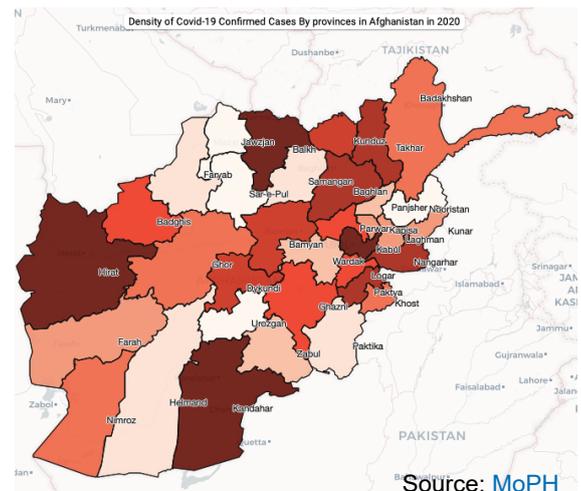


The next Strategic Situation Report will be released on 18 February

### Situation Overview: **UPDATED**

**Global Update:** According to [John Hopkins University](#), the number of people worldwide who have died with COVID-19 is more than 2 million, with many regions still reporting surging numbers of new infections as part of a second and sometimes a third wave of the pandemic. The pandemic is affecting 192 countries with almost 104 million confirmed cases globally, as of 4 February. [WHO reports](#) that while the emergence of new virus variants is common, those with higher speed of transmission or potentially increased pathogenicity (i.e. the capacity of a microbe to cause damage in a host) are very concerning. Crucial investigations are underway to comprehensively understand the behaviour of the new virus mutation (B117) and steer the response accordingly.

**MOPH Figures:** As of 4 February, [MoPH data](#) shows that **55,256 people across all 34 provinces in Afghanistan are confirmed to have had COVID-19. Some 47,995 people have recovered, and 2,407 people have died – at least 87 of whom are healthcare workers. Only 258,011 people out of a population of 40.4 million have been tested.** Afghanistan now has a test-positivity-rate – positive tests as a percentage of total tests – of 21 per cent, suggesting overall under-testing of potential cases. Due to limited public health resources and testing capacity, lack of people coming forward for testing, as well as the absence of a national death register, confirmed cases of and deaths from COVID-19 are likely to be under-reported. Stigma is considered a major factor in people choosing not to get tests and risk communications work is critical to turning this around.



A second wave of the COVID-19 pandemic was confirmed in November 2019 by the Ministry of Public Health. While there had been some signs the number of new cases was slowing in early January, MoPH tracking data has recently seen an uptick in cases, with an average of 45 cases a day between 27 January and 2 February. WHO Afghanistan remains concerned about mutations of the virus. WHO has sent recent COVID-19 samples for genomic sequencing to track for variants and confirm if the mutation is currently present in Afghanistan. WHO suspects this to be the case and reiterates that vigilance should be maintained.

**Health Services:** Hospitals and clinics continue to report challenges maintaining or expanding their facilities' capacity to treat patients with COVID-19, as well as maintaining essential health services, especially in areas of active conflict. WHO stresses the need to balance the demands of responding directly to COVID-19, with simultaneously engaging in strategic planning and coordinated action to maintain essential health service delivery, mitigating against the risk of system collapse. Almost eight per cent of the total confirmed COVID-19 cases are among healthcare staff and they will be the highest priority when vaccines are available. Health facilities across the country continue to report shortfalls in PPE, medical supplies and equipment, further challenging their capacity to treat COVID-19 patients. There is an urgent need to ensure a continued distribution of medical and protective equipment to all corners of the country. While 15 laboratories are now operating in Afghanistan, the capacity of these facilities remains limited and stocks of supplies have periodically run out. National capacity for COVID-19 testing has topped 5,800 a day however these laboratories are not being fully utilised. Humanitarian partners urge the Government to ensure laboratories are appropriately equipped, staff receive timely remuneration and that procured supplies go to under-resourced health centres in a transparent manner so that life-saving support can be delivered to those most in need.

**Vaccination:** The Government of Afghanistan and the UN have initiated a number of steps to prepare for the rollout of a COVID-19 vaccine across the country, including the development of a National Vaccine Deployment Plan (NVDP). A technical working group comprised of government and UN organisations and chaired by the Ministry of Public Health has developed plans for vaccine operations, cold chain management, communication, surveillance, training and monitoring and evaluation/data, and will complement the existing Vice Presidential COVID-19 Task Force. So far, India has pledged to donate 500,000 doses (one person requires two doses to have a complete course) of its domestically-produced COVID-19 vaccine to Afghanistan which may arrive to the country as soon as the first half of this month. This vaccine is in the process of approval by WHO. Health workers will be prioritised to receive some 128,000 doses. Some 100,000 further doses have been earmarked for humanitarian caseloads through the COVAX facility, using funding from the World Bank and the Asian Development Bank, although details on how the logistics costs of distribution will be managed are still under discussion. Further discussions are also underway with China on potential donation of additional vaccines.

**Humanitarian Needs and Response Planning:** The revised [Afghanistan Humanitarian Response Plan \(HRP\) for 2018-2021](#) identifies 18.4 million people in humanitarian need in 2021, as a result of COVID-19, ongoing conflict and natural disasters. Approximately six times the number of people are in need of humanitarian assistance in 2021 compared to four years ago when the multi-year HRP was first developed. The health and socio-economic impacts of the COVID-19 pandemic have seen the number of people in need almost double in the past year alone. Afghanistan now has the second highest number of people in emergency food insecurity in the world (5.5 million), while nearly one in two children under-five will face acute malnutrition in 2021.

Concurrently, cold winter conditions continue to cause suffering for Afghans in inadequate shelter and millions are struggling to keep themselves warm amid soaring poverty driven by the economic shock of COVID-19. The ICCT's winterisation plan (a subset of the HRP) aims to reach 2.5m people over the winter months with a range of life-saving support including cash and in-kind heating assistance for households, warm clothes, seasonal food support, nutrition treatment, and health services for winter sickness. As of 15 January, some 30,000 families have been reached with ES-NFI winterisation support. While some \$71.7m requirements have been committed by donors and the Government, a gap of \$65.8m remains to be urgently mobilised to mitigate against winter suffering.

Against this backdrop, a medium to strong La Niña event is causing below average precipitation, thin snowpack and above average temperatures in most parts of the country and it is expected that farmers and pastoralists will be negatively affected. While details on the degree of impact on agricultural and hydrological environments is still being evaluated, ICCT has started on common planning around the dry spell, flooding and other contextual factors that will influence the scale of humanitarian needs during the spring season.

**Remarks by the Assistant Secretary General for Humanitarian Affairs and Deputy Emergency Relief Coordinator a.i., Ramesh Rajasingham, at the UN Member States Briefing on the Humanitarian Situation in Afghanistan (2 Feb 2021)**

We meet today as Afghanistan slides deeper into crisis. Forty years of war and displacement, mixed with climate shocks and now COVID-19, have left almost half of Afghanistan's population needing emergency aid. The number of people in need has doubled from 9.4 million at the start of 2020 to 18.4 million in 2021 – of a population of 40.4 million. Four in 10 people are now going hungry which means that almost 17 million people are in crisis or emergency levels of food insecurity through March 2021. And almost half of all children will be acutely malnourished this year. Few other places in this world have seen suffering soar so quickly in recent times. Relentless conflict and violence continue to kill civilians at an alarming rate, despite Intra-Afghan peace negotiations. And now COVID-19 has strained the health system and caused economic devastation. Almost 870,000 Afghans had to return from Iran and other neighbouring countries in 2020, having lost their jobs, thus shrinking remittances to the country by a staggering 40 per cent compared to 2019.

In December, I visited Afghanistan for a week to draw attention to the massive and widespread increase in humanitarian needs. While in Dand District, in Kandahar province, I spoke to newly displaced people in Southern Afghanistan who were among the tens of thousands of people forced to flee conflict in 2020. These were farmers who previously were able to support themselves and their families, who fled from the violence and left behind their homes, land and livelihoods. Now they are internally displaced and living in tents on the side of a mountain with relief assistance as their only support. Similarly, almost 394,000 people across the country were forced to flee conflict in 2020. Years of crisis have displaced almost 5 million people since 2012 – and these people – families, communities, mothers, fathers, children – are forced to eke out a marginal existence in informal settlements without adequate infrastructure, including proper sanitation and safe water supply, on the fringes of cities.

Violence in Afghanistan is countrywide. The deliberate targeting of civilians, targeted assassinations and indiscriminate attacks resulting in high numbers of civilian casualties, has been a persistent feature of the conflict. In February 2020, UNAMA reported that Afghanistan passed a grim milestone with over 100,000 civilians killed or injured since 2010. During the first nine months of 2020, almost 6,000 civilians were killed and injured, including 2,400 women and children. The conflict also impacts access to vital services. Despite the increased need for health services due to COVID-19, health facilities and workers continue to suffer harm from attacks, as well as acts of intimidation by parties to the conflict. Targeted attacks on schools and educational facilities also demand a renewed commitment by all parties to the conflict to uphold international humanitarian law and adopt measures to safeguard learning spaces for the next generation. Everywhere I went during my visit, people had a very simple message: we want peace and we want security. The people desperately hope that the intra-Afghan negotiations result in a credible peace that is inclusive of all people, especially women and girls.

Afghanistan continues to be one of the most difficult and deadly operating environments for aid workers. In 2020, 236 aid workers were killed, 53 injured and 111 abducted. This is a solemn reminder of the perils of working in Afghanistan, and a reminder of the courage of our aid worker colleagues to help the most vulnerable. Despite these challenges, humanitarian operations remain robust. By the end of September 2020, assistance had been provided to at least 8 million people in every district of the country – a huge achievement given the circumstances. To Member States and partners, thank you for your generous donations towards the humanitarian response plan in Afghanistan, some \$555 million; and thank you to those who have contributed to the Central Emergency Response Fund and the Afghanistan Humanitarian Fund, which together provided \$104 million to aid operations in 2020. However, I do stress that the 2020 response plan was only 49 per cent funded; which is a far lower funding rate than most years. Unmet needs are a major driver of the worsening situation in 2021. This year, the need for timely funding at existing or higher levels is required to ensure continued humanitarian operations. Almost 16 million people require assistance for which we need \$1.3 billion. To date we have received \$38 million. Ultimately of course, Afghanistan's real hope for a safe, secure, sustainable future lies in a life free of conflict which can only be obtained through a successful peace negotiations process. Until that day becomes a reality, we must do all we can to provide a lifeline of support to the people of Afghanistan.

**Cross Border: UPDATED**

**Border Crossings:** The Milak (Nimroz) and Islam Qala-Dogharoon (Hirat) crossings with Iran are officially open to commercial traffic and movement of documented Afghanistan nationals. Afghanistan's border with Pakistan at Spin Boldak officially opened on 21 August 2020 and at Torkham on 28 September 2020.

More than 53,000 Afghans have returned from Iran and Pakistan since 1 January 2021. This is a more than doubling of previous years' trends, which saw 23,000 and 25,000 people return in the first months of 2019 and 2020, respectively. The number of returnees remains in line with the elevated scale seen in 2020 – the year with the highest number of returning undocumented Afghan migrants on record.

Between 22 and 28 January, more than 11,000 patients were served by IOM's 7 mobile health teams while close to 9,000 returnees were screened for tuberculosis. IOM's post-arrival humanitarian assistance was provided to 554 (3%) undocumented Afghans at the IOM Transit Centers in Hirat and Nimroz during the reporting period and some 222 households were reached through Protection assistance since the start of the year.

**Operational Issues:**

Commercial domestic flights are operating. The United Nations Humanitarian Air Service (UNHAS) is flying domestically, and has announced increasing the frequency of flights to five days per week as of 14 February. UNHAS will continue to support any required evacuation and relocation flights during all days of the week. International commercial air travel continues with Air Arabia, Ariana Airlines, Kam Air and Emirates Airlines providing round-trip international flight services to/from Kabul. Given the potential for airlines to reduce their flights, passengers are encouraged to check with their airline for the latest advisories.

**More Information – Links:****WHO**

- [WHO's latest information on COVID-19](#)
- [WHO COVID-19 Global Dashboard](#)
- [Weekly Epidemiological Update \(17 January 2021\)](#)
- [WHO Director-General's opening remarks at 148th session of the Executive Board](#)
- [Strengthening preparedness for health emergencies](#)

**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**

- [Relief Web: COVID-19 Response Page](#)
- [OCHA: Global Humanitarian Overview 2020](#)
- [OCHA: Global Humanitarian Response Plan COVID-19 Progress Report: Fourth Edition, 17 November 2020](#)
- [UN: Comprehensive Response to COVID-19 \(September\)](#)
- [OCHA: Asia Pacific COVID-19 - Humanitarian Data Portal](#)
- [OCHA: Afghanistan Humanitarian Response Plan \(2018-2021\) - Mid-Year Monitoring Report \(Jan - Jun 2020\)](#)
- [OCHA: Afghanistan Humanitarian Response Plan - 2020 Quarter Three Dashboard \(Jan - Sep 2020\)](#)
- [OCHA: Afghanistan Humanitarian Needs Overview 2021 \(December 2020\)](#)
- [OCHA: Afghanistan Humanitarian Response Plan 2021 \(January 2021\)](#)
- [OCHA: Afghanistan Humanitarian Needs and Planned Response 2021](#)
- [UN SC: Security Council Pressed Ahead in 2020 with Mandate to Protect Civilians, Build Peace, as COVID-19 Infected 84 Million People Worldwide](#)
- [UN DESA: International Migration 2020 Highlights](#)
- [UNDRR: COVID-19: "immunity is not the privilege of the few but the right of all"](#)
- [IFRC: Vaccines alone will not end pandemic, warns IFRC](#)
- [3ie: Big data in the time of a pandemic](#)

- [Govt. UK: UK meets £250m match aid target into COVAX, the global vaccines facility](#)
- [Govt. UK: Aid beneficiaries continue to be abused by aid workers](#)
- [Govt. Netherlands: Additional Dutch support for vaccines in poor countries](#)
- [UNHCR: Voluntary Repatriation of Afghan Refugees](#)
- [UNHCR: Asia and the Pacific COVID-19 External Update](#)
- [IOM: DTM \(COVID-19\) Global Mobility Restriction Overview](#)
- [IRC: Billions will not receive a COVID-19 vaccine in 2021](#)
- [UNICEF: Children cannot afford another year of school disruption](#)
- [UNESCO: COVID-19 impacts youth voices and hampers participation](#)
- [UNHCR: Q&A: 'Including refugees in the vaccine rollout is key to ending the pandemic'](#)
- [Insecurity Insight: Attacks on Health Care Monthly News Brief](#)
- [BMJ: Priority setting during the COVID-19 pandemic: going beyond vaccines](#)
- [BMJ: Equitable recovery from COVID-19: Bring global commitments to community level](#)
- [World Vision: Food vouchers or food boxes? Here's what we know](#)
- [FAO + 4 more: Asia and the Pacific regional overview of food security and nutrition 2020](#)
- [HRW: World Report | 2021 - Events of 2020](#)
- [ILO: Working from home: From invisibility to decent work](#)
- [FAO: Mitigating the potential impacts of dry conditions triggered by La Niña in Afghanistan](#)
- [FAO: Innovation to counter food supply-chain disruptions and spur recovery](#)
- [INSO: Despite Coronavirus restrictions, 2020 saw only a marginal reduction in incidents impacting NGOs](#)
- [REACH: Afghanistan Joint Market Monitoring Initiative](#)
- [USAID: Afghanistan - Complex Emergency Fact Sheet #1](#)
- [iMMAP: Afghanistan Multi-Sectoral Dashboard for Humanitarian Response Services](#)
- [SC: 10 million Afghan children need life-saving help](#)
- [UNICEF: UN agencies warn economic impact of COVID-19 and worsening inequalities will fuel malnutrition for billions in Asia and the Pacific Child and maternal diets particularly vulnerable](#)

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