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INFECTIOUS DISEASE OUTBREAKS

SITUATION REPORT | Epidemiological week #08-2025

No. 08 (16 – 22 Feb 2025)

Disease Outbreaks	 ARI-Pneumonia	 Measles (Suspected)	 COVID-19 (Confirmed)	 AWD with dehydration	 Dengue fever (Suspected)	 CCHF (Suspected)	 Malaria (Confirmed)
Cumulative cases 2025	336,978	13,631	833	12,661	92	34	1,662
Cumulative deaths 2025 (CFR %)	760 (0.2)	90 (0.7)	3 (0.4)	5 (0.04)	0 (0.0)	2 (5.9)	0 (0.0)

(Data from 609 (99.3%) out of 613 sentinel sites)

ARI-Pneumonia

(01 Jan 2024– 22 Feb 2025)


***1,694,328**

Total ARI Cases


***3,759**

Total ARI Deaths


****4,524**

Samples tested for influenza


****276**

Lab confirmed influenza cases



6.1%

Influenza test positivity ratio

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

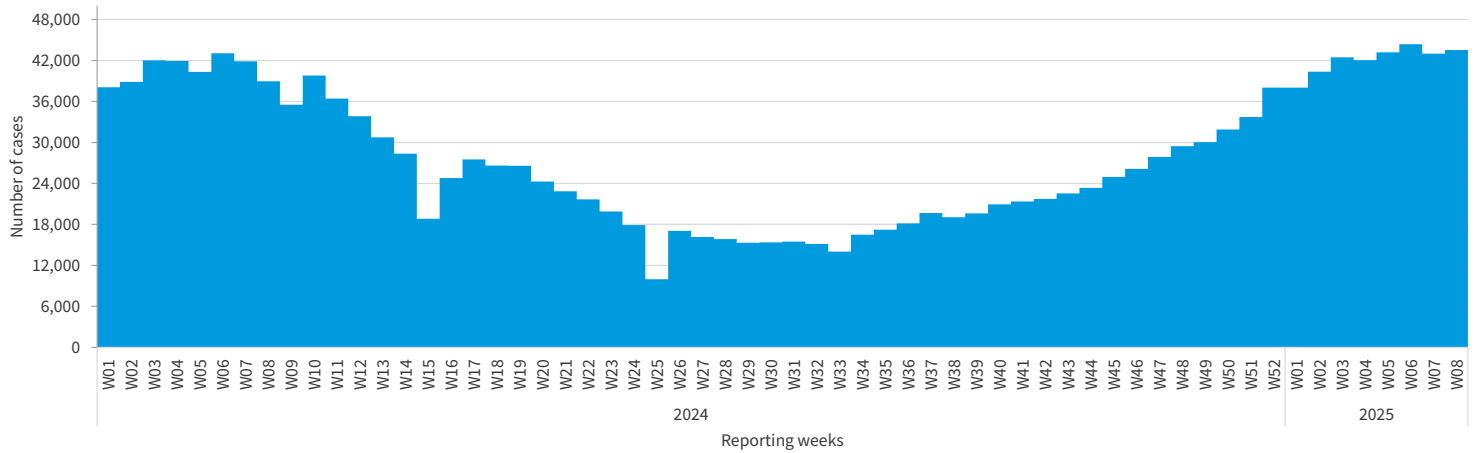
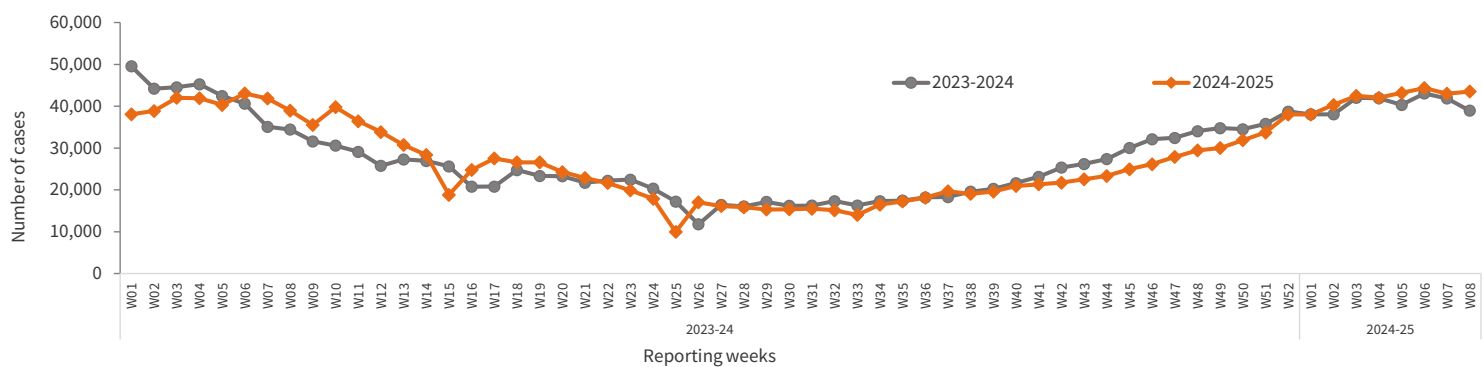
**Currently, there are 10 functional influenza surveillance sentinel sites for both ILI and SARI in ten provinces of Afghanistan. At each site, there is one trained influenza surveillance assistant, collecting specimen and epidemiological data from 4 ILI and 6 SARI cases per week in the ARI season and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

Table 1: Summary of the ARI-Pneumonia outbreak in the last eight weeks in Afghanistan (29 Dec 2024 – 22 Feb 2025)

Indicators	W01	W02	W03	W04	W05	W06	W07	W08	Trend lines
Suspected cases	38,012	40,359	42,474	42,032	43,197	44,367	42,999 *	43,538	
Suspected deaths	99	108	96	106	97	89	94	71	
CFR (%)	0.3	0.3	0.2	0.3	0.2	0.2	0.2	0.2	

*A delay reporting was experienced during weeks 07-2025 and the number of cases was modified from 42,887 to 42,999.

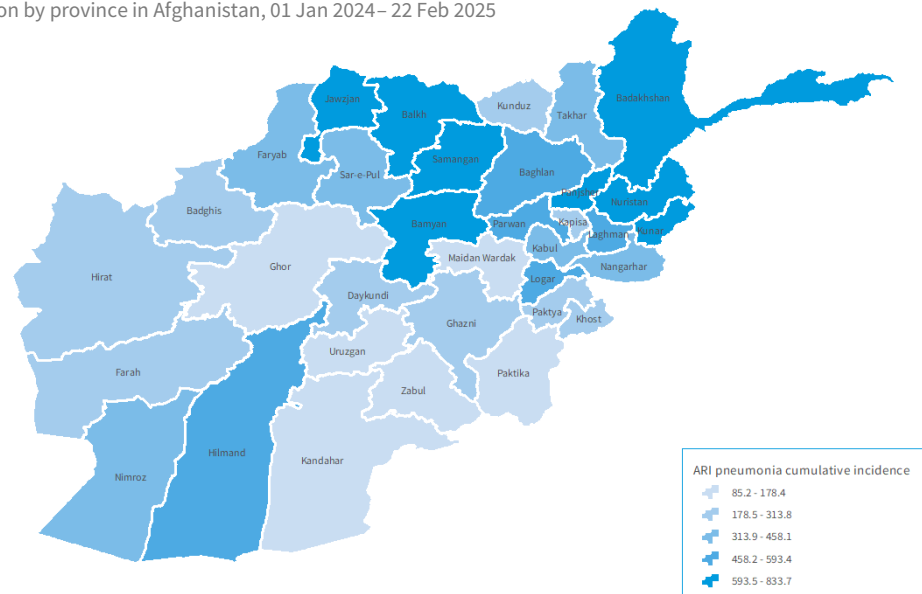
- The epi curve indicates a gradual increase in ARI pneumonia cases since week 34-2024 (Figures 1 & 2). The increase could be explained by the ongoing winter season in the country.
- During week 08-2025, 43,538 cases of ARI pneumonia and 71 associated deaths (CFR=0.2%) were reported, which shows a slight increase in the number of ARI pneumonia cases compared to the preceding week.
- Out of the 43,538 cases, 21,353 (49.0%) were females while 28,817 (66.2%) were under five children.
- Since the beginning of 2025, 336,978 cases of ARI pneumonia and 760 associated deaths (CFR=0.2%) were reported. Out of total cases, 209,080 (62.0%) were under five, while 166,648 (49.5%) were females.
- Since the beginning of 2024, the highest cumulative incidence of ARI pneumonia per 10,000 population has been reported in Nuristan (833.7), followed by Balkh (814.7), Bamyan (746.7), and Jawzjan (719.1) provinces (Figure 3).
- During 2024, a total of 1,357,350 ARI Pneumonia cases (49.4% females and 62.8% under five) and 2,999 associated deaths (CFR of 0.2%; 45.8% females, 83.6% under five) were reported from 34 provinces. Also, 3,776 samples were tested for influenza, out of which 165 were turned positive (positivity rate=4.4%).

**Figure 1.** Weekly distribution of ARI pneumonia cases in Afghanistan, 01 Jan 2024 – 22 Feb 2025 (N= 1,694,328)**Figure 2.** Comparison between the trends of ARI pneumonia cases in 2024-2025 vs 2023-2024**Figure 3.** ARI-Pneumonia cumulative incidence per 10,000 population by province in Afghanistan, 01 Jan 2024 – 22 Feb 2025

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ARI pneumonia cumulative incidence per 10,000 population by province

01 Jan 2024–22 Feb 2025



Updates on the response activities to the ARI outbreak

- 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 link](#)) reaching approximately 64,306 individuals.
- During 2024, the following preparedness and response activities were implemented:
 - A total of 250 HCWs were trained on ARI Pneumonia case management in 7 regions (North, Northeast, Central, South, Southeast, East, and West).
 - A total of 6,500 Viral Transport Media (VTM) have been distributed to the North-east and Central-east NDSR offices.
 - Eighty-nine case management kits have been distributed to all WHO sub-offices.
 - WHO has handed over a total of 89,000 IEC materials on ARI to MoPH (64,000 Posters and 25,000 Brochures).



Measles

(01 Jan 2024– 22 Feb 2025)



73,384

Total Cases



379

Total Deaths



16,967

Sample tested



10,016

Lab confirmed cases



59.0%

Test positivity rate

Table 2: Summary of the measles outbreak in the last eight weeks in Afghanistan (29 Dec 2024 – 22 Feb 2025)

Indicators	W01	W02	W03	W04	W05	W06	W07	W08	Trend line
Suspected cases	1,136	1,269	1,506	1,495	1,901	2,115	2,027 *	2,182	
Suspected deaths	8	7	7	5	15	15	12	21	
CFR (%)	0.7	0.6	0.5	0.3	0.8	0.7	0.6	1.0	

*A delay reporting was experienced during weeks 07-2025 and the number of cases were modified from 2,003 to 2,027.

- The epidemiological curve of suspected measles cases shows a gradual increase since week 43-2024 (Figure 4). The trend in 2024-25 is higher than that reported in 2023-24 (Figure 5).
- During week 08-2025, a total of 2,182 suspected cases and 21 associated deaths (CFR=1.0%) were reported which shows a 7.6% increase in the number of suspected cases compared to the preceding week. Out of the total cases, 1,038 (47.6%) were females and 1,815 (83.2%) were under-five children.
- All the 21 new deaths were under-five children while 9 (42.9%) of them were females. The deaths were reported from 9 provinces: Herat (9), Helmand (4), Badghis (2), Baghlan (1), Jawzjan (1), Kabul (1), Kandahar (1), Paktika (1) and Zabul (1).
- Since the beginning of 2025, 13,631 cases of suspected measles and 90 associated deaths (CFR=0.7%) were reported. Out of total cases, 6,396 (46.9%) were females, while 11,232 (82.4%) were under five.
- Since the beginning of 2024, Balkh has reported the highest cumulative incidence of suspected measles cases per 10,000 population (48.6), followed by Urozgan (40.2), Helmand (38.3), and Khost (36.1) (Figure 6).
- During 2024, a total of 59,753 suspected measles cases (45.5% female and 80.0% under five) and 289 deaths

Figure 4. Weekly distribution of suspected measles cases in Afghanistan, 01 Jan 2024 to 22 Feb 2025 (N= 73,384)

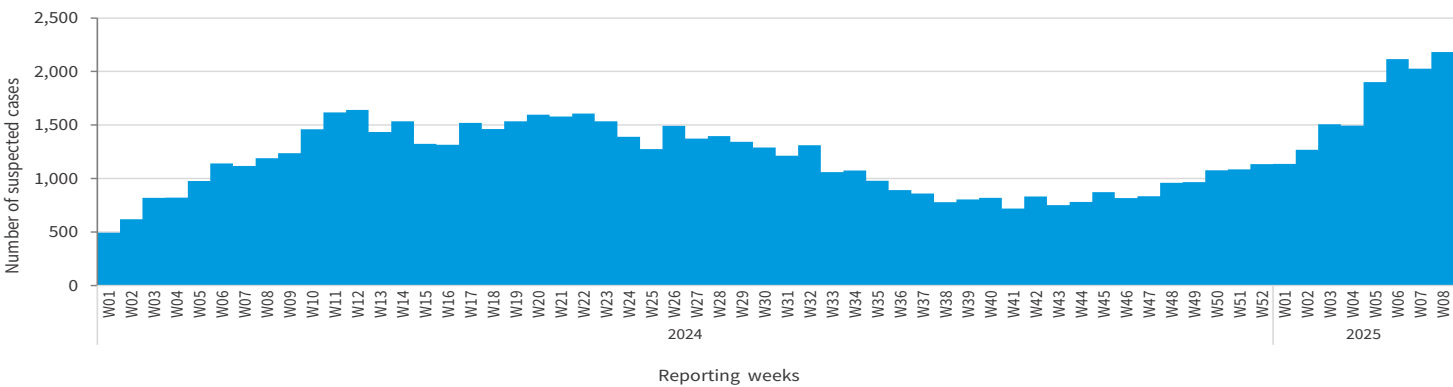


Figure 5. Comparison between the trends of suspected measles cases in 2024-2025 vs 2023-2024

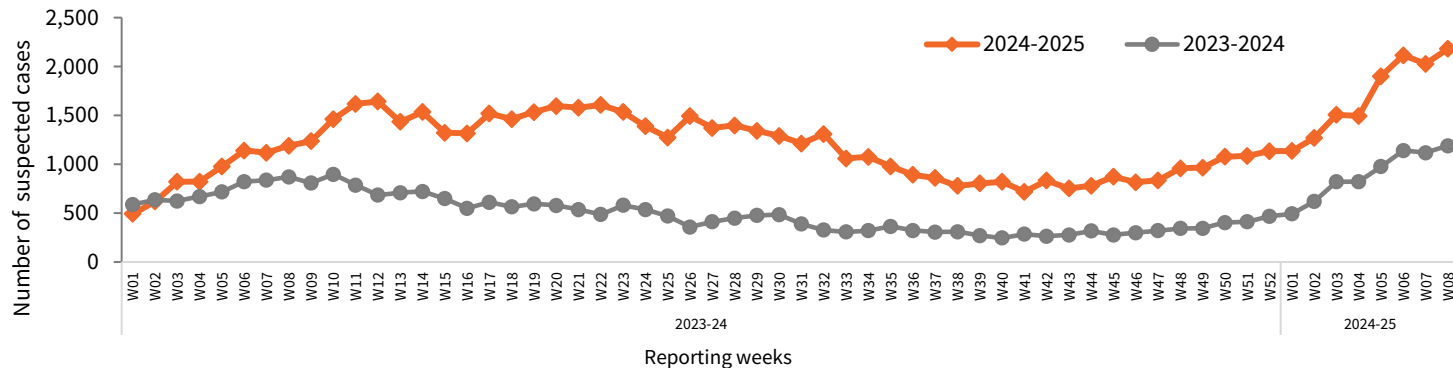
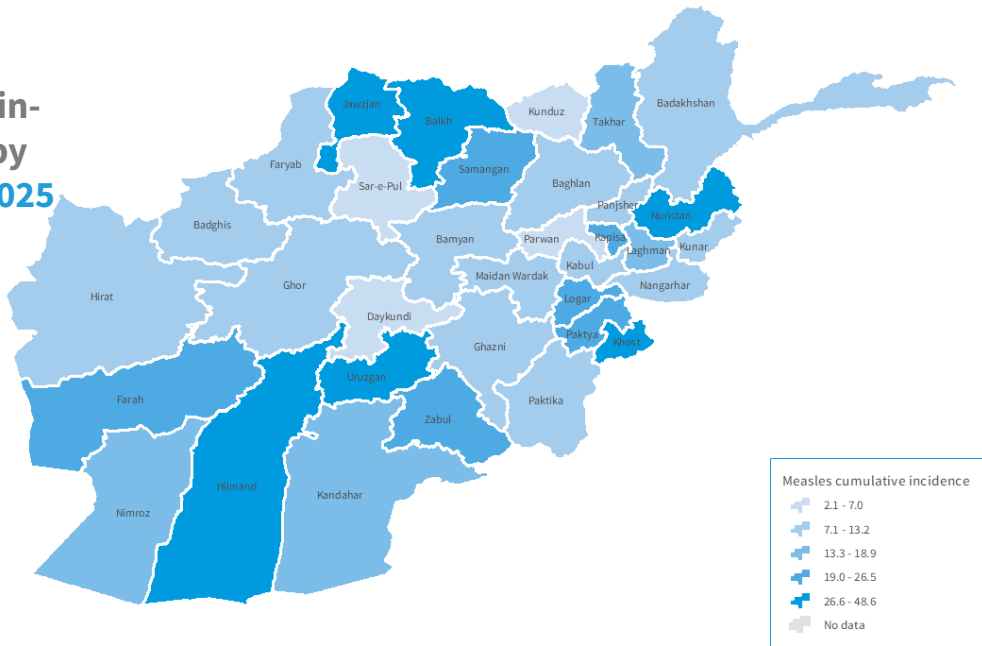


Figure 6. Suspected measles cumulative incidence per 10,000 population by province in Afghanistan 01 Jan 2024-22 Feb 2025

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Suspected measles cumulative incidence per 10,000 population by province 01 Jan 2024 – 22 Feb 2025




Updates on the preparedness and response to the measles outbreak

- During week 08-2025, a total of 2,925 children aged 9-59 months were vaccinated against measles as part of outbreaks response in 10 provinces (Parwan, Kapisa, Helmand, Urozgan, Kandahar, Zabul, Paktya, Paktika, Sar-e-pul and Farah). This brings the number of children aged 9-59 months vaccinated against measles as part of outbreak response immunization activities to 40,678 across the country since the beginning of 2024.

COVID-19


(24 Feb 2020 — 22 Feb 2025)

Cumulative samples tested
1,083,763
In public laboratories

New samples tested in week 08
**1,090**
In public laboratories


-25.1%

Cumulative confirmed cases
244,941
Cumulative positivity rate (22.6%)

New confirmed cases in week 08
**43**
Weekly positivity rate (3.9%)

-27.1%

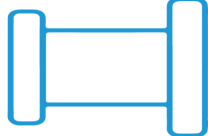
Cumulative confirmed deaths
8,051
CFR (3.3%)

New confirmed deaths in week 08
**0**
Week 08 CFR (0.0%)

0.0%

Key: ● Increasing ● Decreasing ● No change

COVID-19 Vaccination highlights




Fully vaccinated
***17,083,906**

Partially vaccinated
***1,866,324**

Booster dose
***3,492,266**

At least one dose of any vaccine received
***18,950,230**



*Proportion of population who are **fully vaccinated**
39.6%

*Proportion of population who at least **received one dose**
44.0%

*Proportion of population who **received various booster doses**
8.1%

*Note: During January 2025, around 5,902 doses of various COVID-19 vaccines have been administered which shows a 79.0% increase compared to December 2024.

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



Table 3: Summary of COVID-19 indicators in the last 8 weeks in Afghanistan (29 Dec 2024 – 22 Feb 2025)

Indicators	W01	W02	W03	W04	W05	W06	W07	W08	Trend line
Samples tested (in public Labs)	1,830	2,191	2,333	1,948	1,638	1,609	1,456 *	1,090	
Confirmed cases	130	129	164	167	69	72	59 *	43	
Percent positivity (%)	7.1	5.9	7.0	8.6	4.2	4.5	4.1	3.9	
Deaths	0	2	0	1	0	0	0	0	
CFR (%)	0.0	1.6	0.0	0.6	0.0	0.0	0.0	0.0	

*A delayed reporting was experienced during weeks 07-2025 and the number of tested samples and confirmed cases were modified from 1,286 to 1,456 and from 53 to 59, respectively.

- The epidemiological curve of confirmed COVID-19 cases indicates a fluctuation at the lower level in the recent weeks following the peak in the week 17-2024 (Figures 7 & 8).
- During week 08-2025, a total of 1,090 samples were tested in public labs, of which 43 were positive for COVID-19 (positivity rate 3.9%) while no associated death was reported. The number of positive cases shows a 27.1% decrease compared to the preceding week (Table 3). Of the 43 COVID-19 confirmed cases, 23 (53.5%) were females.
- Since the beginning of 2025, 833 confirmed cases of COVID-19 and 3 associated deaths (CFR=0.4%) were reported. Out of total cases, 384 (46.1%) were females, while females accounted for two-thirds of the deaths (2 – 66.7%).
- During 2024, a total of 13,812 COVID-19 confirmed cases and 75 deaths (CFR=0.5%) have been reported. Out of the total cases, 7,411 (53.7%) were females while females represented almost 3 quarters of deaths (55 - 73.3%). Also, 124,469 samples were collected and 13,812 were reported positive (positivity rate=11.1%).

Figure 7. Weekly distribution of confirmed COVID-19 cases and deaths in Afghanistan 01 Jan 2024 – 22 Feb 2025 (cases=14,645, deaths=78)

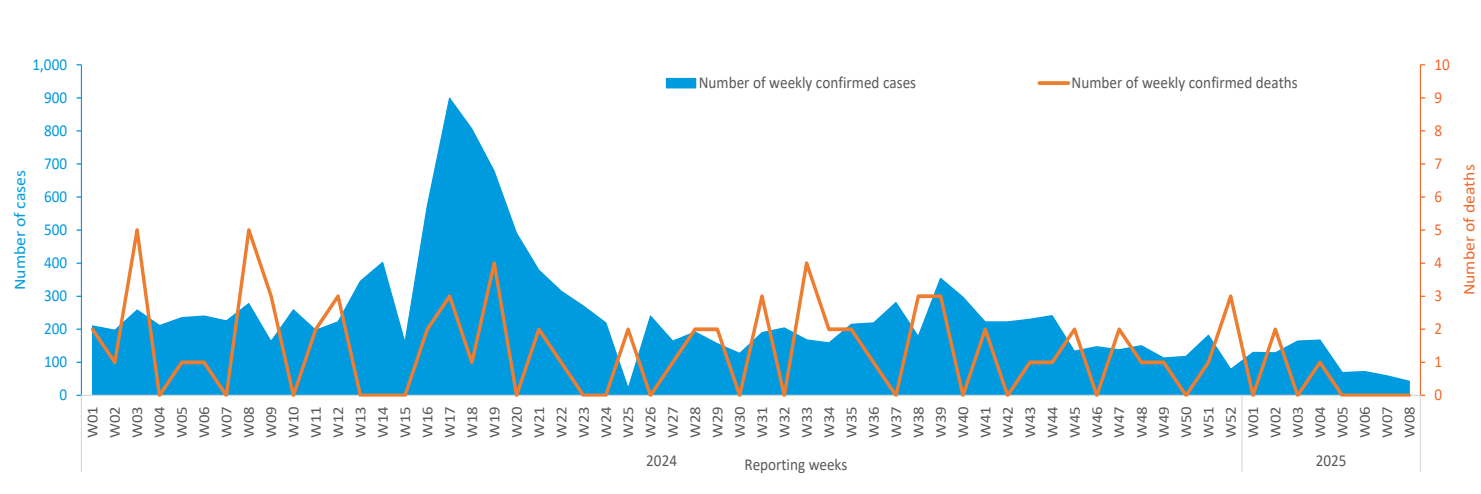
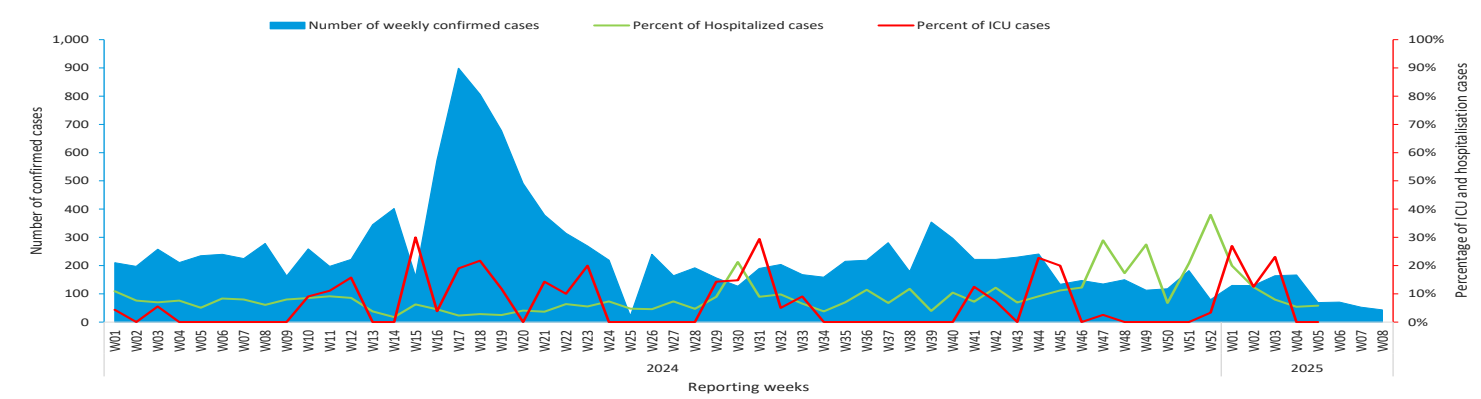


Figure 8. Weekly proportion of hospitalized and ICU cases and the number of confirmed COVID-19 cases in Afghanistan between 01 Jan 2024-22 Feb 2025*




*The hospitalization rate was calculated among confirmed cases, while the ICU rate was calculated among hospitalized cases. *Hospitalization and ICU admission data has not been reported since week 06-2025 due to the discontinuation of support.

Update on the response activities to COVID-19


- Since the beginning of 2024, the below supplies have been distributed to all regional sub-offices:
 - A total of 930 VTM kits (50 units per kit).
 - A total of 1,571 COVID-19 RDT kits (25 tests per kit).




Acute Watery Diarrhea (AWD) with Dehydration
(01 Jan 2024-22 Feb 2025)


187,923
Total AWD with dehydration cases


93
Total AWD with dehydration deaths


10,841
Samples tested for AWD with dehydration (RDTs)


1,488
RDT-positive cases for AWD with dehydration





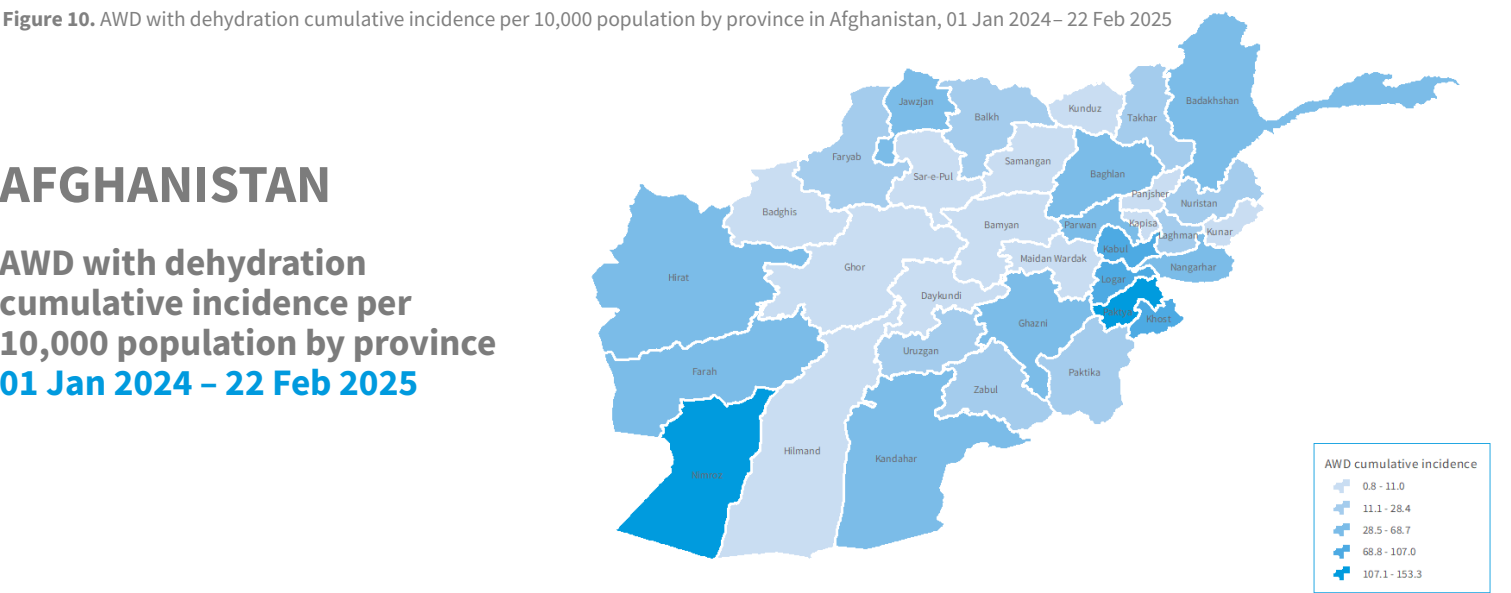
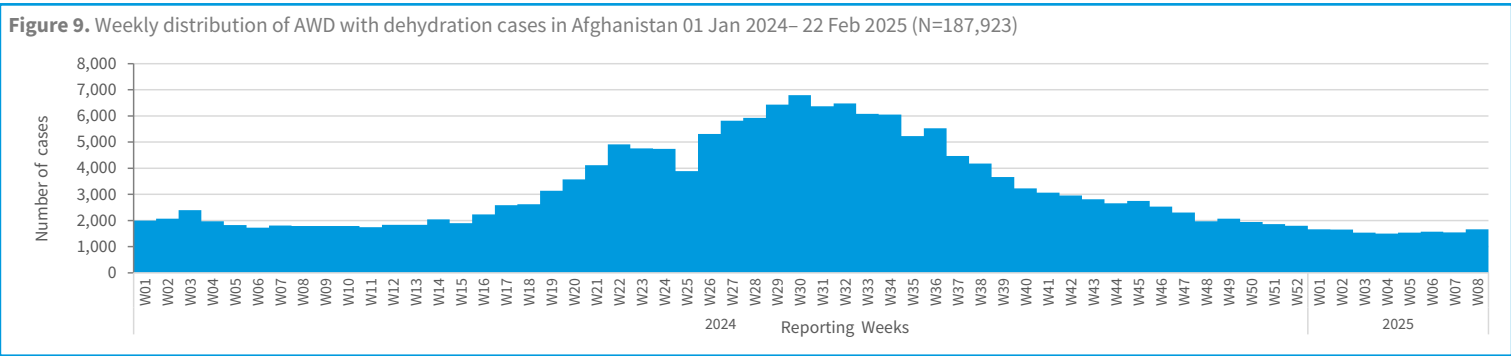

13.7%
RDT positivity rate for AWD with dehydration

Table 4: Summary of the AWD with dehydration outbreak in the last eight weeks in Afghanistan (29 Dec 2024 – 22 Feb 2025)

Indicators	W01	W02	W03	W04	W05	W06	W07	W08	Trend line
Number of cases	1,663	1,650	1,532	1,501	1,539	1,571	1,541	1,664	
Number of deaths	0	0	0	1	1	1	2	0	
CFR (%)	0.0	0.0	0.0	0.1	0.1	0.1	0.1	0.0	

- The epi-curve shows a decreasing trend since week 31-2024, which could be linked to the end of the summer season (Figure 9).
- During week 08-2025, 1,664 AWD with dehydration cases with no associated deaths were reported from 113 districts, which shows an 8.0% increase in the number of cases compared to the previous week.
- Out of the 1,664 AWD with dehydration cases, 832 (50.0%) were females and 973 (58.5%) were under-five children.
- During week 08-2025, no new district reported alert of AWD with dehydration.
- Since Jan 2025, 12,661 cases of AWD with dehydration with 5 associated deaths (CFR = 0.04%) were reported. Out of total cases, 7,487 (59.1%) were under five, while 6,137 (48.5%) were females.
- Since Jan 2025, 652 Rapid Diagnostic Tests (RDT) have been conducted on AWD with dehydration cases, of which 31 tests turned positive (positivity rate 4.8%).
- Since the beginning of 2024, the highest cumulative incidence of AWD with dehydration per 10,000 population was reported from Paktya (153.3) followed by Nimroz (150.1), Logar (107.0), and Kabul (94.9) (Figure 10).
- During 2024, a total of 175,262 AWD with dehydration cases (49.4% females and 55.5% under five) and 88 associated deaths (CFR=0.05%; 42.0% female and 90.9% under five) were reported from 353 districts. Also, 10,189 Rapid Diagnostic Tests (RDTs) have been conducted on AWD with dehydration cases, of which 1,457 tests turned positive (positivity rate



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AWD with dehydration
cumulative incidence per
10,000 population by province
01 Jan 2024 – 22 Feb 2025

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

Since the beginning of 2024, the following activities have been conducted:

- A total of 1,483 surveillance staff (969 CHSs and HF’s Heads, 485 surveillance focal points, and 29 SSTs) have been trained on surveillance procedures, event-based surveillance (EBS), and e-surveillance in the country.
- A total of 210 HCWs have been trained on AWD with dehydration case management in 5 regions: Central region (70 including 15 females), East region (35 including 15 females), South region (35 all males), North region (35 including 5 females), and Northeast region (35 including 17 females).
- A total of 38 Data Management Officers, Data Assistants, and Data Entry Clerks (including 3 females) have been trained on data management and analysis.
- A total of 114 Cary Blair kits (100/kit) and 424 RDT kits have been distributed to 7 WHO sub-offices.
- A total of 125 case management kits have been distributed to the affected communities.
- A total of 2,700 Information, Education, and Communication (IEC) materials (1,200 posters and 1,500 brochures) on AWD have been delivered by WHO to Ghor province. These IEC materials have been used in health facilities and flood-affected communities.

WASH update:

There are no WASH updates since 01 Sep 2024.

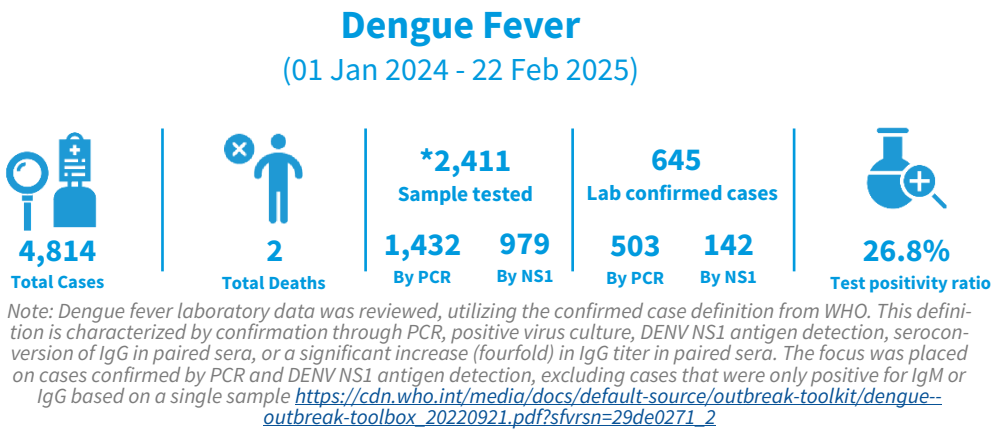


Table 5: Summary of the dengue fever outbreak in the last eight weeks in Afghanistan (29 Dec 2024 – 22 Feb 2025)

Indicators	W01	W02	W03	W04	W05	W06	W07	W08	Trend line
Suspected cases	9	23	23	9	7	10	5	6	
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 a gradual decrease since week 45-2024 following its highest peak in week 44-2024 (Figure 11).
- The trend in 2024-25 is higher than that reported in 2023-24; however, in the recent 10 weeks, the cases have been reported at lower level (Figure 12).
- During week 08-2025, 6 suspected cases of dengue fever with no associated deaths were reported from Nangarhar province compared to 5 cases of dengue fever reported in the preceding week.
- Since the beginning of 2025, 92 suspected dengue fever cases, with no associated deaths reported. Out of total cases, 90 (97.8%) were over five, while 48 (52.2%) were females.
- Since the beginning of 2024, a total of 2,411 samples (1,432 PCR and 979 NS1) have been tested, out of which 645 (503 by PCR and 142 by NS1) were positive (total positivity rate 26.8%).
- During 2024, a total of 4,722 suspected cases of dengue fever (44.4% female and 1.8% under five) with 2 associated deaths (CFR of 0.04%; both over five males) were reported.

Figure 11. Weekly distribution of suspected dengue fever cases in Afghanistan 1 Jan 2024– 22 Feb 2025, (N=4,814)

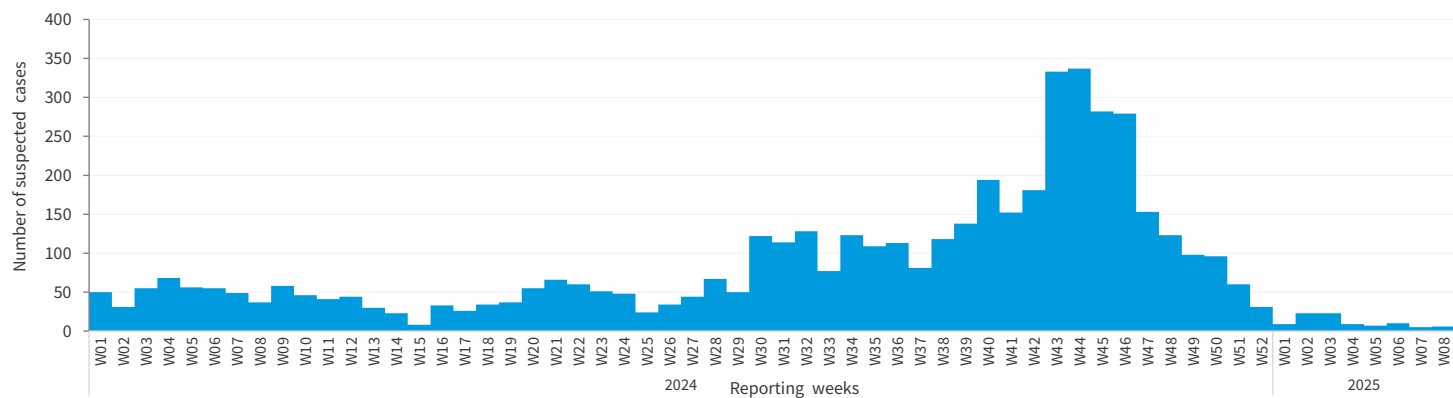


Figure 12: Comparison between the trends of suspected dengue fever cases in 2024-2025 vs 2023-2024

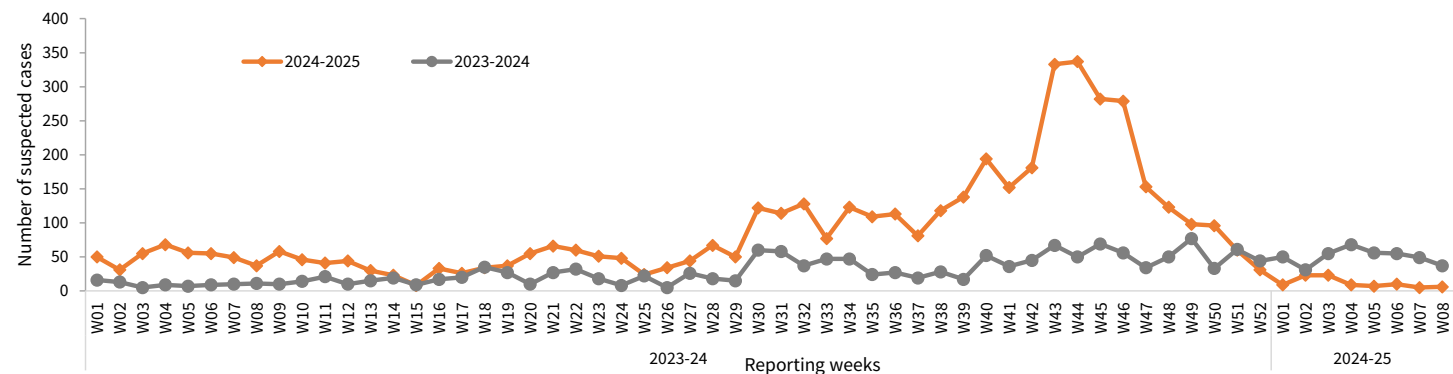
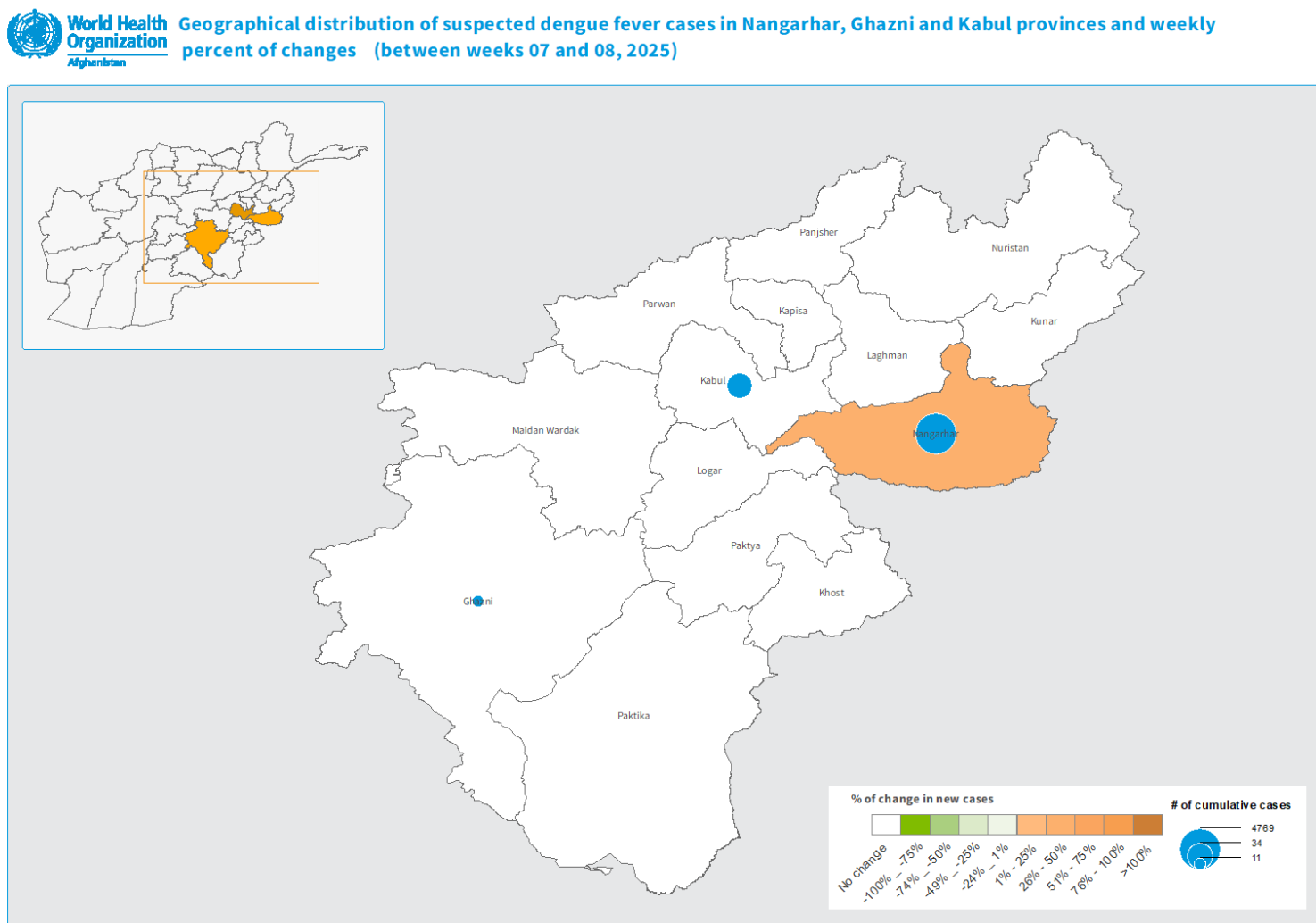


Figure 13. Geographical distribution of suspected dengue fever cases and percent change of new cases in Afghanistan, 01 Jan 2024– 22 Feb 2025



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: 22 Feb 2025.



Updates in the response to the dengue fever outbreak

- Since the beginning of 2024, the following activities were conducted:
- As part of the outbreak response to dengue fever, Gravitraps and larvicides are supplied to the MoPH.
 - A total of 835 dengue fever RDT kits (10 tests/kit) have been distributed to South and East WHO sub-regional offices.
 - A total of 386 HCWs (MDs and Nurses) have been trained on dengue fever case management from Kandahar (46 males and 42 females), Southeast region (64 males and 43 females), and East region (104 males and 87 females).
 - A total of 150 lab technicians of HFs of Kandahar (28), Southeast region (54), and East region (68) have been trained on dengue fever diagnosis.

Crimean Congo Hemorrhagic Fever (CCHF)

(01 Jan 2024 - 22 Feb 2025)

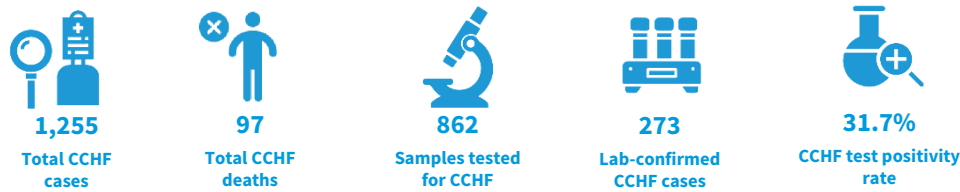
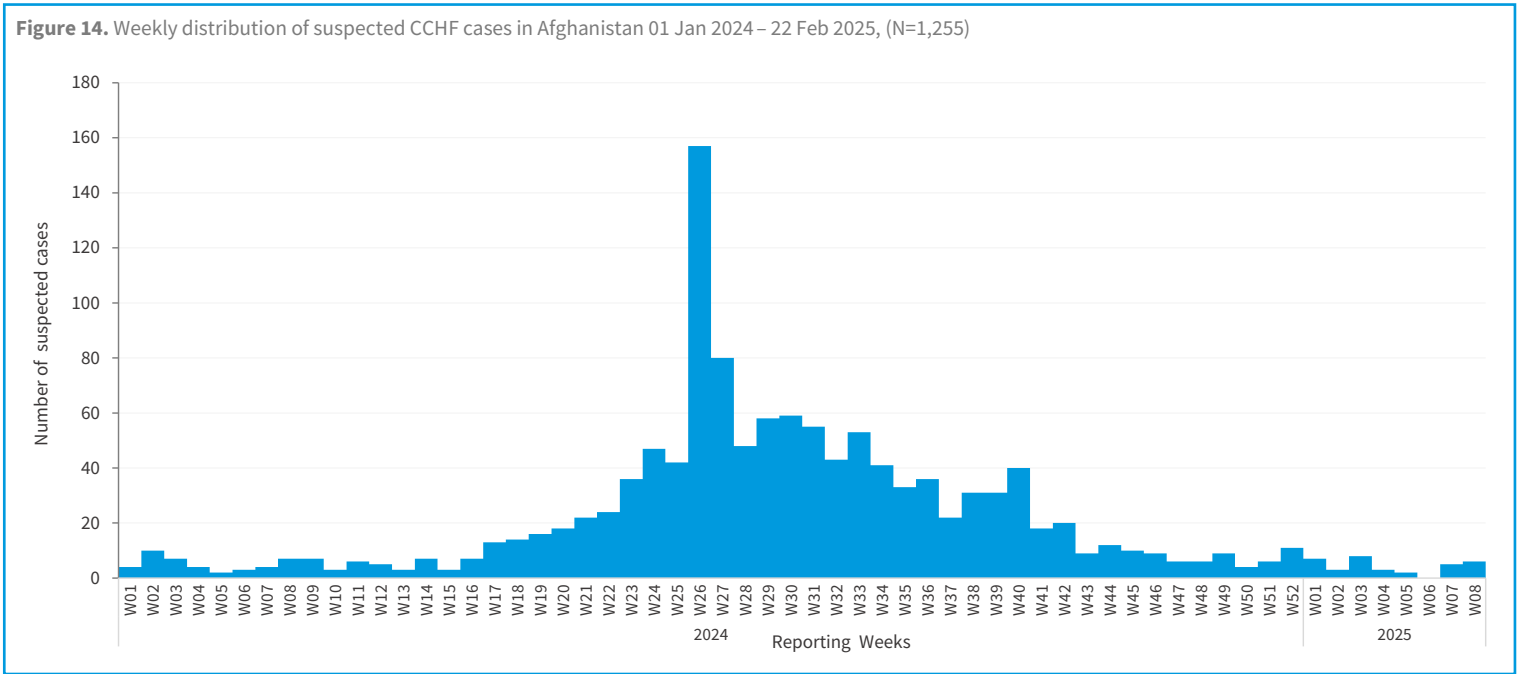
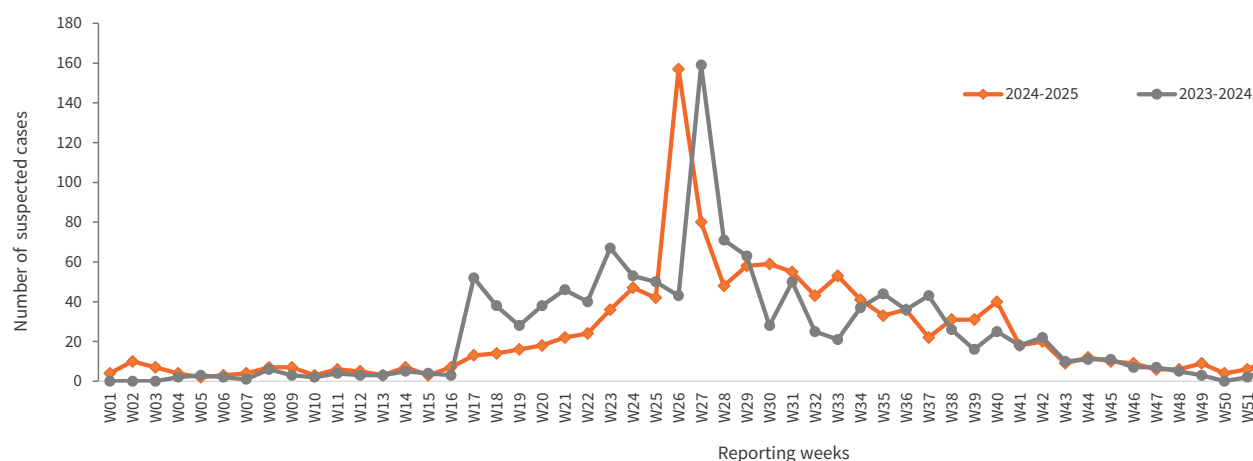


Table 6: Summary of the CCHF outbreak in the last eight weeks in Afghanistan (29 Dec 2024 – 22 Feb 2025)

Indicators	W01	W02	W03	W04	W05	W06	W07	W08	Trend line
Suspected cases	7	3	8	3	2	0	7	6	
Suspected deaths	1	0	0	0	0	0	1	0	
CFR (%)	14.3	0.0	0.0	0.0	0.0	0.0	14.3	0.0	

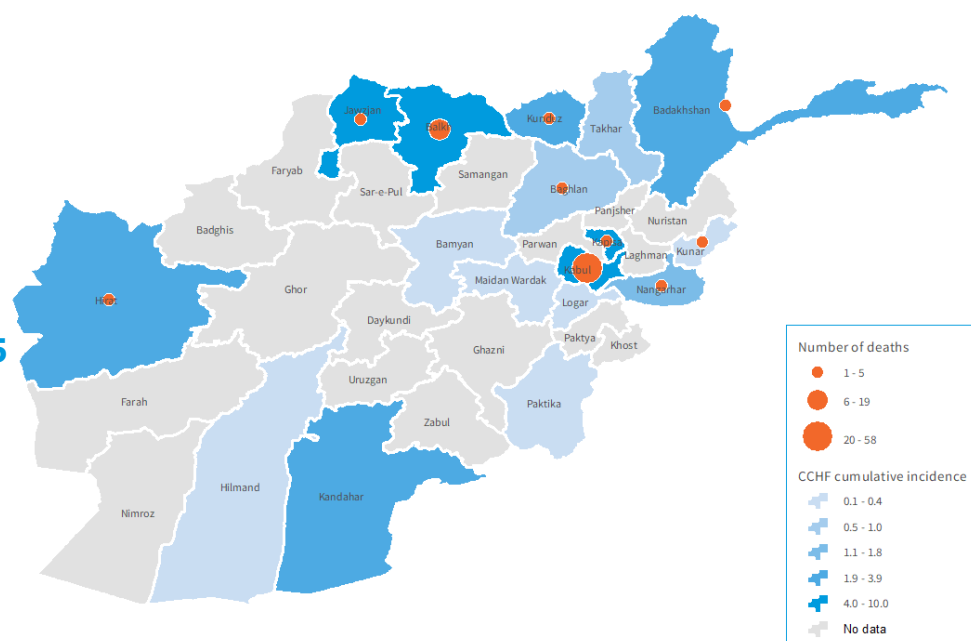
- The epi-curve of suspected CCHF cases shows a declining trend since week 27-2024 (Figures 14 & 15).
- During week 08-2025, 6 new suspected CCHF cases with no deaths were reported compared to 7 cases in the previous week (Table 6). All the 6 new cases were over five, while 2 were females.
- Since the beginning of 2025, a total of 34 suspected CCHF cases, with 2 associated deaths (CFR=5.9%) were reported. All the reported cases were over five, while 14 (41.2%) were females. Also, 16 samples have been tested, 2 of them turned out positive (positivity rate = 12.5%).
- Since the beginning of 2024, the highest cumulative incidence of suspected CCHF per 100,000 population in 2024 is reported from Balkh (10.0) followed by Kabul (8.5), Jawzjan (7.3), and Kapisa (7.0) provinces (Figure 16).
- During 2024, a total of 1,221 suspected cases of CCHF (31.6% female and 99.5% over five) with 95 associated deaths (CFR of 7.8%; 27.4% female and 98.9% over five) were reported. Also, 844 samples of suspected CCHF cases have been tested, out of which 271 turned positive (positivity rate 32.1%).



**Figure 15.** Comparison between the trends of suspected CCHF cases in 2024-2025 vs 2023-2024**Figure 16.** Cumulative incidence of Crimean-Congo Hemorrhagic Fever (CCHF) cases per 100,000 population by province and provincial distribution of deaths in Afghanistan, 01 Jan 2024 – 22 Feb 2025

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Crimean-Congo Hemorrhagic Fever (CCHF) cases cumulative incidence per 100,000 population by province and provincial distribution of deaths 01 Jan 2024 - 22 Feb 2025



Updates on the response to the CCHF outbreak

Since the beginning of 2024, the following activities have been conducted:

- A total of 569 doses of ribavirin tablets and 1,540 doses of ribavirin injections have been distributed to the Infectious Disease Hospital (IDH) in Kabul and all WHO sub-offices.
- Insecticides have been supplied to all 34 provinces for cattle spraying against ticks in animal markets by The Ministry of Agriculture, Irrigation and Livestock (MAIL) and Food and Agriculture Organization (FAO).
- The national CCHF preparedness and response plan has been drafted and shared with MoPH for endorsement. The plan aims to prepare and respond to the CCHF outbreak with focused interventions on surveillance/outbreak investigation, laboratory confirmation, case management and supplies, RCCE for high-risk individuals, and the capacity of healthcare workers.

Since the beginning of 2024, the following RCCE activities have been conducted as a response to outbreaks:

- WHO conducted a mass online awareness campaign on CCHF and dengue fever preventive measures, reaching around 25,000 social media users through WHO official social media accounts ([Facebook](#) and [X link](#)).
- Additionally, WHO carried out a seven-day training and community outreach campaign in Herat, Balkh, and Kandahar provinces, deploying 110 social mobilizers and reaching approximately 111,696 people.



Malaria

(01 Jan 2024—22 Feb 2025)



82,966
Total confirmed
Malaria Cases



*2 (0.002)
Total malaria
deaths (CFR %)

Table 7: Summary of the malaria outbreak in the last eight weeks in Afghanistan (29 Dec 2024 – 22 Feb 2025)

Indicators	W01	W02	W03	W04	W05	W06	W07	W08	Trend line
Confirmed cases	238	247	245	180	189	181	184	198	
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 malaria cases shows a declining trend since week 38-2024, after its peak during week 37-2024. The trend of malaria cases in 2024-25 closely follows the trend observed in 2023-24 (Figures 17 & 18).
- During week 08-2025, 198 cases with no associated deaths were reported from 12 provinces compared to 184 cases in the previous week. Out of the total cases, 90 (45.5%) were females and 30 (15.2%) were under-five children.
- Since the beginning of 2025, 1,662 confirmed malaria cases have been reported. Out of total 1,662 cases, 758 (45.6%) were female and 214 (12.9%) were under five children.
- Since the beginning of 2024, the highest cumulative incidence of malaria per 10,000 population was reported from Nuristan (426.0) followed by Kunar (304.0), Laghman (193.7), and Nangarhar (106.6) (Figure 19).
- During 2024, a total of 81,304 malaria cases (47.0% female and 20.8% under-five) with 2 associated deaths (both under -five males) with CFR=0.002% were reported from 33 provinces.

Figure 17. Weekly distribution of malaria cases in Afghanistan 01 Jan 2024–22 Feb 2025 (N=82,966)

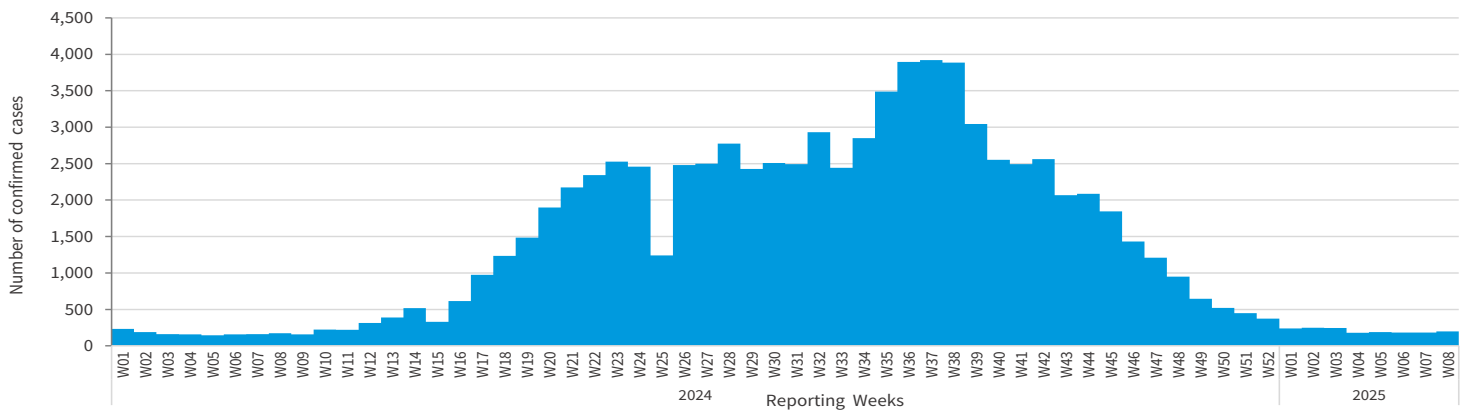
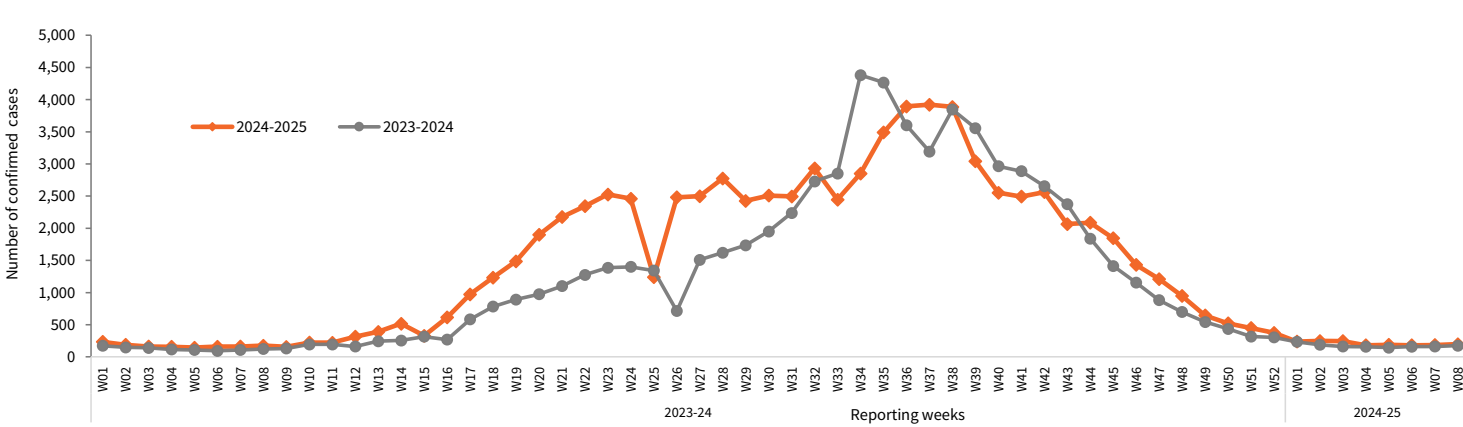


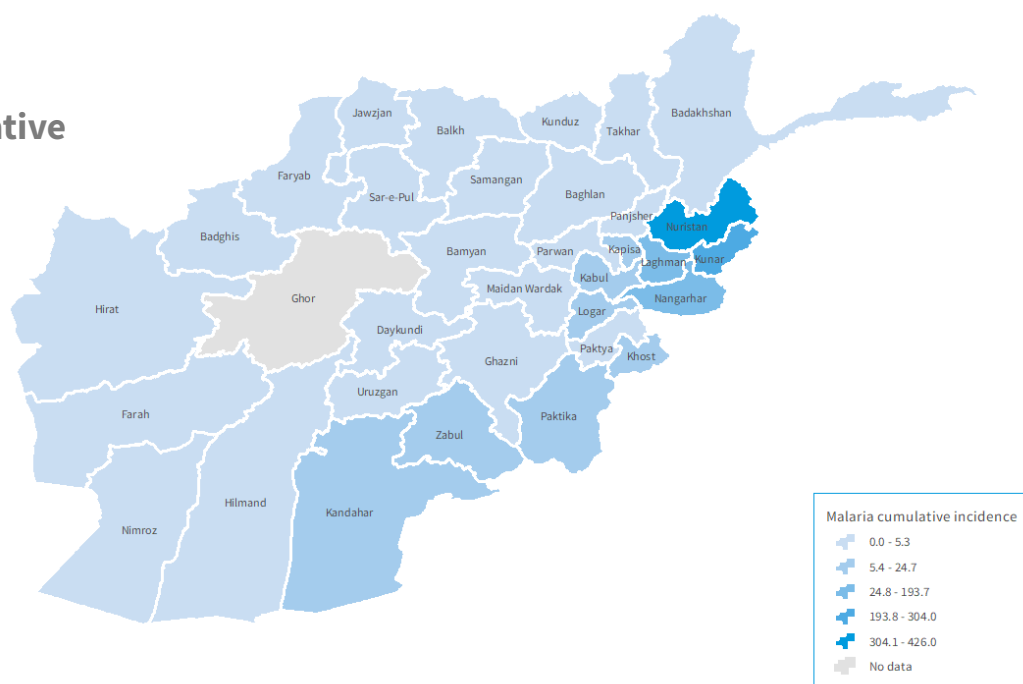
Figure 18. Comparison between the trends of malaria cases in 2024-25 vs 2023-24



**Figure 19.** Malaria cumulative incidence per 10,000 population by province in Afghanistan, 01 Jan 2024 – 22 Feb 2025

AFGHANISTAN

**Confirmed malaria cumulative
Incidence per 10,000
population by province
01 Jan 2024 – 22 Feb 2025**



Note: MOPH is the source of epidemiological data

[Case definition & alert/outbreak thresholds](#)

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