

---

# AFGHANISTAN

## Health at a glance



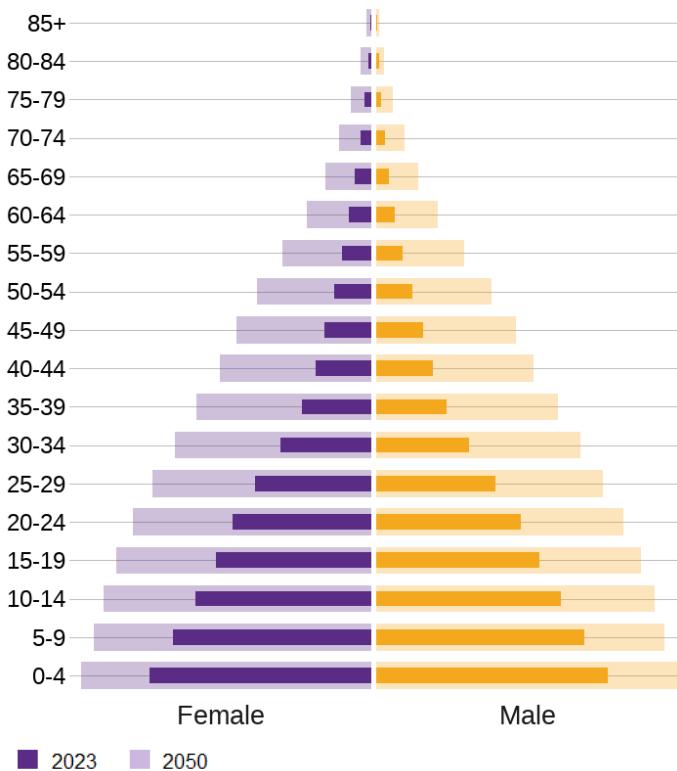
## Overview

In Afghanistan, the population as of 2023 is 41 454 761 with a projected increase of 85% to 76 885 135 by 2050.

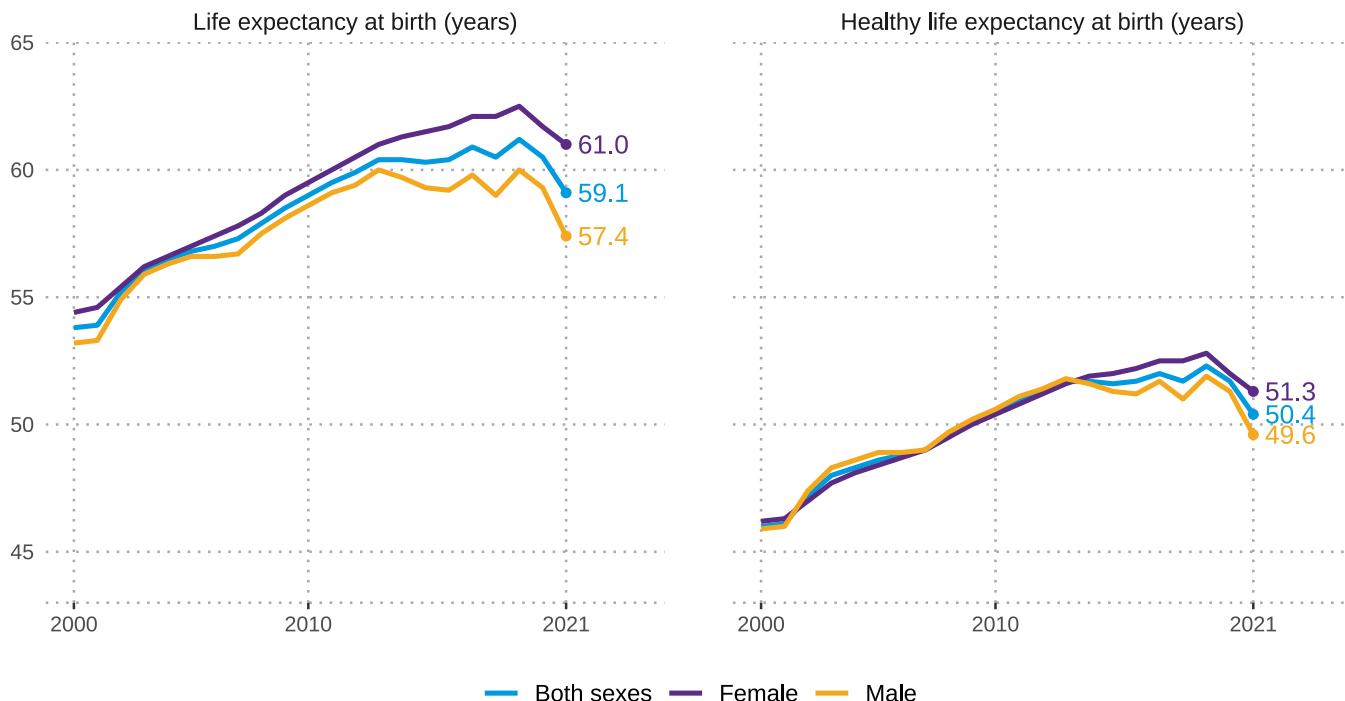
Life expectancy at birth (years) has improved by 7.4 years from 53.8 [52.8 - 54.9] years in 2000 to 61.2 [60.3 - 62.2] years in 2019. Since 2019, life expectancy has decreased to 59.1 [58.3 - 59.9] years.

Afghanistan had 340 540 total deaths in 2021; 39% of deaths were from communicable, maternal, perinatal and nutritional conditions; 34% were from noncommunicable diseases; 23% were from injuries; and 4% were from other COVID-19 pandemic-related outcomes.

### Demographic change, 2023-2050

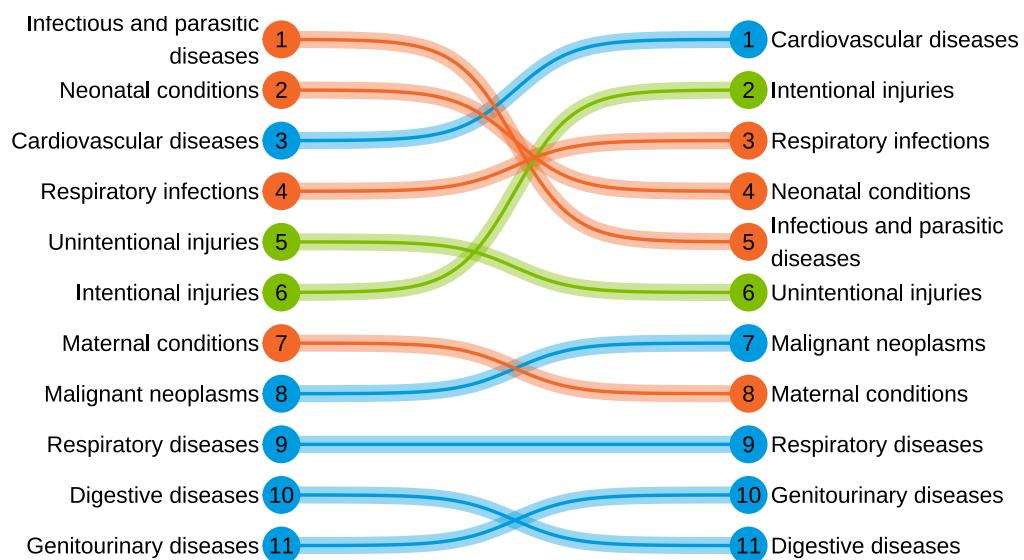


### Life expectancy and healthy life expectancy by sex, 2000-2021

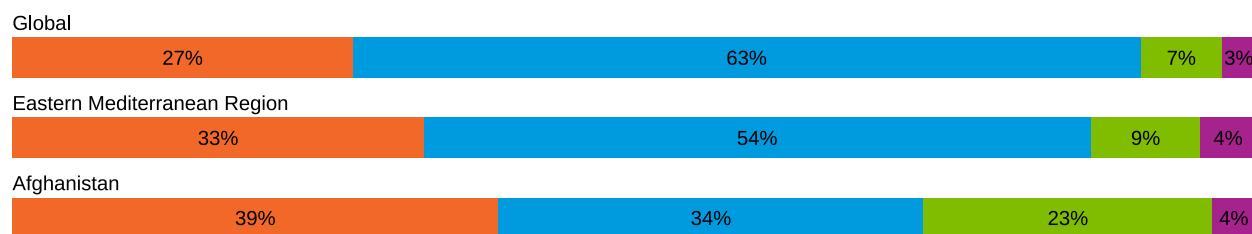


■ Communicable diseases ■ Noncommunicable diseases ■ Injuries ■ Other COVID-19 pandemic-related outcomes

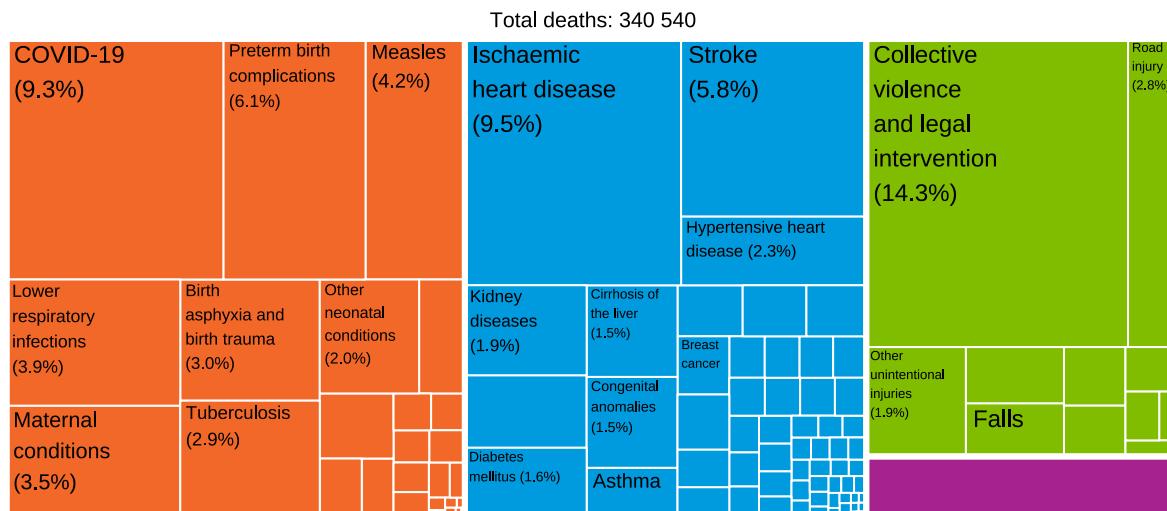
#### Top 10 level 2 causes of death, 2000-2021



#### Overall causes of death, 2021



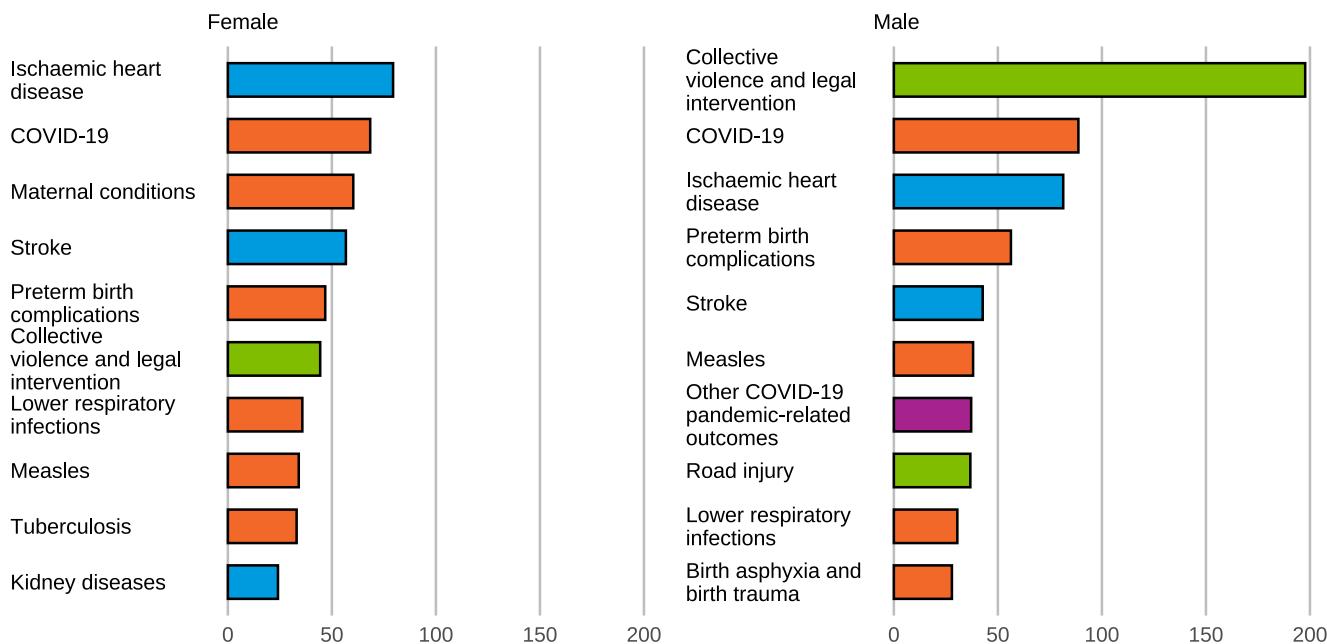
#### Detailed causes of death, 2021



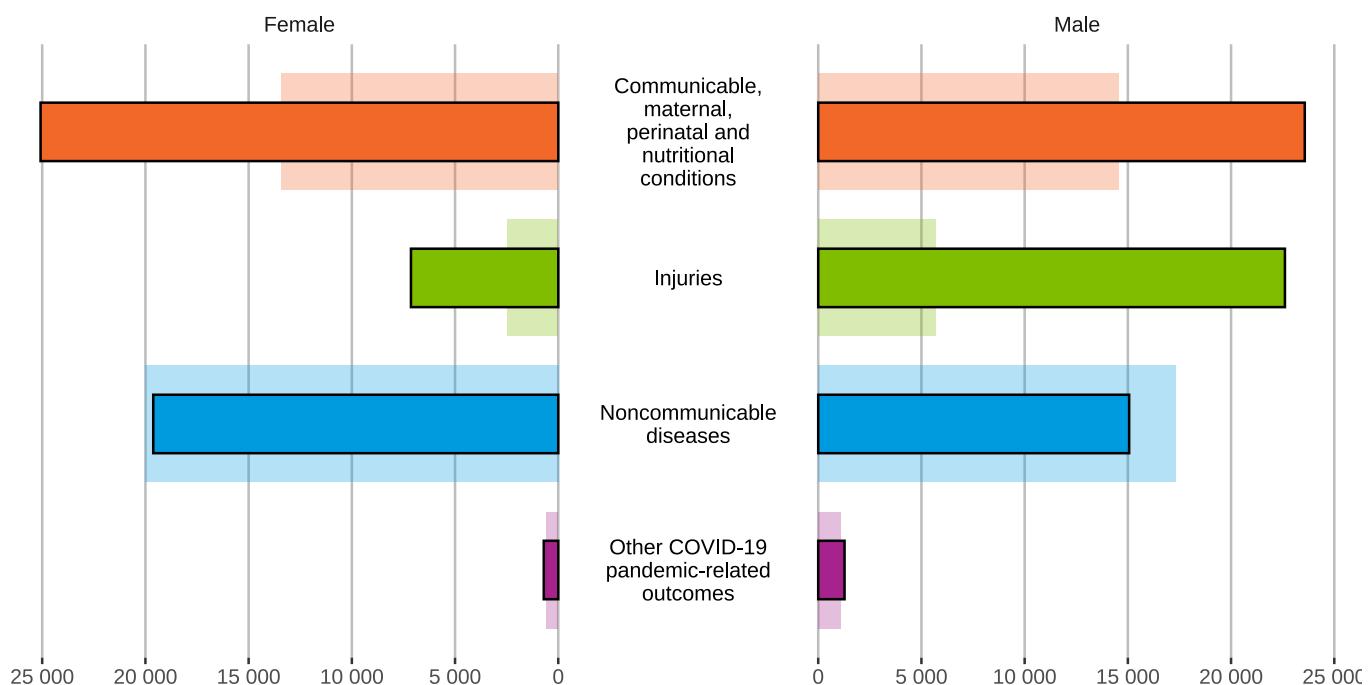
Note: Communicable diseases includes maternal, perinatal and nutritional conditions.

■ Communicable diseases ■ Noncommunicable diseases ■ Injuries ■ Other COVID-19 pandemic-related outcomes

#### Top 10 detailed causes of death by sex, 2021 (deaths per 100 000 population)

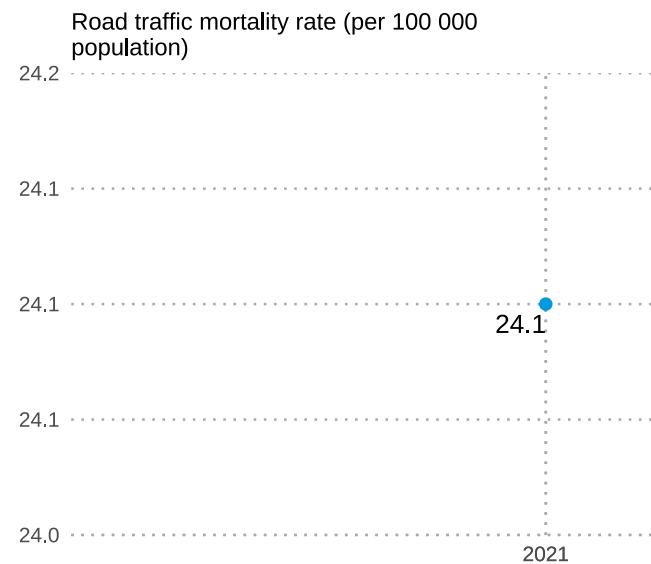
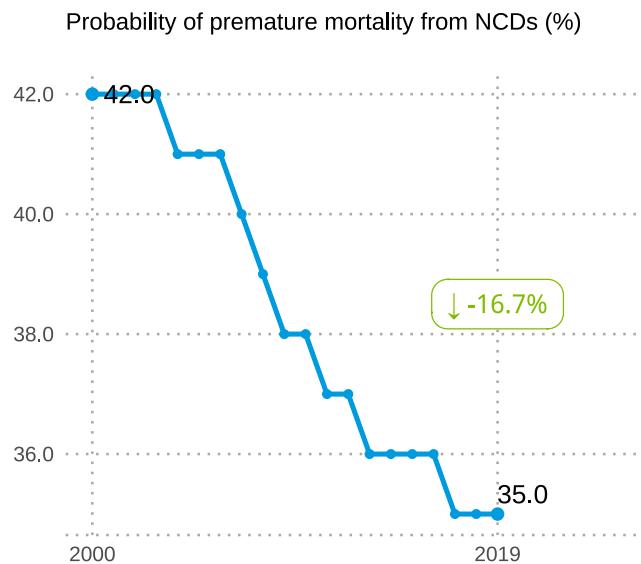
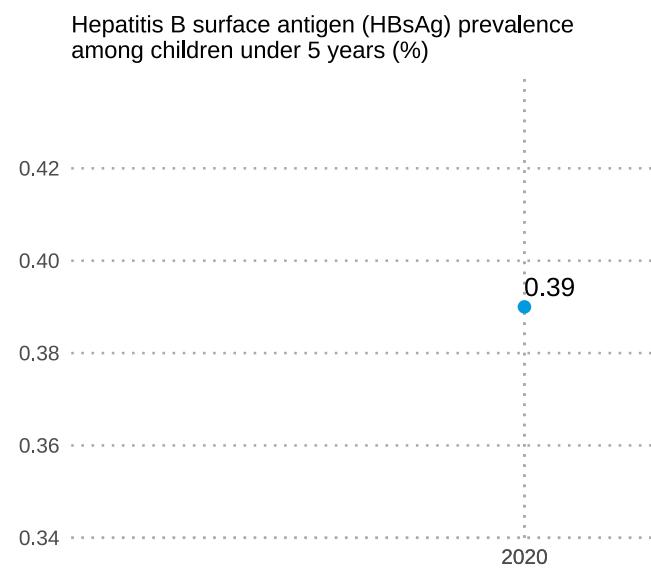
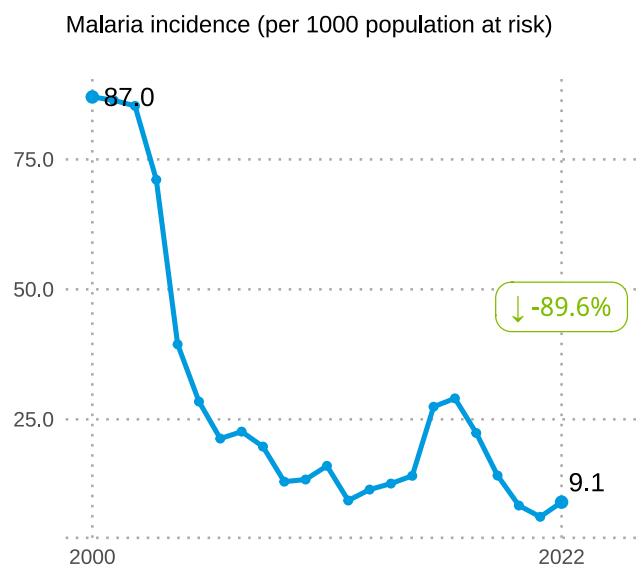
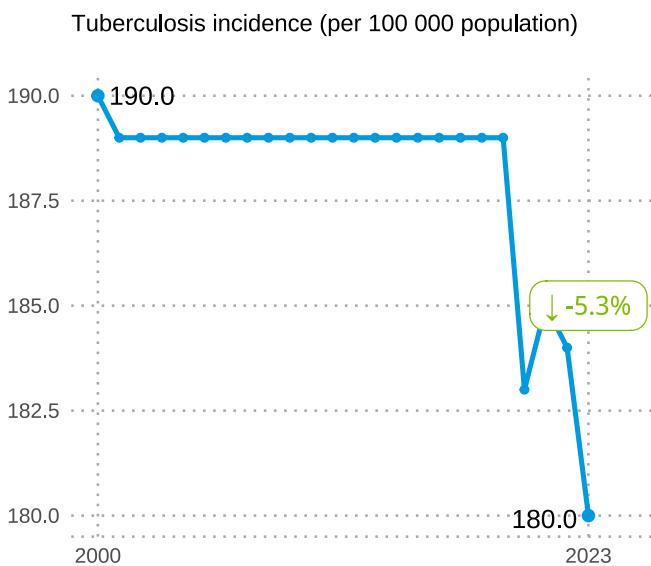
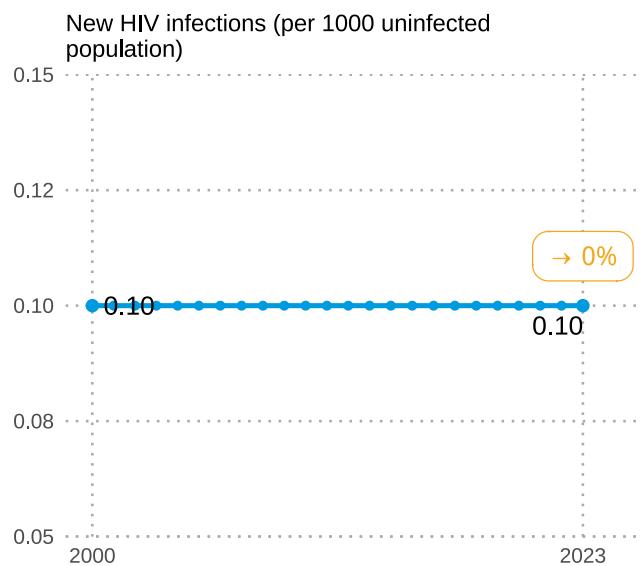


#### Disability adjusted life-years (DALYs) by sex, 2021 (DALYs per 100 000 population)



Eastern Mediterranean Region are the lightly shaded bars.

## Health Statistics: Health Status



Mortality rate from unintentional poisoning (per 100 000 population)



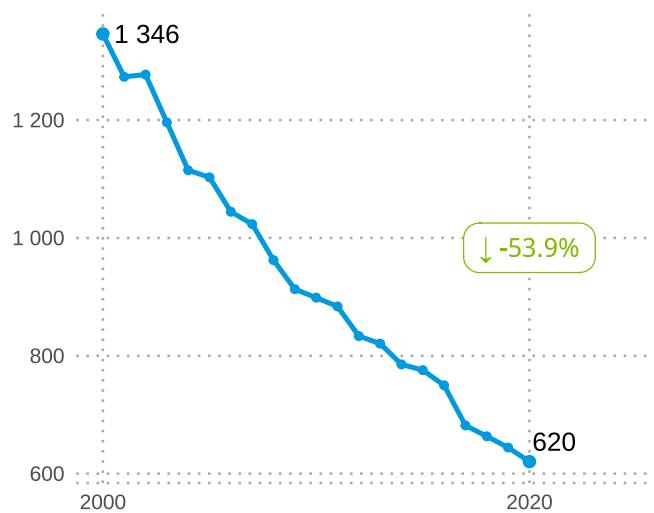
Suicide mortality rate (per 100 000 population)



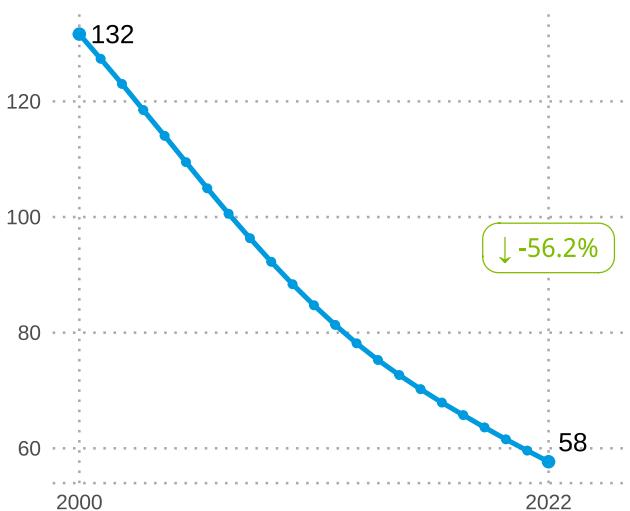
Mortality rate due to homicide (per 100 000 population)



Maternal mortality ratio (per 100 000 live births)



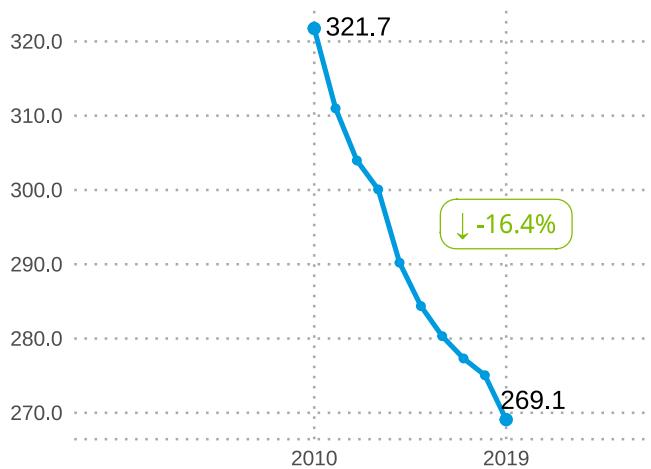
Under-five mortality rate (per 1000 live births)



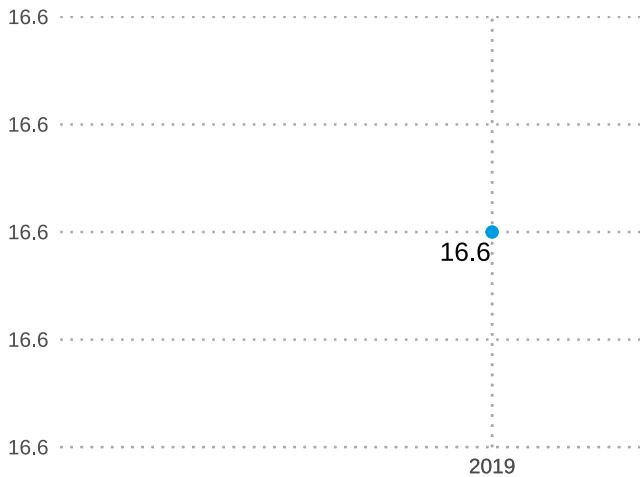
Neonatal mortality rate (per 1000 live births)



Age-standardized mortality rate attributed to household and ambient air pollution (per 100 000 population)

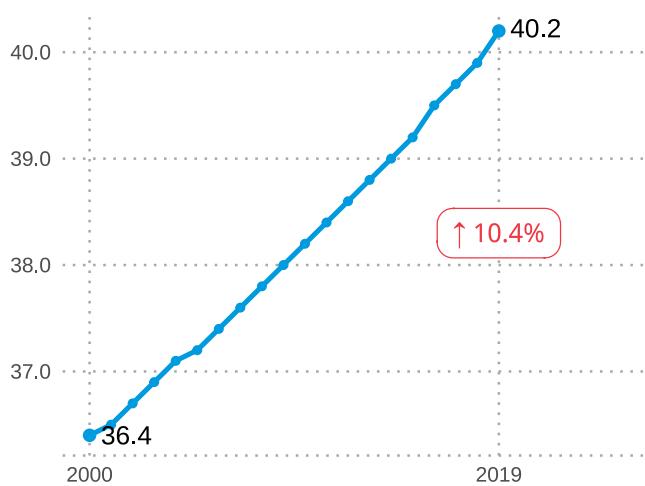


Mortality rate attributed to exposure to unsafe WASH services (per 100 000 population)

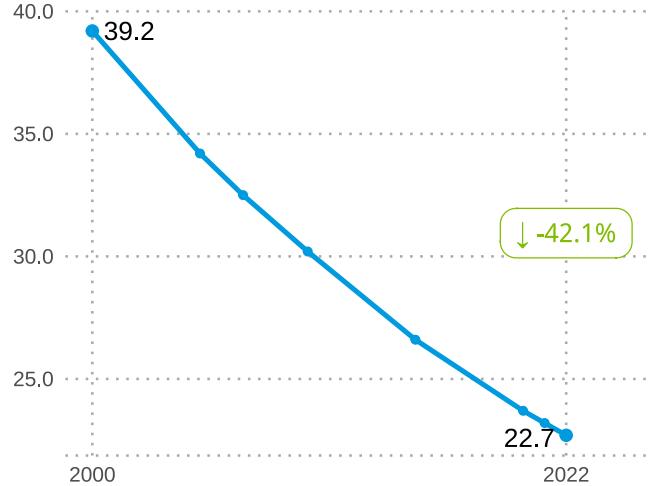


## Health Statistics: Risk Factors

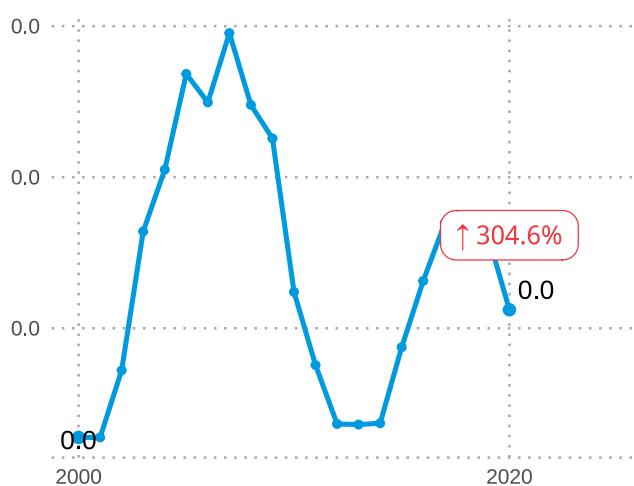
Age-standardized prevalence of hypertension among adults aged 30 to 79 years (%)



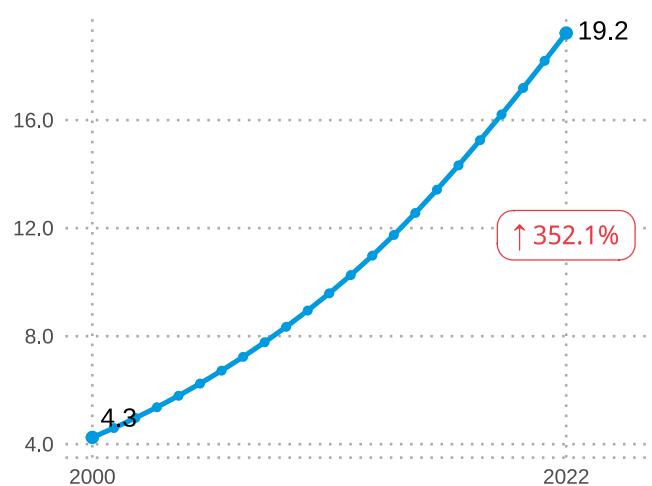
Age-standardized prevalence of tobacco use among persons 15 years and older (%)



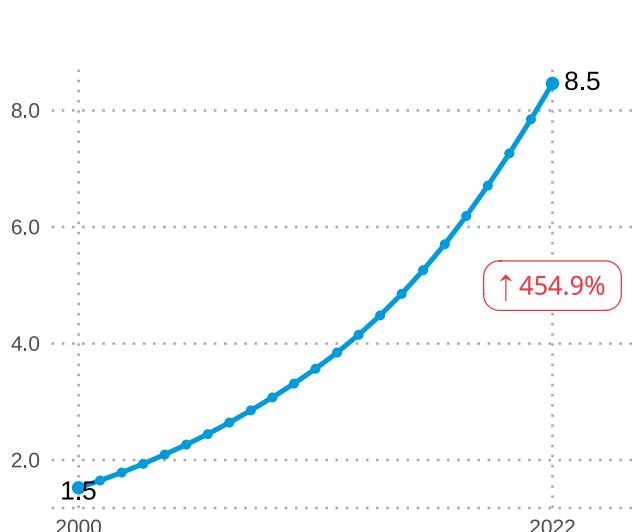
Total alcohol per capita (>= 15 years of age) consumption (litres of pure alcohol)



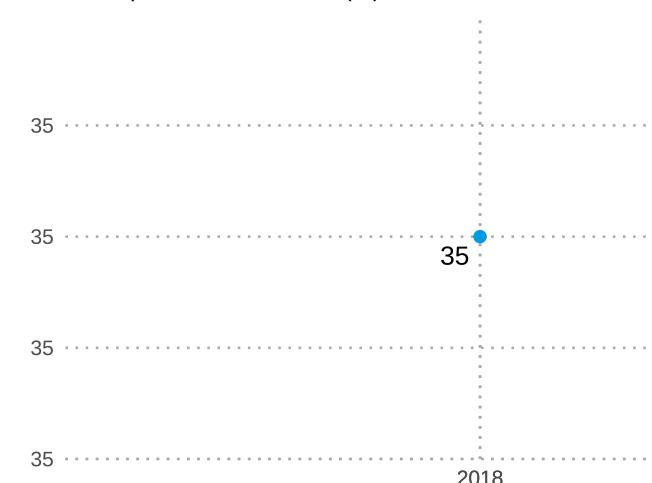
Age-standardized prevalence of obesity among adults (18+ years) (%)



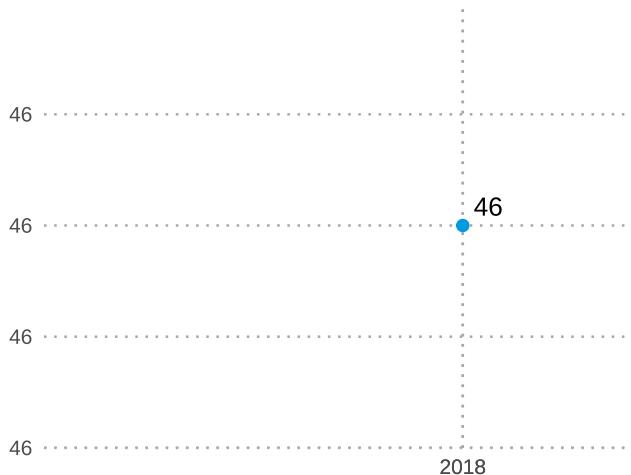
Prevalence of obesity among children and adolescents aged 5 to 19 years (%)



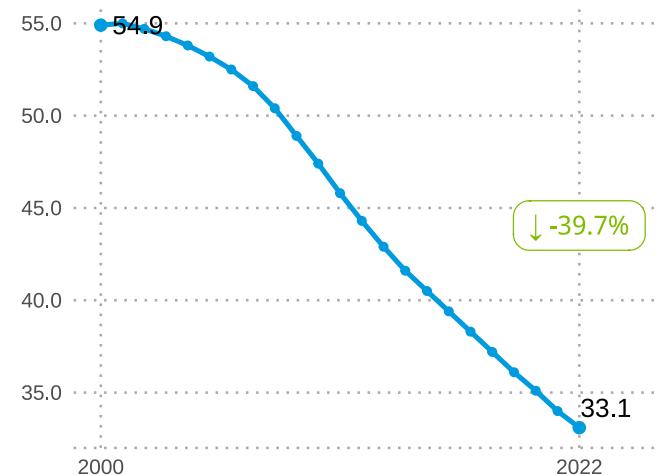
Proportion of ever-partnered women and girls aged 15– 49 years subjected to physical and/or sexual violence by a current or former intimate partner in the previous 12 months (%)



Proportion of ever- partnered women and girls aged 15– 49 years subjected to physical and/or sexual violence by a current or former intimate partner in their lifetime (%)



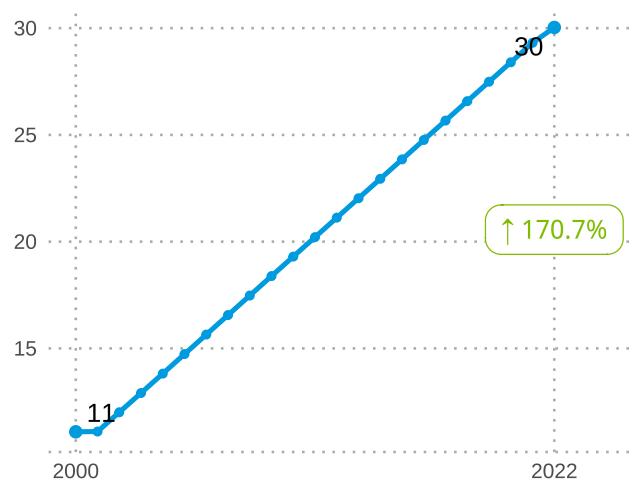
Prevalence of stunting in children under 5 (%)



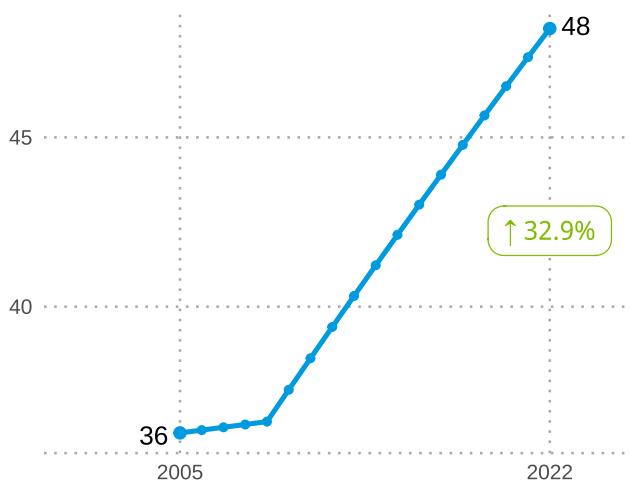
Prevalence of wasting in children under 5 (%)



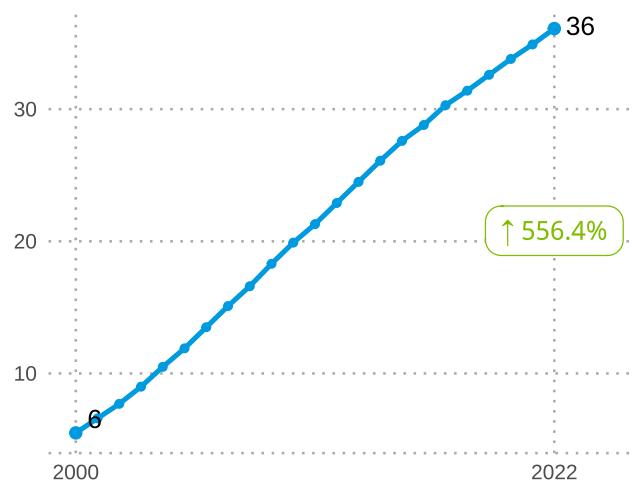
Proportion of population using safely managed drinking-water services (%)



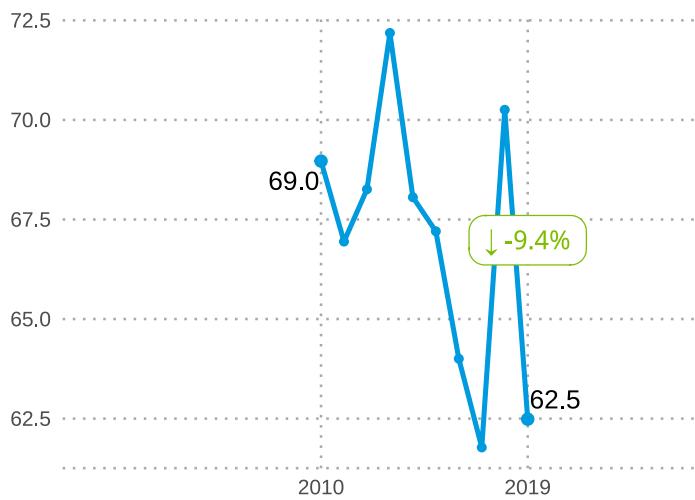
Proportion of population using a hand-washing facility with soap and water (%)



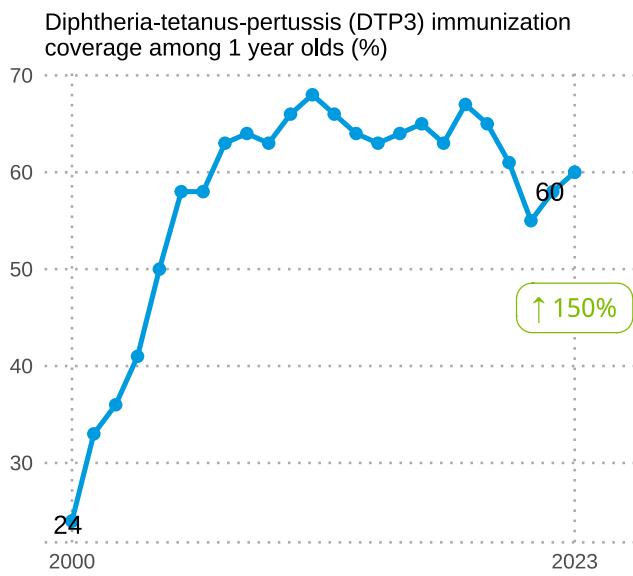
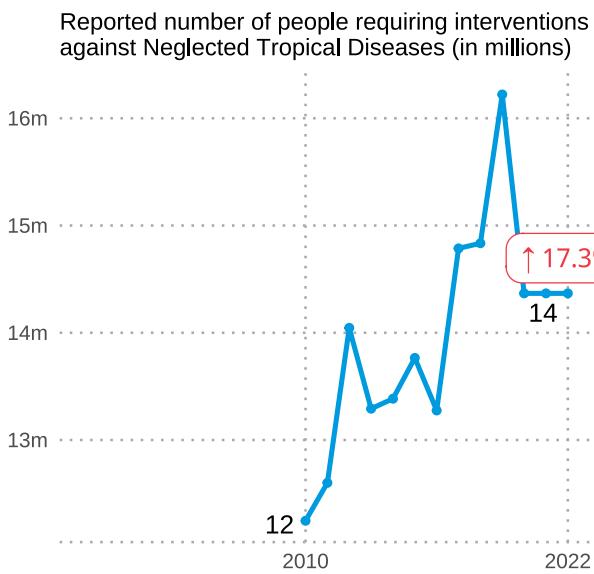
Proportion of population with primary reliance on clean fuels (%)



Annual mean concentrations of fine particulate matter (PM2.5) in urban areas ( $\mu\text{g}/\text{m}^3$ )



## Health Statistics: Service Coverage

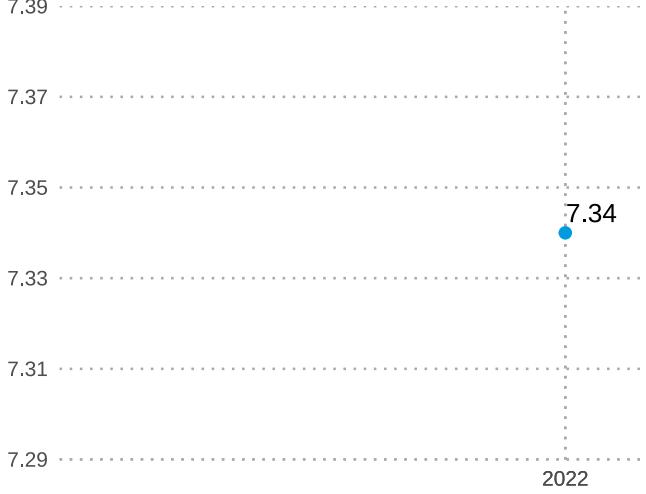


## Health Statistics: Health Systems

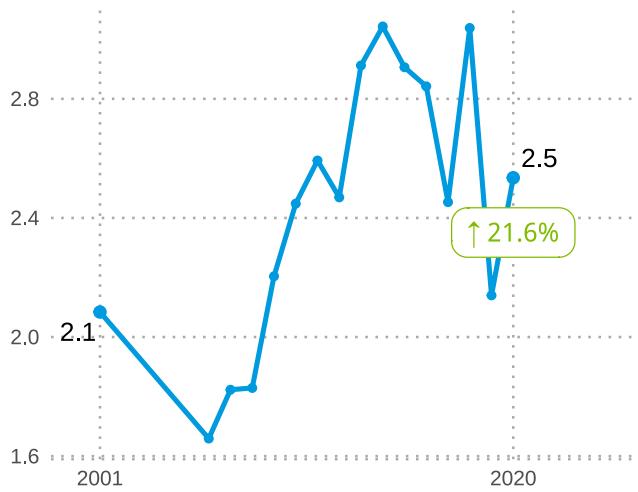
Domestic general government health expenditure (GGHE-D) as percentage of general government expenditure (GGE) (%)



Total net official development assistance to medical research and basic health per capita (US\$), by recipient country



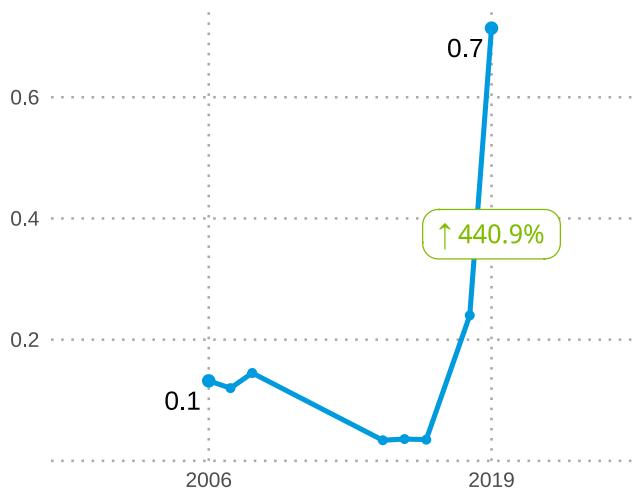
Density of physicians (per 10 000 population)



Density of nursing and midwifery personnel (per 10 000 population)



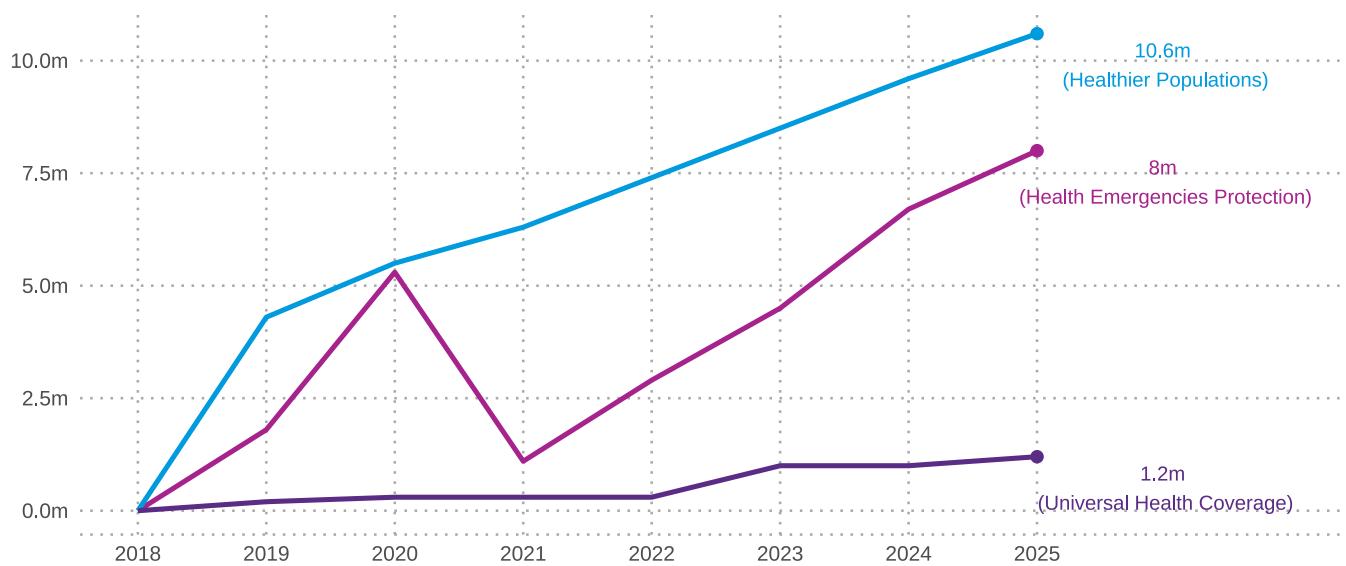
Density of dentistry personnel (per 10 000 population)



Density of pharmaceutical personnel (per 10 000 population)

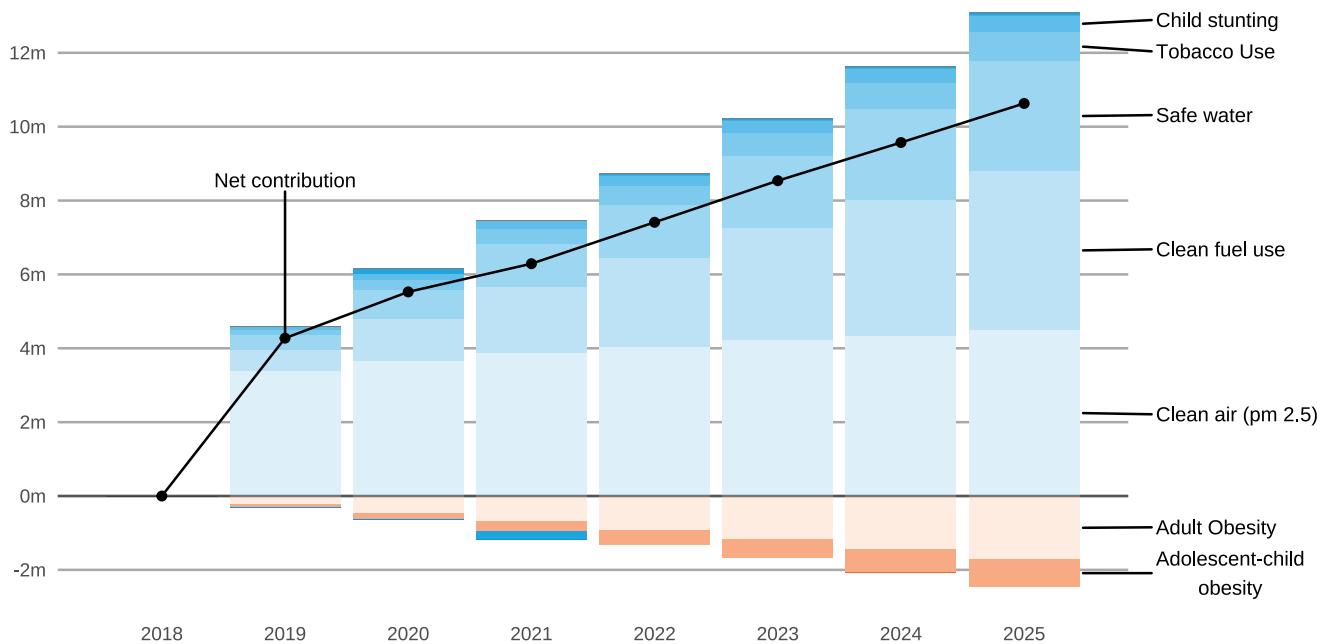


## Triple Billions - Number of people affected (millions)



In Afghanistan, by 2025 the number of additional people projected to be: enjoying better health and wellbeing is 10.6 million; covered by essential services and not experiencing financial hardship is 1.2 million; and protected from health emergencies is 8 million.

## Healthier Populations - individual indicator contributions (millions)



Other indicators below 1% of the total absolute contribution in 2025: Child violence, Child development, Sanitation service, Sanitation service - rural, Sanitation service - urban, Partner violence, Trans-fat policy, Child wasting, Safe water - rural, Safe water - urban, Alcohol consumption, Suicide mortality, Road deaths, Child overweight.

## Further Resources

[WHO Global country page](#)

[WHO Global website](#)

## Data Sources

Population data	UNDESA population division, World Population Prospects 2022 Extracted: May 2024
Current Health Expenditure (CHE) as % of GDP	World Health Organization, Global Health Expenditure database Extracted: August 2024
Life expectancy and Healthy life expectancy (HALE)	World Health Organization, Global Health Estimates Extracted: August 2024
Causes of death	World Health Organization, Global Health Estimates Extracted: August 2024
Disease Burden	World Health Organization, Global Health Estimates, Burden of Disease Extracted: August 2024
Sustainable Development Goals (SDG) Indicators	World Health Organization, The Global Health Observatory
Triple Billion	World Health Organization, Global Progress Dashboard, Triple Billion targets

Date created: 09/12/2024  
<https://data.who.int/countries/004>

Disclaimer: Any designations employed or presentation by the user in its use of this website, including tables and maps, do not imply the expression of any opinion whatsoever on the part of the World Health Organization concerning the legal status of any country, territory, city or area or of its authorities, or concerning the delimitation of its frontiers and boundaries.