



Islamic Emirate of Afghanistan
Ministry of Public Health

Household (77%)

Donor (19.6 %)

Gove (3.4%)

Afghanistan National Health
Accounts, 2019

Dec 2021



Ministry of Public Health

Afghanistan National Health Accounts (NHA) - 2019

Developed using the SHA 2011 Methodology

Dec 2021

Table of Contents

List of Tables:	ii
List of Figures:	ii
Acronyms	iii
Acknowledgments.....	v
Key findings.....	vi
I. Introduction.....	1
II. Method	1
III. Findings.....	3
A. Trends in health expenditure	3
B. Summary of Health Expenditure across Six Rounds of NHA	3
C. Trend of health financing schemes across six rounds of NHA.....	5
D. Financing Schemes.....	6
E. Healthcare Providers	7
F. Health Expenditure by Functions.....	8
G. Health Expenditure by Diseases	8
H. Expenditure by Age Groups.....	9
I. Expenditure by Gender	9
J. Health Expenditure by Factor of Provision.....	9
IV. Recommendations.....	11
V. Annex. National Health Accounts Tables, extracted from the NHA Production Tool	12
A. Financing Schemes by Revenues of Health Care Financing Schemes at (HF X FS) US Dollars, 2019	12
B. Health Care Providers by Financing Schemes (HP X HF) US Dollars, 2019	13
C. Financing Scheme by Health Care Functions (HF X HC), 2019	15
D. Health Expenditure by Disease, 2019	18
VI. References.....	24

List of Tables:

Table 1: Summary of Health Expenditure Across six Rounds of NHA in Afghanistan	3
Table 2: Summary of percentage of sources of funds across Six Rounds of NHA in Afghanistan	5
Table 3: Breakdown of CHE by revenue of financing schemes in 2019	6
Table 4: Health expenditure by health care providers in 2019	7
Table 5: Breakdown of the CHE by health function in 2019	8
Table 6: Health expenditure by category of diseases in 2019	8
Table 7: Health expenditure by age groups in 2019	9
Table 8: Health expenditure by gender (Male and Female) in 2019	9
Table 9: Health Expenditure by Factor of Provision in 2019	10

List of Figures:

Figure 1. Trend of the total health expenditure in 2019	3
<i>Figure 2. Trend of health expenditures by source of financing scheme across six round of NHA</i>	5
Figure 3. Breakdown of expenditure by revenue of financing schemes in 2019	7

Acronyms

AFN	Afghanis
ARI	Acute Respiratory Infection
ARCS	Afghan Red Crescent Society
BPHS	Basic Package of Health Services
CHE	Current Health Expenditure
CIDA	Canadian International Development Agency
EPHS	Essential Package of Hospital Services
EU	European Union
GAVI	The Global Alliance for Vaccines and Immunization
GF	Global Funds
GDP	Gross Domestic Product
HEFD	Health Economics and Financing Directorate
HH	Household
ICRC	International Committee of the Red Cross
IEC	Information, Education, and Communication
IPD	Inpatient Department
MoD	Ministry of Defense
MoE	Ministry of Education
MoF	Ministry of Finance
MoHE	Ministry of Higher Education
MoI	Ministry of the Interior
MoPH	Ministry of Public Health
MoLSA	Ministry of Labor and Social Affairs
NGO	Nongovernmental Organization
NHA	National Health Accounts
NSIA	National Statistic and Information Authority
OECD	Organization for Economic Cooperation and Development
OOP	Out-of-Pocket

OPD	Outpatient Department
RH	Reproductive Health
SBA	Skilled Birth Attendant
SHA	System of Health Accounts
TB	Tuberculosis
THE	Total Health Expenditure
TIKA	Turkish International Cooperation and Development Agency
UNFPA	United Nations Population Fund
UNICEF	United Nations Children's Fund
USAID	United States Agency for International Development
USD	U.S. Dollar
UHC	Universal Health Coverage
WFP	World Food Program
WHO	World Health Organization

Acknowledgments

The development of the sixth round of Afghanistan National Health Accounts (NHA) for the financial year of 2019 was only possible with the support of numerous individuals and agencies. This round of NHA is produced based on the System of Health Accounts (SHA 2011). We express our sincere gratitude to those who have made significant contributions toward accomplishing this important endeavor.

We would like to express our appreciation to Dr. S. M. Karim Alawi, Head of Resource Tracking Unit & Adviser on Urban Health Project of MOPH for his leading role and his tireless efforts in producing this report. Our appreciation also goes to National Health Accounts' officers. Ms Yasamin Mahraie, Ms. Sadia Seddiqi, and Mr. Najeebullah Abed for their contribution to the production of this round of NHA.

Special thanks also extended to Dr. Khawaja Mir Ahad Saeed Director of Health Economics and Financing Directorate (HEFD) for overseeing the entire NHA process.

Finally, we acknowledge and highly appreciate the World Health Organization for their substantial technical and financial support throughout the entire process of data collection, analysis and finalization of this report, particularly the worthy technical support of Dr. Mir Najmuddin Hashimi, National Technical Officer for Health Financing, in WHO Country Office.

Sincerely

Dr. Mohammad Hassan Ghiassy

Deputy Minister of Policy and planning

Ministry of Public Health

Kabul – Afghanistan

December-2021

Key findings

- The Total Health Expenditure (THE) and Current Health Expenditure (CHE), which excludes the capital expenditure from THE, in Afghanistan in 2019 are estimated at USD 2,863,772,376.2 and 2,801,548,543.3 respectively.
- Per capita total health expenditure on health in Afghanistan in 2019 is estimated at USD 88.9 and current health expenditure per capita is USD 86.9
- THE as percentage of GDP is 16.1% and CHE as percentage of GDP is estimated at 15.7%
- Government budget allocated to health in 2019 is USD 93,890,950.23 (3.4 % of CHE).
- The donor's expenditure on health in 2019 is estimated at USD 555,553,713.5 19.6% of CHE).
- Household out-of-pocket expenditure in 2019 is estimated at USD 2,152,103,879.54 (77.0% of CHE).
- Expenditure on retail sale and other providers of medical goods is estimated at USD 1,169,918,552 (41.8% of CHE)
- Expenditure on hospitals is estimated at USD 355,544,117 (12.7% of CHE).
- Expenditure on providers of ambulatory health services is estimated at USD 319,276,110 (11.4% of CHE).
- Expenditure on curative both inpatient and outpatient are estimated at USD 127,843,066.8 (4.6% of CHE) and USD 409,667,774.9 (14.6% of CHE), respectively.
- Expenditure on prevention and public health services is estimated at USD 180,618,100.0 (6.4% of CHE).

I. Introduction

Afghanistan has made improvement in the economic and service provision in since the year 2000. As per Afghanistan Statistical Yearbook 2019, the GDP was USD 17.8 billion. Afghanistan's total population in 1398 (2019) is estimated at 32.2 million, of which 51 % are men and 49 % are women. Afghanistan's population is very young; 47.7 percent (15.4millions) of the population are under the age of 15 years, and the population aged 65 and above accounts for around 2.7 percent. This young population contributes to a very high dependency ratio. The average household size was 7.7 in 2019, and the life expectancy at birth was 64 years for men and 67 for women in 2019(1).

The Afghanistan National Health Accounts (NHA) study was undertaken to track the flow of funds in the health sector for the year 2019 and compare this round of findings with the previous five rounds of NHA. NHA is an important tool for understanding the health financing of a country and provide a framework for measuring the total expenditure on health including to main stakeholders like private household out of pocket expenditure, government expenditure on health and lastly donors' expenditure on health for a specified period of time (WHO).

MoPH has introduced various health policies and strategies to strengthen the health system since 2002, which has led to considerable improvement in the health system and health service delivery. In general, primary and secondary healthcare services provided through basic package of health services (BPHS) and essential package of hospital services (EPHS) facilities, while tertiary healthcare is provided in Kabul's national hospitals (2). The MoPH is committed to improve the health status of Afghans, especially women and children, and protect the population from a substantial financial burden to achieve the Universal Health Coverage (UHC). As set in the Health Financing Strategy in order to monitor the status of health financing and the progression in reducing financial burden of the population, the MoPH produced the 6th round of NHA in 2019.

II. Method

NHA uses a standard approach to capture health expenditure flows from financing schemes, expenditure by providers, and functions. Afghanistan NHA 2019 was conducted following the SHA 2011 produced by OECD. Both primary and secondary data was used to produce NHA. The data was analyzed using the NHA Production Tool Version v.4.0.0.6. The International Classification for Health Accounts (ICHA) is a comprehensive system that generate following NHA matrices (3):

- ✓ Financing Sources (FS) by Financing Agents (HF)
- ✓ Financing Agents (HF) by Providers (HP)
- ✓ Providers (HP) by Functions (HC)
- ✓ Financing Agents (HF) by Functions (HC)

Health Economics and Financing Directorate (HEFD) collected data from different sources, including donors and development partners, Nongovernmental organizations (NGOs), such as BPHS and EPHS implementers, the Ministries (i.e. the Ministry of Finance, Ministry of Higher

Education, Ministry of Defense, Ministry of Interior, Ministry of Labor and Social Affairs, and Ministry of Education), and non-profit institution (e.g. Afghanistan Red Crescent Society).

Questionnaires were sent to various organizations as per types of the financing source to obtain associated expenditure data. Using virtual platforms, an orientation workshop on how to fill these questionnaires was conducted. Health expenditure data were collected from all MoPH partners. These partners include UN agencies, donors, embassies, international organizations (i.e. USAID, EU, WHO, UNFPA, UNDP, and UNICEF). Among 20 donors and development partners identified, 19 reported their health expenditures. All BPHS/EPHS implementing NGOs completed the questionnaires and reported their expenditures. So did the ministries, which filled the questionnaires and reported their health-related expenditures. Collected data was reviewed, cleaned, and imported to the NHA Health Account Production Tool (HAPT). Later on, the NHA team conducted the mapping and analysis.

Allocation of government and donor expenditures for specific diseases to determine disease specific expense accounts, was one of the big challenges the team faced. Findings from costing study with a bottom up approach to estimate the costs for outpatient and inpatient conditions/services were used. This study was conducted by HEFD and considered the utilization data from HMIS for the same reporting year.

Due to unavailability of household data for this year, we used a trend approach using historical OOPs in 2011, 2014, and 2017 for estimation of OOP. We estimated the latest annual growth rate of OOPs to be 8.5% from 2014-2017, based on which we calculated the OOP expenditure on health for 2019.

Donors and development partners reported their expenditures in USD and Euro. The exchange rates used in this report was AFN 78 for one USD, and AFN 87 for one Euro, as per Da-Afghanistan Bank average annual exchange rate(4).

III. Findings

A. Trends in health expenditure

There is an increasing trend of estimated Total Health Expenditure (THE) across six rounds of NHA (Figure 1). THE in 2008-2009 in Afghanistan was estimated at USD 1.04 billion which has reached to USD 2.86 billion in 2019. While representing a 6.6% increase compared with the previous round of NHA (2018). THE per capita in 2019 estimated as USD 88.9. CHE per capita after excluding capital expenditure is estimated as USD 86.9.

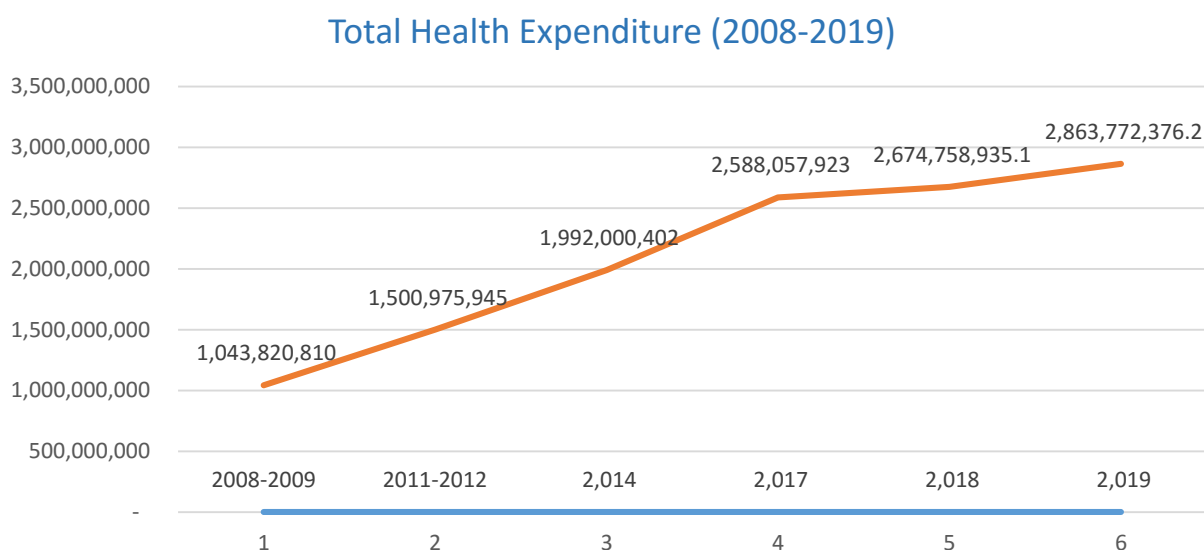


Figure 1. Trend of the total health expenditure in 2019

B. Summary of Health Expenditure across Six Rounds of NHA

Table below shows the key findings of National Health Accounts across six rounds; it is worth mentioning that in the first two rounds SHA.1 were used and in the following four rounds 2014 - 2019 SHA2011 were used, therefore, cautions need to be taken while comparing across years.

Table 1: Summary of Health Expenditure Across six Rounds of NHA in Afghanistan

General NHA Indicators	2008-2009	2011-2012	2014	2017	2018	2019
Total population	25,011,400	27,000,000	28,100,000	29,724,323	31,575,018	32,225,560
Total real GDP (USD)	10,843,340,000	8,952,000,000	21,010,912,250	20,300,000,000	20,500,000,000	17,800,000,000
Average exchange rate (USD: AFN)	1:50	1:47	1:57	1:67	1:73	1:78
Total government health expenditure (USD)	63,892,239	84,148,093	97,128,992	123,391,485	101,159,998.46	93,890,950.23

Current Health Expenditure (CHE)			1,958,143,950	2,421,426,142	2,601,982,855	2,801,548,543
CHE as percentage of GDP			9.3%	11.9%	13%	15.7%
Total health expenditure (THE)	1,043,820,810	1,500,975,945	1,992,000,402	2,588,057,923	2,674,758,935	2,863,772,376
THE per capita (USD)	42	56	71	87	84.7	88.9
THE as % of real GDP	10.0%	8.0%	9.5%	12.7%	13%	16.1%
Government health expenditure as % total government expenditure	4.0%	4.2%	4.3%	5.1%	3.9	3.4%
Financing Source as a % of THE 2008-9 / 2011-12 and CHE in 2014 and 2017						
Central government	6%	5.6%	5%	5.1%	3.9%	3.4%
Private	75%	73.6%	72%	75.5%	76.4%	77.0%
Rest of the World	18%	20.8%	23%	19.4%	19.7%	19.6%
Household (HH) Spending						
Total HH (OOP) spending as % of THE	75%	73%	72%	75.5%	74.3%	75.1%
Total HH (OOP) spending per capita (USD)	31	41	51	61	63	66.8
Financing Agent Distribution as a % of THE 2008-9 / 2011-12 and CHE in 2014 and 2017						
Central government	6%	5.6%	5%	5.1%	3.9%	3.4%
Household	75%	73.6%	72%	75.5%	76.4%	77.0%
Non-governmental organizations	1%	0%	0%	0%	0%	0%
Rest of the World	18%	20.8%	23%	19.4%	19.7%	19.6%
Provider Distribution as a % of THE 2008-9 / 2011-12 and CHE in 2014 and 2017						
Hospitals	29%	24%	40%	7.9%	17.2%	12.7%
Outpatient care centers	32%	25%	26%	14.6%	14.0%	14.6%
Retail sale and other providers of medical goods	28%	26%	24%	41%	36.4%	41.8%
Providers of Ancillary Services				26.2%	26.7%	26.7%
Other	11%	25%	10%	10.3%	13.1%	15.1%
Function Distribution as a % of THE in 2008-9 / 2011-12 and CHE in 2014 and 2017						
Curative care	59%	37%	32.9%	21%	23.%	19.2%
Pharmaceuticals	28%	26%	41.6%	41%	36.4%	41.8%
Prevention and public health programs	5%	5%	6.7%	8%	9.8%	6.4%
Health administration	5%	6%	4.3%	3%	3.5%	2.7%
Capital formation	2%	1%	1.7%			
Ancillary Services	-	24%	12.6%	26%	26.4%	26.6%
Other	1%	1%	0.2%	1%	0.7%	3.2%

C. Trend of health financing schemes across six rounds of NHA

Trend analysis across six rounds of NHA shows how much of the health expenditure in Afghanistan was financed by each financier and associated changes. Figure 2 shows the trend of health expenditure by health schemes. This includes household OOP health expenditure, government contribution, and contribution from the rest of the world. The health expenditure from all financing schemes increased over the past years. Household OOP expenditure consistently stood the highest, increasing approximately three folds from USD 787 million in 2008/2009 to USD 2.15 billion in 2019. Transfers from the government domestic revenue showed a slight increase, from USD 63 million in 2008/2009 to USD 93 million in 2019. The contribution of donors increased from USD 513,487,167.63 in 2018 to USD 555,553,713.49 in 2019, with an increase of USD 42,066,545.86 (7.6%). The government contribution from domestic revenue was USD 101,159,998.46 in 2018 and USD 93,890,950.23 in 2019. This showed a decrease of USD 7,269,048.23 (7.7%). The OOP was USD 1,987,335,688.9 in 2018 and USD 2,152,103,879.54 in 2019 showing an increase of USD 164,768,190.64 (8.3%).

The contribution of donors increased from USD 513,487,167.63 in 2018 to USD 555,553,713.49 in 2019, with an increase of USD 42,066,545.86 (7.6%). The government contribution from domestic revenue was USD 101,159,998.46 in 2018 and USD 93,890,950.23 in 2019. This showed a decrease of USD 7,269,048.23 (7.7%). The OOP was USD 1,987,335,688.9 in 2018 and USD 2,152,103,879.54 in 2019 showing an increase of USD 164,768,190.64 (8.3%).

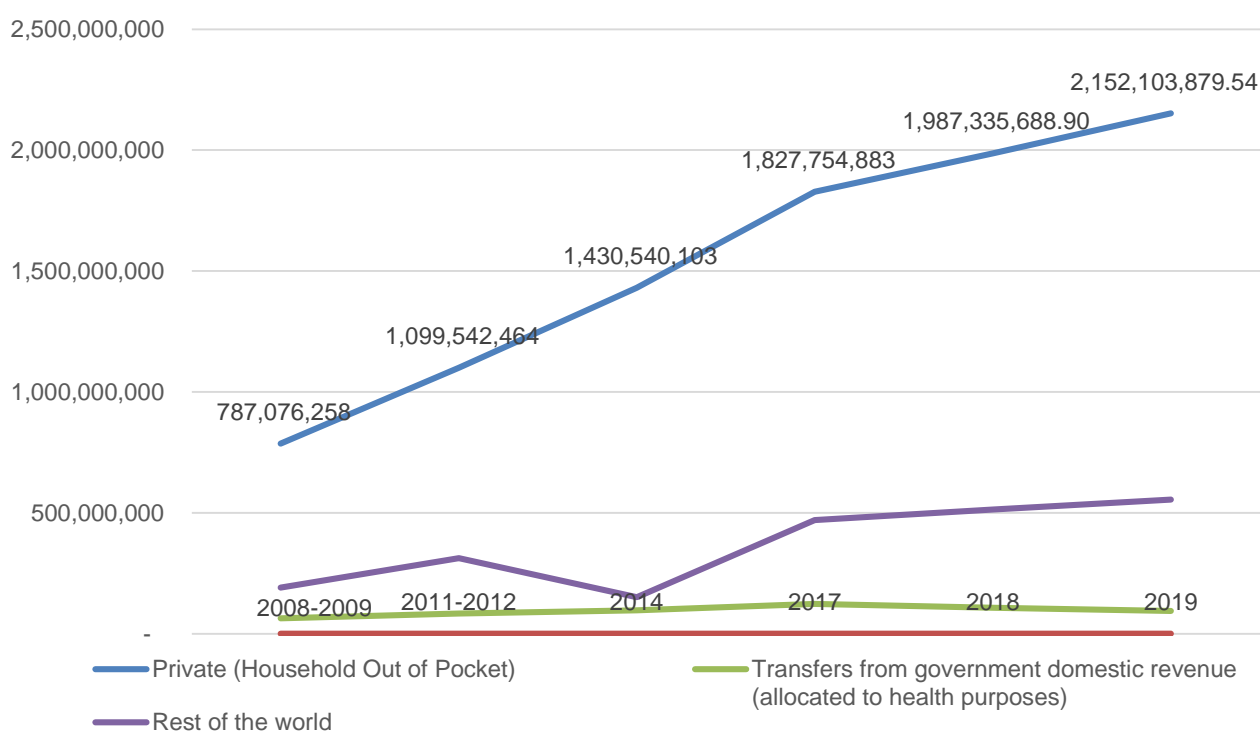


Figure 2. Trend of health expenditures by source of financing scheme across six round of NHA

Table 2 shows the percentage of sources of funds across six rounds of NHA. The overall pattern on the source of health financing does not change. Household OOP spending accounted for the largest share of the CHE, more than 70%. The government spending on health is relatively small and Afghanistan remains dependent on donor's financial support for its health services.

Table 2: Summary of percentage of sources of funds across Six Rounds of NHA in Afghanistan

Financing Source as a % of CHE	2008-2009	2011-2012	2014	2017	2018	2019
Household	76%	73%	72%	75.5%	76.4%	77.0%
Rest of the World	18%	21%	23%	19.4%	19.7%	19.6%
Central government	6%	6%	5%	5.1%	3.9%	3.4%

D. Financing Schemes

Financing schemes identifies the main health schemes and how much financing provided by each of them compared to the total. The most common health schemes are general government domestic revenue, international development partners funding channeled through government, direct foreign finance, and household OOP health expenditure.

Financing schemes for health in Afghanistan are: (1) transferred from the government domestic revenue, (2) donors [including transferred distributed by government from foreign origin and director foreign transfers], and (3) private households OOP health expenditure.

In 2019, government domestic revenue made up 3.4% of CHE, and government spending funded by donors counted for 5.2 % of CHE. International donors' spending on health accounted for 19.6% of the CHE. Households' OOP expenditures accounted for the highest share of CHE (77. %), which was slightly higher than that in 2018 (76.4%) (Table 3 and Figure 3).

Table 3: Breakdown of CHE by revenue of financing schemes in 2019

Revenues of health care financing schemes	Amount (USD)	Percentage (%)
Transfers from government domestic revenue	93,890,950.23	3.4 %
Transfers distributed by government from foreign origin	145,454,538.29	5.2%
Private (Household OOP expenditure)	2,152,103,879.54	77.0%
Direct foreign transfers	410,099,175.20	14.4%
Total CHE	2,801,548,543.3	100%

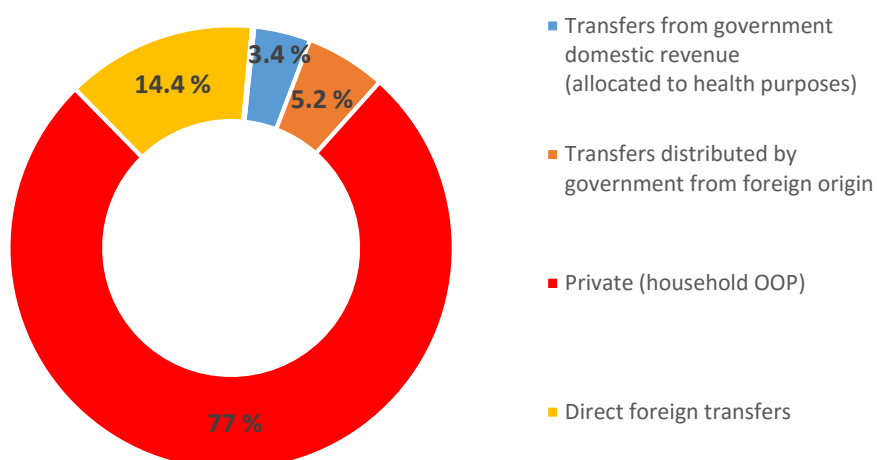


Figure 3. Breakdown of expenditure by revenue of financing schemes in 2019

E. Healthcare Providers

In Afghanistan health care is provided by different providers similar to other countries, including hospitals, ambulatory health centers, retail sellers and pharmacies, providers of administration of public health programs, providers of ancillary services, and providers of preventive care. The retail sales and other providers of medical goods incurred the highest health expenditure of 41.8 % of CHE in 2019. The second-largest providers were providers of ancillary services with 26.7% of the CHE. Providers of hospital care, providers of ambulatory health care, preventive care and administration of public health programs incurred 12.7%, 11.4%, 3.7 % and 3.2%, of the CHE, respectively (Table 4).

Table 4: Health expenditure by health care providers in 2019

Health Providers	Amount (USD)	Percentage (%)
Hospitals	355,544,117	12.7%
Providers of ambulatory health care	319,276,110	11.4%
Retail sale and other providers of medical goods	1,169,918,552	41.8%
Provision and administration of public health programs	90,461,700	3.2%
Providers of ancillary services	748,117,564	26.7%
Providers of preventive care	104,161,533	3.7%
All others	14,068,968	0.5%
Total CHE	2,801,548,543.3	100%

F. Health Expenditure by Functions

In 2019 expenditure on curative care including both inpatient and outpatient curative care, was estimated to be 19.2% of the CHE. Out of which, 4.6% was spent on inpatient care and 14.6% on outpatient care. The highest share of the CHE was spent on medicine and medical goods with share of 41.8%, followed by 26.6% on ancillary services, 6.4% on prevention and public health programs, and 2.7% on health system administration and public health programs (Table 5).

Table 5: Breakdown of the CHE by health function in 2019

Health functions	Amount (USD)	Percentage (%)
Curative	537,510,841.7	19.2%
Inpatient curative care	127,843,066.8	4.6%
Outpatient curative care	409,667,774.9	14.6%
Ancillary services	745,769,234.7	26.6%
Medical goods dispensed to outpatients	1,169,918,551.5	41.8%
Prevention and public health services	180,618,100.0	6.4%
Health administration of public health programs	74,729,006.0	2.7%
Rehabilitative care	2,973,943.3	0.1%
All others	90,028,866.0	3.2%
Total CHE	2,801,548,543.3	100%

G. Health Expenditure by Diseases

NHA 2019 has covered the expenditure on: infectious and parasitic diseases, vaccine-preventable diseases, reproductive health, nutritional deficiencies, non-communicable diseases, injuries, and non-specific diseases. The complete list of the diseases are provided in the annex (D). Analysis shows that 32.2% of the CHE was spent on infectious and parasitic diseases; 32.9% on reproductive health; 17.9% on non-communicable diseases; 4.6% on vaccine preventable diseases, 5.9% on nutrition deficiencies; 2.1% on injuries; and 9.0 % on non-specified diseases (Table 6).

Table 6: Health expenditure by category of diseases in 2019

Disease Category	Amount (USD)	Percentage (%)
Infectious and parasitic diseases	901,297,849.8	32.2%
Vaccine preventable diseases	130,228,169.8	4.6%
Reproductive health	922,965,146.0	32.9%
Nutritional deficiencies	164,718,316.5	5.9%
Non-communicable diseases	501,241,535.3	17.9%
Injuries	58,743,720.0	2.1%
Non-specified diseases	252,581,975.6	9.0%

Total	2,801,548,543.3	100%
--------------	------------------------	-------------

H. Expenditure by Age Groups

Because of the unavailability of expenditure and health utilization data by detailed age groups, in this report we only are able to report the health expenditure for the population under and over five years of age. Below table shows that in 2019, USD 1,327,160,421 (47% of the CHE) was spent on children under five, and USD 1,474,388,123, which represented 53% of the CHE was spent on population over five years old (Table 7).

Table 7: Health expenditure by age groups in 2019

Population	Amount (USD)	Percentage (%)
Under 5 years of age	1,327,160,421	47%
Over 5 years of age	1,474,388,123	53%
Total	2,801,548,543.3	100%

I. Expenditure by Gender

Findings shows that USD 1,449,663,248 (52% of CHE) was spent on female and approximately USD 1,351,885,295 (48% of CHE) was spent on male populations in 2019 (Table 8).

Table 8: Health expenditure by gender (Male and Female) in 2019

Gender	Amount (USD)	Percentage (%)
Female	1,449,663,248	52%
Male	1,351,885,295	48%
Total	2,801,548,543.3	100%

J. Health Expenditure by Factor of Provision

Factors of provision are all the inputs used by health care providers to generate the goods and services consumed or the activities conducted in the system. Information on factors of provision is typically tracked at the national aggregated level to ensure efficient and appropriate allocation of resources to provide health care services.

In 2019, 23% of public health expenditure spent on compensation of employees and 70% spent on materials and services used and 7% on all unspecified factors of health of health care provision. (Table 9).

Table 9: Health Expenditure by Factor of Provision in 2019

Factor of Provision of health care provision	Amount (USD)	Percentage (%)
Compensation of employees	151,941,958.05	23.4%
Materials and services used	451,430,731.22	69.5%
All unspecified factors of health care provision	46,071,974.46	7.1%
Total	649,444,663.73	100.0%

IV. Recommendations

NHA serves as health financing diagnostic tool for evidence-based policy making and has informed many policy analyses and policy making process in Afghanistan.

Based on the findings of this round of NHA, the following recommendations are suggested:

- Investment in health by the government should be increased. To ensure sustained improvement in health.
- A context specific financial risk protection mechanism (i.e. health insurance) needs to be designed and implemented to reduce high OOP spending of households on health.
- Introducing specific mechanisms to cover the costs of the pharmaceuticals through government and/or donors subsidies to reduce the high OOP spending on pharmaceuticals.
- More investments in preventive care is recommended to produce good value for money.
- Further coordination with the private sector through the effective implementation of the MoPH Private Sector Strategy.
- Provision of continuous building capacity programs for the MOPH- NHA team to ensure timely production of the NHA reports and being able to analyze the household expenditure data.

V. Annex. National Health Accounts Tables, extracted from the NHA Production Tool

A. Financing Schemes by Revenues of Health Care Financing Schemes at (HF X FS) US Dollars, 2019

Financing Schemes by Revenues of Health Care Financing Schemes at (HF X FS) US Dollars, 2019

Currency: US Dollar (USD)

Revenues of health care financing schemes		FS.1	FS.2	FS.7	FS.8	All FS
		Transfers from government domestic revenue (allocated to health purposes)	Transfers distributed by government from foreign origin	Direct foreign transfers	Private Expenditure on Health	
Financing schemes						
HF.1	Government schemes and compulsory contributory health care financing schemes	93,890,950.23	132,624,382.86	359,662.36		226,874,995.45
HF.1.1	Government schemes	93,890,950.23	132,624,382.86	359,662.36		226,874,995.45
HF.1.1.1	Central government schemes	93,890,950.23	132,624,382.86	359,662.36		226,874,995.45
HF.1.1.1.1	MoPH	75,492,910.68	129,192,899.97			204,685,810.65
HF.1.1.1.2	MoD	3,625,793.24				3,625,793.24
HF.1.1.1.3	MoI	6,544,467.43				6,544,467.43
HF.1.1.1.4	MoHE	7,808,125.84	3,431,482.89			11,239,608.72
HF.1.1.1.5	MoE	148,225.45		359,662.36		507,887.81
HF.1.1.1.6	MoLSA	26,226.68				26,226.68
HF.1.1.1.nec	Other Central government schemes	245,200.92				245,200.92
HF.2	Voluntary health care payment schemes			13,250,919.87		13,250,919.87
HF.3	Household out-of-pocket payment				2,152,103,879.54	2,152,103,879.54
HF.4	Rest of the world financing schemes (non-resident)		12,830,155.43	396,488,592.97		409,318,748.41
All HF		93,890,950.23	145,454,538.29	410,099,175.20	2,152,103,879.54	2,801,548,543.27

Data Sources:

Donors: USAID, European Union, WHO, UNICEF, UNFPA, WFP, MSF, Emergency, CIDA, TIKa, GAVI/HSS, Mediar, UNOPS, IOM, KFW, GF/Global Funds, CURE International

Government sources: MoD, MoE, MoHE, MoI, MoLSA, MoPH

Households: Household

NGOs: AADA, AFGA, AKHSA, BDN, ORCD, CAF, Cordiad, TDH, SAF, BARAN, OHPM, HEWAD, CHA, MMRCA, BRACK, IMC, MOVE, HN_TPO, SHDP, PU-AMI, ARCS, SM, MSI, SCA, YHDO.

B. Health Care Providers by Financing Schemes (HP X HF) US Dollars, 2019

Health Care Providers by Financing Schemes (HP X HF) US Dollars, 2019

Currency: US Dollar (USD)

Financing schemes		HF.1 Government schemes and compulsory contributory health care financing schemes	HF.2 Voluntary health care payment schemes	HF.2.2 NPISH financing schemes (including development agencies)	HF.2.2.1 NPISH financing schemes (excluding HF.2.2.2)	HF.3 Household out-of-pocket payment	HF.4 Rest of the world financing schemes (non-resident)	All HF
Health care providers								
HP.1	Hospitals	60,268,765.09	8,716,646.31	8,716,646.31	8,716,646.31	238,668,320.24	47,890,385.48	355,544,117.11
HP.1.1	General hospitals	60,268,765.09	8,716,646.31	8,716,646.31	8,716,646.31	238,668,320.24	40,966,024.22	348,619,755.85
	HP.1.1.1 Public Hospital	60,268,765.09	8,716,646.31	8,716,646.31	8,716,646.31	238,668,320.24	40,966,024.22	348,619,755.85
HP.1.3	Specialised hospitals (Other than mental health hospitals)						6,924,361.26	6,924,361.26
HP.3	Providers of ambulatory health care	99,030,548.73	2,830,216.91	2,830,216.91	2,830,216.91		217,415,344.09	319,276,109.73
HP.3.1	Medical practices						1,146.53	1,146.53
	HP.3.1.nec Unspecified medical practices (n.e.c.)						1,146.53	1,146.53
HP.3.4	Ambulatory health care centres	99,030,548.73	2,830,216.91	2,830,216.91	2,830,216.91		216,959,108.56	318,819,874.20
	HP.3.4.5 Non-specialised ambulatory health care centres		5,295.63	5,295.63	5,295.63		66,037.44	71,333.07
	HP.3.4.9 All Other ambulatory centres	99,030,548.73	2,824,921.28	2,824,921.28	2,824,921.28		216,893,071.12	318,748,541.13

HP.3.nec	Unspecified providers of ambulatory health care (n.e.c.)						455,089.00	455,089.00
HP.4	Providers of ancillary services	495,661.23				745,273,573.49	2,348,329.05	748,117,563.77
HP.4.1	Providers of patient transportation and emergency rescue	341,560.48						341,560.48
HP.4.9	Other providers of ancillary services	154,100.76				745,273,573.49	2,348,329.05	747,776,003.30
HP.5	Retailers and Other providers of medical goods		1,208,226.22	1,208,226.22	1,208,226.22	1,168,161,985.82	548,339.50	1,169,918,551.54
HP.5.1	Pharmacies		1,208,226.22	1,208,226.22	1,208,226.22	1,168,161,985.82	548,339.50	1,169,918,551.54
HP.6	Providers of preventive care	7,427,724.34					96,733,808.98	104,161,533.31
HP.7	Providers of health care system administration and financing	59,652,296.07	26,210.94	26,210.94	26,210.94		30,783,193.06	90,461,700.07
HP.7.1	Government health administration agencies	59,652,296.07	26,210.94	26,210.94	26,210.94		15,545,862.47	75,224,369.47
HP.7.9	Other administration agencies						15,237,330.59	15,237,330.59
HP.nec	Unspecified health care providers (n.e.c.)		469,619.49	469,619.49	469,619.49		13,599,348.26	14,068,967.74
All HP		226,874,995.45	13,250,919.87	13,250,919.87	13,250,919.87	2,152,103,879.54	409,318,748.41	2,801,548,543.27

C. Financing Scheme by Health Care Functions (HF X HC), 2019

Financing Scheme by Health Care Functions

Currency: US Dollar (USD)

Financing schemes			HF.1	HF.2	HF.3	HF.4	All HF
Health care functions			Government schemes and compulsory contributor y health	Voluntary health care payment schemes	Household out-of-pocket payment	Rest of the world financing schemes (non-resident)	
HC.1	Curative care		155,346,542.13	10,624,570.95	238,668,320.24	132,871,408.38	537,510,841.70
HC.1.1	Inpatient curative care		39,513,241.11	6,233,906.23	22,812,301.12	59,283,618.33	127,843,066.78
	HC.1.1.1 General inpatient curative care		39,513,241.11	6,233,906.23	22,812,301.12	9,928,895.50	78,488,343.95
	HC.1.1.2 Specialised inpatient curative care					49,354,722.83	49,354,722.83
HC.1.2	Day curative care		615,064.77			303,373.66	918,438.43
	HC.1.2.2 Specialised day curative care		615,064.77				615,064.77
	HC.1.2.nec Unspecified day curative care (n.e.c.)					303,373.66	303,373.66
HC.1.3	Outpatient curative care		115,218,236.26	4,390,664.72	215,856,019.11	73,284,416.40	408,749,336.49
	HC.1.3.1 General outpatient curative care		115,218,236.26	4,390,664.72	215,856,019.11	73,265,938.76	408,730,858.86
	HC.1.3.nec Unspecified outpatient curative care (n.e.c.)					18,477.63	18,477.63
HC.2	Rehabilitative care		306,920.51			2,667,022.78	2,973,943.29
HC.2.nec	Unspecified rehabilitative care (n.e.c.)		306,920.51			2,667,022.78	2,973,943.29
HC.1+HC.2	Curative care and rehabilitative care		155,653,462.65	10,624,570.95	238,668,320.24	135,538,431.16	540,484,784.99
HC.1.1+HC.2.1	Inpatient curative and rehabilitative care		39,513,241.11	6,233,906.23	22,812,301.12	59,283,618.33	127,843,066.78
HC.1.2+HC.2.2	Day curative and rehabilitative care		615,064.77			303,373.66	918,438.43
HC.1.3+HC.2.3	Outpatient curative and rehabilitative care		115,218,236.26	4,390,664.72	215,856,019.11	73,284,416.40	408,749,336.49
HC.1.nec + HC.2.nec	Other curative and rehabilitative care		306,920.51			2,667,022.78	2,973,943.29
HC.4	Ancillary services (non-specified by function)		495,661.23		745,273,573.49		745,769,234.72
HC.4.1	Laboratory services		154,100.76				154,100.76
HC.4.3	Patient transportation		341,560.48				341,560.48

HC.4.nec	Unspecified ancillary services (n.e.c.)			745,273,573.49		745,273,573.49
HC.5	Medical goods (non-specified by function)		1,208,226.22	1,168,161,985.82	548,339.50	1,169,918,551.54
HC.5.1	Pharmaceuticals and Other medical non-durable goods		1,208,226.22		548,339.50	1,756,565.72
HC.5.1.1	Prescribed medicines				548,339.50	548,339.50
HC.5.1.3	Other medical non-durable goods		1,208,226.22			1,208,226.22
HC.5.nec	Unspecified medical goods (n.e.c.)			1,168,161,985.82		1,168,161,985.82
HC.6	Preventive care	8,738,865.01	227,660.67		171,651,574.35	180,618,100.02
HC.6.1	Information, education and counseling (IEC) programmes		5,295.63		1,533,367.68	1,538,663.31
HC.6.1.1	Addictive substances IEC programmes				181,972.26	181,972.26
HC.6.1.1.nec	Other and unspecified addictive substances IEC programmes (n.e.c.)				181,972.26	181,972.26
HC.6.1.2	Nutrition IEC programmes				1,188,638.57	1,188,638.57
HC.6.1.nec	Other and unspecified IEC programmes (n.e.c.)		5,295.63		162,756.85	168,052.48
HC.6.2	Immunisation programmes				1,044,589.77	1,044,589.77
HC.6.3	Early disease detection programmes				1,476,301.00	1,476,301.00
HC.6.5	Epidemiological surveillance and risk and disease control programmes				468,867.99	468,867.99
HC.6.5.1	Planning & Management				137,154.58	137,154.58
HC.6.5.2	Monitoring & Evaluation (M&E)				331,713.41	331,713.41
HC.6.6	Preparing for disaster and emergency response programmes				12,907,885.87	12,907,885.87
HC.6.nec	Unspecified preventive care (n.e.c.)	8,738,865.01	222,365.04		154,220,562.04	163,181,792.08
HC.7	Governance, and health system and financing administration	59,652,296.07	8,483.29		15,068,226.61	74,729,005.97
HC.7.1	Governance and Health system administration	174,452.13	8,483.29		1,596,112.88	1,779,048.31
HC.7.1.1	Planning & Management				227,813.60	227,813.60
HC.7.1.2	Monitoring & Evaluation (M&E)				46,234.13	46,234.13

	HC.7.1.nec	Other governance and Health system administration (n.e.c.)	174,452.13	8,483.29		1,322,065.16	1,505,000.58
	HC.7.2	Administration of health financing				829,055.42	829,055.42
	HC.7.nec	Unspecified governance, and health system and financing administration (n.e.c.)	59,477,843.93			12,643,058.30	72,120,902.24
HC.9	Other health care services not elsewhere classified (n.e.c.)		2,334,710.50	1,181,978.74		86,512,176.79	90,028,866.03
All HC			226,874,995.45	13,250,919.87	2,152,103,879.54	409,318,748.41	2,801,548,543.27

D. Health Expenditure by Disease, 2019

Non-disease specific expenditures reported: Separately; Currency: US Dollar (USD)

Classification of diseases / conditions		Financing agents	FA.1 General government	All FA
DIS.1	Infectious and parasitic diseases		44,449,891.41	901,297,849.85
DIS.1.1	HIV/AIDS and Other Sexually Transmitted Diseases (STDs)		301,831.35	10,611,749.14
	DIS.1.1.1 HIV/AIDS and Opportunistic Infections (OIs)			3,858,315.86
		DIS.1.1.1.1 HIV/AIDS		3,500,391.80
		DIS.1.1.1.2 TB/HIV		357,924.06
	DIS.1.1.2 STDs Other than HIV/AIDS		301,831.35	6,753,433.28
DIS.1.2	Tuberculosis (TB)		3,742,294.36	86,882,059.02
	DIS.1.2.nec Unspecified tuberculosis (n.e.c.)		3,742,294.36	86,882,059.02
DIS.1.3	Malaria		1,273,321.67	34,079,817.85
DIS.1.4	Respiratory infections		16,843,739.96	369,760,528.39
	DIS.1.4.1 Pneumonia		4,628,080.63	103,552,643.67

	DIS.1.4.2	Upper Respiratory	8,191,241.39	176,162,107.61
	DIS.1.4.3	Cough and Cold	4,024,417.94	90,045,777.11
DIS.1.5		Diarrheal diseases	4,847,455.73	107,129,032.07
	DIS.1.5.1	Acute Bloody Diarrhea	1,710,377.62	38,269,455.27
	DIS.1.5.2	Acute Watery Diarrhea	2,615,871.66	58,529,755.12
	DIS.1.5.3	Diarrhea with dehydration	281,709.26	9,930,567.99
	DIS.1.5.nec	Other Diarrheal diseases	239,497.19	399,253.69
DIS.1.7		Vaccine preventable diseases	4,481,651.38	130,228,169.77
	DIS.1.7.1	Immunizations	1,392,910.61	14,139,398.95
	DIS.1.7.2	Measles	2,686,298.98	60,105,556.22
	DIS.1.7.6	TT immunization	402,441.79	9,004,577.71
	DIS.1.7.nec	Other Vaccine preventable diseases		46,978,636.88
DIS.1.8		Hepatitis	40,244.18	900,457.77
DIS.1.9		Urinary Tract Infections	6,439,068.71	144,073,243.37
DIS.1.nec		Other and unspecified infectious and parasitic diseases (n.e.c.)	6,480,284.08	17,632,792.47
DIS.2	Reproductive health		43,965,710.72	922,965,146.04

DIS.2.1	Maternal conditions	8,400,972.45	259,896,2
			18.92
	DIS.2.1.1 First Postnatal Care	7,445,173.19	167,825,3
			84.21
	DIS.2.1.2 Other Postnatal Care	955,799.26	21,385,87
			2.06
	DIS.2.1.6 GBV		70,683,40
			8.67
	DIS.2.1.nec Other Maternal conditions		1,553.98
DIS.2.2	Perinatal conditions	18,311,101.63	411,231,9
			48.27
	DIS.2.2.1 First Antenatal Care	14,588,515.04	327,939,6
			04.45
	DIS.2.2.2 Other Antenatal Care	3,722,586.60	83,292,34
			3.82
DIS.2.3	Contraceptive management (family planning)	794,822.54	21,701,87
			4.42
	DIS.2.3.1 Oral Contraceptive	120,732.54	2,723,139
			.92
	DIS.2.3.2 Injectable	211,281.94	4,763,680
			.98
	DIS.2.3.3 IUD	251,526.12	5,671,394
			.28
	DIS.2.3.4 Condom	110,671.49	2,498,025
			.48
	DIS.2.3.5 Permanent	100,610.45	2,265,655
			.50
	DIS.2.3.nec Other Contraceptive management (family planning)		3,779,978
			.26
DIS.2.4	Normal-Delivery Facility	6,439,068.71	145,270,4
			06.72

	DIS.2.5	Normal-Delivery Home	804,883.59	18,009,15 5.42
	DIS.2.6	Pelvic Inflammatory Disease	1,285,422.29	27,143,92 4.55
	DIS.2.7	Cesarean sections	1,978,455.03	3,936,669 .81
	DIS.2.nec	Unspecified reproductive health conditions (n.e.c.)	5,950,984.48	35,774,94 7.92
DIS.3	Nutritional deficiencies		4,125,028.39	164,718,3 16.51
	DIS.3.1	Micronutrient Disorder	1,006,104.49	22,520,99 6.74
	DIS.3.2	Moderate Accurate Malnutrition	1,006,104.49	22,511,44 4.28
	DIS.3.3	Severe acute Malnutrition	2,112,819.42	47,274,03 2.98
	DIS.3.nec	Other Nutritional deficiencies		72,411,84 2.52
DIS.4	No communicable diseases		40,689,919.71	501,241,5 35.28
	DIS.4.2	Endocrine and metabolic disorders	1,634,828.63	2,725,340 .43
		DIS.4.2.1 Diabetes	1,634,828.63	2,725,340 .43
	DIS.4.3	Cardiovascular diseases	2,360,070.98	19,430,96 7.79
		DIS.4.3.1 Hypertensive diseases	402,441.79	9,004,577 .71
		DIS.4.3.2 Ischemic Heart Disease	1,030,879.20	1,718,526 .77

	DIS.4.3.nec	Other and unspecified cardiovascular diseases (n.e.c.)	926,749.99	8,707,863 .31
DIS.4.4		Mental & behavioral disorders, and Neurological conditions	2,552,747.80	24,260,42 9.65
	DIS.4.4.1	Mental (psychiatric) disorders	905,494.04	21,472,70 7.47
	DIS.4.4.3	Neurological conditions	2,012.21	45,022.89
	DIS.4.4.nec	Unspecified mental & behavioral disorders and neurological conditions (n.e.c.)	1,645,241.55	2,742,699 .29
DIS.4.5		Respiratory diseases	7,575,400.19	12,628,56 7.94
DIS.4.6		Diseases of the digestive	1,473,428.35	2,456,278 .16
DIS.4.7		Diseases of the genital-urinary system	760,845.67	858,088.7 6
DIS.4.9		Oral diseases	1,307,935.83	29,264,87 7.56
DIS.4.10		Skin Disease	1,509,156.73	33,767,16 6.41
DIS.4.11		Rehabilitation Care	306,920.51	2,655,249 .56
DIS.4.12		Eye Condition	1,226,463.53	24,962,21 5.55
DIS.4.13		Muscular-skeletal fractions/disease and problems	5,863,588.86	36,859,37 7.18
DIS.4.14		Peptic Disorder	5,634,185.12	126,064,0 87.95
DIS.4.15		Anemia	8,250,056.78	184,593,8 43.07

	DIS.4.16	Burns, Scalds and frost-bites	234,290.73	390,574.27
	DIS.4.nec	Other and unspecified non communicable diseases (n.e.c.)		324,471.00
DIS.5		Injuries	3,885,645.70	58,743,719.99
DIS.6		Non-disease specific	16,509,558.02	66,669,042.84
DIS.nec		Other and unspecified diseases/conditions (n.e.c.)	72,889,579.14	185,912,932.76
All DIS			226,515,333.09	2,801,548,543.27

VI. References

1. National Statistic Information Authority. Afghanistan Statistical Yearbook 2019 [Internet]. Kabul, Afghanistan; 2019. Available from: https://www.nsia.gov.af:8080/wp-content/uploads/2019/11/Afghanistan-Statistical-Yearbook-2019_compressed.pdf
2. Afghanistan's Basic Package of Health Services, 2014. Available from: https://www.msh.org/sites/default/files/afghanistans_bphs_its_development_and_effects_on_rebuilding_the_health_system_newbrander_et_al.pdf
3. OECD, World Health Organization, Eurostat. A System of Health Accounts: 2011 Edition [Internet]. OECD; 2011 [cited 2021 May 26]. Available from: https://www.oecd-ilibrary.org/social-issues-migration-health/a-system-of-health-accounts_9789264116016-en
4. Da Afghanistan Bank Website [Internet]. Available from: <https://www.dab.gov.af/exchange-rates>

