UNICEF’s Response and Funding Status

Key Highlights

- Over 282 million people have been reached through TV and radio through Government, UNICEF and other partners.
- 97,603 (1,999 new) religious leaders have been engaged and mobilized to emphasize the importance of physical distancing and promote key preventive messages on COVID-19 as well as convincing other religious leaders on risk perception.
- More than 1.7 million people (200,000 new) have used the 547 (3 new) handwashing stations by UNICEF at communal points in affected areas.
- Using WASH sector communication networks, 10.8 million (1.91 million new) people have been reached with COVID-19 hygiene promotion messages.
- Over 34.2 million at risk populations reached through community engagement on COVID-19 (UNICEF reached 18.4 million) with 342,402 reached (UNICEF 314,919) during the reporting period.
- A total of 26,047 parents, caregivers, children and individuals received PSS by trained social workforce professionals with 7,522 reached within the reporting period through UNICEF support.

Situation in Numbers

- 165,062 Confirmed cases
- 61,383 Recovered cases
- 3,229 Deaths

Source: http://COVID.gov.pk/
Date of report: 19 June 2020

UNICEF Appeal for COVID-19 Preparedness and Response
US$ 50.2 million

Funding Status (in US$)

- Humanitarian funds, $5.97m, 8.1%
- Other resources $4.07m, 8.1%
- Funding gap, $40.16m, 80.01%

1 The RCCE core indicator has been changed to “People reached through community engagement” as opposed to social media to better track community engagement. Also, the health key indicator is changed to “number of frontline health workers reached with basic PPEs” as opposed to oriented on COVID-19.
EPIDEMIOLOGICAL OVERVIEW

As of 19 June 2020, there were 165,062 confirmed coronavirus cases, with Sindh being the most affected province with 62,269 cases, followed by Punjab with 61,678 cases and Khyber Pakhtunkhwa (KP) with 20,182 cases. Of the total number of confirmed cases, 3,229 patients have died and 61,383 have fully recovered from the disease and have been discharged from the hospital.

<table>
<thead>
<tr>
<th>Provinces</th>
<th>Administrative Areas</th>
<th>Total</th>
</tr>
</thead>
<tbody>
<tr>
<td>Balochistan</td>
<td>Khyber Pakhtunkhwa (KP)</td>
<td>8,998</td>
</tr>
<tr>
<td>Punjab</td>
<td>Sindh</td>
<td>61,678</td>
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<tr>
<td>Sindh</td>
<td>Azad Jammu and Kashmir (AJK)</td>
<td>62,269</td>
</tr>
<tr>
<td>Gilgit-Baltistan</td>
<td>Islamabad Capital Territory (ICT)</td>
<td>769</td>
</tr>
</tbody>
</table>

The table below shows trend of infection and daily COVID-19 cases in Pakistan as of 19 June 2020:

NATIONAL COORDINATION

The National Security Committee, chaired by the Prime Minister, established a National Coordination Committee (NCC), to formulate and implement a comprehensive strategy to stop the transmission of the virus and mitigate its consequences. The NCC designated the National Disaster Management Agency (NDMA) as the leading operational agency. In each province the Chief Ministers have convened task forces to coordinate the response, with the Provincial Disaster Management Agencies (PDMA) as the leading provincial operational agency. Furthermore, the Emergency Operating Centre (EOC) at the National Institute of Health (NIH) has been activated as an Incident Command and Control Hub.

On 16 June, the National Command and Operations Center (NCOC) issued directions regarding lockdown in 20 cities (as COVID-19 hotspots/clusters) across the country in line with the prime minister’s smart lockdown policy which includes seven cities of Punjab. The provincial government followed the instructions and decided to partially shut down localities in seven cities including Lahore, Rawalpindi, Faisalabad, Multan, Gujranwala, Sialkot, and Gujrat, to arrest sharp increase in infections as more than 300 confirmed cases of COVID-19 had been recorded in each of these areas. Sindh government also imposed ‘smart lockdown’ in province’s select areas as six of the 20 hotspot cities are from the province including Karachi, Hyderabad, Sukkur, Ghotki, Larkana and Khairpur where the local administration has placed restrictions in several areas aimed at containing the spread of the coronavirus in line with the uniform policy across the country. In KP province, Peshawar District Commissioner imposed restrictions on 4 localities of the provincial capital.

2 http://COVID.gov.pk/stats/pakistan
3 Karachi, Lahore, Quetta, Peshawar, Rawalpindi, Islamabad, Faisalabad, Multan, Gujranwala, Swat, Hyderabad, Sukkur, Sialkot, Gujarat, Ghotki, Larkana, Khairpur, Dera Ghazi Khan, Malakand and Mardan
5 https://www.dawn.com/news/1563955
All types of gatherings will be strictly prohibited and all shops, other than those providing essential services, will remain closed and congregations in mosques will also be restricted to five people⁶.

The PKR 144 billion (US$ 861 million) Government of Pakistan’s Ehsaas Emergency Cash (social protection) initiative started on the 9 April and, as of 19 June 2020, PKR 131.1 billion (US$ 787.91 million) has been distributed reaching more than 10.8 million people⁷.

Based on the WHO situation report, as of 19 June, Pakistan has conducted 1,011,106 laboratory tests, of which 165,062 were tested positive. A total of 7,496 cases have been admitted in hospitals; 61,383 have recovered, 3,515 are in critical condition, 546 are on ventilator and there were 3,229 deaths with the Case Fatality Rate (CFR) of 1.95 per cent. Highest case density has been reported in ICT followed by Sindh and GB.

The Polio Programme is providing support for COVID-19 response, especially in the areas of surveillance, data management, communication and logistics management and suspended all Polio Supplementary Immunization Activities (SIAs). The NEOC has recently issued a resumption of SIAs schedule from July to December 2020. This schedule is also accompanied by operational guidelines for special modalities in the context of COVID-19. The schedule and the modalities will be regularly reviewed depending on the evolving COVID-19 situation in Pakistan.

**UN COORDINATION**

The UN in Pakistan has established a Crisis Management Team (CMT) comprising of: WHO; UNICEF; WFP; UNHCR; UNFPA; IOM; UNOCHA; UNDP; DSS and the RC which meets every Tuesday and Friday evenings. Currently, UN agencies, including UNICEF, are working on finalizing the sectoral plans for the Global Humanitarian Response Plan being coordinated by OCHA and lead by sector lead agencies. UNICEF has established a COVID-19 Task Force that currently meets every Monday, Tuesday and Friday morning.

**UNICEF’s Response Strategy**

UNICEF Pakistan has updated its multipronged response strategy to bring additional focus to high burden areas affected by COVID-19 and focus on three key areas (1) public health response to COVID-19, (2) continuity of essential services and (3) mitigation of the socio-economic impact of COVID-19. The key strategies include:

**Public health response to COVID-19**

- **Risk Communication and Community Engagement (RCCE)** to provide timely and accurate information to families and communities and promote behaviour to reduce risk and limit transmission
- **Infection prevention and control (IPC)** through (a) Water Sanitation and Hygiene (WASH) support to targeted primary health facilities, quarantine and isolation centres and in the communities and (b) protection of frontline health workers
- **Procurement services** in support of the Government to ensure timely sourcing and availability of quality essential medical supplies and personal protective equipment (PPE)
- **Psychosocial support (PSS)** to ensure children and families of cases and contacts affected by COVID-19 are provided with appropriate care and psychosocial support, and for stigma prevention

**Continuity of essential services**

- **Continuity of education and learning** to ensure teachers, parents and students are informed about COVID-19, continuity of learning and facilitate safe reopening of schools and learning education institutions.
- **Building resilient primary healthcare system** for managing mild cases and referral of severe cases with the aim to strengthen primary health care (PHC) system and ensure continuity of life saving basic health services like MNCH and immunization.
- **Essential nutrition support for vulnerable children and families** with the aim to ensure access to promotional, preventive and curative nutrition services to people affected by, and people at risk of Coronavirus infection, with a focus on nutrition vulnerable groups.

**Mitigation of the impact of COVID-19**

- **Advocacy** through (a) parliamentary engagement on child sensitive budgeting; (b) national and provincial advocacy, including joint advocacy with other UN agencies and partners, in support of the COVID-19 socio-economic impact framework and plan, and (c) implementation of the UNICEF Pakistan Advocacy plan ‘Response and Recover’ to COVID-19

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⁷ [https://www.pass.gov.pk/ecs/uct_all.html](https://www.pass.gov.pk/ecs/uct_all.html)
• **Evidence generation** on (a) multi-dimensional child poverty analysis to influence policy action and allocations, (b) development of Nutrition Sentinel Surveillance system to provide routine information on nutrition and inform policy and programme action and (c) VAC study to identify and response to violence against children due to the COVID-19 response

• **Systems Development**: (a) Continuing engagement in the finalization of the Universal Health Benefit Package and tools that are Covid-19 sensitive, (b) Education sector analysis and planning, (c) provision of alternative care for children without parental / family care and (d) positioning of civil registration and vital statistics (CVRS) in the context of COVID-19

• **Social Protection**: Technical / advisory support (studies) to the emergency cash transfer scheme on children to inform medium term policy action on child-sensitive social protection programme in Pakistan

**Summary Analysis of Programme Response**

**1. Risk Communication and Community Engagement**

**Coordination**: UNICEF supports the Ministry of Health Services Regulation and Coordination (MoHSRC) to convene the RCCE task force meetings and leads the UN communication group on RCCE. So far, 19 RCCE task force meetings, 10 UN RCCE group meetings and 3 federal and provincial coordination meetings have taken place. At the provincial level, weekly RCCE taskforce meetings take place.

**National Response**: An estimated 282 million people have been reached with TV and radio through Government, UNICEF and other partners, including the mass media broadcasting of videos in partnership with UNILEVER which were produced by UNICEF in collaboration with MoHSRC and WHO. The contract between UNICEF and the Pakistan Broadcasting Corporation to produce and air a dedicated 50-minute weekly programme on Radio Pakistan and 24 FM radio stations linked to Radio Pakistan was signed and airing will start in the third week of June. The radio programme will promote prioritized behaviours which have been defined and will be initiated with the campaign on social distancing and mask use.

**UNICEF Response**

**Data analytics**: The tenth RCCE brief, informed by combined analysis of the social and behavioural data, daily social media sentiment data, records from the polio helpline (1166) and other surveys has been prepared. The key findings include: (1) There are concerns on wearing facemasks in public spaces in spite of it being made mandatory by the Government because of the wrong perceptions that; (a) only COVID-19 positive people wear facemasks; (b) wearing facemask is not allowed during prayers, including at mosques and funerals; (c) there is no need to wear facemasks because there are no COVID-19 positive cases in their community; (d) facemasks do not give any protection and should only be worn if at all, to avoid detection by law enforcement and (e) facemasks have not become mandatory and those who wear facemasks are ridiculed for following the advisory. (2) With COVID-19 lockdown restrictions no longer in place for the general population in Pakistan, protecting vulnerable people with pre-existing medical conditions has become a challenge. (3) Concerns over the expected peak of COVID-19 cases coinciding with the Eid-ul-Adha celebrations, on 31 July, with the high risk of people crowding together for religious rituals and social gatherings.

The RCCE team has prioritized the five key messages to be promoted, based on the recent recommendations from the RCCE briefs: 1) social distancing/physical distancing 2) hand washing 3) use of masks 4) staying home if anyone has symptoms 5) underlying strong message on increasing risk perception

Behaviours/messages on encouraging testing and early health seeking will be continued as from before.

**Religious leaders’ engagement**: Through existing polio alliances and health programme, 97,603 (1,999 new) religious leaders have been engaged and mobilized to promote the risk perception of the Corona virus, emphasize the importance of physical distancing and promote key preventive messages on COVID-19 as well as convincing other religious leaders on risk perception. After the discussions with the religious leaders, they use the information provided to them to talk to their followers during the Friday prayers and to make announcements in mosques with key preventive messages on COVID-19.

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8 frequency modulation
In Karachi, around 24 religious leaders were engaged in hotspot areas of the central district to sensitize the community to follow preventive SOPs. More than 700 mosque imams were engaged to announce preventive messages during Friday sermons in Karachi. All the engaged mosques made the requested announcements. In Balochistan, the communication team identified some renowned religious leaders and scholars (Pesh imams) in three districts of Quetta Block and facilitated visits through Religious Support Persons (RSPs) and other District and Union Council (UC) staff to mobilize the religious leaders to address key practices related to COVID-19 in sermons. In Punjab, the COMnet staff continued to engage high risk populations through 3,400 religious leaders to help district government implement various SOPs and these activities were intensified in Lahore, Rawalpindi, Multan and Mianwali. In KP, over 1,000 religious leaders continued to mobilize communities on COVID-19 SOPs, especially through mosques. In KP and Balochistan, Madrassa Mohatanims (supervisor or administrator) and Khateeb (orator/preacher) were also engaged by the Community Based Vaccinator (CBV) Managers, Communication Support Officers, District Health Communication Officers, RSPs and Union Council Officers in the implementation of SOPs.

**Social Media:** UNICEF’s Advocacy and Communication and polio social media platforms have reached over 223.5 million people through different social media platforms, an increase of around 16 million people during the reporting period and collectively with the Government and UN Agencies have reached more than 297 million people\(^9\). The engagement of people through social media is over 36.8 million (2 million for the reporting period) for UNICEF and 68.7 million (2.1 million in reporting period) as a cumulative sector response.

**Reaching at risk populations through community engagement:** With the increasing number of confirmed cases in Pakistan, the RCCE team has designed a differentiated approach to RCCE to ensure optimum use of available resources, which is informed by the surveillance and social data, according to 5 different settings: (1) high burden settings; (2) urban slums, (3) rural areas, (4) among health workers and (5) general population.

Community engagement sessions, across all Provinces, are carried out in small groups of 5-6 people using preventive measures to protect the communities and through UNICEF’s partnerships with local CSOs, frontline workers and social mobilisers 6,605 people (1,349 during reporting period) were trained/provided orientations on social distancing and government SOPs.

Mobile vans, rickshaws and mobile floats were used in all Provinces, including through polio and health structures, to disseminate messages through 715,962 loudspeaker announcements during the reporting period, reaching communities in high risk areas with messages on the importance of physical distancing, preventive behaviours on COVID-19 and handwashing and hygiene.

As part of the “We Care” campaign for health workers, new video content has been produced. The video showcases the seriousness of the disease, importance of following SOPs to reduce transmission and the role played by the frontline workers in saving lives. The video will be disseminated to increase risk perception and solicit solidarity for the frontline workers. WhatsApp continues to be used as an important communication channel and has been used 166,618 times to date, to reach people with information on behaviour change communication related to COVID-19.

In Multan, Mianwali and Lahore, Polio Eradication Initiative staff focused on factories, mosques, deras (community gathering places) and households to display messages and review implementation of SOPs. In Sindh high risk populations were reached through special community engagement sessions, prioritizing the hot spot areas of district central, East and South, where there are major clusters of positive cases.

In KP, the COMNet and CBV staff continued to reach high risk populations following surveillance data showing the largest number of positive clusters. In addition, targeting was also done based on ‘specific social profiles’: foreign travelers, Tabligi’s (preachers), populations living in camps and other mobile populations. In Balochistan, after local transmission of COVID-19 in Quetta block, CBV staff focused on face to face meetings (while following social distancing SOPs) and referred suspected COVID-19 cases to the District Health Officer (DHO) and the nearest health facility.
Polio teams in all the provinces held meetings with crowded shop/store owners to ensure social distancing for customers (availability of hand sanitizer for customers and employees, use of Mask and gloves for employees and regular washing of floors) and following government SOPs.

**Helpline:** The Polio helpline (1166) which is being used for COVID-19 has received over 4.6 million calls and responded to over 2.2 million calls. There were a total of 250 helpline agents, of which UNICEF supports 85 agents and the rest are supported by Digital Pakistan. Of the calls received, 80 per cent of the calls inquired about symptoms/precautions/treatment; 10 per cent were questions on suspected cases an increase by 3 per cent from last week; 6 per cent on hospitals/tests/quarantine; 1 per cent ration/food/help which has decreased slightly from 4 per cent last week. and 3 per cent others

**Media orientation and mobilization:** A total of 14,230 (1,860 new) journalists, reporters and bloggers were engaged at both federal and provincial level for promoting key messages on COVID-19 and to counter negative media and COVID-19 related myths. To counter the belief that corona virus is fake, journalists and reporters continued writing about the severity of the disease, importance of testing, early professional health seeking behaviours and the importance of physical distancing and key behaviours to follow, such as handwashing and general hygiene.

**Social Media Sentiment Analysis:** The week’s trend shows that 155 million unique users were reached with potential impact of 955 million in the reporting period. The trend shows that conversation around COVID-19 peaked on 12 June as a result of Drug Regulatory Authority of Pakistan’s (DRAP’s) approval of Pakistan’s first COVID-19 testing kit made by the National University of Science and Technology (NUST). Another peak was seen on 13 June with posts about one of the popular cricketers testing positive for COVID-19, excessive billing in private hospitals, doctors not being able to differentiate between COVID-19 and Typhoid symptoms.

**Partnerships:** UNICEF is working with the federal and provincial governments as well as implementing partners which includes: WHO, UNHCR, UNDP, FAO, UNAIDS, UNESCO, UNODC, UNWOMEN, UNFPA, UN HABITAT, UNRC, WFP, ICRC, PRCS, GRASP/ITC, Digital Pakistan, UNILEVER, Daraz.pk, Zong4G, AKF, HANDS, Pakistan Medical Association.

2. Infection Prevention and Control

**Coordination:** UNICEF continues to coordinate with WHO and other UN agencies providing technical support in IPC/WASH through the UN IPC technical working group. UNICEF is supporting the Ministry of Climate Change (MOCC) to convene bi-weekly virtual WASH sector coordination meetings at federal level bringing together over 70 organizations and government representatives from all the provinces. The same support is being extended to the departments of local government in four provinces to hold similar coordination meetings on weekly basis. All participating organizations are reporting their progress through the 4Ws matrix, ensuring effective coordination and efficient use of resources by avoiding duplication.

The IPC-WASH sector has now published the Pakistan Sector Dashboard online with support from UNICEF and the Global WASH Cluster (GWC). The dashboard gives a visual view of the 4Ws matrix analysis, showing progress by each partner in each location. The online version is accessible through the following link: https://www.humanitarianresponse.info/en/operations/pakistan/pakistan-wash-sector-working-group-covid-19-response-4ws-data-analysis
UNICEF Response: To date, UNICEF has rehabilitated and installed WASH facilities which include Ultraviolet (UV) water filters, toilets and hand washing stations in 260 (18 new) out of 266 assessed Health Care Facilities (HCFs, Sindh: 38, KP: 37, Punjab: 167 and Balochistan:18). More than 372,000 people (72,000 new) have gained access to safe drinking water and sanitation facilities in these HCFs contributing towards reducing the risk of COVID-19 infection among healthcare workers. Around 1.7 million (200,000 new) people have used the 547 (3 new) hand washing stations at communal points in affected areas. UNICEF supported the training of 3,769 frontline sanitary workers (199 new) to enhance the capacity of sanitary and health frontline workers on WASH/IPC in HCFs and high-risk communities. UNICEF developed an integrated IPC-WASH strategy focusing on primary healthcare facilities in eleven high burden districts harbouring 65 per cent of the caseload, where 41 per cent of the deaths have occurred. This will ensure an efficient and effective use of limited UNICEF resources towards the overall prevention and control of COVID-19 pandemic.

UNICEF distributed detergents and disinfectants to health care facilities to ensure effective cleaning and disinfection of surfaces thereby reducing the risk of infection among health workers and other patients. UNICEF with support from UNILEVER distributed 8,000 bottles of bleach and 140,000 bars of soap to 38 HCF (Sindh: 20; Punjab: 18). An additional 60,000 bars of soap were distributed to at risk communities in Punjab.

Guided by research, perception surveys conducted by the government, UN agencies and developmental partners, UNICEF developed targeted hygiene and COVID-19 prevention messages. Working with the implementing partners, UNICEF is disseminating the messages through social mobilisers, religious leaders, FM radio, Community Resource Persons (CRPs). Information, Education and Communication (IEC) material is displayed on communal hand washing stations and Clean and Green Pakistan digital and social media platforms reaching more than 5.9 million people (300,000 new) across the four provinces.

Under the coordination of MOCC, sector partners, including UNICEF, have provided WASH services to 455 HCFs (45 new) and installed 1,099 communal handwashing stations (32 new) reaching to more than 1.7 million people. Over 10.8 million people (1.9 million new) have been supported with hygiene promotion services including COVID-19 prevention and control information. The mobile application allowing for two-way communication with the champions has been upgraded and still awaits approval from the respective authorities.
Partnerships: UNICEF is working with the federal and provincial governments as well as with implementing partners including: AKF, IRP (Islamic Relief Pakistan), HANDS, SRSP, WASA Lahore, WSSC Swat, WSSC Abbottabad, WSSP, Peshawar, BRSP, Unilever and DFID, WHO, UNFPA and UN-Habitat.

3. Psychosocial Support and Child Protection

Coordination: The third child protection sub working group meeting chaired by NDMA and co-chaired by UNICEF was held in the reporting period. The TORs were finally endorsed. Focus of the meeting was on the orientation on 4W reporting and the agreement to consolidate the inputs of the sub-groups (Child Protection and GBV) into the overall 4Ws matrix.

UNICEF Response A total of 1,821 social workforce professionals (942 women and 879 men) have been trained in psychosocial support and stigma prevention in all provinces through a training package developed by UNICEF, including 186 trained in the reporting period (137 female and 49 males in Balochistan and KP provinces).

A total of 26,047 parents, caregivers, children and individuals (1,007 girls, 1,098 boys, 12,269 women, 11,673 men) received Psychosocial Support and Services (PSS) by trained social workforce professionals in Punjab, KP, GB, Balochistan and Sindh provinces with 7,522 reached within the reporting period (Punjab: 623, KP: 37, Sindh: 6,598, Balochistan: 200, GB: 64). This includes 70 Individuals (3 girl, 8 boys, 19 women and 40 men) who received specialized counselling sessions in KP, Punjab and Balochistan.

In KP, a quick analysis of the data linked to beneficiaries seeking MHPSS services (about 350 people sample size) revealed a large majority of male (67.4 per cent males versus 32.6 per cent females) were using the services. Further analysis will need to be conducted to understand the root causes of such a gap, which might be linked to accessibility of services as well as gender norms. Adults made up 89 per cent of the cases and children 11 per cent. Children's caregivers, 40 per cent of the adults, raised problems related to their children which were mainly around their children reverting to behaviours from an earlier stage of development (having nightmares, bed wetting, clinging to a parent). Of the total 350 sample size, 230 people have reported common mental health concerns related to stress, anxiety, depression, COVID-19 related concerns and anger.

A youth perception study, jointly conducted by UNICEF, UNFPA and UNDP, among 10,437 youth aged 15 to 29 year olds indicated that close to 60 per cent of young people felt that COVID-19 had an adverse impact on their mental wellbeing and the data suggests that more female respondents felt their mental well-being has been adversely impacted by the virus. More than 43 per cent of the respondents in the study also expressed their fear that many young people may drop out of school to look for jobs in post COVID-19 due to the economic situation experienced by families.

During the reporting period, the stigma messages on various platforms recorded the highest reach of 11,815,732 people increasing the total reach to over 20 million people through UNICEF support.

Partnerships: UNICEF is working with the Federal and Provincial Governments as well as implementing partner DANESH (Drugs and Narcotics Educational Services for Humanity) and Agha Khan Foundation.

4. Health

Coordination: UNICEF is working in close coordination with MNHSR&C, Provincial Health Departments, UN and Development partners. UNICEF had a coordination meeting with Federal Expanded Programme on Immunization (EPI) to discuss: an immunisation catch-up strategy for children; financing for vaccine procurement and the current stock. Extensive discussions were held, during the Polio Technical Advisory Group (TAG) meeting, on the resumption of National Immunization Days (NIDs), immunization services and challenges due to COVID-19 as well as possible mitigation measures.

UNICEF Response: UNICEF is supporting the Provincial and Regional health departments to ensure the continuation of essential primary health care services including immunization, Ante-Natal Care (ANC), Post-Natal Care (PNC), delivery services, childcare and curative care for adults in the 136 targeted health facilities reaching 56,283 people during the reporting period (Balochistan: 1,863; Sindh: 26,421; KP: 1,748; Punjab: 26,251) with a total reach of 967,810 since the onset of COVID-19. Measles immunisation reached a total of 655 children (under 1 year) (Balochistan: 122; Sindh: 335; KP: 198) during the reporting period with a total of 24,565 children vaccinated against measles in the 136 UNICEF supported health facilities. UNICEF has provided basic PPEs (gloves, sanitisers and masks) to 10,887 frontline health workers in the health facilities.
health workers during the reporting period (Balochistan: 5,200; KP:02, Sindh:4,485, Punjab:1200) reaching a total of 36,939.

UNICEF supported IPC training reached 34,279 frontline health workers in total (17,100 new) and supported the training of 42,839 frontline health workers and community volunteers on COVID-19 and case identification and referral of suspected cases (16,950 new). This includes, a total of total of 19,611 Lady Health Workers and 1,038 vaccinators and 1,253 master trainers trained in Punjab using a prevention package (which includes messages on COVID-19 and IPC for infection prevention) for frontline workers. In addition, UNICEF is working with Health Services Academy to develop new training materials to train frontline workers on COVID-19 and IPC. Two modules one for community based frontline health workers and the other for PHC facility workers have been finalized and are in the process of approval in MNHSR&C.

In KP, UNICEF is supporting the Public Health Association (PHA) to provide telemedicine services and a total of 4,152 calls have been received, of which 2,076 were for MNCH related problems, 1,055 cases of diarrhoea and 520 cases of Acute Respiratory infection (ARI) in under 5 children were supported, along with 501 ANC support calls. During the reporting period, a total of 243 beneficiaries have benefited from this service, which included 145 diarrhoea and 54 ARI patients under the age of 5 years as well as 44 pregnant women receiving advice on ANC.

To ensure continuity of paediatric HIV services in Larkana in the context of COVID-19, UNICEF is supporting community-based intervention and antiretroviral therapy (ART) services where follow up visits were made 394 HIV Patients through telephone and home visits reaching a total of 1,133 to date. A total of 84 mothers’ and fathers’ support groups were formed during the reporting period with 334 mothers and 324 fathers registered as members.

**Partnerships:**

MNHSR&C, Provincial and Regional Departments of Health, Health Education Cell under DG Health Services, MNCH, EPI, LHWs, AIDS Control, PPA, Family Physician Association of Pakistan , Sir Ganga Ram Hospital, SARHAD (a CSO) and Public Health Association, PHC Global, Aga Khan Foundation and Agha Khan Development Network, in GB and Health Services Academy, Bridge consultant, Premier Advertisers, Pakistan Medical Association

**5. Nutrition**

**Coordination:** The Nutrition sector coordination led by government and co-chaired by UNICEF continued to meet weekly at federal and provincial levels to support the nutrition response to COVID-19 pandemic. UNICEF has developed an online training for health workers on the simplified guidelines for delivering safe Infant and Young Child Feeding (IYCF) practices and management of wasting in the context of COVID-19 which has been submitted to the National Nutrition Working Group (NNWG) for endorsement. The Frequently Asked Questions (FAQ) sheet developed to address myths and misconceptions around food in the context of COVID-19 has been finalized and endorsed. It will be shared to all Call centres at federal and provincial levels to provide appropriate answers to questions posed by the general population.

In Punjab, as agreed in the previous Nutrition Working Group meeting, the working group met with the Punjab PDMA and Punjab Food Authority to advocate for the enforcement of existing regulations to ensure that breastmilk substitutes would no longer be provided in food baskets and that breastfeeding would be promoted.

**UNICEF Response:** During the reporting period, the treatment of Severe Acute Malnutrition (SAM) was available in 2,828 UNICEF supported health facilities, an increase of 9 during the reporting period. The increase is due to successful advocacy by UNICEF to resume services in sites reported as closed in the last Sitrep. A total of 27,216 SAM children have been admitted for treatment with 2,351 children admitted for treatment during the reporting period (Balochistan 428; Sindh 316; KP 848 and Punjab 759).

With UNICEF support, inter-personal communication on Infant Young Child Feeding (IYCF) practices in the COVID-19 context reached 27,765 mothers/caregivers (Balochistan 2,813; Sindh; 1,149; KP 4,931 and Punjab; 18,872) through counselling during the reporting period, reaching 201,708 in total. In Punjab, the promotion of IYCF in the COVID-19 context through video messages displayed in health facilities reached 0.6 million care givers during the reporting period.
Partnerships: To respond to COVID-19 UNICEF is working with MoNHSR&C, Provincial Health Departments, Ministry of Planning Development and Reform, Nutrition Development Partners, CSOs UN SUN networks, Association for Gender Awareness and Human Empowerment (AGAHE), Rural Community Development Society (RCDS) Rural Education and Economic Development Society (REEDS), and Nutrition International (NI) UNICEF also established partnership with FAO, WFP and WHO to develop and roll out a nutrition and food security surveillance system to monitor impact of COVID-19.

6. Education

Coordination: UNICEF and National Education Development Partners Group (NEDPG) are supporting Ministry of Federal Education and Professional Training (MoFEPT’s) in coordinating COVID-19 response. The National Education Response and Resilience Plan (NERRP) for COVID-19, has been endorsed by MoFEPT’s and NEDPG.

UNICEF Response: UNICEF is leading on the development of National Learning Continuity Framework to ensure that all policy and programmatic responses pertaining COVID-19 are catering to the diverse range of technologies, geographies, languages, grade-levels, family and parental support levels for the students. As part of this initiative, UNICEF is supporting the MoFEPT’s Tele school broadcast which is aired for 8 hours a day and is currently using existing repurposed content provided by various private sector EdTech (Educational Technology) providers. A recent Gallup survey conducted by the MoFEPT showed that nearly 2 in 5 Pakistanis claim to know about the Tele school broadcast and has reached in 4 million households within a short span of time. The Gallup survey estimates that around 7-8 million children between the ages of 5 to 15 years are viewing the Tele school broadcast. The initial Tele school content has been quickly repurposed from a variety of existing content and therefore quality of the broadcast needs to be improved. To address this, UNICEF in partnership with ILM association is supporting the MoFEPT in designing a more curriculum-driven, integrated, thematic approach supporting both cognitive and non-cognitive life skills. The MoFEPT and UNICEF plan to air the new content for Kindergarten to Grade 5 by end of July.

UNICEF supported alternate learning opportunities reached 1,661 children during the reporting period taking the total number of children reached to 80,230 children. In Sindh, the learning application Mera Sabaq (My Lesson), jointly supported by Sindh School Education Department and UNICEF, shows that it has been used 10,000 times by users in its weekly data analysis. Educational video lessons have been watched over 11,500 times while the e-books were downloaded 2,900 by the users in the week. To improve the online monitoring of digital classroom teacher training 187 education management staff were orientated on digital classroom teacher training monitoring by 75 master trainers trained by Microsoft on Microsoft Teams application. In Balochistan, 8 new videos were added to the existing library taking the total to 270 content-based videos on Mathematics, Science and English. These educational videos are shared with Parent Teacher School Management Committees (PTSMCs) and teachers for primary level classes (KG-5th) through WhatsApp to support the continuity of learning. The “My Home My School” campaign now has 16,018 home centres providing continuity of learning to 51,544 children (boys: 30,743, girls: 20,801) across Balochistan. In Punjab, the Education department in coordination with Curriculum and Textbook Board has initiated a critical exercise of compressing syllabi in the context of reopening of schools and prioritizing key student learning outcomes that will be focussed in the remaining and new academic year. In KP, Guidance and SOPs for safe reopening of schools have been contextualized for the province and checklists have been developed at the district level.

In total 28,248 Parent Teacher Associations (PTAs) have been reached, 198 additional PTAs were reached during the reporting period, with messages encouraging learning activities and 17,987 SMC members, teachers were reached with COVID-19 prevention information via SMS and other social media platforms during the reporting period, taking the total to 1.45 million people. To date, 570 teachers have been trained on psychosocial support and safe reopening of schools.

Partnerships: Ministry of Federal Education, Provincial Education Departments, Indus Resource Center, ILM Association10, Microsoft, Viamo, SABAQ Foundation.

10 The ILM Association (ILMA) is the pioneer industry association formed to represent Pakistan’s growing domestic education innovation industry.
Supply and Procurement Services

A total of US$ 6.045 million worth of supplies and services have been committed from UNICEF’s own resources in response to COVID-19 outbreak including IEC and RCCE materials, media engagement, WASH sanitation products, rehabilitation of Health Facilities, COVID-19 call centre and consultancy services. 12,737 boxes of surgical masks dispatched from warehouse, delivery to all destination shall be completed in the weekend. Hand sanitizer POs issued including 27,864 bottles for WASH, 10,000 bottles for Nutrition and 45,305 bottles for Polio; delivery start from 24 June in batches. 296,000 bottles Liquid Soap PO issued for WASH, delivery in the first week of July 3,605 units IR thermometers for Polio issued for immediate delivery.

Procurement of PPEs, test kits and medicines from the additional US$ 7 million under the National Immunization Support Project funded through the World Bank is ongoing. A scheduled shipment of (30,000); face shield (50,000), Goggles (213); N95 Masks (10,000); Thermometer (714) is expected to arrive in Pakistan end of June.

UNICEF in collaboration with WFP and FAO, will be conducting a Joint Logistics Capacity Assessment to collect data on transportation, warehousing and cold chain storage capacity country wide. The information will be used by NDMA and other partners for COVID-19 logistics arrangements countrywide.

Human Interest Stories and External Media

UNICEF produced content on how to protect themselves from the virus (in Urdu and English), how to avoid infecting others and how to protect children and adolescents continues to be posted on UNICEF Pakistan's social media platforms, generating more than 235,000 impressions since the beginning of the COVID-19 emergency.

UNICEF ran an Instagram Live session on the topic of ‘Periods in Pandemics’, featuring the Captain of Pakistan's National Football Team, the ex-Captain of Pakistan's National Basketball Team and Pakistan's Olympic swimmer. It reached 8.5 million people. UNICEF also live streamed a roundtable organized with the SDGs Secretariat of Pakistan's National Assembly on 'Child-Sensitive budgeting: role of Parliament'; It highlighted the need to increase budgetary allocations for children and to monitor their results, taking into account the COVID-19 response.

The three videos produced on COVID-19 symptoms, preventive behaviours and physical distancing (three formats - 20, 50 and 90 seconds and four languages (Urdu, Pashto, Sindhi and Balochi) continued to be broadcasted on 14 private television channels as part of a partnership with Unilever, and on three public TV channels. Guidelines for journalists reporting on COVID-19 are now available in five languages (English, Urdu, Pashtu, Sindhi, Balochi).


Funding

To provide support for COVID-19 humanitarian action, UNICEF requires US$ 50.2 million. The country continues to face a critical gap of US$ 40.16 million (80 per cent) of required financial resources. UNICEF was able to mobilize US$ 10.03 million (20 per cent) for the humanitarian response. These funds included US$ 4.07 million existing resources /programmes re-purposed for COVID-19 from the DFID funded ASWA II and Aawaz Programme, the UNICEF Global Thematic Humanitarian Funds and UNICEF’s Regular Resources.

In-kind contribution received from Unilever (includes hygiene and disinfection material) along with airtime to reach people through mass media. Partnership with Zong4G, on communicating preventive behaviour messages on their social media pages have contributed and helped achieve positive results for behavioural change.

UNICEF expresses its sincere gratitude to the Government of Japan and United Kingdom, CERF Secretariat, Asian Development Bank, World Bank, Global Partnership for Education, Unilever, Solidarity Fund, Zong along with all its public and private donors for their contributions. UNICEF also recognizes the repurposing of polio programme assets with funding from the Bill and Melinda Gates Foundation, Rotary Foundation, CIDA and CDC towards the COVID-19 response.
## Summary of Results

<table>
<thead>
<tr>
<th>Sector</th>
<th>UNICEF and Operational partners</th>
<th>Task Force /Sector</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Risk Communication and Community Engagement (C4D)</strong></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Number of people reached through social media*</td>
<td>2,026,242,986</td>
<td>297,690,834</td>
</tr>
<tr>
<td>Number of people engaged through social media**</td>
<td>331,358,882</td>
<td>68,712,989</td>
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<td>Number of at-risk populations reached through community engagement</td>
<td>201,066,962</td>
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<td>Number of members of religious leaders engaged in promoting key messages</td>
<td>230,000</td>
<td>300,000</td>
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<td>Number of media practitioners oriented on reporting on COVID-19</td>
<td>20,000</td>
<td>30,000</td>
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<td>Number of calls received from helpline</td>
<td>16,000,000</td>
<td>4,616,286</td>
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<td>Number of calls from helpline responded to</td>
<td>11,000,000</td>
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<td><strong>Infection Prevention and Control (WASH)</strong></td>
<td></td>
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</tr>
<tr>
<td>Number of health facilities provided with essential WASH services.</td>
<td>900</td>
<td>1,500</td>
</tr>
<tr>
<td>Number of people at high risk of COVID-19 supported with hygiene promotion activities and facilities</td>
<td>10,000,000</td>
<td>10,810,000</td>
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<tr>
<td>Number of community sites with handwashing facilities in the affected areas</td>
<td>1,800</td>
<td>3,000</td>
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<tr>
<td># of schools in targeted high-risk areas supported with IPC measures and improved water and sanitation</td>
<td>700</td>
<td>2,500</td>
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### UNICEF and Operational partners

<table>
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### Next SitRep: 26th June 2020

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  - Chief of Health Pakistan
  - Tel: +92 301 856 4602
  - Email: hbanskota@unicef.org
<table>
<thead>
<tr>
<th>Psychosocial Support and Child Protection ****</th>
</tr>
</thead>
<tbody>
<tr>
<td>Number of affected people, including children, who received psycho-social support</td>
</tr>
<tr>
<td>Number of social and care workers trained on psychosocial support and stigma reduction</td>
</tr>
<tr>
<td>Number of people reached with stigma prevention messages</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Continuity of Education and Learning</th>
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</thead>
<tbody>
<tr>
<td>Number of SMCs/PTMCs members, teachers and other education personnel reached with prevention information via SMS, robocall and social media</td>
</tr>
<tr>
<td>Number of parents reached with messages encouraging learning activities through SMS</td>
</tr>
<tr>
<td>Number of children benefiting from alternate learning opportunities</td>
</tr>
<tr>
<td>Number of SMCs trained on safe reopening of schools</td>
</tr>
<tr>
<td>Number of teachers trained on psychosocial support and safe reopening of schools</td>
</tr>
</tbody>
</table>

<table>
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<th>Building Resilient Health Systems</th>
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<tbody>
<tr>
<td>Number of people benefitting from continuity of primary health care services at UNICEF supported health facilities</td>
</tr>
<tr>
<td>Number of children &lt; 1 vaccinated against Measles</td>
</tr>
<tr>
<td>Number of frontline health workers reached with basic PPEs (masks, gloves and hand sanitizers)</td>
</tr>
<tr>
<td>Number of frontline workers trained on infection prevention and control</td>
</tr>
<tr>
<td>Number of frontline health workers and community volunteers oriented on COVID-19 and referral of suspected cases</td>
</tr>
</tbody>
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<table>
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<tr>
<th>Nutrition</th>
</tr>
</thead>
<tbody>
<tr>
<td>Number of sites which are safe for service providers and patients.</td>
</tr>
<tr>
<td>Number of mothers and care givers at high risk of infection supported with IYCF and hygiene promotion.</td>
</tr>
<tr>
<td>Number of children treated for SAM without complication in a safe environment at health facility</td>
</tr>
</tbody>
</table>

* Contacts through social media include multiple interactions with the same person
** Definition of Social media engagement includes likes, shares and retweets
*** There was a mistake in one of the partners reporting in the last sitrep which has been corrected this time during data cleaning, therefore; UNICEF reported numbers for this week are more than the sector.
**** Child Protection targets reviewed and revised. Target (1) from 20,000 changed to 40,000; Target (2) from 1,860 changed to 2,400; Target (3) from 10 million changed to 30 million.