



The impacts of the disruption to the health system are already being felt. In recent weeks, access to health care has significantly declined for hundreds of thousands of vulnerable Afghans. There has been a surge in cases of measles and acute watery diarrhoea, almost 50% of children are at risk of malnutrition and a resurgence of polio is a major concern. All elements of the COVID-19 response have declined, and 1.6 million doses of COVID-19 vaccine remain unused. Health partners are moving ahead with efforts to sustain the Sehatmandi health facilities



3.4M

People to be reached with health services coordinated by the Health Cluster, by the end of 2021

3.9M

People to be covered by health supplies provided by WHO between Aug-Sept 2021

155K+

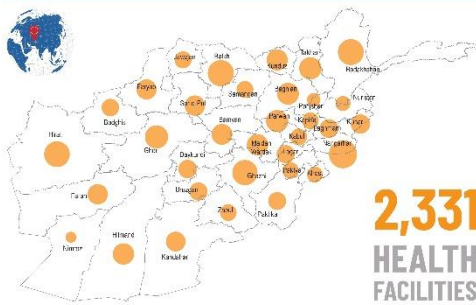
COVID-19 confirmed cases and 7,214 deaths as of 5 October

38 million

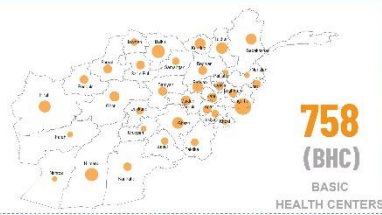
Needed till the end of 2021 to deliver WHO Emergency Plan for Afghanistan

SITUATION OVERVIEW

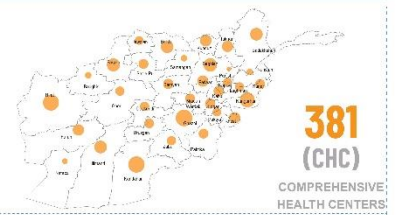
- **Sustaining health services:** The disruption to the system that was providing health care across the country through 2331 facilities is continuing to shrink access to health services for Afghans. The breakdown in health services is having a rippling effect on the availability of basic and essential health care, as well as on emergency response, polio eradication, and COVID-19 vaccination. As a stop-gap measure, the Global Fund to Fight AIDS, Tuberculosis and Malaria is providing US\$ 15 million to UNDP to sustain the 2331 health facilities for the month of October as well as cover the salaries of at least 25,000 health workers. In addition, UN's Central Emergency Response Fund (CERF) is providing US\$ 45 million to WHO and UNICEF to keep these facilities functional from November 2021 to January 2022. But this is not enough. WHO is continuing to explore long-term solutions with donors and partners, for supporting the health facilities.



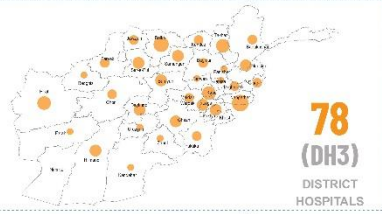
PROVINCE	(BHC)	(CHC)	(DH3)	(MHT)	Other	(PH2)	(SHC)	(RHI)	Total by province
Badakhshan	30	15	2	1	1	1	66		115
Badghis	19	4	1	2	4	1	21		52
Baghlan	20	17	2		2		40		81
Balkh	44	15	5		2		51		117
Bamyan	21	10	3		1		39		74
Daykundi	14	8	3	2	1	1	29		58
Farah	9	12	1		6	1	41		70
Faryab	20	16	2		2	1	29		69
Ghazni	35	26	3		1	1	43		109
Ghor	26	9	2	4	12		40		92
Hilmand	45	15	3	1			14		78
Hirat	36	24	4				49		113
Jawzjan	14	7	2		1		25		49
Kabul	24	10	4		1		8		48
Kandahar	18	25	1		2		20		66
Kapisa	18	8	1				20		48
Khost	8	12			2	1	20		43
Kunar	18	9	2	1	1	1	31		63
Kunduz	30	13	2	1	2		29		76
Laghman	18	9	2	1	3	1	27		60
Logar	19	10	3	1	6	1	14		56
Nangarhar	72	21	6	1	2		32	1	135
Nirroz	7	3		1	2	1	6		20
Nuristan	8	4	3		1		22		38
Paktika	15	9	2		2	1	28		55
Paktya	15	7	3		1		19	1	46
Panjshir	8	2	1		2		18		31
Parwan	30	12	1	1	2	1	37		84
Samangan	14	4	3	1	5		21		48
Sar-e-Pul	20	9	3	1	6		32		71
Takhar	34	12	4		2		33		85
Uruzgan	9	9	1	3		1	33		56
Wardak	26	9	2	2	2	1	36		78
Zabul	14	8	1				24		47
Total by facility	758	381	78	23	79	16	894	2	2,331



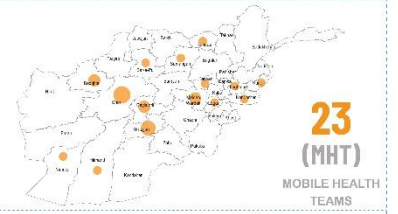
758
(BHC)
BASIC
HEALTH CENTERS



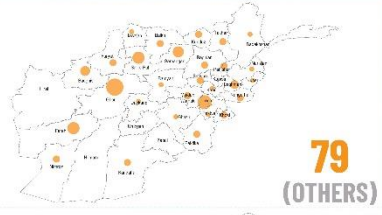
381
(CHC)
COMPREHENSIVE
HEALTH CENTERS



78
(DH3)
DISTRICT
HOSPITALS



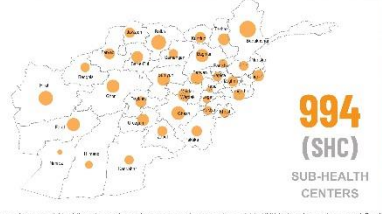
23
(MHT)
MOBILE HEALTH
TEAMS



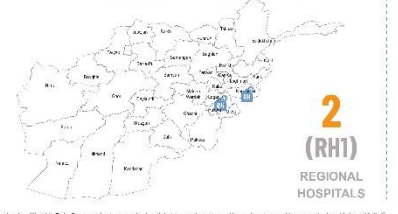
79
(OTHERS)
PROVINCIAL
HOSPITALS



16
(PH2)
PROVINCIAL
HOSPITALS



994
(SHC)
SUB-HEALTH
CENTERS



2
(RH1)
REGIONAL
HOSPITALS

The BHC, CHC, DH3, MHT, and PH2 facilities displayed on this map were collected and entered by the Health Cluster in Afghanistan. Health Cluster. If there are any corrections or updates to the data or the responsibility of the data provider and the accuracy of the data is the responsibility of the data provider and not the responsibility of WHO Afghanistan or the assistance of it by WHO Afghanistan to be assured. Creation Date: September 26, 2021. Data Sources: Health Cluster Afghanistan. Project and Organizational Support and Logistics Lead: Emma Hall, D.

- High-level WHO visit to Kabul:** Dr Tedros Adhanom Ghebreyesus, Director-General of the World Health Organization, and Dr Ahmed Al-Mandhari, WHO Regional Director for the Eastern Mediterranean visited Kabul in late September. The senior delegation witnessed the immediate needs of the Afghan people firsthand and met with stakeholders to define ways to urgently scale up the health response. Meetings were held with senior members of the Taliban leadership and UN partners. The delegation also met health care workers, patients, and WHO staff.

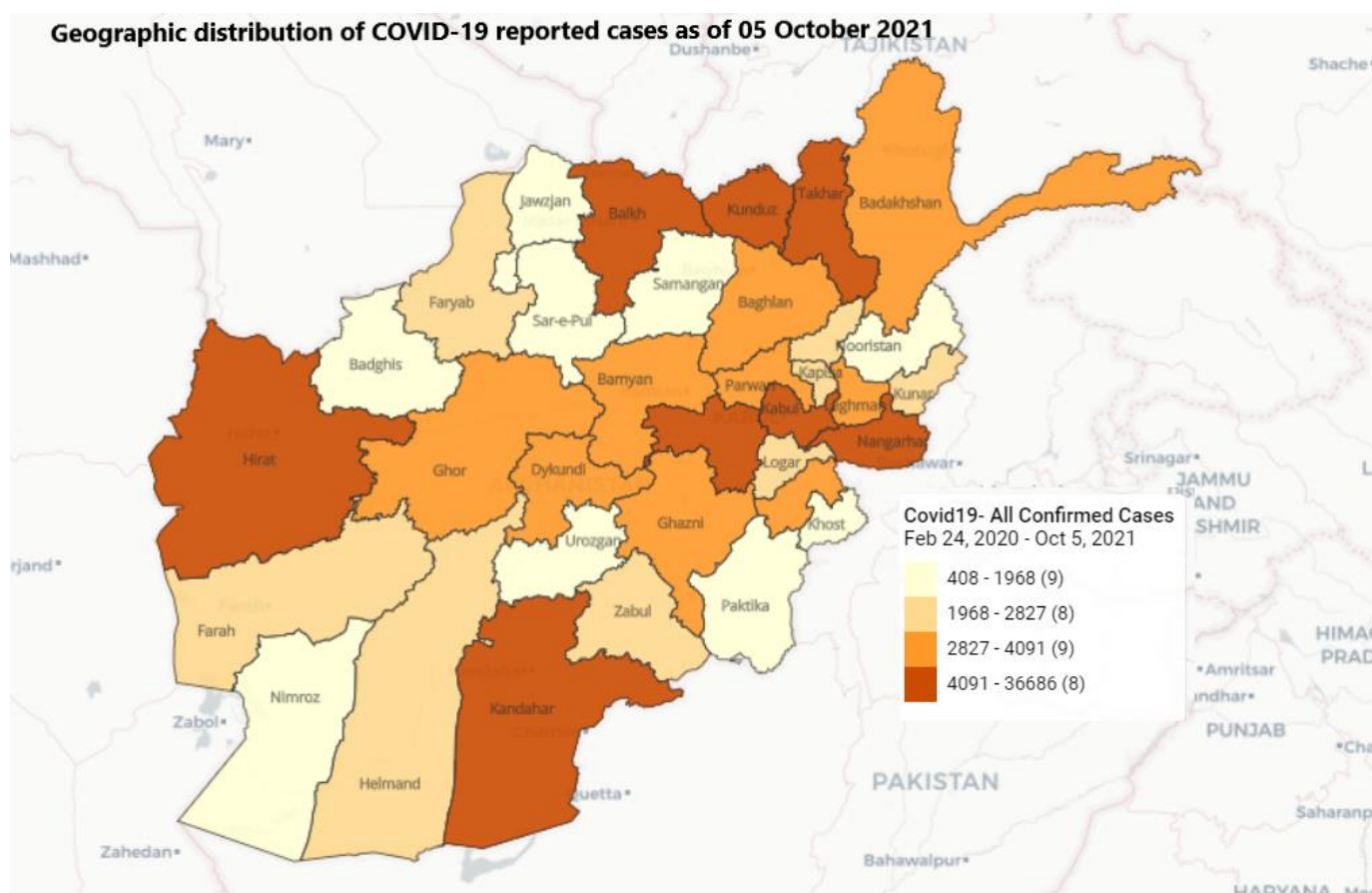


Dr Tedros Adhanom Ghebreyesus, Director-General of the World Health Organization, and Dr Ahmed Al-Mandhari, WHO Regional Director for the Eastern Mediterranean meet a patient at a hospital in Kabul

- COVID-19** – As of 5 October, 155,309 cases of COVID-19 and 7,221 deaths have been reported in Afghanistan. Underreporting of cases and limited testing remain key concerns. A 24% decline in testing at public laboratories was observed last week compared to the week before. A decline in COVID-19 cases has also been observed but this is linked to the surveillance system not functioning at full capacity and the reduction of Rapid Response Teams on the ground due to lack of funding to pay salaries of health workers and sustain operations. WHO has replenished supplies at COVID-19 laboratories but more is urgently need

to maintain stocks and laboratory functionality. A little over 2.4 million people have received at least one dose of the COVID-19 vaccine so far. There are currently 1.6 million unused doses of the vaccine in the country that need to be urgently utilized before they expire. WHO is coordinating to scale-up surveillance, testing, and vaccination along with other aspects of the COVID-19 response. A vaccination campaign covering 16 provinces is planned to be rolled out in the coming weeks, supported by WHO and UNICEF.

Geographic distribution of COVID-19 reported cases as of 05 October 2021



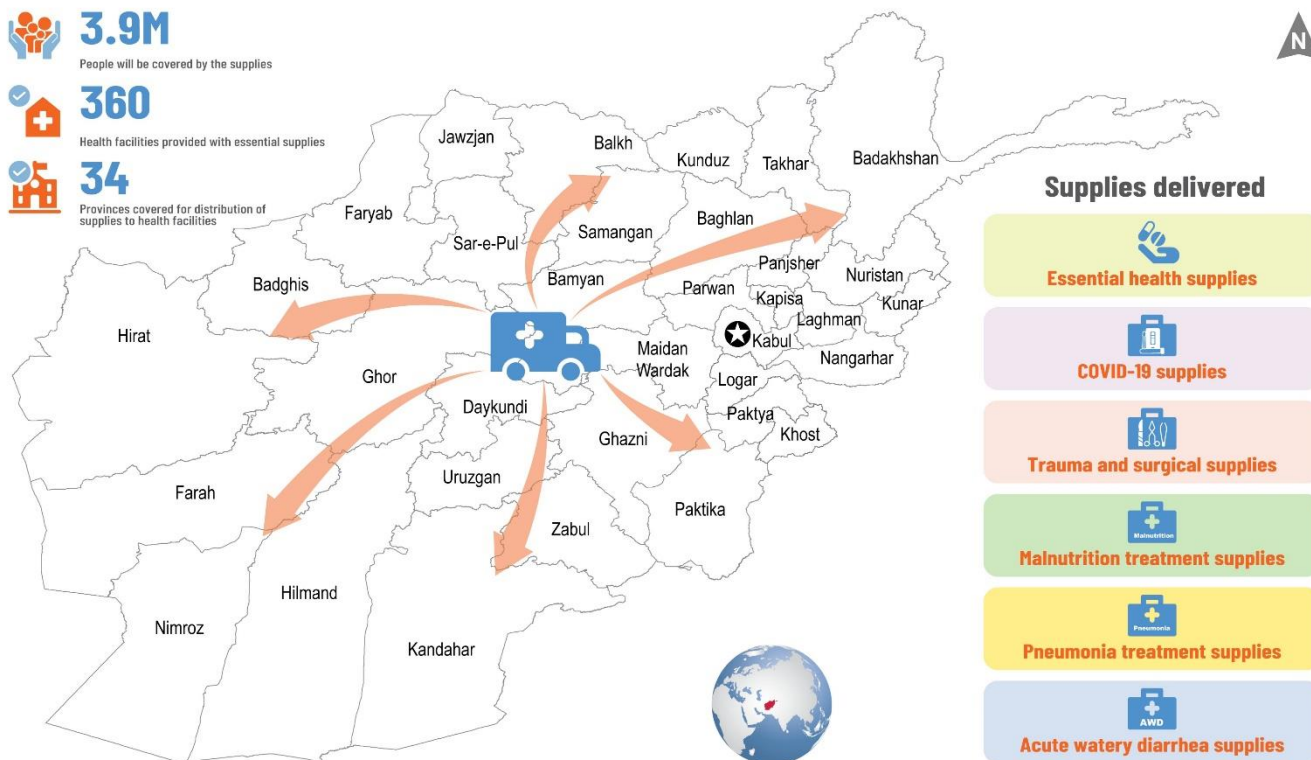
- Acute Watery Diarrhoea** - Afghanistan is experiencing an Acute Watery Diarrhea (AWD) outbreak. The first few cases of AWD were reported to National Diseases Surveillance and Response (NDSR) system at the Ministry of Public Health (MoPH) and WHO on 12 September 2021 from Tapa village of Sarobi district in Kabul province, followed by further cases from Kabul city on 14 September 2021. Since, 1223 cases of AWD and 5 deaths have been reported. Of these, 998 cases (86.1%) are from Kabul city and surrounding districts and 225 cases (18.4%) are from Sarobi district. Forty percent patients are aged between 15-29 years old, while those under 5 years old make up 4.5% of all cases. As of 5 October, 120 specimens have been collected from AWD patients, results are pending at the Central Public Health Laboratory in Kabul. WHO along with partners is delivering a joint response and monitoring the situation closely.
- Measles** – 105 outbreaks of measles have been reported in 66 districts in September, while sporadic cases of measles were reported from more than 200 districts across the country. A total of 27 measles-related deaths have been reported by the NDSR in 2021, so far. WHO is working with health partners to monitor the situation. Support is being provided to enhance surveillance and plan an outbreak response vaccination campaign.
- Supplies and logistics** – Shortage of life-saving medical supplies continues to persist at health facilities. WHO is scaling-up efforts fill urgent shortages as well as ensure health facilities have adequate stocks. Since August, WHO has airlifted 186 metric tonnes of essential medicines, surgical and trauma supplies,

COVID-19 response supplies, treatments for malnutrition and childhood pneumonia and supplies to treat AWD, through 9 flights supported by ECHO, Pakistan, Qatar, UAE and the World Food Programme. As part of ongoing efforts to dispatch medical supplies where they are needed the most, since August, WHO has distributed essential health supplies to cover the need of 3.9 million people at 360 health facilities across 34 provinces.

AFGHANISTAN: WHO Medical Supply Distribution Highlights (August - September 2021)



Despite challenges posed by the insecurity, the World Health Organization in Afghanistan has scaled up efforts to provide life-saving medical supplies to health facilities across Afghanistan.



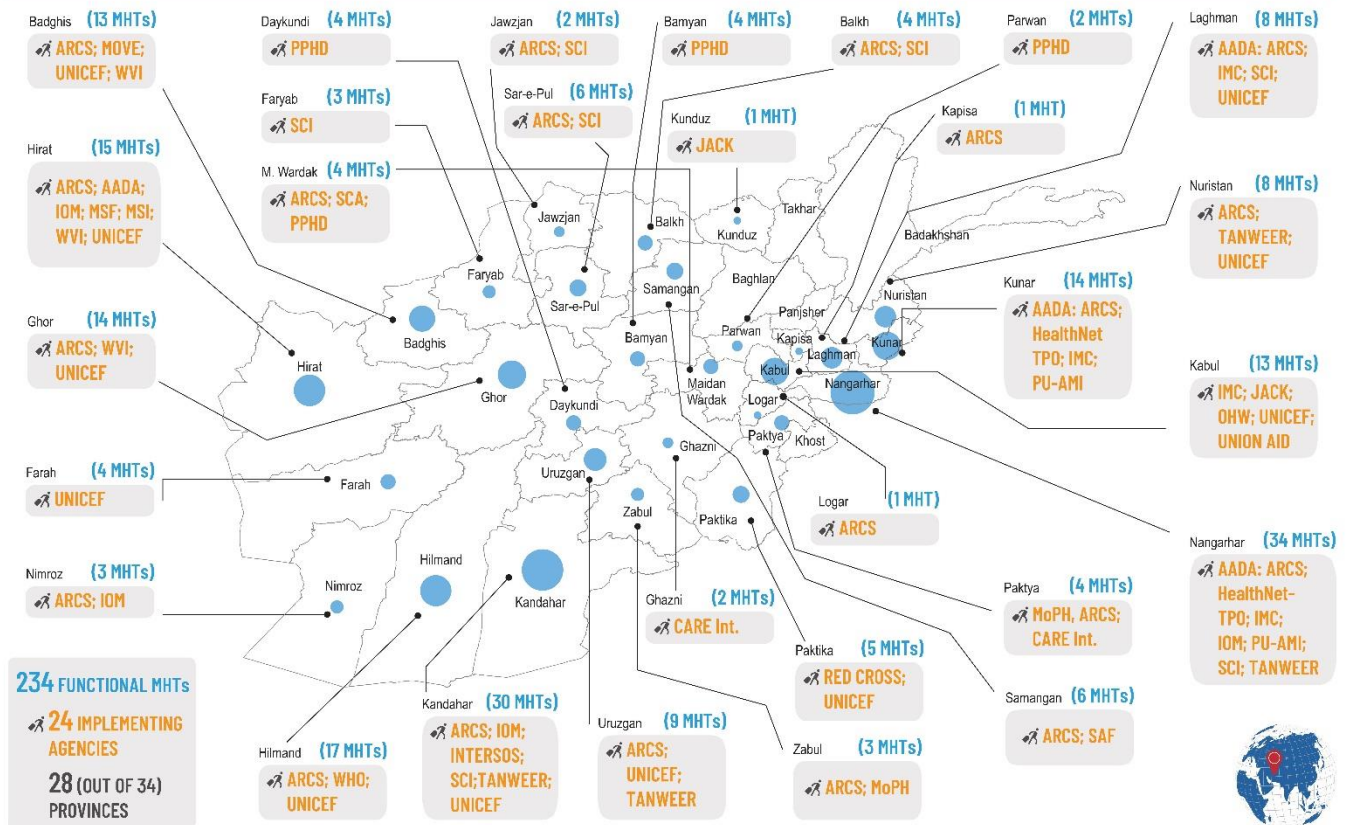
The designations employed and the presentation of the material on this map do not imply the expression of any opinion whatsoever on the part of the World Health Organization concerning the legal status of any country, territory, city or the area or its authorities, or concerning the delimitation of its frontiers or boundaries. This product is defined by the data shared with the WHO, the elements and freshness of the data are the responsibility of the data providers and no endorsement nor acceptance of it by WHO can be assumed. **Creation Date:** 8 October 2021. **Data Sources:** WHO and Afghan Geodesy and Cartography Head Office (ASCHG)

- **Polio** – With only one case of Wild Poliovirus Type 1 reported in 2021 so far, Afghanistan has an extraordinary opportunity to end polio. A national campaign with unimpeded access to children must move ahead urgently. WHO and UNICEF are maintaining preparedness to commence the campaign as soon as possible.

WHO RESPONSE

COORDINATION – HEALTH CLUSTER

- WHO and the Health Cluster partners are continuing to deliver a coordinated health response. In September the Health Cluster reached 450,000 people with primary and secondary health services, provided medical kits to meet the needs to 573,000 people and reached 68,000 people with health promotion and COVID-19 prevention messages and activities.
- Life-saving mobile health services continue to be provided by 234 mobile health teams in 29 provinces, supported by 24 implementing partners.



The boundaries, density, numbers, and designations displayed on this product are derived from the data shared with the Afghanistan Health Cluster. The elements and freshness of the data are the responsibility of the data providers and no endorsement, acceptance or approval by WHO Afghanistan can be assumed. Creation Date: 4 October 2021. Data Sources: WHO and Afghan Geography and Cartography Read: OH on COVID-19

- The Health and WASH Clusters are delivering a coordinated response to the AWD outbreak. Public awareness activities are underway, chlorination of water sources has started, and surveillance and testing has been scaled-up.

LOGISTICS AND SUPPLIES

- In September WHO sent essential medical supplies, trauma and surgical supplies and treatments for pneumonia to health facilities in Kabul, south, west and north regions to cover the health needs of 288,000 people.

COVID-19

- WHO established a new COVID-19 lab in Nimroz in September. Two new COVID labs in Kunar and Parwan have been established this week. Work is underway to complete establishment of labs in Laghman and Kapisa provinces. With these completed, there will be 36 WHO supported COVID-19 labs in the country.
- WHO has airlifted 50,000 COVID-19 tests to fill shortages at COVID-19 labs to boost testing and surveillance. Some 150,000 COVID-19 tests are in the pipeline.

Acute Watery Diarrhea

- A flight supported by ECHO, carrying around 14 metric tons of supplies to treat AWD landed in Kabul this week. WHO distributed these supplies to 2 hospitals in Kabul province to cover the health needs of 10,000 people.

- WHO is supporting the Rapid Diagnostic Testing (RTD) of AWD cases. Between 3-5 October 46 samples have been tested.
- WHO is providing technical and financial support for scaling-up AWD surveillance at 10 hospitals in Kabul. Twenty new staff for five Rapid Response Teams (RRTs) have been hired.



HEALTH NEED

- While funding is now in place to support 2331 health facilities till January 2022, urgent support from the international community is needed to ensure resources are in place to sustain these in the long-term.
- Support is also needed to maintain and scale-up the COVID-19 response, especially testing and vaccination and sustain the COVID-19 treatment facilities as this currently falls outside the funding channeled to sustain the 2331 health facilities.
- Medical supplies remain short across the country and more needs to be done to prepare health facilities to respond to rising health needs, winter-borne illnesses, and have contingency stocks in place.
- Routine immunization needs to be scaled up to prevent measles and other infectious disease outbreaks.
- Access to safe drinking water must be ensured, along with scaling up efforts to establish AWD treatment centres stocked with sufficient supplies and staff.

WHO RECOMMENDATION

- Partners must work closely with the Ministry of Public Health to sustain the 2331 health facilities for the next four months to avoid parallel systems.
- Donors must step up support to ensure plans and resources are in place to sustain health facilities beyond January 2022.
- COVID-19 vaccination campaign must proceed urgently to ensure 1.6 million vaccine doses are used before they expire.
- A national polio campaign needs to urgently be implemented to avoid resurgence of polio.



Further information:

- Dr Alaa Abouzaid, WHO Afghanistan Emergency Team Lead, abouzeida@who.int
- Bisma Akbar, WHO Afghanistan Communication Officer, akbarb@who.int