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Commentary

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Afghanistan has a long history of conflict and poverty. However, reproductive, maternal,

newborn, and child health have progressed over the last 2 decades. Maternal healthcare improved significantly between 2003 and 2013, with the tripling of skilled birth attendants from 14% to 46%, antenatal care access from 16% to 53%, and births in health facilities from 13% to 39%. However, access to and availability of antenatal care facilities remain a challenge for Afghan women (1).

The COVID-19 pandemic has adversely affected all areas of health services, including maternal and newborn health (2). The Afghan healthcare system has faced countless challenges in tackling the pandemic, including a shortage of healthcare workers, insufficient testing capacity and absence of laboratory facilities locally for COVID-19 testing, in addition to high illiteracy rates, poor economic conditions and low public awareness about health issues (3).

Pregnant women are considered a vulnerable population for COVID-19 due to the physiologic changes in their immune and cardiopulmonary systems. COVID-19 has been associated with severe adverse maternal and foetal outcomes, with an increased rate of preeclampsia, preterm birth, and stillbirth (4).

The rapid spread of COVID-19 in Afghanistan caused pregnant women to face even harsher realities when seeking reproductive health care. Deficits in medical commodities and supplies and the fear of contracting the virus made fewer individuals to seek appropriate and timely medical care. This indisputably limited antenatal and perinatal care and increased the number of home births, resulting in increases in maternal morbidity and mortality (2).

Afghanistan has struggled with limited number of healthcare professionals for many decades. Following the transition to the Taliban government in 2021, significant numbers of educated Afghans, including healthcare professionals, such as midwives, left the country, leaving Afghanistan's healthcare system more under-staffed, particularly for reproductive health (5).

The COVID-19 pandemic and subsequent Taliban takeover have significantly led to a decrease in access by pregnant women to adequate, and even minimal, reproductive health care, thus increasing maternal morbidity and mortality. The non-availability of family planning options resulted in higher rates of unplanned pregnancies and limited prenatal and postnatal care. These together with the non-availability of vaccines, including for COVID-19, resulted in increased maternal and neonatal deaths. Consequently, there is a real threat to the progress made in advancing women's health in the country over the last 2 decades (2,5,6).

There is therefore an urgent need for positive actions in support of healthcare in Afghanistan, and most especially to save the lives of Afghan women. The national government and the international community need to support the provision of accessible life-saving supplies and medicines, including reproductive health facilities, in urban as well as remote and underserved areas of the country. There is an urgent need for the provision of routine and special vaccines, including the COVID-19 vaccine, to the Afghan populations to minimize the risks of morbidity and mortality.

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