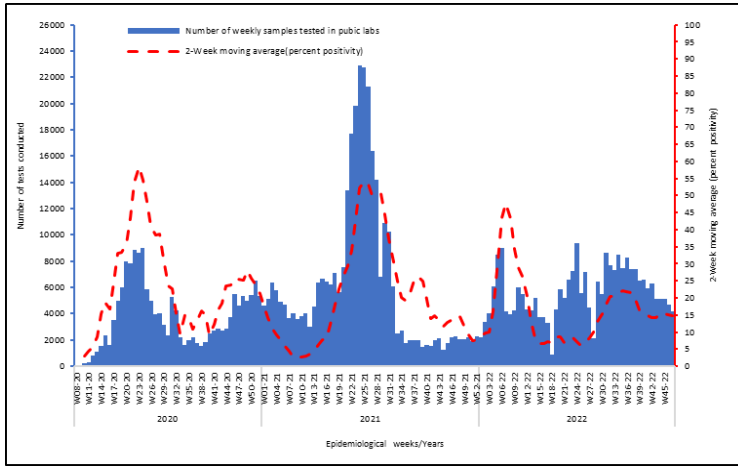


Figure 9: Number of weekly PCR tests conducted and 2-week moving average of percent positivity in Afghanistan (24 Feb 2020 - Nov 2022)

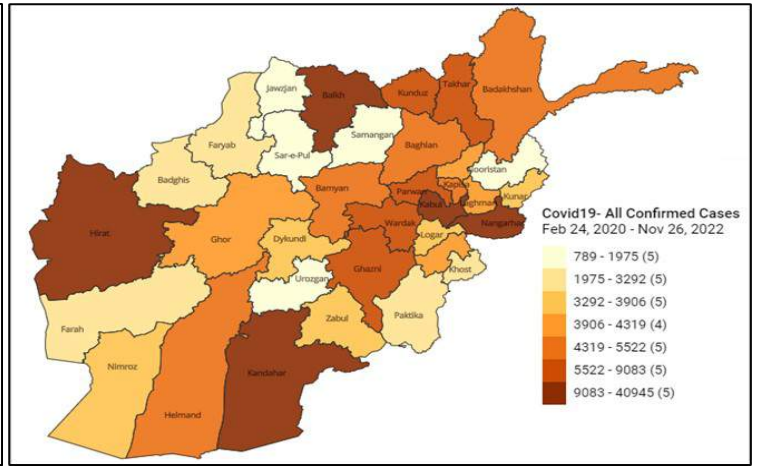


Figure 10: Geographic distribution of COVID-19 confirmed cases in Afghanistan (24 Feb 2020 - Nov 2022)

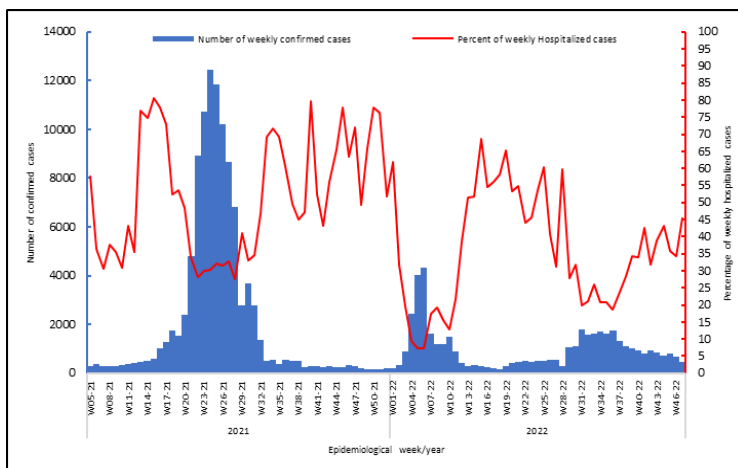


Figure 11: Weekly proportion of hospitalized cases out of new COVID-19 confirmed cases in Afghanistan as of (24 Feb 2020- Nov 2022)

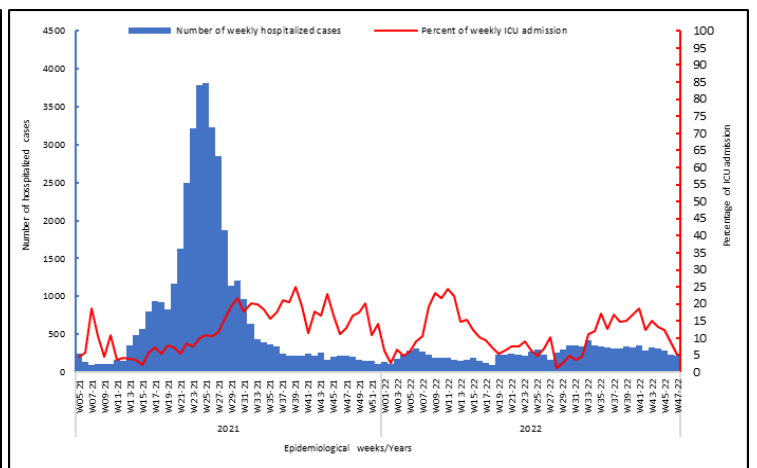


Figure 12: Weekly proportion of ICU admissions out of newly hospitalized COVID-19 cases in Afghanistan as of (24 Feb 2020- Nov 2022)

## Measles outbreak (01 Jan to 26 Nov 2022)

**74,010** Total cases
 **385** Total deaths
 **9,280** Samples tested
 **5,484** Lab confirmed cases
 **59.1%** Test positivity ratio

Table 2 summary of the measles outbreak in the last eight weeks (02 Oct– 26 Nov 2022)

Indicators	W-40	W-41	W-42	W-43	W-44	W-45	W-46	W-47	Epi-curve
Suspected cases	539	548	469	524	631	544	556	665	
Deaths	2	0	0	0	0	2	2	3	
CFR (%)	0.37	0.00	0.00	0.00	0.00	0.37	0.36	0.45	

- During epidemiological week 47-2022, a total of 665 new cases and 3 new deaths were reported which indicates a 19% and 50.0 increase in the number of new cases and deaths respectively, compared to last week.
- Out of the 3 newly reported deaths, 2 were females and all were children below 5. The deaths were reported from 2 provinces Kabul (2) and Samangan (1).
- Despite the increase observed during the last week, the average number of suspected measles cases per week was around 560 cases during the last 8 weeks (Figure 15).
- During the last week, 4 out of 8 regions reported an increase in the number of suspected measles cases compared to the preceding week. The highest relative increase was reported in the East and South regions (52.9% and 49.7%, respectively) (Table 3)
- Cumulatively, the most affected provinces are Badakhshan (11.8%), Kabul (10.5%), Nangarhar (9.9%), Helmand (7.9%), Kunduz (7.6%), Takhar (5.3%) and Hirat (5.0%) (Figure 14).
- Out of the total 9,280 samples tested for measles, 5,484 were laboratory confirmed from Jan-Nov 2022.
- During the last week, no new districts reported suspected mea-

Table 3 number of suspected measles cases per region in the last 8 weeks 2022

Regions	W-40	W-41	W-42	W-43	W-44	W-45	W-46	W-47	Epi-curve	% of change compared to week 46
South	136	121	108	111	208	182	159	238		238 (↑ 49.7)
Central East	169	117	151	162	167	170	169	158		158 (↓ 6.5)
East	61	79	49	61	71	40	68	104		104 (↑ 52.9)
North	25	38	33	45	51	41	41	61		61 (↑ 48.8)
South East	56	105	56	56	59	41	38	46		46 (↑ 21.1)
North East	50	42	20	42	28	27	39	38		38 (↓ 2.6)
Central West	23	36	42	24	30	22	17	16		16 (↓ 5.9)
West	19	10	10	23	17	21	25	4		4 (↓ 84.0)

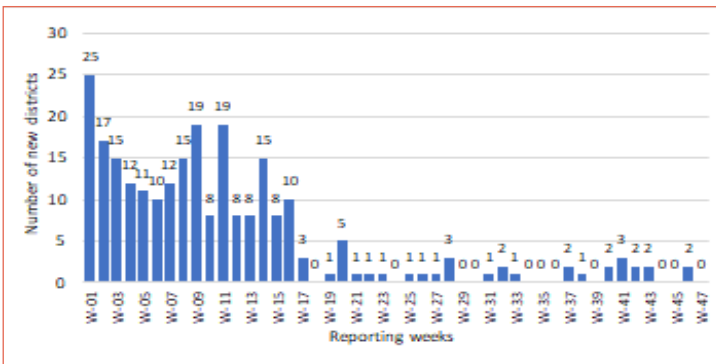


Figure 13. New districts reporting suspected measles cases on weekly basis November 2022 (N=248)

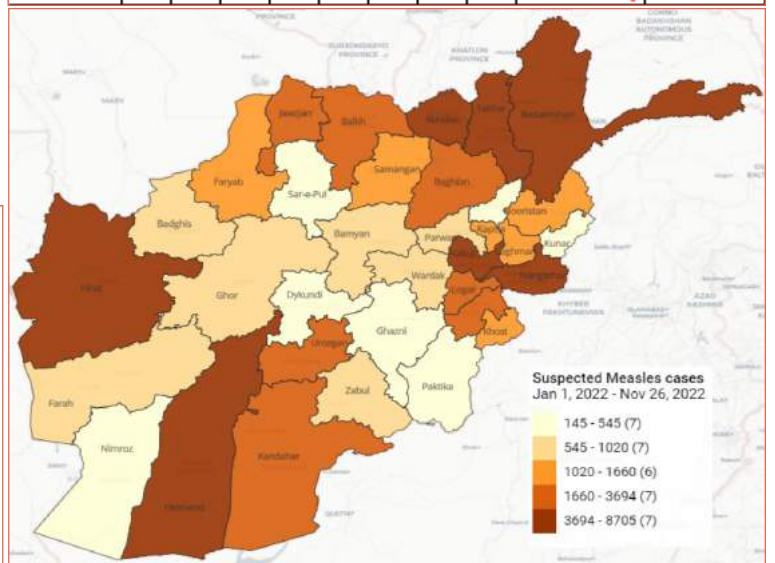


Figure 14. Geographical distribution of suspected measles cases in Afghanistan Jan - Nov 2022 (N=74,010)

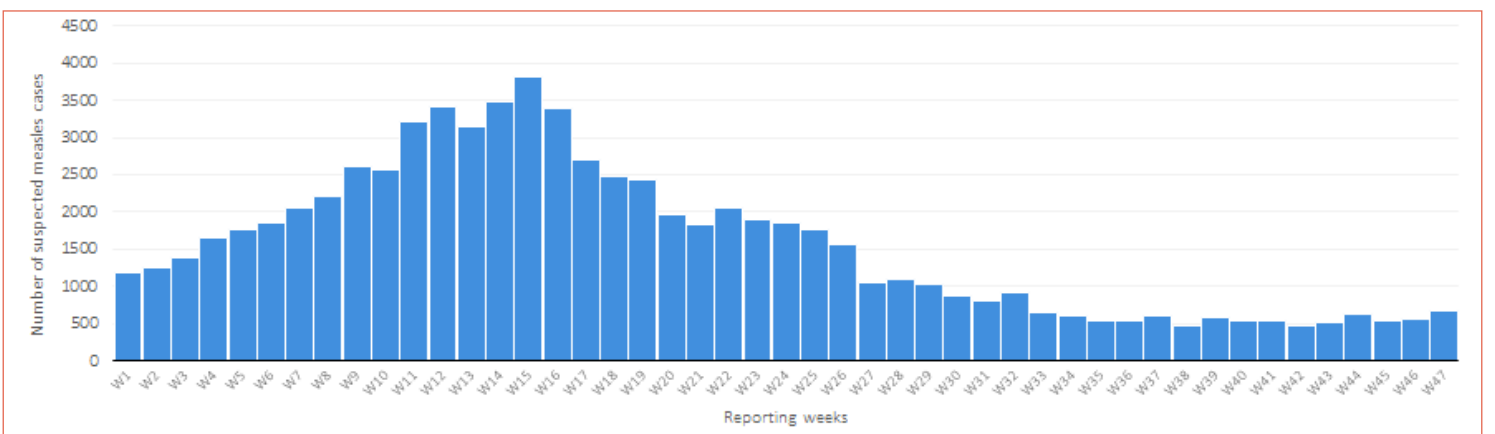


Figure 15. Weekly distribution of suspected measles cases in Afghanistan, Jan– Nov 2022 (N=74,010)

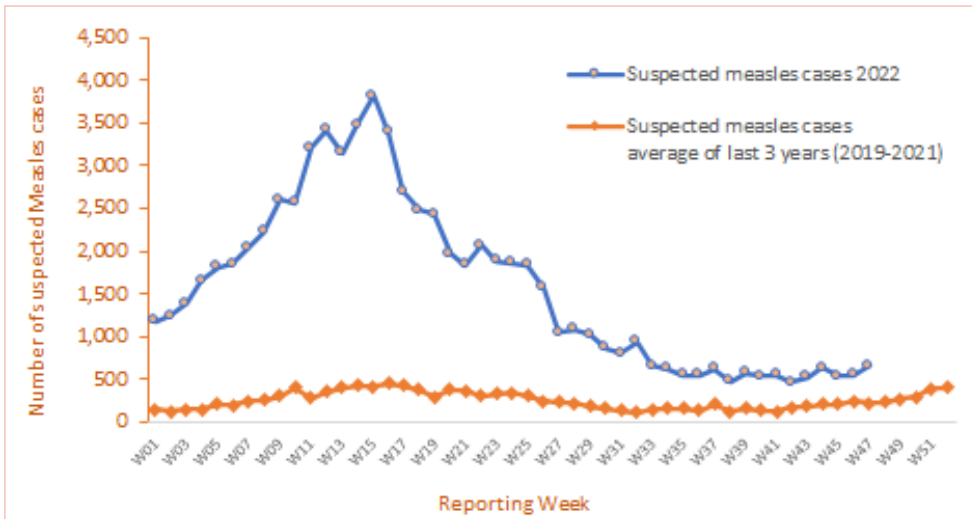


Figure 16. Comparing trend of suspected measles cases using 3 years average (2019-2021) vs 2022, in Afghanistan

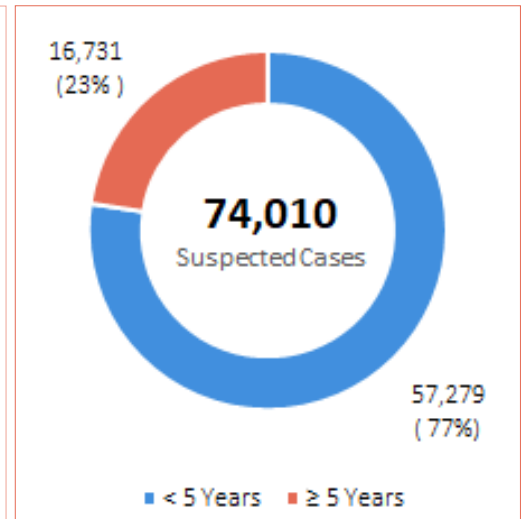


Figure 17. Distribution of suspected measles cases by age groups in Afghanistan, Jan-Nov 2022

### Response to Measles outbreak

- The national measles immunization campaign started on 26-11-2022 in all 34 provinces and will last for 10 days.
- The campaign is targeting more than 5.4 million children aged between 9-59 months.
- Since December 2021, around 6 million children (aged between 6 months to 14 years) have been vaccinated through 4 different measles outbreak response immunization campaigns in 29 provinces.
- A total of 593 measles kits have been supplied to 28 provinces in 7 regions across the country to support case management.



Figure 18. National measles immunization campaign, Logar province, Afghanistan, Nov 2022

## Dengue Fever Outbreak (01 Jun to 26 Nov 2022)

### Highlight:

- A total of 72 suspected dengue fever cases with no new deaths have been reported during week 47-2022 from Nangarhar (71) and Kabul (1) provinces which bring the total number of cases and deaths to 1,056 and 2, respectively as of 26 Nov 2022.
- The new case reported from Kabul had recent travel history to Pakistan (endemic for dengue).
- Out of 1,056 reported cases, 209 (19.8%) were females and 1,051 (99.5%) were over five years of age.

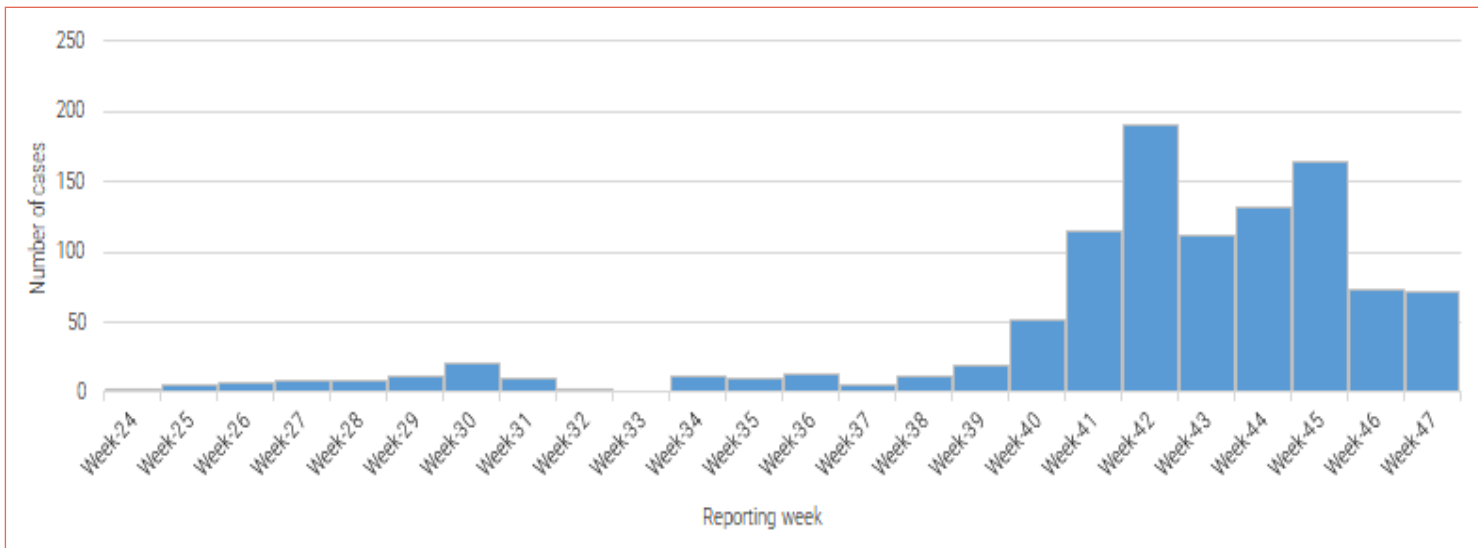
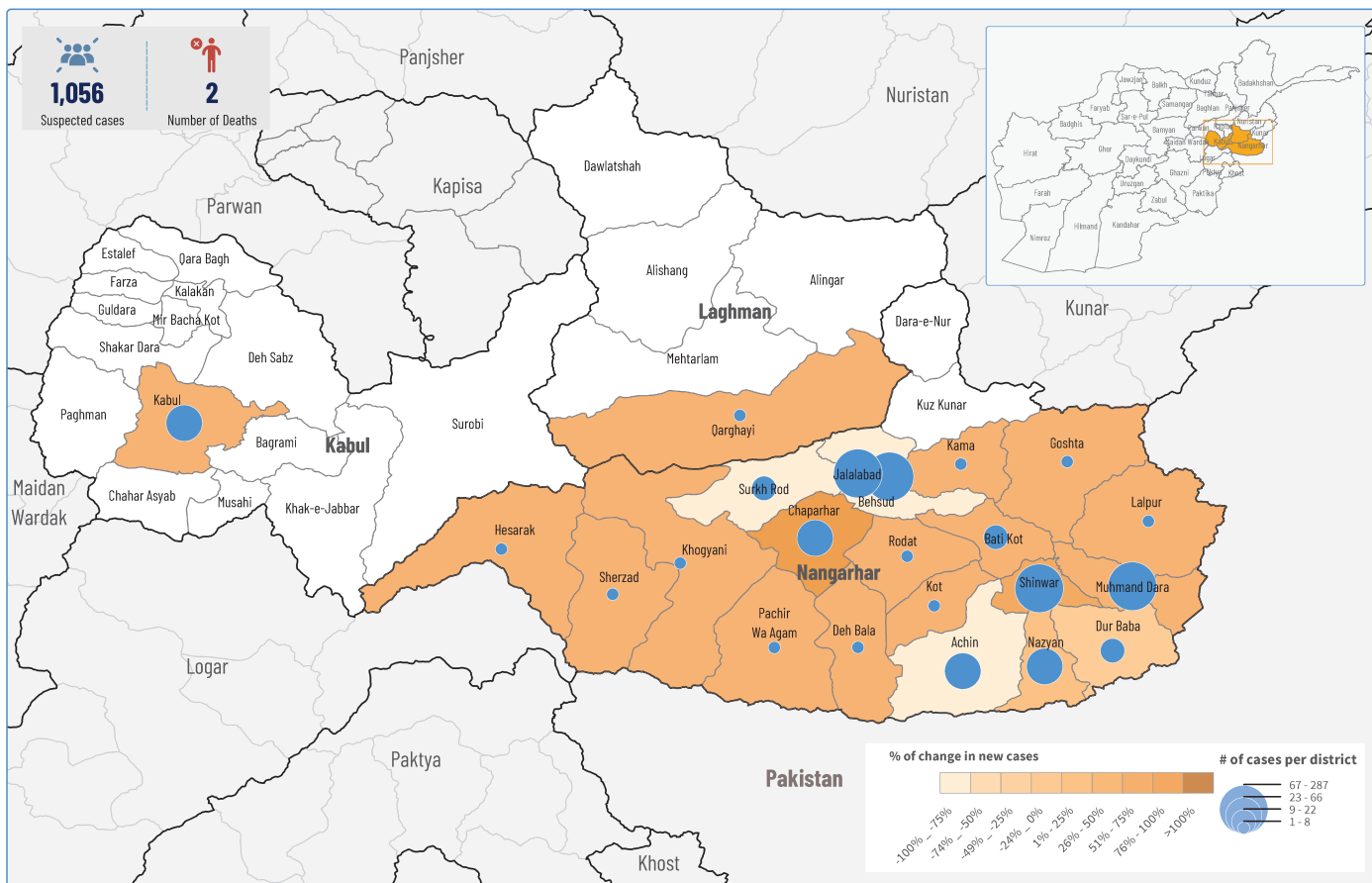


Figure 19. Weekly distribution of dengue fever cases in Afghanistan Jun-Nov 2022 (N=1,056)



Geographical distribution of suspected dengue fever cases in Afghanistan and weekly percent of changes (between weeks 46 and 47, 2022)



The boundaries and names shown and the designations used on this map do not imply the expression of any opinion whatsoever on the part of the World Health Organization (WHO) concerning the legal status of any country, territory, city or area or of its authorities, or concerning the delimitation of its frontiers or boundaries. The lines on map represent approximate border lines for which there may not yet be full agreement. Sources: MoPH, WHO, AGCHO. Creation date: 26 November 2022.

Figure 20. Hotspot areas of dengue fever cases and percent change of new cases in Afghanistan, Jun-Nov 2022



### Response to the dengue fever outbreak

- During the last week, 1,000 Kg of larvicides were released from customs after extensive efforts and will be distributed to Nangarhar sub office to support dengue fever vector control activities.
- During the last week, two dengue fever PCR Kits (200 tests) were supplied to Nangarhar Regional Reference Lab to support the case detection.
- A task force committee was coordinating the dengue fever outbreak response activities with the active participation of PPHD, WHO, NDSR, vector control program, BPHS and EPHS implementers in the outbreak affected areas.
- Surveillance support teams and entomology teams continue to do their work after receiving on-the-job training the previous week.
- Health education sessions were conducted in two villages, among those identified as hotspot areas; the main message was to raise public awareness regarding the source reduction activities as well as how to protect themselves from being infected.

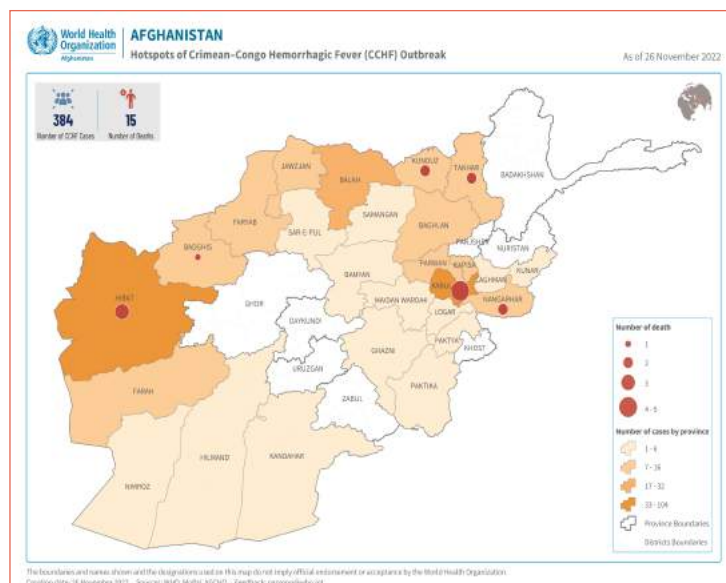


**Figure 21.** Dengue fever field visit in Nangarhar province, Afghanistan Nov 2022

## Other infectious diseases outbreaks (Jan-Nov 2022)

### CCHF Highlight:

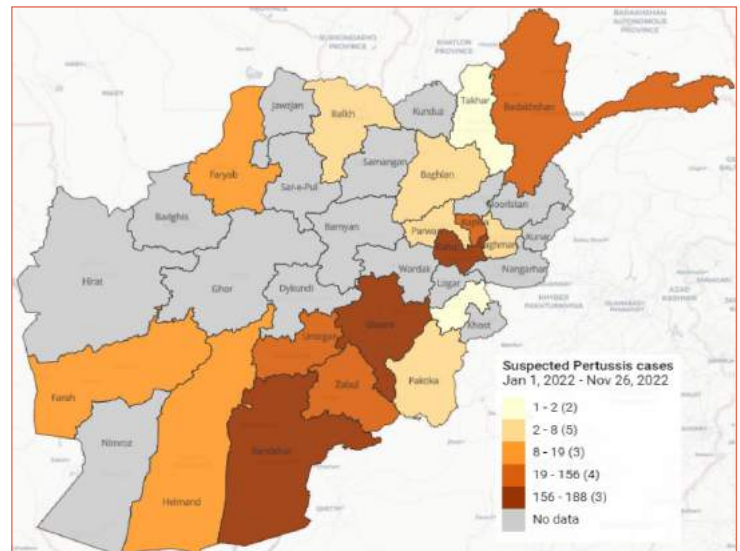
- During week 47-2022, a total of 4 new suspected CCHF cases were reported from 3 provinces (Kapisa, Takhar and Helmand). This brings the total number of suspected CCHF cases to 384 from 26 provinces.
- Out of 384 cases, 300 (78.1%) were males and all were over five years of age.
- Out of 384 cases, 103 (26.8%) were lab confirmed using PCR.
- No new deaths have been reported for the last nine weeks, and the total number of CCHF associated deaths remained at 15 (Kabul (5), Hirat (3), Takhar (2), Kapisa (2), Nangarhar (2) and Badghis (1)).
- The CCHF cases are managed in the health facilities according to the national guidelines. Ribavirin and double bags needed for the treatment of CCHF cases have been distributed to all regions.
- Training on CCHF case management has been conducted and included 91 HCWs (33 provinces).



**Figure 22.** Hotspot areas of CCHF cases in Afghanistan, Jan-Nov 2022

**Pertussis Highlight:**

- During week 47-2022, a total of 26 new suspected pertussis cases were reported from Zabul (17), Kabul (7), Kapisa and Kandahar (1) provinces, this brings the total number of suspected cases to 836 from 17 provinces.
- Out of the total 836 cases, 542 (64.8%) were children below 5 years and 402 (48.1%) were females.
- The highest number of suspected cases have been observed in Ghazni (188, 22.5%) followed by Kabul (175, 20.9%) and Kandahar (156, 18.7%) Figure 23.
- No new suspected pertussis associated deaths have been reported for the last twelve weeks, and the total number of associated deaths remains at 15.
- As part of preparedness activities to respond to the expected pertussis outbreak during upcoming winter season, required supplies prepositioning is ongoing in five provinces (Badakhshan, Jawzjan, Daikundi, Nooristan and Ghazni).



**Figure 23.** Geographical distribution of suspected pertussis cases in Afghanistan Jan - Nov 2022 (N=836)

**Malaria Outbreak Highlight:**

- During the last three weeks, there was no indication of a new outbreak while comparing trends in different locations. In total, the number of suspected malaria cases remained at 2,591 from 7 provinces, Kandahar (683, 26.4%), Laghman (663, 25.6%), Kunar (562, 21.7%), Badghis (552, 21.3%), Nangarhar (86, 3.3%) Farah (39, 1.5%) and Kapisa (6, 0.2%).
- Out of 2,591 cases, 1,112 (42.9%) were females and 419 (16.2%) were children below 5.
- 32 malaria case management kits were supplied to Nangarhar province; 9 kits were distributed to outbreak affected area (Amarkhil village of Surkhrood district).
- Required medicine for case management and RDTs for the diagnosis of the suspected malaria were supplied by partners to the outbreak affected area.

Note: MOPH is the source of epidemiological data

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