## Afghanistan

### Effect of enhanced investment scenario*

<table>
<thead>
<tr>
<th>Category</th>
<th>Baseline 2011</th>
<th>Constant coverage scenario 2035</th>
<th>Enhanced investment scenario with R&amp;D 2035</th>
<th>Events averted by enhanced investment in 2035</th>
</tr>
</thead>
<tbody>
<tr>
<td>Reproductive, maternal, newborn, and child health</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Births</td>
<td>1,664</td>
<td>3,772</td>
<td>1,282</td>
<td>2,491</td>
</tr>
<tr>
<td>Total fertility rate</td>
<td>6.2</td>
<td>6.2</td>
<td>2.1</td>
<td>*</td>
</tr>
<tr>
<td>Maternal deaths</td>
<td>8</td>
<td>19</td>
<td>1</td>
<td>17</td>
</tr>
<tr>
<td>Stillbirths</td>
<td>41</td>
<td>92</td>
<td>12</td>
<td>80</td>
</tr>
<tr>
<td>Total under-5 child deaths</td>
<td>230</td>
<td>520</td>
<td>42</td>
<td>478, 253</td>
</tr>
<tr>
<td>Under-5 mortality rate</td>
<td>138</td>
<td>138</td>
<td>33</td>
<td>*</td>
</tr>
<tr>
<td>Maternal mortality ratio</td>
<td>498</td>
<td>498</td>
<td>107</td>
<td>*</td>
</tr>
</tbody>
</table>

### Tuberculosis

<table>
<thead>
<tr>
<th>Category</th>
<th>Baseline 2011</th>
<th>Constant coverage scenario 2035</th>
<th>Enhanced investment scenario with R&amp;D 2035</th>
<th>Events averted by enhanced investment in 2035</th>
</tr>
</thead>
<tbody>
<tr>
<td>New cases</td>
<td>61</td>
<td>81</td>
<td>24</td>
<td>57</td>
</tr>
<tr>
<td>Deaths</td>
<td>13</td>
<td>17</td>
<td>1</td>
<td>16</td>
</tr>
</tbody>
</table>

### HIV/AIDS

<table>
<thead>
<tr>
<th>Category</th>
<th>Baseline 2011</th>
<th>Constant coverage scenario 2035</th>
<th>Enhanced investment scenario with R&amp;D 2035</th>
<th>Events averted by enhanced investment in 2035</th>
</tr>
</thead>
<tbody>
<tr>
<td>New infections</td>
<td>1</td>
<td>3</td>
<td>0</td>
<td>3</td>
</tr>
<tr>
<td>Deaths in people aged 5 years and over</td>
<td>&lt;1</td>
<td>2</td>
<td>0</td>
<td>2</td>
</tr>
<tr>
<td>Total deaths</td>
<td>292</td>
<td>650</td>
<td>56</td>
<td>593</td>
</tr>
</tbody>
</table>

*Effect of enhanced investment scenario*

For births, stillbirths, cases, deaths, and infections, the annual rate is in thousands. The results have been rounded. R&D=research and development. *Events averted in 2035 is defined as the difference between the constant coverage scenario in 2035 and the enhanced investment scenario with R&D in 2035 (ie, enhanced investment including scale up of new tools developed by R&D). Column A includes stillbirths and child deaths averted because a pregnancy was averted-ie, column A includes potential deaths among individuals who never existed. Column B excludes these deaths-ie, column B shows only deaths associated with pregnancies that did actually occur. The total fertility rate is expressed as the number of births expected per woman at the then-prevailing age-specific mortality and fertility rates. The under-5 mortality rate is defined as the probability of dying between birth and 5 years of age at the age-specific mortality rates of the indicated year (denoted by demographers as 5q0). The maternal mortality ratio is the number of women who die during pregnancy and childbirth, per 100,000 livebirths.
### Incremental costs of enhanced investment scenario

<table>
<thead>
<tr>
<th>US $ Million</th>
<th>Incremental costs 2015</th>
<th>Incremental costs 2025</th>
<th>Incremental costs 2035</th>
<th>Incremental costs 2016-2025</th>
<th>Incremental costs 2026-2035</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Programmatic investment (scaling up current interventions)</strong></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Family planning</td>
<td>3</td>
<td>25</td>
<td>63</td>
<td>133</td>
<td>461</td>
</tr>
<tr>
<td>Maternal and neonatal health</td>
<td>10</td>
<td>49</td>
<td>54</td>
<td>313</td>
<td>499</td>
</tr>
<tr>
<td>Immunization</td>
<td>19</td>
<td>10</td>
<td>-54</td>
<td>221</td>
<td>-267</td>
</tr>
<tr>
<td>Treatment of childhood illness</td>
<td>9</td>
<td>20</td>
<td>-38</td>
<td>202</td>
<td>-95</td>
</tr>
<tr>
<td>Malaria</td>
<td>33</td>
<td>45</td>
<td>62</td>
<td>392</td>
<td>534</td>
</tr>
<tr>
<td>Tuberculosis</td>
<td>39</td>
<td>31</td>
<td>42</td>
<td>317</td>
<td>355</td>
</tr>
<tr>
<td>HIV/AIDS</td>
<td>7</td>
<td>19</td>
<td>38</td>
<td>126</td>
<td>281</td>
</tr>
<tr>
<td><strong>Subtotal</strong></td>
<td><strong>119</strong></td>
<td><strong>199</strong></td>
<td><strong>166</strong></td>
<td><strong>1,704</strong></td>
<td><strong>1,768</strong></td>
</tr>
<tr>
<td><strong>Health system strengthening</strong></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Incremental investment</td>
<td>846</td>
<td>750</td>
<td>881</td>
<td>7,387</td>
<td>8,258</td>
</tr>
<tr>
<td><strong>Programmatic investment (scaling up new tools)</strong></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>All new tools and interventions</td>
<td>65</td>
<td>64</td>
<td>70</td>
<td>609</td>
<td>671</td>
</tr>
<tr>
<td><strong>Total investment</strong></td>
<td><strong>1030</strong></td>
<td><strong>1,013</strong></td>
<td><strong>1,118</strong></td>
<td><strong>9,700</strong></td>
<td><strong>10,689</strong></td>
</tr>
</tbody>
</table>

### Ratios

<table>
<thead>
<tr>
<th></th>
<th>2015</th>
<th>2025</th>
<th>2035</th>
<th>2016-2025</th>
<th>2026-2035</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Cost per death averted ($)</strong></td>
<td>9,689</td>
<td>2,660</td>
<td>1,884</td>
<td>3,758</td>
<td>2,120</td>
</tr>
<tr>
<td><strong>Population (M)</strong></td>
<td>45</td>
<td>58</td>
<td>66</td>
<td>524</td>
<td>628</td>
</tr>
<tr>
<td><strong>Incremental cost per capital ($)</strong></td>
<td>22.79</td>
<td>17.52</td>
<td>16.85</td>
<td>18.52</td>
<td>17.03</td>
</tr>
</tbody>
</table>

^Incremental costs of enhanced investment scenario

Population is total, not incremental. Treatment of childhood illness excludes malaria costs, TB costs exclude ART for HIV+ TB patients. Scale up of new products assumed to increase reduction in annual mortality and infection rates by incremental 2%.