



Afghanistan – Researched and compiled by the Refugee Documentation Centre of Ireland on 19 May 2016

Availability of medical treatment generally in Afghanistan and specifically for treatment of depression.

A report from the Open Society Foundations states:

“Mental health service provision is woefully inadequate throughout Afghanistan. Kabul is home to the one hospital dedicated to mental health care in the country. Professionals are scarce, and stigma towards those suffering from mental illnesses is high.” (Open Society Foundations (30 September 2015) *Open Society Scholars Bring Mental Health Services to Afghanistan*)

A report published by the UN High Commissioner for Refugees, in a section titled “Access to Health services” (section 3.5), states:

“According to the Ministry of Public Health and National Risk and Vulnerability Assessment 2011-12, there has been important progress in access to healthcare since 2002, although some indicators remain among the worst in the world. In addition, according to the Asia Foundation Survey in 2015, nearly 50% of respondents say they are somewhat or very satisfied with their access to clinics and hospitals, and 42.4% report satisfaction with their access to medicine. Among rural Afghans, just 44.3% of respondents are satisfied with clinics and hospitals in their area, while 38.3% are satisfied with access to medicine.” (UN High Commissioner for Refugees (UNHCR) (April 2016) *UNHCR Afghanistan: Voluntary Repatriation to Afghanistan - 2015. Key Findings of UNHCR Return Monitoring, 01 January – 31 December 2015*, p.9)

This section of the report also states:

“Returnee monitoring confirms the essence of other surveys and demonstrates that the availability of and access to health services for returnees is similar to the general population. When returnees were asked ‘where do you go if you or one of your family members is unwell?’ the majority (nearly 80%) have mentioned that they will approach a government medical facility (either local clinic, district, provincial or regional hospitals), while nearly 20% said that they will go to a private health service provider. However, a number of respondents cited issues around of the quality and quantity of medicine, and the presence (or lack thereof) of female personal or equipment in some of the health centers. Similar concerns were also highlighted in the NRVA 2011/12 report. The report specifically indicates that cultural responsiveness of the health sector – for instance in terms of provision of female health care providers – remains an important obstacle for the effective use of health care, especially by women. In addition, costs for health services and treatment are prohibitive for many households, in particular for poor

households. In addition, health care provision is unequal between urban and rural population.” (ibid,p.9)

The introduction to an IRIN News report states:

“The cost of health care is throwing many poor Afghans into a cycle of debt. While most now have access to basic public health care, the quality is so low that many patients seek out private services at a higher cost than they can afford - driving some of them further into poverty.” (IRIN News (2 July 2014) *Stark choice for many Afghans: sickness or debt*)

This report also states:

“Even though nearly 40 percent of the population lives below the poverty line and unemployment hovers between 35 and 40 percent, reports dating back to 2006 show the vast majority of the population rely heavily on private health care. Two in three people who described their household as ‘poor to extremely poor’ in the MSF survey (living on US\$1 a day or less) had paid an average of \$40 for health care during a recent illness. One in four spent more than \$114. ‘Most people seek private services over governmental ones because their services are of higher quality,’ said Mohammad Amin, a supervisor at Ahmed Shah Baba Hospital. ‘And if you compare people’s income to the cost of the health services, the cost is higher than their income.’” (ibid)

An Institute for War & Peace Reporting article on the mental health situation in Afghanistan states:

“Experts say that more than three decades of conflict, poverty and other associated social problems have fuelled a mental health crisis in Afghanistan, with women bearing the brunt of the problem. ‘I can confidently say that the problem is increasing among women,’ said Bashir Ahmad Sarwari, the director of the mental health department at the ministry of public health. The last comprehensive survey was carried out in 2004 and found that 68 per cent of respondents suffered from depression, 72 per cent from anxiety and 42 per cent from post-traumatic stress disorders. Sarwari said that based on anecdotal evidence, he believed that rates of psychological illness among women were rising year by year. Although the ministry had set up clinics across the 34 provinces of the country to treat psychological problems, there was only one dedicated mental health hospital in Kabul.” (Institute for War & Peace Reporting (12 May 2016) *Afghan Women Hit by Mental Health Crisis*)

An article from the Institute for War & Peace Reporting states:

“Events in Logar, Khost, Uruzgan and Paktika provinces heard that medical care tended to be concentrated in cities, leaving many people in isolated parts of the country struggling to access help.” (Institute for War & Peace Reporting (12 January 2016) *More Doctors Needed in Afghan Districts*)

Referring to Logar province this report states:

“The population of Logar province is high, but the number of healthcare centres are low,’ added Abdul Rahman Tawakuli, head of the regional council in the eastern province. ‘And what health clinics we currently have don’t have

sufficient medicine.’ Ashiqullah Majidi, head of Logar’s central hospital, said that there were 50 health centres spread across the province, but agreed that these were not enough to meet public health needs.” (ibid)

This report also states:

“In southeastern Paktika, provincial health council head Sayedullah agreed that there was a local health crisis. He noted that there was only one female doctor covering the entire province. ‘Paktika is a large province. However, in most places, the healthcare services offered are almost non-existent,’ he said. Sayedullah added that the province had been long neglected when it came to infrastructure development and there was a desperate need for doctors.” (ibid)

See also article from the Institute for War & Peace Reporting which states:

“With health professionals and medicines in short supply, falling ill in rural Afghanistan is always bad news. But it is a particular problem in Uruzgan province’s Dehrawud district, which has just two doctors to provide for tens of thousands of people. There one male and one female doctor and three female nurses in this part of central Afghanistan, in a province that is one of the country’s least developed. The lack of care means sick people and pregnant women have to travel 40 kilometres east to the provincial capital Tarin Kowt, or to Kandahar to the south, though some die on the way.” (Institute for War & Peace Reporting (3 May 2012) *Healthcare Crisis in Central Afghan District*)

An article from the German international news broadcaster Deutsche Welle, in a paragraph headed “Lack of support”, states:

“Kabul psychiatric hospital is the only clinic of its kind in the whole of the Afghan capital. It’s a government hospital and provides free checkups. Dozens of patients can be accommodated and are looked after by Dr Sima. ‘We do not treat the severely handicapped,’ she says. ‘Such children in Afghanistan have no chance of going to a school either. It’s already a big achievement if they learn the simplest things.’” Dr Sima is unhappy that the government and NGOs do not have any special programs for severely disabled people who face social discrimination. She thinks the level of acceptance for mental problems is far too low. A mental handicap is seen as a major deficit, she says. Most of the mentally disabled, such as Mohammad and Fereshta, have to live with the stigma of ‘madness’ and vegetate through life in loneliness and squalor.” (Deutsche Welle (18 December 2012) *Mental illness is rampant in Afghanistan*)

An article published on the Afghanistan and Pakistan based news website Afghanistan Today states:

“These days, Thuraya is in a safe environment, a recovering mental health patient in Herat city. Housing around 260 patients with serious mental health problems, the hospital is the largest of its kind in the country. It was founded shortly after the fall of the Taliban regime and is financed by the Red Crescent in Western Afghanistan. The hospital is one of few places in the country where patients can seek treatment for psychiatric problems caused by trauma and decades of war. Nevertheless, the doctors who work here say

it remains understaffed and underfunded. More than half of Afghans suffer from 'mental health problems', according to Ministry of Public Health statistics. Doctor Basheer Ahmad Sarwari, head of the Mental Health Section at the Afghan Ministry of Public Health, placed the number of mentally troubled Afghans at 60-65 per cent. Based on a 2004 assessment, 59.1 per cent of men and 73.4 per cent of women suffer from depression. In addition, 93.3 per cent of men and 83.5 per cent of women suffer from anxiety. Extreme depression is one of the most common diagnoses." (Afghanistan Today (4 July 2014) *War on the mind*)

An article from the New York Times states:

"The mental burden of the violence continues to weigh down every sector of Afghan society as the war and Western presence here continue into their 14th year, and the country's nearly perpetual conflicts move into a fourth decade. Beyond that, the stress of upheaval and economic desperation has exacerbated already rampant problems with domestic abuse and drug addiction, with women often bearing the brunt. 'For us, it has become a vicious cycle of repeated traumatic experiences over years and years,' said Dr. Suraya Dalil, a former Afghan minister of health. 'It's been too much, not only on individuals, but also on the society, which is just waiting for a spark to let out the anger.' No recent figures are available, but surveys conducted nearly 10 years ago found that symptoms of depression, anxiety and post-traumatic stress disorder were widespread, and officials say the situation has probably gotten worse. One study published with the National Institutes of Health in the United States found that 62 percent of Afghan respondents had experienced at least four traumatic events in the preceding 10 years, with women reporting an even higher rate." (New York Times (14 July 2015) *For a Therapist in Afghanistan, Empathy Is Good Medicine*)

A report published by the UN Assistance Mission in Afghanistan, in a section headed "Health Facilities", states:

"In 2015, UNAMA and UNICEF documented 20 health workers killed and 43 injured in Logar, Nangarhar, Balkh, Kandahar, Paktya, Ghazni and Kunduz. The vast majority of casualties resulted from an airstrike carried out by United States forces against a Médecins Sans Frontières (MSF) hospital in Kunduz on 3 October 2015, in which 49 medical personnel were killed or injured. In 2015, UNAMA and UNICEF documented 66 abductions of health workers – more than twice the number of abductions documented in 2014 (31 abductions) and six times more than in 2013 (10 abductions). Except for one incident attributed to a pro-Government militia, UNAMA and UNICEF attributed all incidents recorded between 2013 and 2015 to Anti-Government Elements. The ripple effect of attacks against health workers included loss of service delivery and damaged facilities, jeopardizing the lives and well-being of people requiring health services and further weakening the already stretched health services available in Afghanistan." (UN Assistance Mission in Afghanistan (UNAMA) (April 2016) *Education and Healthcare at Risk: Key trends and incidents affecting children's access to healthcare and education in Afghanistan*, p.10)

An article from the Afghan English-language newspaper Daily Outlook Afghanistan states:

“The aggressiveness of the war caused a lot of physical disability among men. This caused depression, panic attacks, phobias, and anxiety disorders, primarily Post-traumatic Stress Disorders or PTSD. Moreover schizophrenia is one of the most common neuropsychiatric disorders among young males (and females), which is usually due to the unsettled environment they live in. The prevalence of mental disorders is recognized by medical personnel and people themselves. The high number of admissions of patients with mental disorders in different hospitals and shrines to seek traditional treatment shows how prevalent mental health problems are. To conclude, the continuous war in Afghanistan has caused deep psychological scars and mental problems. In addition, a lack of mental health services increased the incidence and intensity of mental problems.” (Daily Outlook Afghanistan (28 March 2012) *The Stigma of Mental Disorders in Afghanistan*)

A report from Radio Free Europe/Radio Liberty states:

“Decades of war, widespread poverty, and societal restrictions can take a toll on the mind, making Afghanistan uniquely suited as an incubator for mental illness. But while the factors are numerous, the path to treatment is fraught with obstacles ranging from the shame felt by family members, to age-old traditions that compete with modern methods, and a deficiency of professionals and facilities equipped to deal with the situation. Among the mental illnesses affecting Afghans most are depression, anxiety, and posttraumatic stress disorder, but precise statistics are difficult to pin down. One frequently mentioned figure estimates that 60 percent of the population is affected by some form of mental illness. Other estimates range from around the 15 percent range to as high as 98 percent.” (Radio Free Europe/Radio Liberty (3 May 2012) *Little Succor For Afghanistan's Mentally Ill*)

A report from Reuters states:

“The concept of mental illness is alien to many in Afghanistan, where the public health system, like much of the country's infrastructure, has been wrecked by decades of war. Frequently, people suffering psychological disorders are thought by their families to be under the influence of malign spirits, or showing symptoms of a physical ailment. The Kabul hospital, which has 60 beds for in-patients and another 40 in a separate facility for drug addicts, is run by the government in partnership with U.S.-based nonprofit group the International Medical Corps. It gets funding from the European Union. Psychologists working there say children who have known nothing but fighting since the U.S.-led overthrow of the Taliban government more than a decade ago are especially vulnerable.” (Reuters (16 November 2012) *Relentless Afghan conflict leaves traumatized generation*)

An Agence France Presse report states:

“Qasim is suffering from post traumatic stress disorder, an affliction he shares with half of his fellow Afghans, according to the director of the health ministry's mental health department, Doctor Bashir Ahmad Sarwari. ‘Two out of four Afghans suffer from trauma, depression and anxiety -- they make up some 50 percent of the population,’ he told AFP. ‘They are in trauma mainly because of three decades of war, poverty, family disputes and migration issues.’ Sarwari says that although the number of mental health specialists is growing -- there are now about 70 -- they cannot cope with the demand for

treatment in a population of some 30 million people. Hospital facilities are also pitiful -- there is just one state-run mental health hospital with 100 beds, backed by small care centres in some private hospitals. But that is also an improvement. After the fall of the hardline Islamist Taliban government in the 2001 US-led invasion, there were no mental health services at all." (Agence France Presse (24 January 2012) *Mental trauma takes huge toll in Afghan war*)

An article from the (Institute for War & Peace Reporting states:

"Emal Sapai, a doctor at the Kabul Psychiatric Hospital, told IWPR in a telephone interview that as many as 90 per cent of all Afghans had suffered mental health problems, and conflict, poverty and unemployment were among the main causes. People affected directly by war, for example those caught up in serious attacks, risk developing anxiety disorders which can lead to severe depression. He estimated that between 25 and 30 per cent of Afghans suffered from this." (Institute for War & Peace Reporting (18 February 2015) *Afghans Discuss Trauma of War*)

This response was prepared after researching publicly accessible information currently available to the Research and Information Unit within time constraints. This response is not and does not purport to be conclusive as to the merit of any particular claim to refugee status or asylum. Please read in full all documents referred to.

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