World Health Organization
Afghanistan

AFGHANISTAN

INFECTIOUS DISEASE OUTBREAKS
SITUATION REPORT | Epidemiological week #35-2025

No. 35(24- 30 Aug 2025)

Disease Outbreaks	AWD with dehydration	Measles (Suspected)	CCHF (Suspected)	Dengue fever (Suspected)	Malaria (Confirmed)	COVID-19 (Confirmed)
Cumulative cases 2025	116,083	87,166	1,138	1,240	40,379	3,270
Cumulative deaths 2025 (CFR %)	57 (0.05)	520 (0.6)	86 (7.8)	0 (0.0)	0 (0.0)	4 (0.1)

Data from 610 (99.5%) out of 613 sentinel sites

Acute Watery Diarrhea (AWD) with Dehydration

(29 Dec 2024-30 Aug 2025)

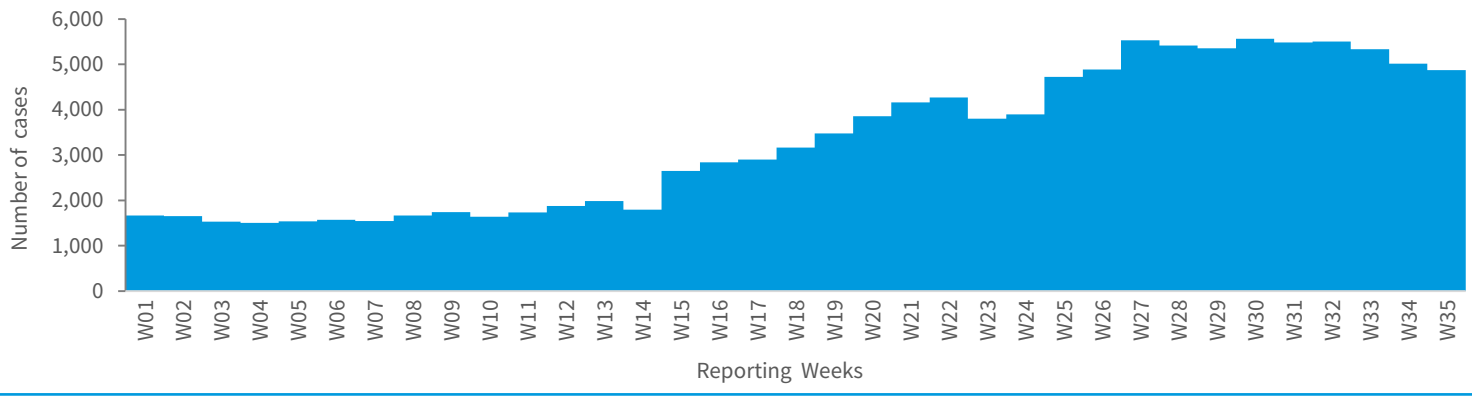
116,083	57	7,958	926	11.6%
Total cases	Total deaths	Samples tested (RDTs)	RDT-positive cases	RDT positivity rate

Table 1: Summary of the AWD with dehydration outbreak in the last eight weeks in Afghanistan (06 Jul - 30 Aug 2025)

Indicators	W28	W29	W30	W31	W32	W33	W34	W35	Trend line
Number of cases	5,412	5,350	5,560	5,480	5,503	5,331	5,015	4,872	
Number of deaths	6	3	4	4	2	2	5	2	
CFR (%)	0.11	0.06	0.07	0.07	0.04	0.04	0.10	0.04	

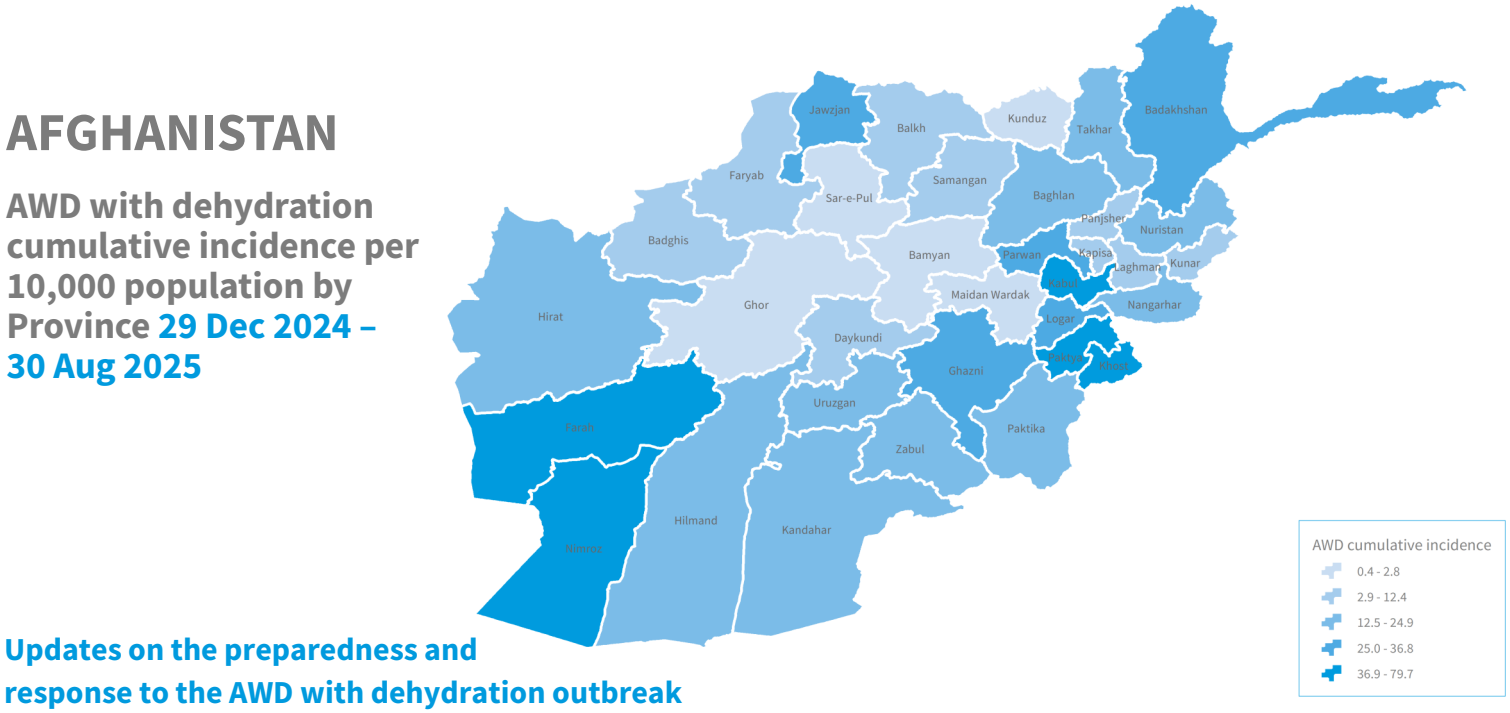
- The epidemiological curve has shown a gradual decreasing trend since week 30-2025, following its highest peak in week 30-2025 with 5,560 suspected cases in a single week (Figure 1).
- There is an ongoing AWD with a dehydration outbreak in central provinces, Parwan and Kapisa provinces, since 10 July 2025. As of 30 Aug 2025, a total of 1,473 suspected cases have been reported (1,283 in Parwan and 190 in Kapisa province) in 14 districts (8 in Parwan and 6 in Kapisa). Among the suspected cases, 734 RDTs were conducted (545 in Parwan and 189 in Kapisa), of which 305 tested positive [202 in Parwan (positivity rate 37.1%) and 103 in Kapisa (positivity rate 54.5%). Four deaths have been reported, two from Parwan and two from Kapisa province (CFR 0.3%).
- During week 35-2025, a total of 4,872 AWD with dehydration cases, with 2 associated deaths (CFR 0.04%), were reported from 222 districts. This shows a slight decrease in the number of cases compared to the previous week.
- Both the new deaths were females, under-five-year-old, reported from Badakhshan province.
- Out of the 4,872 AWD with dehydration cases, 2,490 (51.1%) were females and 2,696 (55.3%) were under-five children.

Figure 1. Weekly distribution of AWD with dehydration cases in Afghanistan 29 Dec 2024 – 30 Aug 2025 (N=116,083)



- During week 35-2025, no new district reported an alert of AWD with dehydration.
- Since Jan 2025, 116,083 cases of AWD, with dehydration with 57 associated deaths (CFR 0.05%) were reported from 341 districts. Out of total cases, 57,457 (49.5%) were females, while 66,132 (57.0%) were under-five children.
- Since Jan 2025, 7,958 Rapid Diagnostic Tests (RDT) have been conducted on AWD with dehydration cases, of which 926 tests turned positive (positivity rate 11.6%).
- Since the beginning of 2025, the highest cumulative incidence of AWD with dehydration per 10,000 population was reported from Paktya (79.7), followed by Nimroz (72.6), Kabul (60.2), Khost (56.6), and Farah (56.3) (Figure 2).

Figure 2. AWD with dehydration cumulative incidence per 10,000 population by province in Afghanistan, 29 Dec 2024 – 30 Aug 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:

- WHO distributed 20,000 IEC materials in local languages to raise awareness on recognizing early symptoms, practicing good hygiene and sanitation, and ensuring safe water and food handling in Parwan province as part of the response to the recent outbreak.
- WHO supplied 32 AWD with dehydration case management kits as part of the response to the AWD with dehydration outbreak in Parwan province. While 417 AWD with dehydration case management kits have been distributed to all 34 provinces.
- 1,012 kits of Cary Blairs and 1,330 kits of Rapid Diagnostic Test (RDTs) have been distributed to all 34 provinces across the country.
- 60 boxes (100 gloves/box) of gloves have been distributed to the Kabul surveillance office.
- 813 boxes of PPE were distributed to all 34 provinces across the country.
- 60 HCWs (including 17 females) in Parwan province and 59 HCWs (including 7 females) in the East and South regions have been trained in AWD with dehydration case management by WHO.
- 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).
- WHO trained and deployed 20 social mobilizers (including 7 females) to 5 high-risk districts of Parwan province (Chaharikar, Bagram, Jabulseraj, Shinwari, and Said Khail) for RCCE activities as part of the response to AWD with dehydration outbreak. The team reached to 50,328 [including 16,621 (33.0%) females] individuals.

WASH update:

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

- A total of 43,771 individuals from three provinces (Farah, Nimroz, and Parwan) participated in hygiene promotion sessions aimed at strengthening community awareness and preventive practices.
- A total of 136,850 individuals were provided the clean drinking water by the distribution of Aqua Tab, chlorine, and PUR sachets (water purification sachets) in Baghlan province.

- A total of 12,814 individuals received hand-washing soap in Parwan province.
- Around 23,700 individuals gained access to safe drinking water through the construction of deep boreholes with a solar-powered piped system in Nangarhar province.

Measles
(29 Dec 2024-30 Aug 2025)

87,166	520	10,485	6,368	60.7%
Total Cases	Total Deaths	Sample tested	Lab confirmed cases	Test positivity rate

Table 2: Summary of the measles outbreak in the last eight weeks in Afghanistan (06 Jul - 30 Aug 2025)

Indicators	W28	W29	W30	W31	W32	W33	W34	W35	Trend line
Suspected cases	2,093	1,858	1,790	1,557	1,405	1,344	1,205	1,039	
Suspected deaths	11	12	13	6	4	6	5	2	
CFR (%)	0.5	0.6	0.7	0.4	0.3	0.4	0.4	0.2	

- The epi curve of suspected measles cases shows a decreasing trend since week 20-2025, with its highest peak in week 16 with 4,172 reported cases (Figure 3). The trend in 2025 is slightly higher than the 3-year average (2022-2024), however, following the similar pattern (Figure 4).
- During week 35-2025, a total of 1,039 suspected cases and 2 associated deaths (CFR 0.2%) were reported, which shows a decrease of 13.8% in the number of suspected cases compared to the preceding week.
- Out of the total 1,039 cases, 471 (45.3%) were females and 787 (75.7%) were under-five children.
- Both the new deaths were under five males, reported from Herat (1), and Kabul (1) provinces.
- Since the beginning of 2025, 87,166 suspected measles cases and 520 associated deaths (CFR 0.6%) were reported. Out of total cases, 40,945 (47.0%) were females, while 67,082 (77.0%) were under-five children.

Figure 3. Weekly distribution of suspected measles cases in Afghanistan, 29 Dec 2024 – 30 Aug 2025 (N= 87,166)

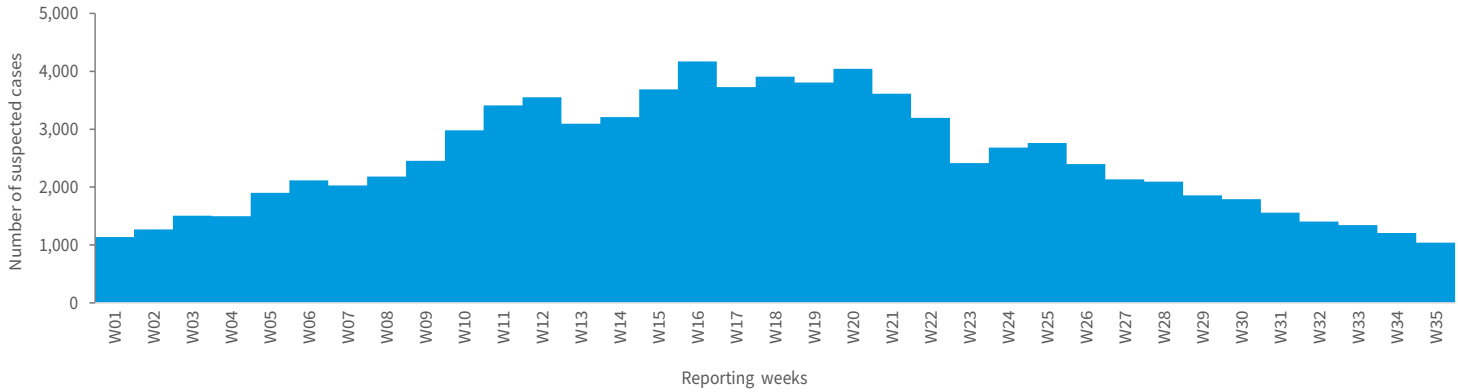
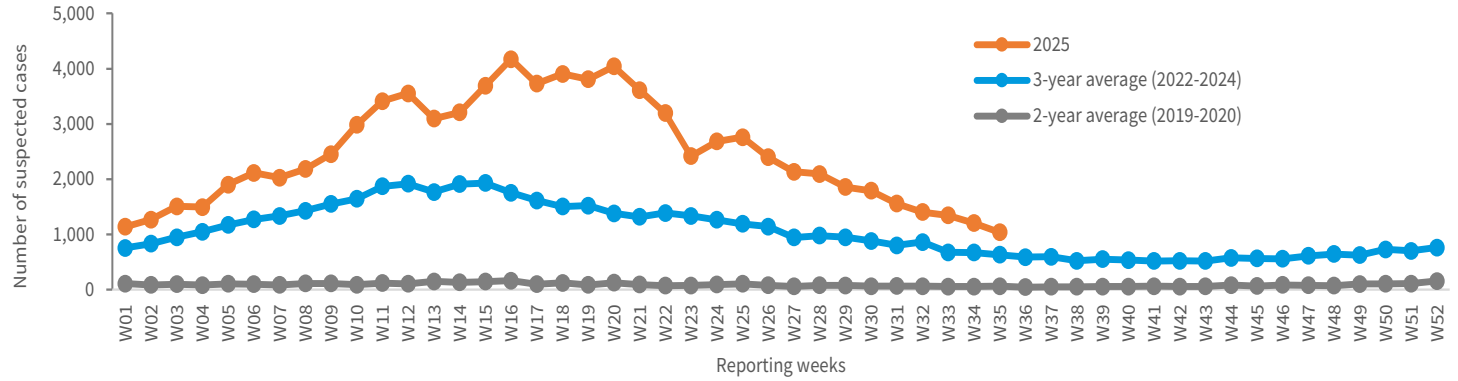
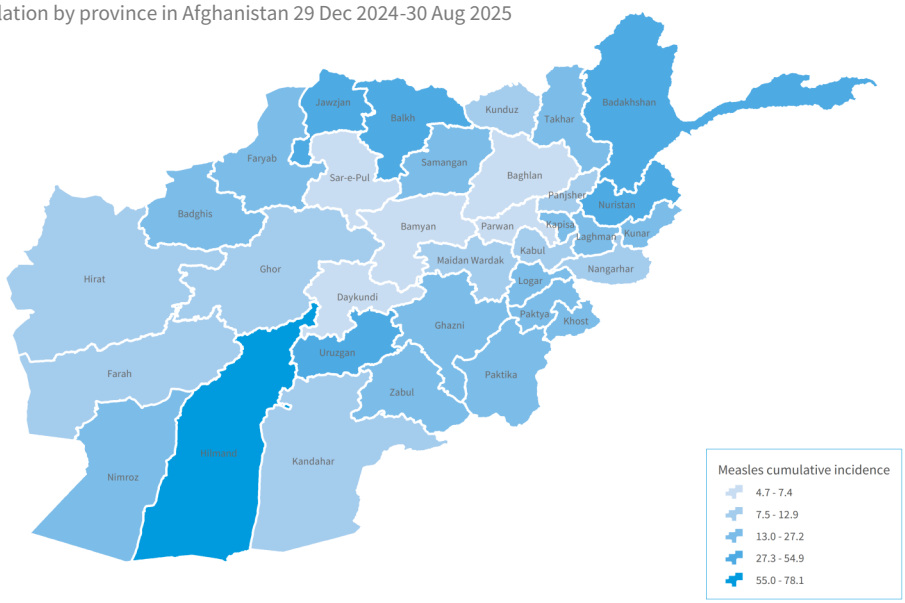


Figure 4. Comparison between the trends of suspected measles cases in 2025 vs 3-year average (2022-20224) and the endemic level



- Since the beginning of 2025, the highest cumulative incidence of suspected measles cases per 10,000 population has been reported from Helmand (78.1), followed by Badakhshan (54.9), Jawzjan (46.5), Nuristan (43.1), and Urozgan (40.5) (Figure 5).

Figure 5. Suspected measles cumulative incidence per 10,000 population by province in Afghanistan 29 Dec 2024-30 Aug 2025



Updates on the preparedness and response to the measles outbreak

- During week 35-2025, a total of 28 children aged 9-59 months were vaccinated against measles as part of the outbreak response in Kandahar province. This brings the number of children aged 9-59 months vaccinated against measles as part of outbreak response immunization activities to 26,215 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 345 measles case management kits have been distributed to 8 WHO's regional sub-offices across the country.
  - A total of 257 Health Care Workers (HCWs) including 62 females have been trained in measles case management from 7 regions: Central (68, including 10 females), West (40, including 20 females), North (30, including 9 females), East (30, including 9 females), South (29, all males), Northeast (30, including 9 females), and Southeast region (30, including 5 females).
  - 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.

Crimean Congo Hemorrhagic Fever (CCHF)

(29 Dec 2024-30 Aug 2025)

1,138 Total cases

89 Total deaths

906 Samples tested

313 Lab-confirmed CCHF cases

34.5% test positivity rate

Table 3: Summary of the CCHF outbreak in the last eight weeks in Afghanistan (06 Jul - 30 Aug 2025)

Indicators	W28	W29	W30	W31	W32	W33	W34	W35	Trend line
Suspected cases	67	46	39	41	39	32	41	54	
Suspected deaths	4	5	3	2	3	4	6	3	
CFR (%)	6.0	10.9	7.7	4.9	7.7	12.5	14.6	5.6	

- The epi-curve of suspected CCHF cases shows a decreasing trend since its highest peak in week 25-2025; however an increase is observed in the past 2 weeks which should be monitored (Figures 6 & 7).
- During week 35-2025, 54 new suspected CCHF cases with 3 associated deaths (CFR 5.6%) were reported compared to 41 cases and 6 deaths in the previous week (Table 3).
- Out of 54 new cases, 53 (98.1%) were over-five-year-olds, while 16 (29.6%) of them were females reported from 11 provinces [Kabul (21), Balkh (9), Herat (7), Kunduz (5), Badakhshan (2), Baghlan (2), Jawzjan (2), Nangarhar (2), Parwan (2), Kandahar (1), and Kapisa (1)].

- All the 3 new deaths were over-five-year-old, while 2 (66.7%) were females, reported from 3 provinces: Kabul (1), Herat (1), and Kunduz (1).
- Since the beginning of 2025, a total of 1,138 suspected CCHF cases, with 89 associated deaths (CFR 7.8%), were reported. Out of the total 1,138 cases, 1,134 (99.6%) were over five years old, while 361 (31.7%) were females. Also, 906 samples have been tested, 313 of them were positive (positivity rate 34.5%).
- Since the beginning of 2025, the highest cumulative incidence of suspected CCHF per 100,000 population is reported from Kapisa (8.5), followed by Kabul (7.8), Balkh (5.5), Kandahar (5.2), and Kunduz (3.7) (Figure 8).

Figure 6: Weekly distribution of suspected CCHF cases in Afghanistan 29 Dec 2024 – 30 Aug 2025, (N=1,138)

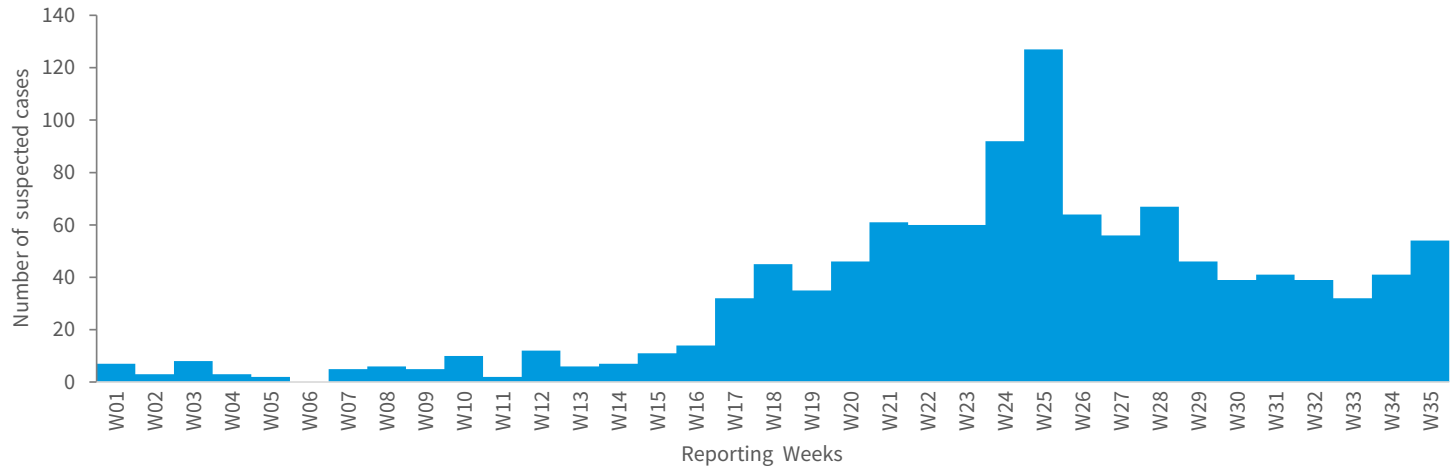
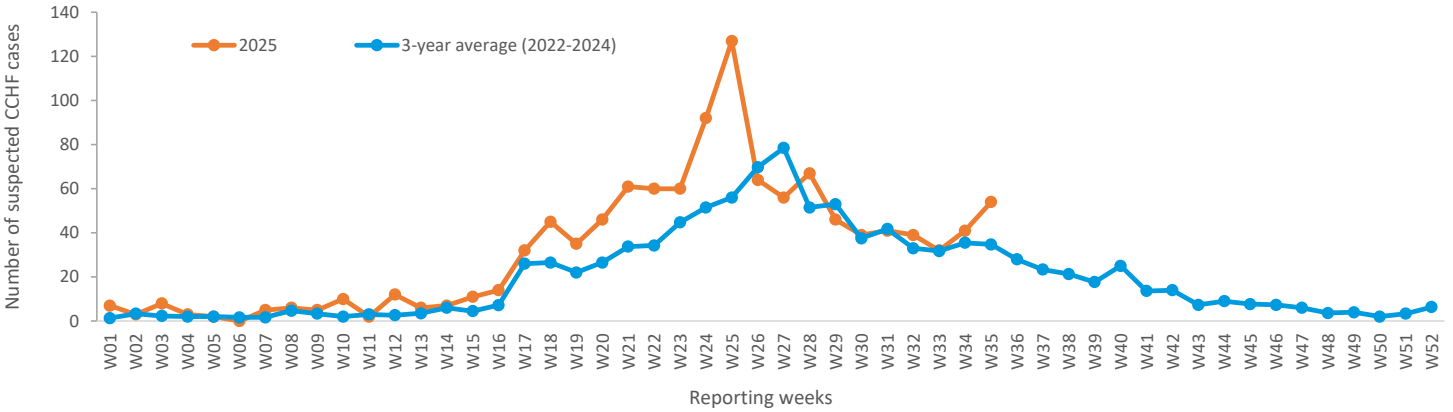


Figure 7. Comparison between the trends of suspected CCHF cases in 2025 vs 3-year average (2022-2024)



Updates on the response to the CCHF outbreak

- Since the beginning of 2025, the following activities have been conducted as part of outbreak preparedness activities:
  - A total of 27 packs of vial ceftriaxone 250mg (10 vials per pack), 100 vials of Vancomycin 500mg, and 80 packs of ribavirin injections (10 ampoules per pack) have been distributed to 5 WHO regional sub-offices (Herat, Nangarhar, Balkh, Kunduz, and Kandahar).
  - Online awareness campaigns on Crimean-Congo Hemorrhagic Fever (CCHF) have been conducted by WHO through its official social media channels (Facebook and X), reaching over 35,967 in X and 1,762 Facebook users to date. The campaigns focused on increasing public awareness and promoting preventive measures against CCHF.
  - 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.
  - 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.

Figure 8. Cumulative incidence of Crimean-Congo Hemorrhagic Fever (CCHF) cases per 100,000 population by province and provincial distribution of deaths in Afghanistan, 29 Dec 2024-30 Aug 2025

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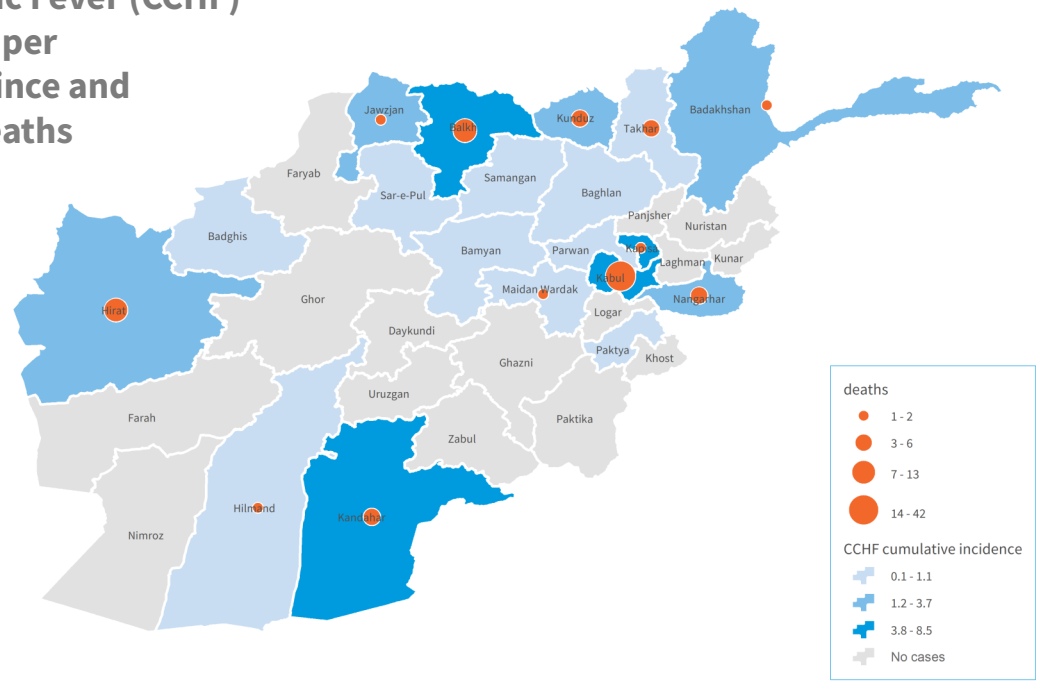
Crimean-Congo Hemorrhagic Fever (CCHF) Cases cumulative incidence per 100,000 population by province and provincial distribution of deaths

29 Dec 2024-30 Aug 2025



Dengue Fever

(29 Dec 2024-30 Aug 2025)

1,240 Total Cases

0 Total Deaths

194 *Sample tested

190 By PCR | **4** By NS1

26 Lab confirmed cases

22 By PCR | **4** By NS1

13.4% Test positivity ratio

Table 4: Summary of the dengue fever outbreak in the last eight weeks in Afghanistan (06 Jul - 30 Aug 2025)

Indicators	W28	W29	W30	W31	W32	W33	W34	W35	Trend line
Suspected cases	52	64	87	80	76	76	52	69	
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 decreasing trend since week 30-2025 following its peak (Figures 9 & 10).
- During week 35-2025, 69 suspected cases of dengue fever with no associated deaths were reported from Nangarhar, which shows a 32.7% increase in the number of cases in the preceding week.
- Out of the total 69 cases, 38 (55.1%) were females, while 67 (97.1%) of them were over five years old.
- Since the beginning of 2025, 1,240 suspected dengue fever cases, with no associated deaths, were reported from 6 provinces (Nangarhar, Laghman, Kunar, Kabul, Ghazni, and Paktya). Out of total cases, 1,193 (96.2%) were over five years old, while 528 (42.6%) were females.
- Since the beginning of 2025, a total of 194 samples have been tested, out of which 26 were positive (positivity rate 13.4%). The geographical distribution of suspected dengue fever cases at district levels in the East region provinces is shown in Figure 11.

**Note: Dengue fever laboratory data were 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 9. Weekly distribution of suspected dengue fever cases in Afghanistan 29 Dec 2024 – 30 Aug 2025, (N=1,240)

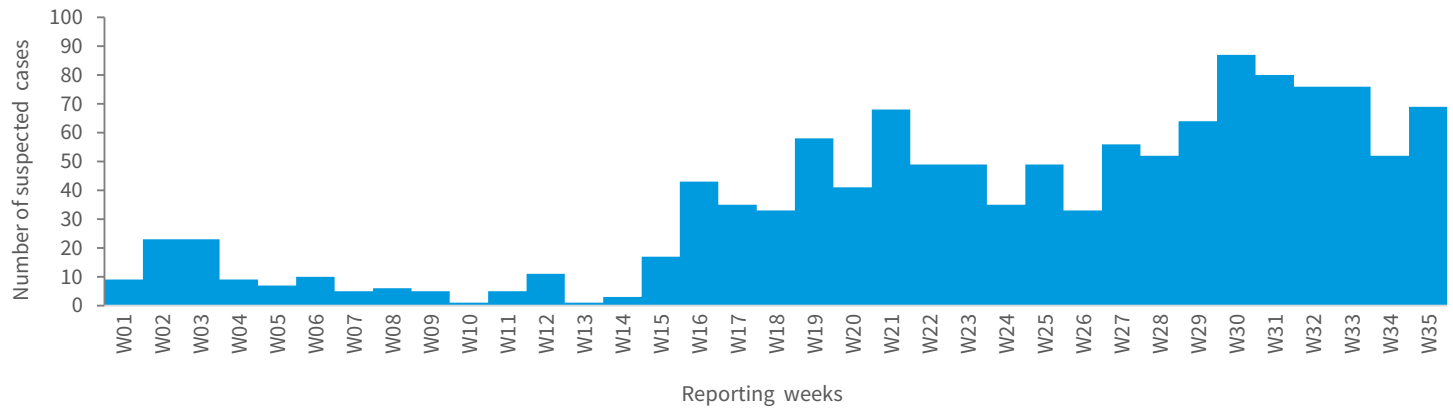


Figure 10: Comparison between the trends of suspected dengue fever cases in 2025 vs 3-year average (2022-2024)

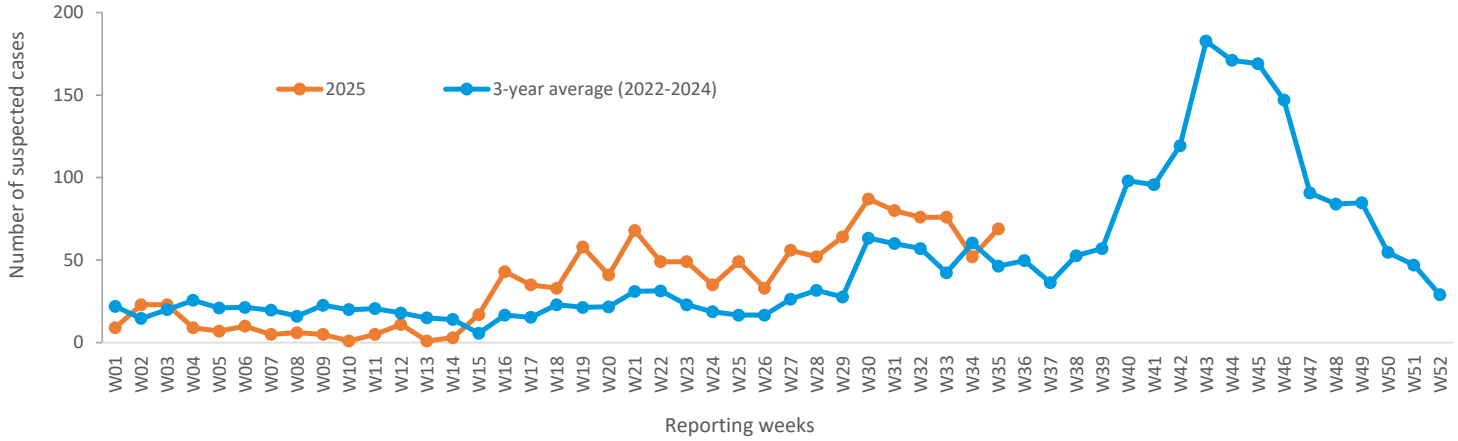
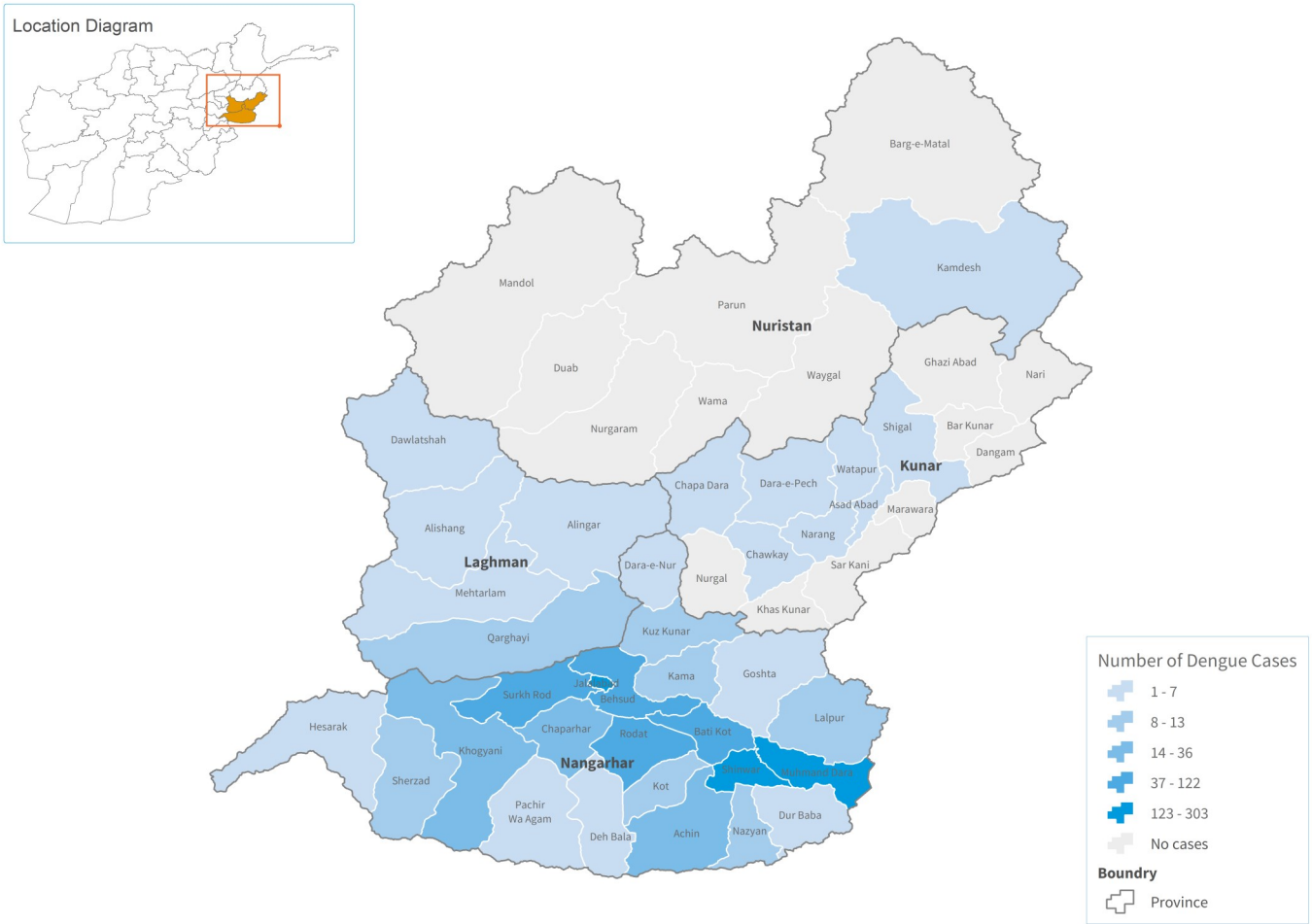


Figure 11. Geographical distribution of suspected dengue fever cases at district levels in East region provinces, 29 Dec 2024 – 30 Aug 2025



Updates on the response to dengue fever outbreak

- Since the beginning of 2025, a total of 350 kits (10 tests per kit) of dengue fever RDTs have been distributed to 6 provinces (Nangarhar, Kunar, Laghman, Nuristan, Kandahar, and Ghazni).

Confirmed Malaria

(29 Dec 2024-30 Aug 2025)

40,379
Total Malaria Cases

0 (0.0)
Total malaria deaths (CFR %)

Table 5: Summary of the malaria outbreak in the last eight weeks in Afghanistan (06 Jul - 30 Aug 2025)

Indicators	W28	W29	W30	W31	W32	W33	W34	W35	Trend line
Confirmed cases	1,928	2,090	2,180	2,404	3,200	3,316	2,966	3,415	
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 in 2025 is slightly higher than the 3-year average (2022-2024) since week 25-2025 (Figures 12 & 13).
- During week 35-2025, 3,415 cases with no associated deaths were reported from 18 provinces, which shows a 15.1% increase in the number of cases compared to the previous week.
- Out of the 3,415 cases, 1,591 (46.6%) were females and 584 (17.1%) were under-five children.
- Since the beginning of 2025, 40,379 confirmed malaria cases with no associated deaths have been reported. Out of total cases, 18,625 (46.1%) were females and 7,125 (17.6%) were under-five children.
- Since the beginning of 2025, the highest cumulative incidence of malaria per 10,000 population was reported from Nuristan (142.3), followed by Kunar (134.1), Laghman (81.6), and Nangarhar (62.7) (Figure 14).

Figure 12. Weekly distribution of malaria cases in Afghanistan 29 Dec 2024 – 30 Aug 2025 (N=40,379)

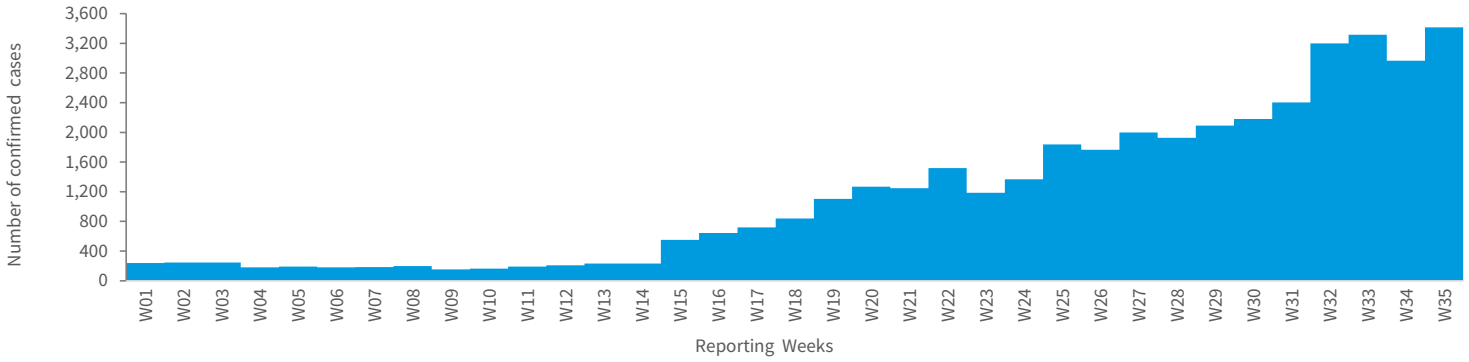


Figure 13. Comparison between the trends of malaria cases in 2025 vs 3-year average (2022-2024)

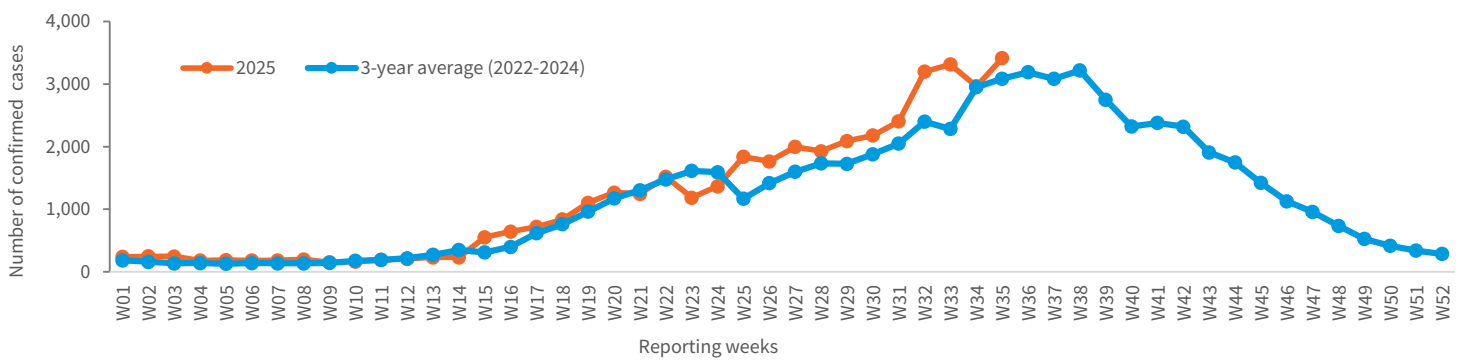


Figure 14. Malaria cumulative incidence per 10,000 population by province in Afghanistan, 29 Dec 2024-30 Aug 2025

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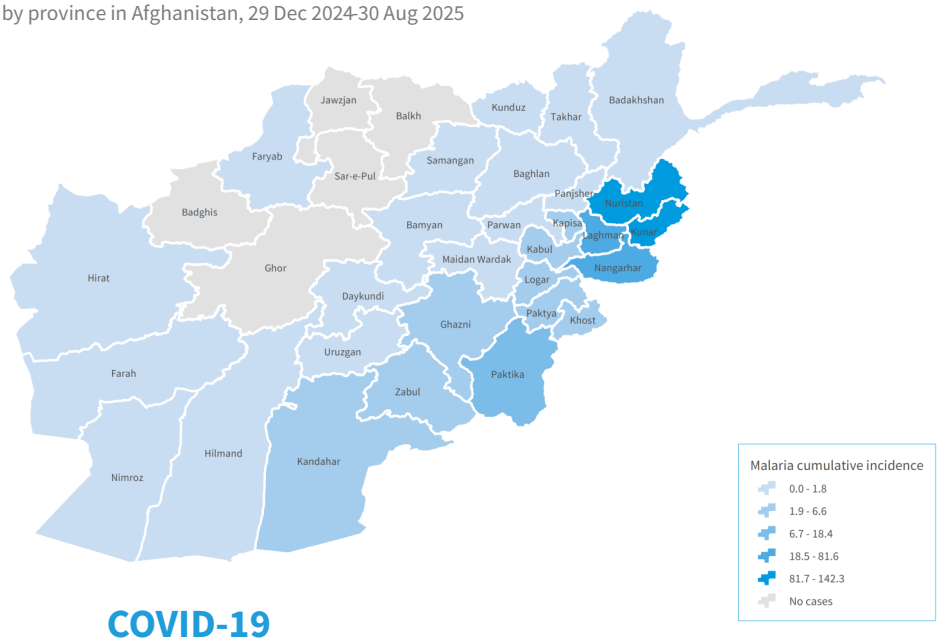
Confirmed malaria cumulative Incidence per 10,000 population by province

29 Dec 2024 – 30 Aug 2025



COVID-19

(24 Feb 2020 — 30 Aug 2025)

Cumulative samples tested
1,007,312
In public laboratories

New samples tested in week 35
548
In public laboratories
+6.2%

Cumulative confirmed cases
247,379
Cumulative positivity rate (24.6%)

New confirmed cases in week 35
42
Weekly positivity rate (7.7%)
+31.3%

Cumulative confirmed deaths
8,052
CFR (3.3%)

New confirmed deaths in week 35
0
Week 35 CFR (0.0%)
0.0%

Key: Increasing Decreasing No change

COVID-19 Vaccination highlights

Fully vaccinated	Partially vaccinated	Booster dose	At least one dose of any vaccine received
17,083,906	1,866,324	3,492,266	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%

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

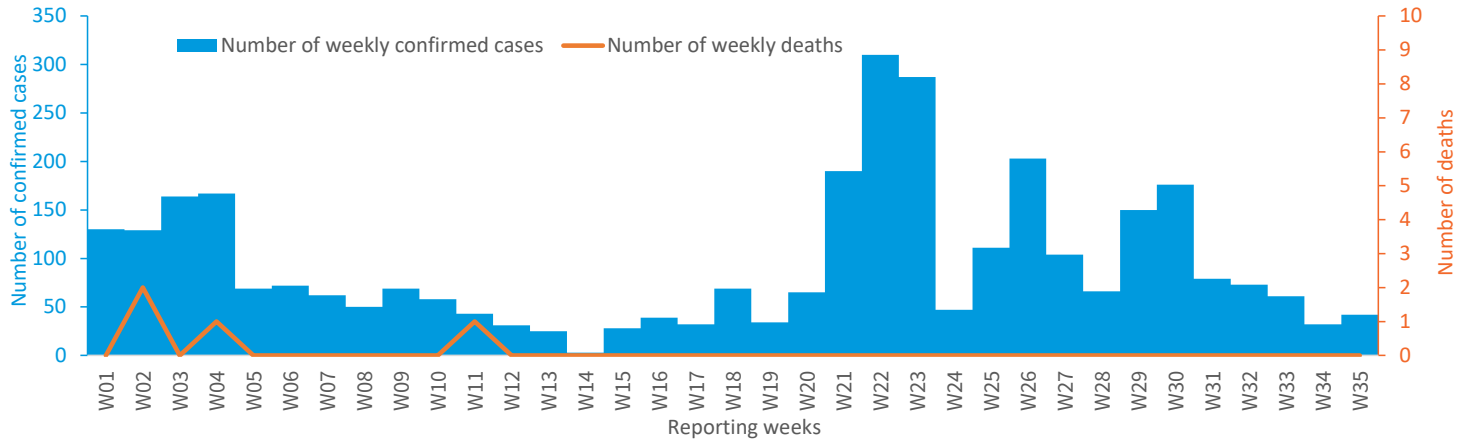
Table 6: Summary of COVID-19 indicators in the last 8 weeks in Afghanistan (06 Jul - 30 Aug 2025)

Indicators	W28	W29	W30	W31	W32	W33	W34	W35	Trend line
Samples tested (in public Labs)	647	822	834	660	534	518	516 *	548	
Confirmed cases	66	150	176	79	73	61	32	42	
Percent positivity (%)	10.2	18.2	21.1	12.0	13.7	11.8	6.2	7.7	
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	

**A delayed reporting was experienced during week 34-2025, and the number of samples tested were modified from 477 to 516.*

- The epidemiological curve of confirmed COVID-19 cases indicates a decreasing trend since week 23-2025 (Figure 15).
- During week 35-2025, a total of 548 samples were tested in public labs, of which 42 were positive for COVID-19 (positivity rate 7.7%), with no reported associated deaths (Table 6). This represents a 31.3% increase in the number of confirmed cases compared to the previous week.
- Since the beginning of 2025, 3,270 confirmed cases of COVID-19 and 4 associated deaths (CFR 0.1%) were reported. Out of the total cases, 1,497 (45.8%) were females.

Figure 15. Weekly distribution of confirmed COVID-19 cases and deaths in Afghanistan 29 Dec 2024 – 30 Aug 2025 (cases=3,270, deaths=4)



Updates on the response activities to the COVID-19 outbreak

Since the beginning of 2025:

- A total of 5,955 kits of Covid-19 Rapid Diagnostic Test (RDT) have been distributed to all 34 provinces across the country.
- 850 kits of Viral Transport Medium (VTM) have been distributed to all 34 provinces across the country.
- 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.

Note: MOPH is the source of epidemiological data

Case definition & alert/outbreak thresholds

Contact us for further information:

- Dr. Mohamed Tahoun, MD, MPH, PhD: Epidemiologist, WHO-CO, (tahounm@who.int)
- Infectious Hazard Preparedness Team – Health Emergencies Program (WHE)– (emacoafgihpt@who.int)