Earthquake in Eastern Afghanistan

WHO Situation report no. 13 | 2 Oct 2025

World Health Organization
Afghanistan

Reporting period: Based on available information as of 15:00 on 2 October 2025

KEY FIGURES

498 130
People in need

2205
Fatalities

3640
Injured

6782
Homes destroyed

21
Health facilities damaged

WHO RESPONSE

6 Mobile Health Teams
supported by WHO, deployed to the affected areas

17,944 Consultations
provided at WHO-supported primary healthcare facilities

52 Metric Tonnes
medical supplies provided

100 Metric Tonnes Prepositioned

US$ 6 Millions
funding gap for rapid life-saving response

WHO Representative visits Andarlachak Health Centre (Photo: WHO Afghanistan)

SITUATION OVERVIEW

The 31 August earthquake displaced hundreds of thousands across eastern Afghanistan, leaving nearly half a million people in need of urgent health assistance. What began as an acute emergency has now evolved into a displacement crisis, where families endure extended stays in temporary settlements amid escalating health risks.

As of 2 October 2025, six IDP settlements have been established in Kunar Province, providing shelters for thousands of families unable to return home due to ongoing aftershocks and unsafe structures.

The rapid health assessment conducted by WHO indicated the following results. Families reported a lack of access to safe drinking water, widespread open defecation, and poor access to health services. Women highlighted barriers due to the absence of female staff and the lack of privacy. Communities also stressed urgent needs for maternal and newborn health, immunization, noncommunicable disease case management, and mental health and psychosocial support (MHPSS).

The risk of secondary crises is growing. Overcrowding and unsafe water are already linked to increases in acute respiratory infections and diarrhoeal disease, while malaria and measles remain active threats. Women and girls also face increased protection risks in overcrowded camps, including unsafe movement and lack of safe space. With winter approaching, families in remote and mountainous areas without heating or insulation face rising vulnerability.

Long-term needs are also becoming evident. Survivors with severe injuries require post-traumatic care, while psychosocial distress is widespread. WHO has launched an emergency appeal for the next six months, seeking over US$ 6.9 million to sustain life-saving health services, expand rehabilitation, and ensure continuity of care for displaced communities.

HEALTH SITUATION

The health situation in eastern Afghanistan following the August 31, 2025 earthquake is a acute public health emergency. While immediate rescue efforts have transitioned to early recovery, the affected populations now face significant health threats from damaged infrastructure, infectious disease outbreaks, and the approaching harsh winter. WHO conducted a Rapid Health Assessment across Kunar, Nangarhar, and Laghman provinces from 8–15 September. The assessment covered 37 villages in high-intensity (MMI 7+) earthquake zones, three IDP camps, and 78 health facilities. Of the facilities assessed, 21 were damaged (including one fully damaged), while 67 remained fully functional, 20 partially functional, and one non- functional due to structural damage, staff shortages, or supply gaps.

The most common health risks identified were acute respiratory infections, acute watery diarrhea, malaria, measles, and skin infections. Communities and IDPs highlighted urgent needs for emergency care, essential medicines, reproductive health services, immunization, MHPSS, noncommunicable diseases (NCD) care, and safe water and sanitation. Vulnerable groups include children under five, pregnant and breastfeeding women, older persons, and people with disabilities, particularly in overcrowded camps where referral capacity is limited.

WHO and partners are monitoring patient flows and service delivery in 15 health facilities (10 public and five private) in Kunar, Nangarhar, and Laghman provinces. To date, 3640 trauma patients have received care including 1089 (30%) women and 241 (7%) children under five. A total of 343 surgeries were performed, 360 patients received blood transfusions, and 14 deaths were reported. The majority of admitted cases have been discharged.

WHO RESPONSE

WHO, together with Health Cluster partners and health authorities, continues to ensure that essential health services and life-saving support reach the most affected communities in the earthquake affected provinces.

Primary Healthcare Services

WHO has deployed six Mobile Health Teams (MHTs) in IDP camps in Kunar Province, including Andarlachak and Dewa Gal village of Chawkay District, Patan, Khas Kunar, and Wadir Satwal in Mazar valley of Nurgal District. The MHTs have been providing the full Basic Package of Health Services (BPHS) to earthquake-affected families. These services include trauma care, mental health and psychosocial support, maternal and newborn care, child health, immunization, and nutrition, ensuring essential healthcare reaches the most vulnerable populations. So far, the teams have provided 17,944 consultations, reaching women and girls (31% women, 14% girls). Additionally, the healthcare provided included 2,043 trauma cases, with 589 patients referred for advanced treatment, ensuring that those with severe injuries received timely and specialized care.

Mental Health and Psychosocial Support

At the onset of the earthquake incident, WHO deployed three Mental Health and Psychosocial Support (MHPSS) outreach team to the earthquake-affected areas but currently one team is deployed in Patan village, Nurgal District, in Kunar Province comprising doctors, nurses, and psychologists. Plans are underway to deploy 4 MHPSS teams that will offer MHPSS services till the end of January 2026.

To date, 4,827 consultations have been provided young population [women (21%), men (30%), girls (6%), boys (8%)] and people aged 65+ (35%). In addition, 1650 people, predominantly men (62%), participated in MHPSS awareness sessions. IEC materials on grief, PTSD, self-care, and insomnia were distributed to communities and facilities serving survivors. Additionally, WHO procured Mental Health Kits (MHK 2022), including Module 1 and Module 2, to supply essential psychotropic medicines for health facilities in Kunar and Jalalabad.

Trauma Care

Since the earthquake in the Eastern Region in September 2025, a total of 3,640 trauma patients have been treated, including 1,089 females and 243 children under five, while 14 patients sadly lost their lives. Treatment was delivered across 15 hospitals, and all discharged patients have fully recovered. We are now in the resettlement and recovery phase, with priorities focused on planning further training for frontline health providers, strengthening emergency readiness and response capacity at the hospital level, particularly in emergency rooms, enhancing pre-hospital and ambulance services, supporting physical rehabilitation and burns units, and improving blood bank services in the Eastern Region.

Disease Surveillance/Potential Diseases Outbreak Prevention and Response

WHO has already pre-deployed 17 Surveillance Support Teams (SSTs) across Nangarhar, Kunar, Nuristan, and Laghman provinces to strengthen active disease surveillance. Between 2 and 30 September, these efforts enabled the detection and reporting of 12,359 infectious disease cases in Kunar Province, including:

- 8,055 acute respiratory infections
- 3,333 cases of acute diarrheal diseases of which 2,370 acute watery diarrhoea and 963 acute bloody diarrhoea
- 535 cases of confirmed malaria
- 436 suspected COVID-19 cases.

A total of 423 rapid diagnostic tests (RDTs) were conducted for COVID-19, of which 40 positives.

Operations Support and Logistics

WHO received 60 metric tonnes of medical kits supported by ECHO-WFP. More than 52 metric tons of medical supplies, including IEHK, TESK, NCD kits, and kits for management of infectious diseases (like AWD, measles and pneumonia), to affected areas following the earthquake. An additional 35.9 metric tons of emergency medical supplies have been secured these items are being prepositioned for distribution according to needs assessments.

Cross-Cutting Areas

Prevention of and Response to Sexual Exploitation, Abuse and Harassment (PRSEAH)

WHO continues to support implementing partners in mitigating safeguarding risks during the earthquake response. Three partners have been provided with PSEA awareness materials to engage affected communities, reaching 2690 individuals (1387 women and 1303 men) and 530 healthcare workers (152 women and 378 men).

Sustained awareness efforts and accessible reporting mechanisms remain essential to reducing risks of exploitation, abuse, and harassment. However, the travel restrictions on women has severely limited outreach to female health workers and affected women. WHO and partners are advocating for deployment of female health workers and equitable access to services.

Accountability to Affected Populations

As Health Cluster lead, WHO ensured regular follow-up of reported cases through the “Awaaz” Afghanistan humanitarian call centre. A total of 22 new cases were addressed and 24 successfully closed via the inter-agency reporting system. In close collaboration with NGO partners and Regional Health Cluster Coordinators, WHO ensured timely response, consistent follow-up, and direct communication with affected individuals.

NEEDS AND GAPS

Strengthen outreach counselling and community-based MHPSS services including PFA, to the affected communities and first responders as well as the vulnerable groups such as women, children, and older persons.

Living conditions in villages and IDP settlements remain unsafe, with overcrowding, poor sanitation and limited access to safe drinking water and hygiene facilities. These gaps are contributing to rising cases of diarrhoeal disease, acute respiratory infections, and measles. Immediate action on safe water, sanitation, hygiene supplies, and health promotion is critical to prevent further outbreaks.

A total of 21 health facilities were damaged, while the 67 that remain functional face, staff shortages, and weak referral pathways. Urgent rehabilitation, provision of essential medicines, and capacity building for health workers are needed to restore and sustain services.

Nearly 498 000 people are estimated to need urgent health assistance following the earthquake. WHO, together with Health Sector, has set a target to reach 150 000 people with life-saving services. WHO and partners are ramping up capacity to expand PHC, rehabilitate damaged facilities, strengthen MHPSS, and ensure winter preparedness. However, over US$ 6.9 million is required, with around US$ 6 million still unfunded, leaving critical gaps to sustain essential operations.

UN high-level delegation held focus group discussions with community elders in Chawkay District, Kunar Province (Photo: WHO Afghanistan)

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For donations to WHO's earthquake response in Afghanistan, please visit :
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WHO's initial response to the earthquake has been possible with the generous support of the following donors:

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WHO HEALTH EMERGENCIES RESPONSE TO EARTHQUAKE AFFECTED AREAS

As of October 2, 2025

EARTHQUAKE IMPACT

498,130 People in need

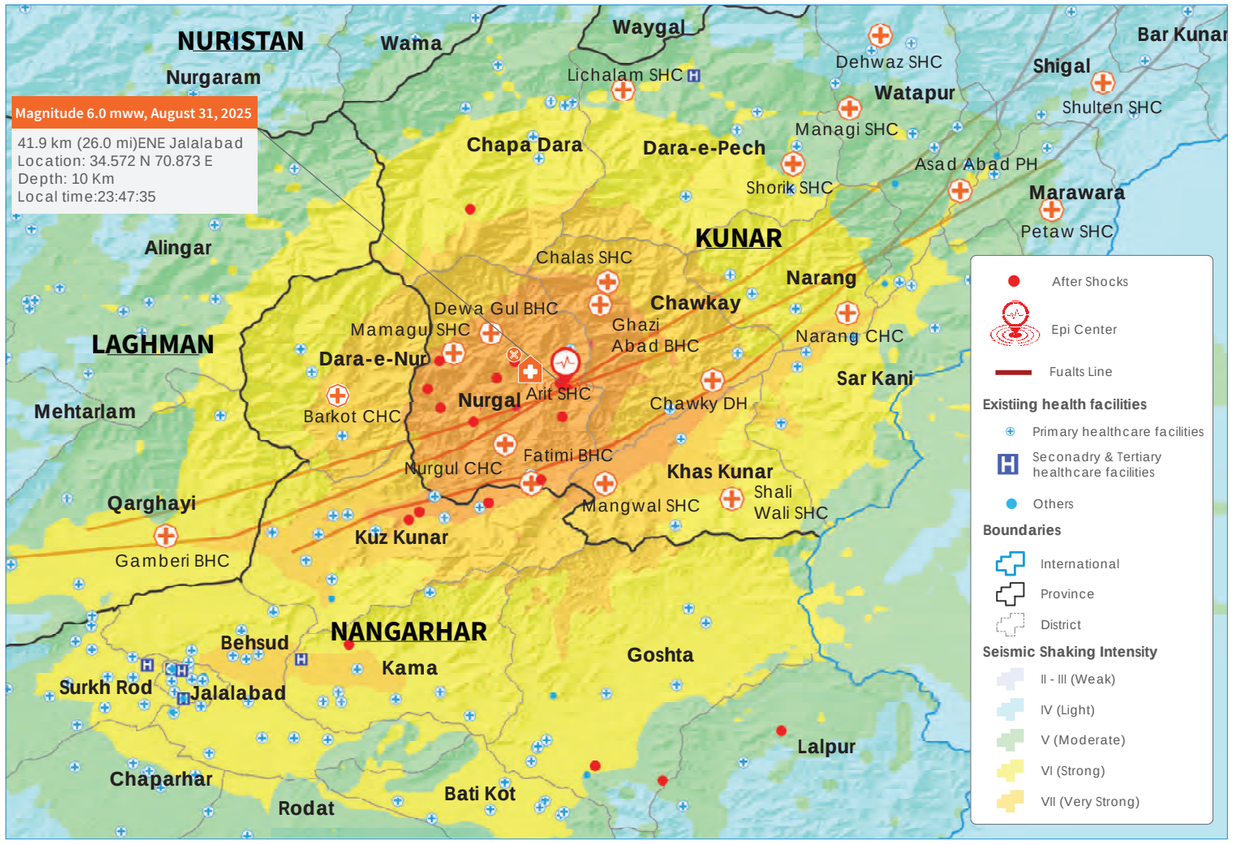
2,205 Fatalities

1 Health faclities fully damaged

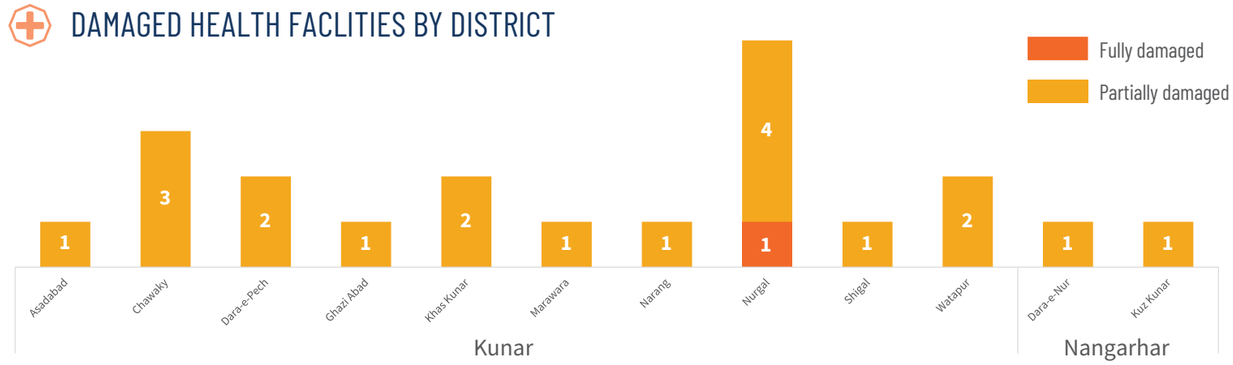
6,782 Houses damaged

3,640 People injured

20 Health facilities partially damaged



DAMAGED HEALTH FACLITIES BY DISTRICT



WHO HEALTH EMERGENCY RESPONSE

6 Mobile Health Teams Deployed for Earthquke Response

17,944 primary health consultations

2,043 people received trauma care services

2,110 children screened for nutritional status

14,279 people received health awareness /education

589 trauma cases referred to next level of healthcare

4,827 people received MHPSS consultations

766 women received MNCH services

7,338 people received essential medicine

DETECTED INFECTIOUS DISEASES CASES

8,055 acute respiratory infection (ARI) cases

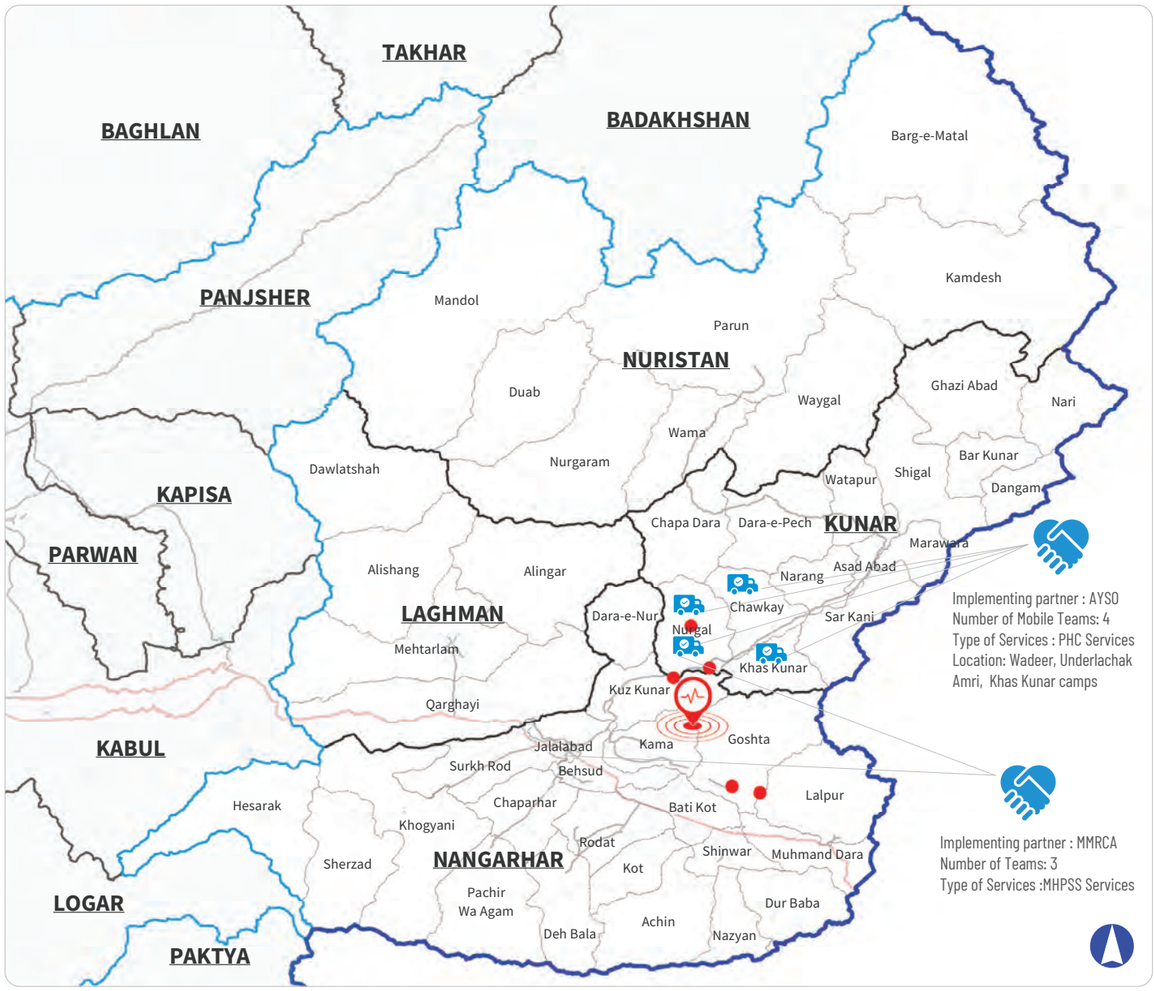
3,333 total diarrheal diseases cases

2,370 acute watery diarrhea cases

963 Acute Bloody Diarrhea cases

535 confirmed Malaria cases

436 suspected COVID-19 cases



Data Sources: WHO, MoPH, OCHA, and USGS.