HEALTHCARE CHALLENGES AND COVID 19 PANDEMIC IN AFGHANISTAN - A POLITICAL AND SOCIAL PERSPECTIVE

Global Health International Congress - Equity in Health: A Global Challenge, 1ª edição, de 18/10/2021 a 24/10/2021 ISBN dos Anais: 978-65-89908-10-4

VIANA; Sofia Wagemaker 1, GUERINI; Isadora Schwaab 2, LEITÃO; Brenda Gouvea Feres 3, MARIN; Maria Clara Soares 4, PITOSCIA; Gabriela Orlandi 5

RESUMO

SUMMARY:

BACKGROUND/ INTRODUCTION: The political and military conflicts in Afghanistan, as well as Taliban's advance in 2021, have significantly impacted the country's already fragile health infrastructure. The COVID 19 pandemic, the low vaccination rates and low population awareness significantly impact the access to quality health service.

OBJECTIVES: This abstract has the objective to inform the actual situation of Afghanistan during the Covid - 19 pandemic and measures that were taken.

METHODOLOGY: A literature review was done to identify articles that investigate the main effects of the covid 19 pandemic in Afghanistan and the consequences of the current political situation during the pandemic.

RESULTS: Besides the fragile political situation in Afghanistan, the major causes for the spreading of the Covid-19 virus were the lack of healthcare workers, insufficient basic needs (protective equipment, beds, oxygen supply) and high cost diagnosis.

DISCUSSION: A third wave of the Covid-19 pandemic could emerge in Afghanistan because the Taliban's military and political domination are causing a deficit in the healthcare capacity and imminent humanitarian crisis where 60% of cases were reported in June 2021 in Kabul from the Delta variant. Current, tests capacities are 4,000, and plans to increase the numbers are uncertain due to the Taliban regime, the result has been drastic for the healthcare system: bed shortages, lack of oxygen, low vaccination, and a decreasing in the number of healthcare workers1 The COVID-19 vaccinations are being delayed due the Taliban's overthrow. 1 Even though Afghanistan received 3,068,000 doses of vaccines and was expected to receive more than 2 million additional doses. A vaccine hesitancy phenomenon is widely seen in the country since only 63% of its population is willing to take the vaccine.³ All of these factors contribute to low vaccine coverage and a public health system crisis.4

BACKGROUND/INTRODUCTION: The COVID-19 pandemic in Afghanistan has already overwhelmed the public health system. However, this year's political and military conflicts involving the Taliban and their advance have further aggravated even more the country's fragile health care infrastructure. Adding up to this unstable situation, vaccination rates are low, such as the population's willingness to take the shot and different diseases are emerging in the country, turning the struggle to quality healthcare access even more difficult.

METHODS:

The Research was conducted by a literature review to identify studies that investigated the effect of the Covid-19 pandemic in Afghanistan and the influence of the Taliban regimen in the healthcare system, using databases PubMed and Google Scholar.

DISCUSSION AND RESULTS:

Afghanistan's public infrastructure has been negatively affected by wars and internal instability

 $^{^{1}}$ Kursk State Medical University / International Student Surgical Network of Brazil, sofiawagemakerviana@gmail.com

Universidade Estadual do Oeste do Paraná campus Francisco Beltrão, isadora guerini@outlook.com

³ Kursk State Medical University / International Student Surgical Network of Brazil, brenda.feres@gmail.com
⁴ Universidade Nove de Julho, mariacsmarin@uni9.edu.br

⁵ Faculdade Ceres, sofiawagemakerviana@gmail.com

during the previous few decades. Since the recent events regarding the United States and North Atlantic Treaty Organization (NATO) troops exiting Afghanistan territory, the situation has become even worse and degraded into a humanitarian crisis, and now the Taliban is the one ruling the entire country and has the responsibility of dealing with many issues, specially massive internal and external displacement of Afghan citizens and a public health crisis which was aggravated by the Covid-19 pandemics.

A third wave of the Covid-19 pandemic could emerge in Afghanistan because the Taliban's military and political domination are causing a deficit in the healthcare capacity and imminent humanitarian crisis where 60% of cases were reported in June 2021 in Kabul from the Delta variant. On June,16 2,313 cases were reported in one day, the highest number since the onset of the pandemic; from Sept 6, 2021, 153,534 COVID-19 positive cases have been reported, of whom 7,141 died.

. However, these numbers are not accurate due to the country's low testing capacity, with only 664,045 tests administered for a population of 40.4 million, the absence of a national death register, and weak infrastructure. Current, tests capacities are 4,000, and plans to increase the numbers are uncertain due to the Taliban regime, the result has been drastic for the healthcare system: bed shortages, lack of oxygen, low vaccination, and a decreasing in the number of healthcare workers¹, that could be related to the Taliban politics that prohibited women to work and the difficulties for Non-Governmental Organizations (NGOs) to stay in the country.² According to the World Health Organization (WHO), Afghanistan is one of the most vulnerable countries in the world, with 9.4 skilled health professionals and 1.9 physicians, per 10,000 population, with a disproportion in the distribution across the country with 7.2 physicians per 10,000 population in urban areas and only 0.6 physicians per 10,000 population in rural areas.⁵ Many Afghans do not have access to hospitals, the major reasons are because they are closed, destroyed, or never existed in the first place.

The COVID-19 vaccinations are being delayed due the Taliban's overthrow. 1 Even though Afghanistan received 3,068,000 doses of vaccines and was expected to receive more than 2 million additional doses. A vaccine hesitancy phenomenon is widely seen in the country since only 63% of its population is willing to take the vaccine.3 All of these factors contribute to low vaccine coverage and a public health system crisis.

Besides COVID-19 third wave, Afghanistan has been reporting cases of mucormycosis, a fatal angioinvasive disease transmitted by a fungus, which was first reported in India. 4 Polio was also a prominent cause of distress in the country since there were several cases reported during the pandemic.4

Most of the population lives in rural areas, which challenges health care access even more. The WHO, the Jack Ma Foundation, China, India, and other countries have slightly improved the treatment capability by donating protective equipment and ventilator, but without the appropriate training and the lack of physicians, the numbers of Covid infection in Afghanistan will continue to rise.5

CONCLUSIONS: One of the main issues during the Coronavirus pandemic in Afghanistan, besides the political crisis and the Taliban government, is the lack of basic needs, such as protective equipment, cheap diagnostic, hospital infrastructure, oxygen supply, and healthcare workers. With the decrease in the number of NGOs these needs were difficult to achieve. Leaving political and military issues aside, global health forces are needed to improve the situation. Calling for actions directed to and made by NGOs, and global institutions such as The International Committee of the Red Cross and World Health Organization, recruiting volunteers, and delivering health supplies provided by donations could make a difference considering the COVID-19 cases spike and the severity of the situation.

References:

1- Essar, M.Y., Hasan, M.M., Islam, Z. et al. COVID-19 and multiple crises in Afghanistan: an urgent battle. Confl Health 15, 70 (2021). https://doi.org/10.1186/s13031-021-00406-0

2-Maley W. Health care under the Taliban, Afghanistan. The Lancet. 1997;350(9079):743-744.

 $^{^{1}}$ Kursk State Medical University / International Student Surgical Network of Brazil, sofiawagemakerviana@gmail.com

Universidade Estadual do Oeste do Paraná campus Francisco Beltrão, isadora gu

³ Kursk State Medical University / International Student Surgical Network of Brazil, brenda.feres@gmail.com
⁴ Universidade Nove de Julho, mariacsmarin@uni9.edu.br

⁵ Faculdade Ceres, sofiawagemakerviana@gmail.com

3-Nemat, A., Bahez, A., Salih, M., Raufi, N., Noor, N. A. S., Essar, M. Y., Ehsan, E., & Asady, A. (2021). Public Willingness and Hesitancy to Take the COVID-19 Vaccine in Afghanistan, The American Journal of Tropical Medicine and Hygiene, 105(3), 713-717. Retrieved Oct 12, 2021, from https://www.ajtmh.org/view/journals/tpmd/105/3/article-p713.xml

4-Essar, M.Y., Khan, H., Babar, M.S., Hasan, M.M., Rackimuthu, S., dos Santos Costa, A.C., Ahmad, S. and Nemat, A. (2021), Mucormycosis, conflicts and COVID-19: A deadly recipe for the fragile health system of Afghanistan. Int J Health Plann Mgmt. https://doi.org/10.1002/hpm.3292

5-Mousavi SH, Abdi M, Zahid SU, Wardak K. Coronavirus disease 2019 (COVID-19) outbreak in Afghanistan: Measures and challenges. Infection Control & Hospital Epidemiology. Cambridge University Press; 2021;42(3):366-7.

PALAVRAS-CHAVE: public health, global health, covid-19, pandemic, afghanistan, crisis

 $^{{}^1\,\}text{Kursk State Medical University / International Student Surgical Network of Brazil, sofiawagemakerviana@gmail.com}\, {}^2\,\text{Universidade Estadual do Oeste do Paraná campus Francisco Beltrão, isadora_guerini@outlook.com}\,$

Kursk State Medical University / International Student Surgical Network of Brazil, brenda.feres@gmail.com
 Universidade Nove de Julho, mariacsmarin@uni9.edu.br
 Faculdade Ceres, sofiawagemakerviana@gmail.com