Pakistan

Since 2010, more than 455,000 internally displaced families have returned to their areas of origin, and as of October 2018, more than 97 percent of displaced persons have returned. Out of the nearly 14,000 families that returned in 2018, nearly 3,200 were female-headed households, which face specific risks, and nearly 16,000 remain displaced in nine districts. The majority of returnees lack access to basic services. Forty-seven per cent of the population is using contaminated water and 64 per cent of the population lacks access to health care. More than 80 per cent of health infrastructure is severely damaged and not functioning and global acute malnutrition prevalence is at 20 per cent, exceeding the emergency threshold. The lack of basic educational facilities has undermined access to and quality of education. Half of girls and one third of boys are currently out of school. Mine-related incidents are increasing and children struggling with the loss of family and friends are experiencing significant psychosocial trauma. The tribal districts have the lowest rate of child birth registration nationally, estimated at only 1 per cent. The situation in drought-affected areas of Sindh and Balochistan is of increasing concern.

Humanitarian strategy

The 2018-2020 Pakistan Transition Plan developed by the United Nations, the World Bank, non-governmental organizations and the Government addresses both humanitarian and development needs. UNICEF’s strategy in the tribal districts is to ensure that returns of displaced people are sustainable and that their acute humanitarian needs are met. The response will address the residual humanitarian needs of both returnees and local communities by restoring non-functional health facilities and supporting restored facilities to provide integrated primary health care for newborns, children and mothers and expand community management of acute malnutrition services. The education programme will establish temporary secure and safe learning environments and provide learning materials to affected school-aged children. Access to safe water and sanitation will be increased through the provision of water, sanitation and hygiene (WASH) services in schools and health facilities. Children will gain access to preventive and protective services, including recreational support and mine risk education. In line with the Transition Plan, UNICEF will continue to strengthen government-led technical working groups so that the clusters can be deactivated by 2020. To facilitate emergency preparedness and build resilience, UNICEF will strengthen national and sub-national capacities for disaster risk reduction and maintain and replenish contingency stocks for 100,000 people.

Results from 2018

As of 31 October 2018, UNICEF had US$4.6 million available against the US$18.2 million appeal. Humanitarian programme implementation was constrained due to significant under-funding, the limited capacities of implementing partners, lengthy administrative procedures and the inaccessibility of districts due to insecurity. The health, WASH and child protection sectors received no funding in 2018. The education and nutrition programmes were 50 per cent funded, which allowed for the enrolment of some 68,000 children in schools (85 per cent of the target) and the provision of multi-micronutrient supplementation to 80,000 pregnant and lactating women (63 per cent of the target). Due to inadequate humanitarian funding, UNICEF leveraged its regular resources, as well as the resources of government counterparts and partners, to achieve limited results in the tribal districts of Khyber Pakhtunkhwa (KP). As part of the national measles campaign, UNICEF supported the vaccination of over 840,000 children against measles in the tribal districts. Some 55,000 people (37 per cent of the target) gained access to safe water and 76,000 people (49 per cent of the target) were sensitized on safe hygiene practices. In addition, some 25,000 children and caregivers were reached through child protection awareness-raising activities (87 per cent of the target).

2019 programme targets:

Nutrition

- 25,000 children admitted to therapeutic feeding programmes for treatment and management of severe acute malnutrition (SAM)
- 96,000 pregnant and lactating women in affected areas receiving multiple micronutrient supplementation (or iron and folic acid)
- 210,000 children aged 6 to 59 months in affected areas receiving multiple micronutrient supplementation

Health

- 352,000 children aged 6 months to 10 years vaccinated against measles
- 22,000 deliveries assisted by skilled birth attendants
- 231,000 women of child-bearing age reached through health education sessions

WASH

- 100,000 people provided with access to water as per agreed standards
- 90,000 people provided with access to appropriate sanitation facilities
- 140,000 people provided with key messages on safe hygiene practices

Child protection

- 42,638 children with access to preventive and protective services, including recreational support
- 74,004 children and 13,761 caregivers reached through child protection awareness-raising activities, including mine risk education and birth registration

Education

- 80,000 school-aged children, including adolescents, enrolled in school (still functioning, reopened and/or temporary facilities)
- 100 schools supported to improve safe and secure learning environments
- 80,000 children with access to humanitarian education programmes that incorporate psychosocial support

Total people in need: 2.9 million
Total children (<18) in need: 1,508,000
Total people to be reached: 583,000
Total children to be reached: 352,000
Funding requirements
In line with the inter-agency Pakistan Transition Plan, UNICEF is requesting US$25.4 million to support humanitarian and disaster risk reduction interventions in Pakistan in 2019. Without adequate funding, UNICEF will be unable to provide an integrated WASH, health, nutrition, education and child protection response to address the residual humanitarian needs of returning populations in the tribal districts. Additional funds are also essential to enabling UNICEF to maintain contingency and preparedness capacities in all sectors for flexible and rapid responses to acute crises.

Results are through 31 October 2018.

1 The UNICEF nutrition response was 50 per cent funded (including funds carried over from the previous year). As a result, most of the targets were underachieved.
2 For the health response, no funds were received in 2018 and only limited funds were carried over from the previous year. UNICEF’s regular resources and government health infrastructure and resources were leveraged to implement activities, including the measles campaign.
3 UNICEF routine vaccination efforts reached 2,344 children in target areas. In addition, regular resources supported the vaccination of 841,592 children in the tribal districts of KP as part of a nationwide measles campaign conducted in October 2018 in partnership with the Government and the World Health Organization (WHO).
4 The WASH sector did not receive any funding in 2018. Programmes were implemented using funds carried over from previous years and by leveraging existing resources.
5 No funds were received for the child protection response in 2018. Limited implementation was supported through UNICEF’s regular resources.
6 The education response was 50 per cent funded. However, due to constrained humanitarian access and partner limitations, the targets were partially achieved.
7 The education target was revised upward as there were more returnees than projected at the time of initial planning for 2018.
8 Additional funds are also essential to enabling UNICEF to maintain contingency and preparedness capacities in all sectors for flexible and rapid responses to acute crises.

Who to contact for further information:

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NUTRITION

<table>
<thead>
<tr>
<th>Sector 2018 targets</th>
<th>Sector total results</th>
<th>UNICEF 2018 targets</th>
<th>UNICEF total results</th>
</tr>
</thead>
<tbody>
<tr>
<td>Children aged 6 to 59 months with SAM admitted to therapeutic care for a specified period of time</td>
<td>34,377</td>
<td>8,770</td>
<td>34,377</td>
</tr>
<tr>
<td>Pregnant and lactating women in affected areas registered in a multi-micronutrient supplementation programme receiving multi-micronutrient supplement (or iron and folic acid)</td>
<td>173,380</td>
<td>80,178</td>
<td>173,380</td>
</tr>
<tr>
<td>Children aged 6 to 59 months in the affected areas receiving multi-micronutrient supplements</td>
<td>188,050</td>
<td>80,434</td>
<td>188,050</td>
</tr>
</tbody>
</table>

HEALTH

<table>
<thead>
<tr>
<th>Sector 2018 targets</th>
<th>Sector total results</th>
<th>UNICEF 2018 targets</th>
<th>UNICEF total results</th>
</tr>
</thead>
<tbody>
<tr>
<td>Children aged 6 months to 10 years vaccinated against measles</td>
<td>140,000</td>
<td>2,344</td>
<td>140,000</td>
</tr>
<tr>
<td>Deliveries assisted by skilled birth attendants</td>
<td>16,000</td>
<td>3,039</td>
<td>16,000</td>
</tr>
<tr>
<td>Women provided with antenatal care</td>
<td>32,000</td>
<td>7,247</td>
<td>32,000</td>
</tr>
<tr>
<td>People reached through health education sessions during mother and child weeks/days</td>
<td>210,000</td>
<td>19,789</td>
<td>210,000</td>
</tr>
</tbody>
</table>

WATER, SANITATION AND HYGIENE

<table>
<thead>
<tr>
<th>Sector 2018 targets</th>
<th>Sector total results</th>
<th>UNICEF 2018 targets</th>
<th>UNICEF total results</th>
</tr>
</thead>
<tbody>
<tr>
<td>People provided with access to water as per agreed standards</td>
<td>291,204</td>
<td>167,370</td>
<td>291,204</td>
</tr>
<tr>
<td>People provided with access to appropriately designed toilets</td>
<td>291,204</td>
<td>47,650</td>
<td>291,204</td>
</tr>
<tr>
<td>People provided with key messages on safe hygienic practices</td>
<td>291,204</td>
<td>9,789</td>
<td>291,204</td>
</tr>
</tbody>
</table>

CHILD PROTECTION

<table>
<thead>
<tr>
<th>Sector 2018 targets</th>
<th>Sector total results</th>
<th>UNICEF 2018 targets</th>
<th>UNICEF total results</th>
</tr>
</thead>
<tbody>
<tr>
<td>Children with access to preventive and protective services, including recreational support</td>
<td>15,518</td>
<td>7,028</td>
<td>15,518</td>
</tr>
<tr>
<td>Caregivers reached through child protection awareness-raising activities</td>
<td>13,761</td>
<td>13,070</td>
<td>13,761</td>
</tr>
<tr>
<td>Children reached through child protection awareness-raising activities</td>
<td>15,518</td>
<td>12,464</td>
<td>15,518</td>
</tr>
</tbody>
</table>

EDUCATION

<table>
<thead>
<tr>
<th>Sector 2018 targets</th>
<th>Sector total results</th>
<th>UNICEF 2018 targets</th>
<th>UNICEF total results</th>
</tr>
</thead>
<tbody>
<tr>
<td>School-aged children, including adolescents, enrolled in school (including in schools in affected areas still functioning, re-opened schools and/or temporary facilities established)</td>
<td>100,000</td>
<td>135,787</td>
<td>100,000</td>
</tr>
<tr>
<td>Schools supported to have improved safe and secure environments</td>
<td>300</td>
<td>457</td>
<td>300</td>
</tr>
<tr>
<td>Children with access to humanitarian education programmes that incorporate psychosocial support</td>
<td>100,000</td>
<td>66,379</td>
<td>100,000</td>
</tr>
</tbody>
</table>

Results are through 31 October 2018.

1 The UNICEF nutrition response was 50 per cent funded (including funds carried over from the previous year). As a result, most of the targets were underachieved.
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