








AFGHANISTAN

INFECTIOUS DISEASE OUTBREAKS
SITUATION REPORT | Epidemiological week #24-2025

No. 24 (08-14 Jun 2025)

Disease Outbreaks	 Measles (Suspected)	 AWD with dehydration	 Dengue fever (Suspected)	 CCHF (Suspected)	 Malaria (Confirmed)	 ARI-Pneumonia	 COVID-19 (Confirmed)
Cumulative cases 2025	67,586	58,426	546	529	13,280	772,410	2,165
Cumulative deaths 2025 (CFR %)	423 (0.6)	17 (0.03)	0 (0.0)	35 (6.6)	0 (0.0)	1,698 (0.2)	4 (0.2)

Data from 612 (99.8%) out of 613 sentinel sites

Measles

(29 Dec 2024-14 Jun 2025)


67,586

Total Cases


423

Total Deaths


8,497

Sample tested





5,448

Lab confirmed cases


64.1%

Test positivity rate

Table 1: Summary of the measles outbreak in the last eight weeks in Afghanistan (20 Apr – 14 Jun 2025)

Indicators	W17	W18	W19	W20	W21	W22	W23	W24	Trend line
Suspected cases	3,729	3,905	3,808	4,043	3,613	3,196	2,416	2,683	
Suspected deaths	15	27	30	21	26	16	11	13	
CFR (%)	0.4	0.7	0.8	0.5	0.7	0.5	0.5	0.5	

- The epi curve of suspected measles cases has shown a steady increase since the beginning of 2025, reaching its highest peak in week 16 with 4,172 reported cases (Figure 1), however, the number of suspected cases has been steadily declining over the past 4 weeks. The trend in 2025 is higher than the 3-year average (2022-2024) (Figure 2).
- During week 24-2025, a total of 2,683 suspected cases and 13 associated deaths (CFR=0.5%) were reported, which shows an 11.1% increase in the number of suspected cases compared to the preceding week.
- Out of the total 2,683 cases, 1,224 (45.6%) were females and 2,000 (74.5%) were under-five children.
- All of 13 new deaths were under-five, while 8 (61.5%) were females, reported from 6 provinces: Herat (6), Farah (2), Far-yab (2), Jawzjan (1), Badakhshan (1), and Kandahar (1).
- Since the beginning of 2025, 67,586 suspected measles cases and 423 associated deaths (CFR=0.6%) were reported. Out of total cases, 31,734 (47.0%) were females, while 52,542 (77.7%) were under-five children.
- Since the beginning of 2025, the highest cumulative incidence of suspected measles cases per 10,000 population has been reported from Helmand (61.4), followed by Badakhshan (41.3), Nuristan (40.6), Jawzjan (37.3), and Urozgan (32.2) (Figure 3).

Figure 1. Weekly distribution of suspected measles cases in Afghanistan, 29 Dec 2024 to 14 Jun 2025 (N= 67,586)

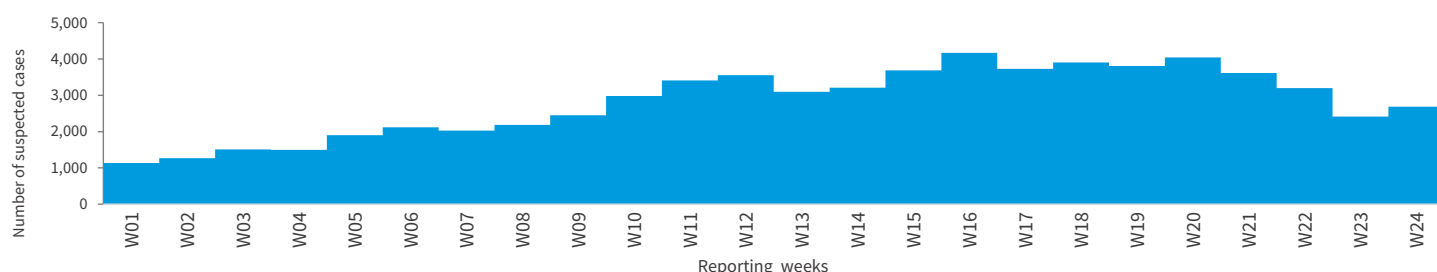




Figure 2. Comparison between the trends of suspected measles cases in 2025 vs 3-year average (2022-20224) and the endemic level

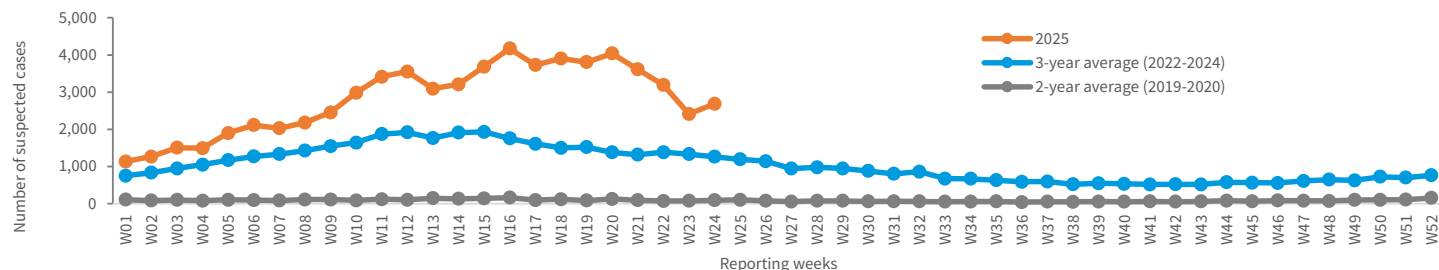
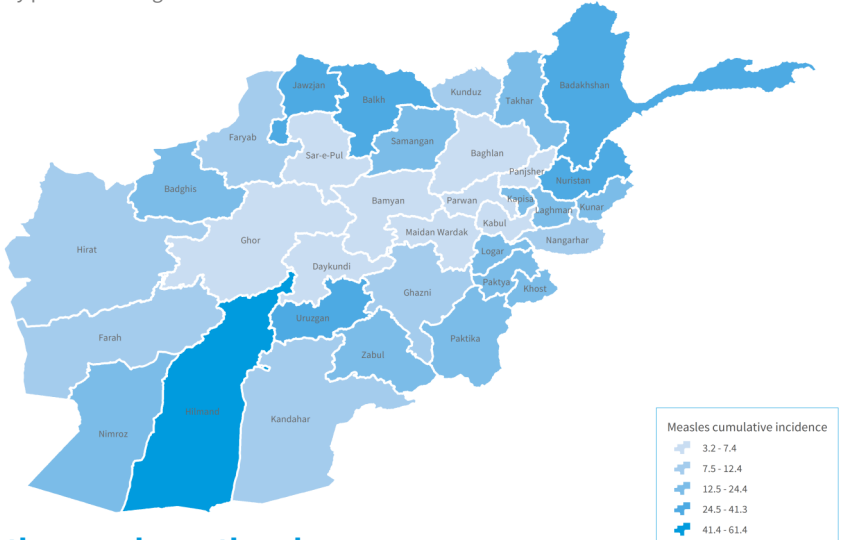


Figure 3. Suspected measles cumulative incidence per 10,000 population by province in Afghanistan 29 Dec 2024-14 Jun 2025

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Suspected measles
cumulative incidence
per 10,000 population by
province 29 Dec 2024 – 14 Jun 2025



Updates on the preparedness and response to the measles outbreak

- During week 24-2025, a total of 959 children aged 9-59 months were vaccinated against measles as part of the outbreak response in 9 provinces (Kabul, Parwan, Wardak, Urozgan, Kandahar, Zabul, Paktya, Paktika and Farah). This brings the number of children aged 9-59 months vaccinated against measles as part of outbreak response immunization activities to 23,040 across the country since the beginning of 2025.
 - Since the beginning of 2025, the following activities have been conducted to address the measles outbreak:
 - A total of 168 Health Care Workers (HCWs) including 48 females have been trained in measles case management from 4 regions: Central (68, including 10 females), West (40, including 20 females), North (30, including 9 females), and East (30, including 9 females).
 - A total of 180 measles case management kits have been distributed to 34 provinces across the country.
 - An online measles awareness campaign has been conducted through the World Health Organization (WHO) official social media accounts ([Facebook](#) and [X](#)), reaching approximately 20,573 individuals.

Acute Watery Diarrhea (AWD) with Dehydration
(29 Dec 2024-14 Jun 2025)

58,426
Total AWD with dehydration cases

17
Total AWD with dehydration deaths

3,703
Samples tested for AWD with dehydration (RDTs)

279
RDT-positive cases for AWD with dehydration

7.5%
RDT positivity rate for AWD with dehydration

Table 2: Summary of the AWD with dehydration outbreak in the last eight weeks in Afghanistan (20 Apr – 14 Jun 2025)

Indicators	W17	W18	W19	W20	W21	W22	W23	W24	Trend line
Number of cases	2,900	3,160	3,478	3,853	4,160	4,268	3,797	3,897	
Number of deaths	2	0	1	0	1	4	0	0	
CFR (%)	0.07	0.00	0.03	0.00	0.02	0.09	0.00	0.00	



- The epidemiological curve has shown a gradual increasing trend since week 08-2025, which coincides with the start of the warmer weather (Figure 4).
- During week 24-2025, 3,897 AWD with dehydration cases with no associated deaths were reported from 187 districts, which shows a slight increase in the number of cases compared to the previous week.
- Out of the 3,897 AWD with dehydration cases, 1,868 (47.9%) were females and 2,030 (52.1%) were under-five children.
- During week 24-2025, no new district reported alert of AWD with dehydration.
- Since Jan 2025, 58,426 cases of AWD with dehydration with 17 associated deaths (CFR = 0.03%) were reported. Out of total cases, 28,667 (49.1%) were females, while 33,586 (57.5%) were under-five children.
- Since Jan 2025, 3,703 Rapid Diagnostic Tests (RDT) have been conducted on AWD with dehydration cases, of which 279 tests turned positive (positivity rate 7.5%).
- Since the beginning of 2025, the highest cumulative incidence of AWD with dehydration per 10,000 population was reported from Nimroz (49.2), followed by Paktya (37.8), Khost (36.2), Kabul (31.6), and Farah (31.3) (Figure 5).

Figure 4. Weekly distribution of AWD with dehydration cases in Afghanistan 29 Dec 2024– 14 Jun 2025 (N=58,426)

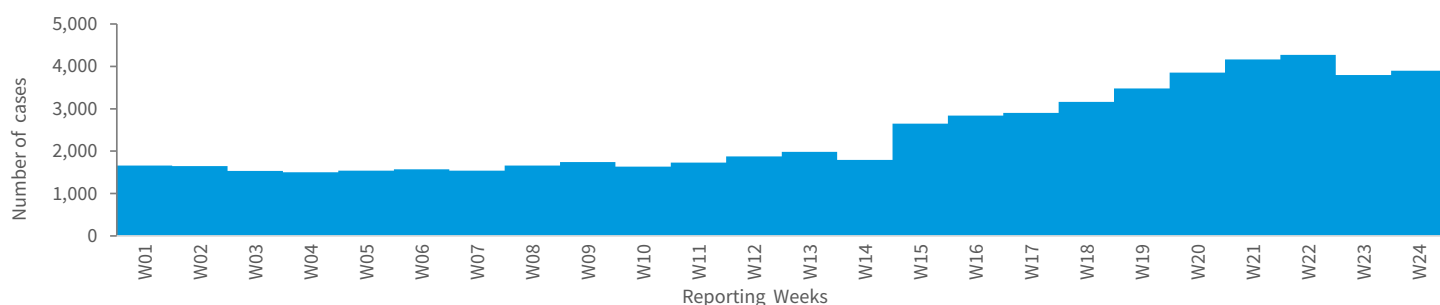
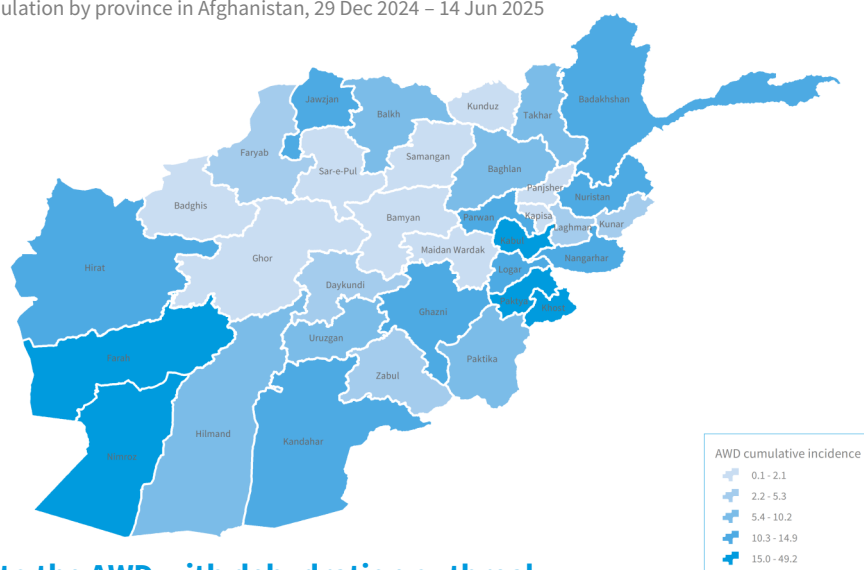


Figure 5. AWD with dehydration cumulative incidence per 10,000 population by province in Afghanistan, 29 Dec 2024 – 14 Jun 2025

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AWD with dehydration cumulative incidence per 10,000 population by province 29 Dec 2024 – 14 Jun 2025



Updates on the preparedness and response to the AWD with dehydration outbreak

- Since the beginning of 2025, the following activities have been conducted as part of AWD with dehydration outbreak response activity:
 - 30 HCWs, including 7 females, have been trained on AWD with dehydration case management from the East region.
 - 300 AWD with dehydration case management kits have been distributed to all 34 provinces.
 - 800 kits of Cary-Blair and 1,330 kits of Rapid Diagnostic Test (RDTs) have been distributed to all 34 provinces.
 - 44 National Disease Surveillance and Response (NDSR) staff, including 2 females, have been trained on surveillance data management, analysis, and visualization from 34 provinces.
 - 26 Surveillance Support Team (SST) members, including 1 female, have been trained on surveillance functions, rapid response, and Water Quality Management (WQM) from 6 provinces (Kabul, Kunar, Laghman, Nangarhar, Kunduz, and Kandahar).
 - 60 boxes (100 gloves/box) of gloves have been distributed to the Kabul surveillance office.

WASH update:

In May 2025, the following WASH response activities were implemented:

- 16,876 individuals in Kabul, Kunduz and Paktika provinces participated in hygiene promotion sessions.
- 4,144 individuals in Kabul province received family hygiene kits.
- 1,358 individuals were provided clean drinking water by construction of deep boreholes with solar powered piped system in Nangarhar province.

Dengue Fever

(29 Dec 2024-14 Jun 2025)



546

Total Cases



0

Total Deaths

52

*Sample tested

49

By PCR

3

By NS1

8


Lab confirmed cases

6

By PCR

2




By NS1



15.4%

Test positivity ratio

Table 3: Summary of the dengue fever outbreak in the last eight weeks in Afghanistan (20 Apr – 14 Jun 2025)

Indicators	W17	W18	W19	W20	W21	W22	W23	W24	Trend line
Suspected cases	35	33	58	41	68	49	49	35	
suspected deaths	0	0	0	0	0	0	0	0	
CFR (%)	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	

- The epi curve of suspected dengue fever cases shows increasing trend since week 15-2025 which could be attributed to the summer season and warmer temperature in the East region, warranting close monitoring (Figures 6 & 7).
- During week 24-2025, 35 suspected cases of dengue fever with no associated deaths were reported from Nangarhar province compared to 49 cases in the preceding week. This decrease could be attributed to Eid-ul-Adha holidays and health seeking behavior. Out of total cases, 34 (97.1%) cases were over-five years old, while 12 (34.3%) were females.
- Since the beginning of 2025, 546 suspected dengue fever cases, with no associated deaths were reported from 6 provinces (Nangarhar, Laghman, Kunar, Kabul, Ghazni, and Paktya). Out of total cases, 526 (96.3%) were over-five years old, while 239 (43.8%) were females.
- Since the beginning of 2025, a total of 52 samples have been tested, out of which 8 were positive (positivity rate 15.4%). The geographical distribution of suspected dengue fever cases and the percent change of new cases in Nangarhar province of Afghanistan is shown in Figure 8.

Figure 6. Weekly distribution of suspected dengue fever cases in Afghanistan 29 Dec 2024– 14 Jun 2025, (N=546)

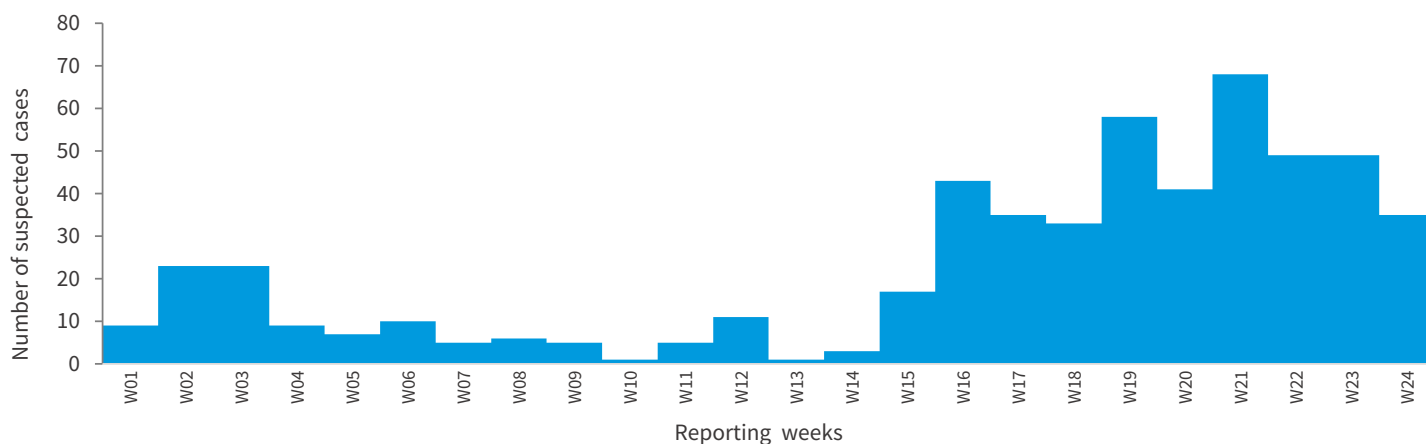
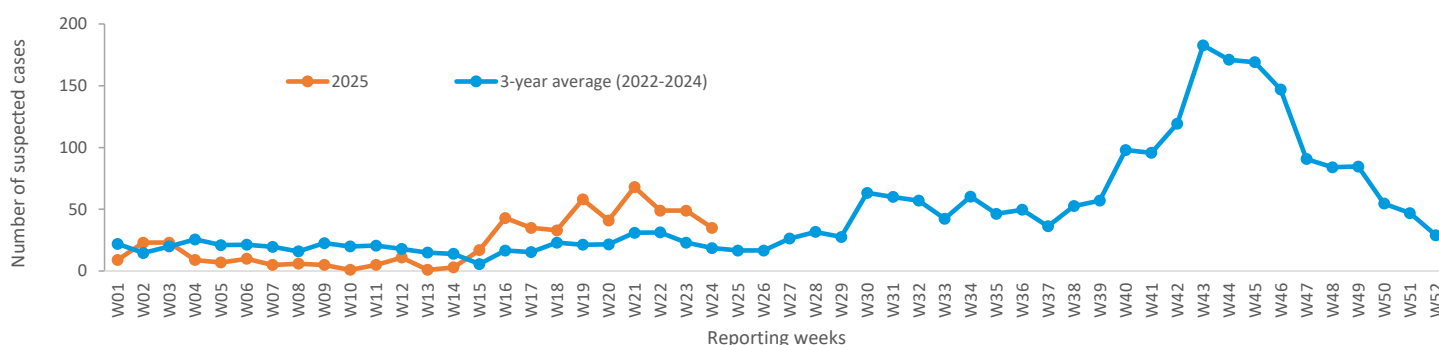
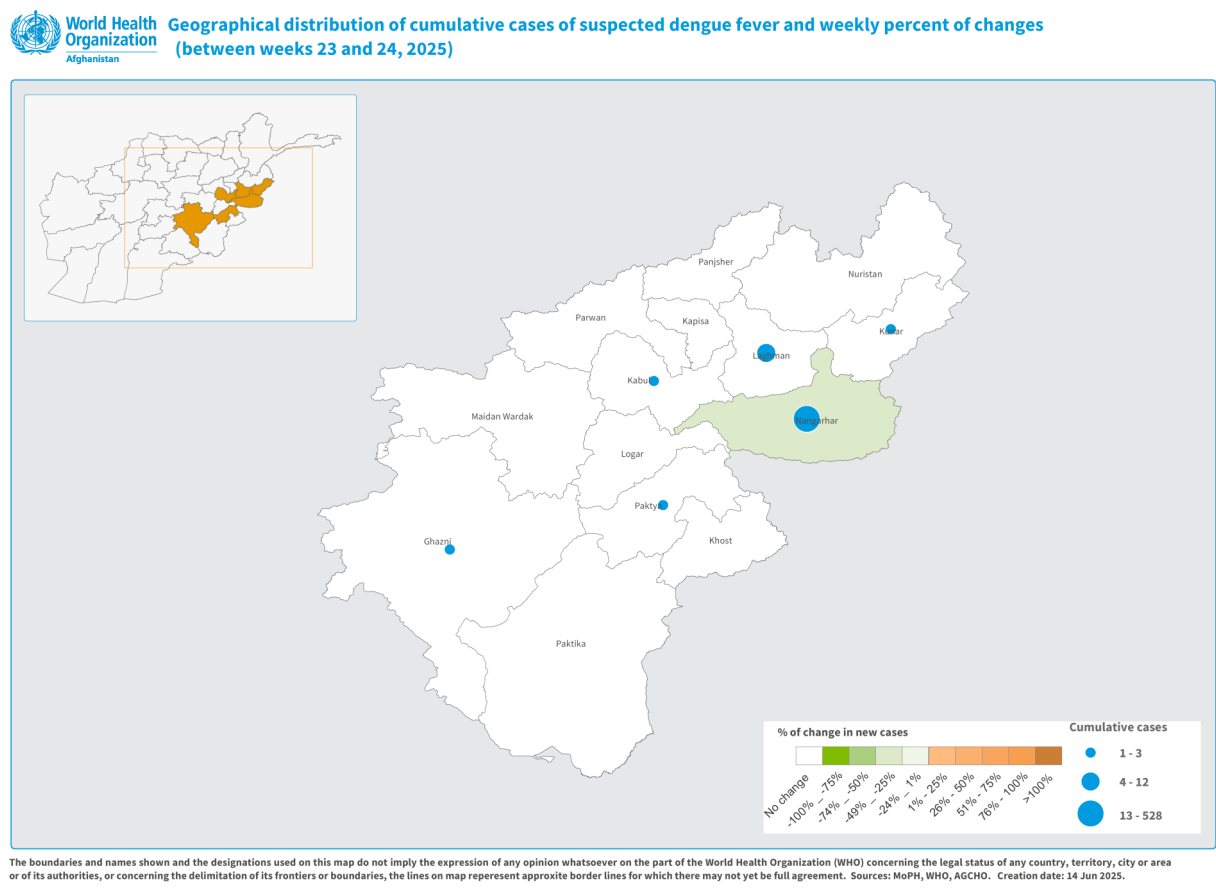


Figure 7: Comparison between the trends of suspected dengue fever cases in 2025 vs 3-year average (2022-2024)




*Note: Dengue fever laboratory data was reviewed, utilizing the confirmed case definition from WHO. This definition is characterized by confirmation through PCR, positive virus culture, DENV NS1 antigen detection, seroconversion of IgG in paired sera, or a significant increase (fourfold) in IgG titer in paired sera. The focus was placed on cases confirmed by PCR and DENV NS1 antigen detection, excluding cases that were only positive for IgM or IgG based on a single sample https://cdn.who.int/media/docs/default-source/outbreak-toolkit/dengue-outbreak-toolbox_20220921.pdf?sfvrsn=29de0271_2


Figure 8. Geographical distribution of suspected dengue fever cases and percent change of new cases in the East region, 29 Dec 2024– 14 Jun 2025





Crimean Congo Hemorrhagic Fever (CCHF)


(29 Dec 2024-14 Jun 2025)




**529**
Total CCHF cases

**35**
Total CCHF deaths

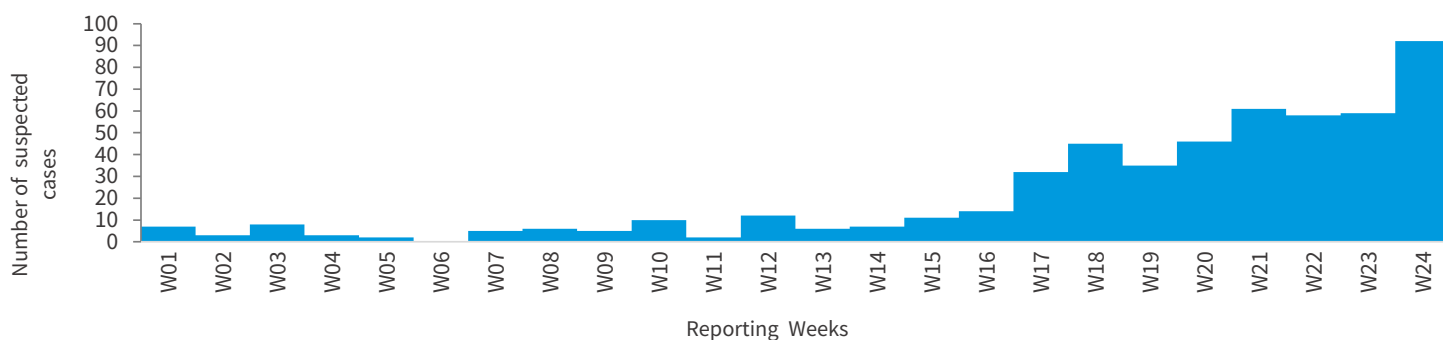
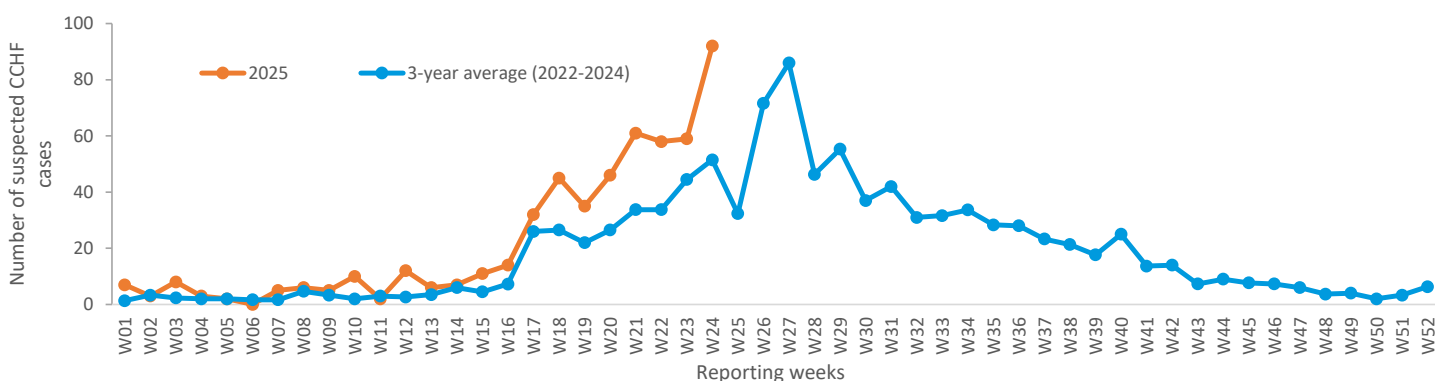
**392**
Samples tested for CCHF

**128**
Lab-confirmed CCHF cases

**32.7%**
CCHF test positivity rate

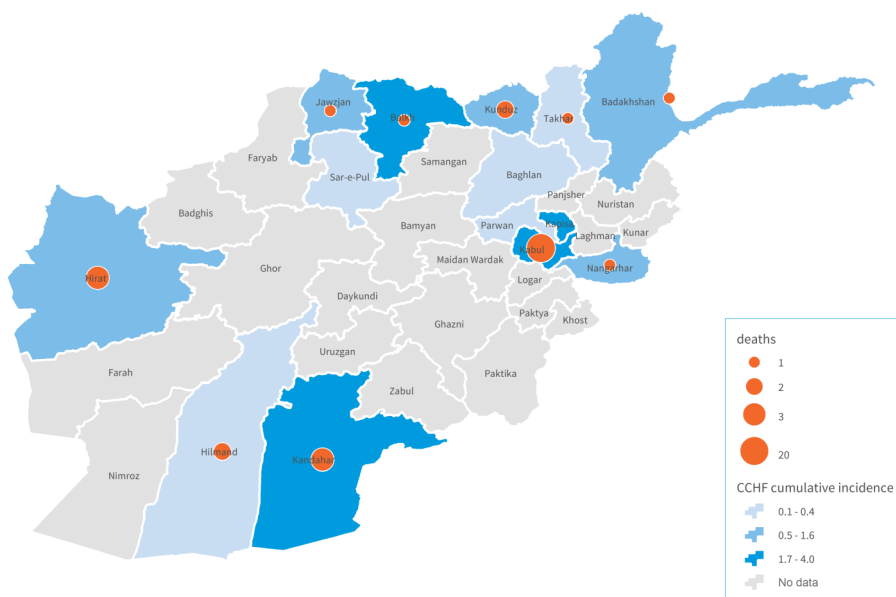
Indicators	W17	W18	W19	W20	W21	W22	W23	W24	Trend line
Suspected cases	45	35	46	61	58	58	59	92	
Suspected deaths	1	2	6	4	4	4	7	4	
CFR (%)	2.2	5.7	13.0	6.6	6.9	6.9	11.9	4.3	

- The epi-curve of suspected CCHF cases shows increasing trend since week 15-2025 warranting close monitoring for the period after the Eid-ul-Adha (Figures 9 & 10).
- During week 24-2025, 92 new suspected CCHF cases with 4 associated deaths (CFR=4.3%) were reported compared to 59 cases and 7 deaths in the previous week (Table 4).
- All the new cases were over-five-year-old, while 22 (23.9%) of them were females reported from 12 provinces [Kabul (37), Herat (14), Balkh (11), Kandahar (8), Kunduz (8), Nangarhar (3), Badakhshan (2), Jawzjan (2), Helmand (2), Parwan (2), Takhar (2), and Sar-e-Pul (1)].
- Since the beginning of 2025, a total of 529 suspected CCHF cases, with 35 associated deaths (CFR=6.6%), were reported. Out of the total 529 cases, 526 (99.4%) were over-five years old, while 175 (33.1%) were females. Also, 392 samples have been tested, 128 of them were positive (positivity rate = 32.7%).
- Since the beginning of 2025, the highest cumulative incidence of suspected CCHF per 100,000 population is reported from Kapisa (4.0), followed by Kabul (3.6), Kandahar (3.2), Balkh (2.5), and Jawzjan (1.6) (Figure 11).

**Figure 9.** Weekly distribution of suspected CCHF cases in Afghanistan 29 Dec 2024 – 14 Jun 2025, (N=529)**Figure 10.** Comparison between the trends of suspected CCHF cases in 2025 vs 3-year average (2022-2024)**Figure 11.** Cumulative incidence of Crimean-Congo Hemorrhagic Fever (CCHF) cases per 100,000 population by province and provincial distribution of deaths in Afghanistan, 29 Dec 2024 – 14 Jun 2025

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Crimean-Congo Hemorrhagic Fever (CCHF) cases cumulative incidence per 100,000 population by province and provincial distribution of deaths 29 Dec 2024-14 Jun 2025



Updates on the response to the CCHF outbreak

- During week 24-2025, WHO conducted an online awareness campaign on CCHF through its official social media channels ([Facebook](#) and [X](#)), reaching over 40,000 individuals.
- Since the beginning of 2025, the following activities have been conducted as part of outbreak preparedness activities:
 - WHO distributed around 7,700 (2,900 brochures and 4,800 posters) informational, educational, and communication (IEC) materials of CCHF to WHO sub offices in Balkh, Herat, Kandahar, Nangarhar, Kabul, Kunduz, and Badakhshan provinces. This brings the total number of IEC materials to 13,700 (5,900 brochures and 7,800 posters) distributed to all WHO sub offices across the country.
 - WHO conducted a mass awareness campaign in Baghlan province to enhance community engagement and to create awareness on the prevention of CCHF, AWD, ARIs, measles, dengue, and other infectious diseases in the community. During the campaign, 30 social mobilizers, including 15 (50%) females have been trained on CCHF, AWD, Measles, and ARIs. Over 30,000 people have been reached (50% women), and more than 7,000 Information, Education, and

Communication (IEC) materials in local languages have been distributed.

- Following activities have been carried out in Balkh province as part of the preparedness and response efforts for CCHF:
 - ◊ Emergency Preparedness and Response (EPR) meetings were decided to be conducted every Sunday to coordinate ongoing activities.
 - ◊ Surveillance Support Teams (SSTs) initiated health education and awareness sessions in the health facilities where they were deployed. A meeting was held with the Haj and Awqaf Department and approximately 300 Mullahs (religious leaders) to encourage the inclusion of CCHF prevention messages in Friday prayers.
 - ◊ A joint meeting was convened with the Communicable Disease Control (CDC) department, Veterinary Department (MAIL), Municipality, and other stakeholders to clarify roles and responsibilities and provide updates on contributions to CCHF preparedness and response.
 - ◊ The Veterinary Department began spraying livestock shelters across both urban and rural districts.
 - ◊ The relevant implementing partner instructed clinic heads to integrate CCHF awareness into routine health education.
 - ◊ A CCHF prevention awareness campaign is scheduled to be conducted in Mazar city on 28 May 2025, under the coordination of the Provincial Public Health Directorate (PPHD).
- 66 Healthcare Workers (HCWs), including 7 females, have been trained on CCHF case management from 34 provinces.
- 31 Lab technicians, including 4 females from 6 Regional Reference Laboratories (RRLs), Infectious Disease Hospital (IDH), and Central Public Health Laboratory (CPHL) have been trained on the diagnosis of CCHF, Dengue fever, and Mpox.

Confirmed Malaria

(29 Dec 2024-14 Jun 2025)

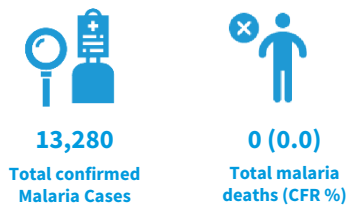





Table 5: Summary of the malaria outbreak in the last eight weeks in Afghanistan (20 Apr – 14 Jun 2025)

Indicators	W17	W18	W19	W20	W21	W22	W23	W24	Trend line
Confirmed cases	718	838	1,104	1,267	1,246	1,519	1,186	1,367	
Confirmed deaths	0	0	0	0	0	0	0	0	
CFR (%)	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	

- The epi curve of confirmed malaria cases shows a gradual increase since week 15-2025, which coincides with the start of the warmer weather. The trend is closely following the 3-year average (2022-2024) (Figures 12 & 13).
- During week 24-2025, 1,367 cases with no associated deaths were reported from 16 provinces, which shows 15.3% increase in the number of cases compared to previous week.
- Out of the 1,367 cases, 631 (46.2%) were females and 284 (20.8%) were under-five children.
- Since the beginning of 2025, 13,280 confirmed malaria cases with no associated deaths have been reported. Out of total cases, 6,043 (45.5%) were females and 2,353 (17.7%) were under-five children.
- Since the beginning of 2025, the highest cumulative incidence of malaria per 10,000 population was reported from Nuristan (57.4) followed by Kunar (39.8), Laghman (24.3), and Nangarhar (20.1) (Figure 14).

Figure 12. Weekly distribution of malaria cases in Afghanistan 29 Dec 2024–14 Jun 2025 (N=13,280)

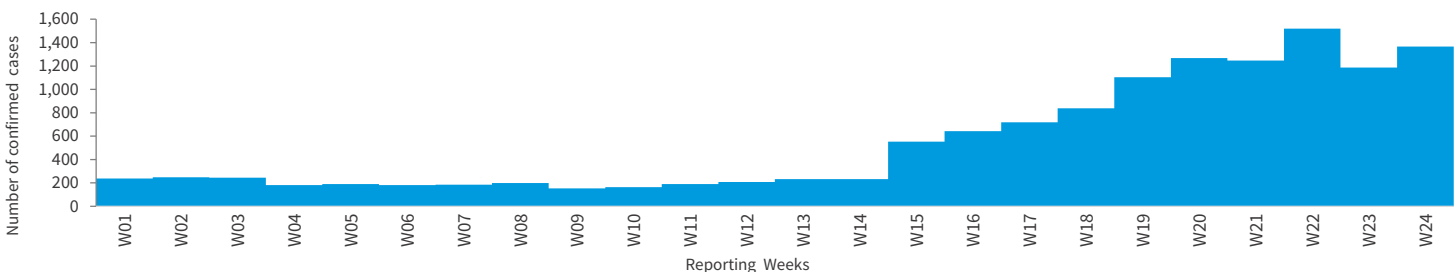




Figure 13. Comparison between the trends of malaria cases in 2025 vs 3-year average (2022-2024)

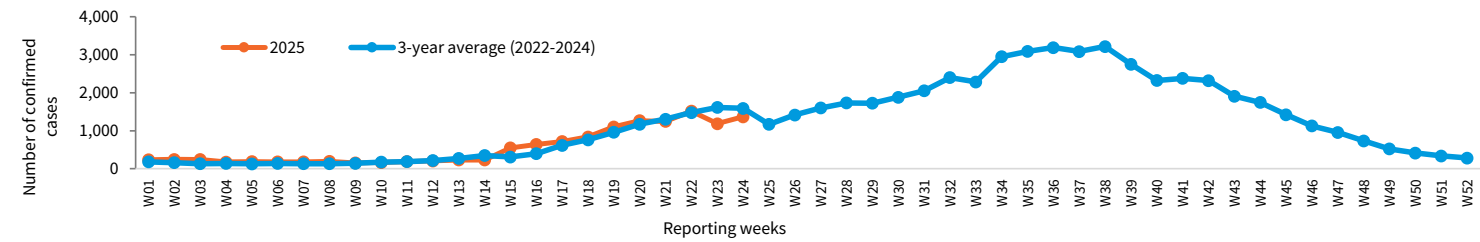
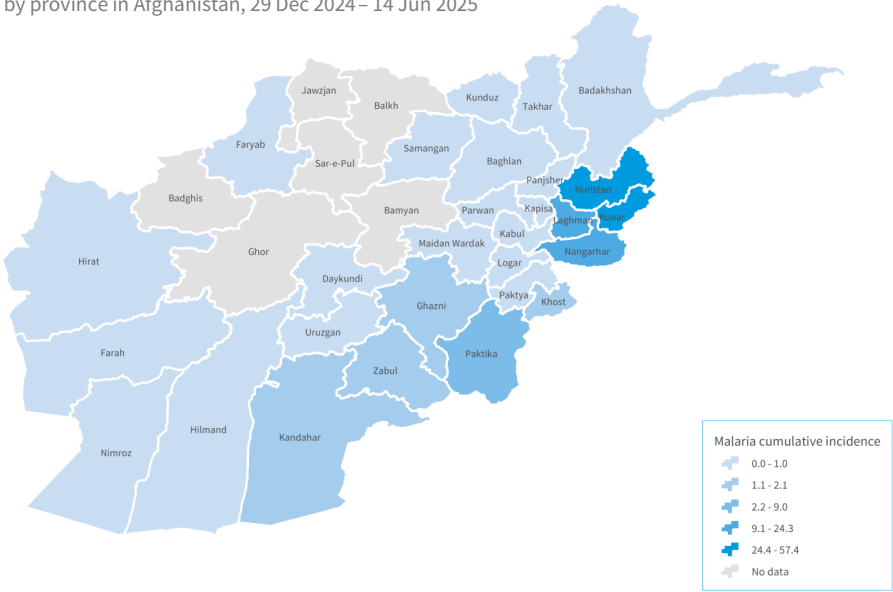


Figure 14. Malaria cumulative incidence per 10,000 population by province in Afghanistan, 29 Dec 2024 – 14 Jun 2025

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Confirmed malaria cumulative
Incidence per 10,000
population by province
29 Dec 2024 – 14 Jun 2025



ARI-Pneumonia
(29 Dec 2024-14 Jun 2025)


***772,410**

Total ARI Cases


1,698

Total ARI Deaths


****1,793**

Samples tested for influenza





****138**

Lab confirmed influenza cases


7.7%

Influenza test positivity ratio

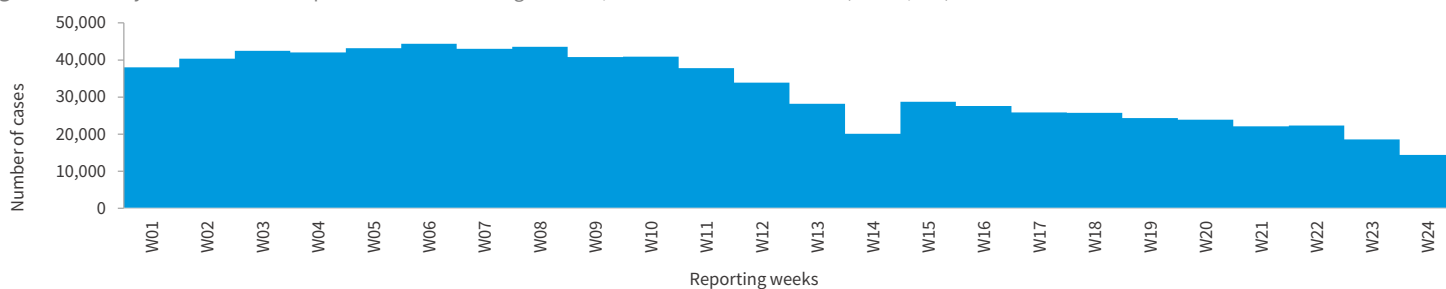
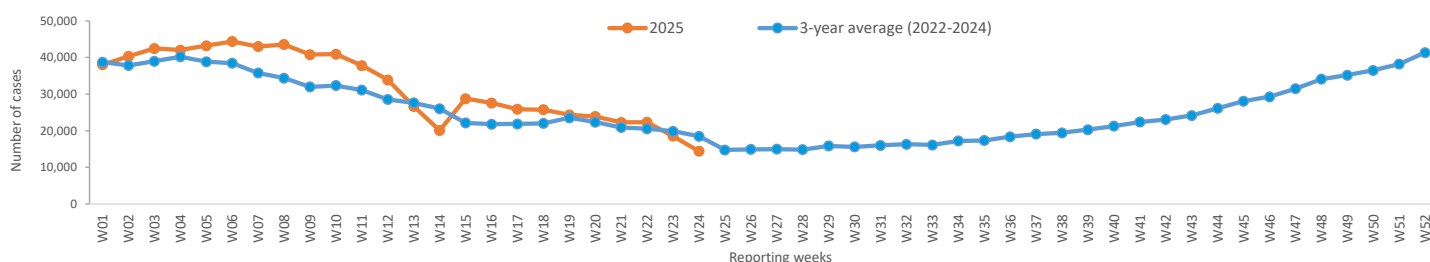
Table 6: Summary of the ARI-Pneumonia outbreak in the last eight weeks in Afghanistan (20 Apr – 14 Jun 2025)

Indicators	W17	W18	W19	W20	W21	W22	W23	W24	Trend lines
Suspected cases	25,866	25,747	24,345	23,885	22,309	22,327	18,543	14,412	
Suspected deaths	55	52	44	47	58	46	25	52	
CFR (%)	0.2	0.2	0.2	0.2	0.3	0.2	0.1	0.4	

- The epi curve indicates a gradual downward trend in reported cases since week 06-2025 (Figures 15 & 16).
- During week 24-2025, 14,412 cases of ARI pneumonia and 52 associated deaths (CFR=0.4%) were reported, which shows a 22.3% decrease in the number of ARI pneumonia cases compared to the preceding week, this decrease could be explained by Eid-ul-Adha holidays and health seeking behavior.
- Out of the total 14,412 cases, 7,100 (49.3%) were females while 9,083 (63.0%) were under-five children.
- During the reporting period, 45 samples were collected for influenza, none of which tested positive.
- Since the beginning of 2025, 772,410 cases of ARI pneumonia and 1,698 associated deaths (CFR=0.2%) were reported. Out of total cases, 489,333 (63.4%) were under-five children, while 382,213 (49.5%) were females. Also, 1,793 samples have been tested for influenza, out of which 138 were positive (positivity rate 7.7%).
- Since the beginning of 2025, the highest cumulative incidence of ARI pneumonia per 10,000 population has been reported in Nuristan (435.1), followed by Samangan (415.4), Kunar (373.2) and Panjsher (371.8) provinces (Figure 17).

*Currently ARI related data (morbidity and mortality) are reported from 613 surveillance sentinel sites across 34 provinces in the country.

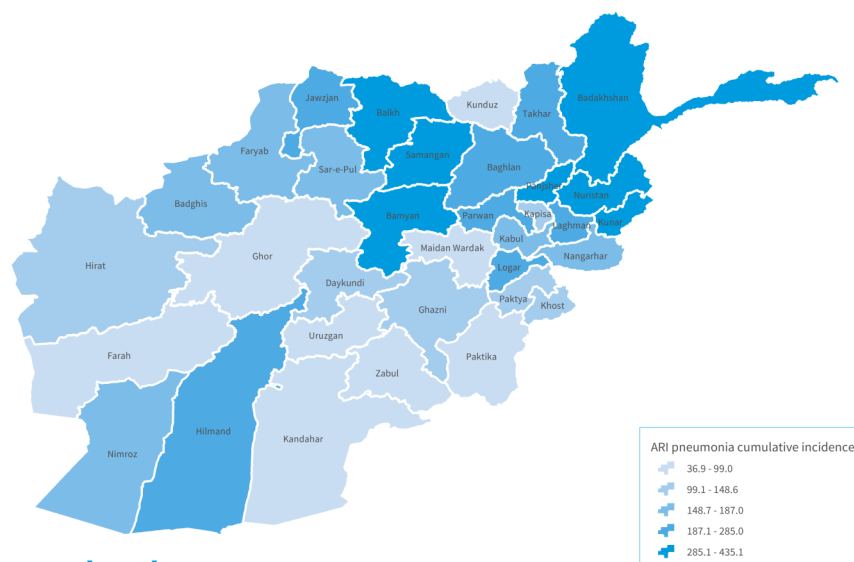
**Currently, there are 10 functional influenza surveillance sentinel sites for both ILI and SARI in ten provinces of Afghanistan. At each site, there is one trained influenza surveillance assistant, collecting specimen and epidemiological data from 4 ILI and 6 SARI cases per week in the ARI season and sending them to the National Influenza Center (NIC) for testing.

**Figure 15.** Weekly distribution of ARI pneumonia cases in Afghanistan, 29 Dec 2024 – 14 Jun 2025 (N=772,410)**Figure 16.** Comparison between the trends of ARI pneumonia cases in 2025 vs 3-year average (2022-2024)**Figure 17.** ARI-Pneumonia cumulative incidence per 10,000 population by province in Afghanistan, 29 Dec 2024 – 14 Jun 2025

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ARI pneumonia cumulative incidence per 10,000 population by province

29 Dec 2024 —14 Jun 2025



Updates on the response activities to the ARI outbreak

- Since the beginning of 2025, a total of 1,172 ARI pneumonia case management kits have been distributed to 34 provinces across the country.
- Since the beginning of 2025, World Health Organization (WHO) has conducted 3 online awareness campaigns on winter-related diseases, specifically pneumonia, through its official social media accounts ([Facebook](#) and [X](#)) reaching approximately 64,000 individuals.

COVID-19

(24 Feb 2020 — 14 Jun 2025)

Cumulative samples tested

1,100,119

In public laboratories

New samples tested in week 24

125

In public laboratories

-84.2%

Cumulative confirmed cases

246,274

Cumulative positivity rate (22.4%)

New confirmed cases in week 24

47

Weekly positivity rate (37.6%)

-83.2%

Cumulative confirmed deaths

8,052

CFR (3.3%)

New confirmed deaths in week 24

0

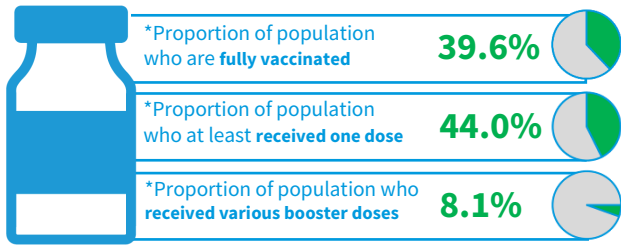
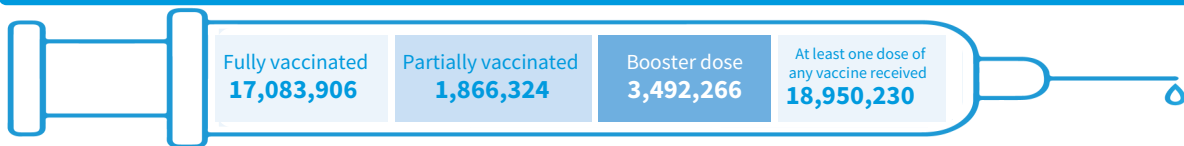
Week 24 CFR (0.0%)

0.0%

Key: ● Increasing ● Decreasing ● No change



COVID-19 Vaccination highlights



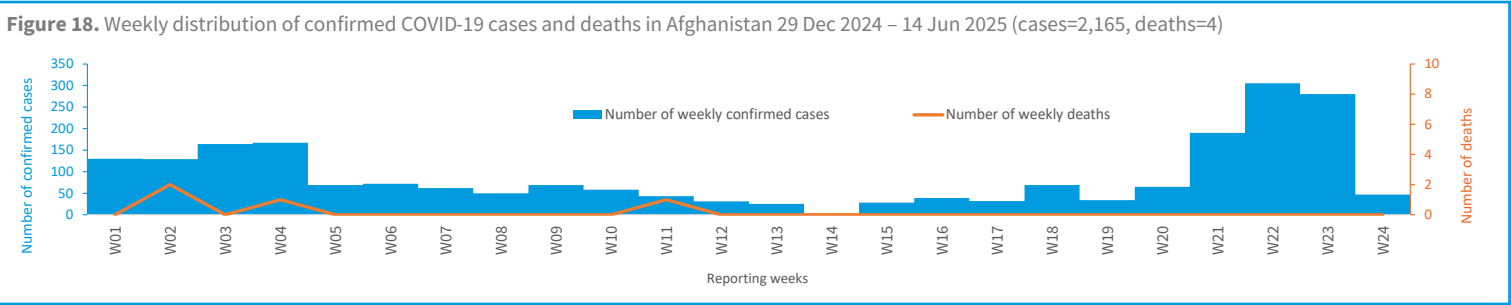
* The denominator is 43,100,596 based on OCHA estimation 2024

Table 7: Summary of COVID-19 indicators in the last 8 weeks in Afghanistan (20 Apr – 14 Jun 2025)

Indicators	W17	W18	W19	W20	W21	W22	W23	W24	Trend line
Samples tested (in public Labs)	1,207	1,091	698	874	999	954	792 *	125	
Confirmed cases	32	69	34	65	190	305	280 *	47	
Percent positivity (%)	2.7	6.3	4.9	7.4	19.0	32.0	35.4	37.6	
Deaths	0	0	0	0	0	0	0	0	
CFR (%)	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	

*Delayed reporting was experienced during weeks 23-2025 and the number of tested samples and confirmed cases were revised from 664 to 792, and from 220 to 280, respectively.

- The epidemiological curve of confirmed COVID-19 cases indicates a gradual decline since week 9-2025; however, during weeks 21-23, a significant increase was observed in the number of positive cases which should be closely monitored (Figure 18).
- During week 24-2025, a total of 125 samples were tested in public labs, of which 47 samples were positive for COVID-19 (positivity rate 37.6%), with no associated deaths were reported (Table 7), which indicates a significant decrease compared to the preceding week, this decrease could be explained by Eid-ul-Adha holidays and health seeking behavior.
- Since the beginning of 2025, 2,165 confirmed cases of COVID-19 and 4 associated deaths (CFR=0.2%) were reported. Out of the total cases, 998 (46.1%) were females.



Updates on the response activities to the COVID-19 outbreak

- During week 24-2025, WHO has carried out an awareness campaign on COVID-19 prevention through WHO’s official social media platforms ([Facebook](#) and [X](#)), reaching over 100,000 individuals.
- Since the beginning of 2025, a total of 850 kits of Viral Transport Medium (VTM) and 2,295 kits of Rapid Diagnostic Test (RDT) have been distributed to all 34 provinces across the country.

Note: MOPH is the source of epidemiological data
[Case definition & alert/outbreak thresholds](#)

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