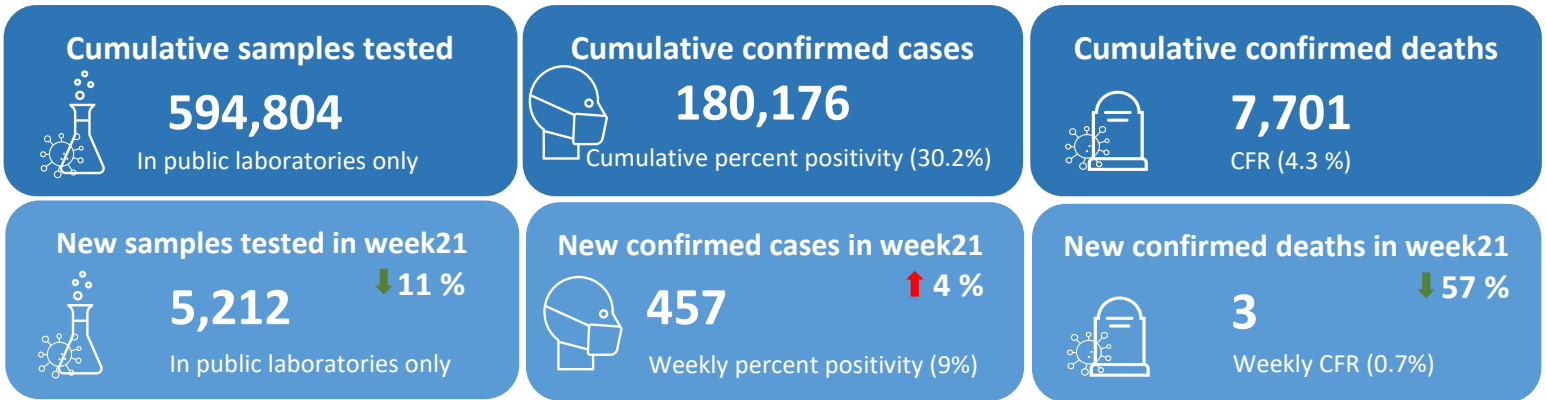




COVID-19 Epidemiological Bulletin Afghanistan

Epidemiological Week 21 (22 – 28 May 2022)



Key: ↑ increasing ↓ decreasing ● no change

Table 1: Summary of COVID-19 indicators in the last 8 weeks in Afghanistan (2 Apr – 28 May 2022)

Indicators	W 14-22	W 15-22	W 16-22	W 17-22	W 18-22	W 19-22	W 20-22	W 21-22	Epi-curve
Samples tested (in public Labs)	5,222	3,771	3,713	3,271	884	4,356	5,870	5,212	
Confirmed cases	327	269	266	210	97	283	440	457	
Percent positivity (%)	6	7	7	6	11	6	7	9	
Confirmed deaths	5	2	4	1	2	6	7	3	
CFR (%)	1.5	0.7	1.5	0.5	2.1	2.1	1.6	0.7	

Highlights of the week

Since the beginning of the pandemic in Feb 2020, a total of **594,804** samples have been tested for COVID-19 through the public laboratories in the country.

In week21-2022, **5,212** samples were tested in public labs, of which **457** samples tested positive for COVID-19 (percent positivity **9**) and **3** new deaths were reported. This represents **4%** increase in cases and **57%** decrease in deaths, respectively, compared to week 20 2022, (**Table 1**).

Cumulatively, **180,176** confirmed cases (overall percent positivity **30.2**) of COVID-19 with **7,701** associated deaths (**case fatality ratio = 4.3%**) have been reported in Afghanistan since Feb 2020.

As of 28th May 2022, **90.4 %**, of cases have recovered.

In week 21, 2022, the highest numbers of COVID-19 cases were reported in the East and Central East regions (174 and 115 cases, respectively) (Table 2). The top five provinces that reported positive cases included Nangarhar (139 cases), Kabul (59 cases), Kapisa (30 cases), Kunar (25 cases), and Paktya (25 cases).

The WHO supported building the in-country capacity for genome sequencing, after training of two national staff on sequencing techniques in Dubai (December 2021). The WHO supported the procurement of the Oxford Nanopore Sequencer with the reagents

and consumables. Initially, the plan is to conduct genome sequencing for COVID-19, with a plan to expand it to include other high-threat pathogens. The team is currently working on processing the COVID-19 samples for sequencing, the results will be shared when available.

Table 2: COVID-19 cases by region in Afghanistan, as of week 21, 2022 (22 – 28 May 2022)

Region	Epi-curve	# of new cases in week 21 (%)	% of change compared to week 20	Cumulative number (%)
Central East		115 (25 %)	39%	49,239 (27.3%)
Central West		33 (7%)	-46%	14,980 (8.3%)
East		174 (38%)	33%	21,019 (11.7%)
North		35 (8%)	-5%	14,969 (8.3%)
North East		35 (8%)	-39%	18,993 (10.5%)
South		23 (5%)	77%	21,676 (12.1%)
South East		42 (9%)	-28%	11,845 (6.6%)
West		0 (0%)	NA	27,455 (15.2%)
National		457 (100%)	4%	180,176 (100%)

Overall, Afghanistan has reported **4,759** confirmed cases and **97** associated deaths among healthcare workers (HCWs) since 2020. To date, Herat, Kabul, Nangarhar, Balkh and Kunar reported the highest number of positive cases among HCWs.

Figure 1: Number of weekly PCR tests conducted and 2-week moving average of percent positivity in Afghanistan (24 Feb 2020 - 28 May 2022)

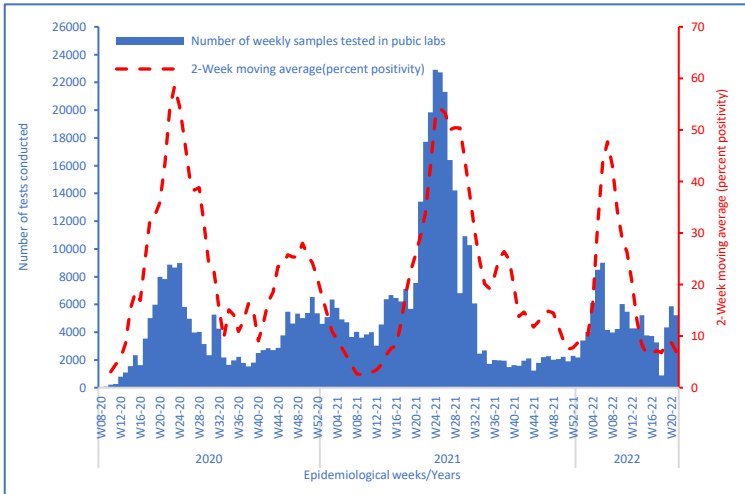


Figure 2: Geographic distribution of COVID-19 confirmed cases in Afghanistan (24 Feb 2020 - 28 May 2022)

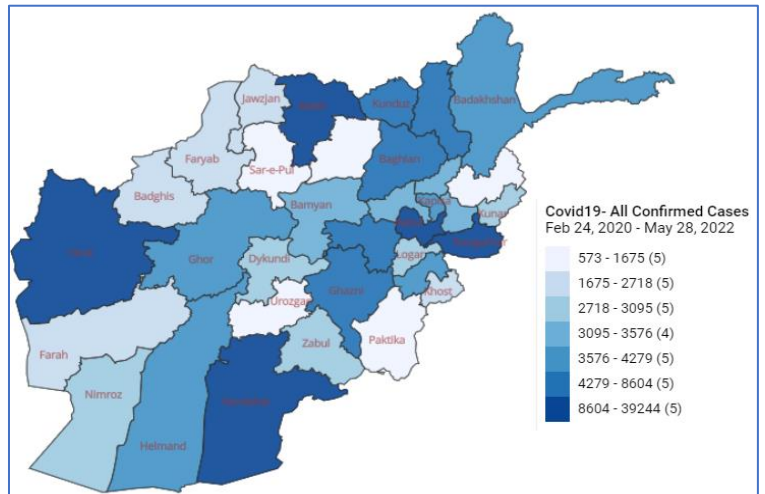


Figure 3: Weekly distribution of confirmed COVID-19 cases in Afghanistan (24 Feb 2020 - 28 May 2022)

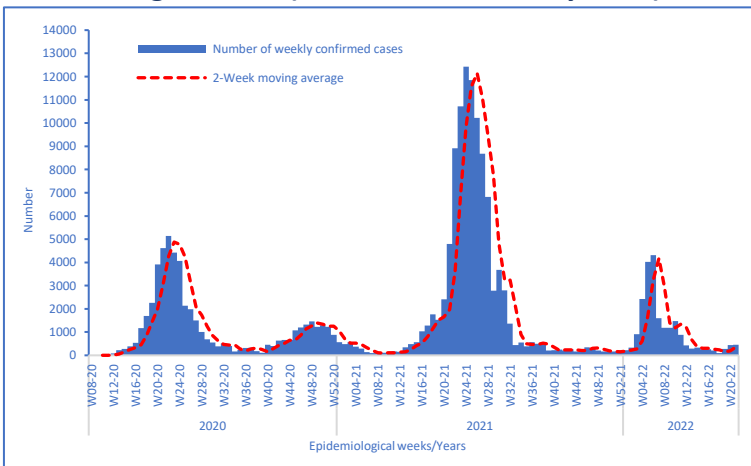


Figure 4: Weekly distribution of COVID-19 associated deaths in Afghanistan (24 Feb 2020 - 28 May 2022)

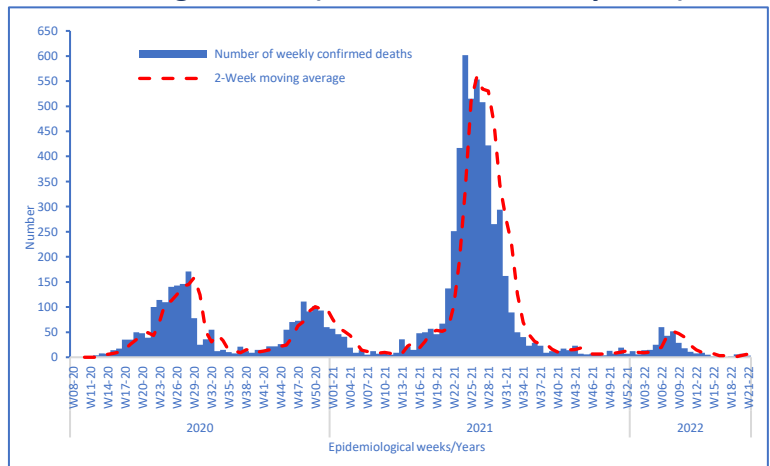


Figure 5: Age & sex distribution of COVID-19 cases in Afghanistan (24 Feb 2020 - 28 May 2022)

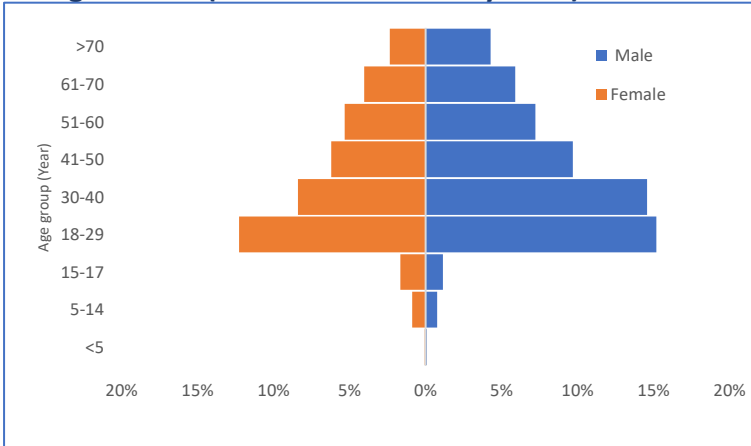
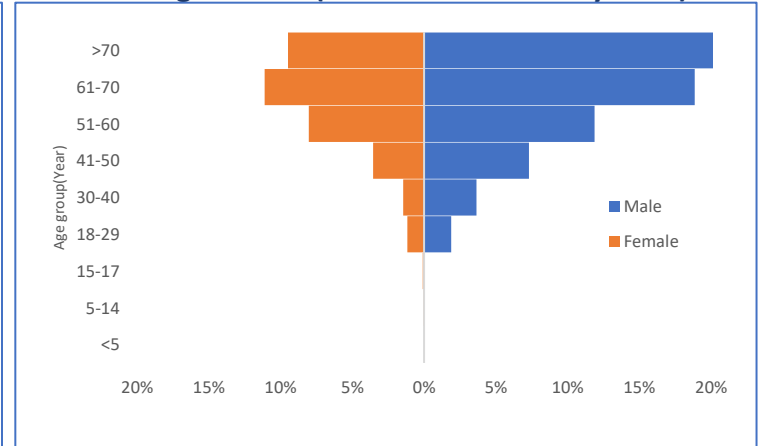


Figure 6: Age & sex distribution of COVID-19 associated deaths in Afghanistan (24 Feb 2020 - 28 May 2022)



Of the confirmed COVID-19 cases, **58%** have been reported among males and **42%** among females. Majority of cases have been reported among those aged 18-40 years.

Of the COVID-19 associated deaths, **65%** were reported among males and **35%** among females. The graph indicates that most reported deaths were among those aged over 70 years.

Figure 7: Proportion of underlying medical conditions among COVID-19 associated deaths in Afghanistan, 24 Feb 2020 - 28 May 2022 (n=1,755)

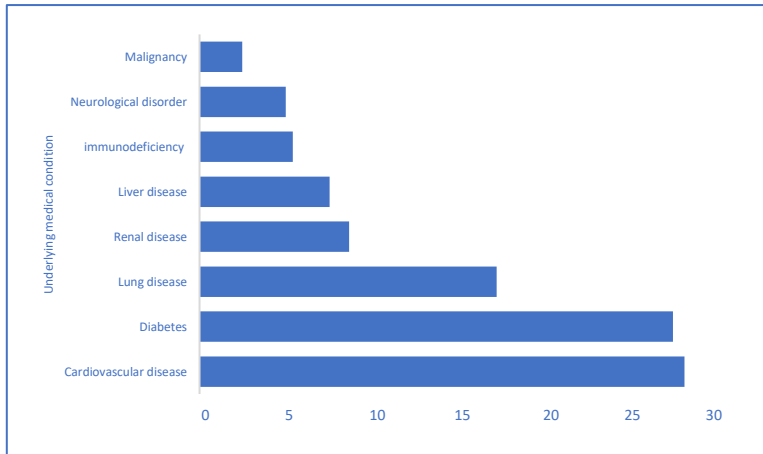
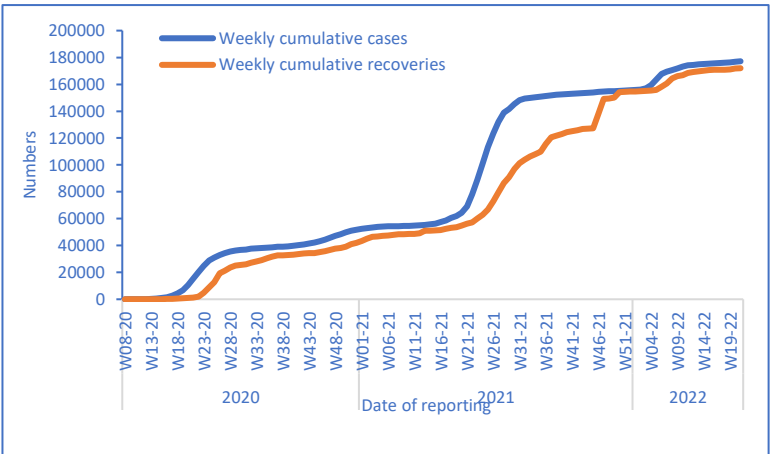


Figure 8: Weekly cumulative COVID-19 confirmed cases and recoveries in Afghanistan (24 Feb 2020 - 28 May 2022)



COVID-19 Vaccination highlights

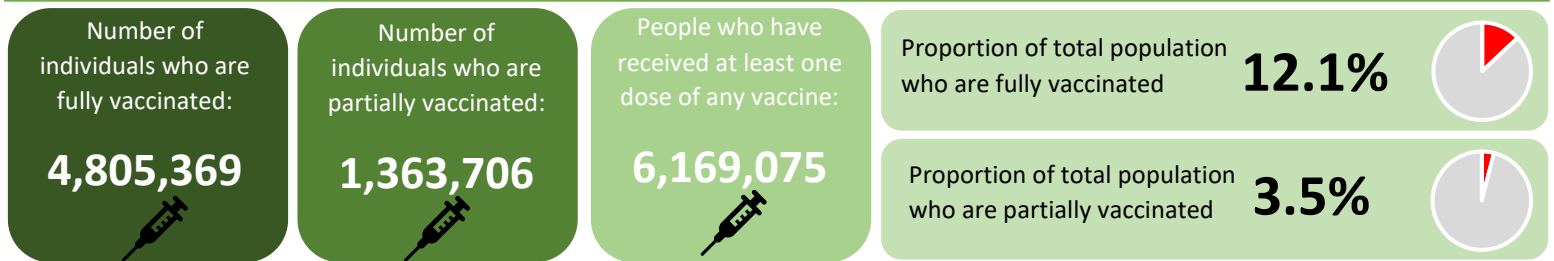


Figure 9: Distribution of individuals who received at least one dose by target group in Afghanistan, as of 28 May 2022

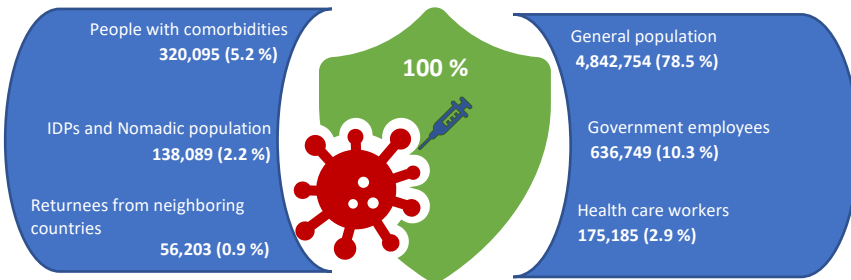
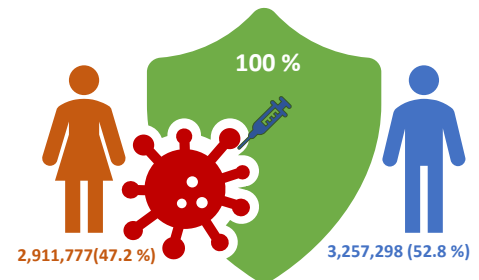


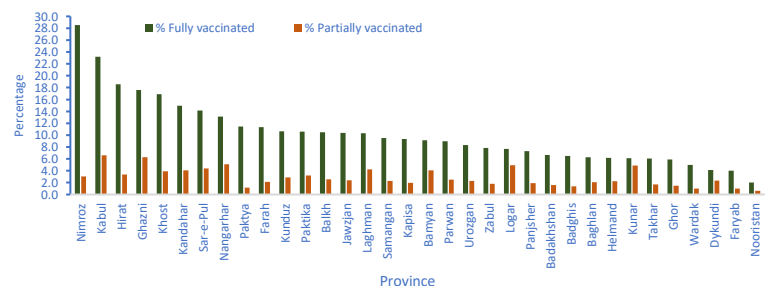
Figure 10: Distribution of administered doses by gender in Afghanistan, as of 28 May 2022



COVID-19 vaccination campaign

COVID-19 vaccination campaign is planned to take place in June 2022. The campaign will be conducted through 473 mobile vaccination teams in addition to 559 fixed sites (including Regional, provincial and district hospitals and some comprehensive health centers). The campaign will be conducted in the 34 provinces, targeting more than 5 million adult population aged 18 years and above using J&J and Sinopharm vaccines. Enough vaccine stock is available in country with more than 7 million doses to enable the campaign.

Figure 11: Proportion of fully & partially vaccinated individuals by province in Afghanistan, as of 28 May 2022



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- Total population: 39,269,174 (Ref: UN estimation, AFG_CMYP_2022)
Data source: DHIS2-MoPH-Afghanistan, Public dashboard: <http://covid.moph-dw.org/#/>