

Earthquake in Eastern Afghanistan

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World Health Organization

Afghanistan

Reporting period: Based on available information as of 15:00 on 3 September 2025



WHO/AYSO provides essential healthcare through Mobile Health Team deployed in Ghaziabad Village, Nurgal District in Kunar Province

AFFECTED PROVINCES



4 affected provinces

SITUATION OVERVIEW

Three days have passed since the devastating 6.0 magnitude earthquake struck eastern Afghanistan, leaving widespread destruction across Kunar, Nangarhar, Laghman and Nuristan provinces.

The scale of the disaster continues to unfold. To date, more than 1400 people are confirmed dead, over 3300 injured, and at least 6700 homes destroyed. These figures are expected to rise further as search teams reach remote areas still cut off from assistance.

Rescue operations remain extremely challenging, especially in the most-affected areas, particularly Chawkay, Nurgal, Dara-e-Pech and Watapur in Kunar Province, which remain extremely hard to reach. Mountainous terrain, landslides and blocked roads continue to delay access, while recent rainfall has further complicated conditions.

Humanitarian partners have scaled up their efforts, deploying additional teams and resources to reach isolated and vulnerable communities. Despite this, many survivors are still believed to be trapped beneath collapsed homes in remote villages, and the window for finding them alive is rapidly closing.

The disaster has displaced thousands of families, many of whom are living in temporary shelters and exposed to continuing aftershocks. Local health facilities are under immense strain, facing shortages of trauma supplies, essential medicines, and staff capacity. These shocks compound pre-existing vulnerabilities in the region, including fragile health infrastructure, widespread poverty, food insecurity, and the recent influx of returnees from Pakistan. An estimated 270 000 returnees have settled in the affected districts, further stretching already limited resources and leaving communities at heightened risk of secondary emergencies, such as disease outbreaks linked to overcrowding and poor sanitation.

Together with humanitarian partners, WHO has expanded life-saving support, deployed mobile health and psychosocial support teams, and delivered medical supplies. Despite these efforts, urgent gaps remain. A funding shortfall of over US\$4 million threatens to slow critical interventions. Immediate, coordinated international support is to safeguard lives and prevent the crisis from deepening further.

KEY FIGURES



1457

Fatalities



3394

injured



6782

Homes destroyed

WHO RESPONSE



6

WHO-supported Mobile Health Teams deployed to the affected areas



23 metric tonnes
medical supplies provided



HEALTH SITUATION

A total of 911 health facilities exist in Kunar, Nuristan, Nangarhar, Laghman and Nuristan provinces, including six specialized hospitals, two regional hospitals, six provincial hospitals and 25 district hospitals. Some health facilities are reportedly partially damaged but remain functional, continuing to provide healthcare services to affected populations. The exact number will be confirmed as assessments continue.

There are four hospitals are currently serving as referral facilities for patients injured in the earthquake: Chawkey District Hospital in Kunar (25 beds), Asadabad Provincial Hospital in Kunar (150 beds), Kama District Hospital in Nangarhar (75 beds), and Nangarhar Regional Hospital in Jalalabad (623 beds).

Nangarhar Regional Hospital is providing specialized care for the most critical cases. A total of 548 patients are currently admitted, of whom 172 have undergone major surgical procedures. To date, 268 units of blood have been transfused to support critical patients, and 121 patients have been discharged. Many discharged individuals, however, have no homes to return to and remain within the hospital premises.



An earthquake survivor admitted at Nangarhar Regional Hospital

WHO RESPONSE

WHO, with its strong presence across Afghanistan, has ensured timely coordination and rapid delivery of life-saving assistance to affected communities.

Primary Healthcare Services

WHO is providing primary health care (PHC) services to affected populations through the deployment of six mobile health teams (MHTs) in remote areas in Nurgal District in Kunar Province; two MHTs in Masoud village, two MHTs in Wazir village, one in Mazardara Valley, and one in Suhail Tangi village. The MHTs are delivering first aid, outpatient consultations, maternal and child health services, vaccinations, and essential medicines, as well as triage and referral of injured patients. To date, the MHTs have provided more than 1100 consultations, and referred 255 cases for further treatment.

Mental Health and Psychosocial Support

WHO is prioritizing Mental Health and Psychosocial Support (MHPSS) by delivering mental health consultations and providing both group and individual counseling for affected populations, particularly those who have lost loved ones and are experiencing severe trauma.

WHO has deployed three MHPSS outreach teams in the affected areas—one team in Nurgal District, Kunar, and two teams at Nangarhar Regional Hospital. Each team includes trained medical doctors, nurses, and psychologists. To date, more than 200 consultations have been provided through a combination of Psychological First Aid (PFA), individual and group consultations, awareness sessions, and referrals.

Disease Surveillance/Potential Diseases Outbreak Prevention and Response

WHO has deployed 17 Surveillance Support Teams (SSTs) across four provinces, eight in Nangarhar, four in Kunar, three in Nuristan, two in Laghman, to conduct active surveillance. No alerts of infectious disease outbreaks have been detected or reported in the earthquake-affected districts of the Eastern Region as of 3 September 2025.

A total of nine vehicles have been assigned to SSTs to access earthquake-affected areas, three in Nangarhar, three in Nuristan, two in Kunar, one in Laghman, for active case finding. Passive surveillance is ongoing through 68 sentinel sites (28 in Nangarhar,

22 in Kunar, 10 in Nuristan, 8 in Laghman), which are reporting weekly on 17 priority infectious diseases.

WHO has prepositioned outbreak case management kits for an estimated 3000 cases to ensure rapid response to potential outbreaks.

Operations Support and Logistics

So far, WHO delivered approximately 23 metric tonnes of supplies (trauma and emergency surgery kit (TESK), Ringer's lactate), covering an estimated 2000 beneficiaries for life-saving care. The items have been delivered to eight health facilities, including Nangarhar Regional Hospital, Kunar Provincial Hospital, Kama District Hospital and CHCs.

WHO, through its Dubai logistics hub, is mobilizing an additional 35.9 metric tonnes of medical supplies.

Prevention of and Response to Sexual Exploitation, Abuse and Harassment

Protecting frontline health workers and affected communities remains a top priority for WHO, as safeguarding risks are high in the aftermath of the earthquake. To date, 238 health workers (55 women and 183 men) and 170 affected individuals (70 women and 100 men) have received safeguarding awareness.



Earthquake survivor with head injury received treatment at Nangarhar Regional Hospital.

NEEDS AND GAPS

There is an urgent need to expand primary health care services to guarantee access to outpatient consultations, maternal and child health care, first aid, and referral services for affected populations.

Referral hospitals in Kunar and Nangarhar are experiencing severe shortages of analgesics, antibiotics, surgical supplies, and blood products. Referral and pre-hospital systems are inadequate, with few ambulances available and no structured evacuation pathways from remote villages. There is an urgent need to support the ambulatory system. In addition, the absence of female healthcare workers in many facilities is limiting access for women and girls.

MHPSS services are most needed. Populations who have lost loved ones are experiencing severe trauma, reinforcing the urgent need for counseling and psychosocial services as part of the health response.

Reportedly, 6782 homes have been destroyed, leaving thousands without shelter. Around 270 000 recent returnees are among the affected, further straining already limited resources. Families are exposed to the elements and poor Water, Sanitation and Hygiene (WASH) conditions, heightening the risk of outbreaks of acute watery diarrhea, measles, and other communicable diseases.



WHO mission visits Nurgal CHC, Kunar Province

Continued support to surveillance and reporting systems is vital for the timely detection of disease outbreaks.

Without urgent additional funding—currently facing a shortfall exceeding **US\$4 million**—delivery of trauma care, mobile health, WASH, and emergency shelter will remain critically constrained.

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