Key Messages: UPDATED

- People confirmed to have COVID-19: 20,342 (as of 2pm, 7 June. Source: Afghanistan Ministry of Public Health - MoPH)
- Deaths from COVID-19: 357
- Samples tested: 47,327

Key concerns: Border crossing areas, in-country testing capacity, protective equipment for frontline workers, commodity prices, messaging and rumour management, international air services

Situation Overview: UPDATED

MoPH data shows that 20,342 people across all 34 provinces in Afghanistan are now confirmed to have COVID-19. Some 1,875 people have recovered, and 357 people have died (13 of which are healthcare workers). 47,327 people out of the population of 37.6 million have been tested. Afghanistan has a test-positivity-rate – positive tests as a percentage of total tests – of more than 42 per cent. More than four per cent of the total confirmed COVID-19 cases are among healthcare staff. The majority of the deaths were people between ages of 40 and 69. Men in this age group represent more than half of all COVID-19-related deaths. With a fragile health system, a developing economy and underlying vulnerabilities, the people of Afghanistan are facing extreme consequences from the COVID-19 pandemic. Cases are expected to continue to increase over the weeks ahead as community transmission escalates, creating grave implications for Afghanistan’s economy and people’s well-being. Kabul remains the most affected part of the country in terms of confirmed cases, followed by Hirat, Balkh, Nangarhar and Kandahar.

There have been issues with laboratories in Kandahar and Nangarhar that have meant they were unable to conduct tests for several days this month. WHO reports that the Kandahar lab is now open after a problem with contamination of the facility. According to WHO in the east, four out of five PCR lab technicians there also tested positive for COVID-19 rendering the Jalalabad PCR lab temporarily out of service and causing delays in the processing of samples. Two technicians were deployed from Kabul and the Nangarhar laboratory has since been back up and running.

Source: MoPH

<table>
<thead>
<tr>
<th>Age 0-19</th>
<th>Age 20-29</th>
<th>Age 30-39</th>
<th>Age 40-49</th>
<th>Age 50-59</th>
<th>Age 60-69</th>
<th>Age 70-79</th>
<th>Age 80+</th>
<th>Total</th>
</tr>
</thead>
<tbody>
<tr>
<td># people confirmed with COVID-19</td>
<td>Girls</td>
<td>Boys</td>
<td>Women</td>
<td>Men</td>
<td>Women</td>
<td>Men</td>
<td>Women</td>
<td>Men</td>
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<tr>
<td># deaths from COVID-19</td>
<td>430</td>
<td>551</td>
<td>1198</td>
<td>2897</td>
<td>757</td>
<td>3093</td>
<td>623</td>
<td>2088</td>
</tr>
</tbody>
</table>
**GHRP Highlights: UPDATED**

The updated Global Humanitarian Response Plan (GHRP) released on 7 May covers 63 countries. The total financial requirements of the updated plan rose to $6.71 billion due to a rapid evolution of humanitarian needs, the inclusion of the additional countries, increased costs of essential health and other supplies, and air and sea transportation. $5.64 billion is required for needs in the 63 countries covered. This includes $3.49 billion for Humanitarian Response Plans countries, nearly $1 billion intended for Regional Refugee Response Plans countries; $439 million for Regional Refugee and Migrant Response Plans countries; $157 million for countries under other plans; and $606 million for the countries under new plans presented in the May update. The remaining $1 billion is to support common humanitarian services. The next update of the GHRP is expected on 16 July. It will include information on changes in the situation and needs due to the pandemic, as well as progress on the response. Afghanistan’s revised HRP will be captured in the next iteration of the GHRP.

**As of 4 June**, $1.18 billion (18 per cent of requirements) has been recorded for the GHRP on the Financial Tracking Service (FTS), with another $978.2 million recorded toward other activities, bringing the total received for the COVID-19 humanitarian response to $2.14 billion. This is a three per cent increase since the last update published on 20 May. Some of the funding recorded for the overall COVID-19 emergency may eventually be recorded against the GHRP requirements as more details are received from donors and recipient organizations.

The additional requirements for the COVID-19-related emergency response compound the already significant funding gap for humanitarian response plans globally. As of 31 May, only 15 per cent ($5.50 billion) of the $36.65 billion appealed for in all humanitarian appeals, including the GHRP, had been reported. For the latest figures on GHRP funding and other coordinated response plan funding, please visit the Financial Tracking Service (FTS).

**WHO guidance on mask use in confined public areas, where coronavirus still spreads**

In an updated guidance published on Friday, 5 June, the World Health Organization (WHO) recommended that Governments should encourage the use of non-medical masks on public transport, in shops and in other locations where physical distancing is difficult.

The guidance further states that people over 60, or who have underlying health conditions, should wear medical masks in these settings, while all workers in clinical areas of health facilities should also use them – not just those who deal with COVID-19 patients. However, WHO chief, Tedros Adhanom Ghebreyesus, warned against putting too much faith in masks, stressing that they are only part of a comprehensive strategy to defeat the disease. “I cannot say this clearly enough: masks alone will not protect you from COVID-19”, he told journalists. “Masks are not a replacement for physical distancing, hand hygiene and other public health measures.”

WHO issued the updated guidance following a review of available evidence and extensive consultation with international experts and civil society groups. It contains new information on the composition of fabric masks and other face coverings, based on research commissioned by the UN agency. Masks can be purchased or homemade, and should contain three layers: ideally a cotton lining, a polyester outer layer, and a middle “filter” made of polypropylene, or some other non-woven material. “With those three layers, and in that combination, that fabric can actually provide a mechanistic barrier that if someone were infected with COVID-19, it could prevent those droplets going through and infecting someone else”, said Dr. Maria van Kerkhove, a WHO epidemiologist.

WHO recommends that anyone with COVID-19 symptoms should stay home and seek medical help. People caring for them should wear a medical mask when they are both in the same room. “If it is absolutely necessary for a sick person or a contact to leave the house, they should wear a medical mask,” said Tedros. Meanwhile, confirmed COVID-19 patients should still be isolated and cared for in a health setting, while all their contacts should be quarantined.

**Cross Border: UPDATED**

The IOM has raised concerns about several ways in which the pandemic is affecting migrants, including through reductions in remittances, economic shutdowns, and border closures. IOM and UNHCR share concerns regarding cases of migrants and refugees being stigmatized for perceived spreading of the virus, and call for continued awareness raising and access to health services. In addition, IOM is particularly concerned about increased reports of protection concerns among migrants (citizens of Afghanistan) in Iran.

The Milak crossing (Nimroz) is officially open to commercial traffic and documented citizens of Afghanistan. The Islam Qala-Dogharoon land border crossings (Hirat) remain open on both sides for documented travellers and commercial traffic.

On 16 May, the Government of Pakistan announced that passenger movements of stranded nationals of Afghanistan and Pakistan are officially allowed once a week (Saturday) with a maximum of 500 people allowed to pass through the Torkham and 300 through the Spin Boldak crossing to facilitate return to their respective countries. On 6 June, 4,447 citizens of Afghanistan returned from Pakistan through the Torkham border and 7,200 people through Spin Boldak border. The process was reportedly orderly and health screening procedures were followed. Pakistan continues to facilitate the movement of cargo trucks and containers into Afghanistan. On 16 May, the Government of Pakistan
announced that the Torkham and Spin Boldak crossing points would open six days a week (except for Saturday) for commercial purposes. An unlimited number of trucks are being allowed to pass per day. Humanitarians emphasise the critical importance of maintaining a reliable flow of traffic for humanitarian cargo and are advocating for special consideration to expedite humanitarian food and relief items through border crossings.

Borders with Tajikistan, Uzbekistan and Turkmenistan remain open only for commercial traffic and crossings of passport holders back into Afghanistan.

**Operational Issues: UPDATED**

The Government of Afghanistan announced on 2 May that it was extending the nationwide lockdown in a bid to contain the spread of the virus. Current nationwide lockdown measures are being reviewed. Measures to contain the spread of the virus continue to differ across provinces with provincial authorities been given the power to decide on and implement their own lockdown measures. A number of provinces have already eased their lockdowns, including Kandahar, Hilmand and Ghazni, Badakhshan, Khost, Paktya, Kunduz and Takhar provinces. A number of provinces in the East of the country continue to enforce stricter lockdowns (Laghman, Kunar) and there are reports that greater physical distancing behaviours are now being observed in Nangarhar due to increases in numbers of people showing possible COVID-19 symptoms. Similarly, the Balkh provincial government decided to elevate Mazār-e Sharīf’s previous ‘measured’ lockdown to a full lockdown for a period of 10 days, effective from 31 May. Essential businesses (e.g. pharmacies, bakeries, vegetable shops, and general grocery stores) will be allowed to remain open. The rest of businesses/offices that were allowed to reopen on 10 May (e.g. electronics shops, toys shops, clothing shops, tailor shops, money exchange kiosks, barbershops etc.), will again be closed. A similar return to a complete lock-down has been implemented in Aybak City, Samangan Province, as of 30 May.

On 26 May, the government in Kabul issued a new plan to ease the COVID-19 lockdown, which outlines the use of an ‘odds-and-evens’ approach on vehicles to allow people to head back to work and enjoy other activities after weeks of lockdown. According to the plan, starting from 27 May, private vehicles are being allowed to run on an odd-even basis, alternating days according to the last digit of their license plates. Vehicles with odd numbers as the last digit of their license plates will be allowed to drive on Sundays, Tuesdays and Thursdays whereas those with even number plates will be allowed to drive on Saturdays, Mondays and Wednesdays. Vehicles with both even and odd numbers will be allowed to travel on Fridays. Humanitarian personnel, who have received permission to continue their duties amid the movement restrictions and under the ‘odds-and-evens’ system, are encouraged to monitor the situation closely. Reports indicate that despite assurances from the Government that the lockdowns would not limit critical program movements of NGOs and the UN, the measures continue to impact the mobility of humanitarian organisations, temporarily delaying the delivery of assistance and affecting access to humanitarian assistance. Humanitarian partners remain active in responding to crises throughout the country and continue to urge the Government to employ a national approach to these movement issues so that individual negotiations are not required on a case-by-case basis. For additional information on access constraints, please see the C-19 Access Impediment Report.

On 2 May, the Government of Afghanistan announced the suspension of all commercial domestic flights until the end of June. On 5 June, the United Nations Humanitarian Air Service (UNHAS) announced that it had received clearance to resume UNHAS flights from Jalalabad Airfield (JAF). More information regarding the start dates for operations to Jalalabad will be announced in the coming days.

UNHAS airbridge connecting Kabul and Doha is operating regularly on Sunday, Tuesdays and Thursdays. Flights into Doha accommodate transiting passengers only. On 31 May, Qatar Airways authorities announced that they will approve up to 36 hours transit at Hamad International Airport (Doha) for inbound and outbound passengers with immediate effect. This service is planned to continue until regular commercial international flights resume. The next flight is planned for Tuesday, 9 June. UNAMA is also considering the possibility of planning a special flight to Frankfurt to support UNAMA personnel and the humanitarian community (UN Agency and NGO personnel, donors, diplomats) in Afghanistan. The flight will depart from Kabul to Frankfurt on 9 June and then return back to Kabul from Frankfurt the following day.

**More Information – Links: UPDATED**

**WHO**
- WHO’s latest information on COVID-19
- WHO COVID-19 Global Dashboard
- COVID-19 Partners Platform
- Advice on the use of masks in the context of COVID-19

**Government of Afghanistan:**
- Ministry of Public Health: COVID-19 Dashboard

**Inter-Agency Standing Committee**
- IASC-endorsed COVID-19 guidance – new materials available
- Addressing Mental Health and Psychosocial Aspects of COVID-19 Outbreak (available in English, Dari, Pashto)

**UN and others**
The mission of the United Nations Office for the Coordination of Humanitarian Affairs is to mobilize and coordinate effective and principled humanitarian action in partnership with national and international actors.

- Relief Web: COVID-19 Response Page
- UN: ‘Global solidarity’ needed, to find affordable, accessible COVID-19 vaccine
- World Bank: Why the environment matters to human health
- UNOPS: Helping governments better respond to emergencies and natural disasters
- UNDP: Addressing the COVID-19 economic crisis in Asia through social protection
- UNDP: Responding to COVID-19 Information Pollution
- UNDP: Human Rights Due Diligence and COVID-19: Rapid Self-Assessment for Business
- UNAIDS: Strategic Considerations for Mitigating the Impact of COVID-19 on Key Population-Focused HIV Programs
- UN Women: Women’s unpaid and underpaid work in the times of Covid-19
- UN Women: Understanding gender and information inequalities through five women impacted by COVID-19
- UN: Kids and families broaden global perspectives during COVID-19
- IOM: COVID-19 – Impact On Points Of Entry And Other Key Locations of Internal Mobility
- IOM: COVID-19 Disease Response
- IOM: Rethinking Migration Management in a Changing Climate
- GIZ, ILO + 5 more: COVID-19: Ten Priority Options for a Just, Green & Transformative Recovery
- UNHCR: Asia and the Pacific COVID-19 External Update
- UNICEF: Global COVID-19 Situation Report
- WFP: Afghanistan Country Brief
- UN Women: Gender Alert on COVID 19 in Afghanistan | Issue VII: Women’s participation and leadership in COVID-19 Response

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