



# World Health Organization

Afghanistan

## AFGHANISTAN

### EMERGENCY SITUATION REPORT



No. 53 | June 2025

#### Key figures (monthly)



**155 562**

Number of out-patient consultations (PHCs & Hospitals)



**227** Medical kits distributed

benefiting 123,450 individuals



**442**

Health workers trained



Figure 1: WHO Representative visit Zero Point clinic at the Islam Qala border to assess health response for returnees. Photo credit: WHO Afghanistan

## WHO scales up health response for returnees

WHO Representative Dr. Edwin Salvador led a technical mission to Herat to strengthen health services for returnees and deportees. The team engaged local authorities and partners, resulting in the deployment of a surge team and rapid delivery of emergency medical kits. "Where health needs are greatest, WHO stands with the people," affirmed Dr. Salvador

### Key achievements

WHO strengthened health systems by supporting 109 primary facilities, an emergency trauma center, and two specialized hospitals as well as five mental health wards across multiple provinces. The organization further expanded drug dependence treatment to 17 centers in 13 provinces. This continuous care for vulnerable populations was achieved through essential service delivery, health worker training, and distribution of critical medical supplies.

#### Summary of outbreaks (2025)



**808 000**

ARI-Pneumonia



**72 741**

Measles



**68 031**

AWD with dehydration



**16 882**

Malaria



**2 444**

COVID-19



**628**

Dengue fever

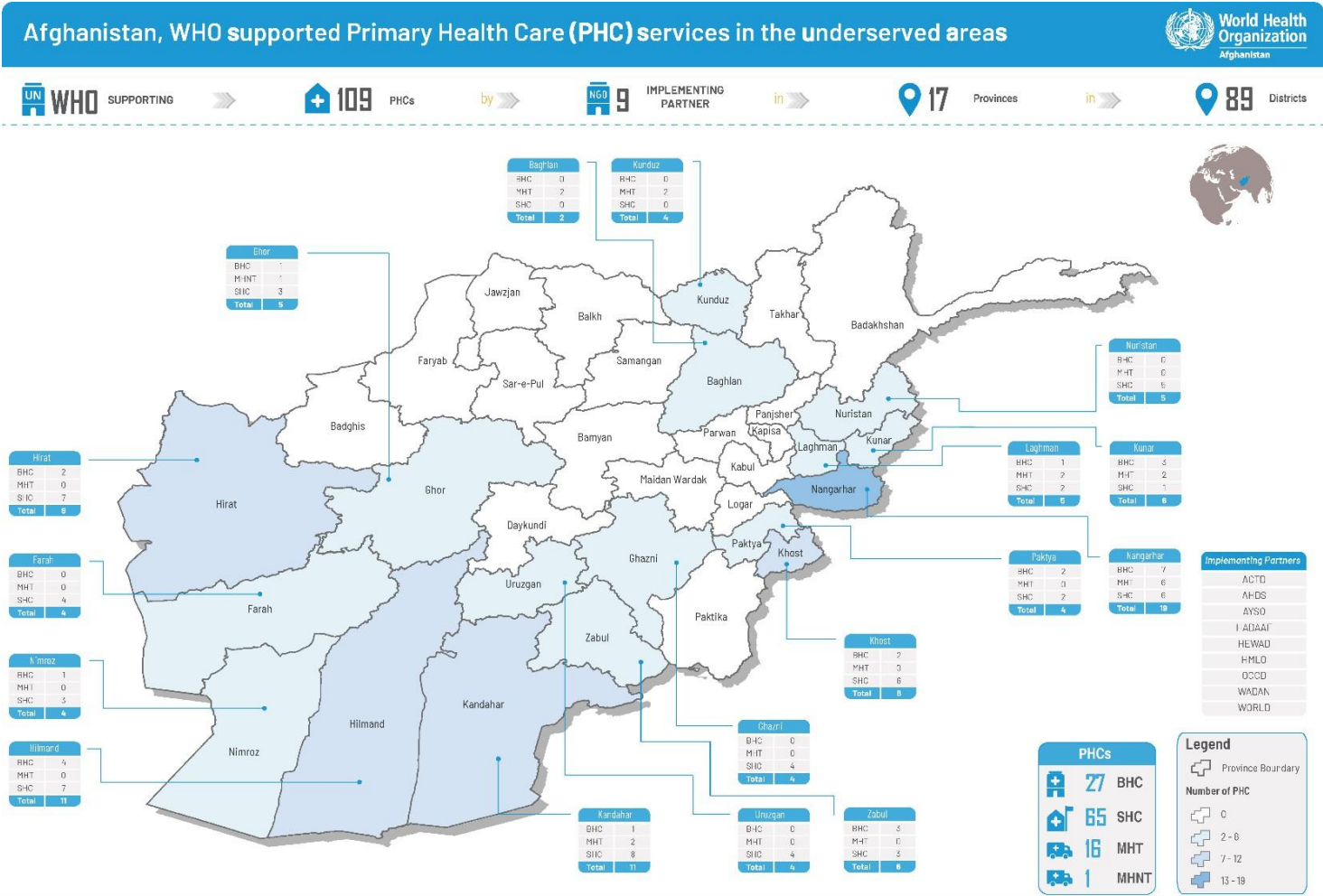


**720**


CCHF

Health service delivery (PHC and hospitals)


In primary healthcare, WHO partnered with nine NGOs to support 109 facilities across 17 provinces, providing essential care to 155 562 individuals (Boys: 24,147 Girls: 25,627 Men: 40,140 Women: 65,648). Secondary and tertiary care were enhanced through one emergency trauma center, two specialized hospitals (infectious disease and national mental health), and five acute mental health wards across seven provinces, supported by seven NGOs. Additionally, WHO expanded substance treatment via 12 Drug Treatment Centers (DATC) and five Opioid Agonist Maintenance Treatment (OAMT) centers in 13 provinces, ensuring integrated care. To sustain these efforts, WHO distributed 227 medical kits and trained 442 healthcare workers, reinforcing system resilience. These achievements demonstrate WHO's commitment to equitable, comprehensive healthcare access nationwide.




Key milestones achieved in WHO-supported primary healthcare facilities & hospitals during June 2025 include:




**155 562**  
People received OPD consultations




**130 346**  
Patients received essential drugs for their basic health services needs




**3 873**  
Women received postnatal care (PNC)




**6 934**  
Women received antenatal care (ANC)




**848**  
Institutional deliveries




**10 857**  
Under 5 children received DTP, Penta3, and Measles vaccination




**9 494**  
Pregnant, CBA women received TT2+ vaccination



**6,039**  
Individuals received mental health consultations



**8 371**  
Pregnant and lactating women received Infant and IYCF counselling



**128,614**  
People living in remote and underserved areas received health education and awareness-raising materials

Sustaining healthcare service delivery

Beneficiaries of PHC & Hospital services at WHO-supported facilities for June 2025		
Age	Male	Female
Over 18 years	40,140	65,648
Under 18 years	24,147	25,627

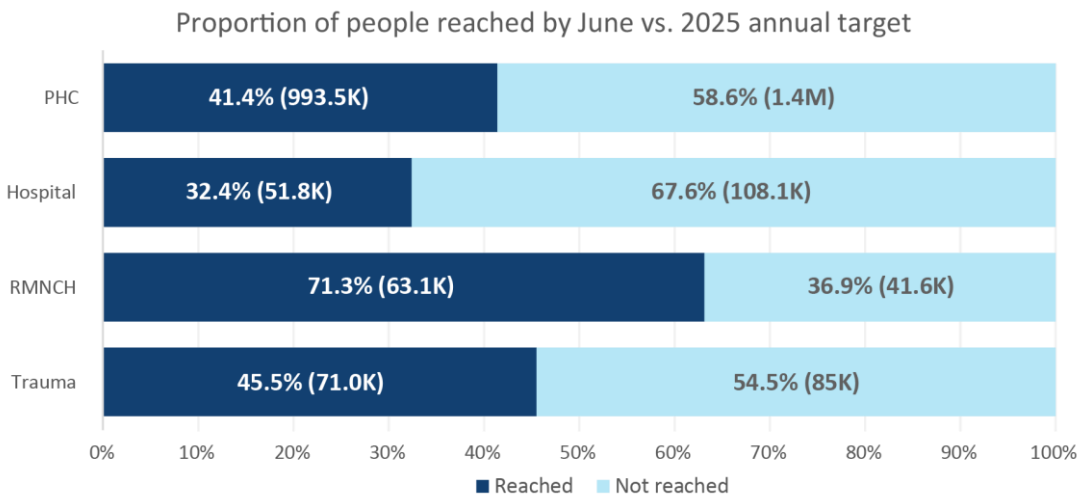


Figure 3: Proportion of people reached with health services

Infectious disease hazard and surveillance

Summary monthly Report on Infectious Disease Outbreaks in Afghanistan: June 2025

Indicators	AWD with dehydration	Suspected Measles	Suspected CCHF	Suspected Dengue fever	Confirmed Malaria	Confirmed COVID-19	ARI-Pneumonia
Monthly new cases (% change compared to May)	17,300 (↑9.8)	10,254 (↓30.1)	342 (↑71.0)	166 (↓23.1)	6,155 (↑19.8)	605 (↑1.0)	68,545 (↓26.2)
Monthly new deaths (CFR%)	9 (0.05)	46 (0.4)	26 (7.6)	0 (0.0)	0 (0.0)	0 (0.0)	159 (0.2)
Cumulative cases*	68,031	72,741	720	628	16,882	246,553	808,000
Cumulative deaths (CFR%)	26 (0.04)	445 (0.6)	50 (6.9)	0 (0.0)	0 (0.0)	8,052 (3.3)	1,780 (0.2)

Table 1: Summary monthly Report on Infectious Disease Outbreaks in Afghanistan

\* COVID-19 cumulative numbers have been reported since the start of the pandemic.

Acute Watery Diarrhea (AWD) with dehydration

A total of 17,300 AWD with dehydration cases and 9 associated deaths (monthly CFR 0.05%) were reported, compared to 15,759 cases and 6 deaths during May. This represents an increase of 9.8% in the number of reported cases compared to the previous month.

Suspected Measles

A total of 10,254 suspected measles cases and 46 associated deaths (monthly CFR 0.4%) were reported, compared to 14,660 cases and 93 deaths during May. This represents a 30.1% decrease in the number of suspected cases compared to the previous month.

Suspected Crimean–Congo Hemorrhagic Fever (CCHF)

A total of 342 suspected cases of CCHF with 26 associated deaths were reported (monthly CFR 7.6%) compared to 200 cases and 16 deaths reported in May. This shows an increase of 71.0% in the number of suspected cases compared to the previous month, warranting close monitoring for the period after Eid-ul- Adha.

Suspected Dengue fever

A total of 166 suspected dengue fever cases were reported, compared to 216 suspected cases during May. This shows a 23.1% decrease in the number of suspected cases reported compared to the previous month. No dengue fever-associated deaths have been reported since the beginning of 2025.

Confirmed Malaria

A total of 6,155 confirmed malaria cases were reported, compared to 5,136 confirmed cases reported during May; this shows a 19.8% increase in the number of confirmed cases reported compared to the previous month. No malaria-associated deaths have been reported since the beginning of 2025; the current trend requires close monitoring to support a timely response and effective control measures.

Confirmed COVID-19

A total of 605 confirmed COVID-19 cases with no associated deaths (monthly CFR 0.0%) were reported, compared to 599 cases and no deaths during May. This represents a slight increase of 1.0% in the number of confirmed cases compared to the previous month.

During this period, a total of 2,140 samples (test positivity rate of 28.3%) were tested among suspected COVID-19 cases in public laboratories, which shows a decrease of 46.2% compared to the number of tests conducted in May (3,976).

Since the beginning of 2025, 2,444 confirmed cases of COVID-19 and 4 associated deaths (CFR 0.2%) have been reported.

ARI-Pneumonia

A total of 68,545 ARI pneumonia cases and 159 associated deaths (monthly CFR 0.2%) were reported, compared to 92,866 cases and 195 deaths during May. This represents a 26.2% decrease in the number of reported cases compared to the previous month.

Supplies

- WHO bolstered disease response in Afghanistan through the following critical medical supply distributions.
- CCHF Management: Supplied 1,080 Ribavirin injections, 133 Ribavirin tablets, 1,200 antibiotic vials (Vancomycin/Ceftriaxone), and 502 sample collection kits nationwide.
  - AWD Response: Distributed 67 acute watery diarrhea (AWD) case management kits to combat outbreaks.
  - Rabies Prevention: Delivered 2,000 rabies vaccine vials to Nangarhar province.
  - Dengue Surveillance: Provided 190 rapid diagnostic tests (RDTs) for the East region and 10 diagnostic kits (960 tests) to key labs, including CPHL, NIDH, and Nangarhar RRL.
  - Infection prevention and control: Strengthened safety measures with 727 glove boxes and 123 high-hazard PPE kits for CCHF response.

Epidemiological updates on returnees

Number of infectious disease cases reported among returnees by the SSTs, 01-28 Jun 2025							
Diseases	Male		Female		Total		
	<5 Years	≥5 Years	<5 Years	≥5 Years	Male	Female	Total
Acute bloody diarrhea	2	10	1	8	12	9	21
ARI cough and cold	35	125	26	64	160	90	250
Acute watery diarrhea	8	3	1	0	11	1	12
Chicken pox	0	9	0	4	9	4	13
COVID-19	0	89	0	51	89	51	140
Dengue fever	0	18	0	38	18	38	56
ARI pneumonia	0	11	0	7	11	7	18
Scabies	6	58	10	36	64	46	110
Suspected measles	3	6	2	2	9	4	13
AWD with severe dehydration	0	1	0	0	1	0	1
Malaria	0	20	0	10	20	10	30
Grand Total	54	350	40	220	404	260	664

Table 2: Infectious diseases reported among the returnees

- 302,445 individuals were screened for infectious diseases, including 6,680 screened by Surveillance Support Teams (SSTs) at returnee camps and 295,765 travelers at key border crossings (Islam Qala, Herat; Torkham, Nangarhar).
- Conducted 45 COVID-19 rapid tests (9 positive, 20% positivity) and 8 PCR tests (all negative) among returnees.
- Detected 18 positive Dengue Fever cases (39.1% positivity) out of 46 tests.
- Identified 11 malaria positive cases (50% positivity) out of 22 tests.
- One AWD RDT test conducted (negative).



## Drug demand reduction

- WHO enhanced the capacity of female clinical staff across Kabul's Female DATC and OAMT clinics, by organizing a family planning training program which was attended by 13 participants. This initiative, coordinated with the WHO Reproductive, Maternal, Newborn, and Child Health (RMNCAH) team, aims to improve reproductive health services provided to women and children in Kabul.
- WHO strengthened public health response to substance use disorders in Kabul through the active collaboration with the Counternarcotic Working Group (CNWG). This included the development and finalization of priority areas of engagement document and the "Doha Process Working Group on Counternarcotics Small Group on Drug Use Prevention and Treatment Joint Engagement Plan." This collaboration supports evidence-based interventions to reduce morbidity, mortality and social costs associated with substance use disorders.



Figure 4: RD visit to Kabul 100-bed Women and Children DATC. Photo Credit: WHO Afghanistan

## Health logistic and supplies

- The World Health Organization has delivered two collection testing and transformation kits to Afghanistan's national blood bank Center, estimated to serve 100 beneficiaries, demonstrating the organization's commitment to providing critical care in emergency situations.
- WHO delivered 76 cholera kits across Afghanistan, providing life-saving treatment for 7,600 patients and reinforcing national capacity to combat acute watery diarrhea outbreaks.
- WHO delivered 59 IEHK basic kits to health facilities across Afghanistan, providing essential medicines and supplies for approximately 59,000 patients, boosting primary healthcare capacity in underserved areas.

- WHO has also facilitated the delivery of 55 PHC kits in Afghanistan, which are expected to serve 55,000 beneficiaries, focusing on the provision of comprehensive primary health care.
- WHO Supplied 35 trauma and emergency surgery kits across multiple provinces, enabling life-saving trauma care for 1,750 beneficiaries.

These strategic distributions have reinforced Afghanistan's healthcare capacity, reaching 127,450 people with vital medical support.

## Preventing & Responding to Sexual Exploitation, Abuse and Harassment (PRSEAH)

- WHO validated and shared the findings from the safeguarding risk assessment with the border consortium, implementing partners and health cluster partners at both national and regional levels, ensuring safeguarding risks are effectively addressed in the returnee's response.
- WHO gained formal endorsement of the identified risks from the border consortium, strengthening partner-led mitigation actions that are currently underway.
- WHO Afghanistan is committed to continuously working with partners to implement and monitor SEAH risk mitigation measures, particularly in light of the increased and forced return of Afghans from Iran, to ensure a safe delivery and access of health response.



Figure 5: WHO Afghanistan implementing SEAH risk mitigation measures for safe return of Afghans. Photo Credit: WHO Afghanistan

## Strategic initiatives for workforce development

In June 2025, WHO enabled a capacity-building sessions to over 442 health workers including doctors and nurses among others in various disciplines across the country. The summary of the trainings is indicated in the table below:

Training Name	Male	Female	Total
AWD Case Management	29	0	29
Family Planning	0	13	13
HMIS	44	0	44
MHGAP	101	0	101
Mass Casualty Management - MCM	49	35	84
PEN NCD	58	52	110
Pharmacovigilance	35	1	36
Problem Management Plus	25	0	25
<b>Grand Total</b>	<b>341</b>	<b>101</b>	<b>442</b>

Table 3: Capacity building in various discipline

## Health Cluster (HC)

- The health cluster provided humanitarian health services to 799,165 people (32% women, 53% children) across all 34 provinces through 51 partner organizations (May 2025).
- In emergency response coordination, the HC conducted high-level national/regional meetings addressing outbreaks, funding gaps, and returnee health needs, while advocating for donor support to reopen 422 closed facilities (affecting 3.08M people).
- Secured approval of 21 MoUs via MoPH collaboration and strengthened migration health task force coordination for returnee influx responses from Pakistan and Iran.

- Executed joint missions to Herat Province and key border points (Spinboldak/Milak), identifying critical service gaps in health infrastructure and partner presence.



Figure 6: Nangarhar, Sasobi BHC OPD services

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