

Key Messages: UPDATED

- **People confirmed to have COVID-19: 34**
- **Key concerns: Border crossing areas in the country's west, social distancing and other containment measures**

(Source: Ministry of Public Health of Afghanistan)

Situation Overview: UPDATED

According to the [WHO Global Dashboard](#), as of 22 March a total of 267,013 cases of COVID-19 have been confirmed and 11,201 fatalities have been reported worldwide across 184 countries. On 11 March, WHO declared the COVID-19 outbreak as a global pandemic. Physical distancing measures can help to slow transmission of the virus and reduce the burden on the health system. But to suppress and control epidemics, countries must isolate, test, treat and trace. As the virus moves to low-income countries, WHO is deeply concerned about the impact it could have among populations with high HIV prevalence, or among malnourished children – the latter being of particular concern in Afghanistan. Travel restrictions by countries are changing rapidly and should be monitored on daily basis. Wide commercial flight suspensions to Kabul are expected to begin over the coming days and the United Nations Humanitarian Air Service (UNHAS) is investigating options for a possible international air-bridge service, although this would be dependent on funding and other considerations.

A total of 34 people are now confirmed to have the virus in 11 provinces, including Kabul for the first time – Hirat (18), Samangan (3), Balkh (2), Daikundi (1), Kapisa (1), Badghis (1), Logar (2), Zabul (2), Kandahar (1), Ghazni (1) and Kabul (2). Most people with the virus have a travel history outside Afghanistan. Contact tracing for the people confirmed with COVID-19 is ongoing. One patient in Hirat has reportedly recovered and been discharged from the treatment facility. To date, testing has been small scale with fewer than 400 COVID-19 tests conducted which may account for the relatively low number of confirmed cases given the high number of border crossings with Iran where there are thousands of cases. Social distancing is the best protection against the further spread of the virus however this is not being widely practiced in the country. On 14 March, the Government of Afghanistan announced that all schools would be closed for an initial period of four weeks – through to 18 April 2020. Public gatherings in Hirat have been banned until further notice.

PROTECTING YOURSELF AND OTHERS.....

Maintain at least 1 metre (3 feet) distance between yourself and anyone who is coughing or sneezing.

- **Why?** When someone coughs or sneezes they spray small liquid droplets from their nose or mouth which may contain virus. If you are too close, you can breathe in the droplets, including the COVID-19 virus if the person coughing has the disease.

Stay at home if you begin to feel unwell, even with mild symptoms such as headache and slight runny nose, until you recover.

- **Why?** Avoiding contact with others and visits to medical facilities will allow these facilities to operate more effectively and help protect you and others from possible COVID-19 and other viruses.

Response UPDATED

The focus of activities in Afghanistan is now on preparedness, containment and mitigation. The outbreak is likely to spread to other provinces, beyond those already affected. WHO is working to provide reliable modelling on the evolution of the virus in the specific context of Afghanistan with its unique vulnerabilities including its porous borders, erratic borders openings/closures, the weak health system, high malnutrition rates, poor water and sanitation infrastructure, the unequal access of women to health services and high rates of people with specific needs including physical disability and mental health issues.

MoPH is working closely with UN and other partners to rapidly expand in-country preparedness and containment capacity. The aim is to strengthen detection and surveillance capacity at points-of-entry into Afghanistan including airports and border-crossing sites (especially in the west), and to continue the training of medical staff on case-

management, risk communication and community engagement. MoPH has established six committees for the surveillance of COVID-19 at the national and provincial level: Points of Entry Committee; Population Surveillance Committee; Data Management Committee; National COVID-19 Contact Tracing Committee; the Lab Surveillance Committee and Public Relations. The level of support and activities in all key areas will need to be expanded rapidly to manage the further spread of the disease.

While Afghanistan has recently received 15,000 diagnostic kits from UAE and 4000 kits from China are being delivered in the weeks ahead, diagnostic testing is still stretched given the increasing demand. Testing capacity has now been expanded and contact diagnostic testing is now available in Hirat, as well as Kabul. Laboratory technicians are being trained on COVID-19 testing in both locations. Humanitarian partners have provided over 300 sets of Personal Protective Equipment (PPE) and masks have been provided to isolation wards in Hirat. Overall, health partners have trained some 360 healthcare workers on case management and infection prevention and control. Currently, a national isolation centre with a capacity of 100 beds, as well as regional and provincial isolation centers with total capacity of 991 beds, are in place. The Hirat Department of Public Health also informed that a new hospital with the capacity to hold 100 isolation beds is set up at the “Paediatric Hospital”. Four major airports with international flights and all ground crossings are staffed and equipped for screening of travellers with a focus on those arriving from global COVID-19 hotspots.

Partners have further installed temporary washing stations for returnees at screening facilities and are completing the construction of permanent WASH facilities – 19 facilities at the Islam Qala border crossing. Some 55 handwashing stations have been installed in all transit facilities in border areas in efforts to limit transmission. Community awareness activities in internal displacement sites in Hirat and COVID-19 trainings for 15 Mobile Health Teams in Ghor and Badghis provinces have also been provided.

The Inter-Cluster Coordination Team is establishing a COVID-19 Risk Communications Working Group to scale-up efforts on awareness raising about the need for social distancing and to combat rumours in the community. This will be stepped up this week. Improved awareness raising efforts at border crossings will also support this. Addressing rumours and community fears of seeking medical treatment through community engagement will be critical. The Government has also advised its provincial and district level counterparts to initiate awareness raising through community leaders and using mosques. In February, Awaaz started to collaborate with the World Health Organisation (WHO) to raise awareness and inform callers about COVID-19.

Cross Border Concerns: **UPDATED**

As of 22 March, WHO reports that there are 19,644 confirmed cases of COVID-19 in Iran. IOM reports that the flow of spontaneous returnees from Iran had surged since 8 March. From 15-18 March alone over 57,000 Afghans have returned from Iran at the Milak and Islam Qala crossings. Since 19 March, the return has subsided with a five-day slow-down anticipated for the Nawroz- Persian New Year holidays in Iran and Afghanistan. Only 500 people crossed yesterday and 400 today. All flights to and from Iran are in total suspension.

As of 22 March, there are 495 people confirmed to have COVID-19 in Pakistan. On 13 March, Pakistan announced it was sealing its western border with Afghanistan and Iran for an initial period of 14 days related to protective measures against COVID-19. This closure announcement came into effect on 16 March. On 20 March, the Prime Minister of Pakistan reportedly announced the country was allowing trucks through the Chaman- Spin Boldak border for a three-day period to ensure continued supplies of goods in Afghanistan. IOM reports that trucks are currently being allowed to cross at the Chaman border point to alleviate a backlog but it is feared that this opening may only last a few days. The humanitarian community is concerned about the impact of border interruptions on supplies of commercial goods which could drive up domestic prices in Afghanistan, as well as the impact on pipelines for humanitarian goods (e.g food) which are partially sourced in Pakistan.

Humanitarian partners and the authorities are closely monitoring market prices for key food commodities. Price rises in consumer goods as well as transportation costs will have a disproportionate effect on the finances of impoverished households, as well as the country's economy as a whole. Some 14.3m people are projected to be in crisis and emergency levels of food insecurity through until the end of March 2020. The current price situation may further threaten food security and the health and well-being of individuals, in turn raising the chances of a more severe impact if people are exposed to COVID-19.

In early March, Afghanistan's neighbours – Tajikistan, Turkmenistan and Uzbekistan – either closed their borders for civilian movement or suspended flights to and from Afghanistan- some level of commercial transport is continuing.

Operational Response Capacity:

On 16 March, the Government shared revised administrative regulations for its staff with focus on temporary alternate work modalities for older and pregnant staff. Additionally, some NGOs have already started reducing their international footprint in country, while others are preparing to scale-up to respond to the COVID-19 risk and ensure continuity of existing services in the areas where they operate. Already, due to a scale-down of operations among livelihoods partners,

seasonal livelihood support activities that were planned to start in April have temporarily been paused, while existing livelihood support such as distribution of seeds is planned to continue.

UN Flight Operations: **UPDATED**

There are currently no major disruptions to any United Nations Humanitarian Air Service (UNHAS) flights inside the country and daily operations are ongoing. However, COVID-19 is challenging the financial viability of the service due to a drastic reduction of cost recovery funds because there are fewer passengers. Additional funding is being sought to support the continuation of the service and potentially for an international air bridge, should this become necessary.

Coordination:

Global/Regional

- A WHO Regional Office for the Eastern Mediterranean (EMRO) support mission has wrapped up its visit to Afghanistan. The results of the mission will support WHO Afghanistan in enhancing operational readiness and response measures in six major areas: surveillance and rapid response; risk communication and community engagement; infection prevention and control; and mass gathering/points of entry. Recommendations on risk communication and community engagement, infection prevention control and surveillance are being reviewed and will be implemented.

National **UPDATED**

- The humanitarian community's overall efforts towards the response are coordinated under the Humanitarian Country Team as the strategic decision-making body and the Inter-Cluster Coordination Team as its operational arm.
- The Inter-Cluster Coordination Team (ICCT) has developed a draft *COVID-19 Multi-Sector Humanitarian Country Plan* that outlines preparedness and response efforts for the next three months. This costed plan is expected to be endorsed by the HCT in the next week and will form the basis of an HRP revision in the near future. The Plan complements the health response to the COVID-19 outbreak in Afghanistan and will feed into a Global COVID-19 appeal that is currently under development. Importantly, the ICCT Plan also aims to highlight the potential effects of the outbreak on ongoing humanitarian response and spell out mitigation measures being employed to reduce interruptions to life-saving services.
- WHO together with the Health Cluster has developed and is implementing a health-focused COVID-19 Preparedness Plan. This complements the MoPH *Emergency Response Plan for Coronavirus 2020* and additional funding is currently being sought for this plan.

Sub-national

- At the regional-level, Humanitarian Regional Teams are engaged in local planning for the outbreak and are liaising closely with local Government and health authorities. Price rises in local markets are being monitored by staff on the ground.
- In the West, focal points have been identified for each of the relevant pillars under the Country Plan and 3Ws (Who does what, where) are being collated.
- In the East, the UN is providing technical and financial support to broadcast COVID-19 awareness messages in four local media outlets (Sharq and Inikas TV as well as Nargis and Sharq radios). Other awareness-raising activities are also underway. UNICEF is providing infection prevention/hygiene supplies to the COVID isolation ward established in Haji Camp in Jalalabad city.
- Other new, non-COVID-19 related needs are also being addressed simultaneously. In the West, routine needs assessments are continuing for those who have been newly displaced due to conflict.

Funding:

- WHO has partnered with the UN Foundation and the Swiss Philanthropy Foundation to launch the [COVID-19 Solidarity Response Fund](#) to enable individuals and organization to contribute to the response. Hosted by the UN Foundation and the Swiss Philanthropy Foundation, funds will be used to coordinate the response, to buy masks, gloves, gowns and goggles for health workers, to buy diagnostic tests, to improve surveillance, and to invest in research and development.
- On 3 March, the World Bank announced an initial package of up to US\$12 billion in loans and grants in immediate support to countries coping with the health and economic impacts of COVID-19. The World Bank support will prioritise the poorest countries and those at high risk with low capacity.
- On 1 March, the Under-Secretary-General for Humanitarian Affairs and Emergency Relief Coordinator released \$15 million from the Central Emergency Response Fund (CERF) to support global efforts to contain the COVID-19 virus. The funding will help countries with fragile health systems boost their detection and response operations.
- On 24 February, EU committed €232 million for global efforts to tackle COVID-19 outbreak. Part of these funds will be allocated immediately, while some will be released in the coming months.
- On 25 February, the Government of Afghanistan announced the availability of \$15 million to respond to COVID-19 outbreak and an additional \$10 million in reserve funds for MoPH.

- On 26 February, the UN Humanitarian Coordinator, supported by the Advisory Board of the Afghanistan Humanitarian Fund (AHF), allocated \$1.5 million for urgently required COVID-19 preparedness and response capacity in-country.
- \$2m from the USA and ECHO has been provided to WHO to accelerate preparedness and containment activities in Afghanistan.

More Information

IATA

- For the latest available information on travel restrictions, please see link below:
<https://www.iatatravelcentre.com/international-travel-document-news/1580226297.htm>

WHO

- WHO situation dashboard: <https://experience.arcgis.com/experience/685d0ace521648f8a5beeeee1b9125cd>
- General information: <https://www.who.int/health-topics/coronavirus>
- Advice for public: <https://www.who.int/emergencies/diseases/novel-coronavirus-2019/advice-for-public>
- Global surveillance for human infection with coronavirus disease: [https://www.who.int/publications-detail/global-surveillance-for-human-infection-with-novel-coronavirus-\(2019-ncov\)](https://www.who.int/publications-detail/global-surveillance-for-human-infection-with-novel-coronavirus-(2019-ncov))
- Advice for international travel and trade: <https://www.who.int/ith/2020-24-01-outbreak-of-Pneumonia-caused-by-new-coronavirus/en/>
- Introduction to COVID-19 online course: <https://openwho.org/courses/introduction-to-ncov>
- WHO Afghanistan Twitter page: <https://twitter.com/WHOafghanistan>
- COVID-19 myth busters: <https://www.who.int/emergencies/diseases/novel-coronavirus-2019/advice-for-public/myth-busters>
- When and how to use masks: <https://www.who.int/emergencies/diseases/novel-coronavirus-2019/advice-for-public/when-and-how-to-use-masks>
- Social stigma associated with COVID-19: https://www.epi-win.com/sites/epiwin/files/content/attachments/2020-02-24/COVID19%20Stigma%20Guide%2024022020_1.pdf
- IEC material (in English, Dari and Pashtun):
<https://www.humanitarianresponse.info/en/operations/afghanistan/health/documents/publication-date/2020?search=COVID-19%20Poster>

United Nations

- Updates on COVID-19 for the public as well as for UN Staff at UNHQ and UN Personnel worldwide:
www.un.org/coronavirus
- Recommendations developed by UN Medical Directors:
https://hr.un.org/sites/hr.un.org/files/Coronavirus_RMP_2020-03-02_FINAL_0.pdf
- Information and guidelines specifically for UN personnel: <https://hr.un.org/page/coronavirus-disease-covid-19>
- Information on telecommuting: <https://iseek.un.org/telecommuting>
- For Secretariat Staff, the Coronavirus page on iSeek remains the central repository of stories, broadcast and announcements sent by Management and Medical services as well as Regional Offices for field missions with specific local information: <https://iseek.un.org/coronavirus>

Inter-Agency Standing Committee

- IASC-endorsed COVID-19 guidance: <https://interagencystandingcommittee.org/covid-19-outbreak-readiness-and-response>

*** The next update will be published on 24 March 2020 unless there is a significant change in the situation

For further information, please contact:

Dr. David Lai, Health Cluster Coordinator, Health Emergencies Programme, WHO, laidavid@who.int, Tel. (+93) 078 176 4906 (for Technical Expertise)

Dr. Dauod Altaf, Team Lead, WHO Health Emergency, WHO, altafm@who.int, Tel. (+93) 0782200342 (for Technical Expertise)

Danielle Parry, Head of Strategy and Coordination Unit, OCHA, parryd@un.org, Tel. (+93) 0793001124 (for Information)