COUNTRY SCORE JUSTIFICATIONS AND REFERENCES

# Afghanistan

This document is a compilation of all questions, justifications, and sources used to determine the 2021 Global Health Security Index scores for Afghanistan. For a category and indicatorlevel summary, please see the Country Profile for Afghanistan.

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# Category 1: Preventing the emergence or release of pathogens with potential for international concern

# **1.1 ANTIMICROBIAL RESISTANCE (AMR)**

# 1.1.1 AMR surveillance, detection, and reporting

#### 1.1.1a

#### Is there a national AMR plan for the surveillance, detection, and reporting of priority AMR pathogens?

Yes, there is evidence of an AMR plan, and it covers surveillance, detection, and reporting = 2, Yes, there is evidence of an AMR plan, but there is insufficient evidence that it covers surveillance, detection, and reporting = 1, No evidence of an AMR plan = 0

#### Current Year Score: 1

In Afghanistan, there is a national AMR plan however it does not adequately address surveillance, detection and control in concrete terms on how to collect data on AMR pathogens, analyse the data and presenting findings internally/externally for policy/decision-making. In May 2017, a National Action Plan (2017-2021) on AMR based on Global Action Plan objectives was developed. It was approved by the Afghan government and published on WHO's website. The document is not available on the website of the Ministry of Public Health. The plan contains general operational and monitoring arrangements for 5 objectives that it sets out namely: 1) improve awareness and understanding of antimicrobial resistance; 2) Strengthen knowledge through surveillance and research; 3) Reduction of infection incidents/rates; 4) Optimize the use of antimicrobial agents in health, animal and food sectors; and 5) Develop the economic case for sustainable investment that takes account of the needs of all countries, and increase investment in new medicines, diagnostic tools, vaccines and other interventions. Under the leadership of the Ministry of Public Health (MoPH) AMR committee/groups namely a)Inter-sectoral Coordinating Committee (ICC-AMR) b) Technical Advisory Group (TAG-AMR) c) Core Working Group (CWG-AMR), who are given the responsibility of the "governance of AMR" in Afghanistan. This includes 1) ICC-AMR to oversee and coordinate policy decision for activities related to antimicrobial resistance in all sectors in alignment with AMR related public health goals, 2) TAG-AMR to provide technical advice and reports to the ICC- AMR in terms of detection; technically review and revise the draft national action plan on AMR; provide technical oversight for existing and new initiatives to combat AMR in Afghanistan; and review and revise the terms of the core working group on AMR. 3) CWG-AMR to identify and map stakeholders for AMR- related activities; lead the development of the national action plan on AMR in Afghanistan with involvement of all stakeholders; ensure regular data collection and information sharing; coordinate national activities for establishing/strengthening surveillance systems; develop and disseminate national AMR reports; and facilitate and monitor/evaluate the overall implementation of NAP- AMR [1]. Afghanistan's National AMR plan was approved and published after the completion of the WHO Joint External Evaluation (JEE) for Afghanistan report, in Dec. 2016. The development of a national AMR plan was recommended as a priority action in the JEE report [2]

 World Health Organisation (WHO). Library of National Action Plans. 2017. "National Action Plan on Antimicrobial Resistance" (NAP-AMR), 2017-2021". [http://www.who.int/antimicrobial-resistance/national-action-plans/library/en/.]
 Accessed 21 Dec 2020.

[2] World Health Organisation (WHO). 2017. "Joint External Evaluation of IHR Core Capacities of the Islamic Republic of Afghanistan. Mission report: 4-7 December 2016." [https://apps.who.int/iris/bitstream/handle/10665/258674/WHO-WHE-CPI-REP-2017.43-eng.pdf?sequence=1]. Accessed 21 Dec 2010



## 1.1.1b

Is there a national laboratory/laboratory system which tests for priority AMR pathogens?

All 7 + 1 priority pathogens = 2 , Yes, but not all 7+1 pathogens = 1 , No = 0 Current Year Score: 1

There is publicly available evidence of a national laboratory system which tests for at least some of the priority AMR pathogens in Afghanistan. According to the Joint External Evaluation (JEE) report for Afghanistan, completed in December 2016, there is a national laboratory in place in the country. As confirmed in the report, "Afghanistan has the capacity in place to detect most of the priority pathogens at the Central Public Health Laboratory such as Escherichia coli, Staphylococcus aureus, Salmonella spp., Shigella spp". [1] The National Action Plan on Antimicrobial Resistance (NAP-AMR), published in May 2017, by MoPH on WHO's Library of national action plans does not include information as to whether or not there is a national laboratory in place in the country capable of carrying out tests for some of the priority pathogens. It only broadly notes the following: 1) Identify and strengthen national reference laboratories for confirmation and detailed characterisation of target pathogens and external quality assessment scheme for AMR organised in human health (MoPH) 2)Identify and strengthen national and food sector (Ministry of Agriculture, Irrigation and Live Stock (MAIL) and MOPH). [2]

[1] World Health Organisation (WHO). 2017. "Joint External Evaluation of IHR Core Capacities of the Islamic Republic of Afghanistan. Mission report: 4-7 December 2016. [https://apps.who.int/iris/bitstream/handle/10665/258674/WHO-WHE-CPI-REP-2017.43-eng.pdf?sequence=1] Accessed 21 Dec 2020.

[2] World Health Organisation (WHO). Library of National Action Plans. 2017. "National Action Plan on Antimicrobial Resistance" (NAP-AMR), 2017-2021". [http://www.who.int/antimicrobial-resistance/national-action-plans/library/en/.] Accessed 21 Dec 2020.

## 1.1.1c

Does the government conduct environmental detection or surveillance activities (e.g., in soil, waterways) for antimicrobial residues or AMR organisms?

Yes = 1 , No = 0

Current Year Score: 0

There is insufficient publicly available evidence that Afghanistan conducts detection or surveillance activities for antimicrobial residues or AMR organisms. According to the "National Action Plan on Antimicrobial Resistance (NAP-AMR), 2017-2021" published by the Ministry of Public Health in 2017 on the website of WHO's Library of national action plans the National Agency for Environmental Protection (NEPA) is tasked to conduct detection or surveillance activities for antimicrobial residues or AMR organisms under objectives 2.1 and 2.3, 5.2. [1] However, this appears to be a goal for Afghanistan, rather than something they have implemented already. No further evidence/explanation was found in the Joint External Evaluation (JEE) report for Afghanistan, completed in Dec. 2016 [2] as well as the website of NEPA [3] and United Nations Environment Programme in Afghanistan (UNEP) [4]. No evidence could also be found on academic sources and papers [5] .

[1] World Health Organisation (WHO), Library of National Action Plans. May 2017. "Database Form for National Action Plans (NAP) on Antimicrobial Resistance (AMR)".

[http://apps.who.int/datacol/survey\_result.asp?survey\_id=666&view\_id=722&respondent\_id=249311], Accessed 21 Dec 2020

[2] World Health Organisation (WHO). 2017. "Joint External Evaluation of IHR Core Capacities of the Islamic Republic of



Afghanistan. Mission report: 4-7 December 2016. [https://apps.who.int/iris/bitstream/handle/10665/258674/WHO-WHE-CPI-REP-2017.43-eng.pdf?sequence=1]. Accessed 21 Dec. 2020.

[3] National Environmental Protection Agency Afghanistan NEPA - Islamic republic of Afghanistan.

[https://www.weadapt.org/organisation/nepa-afghanistan]. Accessed 21 Dec 2020

[4] United Nations Environment Programme in Afghanistan (UNEP). [https://www.unenvironment.org/explore-

topics/disasters-conflicts/where-we-work/afghanistan]. Accessed 21 Dec 2020

[5] PubMed

[https://www.ncbi.nlm.nih.gov/pubmed/?term=%5B%22Afghanistan%22%5D+AND+%22national+agency+for+environmental +protection%22+AND+%22AMR%22]. Accessed 21 Dec 2020

## **1.1.2 Antimicrobial control**

## 1.1.2a

Is there national legislation or regulation in place requiring prescriptions for antibiotic use for humans? Yes = 2, Yes, but there is evidence of gaps in enforcement = 1, No = 0

#### Current Year Score: 0

There is no publicly available evidence of national legislation or policy regulating the use of antibiotics in humans in Afghanistan. No evidence could be found on the Ministry of Public Health's website [1]. The Joint External Evaluation (JEE) report for Afghanistan completed in Dec. 2016, as well as the National Action Plan on Antimicrobial Resistance (NAP-AMR), 2017-2021 acknowledge the lack of national legislation in this regard [2,3]. No evidence could be found in the National Health Strategy 2016-2020 document [4] No evidence could be found in academic journals [5].

[1] Islamic Republic of Afghanistan, Ministry of Public Health (MoPH), https://moph.gov.af/index.php/en/guidelines. Accessed 29 Jan 2021.

[2] World Health Organisation (WHO). 2017. "Joint External Evaluation of IHR Core Capacities of the Islamic Republic of Afghanistan. Mission report: 4-7 December 2016." [https://apps.who.int/iris/bitstream/handle/10665/258674/WHO-WHE-CPI-REP-2017.43-eng.pdf?sequence=1]. Accessed 21 Dec 2020.

[3] World Health Organisation (WHO) Library of National Action Plans. 2017. "National Action Plan on Antimicrobial Resistance (NAP-AMR), 2017-2021". [http://www.who.int/antimicrobial-resistance/national-action-plans/library/en/.] Accessed 21 Dec 2020.

[4] Ministry of Public Health, Islamic Republic of Afghanistan, "National Health Strategy 2016-2020"

[https://extranet.who.int/countryplanningcycles/sites/default/files/planning\_cycle\_repository/afghanistan/afghanistan\_mop hstrategy2016-2020\_final09september2016111201614508950553325325.pdf]. Accessed 29 Jan. 2021. [5] PubMed

[https://www.ncbi.nlm.nih.gov/pubmed/?term=%5B%22Afghanistan%22%5D+AND+%5B%22antibiotic%22%5D+AND+%22la w%22+OR+%22legislation%22]. Accessed 21 Dec 2020

## 1.1.2b

Is there national legislation or regulation in place requiring prescriptions for antibiotic use for animals? Yes = 2, Yes, but there is evidence of gaps in enforcement = 1, No = 0

#### Current Year Score: 0

There is insufficient evidence that in Afghanistan there is national legislation or policy regulating the use of antibiotics in animals. Evidence from the Joint External Evaluation (JEE) report on Afghanistan, completed in Dec. 2016, is contradictory.

The report notes that " antibiotic use in animals requires a prescription, which is being respected in most regions" (p. 13) it also notes that "a law and regulations related to the rational use of antibiotics is not in place" both for human and animal sectors (p. 8). The report scores 1 for Afghanistan's "Antimicrobial Stewardship Activities". This means "no or weak policy and regulations [are in place] on appropriate use, availability and quality of antimicrobials" according to WHO's Joint External Evaluation Tool (2018) [1]. No further evidence/explanation was found on the website of Ministry of Public Health [2]. Nor on the website of the Ministry of Agriculture, Irrigation and Livestock (MAIL) [3]. No evidence was found on academic journal articles [4]. The National Action Plan on Antimicrobial Resistance" (NAP-AMR), 2017-2021 generally refers to the need for the development of relevant policy as well as national awareness raising in this regard. No evidence/explanation is provided in the document about whether there are some sort of legislation in place at the moment. [5]

[1] World Health Organization (WHO). 2017. "Joint External Evaluation of IHR Core Capacities of the Islamic Republic of Afghanistan. Mission report: 4-7 December 2016". [https://apps.who.int/iris/bitstream/handle/10665/258674/WHO-WHE-CPI-REP-2017.43-eng.pdf?sequence=1] Accessed 29 Jan, 2021

[2] Islamic Republic of Afghanistan, Ministry of Public Health (MoPH), [https://moph.gov.af/index.php/en] Accessed 29 Jan, 2021.

[3] Ministry Agriculture, Irrigation and Livestock (MAIL). 2016. "Animal Health Law". [https://www.mail.gov.af/en/law-documents] Accessed 29 Jan, 2021.

[4] PubMed.

[https://www.ncbi.nlm.nih.gov/pubmed/?term=%5BAfghanistan%5D+AND+%5BAnimal\*%5D+AND+%5BAntibiotic\*+use%5D] . Accessed 21 Dec 2020

[5] World Health Organisation (WHO). Library of National Action Plans. 2017. "National Action Plan on Antimicrobial Resistance" (NAP-AMR), 2017-2021". [http://www.who.int/antimicrobial-resistance/national-action-plans/library/en/.] Accessed 21 Dec 2020.

# **1.2 ZOONOTIC DISEASE**

# 1.2.1 National planning for zoonotic diseases/pathogens

## **1.2.1**a

#### Is there national legislation, plans, or equivalent strategy documents on zoonotic disease?

Yes = 1 , No = 0

### Current Year Score: 1

There is evidence that Afghanistan has a national law, plan, or strategy document, on zoonotic disease. The policy framework "Procedure for Monitoring of the Veterinary Services of Animal Clinics (VFUs)" published in 2013, provides general guidance for the prevention and control of zoonotic diseases under Article 10 of the Objectives. In the document zoonotic diseases are acknowledged, but not spelled out specifically. [1] A basic governance structure for zoonotic diseases is also in place and functioning since 2010. A National Zoonotic Disease Strategy, according to Joint External Evaluation report of Afghanistan, completed in Dec. 2016, is awaiting ratification by the Government. It is however not clear when the Strategy document is going to be published [2]. According to the PVS Evaluation Follow-Up Mission Report on Afghanistan completed in April 2017, the Animal Health (Veterinary) Act was enacted in 2016 [3]. The actual document could not however be found on the websites of the Ministry of Public Health (MOPH) [4] and Ministry of Agriculture, Irrigation and Livestock (MAIL) [5]

 Ministry of Agriculture, Irrigation and Livestock (MAIL). 2013. "Procedure for Monitoring of the Veterinary Services of Animal Clinics (VFUs)". https://www.mail.gov.af/en/law-documents] Accessed 29 Jan,2021.
 World Health Organisation (WHO). 2017. "Joint External Evaluation of IHR Core Capacities of the Islamic Republic of



Afghanistan. Mission report: 4-7 December 2016" [https://apps.who.int/iris/bitstream/handle/10665/258674/WHO-WHE-CPI-REP-2017.43-eng.pdf?sequence=1] Accessed 21 Dec 2020

[3] World Organization for Animal Health (OIE). 2014. "PVS Evaluation Follow-Up Mission

Report".[https://www.oie.int/fileadmin/Home/eng/Support\_to\_OIE\_Members/pdf/201711078\_OIE\_PVS\_Follow-up\_Report\_final\_Afghanistan.pdf] Accessed, 21 Dec 2020

[4] Ministry of Public Health, Islamic Republic of Afghanistan. [https://moph.gov.af/en] Accessed 29 Jan, 2021
[5] Ministry of Agriculture, Irrigation and Livestock Islamic Republic of Afghanistan, "Legislative and Administrative

Documents" [http://180.94.71.228/aglaw/]. Accessed 21 Dec 2020

## 1.2.1b

Is there national legislation, plans or equivalent strategy document(s) which includes measures for risk identification and reduction for zoonotic disease spillover events from animals to humans?

Yes = 1 , No = 0

Current Year Score: 0

There is no publicly available evidence of national legislation, plans or equivalent strategy that includes measures for risk identification and reduction of zoonotic disease spillover events from animals to humans in Afghanistan. No evidence could be found on the Ministry of Public Health or Ministry of Agriculture, Irrigation and Livestock (MAIL websites [1,2]. No evidence on the zoonotic disease spillover could be found on The Joint External Evaluation (JEE) report for Afghanistan completed in Dec. 2016, as well as the National Action Plan on Antimicrobial Resistance (NAP-AMR), 2017-2021, [3,4]. No evidence could be found in the National Health Strategy 2016-2020 document [5]. No evidence could be found in academic journals [6].

[1] Ministry of Public Health, Afghanistan. [https://moph.gov.af/dr/search?keys=zoonotic+disease+spillover&created=] Accessed Jan 4, 2021.

[2] [1] Ministry of Agriculture, Irrigation and Livestock (MAIL) [https://www.mail.gov.af/en/law-documents] Accessed 29 Jan, 2021

[3] World Health Organisation (WHO). 2017. Joint External Evaluation of IHR Core Capacities of the Islamic Republic of Afghanistan. Mission report: 4-7 December 2016." [https://apps.who.int/iris/bitstream/handle/10665/258674/WHO-WHE-CPI-REP-2017.43-eng.pdf?sequence=1]. Accessed 4 Jan 2021.

[4] World Health Organisation (WHO) Library of National Action Plans. 2017. National Action Plan on Antimicrobial Resistance (NAP-AMR), 2017-2021 [http://www.who.int/antimicrobial-resistance/national-action-plans/library/en/.] Accessed 4 Jan 2021.

[5] National Health Strategy 2016-2020; [https://afghanhealth1stopshop.org/download/national-health-strategy-2016-2020/?wpdmdl=3116&refresh=5ff365770ad1c1609786743] Accessed 4 Jan 2021
[6] PubMed

[https://www.ncbi.nlm.nih.gov/pubmed/?term=%5B%22Afghanistan%22%5D+AND+%22zoonotic+disease%22+AND+%22min istry%22+AND+%22agency%22]. Accessed 29 Jan, 2021

## **1.2.1**c

Is there national legislation, plans, or guidelines that account for the surveillance and control of multiple zoonotic pathogens of public health concern?

Yes = 1 , No = 0

Current Year Score: 0

There is no publicly available evidence of national plans, guidelines, or laws that account for the surveillance and control of multiple zoonotic pathogens of public health concern in Afghanistan. The National Zoonotic Disease Strategy, according to Joint External Evaluation (JEE) report on Afghanistan, completed in December 2016 is written but needs to be ratified [1]. The draft is not yet publicly available neither on the website of the Ministry of Public Health (MoPH) nor on the website of the Ministry of Agriculture, Irrigation and Livestock (MAIL) [2,3]. No further evidence could be found on the academic journals and papers [4]

 World Health Organisation (WHO). 2017. Joint External Evaluation of IHR Core Capacities of the Islamic Republic of Afghanistan. Mission report: 4-7 December 2016 [https://apps.who.int/iris/bitstream/handle/10665/258674/WHO-WHE-CPI-REP-2017.43-eng.pdf?sequence=1.] Accessed 4 Jan 2021

[2] Ministry of Public Health, Islamic Republic of Afghanistan, [https://moph.gov.af/en] Accessed 29 Jan 2021;
[3] Ministry of Agriculture, Irrigation and Livestock Islamic Republic of Afghanistan, [https://www.mail.gov.af/en] Accessed 29 Jan 2021 PubMed.

[https://www.ncbi.nlm.nih.gov/pubmed/?term=%22Afghanistan%22+AND+%22regulation%22+AND+%22multiple+zoonotic+ diseases%22]. Accessed 29 Jan, 2021

## 1.2.1d

# Is there a department, agency, or similar unit dedicated to zoonotic disease that functions across ministries?

Yes = 1 , No = 0

## Current Year Score: 0

No evidence could be found that in Afghanistan there is a department or agency dedicated to zoonotic disease that functions across ministries. According to the Joint External Evaluation report on Afghanistan, completed in Dec. 2016., there are only committees at central and provincial levels that work on zoonotic diseases between ministries including representatives from Ministry of Agriculture and Livestock (MAIL) and Ministry of Public Health charged with the responsibility for surveillance and control of zoonotic diseases. The JEE report recommends inclusion of representatives from Nation Environment Protection Agency (NEPA) the agency responsible for environmental health in the committee [1]. No further explanation could be found on the websites of MoPH and MAIL as well as NEPA on the functions of these committees and/or any evidence of the presence of a dedicated department or agency in this regard [2,3,4]. No evidence was also found in academic journals and papers [5].

[1] World Health Organisation (WHO). 2017. Joint External Evaluation of IHR Core Capacities of the Islamic Republic of Afghanistan. Mission report: 4-7 December 2016 [https://apps.who.int/iris/bitstream/handle/10665/258674/WHO-WHE-CPI-REP-2017.43-eng.pdf?sequence=1.] Accessed 4 Jan 2021

[2] Ministry of Public Health, Islamic Republic of Afghanistan, [https://moph.gov.af/en] Accessed 29 Jan 2021;

[3] Ministry of Agriculture, Irrigation and Livestock Islamic Republic of Afghanistan, [https://www.mail.gov.af/en] Accessed 29 Jan 2021

[4] Government of the Islamic Republic of Afghanistan, National Environmental Protection Agency,

[http://www.nepa.gov.af/indexen] Accessed 29 Jan 2021

[5] PubMed.

[https://www.ncbi.nlm.nih.gov/pubmed/?term=%22Afghanistan%22+AND+%22regulation%22+AND+%22multiple+zoonotic+ diseases%22]. Accessed 29 Jan, 2021



# **1.2.2** Surveillance systems for zoonotic diseases/pathogens

## 1.2.2a

Does the country have a national mechanism (either voluntary or mandatory) for owners of livestock to conduct and report on disease surveillance to a central government agency?

Yes = 1 , No = 0

Current Year Score: 0

No evidence could be found that in Afghanistan there is a national mechanism (either voluntary or mandatory) for owners of livestock to conduct and report on disease surveillance to a central government agency. Both the WHO Joint External Evaluation for Afghanistan, completed in December, 2016 and the PVS Evaluation Follow up Mission Report, published in April 2017, by World Organisation for Animal Health (OIE) only refer to the presence of a basic passive surveillance system that helps the authorities gather information and respond to disease outbreaks related to livestock. This system, the Sanitary Mandate Contracting Scheme (SMCS) is described as a system to primarily enable reporting by private veterinarians and animal health professionals, and does not make mention of including livestock owners. [1,2]. No further evidence/explanation, however, could be found on the websites of the Ministry of Agriculture, Irrigation and Livestock (MAIL) and Ministry of Public Health (MOPH) [3,4] No evidence of could also be found in academic journals and papers [5]

[1] World Health Organisation (WHO). 2017. "Joint External Evaluation of IHR Core Capacities of the Islamic Republic of Afghanistan. Mission report: 4-7 December 2016". [https://apps.who.int/iris/bitstream/handle/10665/258674/WHO-WHE-CPI-REP-2017.43-eng.pdf?sequence=1] Accessed 4 Jan, 2021.

[2] World Organisation for Animal Health (OIE). April 2017. "PVS Evaluation Follow up Mission Report Islamic Republic of Afghanistan". [http://www.oie.int/fileadmin/Home/eng/Support\_to\_OIE\_Members/pdf/201711078\_OIE\_PVS\_Follow-up\_Report\_final\_Afghanistan.pdf] Accessed 4 Jan, 2021.

[3] Ministry of Agriculture, Irrigation and Livestock, Islamic Republic of Afghanistan, [https://www.mail.gov.af/en] Accessed 29 Jan, 2021

[4] Ministry of Public Health, Islamic Republic of Afghanistan, [https://moph.gov.af/en] Accessed 29 Jan, 2021 [5] PubMed

[https://www.ncbi.nlm.nih.gov/pubmed/?term=%5B%22Afghanistan%22%5D+AND+%22owner\*+of+livestock\*%22+AND+%2 2report%22+AND+%22disease%22]. Accessed 4 Jan, 2021

## 1.2.2b

Is there legislation and/or regulations that safeguard the confidentiality of information generated through surveillance activities for animals (for owners)?

Yes = 1 , No = 0

Current Year Score: 0

There is no evidence of the presence of laws or guidelines that safeguard the confidentiality of information generated through surveillance activities for animals (for owners). No evidence/explanation was found in the PVS Evaluation Follow up Mission Report in Afghanistan, published in 2017 and WHO Joint External Evaluation for Afghanistan, completed in December, 2016 [1,2]. No evidence was also found either on the website of Ministry of Health (MoPH) nor the Ministry Agriculture, Irrigation and Livestock (MAIL) [3,4]. No evidence was found on PubMed for academic journals [5].

[1] World Organisation for Animal Health (OIE). April 2017. "PVS Evaluation Follow up Mission Report Islamic Republic of Afghanistan". [http://www.oie.int/fileadmin/Home/eng/Support\_to\_OIE\_Members/pdf/201711078\_OIE\_PVS\_Follow-up\_Report\_final\_Afghanistan.pdf] Accessed 4 Jan, 2021.

[2] World Health Organisation (WHO). 2017. "Joint External Evaluation of IHR Core Capacities of the Islamic Republic of Afghanistan. Mission report: 4-7 December 2016. [https://extranet.who.int/sph/sites/default/files/jeeta/WHO-WHE-CPI-REP-2017.43-eng.pdf]. Accessed 4 Jan, 2021.

[3] Ministry of Public Health, Islamic Republic of Afghanistan, [https://moph.gov.af/en] Accessed 29 Jan, 2021.

[4] Ministry of Agriculture, Irrigation and Livestock, Islamic Republic of Afghanistan, [https://www.mail.gov.af/en] Accessed 29 Jan, 2021.

[5] PubMed.

[https://www.ncbi.nlm.nih.gov/pubmed/?term=%22Afghanistan%22+AND+%22confidentiality%22+AND+%22animal+health+ information%22]. Accessed 4 Jan, 2021

## **1.2.2**c

Does the country conduct surveillance of zoonotic disease in wildlife (e.g., wild animals, insects, other disease vectors)? Yes = 1, No = 0

#### Current Year Score: 0

There is insufficient evidence that Afghanistan conducts surveillance of zoonotic disease in wildlife. The OIE PVS Evaluation Report on Afghanistan, published in April 2017, notes (on page 166) that veterinary services include wildlife under their mandate, but makes no mention of ongoing wildlife in surveillance in country. The report does note that veterinary services in country "conduct active surveillance for some relevant diseases (of economic and zoonotic importance) but apply it only in a part of susceptible populations and/or do not update it regularly," but does not note if this includes any specific types of wildlife or diseases. It further emphasizes that the surveillance is only partially achieved in some parts of the country through the help of private sector [1]. According to the WHO Joint External Evaluation for Afghanistan, completed in December, 2016, the wildlife sector is under the authority of the National Environmental Protection Agency (NEPA), and that "focal points from this agency need to be included in the [zoonotic disease] committees." Furthermore, the JEE highlights as a recommendation that "Wildlife and entomology, etc. should be involved in surveillance in animal reservoirs and vectors." [2] No further evidence could however be found on the on website of the Ministry of Public Health (MoPH) and the website of Ministry of Agriculture, Irrigation and Livestock (MAIL) as well as the website of National Environmental Protection Agency [3,4,5]. No evidence or further explanation were also founded in relevant academic/research papers [6]

[1] PVS Evaluation Follow-Up Mission Report, Islamic Republic of Afghanistan. April

2017.[http://www.oie.int/fileadmin/Home/eng/Support\_to\_OIE\_Members/pdf/201711078\_OIE\_PVS\_Follow-

up\_Report\_final\_Afghanistan.pdf]. Accessed 6 Jan, 2021.

[2] World Health Organisation (WHO). 2017. "Joint External Evaluation of IHR Core Capacities of the Islamic Republic of Afghanistan". 4-7 December 2016 [http://apps.who.int/iris/bitstream/handle/10665/258674/WHO-WHE-CPI-REP-2017.43-eng.pdf;jsessionid=7E33809CC4FD4A538B4B543E554F67A8?sequence=1]. Accessed 6 Jan, 2021.

[3] Ministry of Public Health, Islamic Republic of Afghanistan, [https://moph.gov.af/en] Accessed 29 Jan, 2021.

[4] Ministry of Agriculture, Irrigation and Livestock, Islamic Republic of Afghanistan. [https://www.mail.gov.af/en]. Accessed 29 Jan, 2021.

[5] National Environmental Protection Agency Islamic Republic of Afghanistan, [http://www.nepa.gov.af/indexen]. Accessed 29 Jan, 2021.

[6] PubMed. 2012. "Outbreak of zoonotic cutaneous leishmaniasis with local dissemination in Balkh, Afghanistan".

[https://www.ncbi.nlm.nih.gov/pubmed/?term=Zoonodic+AND+wildlife+AND+surveillance+AND+Afghanistan]. Accessed 6 Jan, 2021.



# 1.2.3 International reporting of animal disease outbreaks

## 1.2.3a

Has the country submitted a report to OIE on the incidence of human cases of zoonotic disease for the last calendar year? Yes = 1, No = 0

Current Year Score: 0

2019

OIE WAHIS database

# 1.2.4 Animal health workforce

## 1.2.4a

Number of veterinarians per 100,000 people Input number Current Year Score: 2.79

2017

OIE WAHIS database

## 1.2.4b

Number of veterinary para-professionals per 100,000 people Input number Current Year Score: 3.6

2017

OIE WAHIS database

# 1.2.5 Private sector and zoonotic

## 1.2.5a

Does the national plan on zoonotic disease or other legislation, regulations, or plans include mechanisms for working with the private sector in controlling or responding to zoonoses?

Yes = 1 , No = 0

Current Year Score: 0

No evidence was found that the national plan on zoonotic disease or other legislation, regulation or plan includes mechanisms for working with the private sector in controlling or responding to zoonoses. According to the Joint External Evaluation (JEE) report on Afghanistan, completed in Dec. 2016 as well as PVS Evaluation Follow up Mission Report, published in April 2017, there is a basic governance structure and coordination mechanism on zoonotic diseases -alternated between Ministry of Agriculture Irrigation and Livestock (MAIL) and Ministry of Public Health (MoPH)- but it does not include

the private sector. Both the JEE and OIE PVS recommend inclusion of all 'interest parties' in the process including the private sector. Policies and procedures regulating animal health only refer to working with the private sector from a regulatory perspective e.g., importation of live animals, and do not specifically mention or foresee any mechanism for working with the private sector on the issue [1,2]. No evidence could be found on the websites of the MoPH [3] and the website of Ministry of Agriculture Irrigation and Livestock (MAIL) [4]. No evidence was found on academic journals and papers [5]

[1] World Health Organisation (WHO).2017. "Joint External Evaluation of IHR Core Capacities of the Islamic Republic of Afghanistan". 4-7 December 2016 [http://apps.who.int/iris/bitstream/handle/10665/258674/WHO-WHE-CPI-REP-2017.43-eng.pdf;jsessionid=3FD80CDEFB32325D60CD6ED4B91429D3?sequence=1] Accessed Jan 6, 2021.

[2] World Organisation for Animal Health (OIE). 2017. "PVS Evaluation Follow up Mission Report Islamic Republic of Afghanistan". [http://www.oie.int/fileadmin/Home/eng/Support\_to\_OIE\_Members/pdf/201711078\_OIE\_PVS\_Follow-up\_Report\_final\_Afghanistan.pdf] Accessed Jan 6, 2021

[3] Ministry of Public Health, Islamic Republic of Afghanistan, [https://moph.gov.af/en] Accessed 29 Jan, 2021

[4] Ministry of Agriculture, Irrigation and Livestock, Islamic Republic of Afghanistan, [https://www.mail.gov.af/en] Accessed 29 Jan, 2021

[5] PubMed

[https://www.ncbi.nlm.nih.gov/pubmed/?term=%5B%22Afghanistan%22%5D+AND+%22private+sector%22+AND+%22nation al+plan%22+AND+%22zoonotic+disease%22]. Accessed Jan 6, 2021

# **1.3 BIOSECURITY**

## 1.3.1 Whole-of- government biosecurity systems

## **1.3.1a**

Does the country have in place a record, updated within the past five years, of the facilities in which especially dangerous pathogens and toxins are stored or processed, including details on inventories and inventory management systems of those facilities?

Yes = 1 , No = 0

Current Year Score: 0

No evidence could be found that Afghanistan has in place a record, updated within the past 5 years, of the facilities in which especially dangerous pathogens and toxins are stored or processed, including details on inventories and inventory management systems of those facilities. No evidence could be found on the website of the Ministry of Public Health (MoPH) as well as Ministry of Agriculture, Irrigation and Livestock (MAIL) and Ministry of Defense [1,2,3]. In Afghanistan there is no Ministry of Research. According to Joint External Evaluation (JEE) report on Afghanistan completed in Dec. 2016, Afghanistan needs a "nationwide biosafety/biosecurity plan that will address procedures as well as a dangerous pathogen inventory"[4]. Although Afghanistan is party to the CBM, there is no public evidence that is has submitted Confidence-Building Measures reports [5]. No evidence could be found on the VERTIC database either [6]. The website for the Afghan National Public Health Institute was not accessible.

Ministry of Public Health, Islamic Republic of Afghanistan, [https://moph.gov.af/en] Accessed 29 Jan, 2021
 Ministry of Agriculture, Irrigation and Livestock, Islamic Republic of Afghanistan, [https://www.mail.gov.af/en] Accessed 29 Jan, 2021

[3] Ministry of Defense, Islamic Republic of Afghanistan, [https://mod.gov.af/en] Accessed 29 Jan, 2021

[4] World Health Organisation (WHO). 2017. "Joint External Evaluation of IHR Core Capacities of the Islamic Republic of Afghanistan". 4-7 December 2016 [http://apps.who.int/iris/bitstream/handle/10665/258674/WHO-WHE-CPI-REP-2017.43-



eng.pdf;jsessionid=3FD80CDEFB32325D60CD6ED4B91429D3?sequence=1] Accessed Jan 6, 2021 [5] Confidence-Building Measures. 2017 & 2018. "Submissions made by States Parties". [https://bwcecbm.unog.ch/state/afghanistan] Accessed 6 Jan, 2021 [6] Vortig. DWC Logislation Database. [https://www.uprtig.org/programmes/biological.wooppers.and\_materials/by

[6] Vertic, BWC Legislation Database, [https://www.vertic.org/programmes/biological-weapons-and-materials/bwc-legislation-database/a/] Accessed 29 Jan, 2021

## 1.3.1b

Does the country have in place legislation and/or regulations related to biosecurity which address requirements such as physical containment, operation practices, failure reporting systems, and/or cybersecurity of facilities in which especially dangerous pathogens and toxins are stored or processed?

Yes = 1 , No = 0

Current Year Score: 0

No evidence could be found that Afghanistan has in place legislation and/or regulations related to biosecurity which address requirements such as physical containment, operation practices, failure reporting systems and/or cybersecurity of facilities in which especially dangerous pathogens and toxins are stored or processed. No evidence could be found on the website of the Ministry of Public Health (MoPH) as well as Ministry of Agriculture, Irrigation and Livestock (MAIL) and Ministry of Defense [1,2,3]. In Afghanistan there is no Ministry of Research. No evidence could also be found on academic journal articles [4]. No evidence was also available on VERTIC [5] According to the (WHO) Joint External Evaluation for Afghanistan, completed in December, 2016, a comprehensive national biosecurity legislation/regulations is lacking to guide legal oversight of biosafety/biosecurity issues. The report then further recommends as a "priority action" to develop a national biosecurity coordination/guiding document, including legislation/ regulations to guide countrywide biosecurity issues, including monitoring of private laboratories [6]. Although Afghanistan is party to the BWC, there is no public evidence that is has submitted Confidence-Building Measures reports [7]. The website for the Afghan National Public Health Institute was not accessible.

[1] Ministry of Public Health, Islamic Republic of Afghanistan, [https://moph.gov.af/en] Accessed 29 Jan, 2021

[2] Ministry of Agriculture, Irrigation and Livestock, Islamic Republic of Afghanistan, [https://www.mail.gov.af/en] Accessed 29 Jan, 2021

[3] Ministry of Defense, Islamic Republic of Afghanistan, [https://mod.gov.af/en] Accessed 29 Jan, 2021

[4] PubMed. [https://www.ncbi.nlm.nih.gov/pubmed/?term=Biosecurity+AND+Afghanistan+AND+Legislation]. Accessed 6 Jan, 2021

[5] VERTIC, BWC Legislation Database, [https://www.vertic.org/programmes/biological-weapons-and-materials/bwc-legislation-database/a/] Accessed 29 Jan, 2021

[6] World Health Organisation (WHO). 2017. "Joint External Evaluation of IHR Core Capacities of the Islamic Republic of Afghanistan". 4-7 December 2016 [http://apps.who.int/iris/bitstream/handle/10665/258674/WHO-WHE-CPI-REP-2017.43-eng.pdf;jsessionid=3FD80CDEFB32325D60CD6ED4B91429D3?sequence=1] Accessed 29 Jan, 2021

[7] Confidence-Building Measures. 2017 & 2018. "Submissions made by States Parties". [https://bwc-ecbm.unog.ch/state/afghanistan] Accessed 29 Jan, 2021

## **1.3.1c**

Is there an established agency (or agencies) responsible for the enforcement of biosecurity legislation and regulations? Yes = 1, No = 0

Current Year Score: 0

There is insufficient evidence that there is an agency responsible for the enforcement of biosecurity legislation and regulations. According to the Joint External Evaluation report on Afghanistan, completed in Dec. 2016, there is a "biosafety/biosecurity plan in place" for the Central Public Health Laboratory (CPHL), but it does not apply to all laboratories in country. There is no mention in the report of an oversight agency, and the JEE emphasizes as a "recommendation for priority action" that Afghanistan needs to develop a national biosecurity coordination document including legislation/regulations. [1] No further evidence and/or explanation could be found on the website of the Ministry of Public Health (MoPH) as well as Ministry of Agriculture, Irrigation and Livestock (MAIL) and Ministry of Defense [2,3,4]. In Afghanistan there is no Ministry of Research. Although Afghanistan is party to the BWC, there is no public evidence that is has submitted Confidence-Building Measures reports in 2017, and 2018. [5] No evidence could be found on the VERTIC database either [6]. The website for the Afghan National Public Health Institute was not accessible.

[1] World Health Organisation (WHO). 2017. "Joint External Evaluation of IHR Core Capacities of the Islamic Republic of Afghanistan". 4-7 December 2016 [http://apps.who.int/iris/bitstream/handle/10665/258674/WHO-WHE-CPI-REP-2017.43-eng.pdf;jsessionid=3FD80CDEFB32325D60CD6ED4B91429D3?sequence=1] Accessed Jan 7, 2021.

[2] Ministry of Public Health, Islamic Republic of Afghanistan, [https://moph.gov.af/en] Accessed 30 Jan, 2021

[3] Ministry of Agriculture, Irrigation and Livestock, Islamic Republic of Afghanistan, [https://www.mail.gov.af/en] Accessed 30 Jan, 2021

[4] Ministry of Defense, Islamic Republic of Afghanistan, [https://mod.gov.af/en] Accessed 30 Jan, 2021

[5] Confidence-Building Measures. 2017 & 2018. "Submissions made by States Parties". [https://bwc-

ecbm.unog.ch/?field\_form\_year\_tid=548]. Accessed Jan 7, 2021

[6] Vertic, BWC Legislation Database, [https://www.vertic.org/programmes/biological-weapons-and-materials/bwc-legislation-database/] Accessed 29 Jan, 2021

## 1.3.1d

Is there public evidence that shows that the country has taken action to consolidate its inventories of especially dangerous pathogens and toxins into a minimum number of facilities?

Yes = 1 , No = 0

#### Current Year Score: 0

No evidence could be found to show that the country has taken action to consolidate its inventories of especially dangerous pathogens and toxins into a minimum number of facilities. No evidence could be found on the website of the Ministry of Public Health (MoPH) as well as Ministry of Agriculture, Irrigation and Livestock (MAIL) and Ministry of Defense [1,2,3]. In Afghanistan there is no Ministry of Research. No evidence could also be found on academic journal articles [4] Even though, the Joint External Evaluation report (JEE) on Afghanistan, completed in Dec. 2016, scores 1 for Afghanistan's "whole of government national biosafety and bio-security system" it notes that "the country needs to have an updated record and inventory of the dangerous pathogens and toxins within facilities that store them". No further evidence/explanation could be found in the report that Afghanistan has taken action in this regard or to consolidate its inventories of especially dangerous pathogens and toxins into a minimum number of facilities. [5] Although Afghanistan is party to the BWC, there is no public evidence that is has submitted Confidence-Building Measures reports [6] No evidence could be found on the VERTIC database either [7]. The website for the Afghan National Public Health Institute was not accessible.

[1] Ministry of Public Health, Islamic Republic of Afghanistan, [https://moph.gov.af/en] Accessed 30 Jan, 2021

[2] Ministry of Agriculture, Irrigation and Livestock, Islamic Republic of Afghanistan, [https://www.mail.gov.af/en] Accessed 30 Jan, 2021

[3] Ministry of Defense, Islamic Republic of Afghanistan, [https://mod.gov.af/en] Accessed 30 Jan, 2021
[4] PubMed. [https://www.ncbi.nlm.nih.gov/] Accessed 30 Jan, 2021

[5] World Health Organization (WHO). 2017. "Joint External Evaluation of IHR Core Capacities of the Islamic Republic of Afghanistan". 4-7 December 2016 [http://apps.who.int/iris/bitstream/handle/10665/258674/WHO-WHE-CPI-REP-2017.43-eng.pdf;jsessionid=3FD80CDEFB32325D60CD6ED4B91429D3?sequence=1] Accessed 7 Jan, 2021.
[6] Confidence-Building Measures. 2017 & 2018. "Submissions made by States Parties". [https://bwc-

ecbm.unog.ch/?field\_form\_year\_tid=548]. Accessed 30 Jan, 2021

[7] VERTIC, BWC Legislation Database, [https://www.vertic.org/programmes/biological-weapons-and-materials/bwc-legislation-database/] Accessed 29 Jan, 2021

## 1.3.1e

Is there public evidence of in-country capacity to conduct Polymerase Chain Reaction (PCR)-based diagnostic testing for anthrax and/or Ebola, which would preclude culturing a live pathogen?

Yes = 1 , No = 0

Current Year Score: 0

No public evidence could be found that there is in-country capacity to conduct Polymerase Chain Reaction (PCR)-based diagnostic testing for anthrax and/or Ebola, which would preclude culturing a live pathogen. There is no public evidence of such capacity on the websites of the Ministry of Public Health (MoPH), the Ministry of Agriculture, Irrigation and Livestock (MAIL), or the Ministry of Defense [1,2,3]. In Afghanistan there is no Ministry of Research. No evidence could also be found on the Joint External Evaluation (JEE) report on Afghanistan completed in Dec. 2016 [4]. The website for the Afghan National Public Health Institute was not accessible.

Ministry of Public Health, Islamic Republic of Afghanistan, [https://moph.gov.af/en] Accessed 30 Jan, 2021
 Ministry of Agriculture, Irrigation and Livestock, Islamic Republic of Afghanistan, [https://www.mail.gov.af/en] Accessed 30 Jan, 2021
 Jan, 2021

[3] Ministry of Defense, Islamic Republic of Afghanistan, [https://mod.gov.af/en] Accessed 30 Jan, 202

[4] World Health Organization (WHO). 2017. "Joint External Evaluation of IHR Core Capacities of the Islamic Republic of Afghanistan". 4-7 December 2016 [http://apps.who.int/iris/bitstream/handle/10665/258674/WHO-WHE-CPI-REP-2017.43-eng.pdf;jsessionid=3FD80CDEFB32325D60CD6ED4B91429D3?sequence=1] Accessed 7 Jan, 2021

# 1.3.2 Biosecurity training and practices

## 1.3.2a

Does the country require biosecurity training, using a standardized, required approach, such as through a common curriculum or a trainthe-trainer program, for personnel working in facilities housing or working with especially dangerous pathogens, toxins, or biological materials with pandemic potential?

Yes = 1 , No = 0

Current Year Score: 0

No evidence could be found that Afghanistan requires, through adopting or endorsing a relevant protocols, biosecurity training, using a standardized, required approach, such as through a common curriculum or a train-the-trainer program, for personnel working in facilities housing or working with especially dangerous pathogens, toxins, or biological materials with pandemic potential. No evidence could be found on the website of the Ministry of Public Health (MoPH) as well as Ministry of Agriculture, Irrigation and Livestock (MAIL) and Ministry of Defense. [1,2,3] In Afghanistan there is no Ministry of Research. The Joint External Evaluation report (JEE) on Afghanistan, completed in Dec. 2016, refers to the presence of basic biosecurity trainings conducted for laboratory staff. No evidence could however be found in the report that such training is a

requirement for the personnel and whether it takes place using standardized, required approach, such as through a common curriculum or a train-the-trainer program. [4] Although Afghanistan is party to the BWC, there is no public evidence that it has submitted Confidence-Building Measures reports. [5] No evidence could be found on the VERTIC database either. [6] The website for the Afghan National Public Health Institute was not accessible.

[1] Ministry of Public Health, Islamic Republic of Afghanistan, [https://moph.gov.af/en] Accessed 30 Jan, 2021

[2] Ministry of Agriculture, Irrigation and Livestock, Islamic Republic of Afghanistan, [https://www.mail.gov.af/en] Accessed 30 Jan, 2021

[3] Ministry of Defense, Islamic Republic of Afghanistan, [https://mod.gov.af/en] Accessed 30 Jan, 2021

[4] PubMed. [https://www.ncbi.nlm.nih.gov/] Accessed 30 Jan, 2021

[5] World Health Organization (WHO). 2017. "Joint External Evaluation of IHR Core Capacities of the Islamic Republic of Afghanistan". 4-7 December 2016 [http://apps.who.int/iris/bitstream/handle/10665/258674/WHO-WHE-CPI-REP-2017.43-eng.pdf;jsessionid=3FD80CDEFB32325D60CD6ED4B91429D3?sequence=1] Accessed 7 Jan, 2021.

[6] Confidence-Building Measures. 2017 & 2018. "Submissions made by States Parties". [https://bwc-ecbm.unog.ch/?field\_form\_year\_tid=548]. Accessed 30 Jan, 2021

[7] VERTIC, BWC Legislation Database, [https://www.vertic.org/programmes/biological-weapons-and-materials/bwc-legislation-database/] Accessed 29 Jan, 2021

# **1.3.3** Personnel vetting: regulating access to sensitive locations

#### 1.3.3a

# Do regulations or licensing conditions specify that security and other personnel with access to especially dangerous pathogens, toxins, or biological materials with pandemic potential are subject to the following checks: drug testing, background checks, and psychological or mental fitness checks?

Personnel are subject to all three of these checks = 3, Personnel are subject to two of these checks = 2, Personnel are subject to one of these checks = 1, Personnel are not subject to any of these checks = 0

#### Current Year Score: 0

No evidence could be found that in Afghanistan regulations or licensing conditions specifying that security and other personnel with access to especially dangerous pathogens, toxins, or biological materials with pandemic potential are subject to the drug testing, background checks, and psychological or mental fitness checks. No evidence could be found on the website of the Ministry of Public Health (MoPH) as well as Ministry of Agriculture, Irrigation and Livestock (MAIL) and Ministry of Defense. [1,2,3] In Afghanistan there is no Ministry of Research. As noted in the Joint External Evaluation report (JEE) on Afghanistan, completed in Dec. 2016, there is not yet a legislation or a nationwide plan for biosecurity to regulate these processes and the associated requirements [4]. Although Afghanistan is party to the BWC, there is no public evidence that is has submitted Confidence-Building Measures reports [5] No evidence could either be found on VERTIC data base. [6] The website for the Afghan National Public Health Institute was not accessible.

Ministry of Public Health, Islamic Republic of Afghanistan, [ https://moph.gov.af/en] Accessed 30 Jan, 2021
 Ministry of Agriculture, Irrigation and Livestock, Islamic Republic of Afghanistan, [https://www.mail.gov.af/en] Accessed 30 Jan, 2021

[3] Ministry of Defense, Islamic Republic of Afghanistan, [https://mod.gov.af/en] Accessed 30 Jan, 2021

[4] World Health Organization (WHO). 2017. "Joint External Evaluation of IHR Core Capacities of the Islamic Republic of Afghanistan". 4-7 December 2016 [http://apps.who.int/iris/bitstream/handle/10665/258674/WHO-WHE-CPI-REP-2017.43-eng.pdf;jsessionid=3FD80CDEFB32325D60CD6ED4B91429D3?sequence=1] Accessed 7 Jan, 2021.

[5] Confidence-Building Measures. 2017 & 2018. "Submissions made by States Parties". [https://bwc-



ecbm.unog.ch/?field\_form\_year\_tid=548]. Accessed 30 Jan, 2021 [6] VERTIC, BWC Legislation Database, [https://www.vertic.org/programmes/biological-weapons-and-materials/bwclegislation-database/] Accessed 29 Jan, 2021

# **1.3.4 Transportation security**

## 1.3.4a

Does the country have publicly available information on national regulations on the safe and secure transport of infectious substances (specifically including Categories A and B)?

Yes = 1 , No = 0

Current Year Score: 0

No evidence could be found that Afghanistan has national regulations on the safe and secure transport of infectious substances (Categories A and B). No evidence could be found on the website of the Ministry of Transport, not on the website of Ministry of Public Health (MoPH) as well as Ministry of Agriculture, Irrigation and Livestock (MAIL) and Ministry of Defense [1,2,3,4]. In Afghanistan there is no Ministry of Research. The Joint External Evaluation (JEE) report on Afghanistan, completed in Dec. 2016, does not mention if national regulations exists on the safe and secure transport of infectious substances (Categories A and B). It only broadly notes that Afghanistan lacks the necessary legislation/regulations and national plans to address issues related to biosafety/biosecurity [5]. Although Afghanistan is party to the BWC, there is no public evidence that is has submitted Confidence-Building Measures reports [6]. No evidence could be found on VERTIC database on Afghanistan's legislations in this regard [7]. The website for the Afghan National Public Health Institute was not accessible.

[1] Ministry of Transportation, Islamic Republic of Afghanistan, [https://mot.gov.af/en] Accessed 30 Jan, 2021

[2] Ministry of Public Health, Islamic Republic of Afghanistan, [https://moph.gov.af/en] Accessed 30 Jan, 2021

[3] Ministry of Agriculture, Irrigation and Livestock, Islamic Republic of Afghanistan, [https://www.mail.gov.af/en] Accessed 30 Jan, 2021

[4] Ministry of Defense, Islamic Republic of Afghanistan, [https://mod.gov.af/en] Accessed 30 Jan, 2021

[5] World Health Organization (WHO). 2017. "Joint External Evaluation of IHR Core Capacities of the Islamic Republic of Afghanistan". 4-7 December 2016 [http://apps.who.int/iris/bitstream/handle/10665/258674/WHO-WHE-CPI-REP-2017.43-eng.pdf;jsessionid=3FD80CDEFB32325D60CD6ED4B91429D3?sequence=1] Accessed 7 Jan, 2021.

[6] Confidence-Building Measures. 2017 & 2018. "Submissions made by States Parties". [https://bwc-

ecbm.unog.ch/?field\_form\_year\_tid=548]. Accessed 30 Jan, 2021

[7] VERTIC, BWC Legislation Database, [https://www.vertic.org/programmes/biological-weapons-and-materials/bwc-legislation-database/] Accessed 29 Jan, 2021

# 1.3.5 Cross-border transfer and end-user screening

## 1.3.5a

Is there legislation and/or regulations in place to oversee the cross-border transfer and end-user screening of especially dangerous pathogens, toxins, and pathogens with pandemic potential?

Yes = 1 , No = 0

Current Year Score: 0

No evidence could be found that there is a national legislation, regulation, or other guidance in place in Afghanistan to oversee the cross-border transfer and end-user screening of especially dangerous pathogens, toxins and pathogens with pandemic potential. No evidence could be found on the website of the Ministry of Transport, the website of Ministry of Public Health (MoPH), the Ministry of Agriculture, Irrigation and Livestock (MAIL), and the Ministry of Defense [1,2,3,4]. In Afghanistan, there is no Ministry of Research. The Joint External Evaluation (JEE) report on Afghanistan, completed in December 2016, broadly notes that the country lacks the necessary legislations and national plans to address procedures associated with physical biosafety/biosecurity including sample transportation of dangerous pathogen both nationally and or across international borders [5]. Although Afghanistan is party to the BWC, there is no public evidence that is has submitted Confidence-Building Measures reports [6]. No evidence could also be found on VERTIC database for any relevant biosecurity legislation for Afghanistan [7]. The website for the Afghan National Public Health Institute was not accessible.

[1] Ministry of Transportation, Islamic Republic of Afghanistan, [https://mot.gov.af/en] Accessed 30 Jan, 2021

[2] Ministry of Public Health, Islamic Republic of Afghanistan, [https://moph.gov.af/en] Accessed 30 Jan, 2021

[3] Ministry of Agriculture, Irrigation and Livestock, Islamic Republic of Afghanistan, [https://www.mail.gov.af/en] Accessed 30 Jan, 2021

[4] Ministry of Defense, Islamic Republic of Afghanistan, [https://mod.gov.af/en] Accessed 30 Jan, 2021

[5] World Health Organization (WHO). 2017. "Joint External Evaluation of IHR Core Capacities of the Islamic Republic of Afghanistan". 4-7 December 2016 [http://apps.who.int/iris/bitstream/handle/10665/258674/WHO-WHE-CPI-REP-2017.43-eng.pdf;jsessionid=3FD80CDEFB32325D60CD6ED4B91429D3?sequence=1] Accessed 7 Jan, 2021.

[6] Confidence-Building Measures. 2017 & 2018. "Submissions made by States Parties". [https://bwc-

ecbm.unog.ch/?field\_form\_year\_tid=548]. Accessed 30 Jan, 2021

[7] VERTIC, BWC Legislation Database, [https://www.vertic.org/programmes/biological-weapons-and-materials/bwc-legislation-database/] Accessed 29 Jan, 2021

# **1.4 BIOSAFETY**

# 1.4.1 Whole-of-government biosafety systems

## **1.4.1**a

#### Does the country have in place national biosafety legislation and/or regulations?

Yes = 1 , No = 0

Current Year Score: 0

No evidence could be found that Afghanistan has in place a national biosafety legislation and/or regulations. No evidence could be found on the website of Ministry of Public Health (MoPH) as well as Ministry of Agriculture, Irrigation and Livestock (MAIL) [1,2]. In Afghanistan there is no Ministry of Research and the website for the Afghan National Public Health Institute was not accessible. The Joint External Evaluation (JEE) report on Afghanistan, completed in Dec. 2016, notes that Afghanistan lacks the necessary national biosafety legislation and/or regulations. [3] Although Afghanistan is party to the BWC, there is no public evidence that is has submitted Confidence-Building Measures reports [4] No evidence was also found on VERTIC database on Afghanistan. [5]

Ministry of Public Health, Islamic Republic of Afghanistan, [https://moph.gov.af/en] Accessed 30 Jan, 2021
 Ministry of Agriculture, Irrigation and Livestock, Islamic Republic of Afghanistan, [https://www.mail.gov.af/en] Accessed 30 Jan, 2021

[3] World Health Organization (WHO). 2017. "Joint External Evaluation of IHR Core Capacities of the Islamic Republic of Afghanistan". 4-7 December 2016 [http://apps.who.int/iris/bitstream/handle/10665/258674/WHO-WHE-CPI-REP-2017.43-



eng.pdf;jsessionid=3FD80CDEFB32325D60CD6ED4B91429D3?sequence=1] Accessed 7 Jan, 2021.
[4] Confidence-Building Measures. 2017 & 2018. "Submissions made by States Parties". [https://bwc-ecbm.unog.ch/?field\_form\_year\_tid=548]. Accessed 30 Jan, 2021
[5] VERTIC, BWC Legislation Database, [https://www.vertic.org/programmes/biological-weapons-and-materials/bwc-legislation-database/] Accessed 29 Jan, 2021

## 1.4.1b

Is there an established agency responsible for the enforcement of biosafety legislation and regulations? Yes = 1 , No = 0

Current Year Score: 0

Afghanistan lacks national biosafety legislation/regulations to guide legal oversight of biosafety issues. Accordingly there is not an established agency responsible for the enforcement of biosafety legislation and regulations. However, there are two agencies in the country that are responsible for collecting, testing and storing dangerous pathogens. According to the Joint External Evaluation (JEE) report completed in Dec. 2016, the Central Public Health Laboratory (CPHL) under the Ministry of Public Health (MoPh) provides reference, confirmation testing and some laboratory surveillance functions for the human health sector [1]. No evidence or further explanation could be found on VERTIC database, academic journal articles and on the websites of MoPH and Ministry of Agriculture, Irrigation and Livestock (MAIL) [2,3,4,5]. Although Afghanistan is party to the BWC, there is no public evidence that is has submitted Confidence-Building Measures reports [6]. The website for the Afghan National Public Health Institute was not accessible.

[1] World Health Organization (WHO). 2017. "Joint External Evaluation of IHR Core Capacities of the Islamic Republic of Afghanistan". 4-7 December 2016 [http://apps.who.int/iris/bitstream/handle/10665/258674/WHO-WHE-CPI-REP-2017.43-eng.pdf;jsessionid=3FD80CDEFB32325D60CD6ED4B91429D3?sequence=1] Accessed 7 Jan, 2021

[2] VERTIC, BWC Legislation Database, [https://www.vertic.org/programmes/biological-weapons-and-materials/bwc-legislation-database/] Accessed 29 Jan, 2021

[3] PubMed. [https://www.ncbi.nlm.nih.gov/]. Accessed 4 Jan, 2021

[4] Ministry of Public Health, Islamic Republic of Afghanistan, [https://moph.gov.af/en] Accessed 30 Jan, 2021

[5] Ministry of Agriculture, Irrigation and Livestock, Islamic Republic of Afghanistan, [https://www.mail.gov.af/en] Accessed 30 Jan, 2021

[6] Confidence-Building Measures. 2017 & 2018. "Submissions made by States Parties". [https://bwc-ecbm.unog.ch/?field\_form\_year\_tid=548]. Accessed 30 Jan, 2021

# 1.4.2 Biosafety training and practices

## 1.4.2a

Does the country require biosafety training, using a standardized, required approach, such as through a common curriculum or a trainthe-trainer program, for personnel working in facilities housing or working with especially dangerous pathogens, toxins, or biological materials with pandemic potential?

Yes = 1 , No = 0

Current Year Score: 0

No evidence was found to prove that Afghanistan require biosafety training, using a standardized, required approach, such as through a common curriculum or a train-the-trainer program, for personnel working in facilities housing or working with especially dangerous pathogens, toxins, or biological materials with pandemic potential. No evidence could be found on the

website of Ministry of Public Health (MoPH) as well as Ministry of Agriculture, Irrigation and Livestock (MAIL) [1,2,]. In Afghanistan there is no Ministry of Research and the website for the Afghan National Public Health Institute was not accessible. No evidence could also be found in academic journal articles [3]. The Joint External Evaluation (JEE) report on Afghanistan, completed in Dec. 2016, notes that there are trained laboratory personnel in biosafety and biosecurity who have received training both inside and outside the country (with help from WHO). However no further public evidence could be found about the details of the training and if they were required to receive training. This is partly due to the fact that there is not yet any legislation or a nationwide plan for biosafety and biosecurity to regulate these processes and the associated requirements [4] Although Afghanistan is party to the BWC, there is no public evidence that is has submitted Confidence-Building Measures reports [5] No evidence was also found on VERTIC database on Afghanistan. [6]

[1] Ministry of Public Health, Islamic Republic of Afghanistan, [https://moph.gov.af/en] Accessed 30 Jan, 2021
[2] Ministry of Agriculture, Irrigation and Livestock, Islamic Republic of Afghanistan, [https://www.mail.gov.af/en] Accessed 30 Jan, 2021

[3] PubMed. [https://www.ncbi.nlm.nih.gov/]. Accessed 4 Jan, 2021

[4] World Health Organization (WHO). 2017. "Joint External Evaluation of IHR Core Capacities of the Islamic Republic of Afghanistan". 4-7 December 2016 [http://apps.who.int/iris/bitstream/handle/10665/258674/WHO-WHE-CPI-REP-2017.43-eng.pdf;jsessionid=3FD80CDEFB32325D60CD6ED4B91429D3?sequence=1] Accessed 7 Jan, 2021.

[5] Confidence-Building Measures. 2017 & 2018. "Submissions made by States Parties". [https://bwc-

ecbm.unog.ch/?field\_form\_year\_tid=548]. Accessed 30 Jan, 2021

[6] VERTIC, BWC Legislation Database, [https://www.vertic.org/programmes/biological-weapons-and-materials/bwc-legislation-database/] Accessed 29 Jan, 2021

# **1.5 DUAL-USE RESEARCH AND CULTURE OF RESPONSIBLE SCIENCE**

# **1.5.1 Oversight of research with especially dangerous pathogens, toxins, pathogens with pandemic potential and/or other dual-use research**

## 1.5.1a

Is there publicly available evidence that the country has conducted an assessment to determine whether ongoing research is occurring on especially dangerous pathogens, toxins, pathogens with pandemic potential and/or other dual-use research? Yes = 1, No = 0

#### Current Year Score: 0

No publicly available evidence could be found that Afghanistan has conducted an assessment to determine whether ongoing research is occurring on especially dangerous pathogens, toxins, pathogens with pandemic potential, and/or other dual use research. No evidence could be found on the website of Ministry of Public Health (MoPH) as well as Ministry of Agriculture, Irrigation and Livestock (MAIL) and Ministry of Defense. [1,2,3] In Afghanistan there is no Ministry of Research and the website for the Afghan National Public Health Institute was not accessible. No evidence could also be found in academic journal articles [4]. The Joint External Evaluation report (JEE), completed in Dec. 2016, does not provide any information with regard to this question [5]. Although Afghanistan is party to the BWC, there is no public evidence that is has submitted Confidence-Building Measures reports [6]. No evidence could be found on the VERTIC database either [7].

Ministry of Public Health, Islamic Republic of Afghanistan, [https://moph.gov.af/en] Accessed 30 Jan, 2021
 Ministry of Agriculture, Irrigation and Livestock, Islamic Republic of Afghanistan, [https://www.mail.gov.af/en] Accessed 30 Jan, 2021

[3] Ministry of Defense, Islamic Republic of Afghanistan, [https://mod.gov.af/en] Accessed 30 Jan, 2021



[4] PubMed. [https://www.ncbi.nlm.nih.gov/]. Accessed 4 Jan, 2021

[5] World Health Organization (WHO). 2017. "Joint External Evaluation of IHR Core Capacities of the Islamic Republic of Afghanistan". 4-7 December 2016 [http://apps.who.int/iris/bitstream/handle/10665/258674/WHO-WHE-CPI-REP-2017.43-eng.pdf;jsessionid=3FD80CDEFB32325D60CD6ED4B91429D3?sequence=1] Accessed 7 Jan, 2021.
[6] Confidence-Building Measures. 2017 & 2018. "Submissions made by States Parties". [https://bwc-ecbm.unog.ch/?field\_form\_year\_tid=548]. Accessed 30 Jan, 2021

[7] VERTIC, BWC Legislation Database, [https://www.vertic.org/programmes/biological-weapons-and-materials/bwc-legislation-database/] Accessed 29 Jan, 2021

## 1.5.1b

Is there legislation and/or regulation requiring oversight of research with especially dangerous pathogens, toxins, pathogens with pandemic potential and/or other dual-use research?

Yes = 1 , No = 0

Current Year Score: 0

No evidence could be found that a national policy requiring oversight of dual use research, such as research with especially dangerous pathogens, toxins, and/or pathogens with pandemic potential exists in Afghanistan. No evidence could be found on the website of Ministry of Public Health (MoPH) as well as Ministry of Agriculture, Irrigation and Livestock (MAIL) and Ministry of Defense [1,2,3]. In Afghanistan there is no Ministry of Research and the website for the Afghan National Public Health Institute was not accessible. No evidence could also be found in academic journal articles. [4] The Joint External Evaluation report (JEE), completed in Dec. 2016, does not provide any information with regard to this this question [5]. Although Afghanistan is party to the BWC, there is no public evidence that is has submitted Confidence-Building Measures reports [6]. No evidence could be found on the VERTIC database either [7].

[1] Ministry of Public Health, Islamic Republic of Afghanistan, [https://moph.gov.af/en] Accessed 30 Jan, 2021

[2] Ministry of Agriculture, Irrigation and Livestock, Islamic Republic of Afghanistan, [https://www.mail.gov.af/en] Accessed 30 Jan, 2021

[3] Ministry of Defense, Islamic Republic of Afghanistan, [https://mod.gov.af/en] Accessed 30 Jan, 2021

[4] PubMed. [https://www.ncbi.nlm.nih.gov/]. Accessed 4 Jan, 2021

[5] World Health Organization (WHO). 2017. "Joint External Evaluation of IHR Core Capacities of the Islamic Republic of Afghanistan". 4-7 December 2016 [http://apps.who.int/iris/bitstream/handle/10665/258674/WHO-WHE-CPI-REP-2017.43-eng.pdf;jsessionid=3FD80CDEFB32325D60CD6ED4B91429D3?sequence=1] Accessed 7 Jan, 2021.

[6] Confidence-Building Measures. 2017 & 2018. "Submissions made by States Parties". [https://bwc-ecbm.unog.ch/?field\_form\_year\_tid=548]. Accessed 30 Jan, 2021

[7] VERTIC, BWC Legislation Database, [https://www.vertic.org/programmes/biological-weapons-and-materials/bwc-legislation-database/] Accessed 29 Jan, 2021

## **1.5.1c**

Is there an agency responsible for oversight of research with especially dangerous pathogens, toxins, pathogens with pandemic potential and/or other dual-use research?

Yes = 1 , No = 0

Current Year Score: 0

No evidence was found that an agency exists in Afghanistan responsible for oversight of research with especially dangerous pathogens, pathogens with pandemic potential, and/or other dual use research. No evidence could be found that a national

policy requiring oversight of dual use research, such as research with especially dangerous pathogens, toxins, and/or pathogens with pandemic potential exists in Afghanistan. No evidence could be found on the website of Ministry of Public Health (MoPH) as well as Ministry of Agriculture, Irrigation and Livestock (MAIL) and Ministry of Defense. [1,2,3] In Afghanistan there is no Ministry of Research and the website for the Afghan National Public Health Institute was not accessible. No evidence could also be found in academic journal articles [4]. The Joint External Evaluation report (JEE), completed in Dec. 2016, does not provide any information with regard to this this question either [5]. Although Afghanistan is party to the BWC, there is no public evidence that is has submitted Confidence-Building Measures reports [6]. No evidence could be found on the VERTIC database either [7].

[1] Ministry of Public Health, Islamic Republic of Afghanistan, [https://moph.gov.af/en] Accessed 30 Jan, 2021
[2] Ministry of Agriculture, Irrigation and Livestock, Islamic Republic of Afghanistan, [https://www.mail.gov.af/en] Accessed 30 Jan, 2021

[3] Ministry of Defense, Islamic Republic of Afghanistan, [https://mod.gov.af/en] Accessed 30 Jan, 2021

[4] PubMed. [https://www.ncbi.nlm.nih.gov/]. Accessed 4 Jan, 2021

[5] World Health Organization (WHO). 2017. "Joint External Evaluation of IHR Core Capacities of the Islamic Republic of Afghanistan". 4-7 December 2016 [http://apps.who.int/iris/bitstream/handle/10665/258674/WHO-WHE-CPI-REP-2017.43-eng.pdf;jsessionid=3FD80CDEFB32325D60CD6ED4B91429D3?sequence=1] Accessed 7 Jan, 2021.

[6] Confidence-Building Measures. 2017 & 2018. "Submissions made by States Parties". [https://bwc-

ecbm.unog.ch/?field\_form\_year\_tid=548]. Accessed 30 Jan, 2021

[7] VERTIC, BWC Legislation Database, [https://www.vertic.org/programmes/biological-weapons-and-materials/bwc-legislation-database/] Accessed 29 Jan, 2021

# 1.5.2 Screening guidance for providers of genetic material

## 1.5.2a

Is there legislation and/or regulation requiring the screening of synthesized DNA (deoxyribonucleic acid) against lists of known pathogens and toxins before it is sold?

Yes = 1 , No = 0

Current Year Score: 0

No evidence could be found that there is a national legislation, regulation, policy, or other guidance, requiring the screening of synthesized DNA before it is sold in Afghanistan. No evidence could be found on the website of Ministry of Public Health (MoPH) as well as Ministry of Agriculture, Irrigation and Livestock (MAIL) and Ministry of Defense [1,2,3]. In Afghanistan there is no Ministry of Research and the website for the Afghan National Public Health Institute was not accessible. No evidence could also be found in academic journal articles [4]. The Joint External Evaluation report (JEE), completed in Dec. 2016, does not provide any information with regard to this this question [5]. Although Afghanistan is party to the BWC, there is no public evidence that is has submitted Confidence-Building Measures reports [6]. No evidence could be found on the VERTIC database either [7].

[1] Ministry of Public Health, Islamic Republic of Afghanistan, [https://moph.gov.af/en] Accessed 30 Jan, 2021

[2] Ministry of Agriculture, Irrigation and Livestock, Islamic Republic of Afghanistan, [https://www.mail.gov.af/en] Accessed 30 Jan, 2021

[3] Ministry of Defense, Islamic Republic of Afghanistan, [https://mod.gov.af/en] Accessed 30 Jan, 2021

[4] PubMed. [https://www.ncbi.nlm.nih.gov/]. Accessed 4 Jan, 2021

[5] World Health Organization (WHO). 2017. "Joint External Evaluation of IHR Core Capacities of the Islamic Republic of Afghanistan". 4-7 December 2016 [http://apps.who.int/iris/bitstream/handle/10665/258674/WHO-WHE-CPI-REP-2017.43-



eng.pdf;jsessionid=3FD80CDEFB32325D60CD6ED4B91429D3?sequence=1] Accessed 7 Jan, 2021.
[6] Confidence-Building Measures. 2017 & 2018. "Submissions made by States Parties". [https://bwc-ecbm.unog.ch/?field\_form\_year\_tid=548]. Accessed 30 Jan, 2021
[7] VERTIC, BWC Legislation Database, [https://www.vertic.org/programmes/biological-weapons-and-materials/bwc-legislation-database/] Accessed 29 Jan, 2021

# **1.6 IMMUNIZATION**

# **1.6.1 Vaccination rates**

## 1.6.1a

```
Immunization rate (measles/MCV2)
Immunization rate (measles/MCV2), 95% or greater = 2, 80-94.9% = 1, Less than 80%, or no data = 0
Current Year Score: 0
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2019

World Health Organization

## 1.6.1b

Are official foot-and-mouth disease (FMD) vaccination figures for livestock publicly available through the OIE database? Yes = 1, No = 0

Current Year Score: 1

2020

OIE WAHIS database

# Category 2: Early detection and reporting for epidemics of potential international concern

# **2.1 LABORATORY SYSTEMS STRENGTH AND QUALITY**

# 2.1.1 Laboratory testing for detection of priority diseases

## 2.1.1a

# Does the national laboratory system have the capacity to conduct diagnostic tests for at least 5 of the 10 WHO-defined core tests?

Evidence they can conduct 5 of the 10 core tests and these tests are named = 2, Evidence they can conduct 5 of the 10 core tests and the tests are not named = 1. No evidence they can conduct 5 of the 10 core tests = 0



#### Current Year Score: 1

The national laboratory system in Afghanistan has the capacity to conduct diagnostic tests for at least five of the 10 WHOdefined core tests but the tests are not named. In one section of the document, the Joint External Evaluation report (JEE), completed in Dec. 2016, notes that Afghanistan's national laboratory system for human health is capable of conducting seven core tests, while in another it states that Afghanistan can conduct eight core tests. It names six tests, four of which are centrally defined, while the other two are likely country-defined core tests: brucellosis, Crimean-Congo haemorrhagic fever (CCHF), cholera, HIV, tuberculosis and typhoid. The report also states that the country can conduct "other bacteriological tests" [1]. No further evidence/explanation however, could be found on the tests in national sources namely the website of Ministry of Public Health (MoPH) [2]. In Afghanistan there is no Ministry of Research. The website for the Afghan National Public Health Institute was not accessible.

[1] World Health Organisation (WHO). 2017. "Joint External Evaluation of IHR Core Capacities of the Islamic Republic of Afghanistan". 4-7 December 2016 [http://apps.who.int/iris/bitstream/handle/10665/258674/WHO-WHE-CPI-REP-2017.43-eng.pdf;jsessionid=3FD80CDEFB32325D60CD6ED4B91429D3?sequence=1] Accessed Jan 7, 2021
[2] Ministry of Public Health, Islamic Republic of Afghanistan, [https://moph.gov.af/en] Accessed 30 Jan, 2021

## 2.1.1b

Is there a national plan, strategy or similar document for conducting testing during a public health emergency, which includes considerations for testing for novel pathogens, scaling capacity, and defining goals for testing?

Yes, there is evidence of a plan, and it includes considerations for testing for novel pathogens, scaling capacity, and defining goals for testing = 2, Yes, there is evidence of a plan, but there is insufficient evidence that it includes considerations for testing for novel pathogens, scaling capacity, and defining goals for testing = 1, No evidence of a plan = 0

#### Current Year Score: 0

There is no publicly available information to indicate that Afghanistan has a national plan, strategy or similar document for conducting testing during a public health emergency, which includes considerations for testing for novel pathogens, scaling capacity, and defining goals for testing. No evidence could be found on the Ministry of Health's website [1], the Joint External Evaluation (JEE) report for Afghanistan completed in Dec. 2016, as well as the National Action Plan on Antimicrobial Resistance (NAP-AMR), 2017-2021 [2,3]. No evidence could be found in the National Health Strategy 2016-2020 document or The World's Bank's Project Information Document [4,5] nor in the National Health Policy 2015-2020 [6]. The Afghanistan National Disaster Management Authority (ANDMA) is the main body to respond to emergencies including public health emergencies, but there is no evidence that it has a plan, strategy or similar document for conducting testing for novel pathogens. [7] No evidence could be found in academic journals. [8] The website for the Afghan National Public Health Institute was not accessible.

[1] Ministry of Public Health [https://moph.gov.af/en] Accessed Jan 8, 2021.

[2] World Health Organization (WHO). 2017. Joint External Evaluation of IHR Core Capacities of the Islamic Republic of Afghanistan. Mission report: 4-7 December 2016." [https://apps.who.int/iris/bitstream/handle/10665/258674/WHO-WHE-CPI-REP-2017.43-eng.pdf?sequence=1]. Accessed Jan 8, 2021

[3] National Action Plan on Antimicrobial Resistance (NAP-AMR), 2017-2021

[http://www.fao.org/faolex/results/details/en/c/LEX-

FAOC182163/#:~:text=Afghanistan%20National%20Action%20Plan%20on%20Antimicrobial%20Resistance%202017%2D2021 .&text=The%20overarching%20goal%20of%20the,tackle%20this%20public%20health%20threat] Accessed 30 Jan, 2021 [4] National Health Strategy 2016-2020; [https://afghanhealth1stopshop.org/download/national-health-strategy-2016-2020/?wpdmdl=3116&refresh=5ff365770ad1c1609786743] Accessed Jan 8, 2021



[5] The World Bank, Project Information Document (PID) Updated: 01-Apr-2020

[http://documents1.worldbank.org/curated/en/596891585836351030/pdf/Project-Information-Document-Afghanistan-

COVID-19-Emergency-Response-and-Health-Systems-Preparedness-Project-P173775.pdf] Accessed 30 Jan, 2021

[6] Ministry of Public Health, National Health Policy (2015-2020) [http://maternalnutritionsouthasia.com/wp-

content/uploads/National-health-policy-2015-2020.pdf] Accessed 30 Jan, 2021

[7] The Afghanistan National Disaster Management Authority (ANDMA) [https://andma.gov.af/en] Accessed 30 Jan, 2021
[8] PubMed. [https://www.ncbi.nlm.nih.gov/]. Accessed 4 Jan, 2021

# 2.1.2 Laboratory quality systems

## 2.1.2a

Is there a national laboratory that serves as a reference facility which is accredited (e.g., International Organization for Standardization [ISO] 15189:2003, U.S. Clinical Laboratory Improvement Amendments [CLIA])? Yes = 1, No = 0

#### Current Year Score: 0

No public evidence was found that the national laboratory that serves as a reference facility is accredited (eg ISO 15189:2003, CLIA). No evidence could be found on the websites of the Ministry of Public Health (MoPH) and Ministry of Agriculture, Irrigation and Livestock (MAIL) [1,2]. According to the Joint External Evaluation report (JEE), completed in Dec. 2016, there is no national accreditation body in Afghanistan [3]. WHO also stresses that Central Public Health Lab (CPHL), which acts as the national reference library for humans, is required to obtain ISO certification [4]. In the animal sector, The World Organization for Animal Health, PVS report, published in Apr. 2017, notes accreditation based upon International Standards Organization standards (such as ISO 17025) or other internationally recognized standards have not yet been achieved for the Central Veterinary Diagnostic and Research Laboratory [5]. No evidence was found in academic journal articles. [6] The website for the Afghan National Public Health Institute was not accessible.

[1] Ministry of Public Health, Islamic Republic of Afghanistan, [https://moph.gov.af/en] Accessed 30 Jan, 2021

[2] Ministry of Agriculture, Irrigation and Livestock, Islamic Republic of Afghanistan, [https://www.mail.gov.af/en] Accessed 30 Jan, 2021

[3] World Health Organization (WHO). 2017. Joint External Evaluation of IHR Core Capacities of the Islamic Republic of Afghanistan. Mission report: 4-7 December 2016." [https://apps.who.int/iris/bitstream/handle/10665/258674/WHO-WHE-CPI-REP-2017.43-eng.pdf?sequence=1]. Accessed Jan 8, 2021

[4] The World Bank, Project Information Document (PID) Updated: 01-Apr-2020

[http://documents1.worldbank.org/curated/en/596891585836351030/pdf/Project-Information-Document-Afghanistan-

COVID-19-Emergency-Response-and-Health-Systems-Preparedness-Project-P173775.pdf] Accessed 30 Jan, 2021

[5] The World Organization for Animal Health,

[https://www.oie.int/fileadmin/Home/eng/Support\_to\_OIE\_Members/pdf/201711078\_OIE\_PVS\_Follow-

up\_Report\_final\_Afghanistan.pdf ] Accessed 30 Jan, 2021

[6] PubMed. [https://www.ncbi.nlm.nih.gov/]. Accessed 4 Jan, 2021

## 2.1.2b

Is there a national laboratory that serves as a reference facility which is subject to external quality assurance review? Yes = 1, No = 0

Current Year Score: 0

No evidence could be found to suggest that the national laboratory serves as a reference facility is subject to external quality assurance review. No evidence was found on the websites of the Ministry of Public Health (MoPh) and Ministry of Agriculture, Irrigation and Livestock (MAIL) [1,2]. On the Central Public Health Lab (CPHL) - that acts as the reference library in the human health sector- the JEE report (Joint External Evaluation), completed in Dec. 2016 notes that, an in-depth assessment of the Afghan laboratory system was conducted in 2014-2015 with support from international partners, using the WHO Laboratory Assessment Tool. No evidence however was found in the report that CPHL is subject to the external quality assurance.[3] No evidence was also found in the report by OIE (World Organization for Animal Health) that the Central Veterinary Diagnostic and Research Laboratory (CVD&RL) is subject to external quality assurance. The report however notes that the CVD&RL is rapidly moving towards international accreditation establishment of an internal quality assurance [4]. The website for the Afghan National Public Health Institute was not accessible.

Ministry of Public Health, Islamic Republic of Afghanistan, [https://moph.gov.af/en] Accessed 30 Jan, 2021
 Ministry of Agriculture, Irrigation and Livestock, Islamic Republic of Afghanistan, [https://www.mail.gov.af/en] Accessed 30 Jan, 2021

[3] World Health Organization (WHO). 2017. Joint External Evaluation of IHR Core Capacities of the Islamic Republic of Afghanistan. Mission report: 4-7 December 2016." [https://apps.who.int/iris/bitstream/handle/10665/258674/WHO-WHE-CPI-REP-2017.43-eng.pdf?sequence=1] Accessed 30 Jan, 2021. The World Organization for Animal Health, [https://www.oie.int/fileadmin/Home/eng/Support\_to\_OIE\_Members/pdf/201711078\_OIE\_PVS\_Follow-up\_Report\_final\_Afghanistan.pdf] Accessed 30 Jan, 2021

# **2.2 LABORATORY SUPPLY CHAINS**

# 2.2.1 Specimen referral and transport system

## **2.2.1**a

Is there a nationwide specimen transport system? Yes = 1 , No = 0

Current Year Score: 0

No public evidence could be found that in Afghanistan there is a nationwide specimen transport system in place, which covers the entire country. It is stated in the Joint External Evaluation report (JEE), completed in Dec. 2016, that a system is in place to transport specimen to national laboratories from less than 50% of intermediate levels/districts for advanced diagnosis. There is no evidence in the report however, that this system covers the entire country. The report notes as a priority action also that, the system requires strengthening as it does not meet international standards for cold chain management and it does not cover dangerous pathogens. The transportation is carried out by a private system [1]. No further evidence/explanation was available on the websites of the Ministry of Public Health (MoPH) and Ministry of Agriculture, Irrigation and Livestock (MAIL) [2,3]. The website for the Afghan National Public Health Institute was not accessible.

[1] World Health Organization (WHO). 2017. Joint External Evaluation of IHR Core Capacities of the Islamic Republic of Afghanistan. Mission report: 4-7 December 2016." [https://apps.who.int/iris/bitstream/handle/10665/258674/WHO-WHE-CPI-REP-2017.43-eng.pdf?sequence=1] Accessed 30 Jan, 2021.

[2] Ministry of Public Health, Islamic Republic of Afghanistan, [https://moph.gov.af/en] Accessed 30 Jan, 2021
[3] Ministry of Agriculture, Irrigation and Livestock, Islamic Republic of Afghanistan, [https://www.mail.gov.af/en] Accessed 30 Jan, 2021
30 Jan, 2021



# 2.2.2 Laboratory cooperation and coordination

## 2.2.2a

Is there a plan in place to rapidly authorize or license laboratories to supplement the capacity of the national public health laboratory system to scale-up testing during an outbreak?

Yes = 2 , Yes, but there is evidence of gaps in implementation = 1 , No = 0

Current Year Score: 0

There is no publicly available evidence of a plan in place to rapidly authorize or license laboratories to supplement the capacity of the national public health laboratory system to scale-up testing during an outbreak. Although there is a National Policy for Medical Laboratories in the Health System in Afghanistan, but it doesn't mention anything about a plan to authorize labs to scale-up testing during an outbreak. No evidence was found on the Ministry of Public Health's website, Ministry of Agriculture, Irrigation and Livestock (MAIL), the WHO Joint External Evaluation of Afghanistan, completed in December 2016, or the National Health Policy 2015-2020. [1,2,3,4,5] No evidence could also be found on under Afghan National Public Health Institute page, part of MoPH's website including the Central Public Health Lab [6,7] No evidence was found on PubMed for academic journals [8]

[1] Ministry of Public Health, Policy Statement, National Policy for Medical Laboratories in the Health System of Afghanistan,
 2006 http://lyon-kaboul.univ-lyon1.fr/securise/MAE\_9/National%20lab%20policy%20Final%20version%20April%202006.pdf
 Accessed Jan 9, 2021

[2] Ministry of Public Health, Afghanistan.[https://moph.gov.af/dr/search?keys=zoonotic+disease+spillover&created=] Accessed Jan 9, 2021

[3] Ministry of Agriculture, Irrigation and Livestock, https://mail.gov.af/en Accessed Jan 9, 2021

[4] World Health Organisation (WHO). 2017. Joint External Evaluation of IHR Core Capacities of the Islamic Republic of Afghanistan. Mission report: 4-7 December 2016." "https://apps.who.int/iris/bitstream/handle/10665/258674/WHO-WHE-CPI-REP-2017.43-eng.pdf?sequence=1">https://apps.who.int/iris/bitstream/handle/10665/258674/WHO-WHE-CPI-REP-2017.43-eng.pdf?sequence=1">https://apps.who.int/iris/bitstream/handle/10665/258674/WHO-WHE-CPI-REP-2017.43-eng.pdf?sequence=1">https://apps.who.int/iris/bitstream/handle/10665/258674/WHO-WHE-CPI-REP-2017.43-eng.pdf?sequence=1">https://apps.who.int/iris/bitstream/handle/10665/258674/WHO-WHE-CPI-REP-2017.43-eng.pdf?sequence=1">https://apps.who.int/iris/bitstream/handle/10665/258674/WHO-WHE-CPI-REP-2017.43-eng.pdf?sequence=1 Accessed Jan 9, 2021

[5] Islamic Republic of Afghanistan Ministry of Public Health NATIONAL HEALTH POLICY 2015-2020

http://www.acbar.org/upload/1493096331346.pdf Accessed Jan 9, 2021

[6] Afghan National Public Health Institute, http://ghdx.healthdata.org/organizations/afghanistan-national-public-health-institute-anphi Accessed Jan 9, 2021

 [7] Afghanistan National Public Health Laboratories, http://www.emro.who.int/emhj-vol-20-2014/volume-20-issue-2/capacity-building-of-public-health-laboratories-in-afghanistan-challenges-and-successes-20072011.html Accessed Jan 9, 2021

[8] PubMed

https://www.ncbi.nlm.nih.gov/pubmed/?term=%22Afghanistan%22+AND+%22confidentiality%22+AND+%22animal+health+i nformation%22 Accessed Jan 9, 2021

# **2.3 REAL-TIME SURVEILLANCE AND REPORTING**

# 2.3.1 Indicator and event-based surveillance and reporting systems

## **2.3.1**a

Is there evidence that the country is conducting ongoing event-based surveillance and analysis for infectious disease?



Yes, there is evidence of ongoing event-based surveillance and evidence that the data is being analyzed on a daily basis = 2, Yes, there is evidence of ongoing event-based surveillance, but no evidence that the data are being analyzed on a daily basis = 1, No = 0

#### Current Year Score: 1

There is evidence that the country is conducting ongoing event-based surveillance and analysis for infectious diseases, but there is no evidence that data are being analyzed on a daily basis. The Disease Early Warning System (DEWS) is Afghanistan's primary disease surveillance system established in 2006. DEWS which consists of 386 sentinel sites, located across Afghanistan, collects weekly data on 15 infectious diseases from 10 different sites [1]. Furthermore, through the Disease Surveillance and Prevention project, a USAID funded project to assist WHO, doctors collect data on a weekly basis on 15 targeted communicable diseases in all 34 provinces. The analysis of data provides the necessary information upon which quick action can be taken to mitigate disease outbreak [2]. Afghanistan National Health Policy 2015-2020 states that it is the policy of the government to prevent and control the outbreak of communicable diseases, but it doesn't state that they have an ongoing surveillance policy in effect to detect and report diseases [3]. The Joint External Evaluation (JEE) report for Afghanistan, completed in Dec. 2016 also states that weekly reports are forwarded from health facilities to the provincial DEWS officers for analysis and verification [4].

WHO Eastern Mediterranean Region (EMR) Influenza Division International Activities | Fiscal Year 2011 Annual Report
 [https://www.cdc.gov/flu/pdf/international/program/2011-12/afghanistan.pdf] Accessed Jan11, 2021
 [2] Disease Surveillance and Prevention: July 2014 - June 2022, USAID, [https://www.usaid.gov/news-information/fact-sheets/disease-surveillance-and-prevention-dews] Accessed Jan 11, 2021
 [3] Afghanistan National Health Policy 2015-2020 [http://www.acbar.org/upload/1493096331346.pdf] Accessed Jan11, 2021
 [4] The Joint External Evaluation (JEE) report for Afghanistan, completed in Dec. 2016
 [https://apps.who.int/iris/bitstream/handle/10665/258674/WHO-WHE-CPI-REP-2017.43-eng.pdf;jsessionid=3FC860B9AD003EFA5EF06E7EC2A31ED4?sequence=1] Accessed Jan11, 2021

## 2.3.1b

Is there publicly available evidence that the country reported a potential public health emergency of international concern (PHEIC) to the WHO within the last two years?

Yes = 1 , No = 0

Current Year Score: 0

There is insufficient evidence that Afghanistan has reported a potential public health emergency of international concern in the past two years. The WHO Emergency Humanitarian Programme includes overviews of disease outbreaks, but does not note if the government has reported disease outbreaks to the WHO. There is no evidence that the government of Afghanistan reported COVID-19 as a public health emergency of international concern to WHO. [1,2]. There is no evidence of either report via the WHO's Disease Outbreak News page, and the most recent report is from 2005 [3]. No further evidence of outbreaks was found on the website of the Ministry of Public Health (MoPH) [4].

[1] World Health Organisation. March 2017. "Emergency Humanitarian Action".

[http://www.who.int/hac/crises/afg/sitreps/afghanistan-monthly-update-march2017.pdf?ua=1] Accessed 11 Jan, 2021.[2] World Health Organisation. January 2017. "Emergency Humanitarian Action".

[http://www.who.int/hac/crises/afg/sitreps/afghanistan-monthly-update-january2017.pdf?ua=1]. Accessed 11 Jan, 2021
[3] World Health Organisation. Disease Outbreak News, [https://www.who.int/csr/don/en/]. Accessed 30 Jan, 2021
[4] Ministry of Public Health Islamic Republic of Afghanistan, "News Releases ". [http://moph.gov.af/en/news] Accessed 11



Jan, 2021

# 2.3.2 Interoperable, interconnected, electronic real-time reporting systems

## 2.3.2a

Does the government operate an electronic reporting surveillance system at both the national and the sub-national level? Yes = 1, No = 0

Current Year Score: 1

Evidence was found that Afghan government operates an electronic reporting surveillance system at both the national and sub-national level. According to the Joint External Evaluation report, completed in Dec. 2016, an "interoperable, interconnected, electronic reporting system is in place in the country for either public health or veterinary surveillance systems". The report states "Indicator- and event-based surveillance is available, including at the subnational level. More than 95 districts are covered by the surveillance system....[and]...surveillance sites also extend to private health facilities and the community" and that "electronic reporting is available at most levels" [1]

[1] World Health Organisation (WHO). 2017. "Joint External Evaluation of IHR Core Capacities of the Islamic Republic of Afghanistan". 4-7 December 2016 [http://apps.who.int/iris/bitstream/handle/10665/258674/WHO-WHE-CPI-REP-2017.43-eng.pdf;jsessionid=3FD80CDEFB32325D60CD6ED4B91429D3?sequence=1] Accessed Jan 11, 2021

## 2.3.2b

# Does the electronic reporting surveillance system collect ongoing or real-time laboratory data? Yes = 1 , No = 0

## Current Year Score: 0

Although there is evidence that the electronic real-time reporting systems collect laboratory data, there is no evidence this can be done in real-time. Although the Joint External Evaluation (JEE) report, conducted in Dec. 2016, notes that "laboratory surveillance data are shared with stakeholders on a regular basis and uploaded in the (MoPH) and surveillance websites," it also states that "sharing of information between sectors is still a challenge, and the system is not yet able to share data in real-time" [1]. No evidence was found on the websites of the Ministry of Public Health (MoPH), Irrigation and Livestock (MAIL), Afghanistan Disaster Management Authority, Ministry of Agriculture and academic papers. [2,3,4,5] No evidence was also found in the World Organization for Animal Health (OIE) PVS, published in Apr. 2017. [6] The website for the Afghan National Public Health Institute was not accessible.

[1] World Health Organization (WHO). 2017. Joint External Evaluation of IHR Core Capacities of the Islamic Republic of Afghanistan. Mission report: 4-7 December 2016." [https://apps.who.int/iris/bitstream/handle/10665/258674/WHO-WHE-CPI-REP-2017.43-eng.pdf?sequence=1] Accessed 30 Jan, 2021.

[2] Ministry of Public Health, Islamic Republic of Afghanistan, [https://moph.gov.af/en] Accessed 30 Jan, 2021

[3] Ministry of Agriculture, Irrigation and Livestock, Islamic Republic of Afghanistan, [https://www.mail.gov.af/en] Accessed 30 Jan, 2021

[4] The Afghanistan National Disaster Management Authority (ANDMA) [https://dmac.gov.af/andma/] Accessed 30 Jan, 2021

[5] PubMed. [https://www.ncbi.nlm.nih.gov/]. Accessed 4 Jan, 2021

[6] The World Organization for Animal Health,

[https://www.oie.int/fileadmin/Home/eng/Support\_to\_OIE\_Members/pdf/201711078\_OIE\_PVS\_Follow-



up\_Report\_final\_Afghanistan.pdf] Accessed 30 Jan, 2021

# **2.4 SURVEILLANCE DATA ACCESSIBILITY AND TRANSPARENCY**

# 2.4.1 Coverage and use of electronic health records

## 2.4.1a

#### Are electronic health records commonly in use?

Electronic health records are commonly in use = 2, Electronic health records are not commonly in use, but there is evidence they are used = 1, No evidence electronic health records are in use = 0

#### Current Year Score: 1

There is evidence was found that electronic health records are in use. According to Ministry of Public Health (MoPH) Integrated Package of Essential Health Services 2019, electronic health records are only used in some of the private hospitals [1]. No evidence could be found that there is a single national health electronic records system in place in Afghanistan. No evidence could be found on the website of the Ministry of Public Health (MoPH) [2]. The website for the Afghan National Public Health Institute was not accessible.

Ministry of Public Health of the Islamic Republic of Afghanistan (MoPH) Integrated Package of Essential Health Services
 [1] Ministry of Public Health, Islamic Republic of Afghanistan, [https://woph.gov.af/en] Accessed 14 Feb, 2021
 [2] Ministry of Public Health, Islamic Republic of Afghanistan, [https://moph.gov.af/en] Accessed 30 Jan, 2021

## 2.4.1b

Does the national public health system have access to electronic health records of individuals in their country? Yes = 1 , No = 0

Current Year Score: 0

No evidence could be found that the national public health system have access to electronic health records of individuals in their country. According to Ministry of Public Health (MoPH) there is not a single national health electronic records system in place in Afghanistan and electronic health records are only used in some of the private hospitals [1]. According to the Integrated Package of Essential Health Services 2019 published by the Ministry of Health, only some of the private hospitals have limited access electronic health records of individuals in Afghanistan [2].

Ministry of Public Health, Islamic Republic of Afghanistan, [https://moph.gov.af/en] Accessed 30 Jan, 2021
 Ministry of Public Health of the Islamic Republic of Afghanistan (MoPH) Integrated Package of Essential Health Services
 [2019 [https://www.lshtm.ac.uk/sites/default/files/2019-09/IPHES\_2019.pdf] Accessed 14 Feb, 2021

## 2.4.1c

Are there data standards to ensure data is comparable (e.g., ISO standards)? Yes = 1 , No = 0 Current Year Score: 0

No evidence could be found that there are data standards to ensure data is comparable (e.g. ISO standards) in Afghanistan. No evidence could be found on the website of the Ministry of Public Health (MoPH) and associated institute namely the

Central Public Health Lab (CPHL) [1,2]. No evidence was found in academic journals [3]. The website for the Afghan National Public Health Institute was not accessible.

[1] Ministry of Public Health, Islamic Republic of Afghanistan, [https://moph.gov.af/en] Accessed 30 Jan, 2021
[2] Afghanistan Central Public Health Lab (CPHL), http://www.emro.who.int/laboratories/information-resources/index.html
Accessed 30 Jan, 2021

[4] PubMed. [https://www.ncbi.nlm.nih.gov/]. Accessed 4 Jan, 2021

# **2.4.2** Data integration between human, animal, and environmental health sectors

## 2.4.2a

Is there evidence of established mechanisms at the relevant ministries responsible for animal, human, and wildlife surveillance to share data (e.g., through mosquito surveillance, brucellosis surveillance)? Yes = 1, No = 0

Current Year Score: 1

Evidence was found that in Afghanistan, there is an established mechanism at the relevant ministries responsible for animal, human and wildlife surveillance to share data. According to both the JEE (Joint External Evaluation) report, completed in Dec, 2016, as well as the World Organisation for Animal Health's (OIE) PVS Follow-up Mission Report, published in Apr. 2017, a joint committee between the Ministry of Public Health (MoPH) and Ministry of Agriculture, Irrigation and Livestock (MAILE) has set-up since 2010. The Committee serves as the mechanism through which surveillance data and response to outbreaks are shared among authorities in all sectors including human and animal health, as well as the wildlife sector. The Committee is functions under the National Environment Protection Agency of Afghanistan (NEPA). [1,2]

[1] World Health Organisation (WHO).2017. "Joint External Evaluation of IHR Core Capacities of the Islamic Republic of Afghanistan". 4-7 December 2016 [http://apps.who.int/iris/bitstream/handle/10665/258674/WHO-WHE-CPI-REP-2017.43-eng.pdf;jsessionid=3FD80CDEFB32325D60CD6ED4B91429D3?sequence=1] Accessed jan 11, 2021.
[2] World Organisation for Animal Health (OIE). April 2017. "PVS Evaluation Follow up Mission Report Islamic Republic of Afghanistan". [http://www.oie.int/fileadmin/Home/eng/Support\_to\_OIE\_Members/pdf/201711078\_OIE\_PVS\_Follow-up\_Report\_final\_Afghanistan.pdf] Accessed jan 11, 2021.

# 2.4.3 Transparency of surveillance data

## 2.4.3a

Does the country make de-identified health surveillance data on infectious diseases publicly available via reports (or other format) on government websites (such as the Ministry of Health, Ministry of Agriculture, or similar)?

Yes = 1 , No = 0

Current Year Score: 0

No public evidence could be found that Afghanistan makes de-identified health surveillance data on disease outbreaks publicly available via reports on government websites. No evidence could be found on the websites of the Ministry of Public Health (MoPH) and Ministry of Agriculture, Irrigation and Livestock (MAIL). [1,2] No evidence could also be found on WHO's Regional Office for Eastern Mediterranean, as well as JEE report (Joint External Evaluation), completed in Dec. 2016 and OIE PVS (World Organisation for Animal Health PVS-Follow-up Mission Report) published in April 2017. [3,4,5]



[1] Ministry of Public Health Islamic Republic of Afghanistan, "News Releases ". [http://moph.gov.af/en/news] Accessed Jan 11, 2021

[2] Ministry of Agriculture, Irrigation and Livestock Islamic Republic of Afghanistan, "Agricultural Knowledge Bank" [http://mail.gov.af/en]. Accessed Jan 11, 2021

[3] World Health Organisation Regional Office for Eastern Mediterranean, Islamic Republic of Afghanistan, "News and Press Releases" [http://www.emro.who.int/afg/afghanistan-news/]. Accessed Jan 11, 2021

[4] World Health Organisation (WHO). 2017. "Joint External Evaluation of IHR Core Capacities of the Islamic Republic of Afghanistan". 4-7 December 2016 [http://apps.who.int/iris/bitstream/handle/10665/258674/WHO-WHE-CPI-REP-2017.43-eng.pdf;jsessionid=3FD80CDEFB32325D60CD6ED4B91429D3?sequence=1] Accessed Jan 11, 2021.

[5] World Organisation for Animal Health (OIE). April 2017. "PVS Evaluation Follow up Mission Report Islamic Republic of Afghanistan". [http://www.oie.int/fileadmin/Home/eng/Support\_to\_OIE\_Members/pdf/201711078\_OIE\_PVS\_Follow-up\_Report\_final\_Afghanistan.pdf] Accessed Jan 11, 2021.

## 2.4.3b

Does the country make de-identified COVID-19 surveillance data (including details such as daily case count, mortality rate, etc) available via daily reports (or other formats) on government websites (such as the Ministry of Health, or similar)? Yes = 1, No = 0

#### Current Year Score: 0

There is no publicly available evidence that shows Afghanistan makes de-identified COVID-19 surveillance data (including detail such as daily case count, mortality rate, etc.) available via daily reports (or other formats) on government websites including Ministry of Public Health's website [1]. There is, however, sporadic announcements of daily cases, mortality rate and number of recovered individuals by third party websites [2]. No evidence was found on the National Public Health Institute [3]. There is a newly established division in Ministry of Public Health called "Fighting Against COVID-19 Directorate,, but this agency doesn't provide reports of daily cases, mortality rate and etc. [4]. The website for the Afghan National Public Health Institute was not accessible.

[1] Fighting Against COVID-19 Directorate, Ministry of Ministry of Public Health, Islamic Republic of Afghanistan, [https://moph.gov.af/en] Accessed 30 Jan, 2021

[2] Tolo News, TV network, 16 March, 2020, 22 cases of COVID-19 in Afghanistan: Health Ministry;

[https://tolonews.com/afghanistan/21-cases-covid-19-afghanistan-health-ministry] Accessed 14 Feb, 2021

[3] National Public Health Institute, Government of Afghanistan; [http://ghdx.healthdata.org/organizations/afghanistannational-public-health-institute-anphi] Accessed 14 Feb, 2021

[4] Government of Islamic Republic of Afghanistan, Ministry of Public Health, Fighting Against COVID-19 Directorate [https://moph.gov.af/en/fighting-against-covid-19-directorate] Accessed 14 Feb, 2021

# 2.4.4 Ethical considerations during surveillance

## 2.4.4a

Is there legislation and/or regulations that safeguard the confidentiality of identifiable health information for individuals, such as that generated through health surveillance activities?

Yes = 1 , No = 0

Current Year Score: 0

No evidence was found that laws, regulations or guidelines safeguard the confidentiality of identifiable health information for individuals, such as that generated through health surveillance activities. Ministry of Public Health's (MoPH) Comprehensive Health Information System Strategic Plan, published in 2009, acknowledges that there is little relevant legislation (such as Statistics Law 1385) in Afghanistan, and that, it does not provide a framework for the Health Information System as it does not adequately cover aspects of vital registration, notifiable diseases, private sector data, confidentiality and fundamental principles of official statistics [1]. No evidence could be found on the website of the MoPH [2]. No evidence could either be found on alternative sources such as Integrity Watch Afghanistan as well as relevant academic papers [3,4].

[1] Ministry of Public Health Islamic Republic of Afghanistan. 2009. "Afghanistan Comprehensive Health Information System Strategic Plan: 2009-2013". [https://silo.tips/download/afghanistan-comprehensive-health-information-system-strategic-plan] Accessed 30 Jan, 2021

[2] Ministry of Public Health Islamic Republic of Afghanistan, "News Releases ". [http://moph.gov.af/en/news] Accessed 11 Jan, 2021

[3] Integrity Watch Afghanistan. 2015. "Access to Information in Afghanistan". [https://iwaweb.org/wp-content/uploads/2016/05/ATI-report-English-for-screen.pdf]. Accessed 30 Jan, 2021
[4] PubMed. [https://www.ncbi.nlm.nih.gov/]. Accessed 4 Jan, 2021

## 2.4.4b

Is there legislation and/or regulations safeguarding the confidentiality of identifiable health information for individuals, such as that generated through health surveillance activities, include mention of protections from cyber attacks (e.g., ransomware)?

Yes = 1 , No = 0

#### Current Year Score: 0

No evidence could be found that in Afghanistan, the laws, regulations, or guidelines safeguard the confidentiality of identifiable health information for individuals, such as that generated through health surveillance activities, include mention of protections from cyber-attacks (e.g., ransomware). No evidence was found that laws, regulations, or guidelines safeguard the confidentiality of identifiable health information for individuals, such as that generated through health surveillance, or guidelines safeguard the confidentiality of identifiable health information for individuals, such as that generated through health surveillance activities. No evidence could be found on the website of the Ministry of Public Health (MoPH) [1]. MoPH's Comprehensive Health Information System Strategic Plan, published in 2009, acknowledges that there is little relevant legislation (such as Statistics Law 1385) in Afghanistan, and that, it does not provide a framework for the Health Information System as it does not adequately cover aspects of vital registration, notifiable diseases, private sector data, confidentiality and fundamental principles of official statistics [2]. No evidence could also be found on alternative sources such as Integrity Watch Afghanistan, and relevant academic papers as well as the website of Afghanistan's Ministry of Communication and Information Technology including legislations, laws and policies on cybersecurity [3,4]. The website for the Afghan National Public Health Institute was not accessible.

 [1] Ministry of Ministry of Public Health, Islamic Republic of Afghanistan, [https://moph.gov.af/en] Accessed 30 Jan, 2021
 [2] Ministry of Public Health Islamic Republic of Afghanistan. 2009. "Afghanistan Comprehensive Health Information System Strategic Plan: 2009-2013". [https://silo.tips/download/afghanistan-comprehensive-health-information-system-strategicplan] Accessed 30 Jan, 2021

[3] ] Integrity Watch Afghanistan. 2015. "Access to Information in Afghanistan". [https://iwaweb.org/wp-content/uploads/2016/05/ATI-report-English-for-screen.pdf]. Accessed 30 Jan, 2021

[4] Ministry of Communication and Information Technology [https://mcit.gov.af/] Accessed 30 Jan, 2021



# 2.4.5 International data sharing

## 2.4.5a

# Has the government made a commitment via public statements, legislation and/or a cooperative agreement to share surveillance data during a public health emergency with other countries in the region?

Yes, commitments have been made to share data for more than one disease = 2, Yes, commitments have been made to share data only for one disease = 1, No = 0

#### Current Year Score: 0

No evidence was found that the government of Afghanistan has made a commitment via public statements, legislation and/or a cooperative agreement to share surveillance data on any disease during a public health emergency with other countries in the region for one or more diseases. The Joint External Evaluation report (JEE) for Afghanistan, completed in Dec. 2016 as well as World Organisation for Animal Health (OIE) report, published in April. 2017, point to the existence of agreements and MoUs between Afghanistan and the two neighbouring countries (Iran and Pakistan) to cover health support, plant protection and quarantine (with Iran), and for cross-border surveillance and vaccination against polio (with Pakistan). However there is no mention whether these agreements include any commitment by the countries to share surveillance data. The JEE report does, however, mention sharing surveillance data as a challenge among stakeholders within the country due to lack of capacity and infrastructure [1, 2]. No evidence was found on the websites of the Ministry of Public Health (MoPH) and WHO's Regional Office for Eastern Mediterranean [3,4]

[1] World Health Organisation (WHO). 2017. "Joint External Evaluation of IHR Core Capacities of the Islamic Republic of Afghanistan". 4-7 December 2016 [http://apps.who.int/iris/bitstream/handle/10665/258674/WHO-WHE-CPI-REP-2017.43-eng.pdf;jsessionid=3FD80CDEFB32325D60CD6ED4B91429D3?sequence=1] Accessed Jan 11, 2021.

[2] World Organisation for Animal Health (OIE). April 2017. "PVS Evaluation Follow up Mission Report Islamic Republic of Afghanistan". [http://www.oie.int/fileadmin/Home/eng/Support\_to\_OIE\_Members/pdf/201711078\_OIE\_PVS\_Follow-up\_Report\_final\_Afghanistan.pdf] Accessed Jan 11, 2021.

[3] Ministry of Public Health Islamic Republic of Afghanistan, "News Releases ". [http://moph.gov.af/en/news] Accessed Jan 11, 2021

[4] World Health Organisation Regional Office for Eastern Mediterranean, Islamic Republic of Afghanistan, "News and Press Releases" [http://www.emro.who.int/afg/afghanistan-news/]. Accessed Jan 11, 2021

# **2.5 CASE-BASED INVESTIGATION**

# 2.5.1 Case investigation and contact tracing

## 2.5.1a

Is there a national system in place to provide support at the sub-national level (e.g. training, metrics standardization and/or financial resources) to conduct contact tracing in the event of a public health emergency?

Yes, there is evidence that the national government supports sub-national systems to prepare for future public health emergencies = 2. Yes, there is evidence that the national government supports sub-national systems, but only in response to active public health emergencies = 1. No = 0

#### Current Year Score: 0

No evidence was found to show that there is a national system in place to provide support at the sub-national level (e.g. training, metrics standardization and/or financial resources) to conduct contact tracing in the event of an active or future public health emergency. No evidence was found on the website of the Ministry of Public Health (MoPH), Central Public

Health Lab as well as Afghanistan National Health Policy 2015-2020. [1,2,3] No evidence was found on Joint External Evaluation of IHR Core Capacities of the Islamic Republic of Afghanistan. Mission report: 4-7 December 2017 or any academic journal articles. [4,5] The website for the Afghan National Public Health Institute was not accessible.

Ministry of Ministry of Public Health, Islamic Republic of Afghanistan, [https://moph.gov.af/en] Accessed 30 Jan, 2021
 Afghanistan Central Public Health Laboratory, [http://www.emro.who.int/laboratories/information-resources/index.html]
 Accessed 30 Jan, 2021

[3] Afghanistan National Health Policy 2015-2020, [http://maternalnutritionsouthasia.com/wp-content/uploads/National-health-policy-2015-2020.pdf] Accessed 30 Jan, 2021

[4] World Health Organization (WHO). 2017. Joint External Evaluation of IHR Core Capacities of the Islamic Republic of Afghanistan. Mission report: 4-7 December 2016." [https://apps.who.int/iris/bitstream/handle/10665/258674/WHO-WHE-CPI-REP-2017.43-eng.pdf?sequence=1] Accessed 30 Jan, 2021

[5] PubMed. [https://www.ncbi.nlm.nih.gov/]. Accessed 4 Jan, 2021

## 2.5.1b

Does the country provide wraparound services to enable infected people and their contacts to self-isolate or quarantine as recommended, particularly economic support (paycheck, job security) and medical attention?

Yes, both economic support and medical attention are provided = 2, Yes, but only economic support or medical attention is provided = 1, No = 0

#### Current Year Score: 0

There is no publicly available information to confirm that the Afghan government provides wraparound services to enable infected people and their contacts to self-isolate or quarantine as recommended, particularly economic support (paycheck, job security) and medical attention. No evidence was found on the website of Ministry of Labor and Social Affairs or Ministry of Public Health (MoPH). [1,2] Afghanistan Reconstruction Trust Fund (ARTF) which is aided by funds from the World Bank and other donors supports needy families during difficult times including pandemics, by providing basic necessities like food but no paycheck or job security is provided. [3] No evidence was found on Afghanistan National Health Policy 2015-2020 or the Office of State Minister for Disaster Management. [4,5]

[1] Islamic Republic of Afghanistan, Ministry of Labor and Social Affairs, [https://molsa.gov.af/en] Accessed Jan 12, 2021

[2] Government of Islamic Republic of Afghanistan, Ministry of Public Health, [https://moph.gov.af/en] Accessed Jan 12, 2021

[3] Afghanistan Reconstruction Trust Fund [https://www.artf.af/] Accessed Jan 12, 2021

[4] Islamic Republic of Afghanistan, Ministry of Public Health, National Health Policy 2015-2020

[http://www.acbar.org/upload/1493096331346.pdf] Accessed Jan 12, 2021

[5] Office of State Minister for Disaster Management , Afghanistan National Disaster Management Authority [https://andma.gov.af/en] Accessed Jan 12, 2021

## **2.5.1c**

Does the country make de-identified data on contact tracing efforts for COVID-19 (including the percentage of new cases from identified contacts) available via daily reports (or other format) on government websites (such as the Ministry of Health, or similar)?

Yes = 1 , No = 0

Current Year Score: 0

There is no publicly available evidence that shows Afghanistan makes de-identified data on contact tracing efforts for COVID-19 (including the percentage of new cases from identified contacts) available via daily reports (or other format) on government websites (such as the Ministry of Health, or similar. [1]. No evidence was found on the website of the Ministry of Public Health (MoPH), Afghan National Public Health institute, Central Public Health Laboratory. [1,2,3]

 Government of Islamic Republic of Afghanistan, Ministry of Public Health, [https://moph.gov.af/en] Accessed Jan 12, 2021
 National Public Health Institute, Government of Afghanistan; [http://ghdx.healthdata.org/organizations/afghanistannational-public-health-institute-anphi] Accessed Jan 12, 2021

 [3] Afghanistan National Public Health Laboratories, [http://www.emro.who.int/emhj-vol-20-2014/volume-20-issue-2/capacity-building-of-public-health-laboratories-in-afghanistan-challenges-and-successes-20072011.html] Accessed Jan 12, 2021

# 2.5.2 Point of entry management

## 2.5.2a

Is there a joint plan or cooperative agreement between the public health system and border control authorities to identify suspected and potential cases in international travelers and trace and quarantine their contacts in the event of a public health emergency?

Yes, plan(s)/agreement(s) are in place to prepare for future public health emergencies = 2, Yes, but plan(s)/agreement(s) are in place only in response to active public health emergencies = 1, No = 0

#### Current Year Score: 0

There is no publicly available evidence that shows that there is a joint plan or cooperative agreement between the public health system and border control authorities to identify suspected and potential cases in international travelers and trace and quarantine their contacts in the event of an active or future public health emergency. No evidence was found on Ministry of Public Health (MoPH), Border Control Authority of Afghanistan within the Ministry of Interior Affairs of Afghanistan and Ministry of National Defense. [1,2,3] No evidence was found on the National Health Policy 2015-2020, Afghanistan National Disaster Management Authority as well as National Public Health Institute. [4,5,6] The WHO Joint External Evaluation (JEE) for Afghanistan, completed in December 2016, states that "Public health and security authorities (e.g. law enforcement, border control, customs) are linked during a suspected or confirmed biological event" but there is no evidence that it means that there is a joint plan or cooperative agreement between public health system and border control authorities to identify suspected and potential cases of dangerous pathogens in international travelers. [7] No evidence was found on academic journals. [8]

Government of Islamic Republic of Afghanistan, Ministry of Public Health, [https://moph.gov.af/en] Accessed Jan 13, 2021
 Border Control Authority, Ministry of Interior Affairs of Afghanistan [https://moi.gov.af/en] Accessed Jan 13, 2021

[3] Ministry of Defense, Government of Islamic Republic of Afghanistan [https://mod.gov.af/en] Accessed Jan 13, 2021

[4] Islamic Republic of Afghanistan, Ministry of Public Health, National Health Policy 2015-2020

[http://www.acbar.org/upload/1493096331346.pdf] Accessed Jan 13, 2021

[5] Office of State Minister for Disaster Management , Afghanistan National Disaster Management Authority

[https://andma.gov.af/en] Accessed Jan 13, 2021

[6] National Public Health Institute, Government of Afghanistan; [http://ghdx.healthdata.org/organizations/afghanistannational-public-health-institute-anphi] Accessed Jan 13, 2021

[7] World Health Organization (WHO). 2017. Joint External Evaluation of IHR Core Capacities of the Islamic Republic of Afghanistan. Mission report: 4-7 December 2016.[https://apps.who.int/iris/bitstream/handle/10665/258674/WHO-WHE-CPI-REP-2017.43-eng.pdf?sequence=1] Accessed Jan 13, 2021



[8] PubMed.

[https://www.ncbi.nlm.nih.gov/pubmed/?term=%5BAfghanistan%5D+AND+%5BAnimal\*%5D+AND+%5BAntibiotic\*+use%5D] Accessed Jan 13, 2021

# 2.6 EPIDEMIOLOGY WORKFORCE

# 2.6.1 Applied epidemiology training program, such as the field epidemiology training program, for public health professionals and veterinarians (e.g., Field Epidemiology Training Program [FETP] and Field Epidemiology Training Program for Veterinarians [FETPV])

#### 2.6.1a

Does the country meet one of the following criteria?

- Applied epidemiology training program (such as FETP) is available in country

- Resources are provided by the government to send citizens to another country to participate in applied epidemiology training programs (such as FETP)

Needs to meet at least one of the criteria to be scored a 1 on this measure. , Yes for both = 1 , Yes for one = 1 , No for both = 0

#### Current Year Score: 1

There is evidence that applied epidemiology training program (such as FETP) are available in Afghanistan and that resources are provided by the government to send citizens to another country to participate in applied epidemiology training program (such as FETP). The evidence, however, only confirms the availability of an in-country FETP training program and government-provided resources to send citizens abroad for training by the year 2016. According to the Joint External Evaluation report (JEE), completed in Dec. 2016, FETPs are in place in Afghanistan, both at central and provincial levels [1]. Afghanistan Field Epidemiology Training Program (AFETP) is a one year national program which is supported by the Centers for Disease Control and Prevention (CDC, Atlanta) and Global Health Development and the Eastern Mediterranean Public Health Network (GHD/EMPHNET) and was established in 2019. So far 30 health professionals including 3 veterinarians were trained by Pakistani FELTP team. AFETP is accommodated with the Afghanistan National Public Health Institute [2]. No further evidence/explanation could be found on the website of the MoPH of any recent such agreements [3].

[1] World Health Organisation (WHO). 2017. "Joint External Evaluation of IHR Core Capacities of the Islamic Republic of Afghanistan".4-7 December 2016 [http://apps.who.int/iris/bitstream/handle/10665/258674/WHO-WHE-CPI-REP-2017.43-eng.pdf;jsessionid=3FD80CDEFB32325D60CD6ED4B91429D3?sequence=1] Accessed Jan 13, 2021.

[2] Afghanistan Field Epidemiology Training Program (AFETP) [https://www.tephinet.org/training-programs/afghanistan-fieldepidemiology-training-program#:~:text=Program%20overview,at%20the%20beginning%20of%202019] Accessed 14 Feb, 2021

[3] Ministry of Ministry of Public Health, Islamic Republic of Afghanistan, [https://moph.gov.af/en] Accessed 30 Jan, 2021

#### 2.6.1b

Are the available field epidemiology training programs explicitly inclusive of animal health professionals or is there a specific animal health field epidemiology training program offered (such as FETPV)?

Yes = 1 , No = 0

Current Year Score: 1

There are field epidemiology training programs available in Afghanistan that include animal health professionals. There is public evidence that in 2016 Eastern Mediterranean Public Health Network (EMPHNET) held a five days workshop designed for professionals working in human and animal health laboratories from Kabul and other major provinces in Afghanistan covering critical aspects of biosafety, biosecurity, and biocontainment [1]. A report published by THEPHINET in (Oct-Dec. 2017) also mentions that by the end of 2017, 27 trainees from Afghanistan received FETPT training including animal health professionals and veterinaries [2]. The World Organisation for Animal Health (OIE) report on PVS follow-up mission report, in Apr. 2017, also refers to the presence of epidemiology training courses that are explicitly inclusive of animal health offered by Universities in Afghanistan. The report however does not clarify whether the courses are FETPT [3].

 [1] Eastern Mediterranean Public Health Network (EMPHNET). Oct. 2016. "EMPHNET Conducts Introductory Workshop Titled "Resources and Application of Laboratory Biosafety and Biosecurity in Afghanistan Health System".
 [http://emphnet.net/?news=resources-and-application-of-laboratory-biosafety-and-biosecurity-in-afghanistan-healthsystem]. Accessed Jan 13, 2021

[2] TEPHINET. 2017. "FETPT Updates". [https://www.tephinet.org/sites/tephinet/files/content/attachment/2018-08-10/FETP%20Updates\_Oct-Dec2017\_TEPHINET.pdf]. Accessed Jan 13, 2021

[3] World Organisation for Animal Health (OIE). April 2017. "PVS Evaluation Follow up Mission Report Islamic Republic of Afghanistan". [http://www.oie.int/fileadmin/Home/eng/Support\_to\_OIE\_Members/pdf/201711078\_OIE\_PVS\_Follow-up\_Report\_final\_Afghanistan.pdf] Accessed Jan 13, 2021.

# 2.6.2 Epidemiology workforce capacity

#### 2.6.2a

Is there public evidence that the country has at least 1 trained field epidemiologist per 200,000 people? Yes = 1 , No = 0

Current Year Score: 0

2020

Completed JEE assessments; Economist Impact analyst qualitative assessment based on official national sources, which vary by country

# Category 3: Rapid response to and mitigation of the spread of an epidemic

# **3.1 EMERGENCY PREPAREDNESS AND RESPONSE PLANNING**

# 3.1.1 National public health emergency preparedness and response plan

#### 3.1.1a

Does the country have an overarching national public health emergency response plan in place which addresses planning for multiple communicable diseases with epidemic or pandemic potential?

Evidence that there is a plan in place, and the plan is publicly available = 2, Evidence that the plan is in place, but the plan is not publicly available OR, Disease-specific plans are in place, but there is no evidence of an overarching plan = 1, No evidence that such a plan or plans are in place = 0

#### Current Year Score: 1

Afghanistan has an overarching national public health emergency response plan in place which addresses planning for multiple communicable diseases with pandemic potential but the plan is not publicly available. According to the Joint External Evaluation report, (JEE) published in Dec. 2016, the country has contingency emergency preparedness plans for Mass casualty incidents (MCI) management and key communicable diseases with Pandemic potential [1]. The report however, does not make clear which communicable diseases are planned for in the plans. Evidence was also found that Afghanistan has developed a National All Hazard Emergency Response Plan for Health (NERPH) [2] . The actual plan documents that the JEE report refers to, could not be found on the website of the Ministry of Public Health (MOPH) [3]. No evidence could also be found on the website of National Disaster Management Authority (NDMA) [4].

[1] World Health Organisation (WHO). 2017. "Joint External Evaluation of IHR Core Capacities of the Islamic Republic of Afghanistan".4-7 December 2016 [http://apps.who.int/iris/bitstream/handle/10665/258674/WHO-WHE-CPI-REP-2017.43eng.pdf;jsessionid=3FD80CDEFB32325D60CD6ED4B91429D3?sequence=1] Accessed 13 Jan, 2021
[2] Afghanistan Health Cluster Bulletin. August-September 2016. "Afghanistan Humanitarian Crisis"
[https://www.humanitarianresponse.info/sites/www.humanitarianresponse.info/files/documents/files/afghanistan\_health\_cl uster\_bulletin\_august\_september\_2016.pdf] Accessed 30 Jan, 2021
[3] Ministry of Ministry of Public Health, Islamic Republic of Afghanistan, [https://moph.gov.af/en] Accessed 30 Jan, 2021
[4] Afghanistan National Disaster Management Authority. [https://andma.gov.af/en]. Accessed 30 Jan, 2021

#### 3.1.1b

If an overarching plan is in place, has it been updated in the last 3 years? Yes = 1 , No /no plan in place= 0 Current Year Score: 0

There is no publicly available evidence that the national public health emergency response has been updated in the last 3 years. According to the Joint External Evaluation report, (JEE) conducted in Dec. 2016, the country has contingency emergency preparedness plans for Mass casualty incidents (MCI) management and key communicable diseases with Pandemic potential. The report states that the plan was originally developed in 2014 with support from the WHO and revised in 2016 [1]. Evidence was found that Afghanistan has developed a National All Hazard Emergency Response Plan for Health (NERPH) since 2016 [2]. The plan, however, is not publicly available via the websites of the Ministry of Public Health (MOPH) and National Disaster Management Authority (NDMA) [3,4].

 World Health Organisation (WHO). 2017. "Joint External Evaluation of IHR Core Capacities of the Islamic Republic of Afghanistan".4-7 December 2016 [http://apps.who.int/iris/bitstream/handle/10665/258674/WHO-WHE-CPI-REP-2017.43eng.pdf;jsessionid=3FD80CDEFB32325D60CD6ED4B91429D3?sequence=1] Accessed 13 Jan, 2021
 Afghanistan Health Cluster Bulletin. August-September 2016. "Afghanistan Humanitarian Crisis" [https://www.humanitarianresponse.info/sites/www.humanitarianresponse.info/files/documents/files/afghanistan\_health\_cl uster\_bulletin\_august\_september\_2016.pdf] Accessed Jan 13, 2021
 Ministry of Ministry of Public Health, Islamic Republic of Afghanistan, [https://moph.gov.af/en] Accessed 30 Jan, 2021

[4] Afghanistan National Disaster Management Authority. [https://andma.gov.af/en]. Accessed 30 Jan, 2021



#### 3.1.1c

If an overarching plan is in place, does it include considerations for pediatric and/or other vulnerable populations? Yes = 1, No /no plan in place= 0 Current Year Score: 0

No evidence was found to suggest that the plan includes considerations for pediatric or vulnerable populations. Afghanistan has contingency emergency preparedness plans for Mass casualty incidents (MCI) management and key communicable diseases with Pandemic potential according to the Joint External Evaluation report, (JEE) completed in Dec. 2016. [1] Moreover, Afghanistan has developed a National All Hazard Emergency Response Plan for Health (NERPH) as stated in Afghanistan Health Cluster Bulletin for the months of August-September 2016 [2]. The actual plan documents that the JEE and Afghanistan Health Cluster Bulletin refer to, however, could not be found on the websites of the Ministry of Public Health (MOPH) and National Disaster Management Authority (NDMA) and their contents are not clear. Linked to the above, no evidence/indication could be found on the websites of MOPH and NDMA that these plans include considerations for pediatric and other vulnerable populations [3,4].

 World Health Organisation (WHO). 2017. "Joint External Evaluation of IHR Core Capacities of the Islamic Republic of Afghanistan".4-7 December 2016 [http://apps.who.int/iris/bitstream/handle/10665/258674/WHO-WHE-CPI-REP-2017.43eng.pdf;jsessionid=3FD80CDEFB32325D60CD6ED4B91429D3?sequence=1] Accessed 13 Jan, 2021
 Afghanistan Health Cluster Bulletin. August-September 2016. "Afghanistan Humanitarian Crisis" [https://www.humanitarianresponse.info/sites/www.humanitarianresponse.info/files/documents/files/afghanistan\_health\_cl uster\_bulletin\_august\_september\_2016.pdf] Accessed 30 Jan, 2021
 Ministry of Ministry of Public Health, Islamic Republic of Afghanistan, [https://moph.gov.af/en] Accessed 30 Jan, 2021
 Afghanistan National Disaster Management Authority. [https://andma.gov.af/en]. Accessed 30 Jan, 2021

#### 3.1.1d

Does the country have a publicly available plan in place specifically for pandemic influenza preparedness that has been updated since 2009?

Yes = 1 , No = 0

Current Year Score: 0

2020

WHO Strategic Partnership for IHR and Health Security (SPH)

### 3.1.2 Private sector involvement in response planning

#### 3.1.2a

Does the country have a specific mechanism(s) for engaging with the private sector to assist with outbreak emergency preparedness and response?

Yes = 1 , No = 0

Current Year Score: 0

No evidence was found that Afghanistan has a specific mechanism(s) for engaging with the private sector to assist with outbreak emergency preparedness and response. Disease outbreaks and public health emergencies of international concern are reflected in the National Health Strategy (2016-2020) document developed by the Ministry of Public Health (MoPH) in

2016. Under the strategic result 6.4. MoPH plans to improve IDSR (The Integrated Disease Surveillance and Response) initiatives, establish systems with expanded public and private surveillance sites, and integrate all disease surveillance components effectively. The document however, does not outline the specific mechanisms through which MoPH plans to expand public and private partnerships in this regard [1]. No further explanation/evidence could be found on the websites of MoPH and the Office of State Minister for Disaster Management and Humanitarian Affairs [2,3]. Afghanistan has contingency emergency preparedness plans for Mass casualty incidents (MCI) management and key communicable diseases with pandemic potential as well as a National All Hazard Emergency Response Plan for Health (NERPH) according to the Joint External Evaluation report (JEE) completed in December 2016. The actual plan documents that the JEE report refers to, however, could not be found on the website of the Ministry of Public Health (MOPH) [4,5].

[1] Ministry of Public Health, Islamic Republic of Afghanistan. Afghanistan National Health Strategy (2016-2020),
[https://extranet.who.int/countryplanningcycles/sites/default/files/planning\_cycle\_repository/afghanistan/afghanistan\_mop
hstrategy2016-2020\_final09september2016111201614508950553325325.pdf] Accessed 31 Jan, 2021
[2] Ministry of Public Health, Islamic Republic of Afghanistan, [https://moph.gov.af/en] Accessed 30 Jan, 2021
[3] Afghanistan National Disaster Management Authority. 2010. "National Disaster Management Plan, 2010".
[http://andma.gov.af/en/wp-content/uploads/sites/4/2018/07/Afghanistan\_NDMP1\_2010.pdf]. Accessed Jan 13, 2021
[4] World Health Organisation (WHO). 2017. "Joint External Evaluation of IHR Core Capacities of the Islamic Republic of Afghanistan".4-7 December 2016 [http://apps.who.int/iris/bitstream/handle/10665/258674/WHO-WHE-CPI-REP-2017.43-eng.pdf;jsessionid=3FD80CDEFB32325D60CD6ED4B91429D3?sequence=1] Accessed 13 Jan, 2021
[5] Ministry of Ministry of Public Health, Islamic Republic of Afghanistan, [https://moph.gov.af/en] Accessed 30 Jan, 2021

# 3.1.3 Non-pharmaceutical interventions planning

#### 3.1.3a

# Does the country have a policy, plan and/or guidelines in place to implement non-pharmaceutical interventions (NPIs) during an epidemic or pandemic?

Yes, a policy, plan and/or guidelines are in place for more than one disease= 2, Yes, but the policy, plan and/or guidelines exist only for one disease = 1, No = 0

Current Year Score: 1

There is evidence that shows the Afghan government has a policy, plan and/or guidelines in place to implement nonpharmaceutical interventions (NPIs) during an epidemic or pandemic but for one disease only. There is evidence on the website of Ministry of Public Health (MoPH) that there is a policy which states "focus will be on addressing social distancing measures such as avoiding large social gatherings and should the need arise, school closing to mitigate against the possible negative impacts..."[1]. The Afghan cabinet also approved a plan to lockdown Kabul city for 3 weeks to limit the outbreak of COVID-19 [2]. Ministry of Public Health has approved two separate action plans (Preliminary Stakeholder Engagement Plan (SEP) March 13, 2020 Afghanistan COVID-19 Emergency Response and Health Systems Preparedness Project) which introduces non-pharmaceutical interventions to reduce the outbreak of COVID-19 disease [3]. There is also Afghanistan COVID-19 Emergency Response P173775 that includes provisions such as lockdowns, social distancing measures and bans on social gatherings to curb the spread of the disease [4]. However, there is no evidence that shows Afghanistan had a policy, plan and/or guideline in place to implement non-pharmaceutical interventions (NPIs) during an epidemic or pandemic before the occurrence of COVID-19 or for any other disease. No evidence could be found on the website of Ministry of Public Health (MoPH) or the office of the State Minister for Disaster Management and Humanitarian Affairs before 2020. [5,6].

[1] Ministry of Ministry of Public Health, Islamic Republic of Afghanistan, [https://moph.gov.af/en] Accessed 30 Jan, 2021[2] Coronavirus: Afghanistan approves plan to impose lockdown in Kabul,



https://www.devdiscourse.com/article/headlines/979933-coronavirus-afghanistan-approves-plan-to-impose-lockdown-in-kabul Accessed Jan 14, 2021

[3] Preliminary Stakeholder Engagement Plan (SEP) March 13, 2020 Afghanistan COVID-19 Emergency Response and Health Systems Preparedness Project https://moph.gov.af/sites/default/files/2020-03/SEP\_Afghanistan%20COVID-

19\_clean\_For%20Negs.pdf Accessed Jan 14, 2021

[4] Government of Islamic Republic of Afghanistan Ministry of Public Health Afghanistan COVID19 Emergency Response P173775 ENVIRONMENTAL and SOCIAL COMMITMENT PLAN (ESCP) https://moph.gov.af/sites/default/files/2020-

03/ESCP\_PostNegotiations\_AF-COVID-19\_%20ERHSPP%20Project\_%20P173775.pdf Accessed Jan 14, 2021

[5] Ministry of Ministry of Public Health, Islamic Republic of Afghanistan, [https://moph.gov.af/en] Accessed 30 Jan, 2021

[6] Afghanistan National Disaster Management Authority. [https://andma.gov.af/en]. Accessed Jan 13, 2021

# **3.2 EXERCISING RESPONSE PLANS**

# 3.2.1 Activating response plans

#### 3.2.1a

Does the country meet one of the following criteria?

- Is there evidence that the country has activated their national emergency response plan for an infectious disease outbreak in the past year?

- Is there evidence that the country has completed a national-level biological threat-focused exercise (either with WHO or separately) in the past year?

Needs to meet at least one of the criteria to be scored a 1 on this measure. , Yes for both = 1 , Yes for one = 1 , No for both = 0

#### Current Year Score: 1

There is evidence that shows that Afghanistan has activated an emergency response plan for an infectious disease outbreak in the past year, there is no evidence it has completed a national-level biological threat-focused exercise (either with WHO or separately) in the past year. No evidence could be found on the website of Ministry of Public Health (MoPH) or the Office of the State Minister for Disaster Management and Humanitarian Affairs before the occurrence of COVID-19 [1,2]. However, Afghanistan's COVID-19 Emergency Response and Health Systems Preparedness Project aims to help Afghanistan take effective action to respond to the threat posed by COVID-19 and strengthen its public health preparedness. A new emergency response committee for COVID-19 was established in the Ministry of Public Health to coordinate efforts to curb the spread of the disease [3]. Humanitarian partners finalized a Humanitarian Response Plan, integrating COVID-19 emergency assistance into overall planning and assumptions[4]. Ministry of Public Health created a special Directorate to respond to the new challenges COVID-19 has caused [5]. No evidence was found that Afghanistan has completed a nationallevel biological threat-focused exercise (either with WHO or separately in the past year. No evidence was found on the website of Ministry of Public Health (MOPH) or the Ministry of Agriculture, Irrigation and Livestock (MAIL) [1,6]. No evidence could be found on World Health Organization (WHO) Simulation Exercise [7].

[1] Ministry of Ministry of Public Health, Islamic Republic of Afghanistan, [https://moph.gov.af/en] Accessed 30 Jan, 2021

[2] Afghanistan National Disaster Management Authority [https://andma.gov.af/en] Accessed 30 Jan 2021

[3] Afghanistan: COVID-19 Emergency Response and Health Systems Preparedness Project

https://www.worldbank.org/en/news/loans-credits/2020/04/02/afghanistan-covid-19-emergency-response-and-health-systems-preparedness-project Accessed 14 Jan, 2021

[4] Afghanistan: COVID-19 Multi-Sectoral Response Operational Situation Report 3 June 2020

https://www.humanitarianresponse.info/sites/www.humanitarianresponse.info/files/documents/files/operational\_sitrep\_co



vid-19\_04\_june\_2020.pdf Accessed 14 Jan, 2021

[5] MoPH, Fighting Against COVID-19 Directorate https://moph.gov.af/index.php/en/fighting-against-covid-19-directorate Accessed 14 Jan, 2021

[6] Ministry of Agriculture, Irrigation and Livestock (MAIL) https://mail.gov.af/en Accessed 14 Jan, 2021

[7] World Health Organization (WHO) Simulation Exercise [https://extranet.who.int/sph/simulation-exercise] Accessed 31 Jan, 2021

#### 3.2.1b

Is there evidence that the country in the past year has identified a list of gaps and best practices in response (either through an infectious disease response or a biological-threat focused exercise) and developed a plan to improve response capabilities?

Yes, the country has developed and published a plan to improve response capacity = 2, Yes, the country has developed a plan to improve response capacity, but has not published the plan = 1, No = 0

#### Current Year Score: 0

No evidence could be found that Afghanistan, in the past year has undergone an exercise to identify a list of gaps and best practices through either an after action review or a biological threat-focused IHR exercise with the WHO. No evidence could be found on WHO's directory on the planned/conducted reviews [1]. No evidence could also be found on the websites of Ministry of Public Health (MoPH),, Ministry of Agriculture, Irrigation and Livestock (MAIL), and Afghanistan's Disaster Management Authority [1,2,3,4]

World Health Organisation. After Action Review. [https://extranet.who.int/sph/after-action-review]. Accessed Jan 14, 2021

[2] Ministry of Public Health Islamic Republic of Afghanistan, [https://moph.gov.af/en] Accessed Jan 14, 2021 [3] Ministry of Agriculture, Irrigation and Livestock Islamic Republic of Afghanistan [http://mail.gov.af/en]. Accessed Jan 14, 2021
[4] Afghanistan National Disaster Management Authority. [https://andma.gov.af/en]. Accessed Jan 14, 2021

### 3.2.2 Private sector engagement in exercises

#### 3.2.2a

Is there evidence that the country in the past year has undergone a national-level biological threat-focused exercise that has included private sector representatives?

Yes = 1 , No = 0

#### Current Year Score: 0

There is no publicly available information that indicates that in the past year, Afghanistan has undergone a national-level biological threat-focused exercise that has included private sector representatives. No evidence was found on the website of Ministry of Public Health (MoPH), Afghanistan National Disaster Management Authority, or Ministry of Economy (MoE) [1,2,3]. No evidence was found on the website of World Health Organization Simulation Exercise or any academic journals. [4,5]

Ministry of Ministry of Public Health, Islamic Republic of Afghanistan, [https://moph.gov.af/en] Accessed 30 Jan, 2021
 Office of the State Minister for Disaster Management and Humanitarian Affairs. [https://andma.gov.af/en] Accessed 31 Jan, 2021

[3] Ministry of Economy, Islamic Republic of Afghanistan, [https://moec.gov.af/en] Accessed 31 Jan, 2021



[4] World Health Organization (WHO) Simulation Exercise [https://extranet.who.int/sph/simulation-exercise] Accessed 31 Jan, 2021

[5] PubMed. [https://pubmed.ncbi.nlm.nih.gov/]. Accessed 4 Jan, 2021

# **3.3 EMERGENCY RESPONSE OPERATION**

# 3.3.1 Emergency response operation

#### 3.3.1a

Does the country have in place an Emergency Operations Center (EOC)? Yes = 1 , No = 0 Current Year Score: 1

There is evidence that Afghanistan has in place an Emergency Operation Centers. The Joint External Evaluation report (JEE), published in Dec. 2016 states that the national emergency Command and Control Centre (CCC) under the Ministry of Health and was created in 2016 through the support of the WHO. It runs parallel to a polio emergency operations center. [1]

[1] World Health Organisation (WHO). 2017. "Joint External Evaluation of IHR Core Capacities of the Islamic Republic of Afghanistan". 4-7 December 2016 [http://apps.who.int/iris/bitstream/handle/10665/258674/WHO-WHE-CPI-REP-2017.43-eng.pdf;jsessionid=3FD80CDEFB3232] Accessed Jan 13, 2021

#### 3.3.1b

Is the Emergency Operations Center (EOC) required to conduct a drill for a public health emergency scenario at least once per year or is there evidence that they conduct a drill at least once per year? Yes = 1, No = 0

Current Year Score: 0

No evidence could be found that the Emergency Operations Center (EOC) is required to conduct a drill for a public health emergency scenario at least once per year, or evidence that they conduct a drill at least once per year. No evidence could be found on the websites of the Ministry of Public Health (MoPH) and Ministry of Agriculture, Irrigation and Livestock (MAIL), as well as Afghanistan Disaster Management Authority [1,2,3]. The Joint External Evaluation for Afghanistan, conducted in 2016, notes that "regular training and exercises are much needed" and that although exercises had not been recently conducted at the time of the report, a pandemic influenza exercise had been conducted several years prior [4]. No evidence could be found in academic papers [5].

Ministry of Ministry of Public Health, Islamic Republic of Afghanistan, [https://moph.gov.af/en] Accessed 30 Jan, 2021
 Ministry of Agriculture, Irrigation and Livestock, Islamic Republic of Afghanistan, [https://www.mail.gov.af/en] Accessed
 Jan, 2021

[3] Afghanistan National Disaster Management Authority [https://andma.gov.af/en] Accessed 29 Jan, 2021

[4] [1] World Health Organisation (WHO). 2017. "Joint External Evaluation of IHR Core Capacities of the Islamic Republic of Afghanistan". 4-7 December 2016 [http://apps.who.int/iris/bitstream/handle/10665/258674/WHO-WHE-CPI-REP-2017.43-eng.pdf;jsessionid=3FD80CDEFB3232] Accessed Jan 13, 2021

[5] PubMed. [https://www.ncbi.nlm.nih.gov/]. Accessed 4 Jan, 2021



#### 3.3.1c

Is there public evidence to show that the Emergency Operations Center (EOC) has conducted within the last year a coordinated emergency response or emergency response exercise activated within 120 minutes of the identification of the public health emergency/scenario?

Yes = 1 , No = 0

Current Year Score: 0

No evidence was found to show that the Emergency Operation Center (EOC) can conduct, or has conducted within the last year, a coordinated emergency response or emergency response exercise activated within 120 minutes of the identification of the public health emergency/scenario. No evidence could be found on the websites of the Ministry of Public Health (MoPH) as well as Afghanistan Disaster Management Authority [1,2]. No evidence could also be found in the annual reports published by the MoPH [3]. No evidence was found on academic papers and WHO's monthly updates by Health Culture on Afghanistan [4,5]. The Joint External Evaluation report (JEE) report, complete in Dec. 2016, scores 2 for the country's emergency operations center operating procedures and plans. As explained in WHO's Joint External Evaluation Tool (2018), this indicates that the country had not yet demonstrated capacity to activate response within 120 minutes [6].

[1] Ministry of Ministry of Public Health, Islamic Republic of Afghanistan, [https://moph.gov.af/en] Accessed 30 Jan, 2021

[2] Afghanistan National Disaster Management Authority [https://andma.gov.af/en] Accessed 29 Jan, 2021

[3] Ministry of Ministry of Public Health, Islamic Republic of Afghanistan, Reports [https://moph.gov.af/en/reports-1] Accessed 31 Jan, 2021

[4] PubMed. [https://www.ncbi.nlm.nih.gov/]. Accessed 4 Jan, 2021

[5] WHO Health Emergencies Monthly Updates"

[https://www.humanitarianresponse.info/en/operations/afghanistan/health]. Accessed 31 Jan, 2021

[6] World Health Organisation (WHO). 2017. "Joint External Evaluation of IHR Core Capacities of the Islamic Republic of Afghanistan". 4-7 December 2016 [http://apps.who.int/iris/bitstream/handle/10665/258674/WHO-WHE-CPI-REP-2017.43-eng.pdf;jsessionid=3FD80CDEFB3232 Accessed Jan 13, 2021

# **3.4 LINKING PUBLIC HEALTH AND SECURITY AUTHORITIES**

# **3.4.1 Public health and security authorities are linked for rapid response during a biological event**

#### 3.4.1a

Does the country meet one of the following criteria?

- Is there public evidence that public health and national security authorities have carried out an exercise to respond to a potential deliberate biological event (i.e., bioterrorism attack)?

- Are there publicly available standard operating procedures, guidelines, memorandums of understanding (MOUs), or other agreements between the public health and security authorities to respond to a potential deliberate biological event (i.e., bioterrorism attack)?

Needs to meet at least one of the criteria to be scored a 1 on this measure., Yes for both = 1, Yes for one = 1, No for both = 0 Current Year Score: 0

There is no evidence either that public health and national security authorities in Afghanistan have carried out an exercise to respond to a potential deliberate biological event, or that there are standard operating procedures, guidelines, MOUs or other agreements between the public health and security authorities to respond to a potential deliberate biological event (i.e. bioterrorism attack). The Joint External Evaluation report (JEE) for Afghanistan completed in Dec. 2016, does indicate

that exercises have been conducted, stating that the Ministry of Public Health "has involved the security agencies in many preparedness activities, including training courses at national level and pandemic preparedness exercises." However, it does not mention when they were conducted. On standard operating procedures, the JEE also recommends that Afghanistan "develop joint SOPs between public health and security authorities (e.g. joint investigation of outbreaks, requests for assistance, identification of responsible focal points)" as a priority action. [1] There is no evidence of either a joint exercise or SOPs via the websites of the Ministry of Public Health (MoPH) and Afghanistan Disaster Management Authority [2,3]. Similarly, there is no evidence of this on the website of the Ministry of Defence [4].

[1] World Health Organisation (WHO). 2017. "Joint External Evaluation of IHR Core Capacities of the Islamic Republic of Afghanistan". 4-7 December 2016 [http://apps.who.int/iris/bitstream/handle/10665/258674/WHO-WHE-CPI-REP-2017.43-eng.pdf;jsessionid=3FD80CDEFB3232 Accessed Jan 14, 2021

[2] Ministry of Public Health Islamic Republic of Afghanistan. [https://moph.gov.af/en] Accessed Jan 14, 2021

[3] Afghanistan National Disaster Management Authority. [https://andma.gov.af/en]. Accessed Jan 14, 2021

[4] Ministry of Defence Islamic Republic of Afghanistan. [http://mod.gov.af/en]. Accessed Jan 14, 2021

# **3.5 RISK COMMUNICATIONS**

## **3.5.1 Public communication**

#### 3.5.1b

Does the risk communication plan (or other legislation, regulation or strategy document used to guide national public health response) outline how messages will reach populations and sectors with different communications needs (eg different languages, location within the country, media reach)?

Yes = 1 , No = 0

#### Current Year Score: 0

No evidence was found that in Afghanistan, the strategy to guide national public health response, outlines how messages will reach populations and sectors with different communications needs. The National Health Promotion Strategy Document (2014-2020), provides the general directions for communication strategy particularly targeting "the most vulnerable groups including women, children, youths, disabled people, Internally Displaced People, returnees and nomads". The document however does not specifically address dissemination of information during public health emergencies [1]. The Joint External Evaluation (JEE) report for Afghanistan, completed in Dec. 2016, does not however mention whether Afghanistan has a strategy to guide national public health response ensuring information reaches groups with different communication needs. Highlighting socio-cultural barriers it notes "besides insecurity, sociocultural norms and practices are the greatest barriers to information outreach and access, especially for women and marginalized communities. Most information is mediated through men and traditional community structures, which inadvertently tend to distance women and many communities from timely and relevant health information". No evidence could be found in the report that such barriers were addressed via plans or other interventions [2]. No further evidence/explanation could be found on the website of Ministry of Public Health (MoPH) as well as Afghanistan National Disaster Management Authority [3,4].

Islamic Republic of Afghanistan, Ministry of Public Health. 2014. "National Health Promotion Strategy (2014-2020).
 [https://moph.gov.af/sites/default/files/2019-08/en\_Health%20Promotion%20Strategy.pdf] Accessed 31 Jan, 2021
 World Health Organisation (WHO). 2017. "Joint External Evaluation of IHR Core Capacities of the Islamic Republic of Afghanistan".4-7 December 2016 [http://apps.who.int/iris/bitstream/handle/10665/258674/WHO-WHE-CPI-REP-2017.43-eng.pdf;jsessionid=3FD80CDEFB32325D60CD6ED4B91429D3?sequence=1]

[3] Ministry of Ministry of Public Health, Islamic Republic of Afghanistan, [https://moph.gov.af/en] Accessed 30 Jan, 2021



[4] Afghanistan National Disaster Management Authority [https://andma.gov.af/en] Accessed 29 Jan, 2021

# 3.5.1 Risk communication planning

#### 3.5.1a

Does the country have in place, either in the national public health emergency response plan or in other legislation, regulation, or strategy documents, a section detailing a risk communication plan that is specifically intended for use during a public health emergency?

Yes = 1 , No = 0

Current Year Score: 0

No evidence could be found that in Afghanistan that there is either in the national public health emergency response plan or in other legislation, regulation or strategy documents a section detailing a risk communication plan that is specifically intended for use during a public health emergency. No evidence could be found on the websites of Ministry of Public Health (MoPH), National Health Strategy (2016-2020) published by the Ministry of Public Health in 2015, Ministry of Communications and Information Technologies or Afghanistan National Disaster Management Authority [1,2,3,4]. The Joint External Evaluation report (JEE) for Afghanistan, completed in Dec. 2016, states that "there is no national risk communication strategy or plan, nor a formal multisectoral platform for coordinating risk communication interventions under the IHR." It notes that "policy documents and plans related to emergency response, articulate as an aspiration (although in a fragmented manner) the need for strong capacities in emergency public communication and engagement with communities and the media". Some of this, the report adds, "has been the basis for the communication response to outbreaks of avian influenza and CCHF in the past" [5].

[1] Ministry of Ministry of Public Health, Islamic Republic of Afghanistan, [https://moph.gov.af/en] Accessed 30 Jan, 2021
[2] National Health Strategy (2016-2020)

[https://extranet.who.int/countryplanningcycles/sites/default/files/planning\_cycle\_repository/afghanistan/afghanistan\_mop hstrategy2016-2020\_final09september2016111201614508950553325325.pdf] Accessed 30 Jan, 2021

[3] Ministry of Communications and Information Technologies, Islamic Republic of Afghanistan [https://mcit.gov.af/] Accessed 31 Jan, 2021

[4] Afghanistan National Disaster Management Authority [https://andma.gov.af/en] Accessed 29 Jan, 2021

[5] World Health Organisation (WHO). 2017. "Joint External Evaluation of IHR Core Capacities of the Islamic Republic of Afghanistan". 4-7 December 2016 [http://apps.who.int/iris/bitstream/handle/10665/258674/WHO-WHE-CPI-REP-2017.43eng.pdf;jsessionid=3FD80CDEFB3232 Accessed Jan 13, 2021

#### 3.5.1c

Does the risk communication plan (or other legislation, regulation or strategy document used to guide national public health response) designate a specific position within the government to serve as the primary spokesperson to the public during a public health emergency?

Yes = 1 , No = 0

Current Year Score: 0

Since there is no risk communication plan or other legislation, regulation or strategy document used to guide national public health response, there is no publicly available information that indicates that there is a designated position within the government to serve as the primary spokesperson to the public during a public health emergency. No evidence was found on the website of Ministry of Public Health (MoPH), National Health Strategy (2016-2020) published by the Ministry of Public

Health in 2015 or Afghanistan National Disaster Management Authority (ANDMA) [1,2,3]. No evidence was found on the websites of the Ministry of Communications and Information Technologies as well as The Joint External Evaluation report (JEE) for Afghanistan, completed in Dec, 2016 [4,5]. No evidence was found on the academic journal websites [6].

Ministry of Ministry of Public Health, Islamic Republic of Afghanistan, [https://moph.gov.af/en] Accessed 30 Jan, 2021
 National Health Strategy (2016-2020)

[https://extranet.who.int/countryplanningcycles/sites/default/files/planning\_cycle\_repository/afghanistan/afghanistan\_mop hstrategy2016-2020\_final09september2016111201614508950553325325.pdf] Accessed 30 Jan, 2021

[3] Afghanistan National Disaster Management Authority [https://dmac.gov.af/andma/] Accessed 29 Jan, 2021

[4] Ministry of Communications and Information Technologies, Islamic Republic of Afghanistan [https://mcit.gov.af/] Accessed 31 Jan, 2021

[5] World Health Organisation (WHO). 2017. "Joint External Evaluation of IHR Core Capacities of the Islamic Republic of Afghanistan". 4-7 December 2016 [http://apps.who.int/iris/bitstream/handle/10665/258674/WHO-WHE-CPI-REP-2017.43-eng.pdf;jsessionid=3FD80CDEFB3232] Accessed Jan 13, 2021

[6] PubMed. [https://www.ncbi.nlm.nih.gov/]. Accessed 4 Jan, 2021

# 3.5.2 Public communication

#### 3.5.2a

In the past year, is there evidence that the public health system has actively shared messages via online media platforms (e.g. social media, website) to inform the public about ongoing public health concerns and/or dispel rumors, misinformation or disinformation?

Public health system regularly shares information on health concerns = 2, Public health system shares information only during active emergencies, but does not regularly utilize online media platforms = 1, Public health system does not regularly utilize online media platforms, either during emergencies or otherwise = 0

#### Current Year Score: 0

No publicly available evidence could be found that the government of Afghanistan utilizes media platforms (social media, website updates, etc.) to inform the public about public health emergencies. Even though the MoPH (Ministry of Public Health) provides general health related information and ad-hoc updates about its activities through its official website and social media pages mainly Facebook and a YouTube channel, no evidence was found that they include public health emergencies [1,2,3]. The Joint External Evaluation report (JEE) for Afghanistan completed in Dec. 2016, scores 2 for Afghanistan's public communication meaning that "public communication unit or team exists, government spokesperson identified and trained and procedures for public communication in place" but overall there is limited capacity within the government according to WHO's Joint External Evaluation Tool. The JEE report does however, notes that in Afghanistan a "robust mechanism and sophisticated strategy underpinning the communication and social mobilization interventions in support of polio eradication have been in place for several years, under the rubric of the National Emergency Action Plan for Polio Eradication" [4].

[1] Ministry of Public Health of the Islamic Republic of Afghanistan. [http://moph.gov.af/en/News] Accessed 1 Feb, 2021

[2] Ministry of Public Health of the Islamic Republic of Afghanistan. "Official Facebook Page

[https://www.facebook.com/af.moph]. Accessed 1 Feb, 2021

[3]. Ministry of Public Health of the Islamic Republic of Afghanistan. "Official YouTube Account"

[https://www.youtube.com/channel/UCzaiOX0tMzYo2nJ2p-LvNEA]. Accessed 1 Feb, 2021

[4] World Health Organisation (WHO). 2017. "Joint External Evaluation of IHR Core Capacities of the Islamic Republic of Afghanistan. Mission report: 4-7 December 2016." [https://apps.who.int/iris/bitstream/handle/10665/258674/WHO-WHE-



CPI-REP-2017.43-eng.pdf?sequence=1]. Accessed Jan 15, 2021

#### 3.5.2b

Is there evidence that senior leaders (president or ministers) have shared misinformation or disinformation on infectious diseases in the past two years?

No = 1, Yes = 0

Current Year Score: 1

The President, ministers or any other senior leaders have not shared misinformation or disinformation on infectious diseases in the past two years. No evidence could be found on Ministry of Public Health (MoPH) media center page, the website of MoPH, Fighting Against COVID-19 Directorate or media outlets in Afghanistan to prove the misinformation or disinformation on infectious diseases in the past two years by senior leaders [1,2]. No evidence was found on the websites of media outlets, both national and international.

Ministry of Ministry of Public Health, Islamic Republic of Afghanistan, [https://moph.gov.af/en] Accessed 1 Feb, 2021
 MoPH, Fighting Against COVID-19 Directorate [https://moph.gov.af/index.php/en/fighting-against-covid-19-directorate] Accessed 1 Feb, 2021

# **3.6 ACCESS TO COMMUNICATIONS INFRASTRUCTURE**

### 3.6.1 Internet users

#### **3.6.1**a

Percentage of households with Internet Input number Current Year Score: 13.5

2019

International Telecommunication Union (ITU)

# **3.6.2** Mobile subscribers

#### 3.6.2a

Mobile-cellular telephone subscriptions per 100 inhabitants Input number Current Year Score: 59.36

2019

International Telecommunication Union (ITU)



### 3.6.3 Female access to a mobile phone

#### 3.6.3a

Percentage point gap between males and females whose home has access to a mobile phone Input number

Current Year Score: 39

2019

Gallup; Economist Impact calculation

# 3.6.4 Female access to the Internet

#### 3.6.4a

Percentage point gap between males and females whose home has access to the Internet Input number

Current Year Score: 19

2019

Gallup; Economist Impact calculation

# **3.7 TRADE AND TRAVEL RESTRICTIONS**

# 3.7.1 Trade restrictions

#### 3.7.1a

In the past year, has the country issued a restriction, without international/bilateral support, on the export/import of medical goods (e.g. medicines, oxygen, medical supplies, PPE) due to an infectious disease outbreak?

Yes = 0 , No = 1

Current Year Score: 1

There is no publicly available information to show that in the past year, Afghan government issued a restriction, without international/bilateral support, on the export/import of medial goods (e.g. medicines, oxygen, medical supplies, PPE) due to an infectious disease outbreak. No evidence was found on the website of the Ministry of Public Health (MoPH), Customs Department of Ministry of Finance, Ministry of Foreign Affairs, Ministry of Agriculture, Irrigation and Livestock (MAIL) or Afghanistan National Disaster Management Authority [1,2,3,4,5]. No evidence was found on the academic journal [6].

Ministry of Ministry of Public Health, Islamic Republic of Afghanistan, [https://moph.gov.af/en] Accessed 1 Feb, 2021
 Ministry of Finance, Customs Department, Islamic Republic of Afghanistan, [https://mof.gov.af/en/dg-customs] Accessed 1 Feb, 2021

[4] Ministry of Agriculture, Irrigation and Livestock (MAIL) [https://mail.gov.af/en] Accessed 1 Feb, 2021

[5] Afghanistan National Disaster Management Authority [https://andma.gov.af/en] Accessed 1 Feb, 2021

[5] PubMed. [https://www.ncbi.nlm.nih.gov/] Accessed Jan 15, 2021



#### 3.7.1b

In the past year, has the country issued a restriction, without international/bilateral support, on the export/import of nonmedical goods (e.g. food, textiles, etc) due to an infectious disease outbreak?

Yes = 0 , No = 1

Current Year Score: 1

No evidence was found that in the past year that Afghanistan issued a restriction on export/import of non-medical goods from another country, stating that was due to the risk posed by an infectious disease outbreak. No evidence was found on the websites of the Ministry of Public Health (MoPH) as well as Ministry of Agriculture, Irrigation and Livestock (MAIL) [1,2]. No evidence was found on WHO Disease Outbreak News on Afghanistan and World Organization for Animal Health (OIE) Weekly disease information [3,4].

[1] Ministry of Ministry of Public Health, Islamic Republic of Afghanistan, [https://moph.gov.af/en] Accessed 1 Feb, 2021
[2] Ministry of Agriculture, Irrigation and Livestock (MAIL) [https://mail.gov.af/en] Accessed 1 Feb, 2021
[3] World Health Organization (WHO). "Outbreak News: Afghanistan".
[https://www.who.int/csr/don/archive/country/afg/en/] Accessed 1 Feb, 2021
[4] World Organization for Animal Health (OIE). "Weekly Disease Information"
[https://www.oie.int/wahis\_2/public/wahid.php/Diseaseinformation/WI]. Accessed 1 Feb, 2021

# 3.7.2 Travel restrictions

#### 3.7.2a

In the past year, has the country implemented a ban, without international/bilateral support, on travelers arriving from a specific country or countries due to an infectious disease outbreak?

Yes = 0 , No = 1

Current Year Score: 0

There is evidence that shows that in the past year, Afghan government has implemented a ban, without international/bilateral support, on travelers arriving from a specific country or countries due to an infectious disease outbreak. The evidence shows that travel ban was implemented on travelers from Iran. There is no evidence that Afghanistan implemented a travel ban for any other country. No other evidence was found on the website of Ministry of Public Health (MoPH), Ministry of Foreign Affairs, Office of the Afghan President or Afghan Border Authorities. [1,2,3,4,5]

[1] Gardaworld: Afghanistan: Country bans air and ground travel to and from Iran over Covid-19, 23 Feb, 2020 https://www.garda.com/crisis24/news-alerts/316731/afghanistan-country-bans-air-and-ground-travel-to-and-from-iranover-covid-19-february-23 Accessed Jan 15, 2021

[2] Ministry of Ministry of Public Health, Islamic Republic of Afghanistan, [https://moph.gov.af/en] Accessed 1 Feb, 2021

[3] Ministry of Foreign Affairs, [https://www.mfa.gov.af/] Accessed Jan 15, 2021

[4] Islamic Republic of Afghanistan, Office of the President, [https://president.gov.af/en/] Accessed Jan 15, 2021

[5] Border Control Authority, Ministry of Interior Affairs of Afghanistan [https://moi.gov.af/en] Accessed 1 Feb, 2021



# Category 4: Sufficient and robust health sector to treat the sick and protect health workers

# 4.1 HEALTH CAPACITY IN CLINICS, HOSPITALS, AND COMMUNITY CARE CENTERS

## 4.1.1 Available human resources for the broader healthcare system

#### 4.1.1a

Doctors per 100,000 people Input number Current Year Score: 27.82

2016

WHO; national sources

#### 4.1.1b

Nurses and midwives per 100,000 people Input number Current Year Score: 17.55

2017

WHO; national sources

#### **4.1.1c**

Does the country have a health workforce strategy in place (which has been updated in the past five years) to identify fields where there is an insufficient workforce and strategies to address these shortcomings? Yes = 1, No = 0

Current Year Score: 1

In Afghanistan, there is a public workforce strategy in place for the health sector which identifies fields where there is an insufficient workforce and strategies to address these shortcomings. The National Health Strategy document for the years 2016-2020, developed by the Ministry of Public Health (MoPH) in Sept. 2016, specially refers to the country's constraints (under section 9) in terms of public health workforce and outlines interventions, expected outcomes as well as strategic results accordingly [1] The "National Health Policy: (2016-2020) moreover, refers to the Main Health's Sector's Challenges and Constraints, under section 2 as well as sections 5 and 6. It identifies the "nationwide shortage of qualified health workers", unbalanced gender composition and poor poorly distributed healthcare force around the country as main challenges and shortcomings [2]. As also documented in relevant academic research, Afghanistan's Basic Package for Health Services (BPHS) also address the problem of limited human resources, weak stewardship and damaged infrastructure as the



biggest challenges [3].

[1] Ministry of Public Health Islamic Republic of Afghanistan. 2016. "National Health Strategy 2016-2020
[https://extranet.who.int/countryplanningcycles/sites/default/files/planning\_cycle\_repository/afghanistan/afghanistan\_mop hstrategy2016-2020\_final09september2016111201614508950553325325.pdf] Accessed 1 Feb, 2021
[2] Ministry of Public Health Islamic Republic of Afghanistan. 2016. "National Health Policy: 2015-2020
[https://extranet.who.int/countryplanningcycles/sites/default/files/planning\_cycle\_repository/afghanistan/afghanistan\_mop hstrategy2016-2020\_final09september2016111201614508950553325325.pdf] Accessed 1 Feb, 2021
[3] Newbrander. William, Ickx. Paul., Feroz. Frouzeddin., Stanekzaic. Hedayatullah, 2014. "Afghanistan's Basic Package of Health Services: Its Development and Effects on Rebuilding the Health System" PubMed. S6-S28.
[https://www.ncbi.nlm.nih.gov/pmc/articles/PMC4136668/]. Accessed 1 Feb, 2021

## 4.1.2 Facilities capacity

#### 4.1.2a

Hospital beds per 100,000 people Input number Current Year Score: 39

2017

WHO/World Bank; national sources

#### 4.1.2b

Does the country have the capacity to isolate patients with highly communicable diseases in a biocontainment patient care unit and/or patient isolation room/unit located within the country?

Yes = 1 , No = 0

Current Year Score: 1

Evidence was found that Afghanistan has the capacity to isolate patients with highly communicable diseases in a biocontainment patient care unit and/or patient isolation facility located within the country. According to WHO, a new isolation ward at Kabul Antani Hospital specializing in infection prevention was inaugurated in Nov. 2016. The isolation ward ensure that people suffering from serious infectious diseases can be taken care of safely and appropriately and that health care workers are protected as they treat patients [1]. The World Health Organization (WHO). 2017. "Joint External Evaluation (JEE) report for Afghanistan completed in Dec. 2016 and the Ministry of Public Health's (MoPH), Afghanistan Health Survey 2018 point to increasing capacity in facility and workforce within the health sector to isolate patients of highly communicable diseases [2,3].

[1] World Health Organization (WHO). 2016. "WHO-Supported Isolation Ward Opens in Kabul".
[http://www.emro.who.int/afg/afghanistan-news/isolation-ward-kabul.html]. Accessed Jan 15, 2021
[2] World Health Organization (WHO). 4-7 December 2016. "Joint External Evaluation of IHR Core Capacities of the Islamic Republic of Afghanistan" [http://apps.who.int/iris/bitstream/handle/10665/258674/WHO-WHE-CPI-REP-2017.43-eng.pdf;jsessionid=3FD80CDEFB32325D60CD6ED4B91429D3?sequence=1] Accessed Jan 15, 2021
[3] Ministry of Public Health of the Islamic Republic of Afghanistan (MOPH). Afghanistan Health Survey 2018



[https://www.kit.nl/wp-content/uploads/2019/07/AHS-2018-report-FINAL-15-4-2019.pdf] Accessed 1 Feb, 2021

#### 4.1.2c

Does the country meet one of the following criteria?

- Is there evidence that the country has demonstrated capacity to expand isolation capacity in response to an infectious disease outbreak in the past two years?

- Is there evidence that the country has developed, updated or tested a plan to expand isolation capacity in response to an infectious disease outbreak in the past two years?

Yes = 1, No = 0

Current Year Score: 1

There is some evidence that in the past two years, Afghanistan has demonstrated capacity to expand isolation capacity in response to an infectious disease, but no evidence that it has developed, updated or tested a plan to expand isolation capacity in response to an infectious disease outbreak. According to WHO, a new isolation ward at Kabul Antani Hospital specializing in infection prevention was inaugurated in Nov. 2016. The isolation ward ensure that people suffering from serious diseases can be taken care of safely and appropriately and that health care workers are protected as they treat patients [1]. The World Health Organization (WHO) Joint External Evaluation (JEE) report for Afghanistan completed in Dec. 2016 and the Ministry of Public Health's (MoPH), Afghanistan Health Survey 2018 point to increasing capacity in facility and workforce within the health sector to isolate patients of highly communicable diseases [2,3]. Furthermore, in 2020 during the Covid-19 pandemic, in the capital Kabul, the Darulaman Palace and Kabul Polytechnic universities' dormitories were converted into isolation facilities, suggesting some capacity to enhance isolation facilities in response to an infectious disease outbreak. [4] However, there is no evidence on the website of the Ministry of Public Health that in the past two years, a plan was developed, updated or tested to expand isolation capacity in response to an infectious disease outbreak. [5]

[1] World Health Organization (WHO). 2016. "WHO-Supported Isolation Ward Opens in Kabul".
[http://www.emro.who.int/afg/afghanistan-news/isolation-ward-kabul.html]. Accessed Jan 15, 2021
[2] World Health Organization (WHO). 4-7 December 2016. "Joint External Evaluation of IHR Core Capacities of the Islamic Republic of Afghanistan" [http://apps.who.int/iris/bitstream/handle/10665/258674/WHO-WHE-CPI-REP-2017.43-eng.pdf;jsessionid=3FD80CDEFB32325D60CD6ED4B91429D3?sequence=1] Accessed Jan 15, 2021
[3] Ministry of Public Health of the Islamic Republic of Afghanistan (MoPH). Afghanistan Health Survey 2018
[https://www.kit.nl/wp-content/uploads/2019/07/AHS-2018-report-FINAL-15-4-2019.pdf] Accessed 1 Feb, 2021
[4] World Health Organisation. Eastern Mediterranean Health Journal. 2020. "Early responses to COVID-19 in Afghanistan".
[http://www.emro.who.int/embj-volume-26-2020/volume-26-issue-12/early-responses-to-covid-19-in-afghanistan.html].
Accessed May 20, 2021.

[5] Government of Afghanistan. Ministry of Public Health. 2021. [https://moph.gov.af/en]. Accessed May 20, 2021.

# 4.2 SUPPLY CHAIN FOR HEALTH SYSTEM AND HEALTHCARE WORKERS

### 4.2.1 Routine health care and laboratory system supply

#### **4.2.1**a

Is there a national procurement protocol in place which can be utilized by the Ministries of Health and Agriculture for the acquisition of laboratory supplies (e.g. equipment, reagents and media) and medical supplies (e.g. equipment, PPE) for routine needs?



Yes for both laboratory and medical supply needs = 2, Yes, but only for one = 1, No = 0 Current Year Score: 0

There is insufficient evidence of a national procurement protocol in Afghanistan which can be utilized by the Ministries of Public Health and Agriculture for the acquisition of laboratory supplies and medical supplies for routine needs. Afghanistan has a centralized procurement system, guided by the Procurement Law and overseen by the National Procurement Authority [1]. There is also a Directorate of Procurement in the Ministry of Public Health (MoPH), titled Grants and Service Contracts Management Unit, that is responsible for MoPH's procurement needs, but the link is not accessible. No evidence was, however, found on the websites of MoPH and the Ministry of Agriculture, Irrigation and Livestock (MAIL) that there are procurement protocols which cover laboratory needs or medical supplies. [2,3]. Neither the Joint External Evaluation report (JEE), completed in Dec 2016, nor the OIE PVS Evaluation Follow up Report, published in April 2017, refer to the presence of such protocol in MAIL and MoPH. The WHO Joint External Evaluation for Afghanistan, completed in December 2016, does note that "procurement of reagents is uncertain." The JEE report also mentions that a draft National Laboratory Policy is in place, however, the policy could not be found on the websites of the (MoPH) and (MAIL). [4,5]

[1] Islamic Republic of Afghanistan. National Procurement Authority, [https://legacy.npa.gov.af/Beta/English/PPU/PRP.aspx] Accessed 15 Feb, 2021

[2] Ministry of Ministry of Public Health, Islamic Republic of Afghanistan, [https://moph.gov.af/en] Accessed 1 Feb, 2021
[3] Ministry of Agriculture, Irrigation and Livestock (MAIL) [https://mail.gov.af/en] Accessed 1 Feb, 2021
[4] World Health Organization (WHO). 2017. "Joint External Evaluation of IHR Core Capacities of the Islamic Republic of Afghanistan". 4-7 December 2016 [http://apps.who.int/iris/bitstream/handle/10665/258674/WHO-WHE-CPI-REP-2017.43-eng.pdf;jsessionid=3FD80CDEFB32325D60CD6ED4B91429D3?sequence=1] Accessed 1 Feb, 2021
[5] World Organization for Animal Health (OIE). Apr. 2017. "PVS Evaluation Follow-up Report, Islamic Republic of Afghanistan". [http://www.oie.int/fileadmin/Home/eng/Support\_to\_OIE\_Members/pdf/201711078\_OIE\_PVS\_Follow-

#### up\_Report\_final\_Afghanistan.pdf]. Accessed 1 Feb, 2021

# 4.2.2 Stockpiling for emergencies

#### 4.2.2a

Does the country have a stockpile of medical supplies (e.g. MCMs, medicines, vaccines, medical equipment, PPE) for national use during a public health emergency?

Yes = 2, Yes, but there is limited evidence about what the stockpile contains = 1, No = 0

#### Current Year Score: 0

There is insufficient public evidence that Afghanistan maintains a stockpile of medical supplies (e.g. MCMs, medicines, vaccines, medical equipment, PPE) for national use during a public health emergency. According to the National Disaster Management Plan document (2010), developed by United Nations Development Program (UNDP) for the National Disaster Management Authority (NDMA) in Afghanistan, the Ministry of Public Health (MoPH) is tasked to keep a stockpile of medicines and emergency first aid kits and distribute them in times of emergency [1]. No publicly available evidence could however be found on the stockpile itself on the website of Ministry of Public Health (MoPH), Ministry of Agriculture, Irrigation and Livestock or Afghanistan National Disaster Management Authority or the Ministry of Defense [2,3,4,5].

[1] Afghanistan National Disaster Management Authority. 2010. "National Disaster Management Plan, 2010".
 [https://www.preventionweb.net/files/31182\_afghanistannationaldisastermanageme-451.pdf] Accessed 1 Feb, 2021
 [2] Ministry of Ministry of Public Health, Islamic Republic of Afghanistan, [https://moph.gov.af/en] Accessed 1 Feb, 2021
 [3] Ministry of Agriculture, Irrigation and Livestock (MAIL) [https://mail.gov.af/en] Accessed 1 Feb, 2021



[4] Afghanistan National Disaster Management Authority [https://andma.gov.af/en] Accessed 1 Feb, 2021
[5] Islamic Republic of Afghanistan, Ministry of Defense [https://mod.gov.af/en] Accessed 15 Feb, 2021

#### 4.2.2b

Does the country have a stockpile of laboratory supplies (e.g. reagents, media) for national use during a public health emergency?

Yes = 2, Yes, but there is limited evidence about what the stockpile contains = 1, No = 0 Current Year Score: 0

There is no publicly available information that Afghanistan has a stockpile of laboratory supplies (e.g. reagents, media) for national use during a public health emergency. According to the National Disaster Management Plan document (2010), developed by United Nations Development Program (UNDP) for the National Disaster Management Authority (NDMA) in Afghanistan, the Ministry of Public Health (MoPH) is tasked to keep a stockpile of medicines and emergency first aid kits and distribute them in times of emergency. Laboratory supplies are not explicitly mentioned [1]. No publicly available evidence could be found on the stockpile itself on the websites of Ministry of Public Health (MoPH), Ministry of Agriculture, Irrigation and Livestock, Ministry of Defense or Afghanistan National Disaster Management Authority [2,3,4,5].

[1] Afghanistan National Disaster Management Authority. 2010. "National Disaster Management Plan, 2010".

[https://www.preventionweb.net/files/31182\_afghanistannationaldisastermanageme-451.pdf] Accessed 1 Feb, 2021

[2] Ministry of Ministry of Public Health, Islamic Republic of Afghanistan, [https://moph.gov.af/en] Accessed 1 Feb, 2021

[3] Ministry of Agriculture, Irrigation and Livestock (MAIL) [https://mail.gov.af/en] Accessed 1 Feb, 2021

[4] Ministry of Defense, Islamic Republic of Afghanistan, [https://mod.gov.af/en] Accessed 1 Feb, 2021

[5] Afghanistan National Disaster Management Authority [https://andma.gov.af/en] Accessed 1 Feb, 2021

#### 4.2.2c

Is there evidence that the country conducts or requires an annual review of the national stockpile to ensure the supply is sufficient for a public health emergency?

Yes = 1, No = 0

Current Year Score: 0

There is insufficient evidence that Afghanistan conducts or requires an annual review of the national stockpile to ensure the supply is sufficient for a public health emergency. According to the National Disaster Management Plan document (2010), developed by United Nations Development Program (UNDP) for the National Disaster Management Authority (NDMA) in Afghanistan, the Ministry of Public Health (MoPH) is tasked to keep a stockpile of medicines and emergency first aid kits and distribute them in times of emergency [1]. No publicly available evidence could however be found on the stockpile itself, or whether an annual review was conducted of the national stockpile to ensure the medical and laboratory supplies are sufficient for a public health emergency, on the website of Ministry of Public Health (MoPH), Ministry of Agriculture, Irrigation and Livestock or Afghanistan National Disaster Management Authorityd or the Ministry of Defense [2,3,4,5].

[1] Afghanistan National Disaster Management Authority. 2010. "National Disaster Management Plan, 2010".

[https://www.preventionweb.net/files/31182\_afghanistannationaldisastermanageme-451.pdf] Accessed 1 Feb, 2021

[2] Ministry of Ministry of Public Health, Islamic Republic of Afghanistan, [https://moph.gov.af/en] Accessed 1 Feb, 2021

[3] Ministry of Agriculture, Irrigation and Livestock (MAIL) [https://mail.gov.af/en] Accessed 1 Feb, 2021

[4] Afghanistan National Disaster Management Authority [https://andma.gov.af/en] Accessed 1 Feb, 2021



[5] Islamic Republic of Afghanistan, Ministry of Defense. [https://mod.gov.af/en] Accessed 15 Feb, 2021

# 4.2.3 Manufacturing and procurement for emergencies

#### 4.2.3a

Does the country meet one of the following criteria?

Is there evidence of a plan/agreement to leverage domestic manufacturing capacity to produce medical supplies (e.g. MCMs, medicines, vaccines, equipment, PPE) for national use during a public health emergency?

- Is there evidence of a plan/mechanism to procure medical supplies (e.g. MCMs, medicines, vaccines, equipment, PPE) for national use during a public health emergency?

Needs to meet at least one of the criteria to be scored a 1 on this measure., Yes for both = 1, Yes for one = 1, No for both = 0 Current Year Score: 0

No evidence could be found to prove that Afghanistan has a plan/agreement to leverage domestic manufacturing capacity to produce medical supplies (e.g. MCMs, medicines, vaccines, equipment, PPE), or to procure these for national use during a public health emergency in Afghanistan. According to Directorate of Pharmaceutical Affairs there are 20 small medical productions companies in Afghanistan, but there is no evidence that they produce medical supplies to be deployed for national purposes during a public health emergency [1]. No publicly available evidence could, however, be found on such plan/agreement on the websites of Ministry of Public Health (MoPH), Ministry of Agriculture, Irrigation and Livestock, Ministry of Defense or Afghanistan National Disaster Management Authority [2,3,4,5].

[1] Tolo News, Afghanistan imports more than \$1Billion in medicine, medical equipment, 26 Feb, 2015

[https://tolonews.com/business/afghanistan-imports-more-1-billion-medicine-medical-equipment] Accessed Jan 19, 2021

[2] Ministry of Ministry of Public Health, Islamic Republic of Afghanistan, [https://moph.gov.af/en] Accessed 1 Feb, 2021

[3] Ministry of Agriculture, Irrigation and Livestock (MAIL) [https://mail.gov.af/en] Accessed 1 Feb, 2021

[4] Ministry of Defense, Islamic Republic of Afghanistan, [https://mod.gov.af/en] Accessed 1 Feb, 2021

[5] Afghanistan National Disaster Management Authority [https://andma.gov.af/en] Accessed 1 Feb, 2021

#### 4.2.3b

Does the country meet one of the following criteria?

- Is there evidence of a plan/agreement to leverage domestic manufacturing capacity to produce laboratory supplies (e.g. reagents, media) for national use during a public health emergency?

- Is there evidence of a plan/mechanism to procure laboratory supplies (e.g. reagents, media) for national use during a public health emergency?

Needs to meet at least one of the criteria to be scored a 1 on this measure., Yes for both = 1, Yes for one = 1, No for both = 0 Current Year Score: 0

No evidence could be found to prove that Afghanistan has a plan/agreement to leverage domestic manufacturing capacity to produce or procure laboratory supplies (e.g. reagents, media) for national use during a public health emergency in Afghanistan.. According to Directorate of Pharmaceutical Affairs there are 20 small medical productions companies in Afghanistan, but there is no evidence that they produce laboratory supplies that can be used during a national public health emergency [1]. No publicly available evidence could however be found on such a plan/agreement on the websites of Ministry of Public Health (MoPH), Ministry of Agriculture, Irrigation and Livestock, Ministry of Defense or Afghanistan National Disaster Management Authority [2,3,4,5].



[1] Tolo News, Afghanistan imports more than \$1Billion in medicine, medical equipment, 26 Feb, 2015

[https://tolonews.com/business/afghanistan-imports-more-1-billion-medicine-medical-equipment] Accessed Jan 19, 2021

[2] Ministry of Ministry of Public Health, Islamic Republic of Afghanistan, [https://moph.gov.af/en] Accessed 1 Feb, 2021

[3] Ministry of Agriculture, Irrigation and Livestock (MAIL) [https://mail.gov.af/en] Accessed 1 Feb, 2021

[4] Ministry of Defense, Islamic Republic of Afghanistan, [https://mod.gov.af/en] Accessed 1 Feb, 2021

[5] Afghanistan National Disaster Management Authority [https://andma.gov.af/en] Accessed 1 Feb, 2021

# **4.3 MEDICAL COUNTERMEASURES AND PERSONNEL DEPLOYMENT**

# **4.3.1 System for dispensing medical countermeasures (MCM) during a public health emergency**

#### **4.3.1**a

Does the country have a plan, program, or guidelines in place for dispensing medical countermeasures (MCM) for national use during a public health emergency (i.e., antibiotics, vaccines, therapeutics and diagnostics)?

Yes = 1 , No = 0

Current Year Score: 0

There is no publicly available information that proves Afghanistan has a plan, program, or guidelines in place for dispensing medical countermeasures (MCM) for national use during a public health emergency (i.e., antibiotics, vaccines, therapeutics and diagnostics). No evidence was found on the website of Ministry of Public Health (MoPH), National Disaster Management Plan document (2010), as well as Joint External Evaluation of IHR Core Capacities of the Islamic Republic of Afghanistan completed in December 2016. [1,2,3]

[1] Ministry of Ministry of Public Health, Islamic Republic of Afghanistan, [https://moph.gov.af/en] Accessed 2 Feb, 2021
[2] Afghanistan National Disaster Management Authority. 2010. "National Disaster Management Plan, 2010".
[https://www.preventionweb.net/files/31182\_afghanistannationaldisastermanageme-451.pdf] Accessed 1 Feb, 2021 2021
[3] World Health Organization (WHO). 2017. "Joint External Evaluation of IHR Core Capacities of the Islamic Republic of Afghanistan".4-7 December 2016 [http://apps.who.int/iris/bitstream/handle/10665/258674/WHO-WHE-CPI-REP-2017.43-eng.pdf;jsessionid=3FD80CDEFB32325D60CD6ED4B91429D3?sequence=1] Accessed 2 Feb, 2021

# **4.3.2 System for receiving foreign health personnel during a public health emergency**

#### 4.3.2a

Is there a public plan in place to receive health personnel from other countries to respond to a public health emergency? Yes = 1, No = 0

#### Current Year Score: 0

There is no evidence that in Afghanistan there is a system in place to receive health personnel from other countries to respond to a public health emergency. According to the WHO Joint External Evaluation for Aghanistan, completed in Dec. 2016, Afghanistan has experience in deploying and receiving health personnel and there are plans that have been drafted which outline a system for sending and receiving health personnel. The report however, does not mention which countries in the region do the draft plans involve [1]. The draft plans are not yet available on the website of the Ministry of Public Health (MoPH), Afghanistan's National Disaster Management Authority (ANDM) and Ministry of Defence [2,3,4].



 World Health Organisation (WHO). 2017. "Joint External Evaluation of IHR Core Capacities of the Islamic Republic of Afghanistan". 4-7 December 2016 [http://apps.who.int/iris/bitstream/handle/10665/258674/WHO-WHE-CPI-REP-2017.43eng.pdf;jsessionid=3FD80CDEFB32325D60CD6ED4B91429D3?sequence=1] Accessed Jan 21, 2021.
 Ministry of Public Health Islamic Republic of Afghanistan. [https://moph.gov.af/en] Accessed Jan 21, 2021
 Afghanistan's National Disaster Management Authority. [https://andma.gov.af/en]. Accessed Jan 21, 2021
 Ministry of Defence Islamic Republic of Afghanistan. [https://mod.gov.af/en]. Accessed Jan 21, 2021

# **4.4 HEALTHCARE ACCESS**

# 4.4.1 Access to healthcare

#### 4.4.1a

#### Does the constitution explicitly guarantee citizens' right to medical care?

Guaranteed free = 4, Guaranteed right = 3, Aspirational or subject to progressive realization = 2, Guaranteed for some groups, not universally = 1, No specific provision = 0

Current Year Score: 4

2020

World Policy Analysis Center

#### 4.4.1b

Access to skilled birth attendants (% of population) Input number Current Year Score: 50.5

2015

WHO/World Bank/United Nations Children's Fund (UNICEF)

#### **4.4.1**c

**Out-of-pocket health expenditures per capita, purchasing power parity (PPP; current international \$)** Input number

Current Year Score: 132.75

2017

WHO Global Health Expenditure database

# 4.4.2 Paid medical leave

#### 4.4.2a

Are workers guaranteed paid sick leave?

Paid sick leave = 2, Unpaid sick leave = 1, No sick leave = 0



#### Current Year Score: 2

2020

World Policy Analysis Center

## 4.4.3 Healthcare worker access to healthcare

#### 4.4.3a

Has the government issued legislation, a policy, or a public statement committing to provide prioritized healthcare services to healthcare workers who become sick as a result of responding to a public health emergency?

Yes = 1 , No = 0

Current Year Score: 0

There is no existing legislation that provides 'prioritized' health care services to healthcare workers who become sick as a result of responding to a public health emergency. No evidence could be found on the websites of Ministry of Public Health (MoPH), Afghanistan National Disaster Management Authority, Ministry of Defense or Ministry of Agriculture, Irrigation and Livestock (MAIL) [1,2,3,4].

[1] Ministry of Ministry of Public Health, Islamic Republic of Afghanistan, [https://moph.gov.af/en] Accessed 2 Feb, 2021

[2] Afghanistan National Disaster Management Authority, [https://andma.gov.af/en] Accessed 15 Feb, 2021

[3] Ministry of Agriculture, Irrigation and Livestock (MAIL) [https://mail.gov.af/en] Accessed 1 Feb, 2021

[4] Ministry of Defense, Islamic Republic of Afghanistan, [https://mod.gov.af/en] Accessed 1 Feb, 2021

# 4.5 COMMUNICATIONS WITH HEALTHCARE WORKERS DURING A PUBLIC HEALTH EMERGENCY

### 4.5.1 Communication with healthcare workers

#### 4.5.1a

Is there a system in place for public health officials and healthcare workers to communicate during a public health emergency?

Yes = 1 , No = 0

#### Current Year Score: 0

There is insufficient evidence that in Afghanistan there is a system in place for public health officials and healthcare workers to communicate during a public health emergency. The World Health Organization (WHO) Joint External Evaluation report (JEE) for Afghanistan, completed in Dec. 2016, refers to a national emergency Command and Control Centre (CCC) located within the Ministry of Public Health's (MoPH) premises. The CCC is equipped with telecommunication facilities and trained staff on 24/7 active duty whose responsibility is to coordinate health emergency responses in the country. The communication plan, for the health sector, includes a basic communication structure comprised of Emergency Operations Centers (EOCs), both at the central and provincial levels, who provide communication and information tools and service during a response to emergency. It is however, not clear from the report whether the CCC and EOC include "a system" specifically for public health officials and healthcare workers to communicate during a public health emergency [1]. No further evidence was found on the websites of Ministry of Public Health (MoPH) and Afghanistan National Disaster



Management Authority (ANDMA) [2,3].

[1] World Health Organisation (WHO). 2017. "Joint External Evaluation of IHR Core Capacities of the Islamic Republic of Afghanistan". 4-7 December 2016 [http://apps.who.int/iris/bitstream/handle/10665/258674/WHO-WHE-CPI-REP-2017.43-eng.pdf;jsessionid=3FD80CDEFB3232] Accessed Jan 13, 2021

[2] Ministry of Ministry of Public Health, Islamic Republic of Afghanistan, [https://moph.gov.af/en] Accessed 2 Feb, 2021
 [3] Afghanistan National Disaster Management Authority. [https://andma.gov.af/en] Accessed 1 Feb, 2021

#### 4.5.1b

Does the system for public health officials and healthcare workers to communicate during an emergency encompass healthcare workers in both the public and private sector?

Yes = 1 , No = 0

#### Current Year Score: 0

There is insufficient evidence that in Afghanistan there is a system in place for public health officials and healthcare workers to communicate during a public health emergency that includes both the public and private sector. The World Health Organization (WHO) Joint External Evaluation report (JEE) for Afghanistan, completed in Dec. 2016, refers to a national emergency Command and Control Centre (CCC) located within the Ministry of Public Health's (MoPH) premises. The CCC is equipped with telecommunication facilities and trained staff on 24/7 active duty whose responsibility is to coordinate health emergency responses in the country. The communication plan, for the health sector, includes a basic communication structure comprised of Emergency Operations Centers (EOCs), both at the central and provincial levels, who provide communication and information tools and service during a response to emergency. It is however, not clear from the report whether the CCC and EOC include "a system" specifically for public health officials and healthcare workers to communicate during a public health emergency [1]. No further evidence was found on the websites of Ministry of Public Health (MoPH) and Afghanistan National Disaster Management Authority (ANDMA) [2,3].

[1] World Health Organisation (WHO). 2017. "Joint External Evaluation of IHR Core Capacities of the Islamic Republic of Afghanistan". 4-7 December 2016 [http://apps.who.int/iris/bitstream/handle/10665/258674/WHO-WHE-CPI-REP-2017.43eng.pdf;jsessionid=3FD80CDEFB3232] Accessed Jan 13, 2021

[2] Ministry of Ministry of Public Health, Islamic Republic of Afghanistan, [https://moph.gov.af/en] Accessed 2 Feb, 2021
[3] Afghanistan National Disaster Management Authority. [https://andma.gov.af/en] Accessed 1 Feb, 2021

# 4.6 INFECTION CONTROL PRACTICES AND AVAILABILITY OF EQUIPMENT

### 4.6.1 Healthcare associated infection (HCAI) prevention and control programs

#### 4.6.1a

Is there evidence that the national public health system is monitoring for and tracking the number of healthcare associated infections (HCAI) that take place in healthcare facilities?

Yes = 1 , No = 0

Current Year Score: 0

There is insufficient evidence that in Afghanistan, the national public health system monitors for and tracks the number of health care associated infections that take place in healthcare facilities. The Joint External Evaluation report (JEE) completed

in Dec. 2016 mentions that most health facilities are involved in HCAI prevention and control programs, although this is not fully documented. It however notes that "no national plan for HCAI programs has been approved" and the "implementation of the HCAI guidelines is needed at national level, including continuing training and monitoring of implementation" [1]. No evidence was found on the website of the Ministry of Public Health (MoPH) including the National Health Policy (2016-2020) and National Health Strategy (2016-2020) [2,3,4]. No evidence could also be found on WHO Library of National Action Plans [5]. The website for the Afghan National Public Health Institute was not accessible. However, news reports from 2020 suggest that during the Covid-19 pandemic, hospitals in Afghanistan were tracking the number of medical workers who were infected by the virus. [6,7]

[1] World Health Organisation (WHO). 2017. "Joint External Evaluation of IHR Core Capacities of the Islamic Republic of Afghanistan". 4-7 December 2016 [http://apps.who.int/iris/bitstream/handle/10665/258674/WHO-WHE-CPI-REP-2017.43-eng.pdf;jsessionid=3FD80CDEFB3232] Accessed Jan 13, 2021

[2] Ministry of Public Health, Islamic Republic of Afghanistan, [https://moph.gov.af/en] Accessed 2 Feb, 2021

[3] Ministry of Public Health, Islamic Republic of Afghanistan, National Health Policy (2016-2020)

[https://extranet.who.int/countryplanningcycles/sites/default/files/planning\_cycle\_repository/afghanistan/afghanistan\_mop hstrategy2016-2020 final09september2016111201614508950553325325.pdf] Accessed 2 Feb, 2021

[4] Ministry of Public Health, National Health Strategy (2016-2020)

[https://extranet.who.int/countryplanningcycles/sites/default/files/planning\_cycle\_repository/afghanistan/afghanistan\_mop hstrategy2016-2020 final09september2016111201614508950553325325.pdf] Accessed 2 Feb, 2021

[5] World Health Organization (WHO) Library of National Action Plans. 2017. "Afghanistan National Action Plan on AMR".

[https://www.who.int/drugresistance/action-plans/library/en/]. Accessed 2 Feb, 2021

[6] Arab News. May 5, 2020. "Afghan healthcare workers pay heavy price in coronavirus battle".

[https://www.arabnews.com/node/1669776/world]. Accessed May 20, 2021.

[7] Reuters. May 7, 2021. "Exclusive: Large number of COVID-19 cases among Afghan medics spark alarm in Kabul".

[https://www.reuters.com/article/us-health-coronavirus-afghanistan-hospit/exclusive-large-number-of-covid-19-casesamong-afghan-medics-spark-alarm-in-kabul-idUSKBN22J2PJ]. Accessed May 20, 2021.

# **4.7 CAPACITY TO TEST AND APPROVE NEW MEDICAL**

# **COUNTERMEASURES**

# **4.7.1 Regulatory process for conducting clinical trials of unregistered interventions**

#### **4.7.1a**

Is there a national requirement for ethical review (e.g., from an ethics committee or via Institutional Review Board approval) before beginning a clinical trial?

Yes = 1 , No = 0

Current Year Score: 1

There is publicly available information that in Afghanistan there is a national requirement for ethical review (e.g. from an ethics committee) before beginning a clinical trial. Afghanistan's National Health Policy 2015-2020 states that "proposed subject and research methods" needs to be approved by the Ministry of Public Health's ethics committee in some cases. [3] No additional evidence was found on the Ministry of Public Health's website [1]. No evidence was found on Joint External Evaluation (JEE) report on Afghanistan, completed in Dec. 2016, or Afghanistan National Health Strategy 2016-2020 [2,4].

[1] Ministry of Ministry of Public Health, Islamic Republic of Afghanistan, [https://moph.gov.af/en] Accessed 2 Feb, 2021
 [2] World Health Organisation (WHO). 2017. "Joint External Evaluation of IHR Core Capacities of the Islamic Republic of Afghanistan". 4-7 December 2016 [http://apps.who.int/iris/bitstream/handle/10665/258674/WHO-WHE-CPI-REP-2017.43-eng.pdf;jsessionid=3FD80CDEFB3232 Accessed 15 Feb, 2021

[3] Islamic Republic of Afghanistan Ministry of Public Health NATIONAL HEALTH POLICY 2015-2020

http://www.acbar.org/upload/1493096331346.pdf Accessed 15 Feb, 2021

[4] Afghanistan National Health Strategy 2016-2020,

[https://extranet.who.int/countryplanningcycles/sites/default/files/planning\_cycle\_repository/afghanistan/afghanistan\_mop hstrategy2016-2020\_final09september2016111201614508950553325325.pdf] Accessed 15 Feb, 2021

#### 4.7.1b

Is there an expedited process for approving clinical trials for unregistered medical countermeasures (MCM) to treat ongoing epidemics?

Yes = 1, No = 0

#### Current Year Score: 0

No evidence could be found that in Afghanistan that there is an expedited process for approving clinical trials for unregistered medical countermeasures to treat ongoing pandemics. No evidence could be found on the website of Ministry of Public Health (MoPH) [1]. No evidence could also be found on the World Health Organization (WHO) report Joint External Evaluation (JEE) for Afghanistan published in December, 2016, National Disaster Management Plan, 2010 or academic journals [2,3,4].

 Ministry of Public Health, Islamic Republic of Afghanistan, [https://moph.gov.af/en] Accessed 2 Feb, 2021
 World Health Organization (WHO). 2017. "Joint External Evaluation of IHR Core Capacities of the Islamic Republic of Afghanistan". 4-7 December 2016 [http://apps.who.int/iris/bitstream/handle/10665/258674/WHO-WHE-CPI-REP-2017.43eng.pdf;jsessionid=3FD80CDEFB3232] Accessed Jan 13, 2021

[3] ] Afghanistan National Disaster Management Authority. 2010. "National Disaster Management Plan, 2010".
[https://www.preventionweb.net/files/31182\_afghanistannationaldisastermanageme-451.pdf] Accessed 1 Feb, 2021
[4] PubMed. [https://www.ncbi.nlm.nih.gov/] Accessed Jan 15, 2021

# 4.7.2 Regulatory process for approving medical countermeasures

#### 4.7.2a

Is there a government agency responsible for approving new medical countermeasures (MCM) for humans? Yes = 1 , No = 0

#### Current Year Score: 1

Evidence was found that in Afghanistan there is a government agency responsible for approving new medical countermeasures for humans. According to WHO, "in 2016, the government established the National Medicine and Health Products Regulatory Authority (NMHRA) which is responsible for the regulation of medicines, medical devices, vaccines, diagnostics and other health products. The NMHRA is working towards strengthening medicine regulation practices and quality." It can be understood from this evidence that a government agency that would approve new medical MCMs exists in Afghanistan, although it is not explicitly stated. The NMHRA has an official website which describes its mission including "developing and enforcing medicine and healthcare products related rules, regulations, and policies" [1,2].



 National Medicine and Health Products Regulatory Authority (NMHRA), "About National Medicine and Healthcare Products Regulatory Authority". [https://nmhra.gov.af/en]. Accessed 2 Feb, 2021
 World Health Organization (WHO). "Afghanistan: Essential Medicines and Pharmaceutical Policies". [http://www.emro.who.int/afg/programmes/emp.html]. Accessed 2 Feb, 2021

#### 4.7.2b

Is there an expedited process for approving medical countermeasures (MCM) for human use during public health emergencies?

Yes = 1 , No = 0

Current Year Score: 0

No evidence could be found that in Afghanistan, there is an expedited process for approving medical countermeasures for human use during public health emergencies. No evidence could be found on the website of Ministry of Public Health (MoPH), World Health Organization (WHO) report, Joint External Evaluation (JEE) for Afghanistan published in December, 2016, National Disaster Management Plan, 2010 or Afghanistan National Health Strategy. [1,2,3,4].

[1] Ministry of Public Health, Islamic Republic of Afghanistan, [https://moph.gov.af/en] Accessed 2 Feb, 2021[2]

[2] World Health Organization (WHO). 2017. "Joint External Evaluation of IHR Core Capacities of the Islamic Republic of Afghanistan". 4-7 December 2016 [http://apps.who.int/iris/bitstream/handle/10665/258674/WHO-WHE-CPI-REP-2017.43-eng.pdf;jsessionid=3FD80CDEFB3232] Accessed Jan 13, 2021

[3] ] Afghanistan National Disaster Management Authority. 2010. "National Disaster Management Plan, 2010".

[https://www.preventionweb.net/files/31182\_afghanistannationaldisastermanageme-451.pdf] Accessed 1 Feb, 2021[4] Afghanistan National Health Strategy

[https://extranet.who.int/countryplanningcycles/sites/default/files/planning\_cycle\_repository/afghanistan/afghanistan\_mop hstrategy2016-2020\_final09september2016111201614508950553325325.pdf] Accessed 1 Feb, 2021

# Category 5: Commitments to improving national capacity, financing plans to address gaps, and adhering to global norms

# 5.1 INTERNATIONAL HEALTH REGULATIONS (IHR) REPORTING COMPLIANCE AND DISASTER RISK REDUCTION

### 5.1.1 Official IHR reporting

#### 5.1.1a

Has the country submitted IHR reports to the WHO for the previous calendar year? Yes = 1 , No = 0

Current Year Score: 1



2020

World Health Organization

## 5.1.2 Integration of health into disaster risk reduction

#### 5.1.2a

Are epidemics and pandemics integrated into the national risk reduction strategy or is there a standalone national disaster risk reduction strategy for epidemics and pandemics?

Yes = 1 , No = 0

Current Year Score: 0

No evidence was found that in Afghanistan, pandemics are integrated into the national risk reduction strategy or that there is a standalone national disaster risk reduction strategy for pandemics. The main policy documents that address national emergencies, namely National Disaster Management Plan - developed by the United Nations Development Program (UNDP) for the ANDMA (Afghanistan National Disaster Management Authority) in 2010 refers to pandemics. This document integrates pandemics into the national disaster management plans not disaster risk reduction specifically [1]. Similarly the National Disaster Management Plan for the Health Sector developed by the Ministry of Public Health (MoPH) in 2014, closely incorporates pandemics into its management plans not risk reduction. The document acknowledges the absence of a disaster risk reduction plan in MoPH [2]. No evidence was found on the websites of MoPH as well as ANDMA and Afghanistan National Health Strategy document [3,4,5].

[1]] Afghanistan National Disaster Management Authority. 2010. "National Disaster Management Plan, 2010".
[https://www.preventionweb.net/files/31182\_afghanistannationaldisastermanageme-451.pdf] Accessed 1 Feb, 2021
[2] Ministry of Public Health Islamic Republic of Afghanistan. 2014. "National Disaster Management Plan for the Health Sector".

[https://www.humanitarianresponse.info/sites/www.humanitarianresponse.info/files/documents/files/national\_disaster\_ma nagement plan english version 2014.pdf]. Accessed 2 Feb, 2021

[3] Ministry of Public Health, Islamic Republic of Afghanistan, [https://moph.gov.af/en] Accessed 2 Feb, 2021

[4] Afghanistan National Disaster Management Authority [https://andma.gov.af/en] Accessed 1 Feb, 2021

[5] Afghanistan National Health Strategy

[https://extranet.who.int/countryplanningcycles/sites/default/files/planning\_cycle\_repository/afghanistan/afghanistan\_mop hstrategy2016-2020\_final09september2016111201614508950553325325.pdf] Accessed 1 Feb, 2021

# 5.2 CROSS-BORDER AGREEMENTS ON PUBLIC HEALTH AND ANIMAL HEALTH EMERGENCY RESPONSE

#### 5.2.1 Cross-border agreements

#### 5.2.1a

Does the country have cross-border agreements, protocols, or MOUs with neighboring countries, or as part of a regional group, with regards to public health emergencies?

Yes = 2, Yes, but there is evidence of gaps in implementation = 1, No = 0

Current Year Score: 2

Evidence was found that Afghanistan has cross-border agreements, protocols or MOUs with neighbouring countries, or as part of a regional group, with regards to public health emergencies. According to the Humanitarian Implementation Plan (HIP), commissioned and overseen by the Directorate-General for European Civil Protection and Humanitarian Aid, Operations Afghanistan has signed an agreement with Pakistan, Iran in 2018, allocating funds and devising strategies for emergencies, part of which includes public health related ones [1] Moreover, according to the Joint External Evaluation report, completed in Dec. 2016, there is a system in place for personnel deployment and medical countermeasures between Afghanistan and neighbouring countries that needs to be formalised within the context of G5 platform which the countries in the region use to cooperate [2]. Evidence was found that under Humanitarian Implementation Plan, Directorate-General for European Civil Protection and Humanitarian Aid provided funding towards mitigating cross-border spread of COVID-19 to Afghanistan. [3]

[1] Directorate-General for European Civil Protection and Humanitarian Aid Operations. 2018. "Technical Annex, Afghanistan, Pakistan, Iran and Central Asia Financial, Administrative and Operations Information" [https://ec.europa.eu/echo/sites/echo-site/files/echo\_-as\_bud\_2018\_91000\_ta\_v2.pdf] Accessed Jan 21, 2021

[2] World Health Organisation (WHO). 2017. "Joint External Evaluation of IHR Core Capacities of the Islamic Republic of Afghanistan". 4-7 December 2016 [http://apps.who.int/iris/bitstream/handle/10665/258674/WHO-WHE-CPI-REP-2017.43-eng.pdf;jsessionid=3FD80CDEFB32325D60CD6ED4B91429D3?sequence=1] Accessed Jan 21, 2021. Humanitarian Implementation Plan (HIP) Afghanistan, Pakistan, Iran [https://ec.europa.eu/echo/sites/echo-site/files/echo\_-as\_bud\_2020\_91000\_v5.pdf]. Accessed Jan 21, 2021

#### 5.2.1b

# Does the country have cross-border agreements, protocols, or MOUs with neighboring countries, or as part of a regional group, with regards to animal health emergencies?

Yes = 2, Yes, but there is evidence of gaps in implementation = 1, No = 0

Current Year Score: 0

No evidence could be found that Afghanistan has cross-border agreements, protocols or MOUs with neighbouring countries, or as part of a regional group, with regards to animal health emergencies. According to the World Animal Health Organisation's (OIE) PVS mission report, published in April 2017, with assistance form FAO TAD (Transboundary Animal Disease) project the authorities were (at the time of reporting) negotiating bilateral agreements for closer cooperation for border controls with neighbouring countries Iran, Pakistan and Tajikistan [1]. However, no evidence could be found if those negotiations resulted into any kind of formal agreement or MoUs between those countries. No evidence could be found on the website of Ministry of Public Health (MoPH), Ministry of Agriculture, Irrigation an Livestock (MAIL) as well as academic papers. [2,3,4]

[1] World Organisation for Animal Health (OIE). April 2017. "PVS Evaluation Follow up Mission Report Islamic Republic of Afghanistan". [http://www.oie.int/fileadmin/Home/eng/Support\_to\_OIE\_Members/pdf/201711078\_OIE\_PVS\_Follow-up\_Report\_final\_Afghanistan.pdf] Accessed Jan 21, 2021

[2] Ministry of Public Health Islamic Republic of Afghanistan, "News Releases ". [http://moph.gov.af/en/news] Accessed Jan 21, 2021

[3] Ministry of Agriculture, Irrigation and Livestock Islamic Republic of Afghanistan, "News" [http://mail.gov.af/en/news]. Accessed Jan 21, 2021

[4] PubMed.

[https://www.ncbi.nlm.nih.gov/pubmed/?term=%22Afghanistan%22+AND+%22animal+health+emergency%22+AND+%22cro ss-border+agreement%22]. Accessed Jan 21, 2021



# **5.3 INTERNATIONAL COMMITMENTS**

# 5.3.1 Participation in international agreements

#### 5.3.1a

Does the county have signatory and ratification (or same legal effect) status to the Biological Weapons Convention?

Signed and ratified (or action having the same legal effect) = 2, Signed = 1, Non-compliant or not a member = 0 Current Year Score: 2

2021

**Biological Weapons Convention** 

#### 5.3.1b

Has the country submitted confidence building measures for the Biological Weapons Convention in the past three years? Yes = 1 , No = 0

Current Year Score: 1

2021

**Biological Weapons Convention** 

#### 5.3.1c

Has the state provided the required United Nations Security Council Resolution (UNSCR) 1540 report to the Security Council Committee established pursuant to resolution 1540 (1540 Committee)?

Yes = 1 , No = 0

Current Year Score: 1

2021

**Biological Weapons Convention** 

#### 5.3.1d

# Extent of United Nations Security Council Resolution (UNSCR) 1540 implementation related to legal frameworks and enforcement for countering biological weapons:

Very good (60+ points) = 4, Good (45–59 points) = 3, Moderate (30–44 points) = 2, Weak (15–29 points) = 1, Very weak (0–14 points) or no matrix exists/country is not party to the BWC = 0

Current Year Score: 1

2021

**Biological Weapons Convention** 



# 5.3.2 Voluntary memberships

#### 5.3.2a

Does the country meet at least 2 of the following criteria?

- Membership in Global Health Security Agenda (GHSA)

- Membership in the Alliance for Country Assessments for Global Health Security and IHR Implementation (JEE Alliance)

- Membership in the Global Partnership Against the Spread of Weapons and Materials of Mass Destruction (GP)

- Membership in the Australia Group (AG)

- Membership in the Proliferation Security Initiative (PSI)

Needs to meet at least two of the criteria to be scored a 1 on this measure. , Yes for five = 1, Yes for four = 1, Yes for three = 1, Yes for two = 1, Yes for one = 0, No for all = 0

Current Year Score: 1

2021

Global Health Security Agenda; JE Alliance; Global Partnership; Australia Group; PSI

# 5.4 JOINT EXTERNAL EVALUATION (JEE) AND PERFORMANCE OF VETERINARY SERVICES PATHWAY (PVS)

# **5.4.1 Completion and publication of a Joint External Evaluation (JEE)** assessment and gap analysis

#### 5.4.1a

Has the country completed a Joint External Evaluation (JEE) or precursor external evaluation (e.g., GHSA pilot external assessment) and published a full public report in the last five years?

Yes = 1 , No = 0

Current Year Score: 1

2021

WHO Strategic Partnership for IHR and Health Security (SPH); Global Health Security Agenda

#### 5.4.1b

Has the country completed and published, within the last five years, either a National Action Plan for Health Security (NAPHS) to address gaps identified through the Joint External Evaluation (JEE) assessment or a national GHSA roadmap that sets milestones for achieving each of the GHSA targets?

Yes = 1 , No = 0

Current Year Score: 1

2021

WHO Strategic Partnership for IHR and Health Security (SPH); Global Health Security Agenda



### **5.4.2 Completion and publication of a Performance of Veterinary Services** (PVS) assessment and gap analysis

#### 5.4.2a

Has the country completed and published a Performance of Veterinary Services (PVS) assessment in the last five years?

Yes = 1 , No = 0

Current Year Score: 1

2021

OIE PVS assessments

#### 5.4.2b

Has the country completed and published a Performance of Veterinary Services (PVS) gap analysis in the last five years? Yes = 1, No = 0

Current Year Score: 0

2021

**OIE PVS assessments** 

# **5.5 FINANCING**

# 5.5.1 National financing for epidemic preparedness

#### 5.5.1a

Is there evidence that the country has allocated national funds to improve capacity to address epidemic threats within the past three years?

Yes = 1 , No = 0

Current Year Score: 0

No publicly available information could be found that shows Afghanistan has allocated national funds to improve capacity to address epidemic threats within the past three years, even though the World Health Organization's (WHO) Joint External Evaluation (JEE) of IHR core capacities in Afghanistan, published in 2016 mandates the government of Afghanistan to provide finances to improve capacity to address epidemics [1]. After COVID-19 outbreak, the government allocated \$19 million from the national funds to address "urgent health needs, such as establishing testing labs, including at border crossings; setting up special wards to boost hospitalization and care capacity; and procuring critical medical supplies" [2,3]. No evidence was found on the websites of Ministry of Public Health (MoPH), Afghanistan National Disaster Management Authority, Ministry of Defense [4,5,6].

[1] "Joint External Evaluation of IHR Core Capacities of the Islamic Republic of Afghanistan". 4-7 December 2016
[http://apps.who.int/iris/bitstream/handle/10665/258674/WHO-WHE-CPI-REP-2017.43eng.pdf;jsessionid=3FD80CDEFB3232] Accessed 1 Feb, 2021
[2] International Monetary Fund, Policy Response to COVID-19, Afghanistan Report, [https://www.imf.org/en/Topics/imfand-covid19/Policy-Responses-to-COVID-19] Accessed 1 Feb, 2021



[3] Afghanistan Humanitarian Bulletin Issue 83 | 1 October-31 December 2019, OCHA,

[https://reliefweb.int/report/afghanistan/afghanistan-humanitarian-bulletin-issue-83-1-october-31-december-2019] Accessed 1 Feb, 2021

[4] Ministry of Public Health, Islamic Republic of Afghanistan, [https://moph.gov.af/en] Accessed 2 Feb, 2021

[5] Afghanistan National Disaster Management Authority [https://andma.gov.af/en] Accessed 1 Feb, 2021

[6] Ministry of Defense [https://mod.gov.af/en] Accessed Jan 15, 2021

# 5.5.2 Financing under Joint External Evaluation (JEE) and Performance of Veterinary Services (PVS) reports and gap analyses

#### 5.5.2a

Does the Joint External Evaluation (JEE) report, National Action Plan for Health Security (NAPHS), and/or national GHSA roadmap allocate or describe specific funding from the national budget (covering a time-period either in the future or within the past five years) to address the identified gaps?

Yes = 1, No/country has not conducted a JEE = 0

Current Year Score: 0

2021

WHO Strategic Partnership for IHR and Health Security (SPH); Global Health Security Agenda

#### 5.5.2b

Does the Performance of Veterinary Services (PVS) gap analysis and/or PVS assessment allocate or describe specific funding from the national budget (covering a time-period either in the future or within the past five years) to address the identified gaps?

Yes = 1, No/country has not conducted a PVS = 0 Current Year Score: 0

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2021
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**OIE PVS assessments** 

# 5.5.3 Financing for emergency response

#### 5.5.3a

Is there a publicly identified special emergency public financing mechanism and funds which the country can access in the face of a public health emergency (such as through a dedicated national reserve fund, an established agreement with the World Bank pandemic financing facility/other multilateral emergency funding mechanism, or other pathway identified through a public health or state of emergency act)?

Yes = 1 , No = 0

Current Year Score: 1

There is a publicly identified special emergency public financing mechanism and funds which Afghanistan can access in the face of a public health emergency. IDA includes Afghanistan as one of the receiving countries of emergency funds. Being an IDA eligible country, Afghanistan is allowed access to the World Bank pandemic financing facility [1]. As also indicated in the

PVS Evaluation report by the World Organisation for Anima Health (OIE), published in Apr. 2017, a well established mechanism exists in Afghanistan whereby emergency funds and other assistance can be accessed to deal with emergencies through the help of United Nations Assistance Mission in Afghanistan (UNAMA) and local NGOs [3]

[1] IDA World Bank Group. 2018 "Borrowing Countries". [http://ida.worldbank.org/about/borrowing-countries] Accessed Jan 21, 2021

[2] World Bank. December 2017. "Pandemic Financing Facility"

[http://pubdocs.worldbank.org/en/119961516647620597/PEF-Operational-Brief-Dec-2017.pdf] Accessed Jan 21, 2021 [3] World Organisation for Animal Health (OIE). April 2017. "PVS Evaluation Follow up Mission Report Islamic Republic of Afghanistan". [http://www.oie.int/fileadmin/Home/eng/Support\_to\_OIE\_Members/pdf/201711078\_OIE\_PVS\_Followup\_Report\_final\_Afghanistan.pdf] Accessed Jan 21, 2021

# **5.5.4 Accountability for commitments made at the international stage for addressing epidemic threats**

#### 5.5.4a

Is there evidence that senior leaders (president or ministers), in the past three years, have made a public commitment either to:

- Support other countries to improve capacity to address epidemic threats by providing financing or support?

- Improve the country's domestic capacity to address epidemic threats by expanding financing or requesting support to improve capacity?

Needs to meet at least one of the criteria to be scored a 1 on this measure., Yes for both = 1, Yes for one = 1, No for both = 0 Current Year Score: 0

There is no publicly available information that senior leaders (president or ministers) have made a public commitment either to support other countries to improve capacity to address epidemic threats by providing financing or support or improve the country's domestic capacity to address epidemic threats by expanding financing or requesting support to improve capacity. Afghanistan is a low income, conflict affected country that depends on international donors' assistance. No evidence could be found on the websites of the Ministry of Public Health (MoPH), Ministry of Foreign Affairs and United Nations Assistance Mission in Afghanistan (UNAMA) [1,2,3].

 Ministry of Public Health, Islamic Republic of Afghanistan, [https://moph.gov.af/en] Accessed 2 Feb, 2021
 Ministry of Foreign Affairs, Islamic Republic of Afghanistan [https://www.mfa.gov.af/] Accessed 2 Feb, 2021
 United Nations Assistance Mission in Afghanistan (UNAMA). "Press Releases". [https://unama.unmissions.org/news] Accessed 2 Feb, 2021

#### 5.5.4b

Is there evidence that the country has, in the past three years, either:

- Provided other countries with financing or technical support to improve capacity to address epidemic threats?

- Requested financing or technical support from donors to improve the country's domestic capacity to address epidemic threats?

Needs to meet at least one of the criteria to be scored a 1 on this measure., Yes for both = 1, Yes for one = 1, No for both = 0 Current Year Score: 1

There is evidence that Afghanistan, in the past three years, has invested finances (from donors or national budget) to improve the country's domestic capacity to address epidemic threats, but there is no publicly available information that shows Afghanistan, in the past three years, has provided other countries with financing or technical support to improve capacity to address epidemic threats. There is evidence via the Global Health Security Funding Tracker that Afghanistan has invested donor financed to improve domestic capacity to address epidemic threats. The tracker notes that Afghanistan collaborated with the government of Japan and Nagasaki University in 2017 and 2018 to receive training on how to improve responses and understanding of immunization, public health emergency identification and countermeasures. The tracker also indicates that the World Bank has committed IDA funding for 2017-2019 to strengthen pandemic preparedness by improved "resilience through crisis preparedness and response through an enhanced Crisis Response Window". Under IHR capacity building funding, US\$ 2.97bn have been committed to Afghanistan between 2014-2020. [1]. No further evidence could be found that Afghanistan has provided other countries with financing or technical support on the websites of the Ministry of Public Health (MoPH), Ministry of Foreign Affairs or United Nations Assistance Mission in Afghanistan (UNAMA) [2,3,4].

 Global Health Security Funding Tracker. [https://tracking.ghscosting.org/#/data]. Accessed 2 Feb, 2021
 Ministry of Public Health, Islamic Republic of Afghanistan, [https://moph.gov.af/en] Accessed 2 Feb, 2021
 Ministry of Foreign Affairs, Islamic Republic of Afghanistan [https://www.mfa.gov.af/] Accessed 2 Feb, 2021
 United Nations Assistance Mission in Afghanistan (UNAMA). "Press Releases". [https://unama.unmissions.org/news] Accessed 2 Feb, 2021

#### 5.5.4c

Is there evidence that the country has fulfilled its full contribution to the WHO within the past two years? Yes = 1 , No = 0

Current Year Score: 0

2021

Economist Impact analyst qualitative assessment based on official national sources, which vary by country

# 5.6 COMMITMENT TO SHARING OF GENETIC AND BIOLOGICAL DATA AND SPECIMENS

# 5.6.1 Commitment to sharing genetic data, clinical specimens, and/or isolated specimens (biological materials) in both emergency and nonemergency research

#### 5.6.1a

Is there a publicly available plan or policy for sharing genetic data, clinical specimens, and/or isolated specimens (biological materials) along with the associated epidemiological data with international organizations and/or other countries that goes beyond influenza?

Yes = 1 , No = 0

Current Year Score: 0

No evidence was found that in Afghanistan, there is a publicly available plan or policy for sharing genetic data, epidemiological data, clinical specimens, and/or isolated specimens (biological materials) with international organizations

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and/or other countries that goes beyond influenza. No evidence could be found on website of Ministry of Public Health (MoPH) [1]. Neither the National Health Strategy (2016-2020), developed by MoPH, nor the National Health Policy (2016-2020), make provisions for sharing of data either [2,3]. There is no Ministry of Research in Afghanistan. No evidence could also be found on the website of Ministry of Agriculture, Irrigation and Livestock (MAIL) [4].

 Ministry of Public Health, Islamic Republic of Afghanistan, [https://moph.gov.af/en] Accessed 2 Feb, 2021
 Ministry of Public Health, Afghanistan National Health Strategy (2016-2020)[https://extranet.who.int/countryplanningcycles/sites/default/files/planning\_cycle\_repository/afghanistan/afghanistan \_mophstrategy2016-2020\_final09september2016111201614508950553325325.pdf] Accessed 2 Feb, 2021
 Ministry of Public Health, National Health Policy (2015-2020) [http://maternalnutritionsouthasia.com/wpcontent/uploads/National-health-policy-2015-2020.pdf] Accessed 2 Feb, 2021
 Ministry of Agriculture, Irrigation and Livestock (MAIL) [https://mail.gov.af/en] Accessed 1 Feb, 2021

### 5.6.1b

Is there public evidence that the country has not shared samples in accordance with the Pandemic Influenza Preparedness (PIP) framework in the past two years?

Yes = 0 , No = 1

Current Year Score: 1

No evidence could be found that Afghanistan has not shared samples in accordance with the PIP framework in the past two years. No evidence could be found the website of the Ministry of Public Health (MoPH) and on the website of World Health Organization (WHO) and on top international and local media outlets either [1,2,3].

 Ministry of Public Health, Islamic Republic of Afghanistan, [https://moph.gov.af/en] Accessed 2 Feb, 2021 [2 World Health Organization (WHO), Afghanistan [https://www.who.int/countries/afg/] Accessed 2 Feb, 2021
 Afghanistan Health Cluster Dashboard. [https://www.humanitarianresponse.info/en/operations/afghanistan/health]. Accessed 2 Feb, 2021

# 5.6.1c

Is there public evidence that the country has not shared pandemic pathogen samples during an outbreak in the past two years?

Yes = 0 , No = 1

#### Current Year Score: 1

No evidence could be found that Afghanistan has not shared pandemic pathogen samples during an outbreak in the past two years including samples for COVID-19. No evidence could be found on the website of the Ministry of Public Health (MoPH) [1,2,3,4]. No evidence could also be found on the website of World Health Organization (WHO) [5, 6]. No evidence could also be found on top international and local media outlets either [7, 8] as well as academic papers [9].

[1] Ministry of Public Health Islamic Republic of Afghanistan, "News Releases ". [http://moph.gov.af/en/news] Accessed 2 Feb, 2021

[2] Ministry of Public Health Islamic Republic of Afghanistan, "Monthly Report". [http://moph.gov.af/fa/page/access-to-information/monthly-report] Accessed 2 Feb, 2021

[3] Ministry of Public Health Islamic Republic of Afghanistan, "Annual report".

[http://moph.gov.af/en/documents/category/annual-report] Accessed 2 Feb, 2021



[4] Ministry of Public Health Islamic Republic of Afghanistan, "Health Research Archives". , [https://moph.gov.af/en] Accessed 2 Feb, 2021

[5] World Health Organization (WHO). November 2017-September 2018 "Epidemic and Pandemic-Prone Diseases: Monthly Update". [http://www.emro.who.int/pandemic-epidemic-diseases/influenza/index.html]. Accessed 2 Feb, 2021.

[6] World Health Organization (WHO). "Afghanistan News" [http://www.emro.who.int/afg/afghanistan-news/]. , [https://moph.gov.af/en]

[7] Pajhwok Afghan News. "Health". [https://pajhwok.com/category/health/] Accessed 2 Feb, 2021

[8] Afghanistan Health Cluster Dashboard. [https://www.humanitarianresponse.info/en/operations/afghanistan/health]. Accessed 2 Feb, 2021

[9] PubMed.

[https://www.ncbi.nlm.nih.gov/pubmed/?term=%22Afghanistan%22+AND+%22pandemic+pathogen+sample\*%22+AND+%2 2share%22]. Accessed 2 Feb, 2021

# Category 6: Overall risk environment and vulnerability to biological threats

# **6.1 POLITICAL AND SECURITY RISK**

# 6.1.1 Government effectiveness

### 6.1.1a

Policy formation (Economist Intelligence score; 0-4, where 4=best) Input number

Current Year Score: 2

2020

**Economist Intelligence** 

### 6.1.1b

Quality of bureaucracy (Economist Intelligence score; 0-4, where 4=best) Input number

Current Year Score: 0

2020

**Economist Intelligence** 

### 6.1.1c

Excessive bureaucracy/red tape (Economist Intelligence score; 0-4, where 4=best) Input number



Current Year Score: 0

2020

**Economist Intelligence** 

### 6.1.1d

Vested interests/cronyism (Economist Intelligence score; 0-4, where 4=best) Input number Current Year Score: 0

2020

Economist Intelligence

### 6.1.1e

Country score on Corruption Perception Index (0-100, where 100=best) Input number

Current Year Score: 19

2020

Transparency International

# 6.1.1f

Accountability of public officials (Economist Intelligence score; 0-4, where 4=best) Input number

Current Year Score: 0

2020

**Economist Intelligence** 

### 6.1.1g

Human rights risk (Economist Intelligence score; 0-4, where 4=best) Input number

Current Year Score: 0

2020

**Economist Intelligence** 



# 6.1.2 Orderly transfers of power

### 6.1.2a

# How clear, established, and accepted are constitutional mechanisms for the orderly transfer of power from one government to another?

Very clear, established and accepted = 4, Clear, established and accepted = 3, One of the three criteria (clear, established, accepted) is missing = 2, Two of the three criteria (clear, established, accepted) are missing = 1, Not clear, not established, not accepted = 0

Current Year Score: 1

2021

**Economist Intelligence** 

# 6.1.3 Risk of social unrest

#### 6.1.3a

#### What is the risk of disruptive social unrest?

Very low: Social unrest is very unlikely = 4, Low: There is some prospect of social unrest, but disruption would be very limited = 3, Moderate: There is a considerable chance of social unrest, but disruption would be limited = 2, High: Major social unrest is likely, and would cause considerable disruption = 1, Very high: Large-scale social unrest on such a level as to seriously challenge government control of the country is very likely = 0

Current Year Score: 0

2021

**Economist Intelligence** 

# 6.1.4 Illicit activities by non-state actors

#### 6.1.4a

How likely is it that domestic or foreign terrorists will attack with a frequency or severity that causes substantial disruption? No threat = 4, Low threat = 3, Moderate threat = 2, High threat = 1, Very high threat = 0

Current Year Score: 0

2021

**Economist Intelligence** 

### 6.1.4b

What is the level of illicit arms flows within the country? 4 = Very high, 3 = High, 2 = Moderate, 1 = Low, 0 = Very low Current Year Score: 0



2020

UN Office of Drugs and Crime (UNODC)

### 6.1.4c

How high is the risk of organized criminal activity to the government or businesses in the country?

Very low = 4, Low = 3, Moderate = 2, High = 1, Very high = 0 Current Year Score: 0

2021

**Economist Intelligence** 

# 6.1.5 Armed conflict

#### 6.1.5a

Is this country presently subject to an armed conflict, or is there at least a moderate risk of such conflict in the future? No armed conflict exists = 4, Yes; sporadic conflict = 3, Yes; incursional conflict = 2, Yes, low-level insurgency = 1, Yes; territorial conflict = 0

Current Year Score: 0

2021

**Economist Intelligence** 

# 6.1.6 Government territorial control

#### 6.1.6a

Does the government's authority extend over the full territory of the country? Yes = 1, No = 0

Current Year Score: 0

2021

Economist Intelligence

# **6.1.7 International tensions**

#### 6.1.7a

Is there a threat that international disputes/tensions could have a negative effect? No threat = 4, Low threat = 3, Moderate threat = 2, High threat = 1, Very high threat = 0 Current Year Score: 0



2021

**Economist Intelligence** 

# **6.2 SOCIO-ECONOMIC RESILIENCE**

# 6.2.1 Literacy

### 6.2.1a

Adult literacy rate, population 15+ years, both sexes (%) Input number Current Year Score: 43.02

2018

United Nations Development Programme (UNDP); United Nations Educational, Scientific and Cultural Organization (UNESCO); The Economist Intelligence Unit

# 6.2.2 Gender equality

#### 6.2.2a

United Nations Development Programme (UNDP) Gender Inequality Index score Input number

Current Year Score: 0.43

2018

United Nations Development Programme (UNDP); The Economist Intelligence Unit

# 6.2.3 Social inclusion

# 6.2.3a

Poverty headcount ratio at \$1.90 a day (2011 PPP) (% of population) Input number Current Year Score: 3

2008-2018

World Bank; Economist Impact

# 6.2.3b

#### Share of employment in the informal sector

Greater than 50% = 2, Between 25-50% = 1, Less than 25% = 0



#### Current Year Score: 2

The data on share of employment in the informal sector in Afghanistan is based on estimates and insufficient research. The local economy in Afghanistan suffers from unemployment and underemployment. It heavily relies on informal sector and, therefore, the share of informal employment is high. [1] According to data from The World Bank, only 18.25% of work force is employed in formal sector. [2] Based on the information available on the website of the International Labor Organization, 80-90% of the total economic activity comes from the informal sector. [3] No evidence was found on the website of Ministry of Labor and Social Affairs on the share of employment in informal sector. [4]

[1] Afghanistan Times, Creating new jobs in Afghanistan: What do we know and what should we do?

[http://www.afghanistantimes.af/creating-new-jobs-in-afghanistan-what-do-we-know-and-what-should-we-do/] Accessed Jan 24, 2021

[2] The World Bank, Employment in industry (% of total employment) (modeled ILO estimate) - Afghanistan

[https://data.worldbank.org/indicator/SL.IND.EMPL.ZS?locations=AF] Accessed Jan 24, 2021

[3] International Labor Organization, Afghanistan: Time to move to sustainable jobs,

[https://www.ilo.org/wcmsp5/groups/public/---asia/---ro-bangkok/documents/publication/wcms\_182252.pdf] Accessed Jan 24, 2021

[4] Ministry of Labor & Social Affairs, Islamic Republic of Afghanistan, [https://molsa.gov.af/en/reports] Accessed Jan 24, 2021

#### 6.2.3c

Coverage of social insurance programs (% of population) Scored in quartiles (0-3, where 3=best) Current Year Score: 0

2016, or latest available

World Bank; Economist Impact calculations

# 6.2.4 Public confidence in government

### 6.2.4a

Level of confidence in public institutions Input number Current Year Score: 0

#### 2021

Economist Intelligence Democracy Index

# 6.2.5 Local media and reporting

### 6.2.5a

Is media coverage robust? Is there open and free discussion of public issues, with a reasonable diversity of opinions?



Input number

Current Year Score: 2

2021

Economist Intelligence Democracy Index

# 6.2.6 Inequality

### 6.2.6a

**Gini coefficient** Scored 0-1, where 0=best

Current Year Score: 0.29

Latest available.

World Bank; Economist Impact calculations

# **6.3 INFRASTRUCTURE ADEQUACY**

# 6.3.1 Adequacy of road network

### 6.3.1a

What is the risk that the road network will prove inadequate to meet needs? Very low = 4, Low = 3, Moderate = 2, High = 1, Very high = 0 Current Year Score: 0

2021

**Economist Intelligence** 

# 6.3.2 Adequacy of airports

### 6.3.2a

What is the risk that air transport will prove inadequate to meet needs? Very low = 4, Low = 3, Moderate = 2, High = 1, Very high = 0 Current Year Score: 0

2021

Economist Intelligence



# 6.3.3 Adequacy of power network

### 6.3.3a

What is the risk that power shortages could be disruptive?

Very low = 4, Low = 3, Moderate = 2, High = 1, Very high = 0 Current Year Score: 0

2021

Economist Intelligence

# **6.4 ENVIRONMENTAL RISKS**

# 6.4.1 Urbanization

### 6.4.1a

Urban population (% of total population) Input number Current Year Score: 25.75

2019

World Bank

# 6.4.2 Land use

### 6.4.2a

Percentage point change in forest area between 2006–2016 Input number Current Year Score: 0

2008-2018

World Bank; Economist Impact

# 6.4.3 Natural disaster risk

### 6.4.3a

What is the risk that the economy will suffer a major disruption owing to a natural disaster? Very low = 4, Low = 3, Moderate = 2, High = 1, Very high = 0 Current Year Score: 1

2021



**Economist Intelligence** 

# **6.5 PUBLIC HEALTH VULNERABILITIES**

# 6.5.1 Access to quality healthcare

### 6.5.1a

Total life expectancy (years) Input number Current Year Score: 64.49

2018

United Nations; World Bank, UNICEF; Institute for Health Metrics and Evaluation (IHME); Central Intelligence Agency (CIA) World Factbook

### 6.5.1b

Age-standardized NCD mortality rate (per 100 000 population)

Input number

Current Year Score: 881.2

2019

WHO

# 6.5.1c

Population ages 65 and above (% of total population) Input number Current Year Score: 2.62

current rear score.

2019

World Bank

# 6.5.1d

Prevalence of current tobacco use (% of adults) Input number Current Year Score: 28.18

2018

World Bank



# 6.5.1e

Prevalence of obesity among adults Input number Current Year Score: 5.5

2016

WHO

# 6.5.2 Access to potable water and sanitation

### 6.5.2a

Percentage of homes with access to at least basic water infrastructure Input number

Current Year Score: 67.06

2017

UNICEF; Economist Impact

### 6.5.2b

Percentage of homes with access to at least basic sanitation facilities Input number Current Year Score: 43.42

2017

UNICEF; Economist Impact

# 6.5.3 Public healthcare spending levels per capita

### 6.5.3a

Domestic general government health expenditure per capita, PPP (current international \$) Input number

Current Year Score: 9.64

2018

WHO Global Health Expenditure database



# 6.5.4 Trust in medical and health advice

### 6.5.4a

#### Trust medical and health advice from the government

Share of population that trust medical and health advice from the government , More than 80% = 2, Between 60-80%, or no data available = 1, Less than 60% = 0

Current Year Score: 2

2018

Wellcome Trust Global Monitor 2018

### 6.5.4b

#### Trust medical and health advice from medical workers

Share of population that trust medical and health advice from health professionals , More than 80% = 2, Between 60-80%, or no data available = 1, Less than 60% = 0

Current Year Score: 1

2018

Wellcome Trust Global Monitor 2018