Highlights

- Over the past week South Asia region saw another significant spike with the number of cases increasing by more than 168% from 3107 to 8338 cases. The cases in India jumped by more than 273% from 1117 to 4169 while in Afghanistan the cases more than doubled from 145 to 367 cases. In Pakistan more than 1855 new cases have been reported bringing the total to 3505.
- Reports of cases in Dharavi, Asia’s biggest slum in Mumbai where more than half a million people live in less than 2.5 square kilometres has raised concerns that without timely action the epidemic if left unchecked could cause a wave of contagion that could overwhelm the public health system.
- Most countries in the region have extended their lockdown as part of containment and prevention strategy. Preliminary reports indicate that such shutdowns have had negative consequences on service delivery systems and livelihoods. UNICEF in collaboration with other agencies is assessing the collateral impacts of the pandemic and engaging the governments to provide social protection systems to the most vulnerable.
- Over 224 million people have been reached across the region with key COVID-19 prevention messages as UNICEF country offices continue to support governments in promoting risk communication and community engagement.
- With the high demand for Personal Protective Equipment (PPEs) combined with export ban from major markets, procurement for these critical supplies for small countries is a major challenge and UNICEF is exploring local alternatives to source the supplies.
- UNICEF is appealing for $80.4 million to reach 60 million people with risk communication, critical supplies, adequate health care, continuous education, child protection and social protection services to address.

UNICEF’s Response Budget in South Asia

<table>
<thead>
<tr>
<th>Category</th>
<th>Funding Status (in US$)</th>
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<tbody>
<tr>
<td>Risk communication</td>
<td>18%</td>
</tr>
<tr>
<td>Critical medical &amp; WASH Supplies</td>
<td>28%</td>
</tr>
<tr>
<td>Health Care &amp; Nutrition services</td>
<td>13%</td>
</tr>
<tr>
<td>Continuation of education and child protection services</td>
<td>22%</td>
</tr>
<tr>
<td>Social Protection/Cash Transfers</td>
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</tr>
<tr>
<td>Data Collection and Analysis</td>
<td>4%</td>
</tr>
<tr>
<td>Others</td>
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</tbody>
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Regional Office for South Asia
COVID-19
Situation Report No. 5

UNICEF Appeal 2020
For South Asia
US$ 80.4 million

Funding Status:

- Funds Received: $17,199,084
- Funding gap, $60,528,367

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**Funding Overview and Partnerships**

UNICEF South Asia appeals for US$ 80.4 million to support government efforts and interventions to prevent the spread of the virus and respond to those that have been affected through provision of critical supplies and adequate health care and responding to the social economic impacts of the disease. UNICEF has so far received $17.2 million from CERF, Asia Development Bank, DFID, Global Partnership for Education (GPE), Government of Japan, World Bank and Facebook Foundation. In view of the worsening the situation, additional funding is urgently required to support government, communities and children to scale up intervention for preparedness and response to stop the spread of the virus and support government service delivery system and respond to social impacts of the pandemic.

**Situation Overview & Humanitarian Needs**

Over the past week the number of confirmed cases has significantly spiked by 5,231 more cases to reach 8338 cases. The number of cases during the first week of April alone is more than 168% more than the combined total of cases from February to March. The highest increase has been reported in India where the cases by 273% from 1117 to 4169 while in Afghanistan the cases more than doubled from 145 to 367 cases. In Pakistan more than 1855 new cases have been reported bringing the total to 3505. Across the region the case have also increased slowly but gradually; 176 cases in Sri Lanka, 88 Cases in Bangladesh, 19 cases in Maldives, 9 cases in Nepal and 5 cases in Bhutan. The increasing number of cases in slums such as Dharavi, Asia’s biggest slum in Mumbai where more than half a million people live in less than 2.5 square kilometres has raised concerns that without timely action the epidemic if left unchecked could cause a wave of contagion and unsure of access to adequate public health services in their vicinity. The ongoing lockdowns in most countries is having negative consequences on the delivery of services and livelihoods especially amongst the most vulnerable people. In Bangladesh, the government has indicated that access to the Rohingya refugee camps will be restricted to critical services only which cripple the delivery of basic services in the camps putting the population at risk of secondary effects and diseases. In India, millions of people have been quarantined in 21 relief camps across the country to provide them with relief assistance. However, there are concerns that the mushrooming of these quarantine camps could serve as another potential breeding grounds for COVID-19 since it is difficult to observe and practice social distancing in such overcrowded locations. In Afghanistan, UNICEF is facing a potential pipeline break at the end of April for the supply of RUTF because of the intermittent closure of the Pakistan border. The lives of thousands of severely acute malnourished children who depend on these supplementary foods will be at risk. In Pakistan several nutrition sites for the treatment of severe acute malnourished children have been closed due to the restrictions on movement.

![South Asia COVID-19 confirmed cases March 01 - April 06, 2020](image)

*Source: WHO COVID-19 Daily Sitreps¹*

**Partnership and Coordination**

UNICEF regional office and country offices continue to engage and work in close collaboration and coordination with WHO, governments, Inter Agency taskforces/other UN agencies, Centre for Disease Control, INGOs and other stakeholders including donor agencies such as Asia Development Bank, World Bank and others. In Afghanistan, Bangladesh, Bhutan, Nepal, India and Sri Lanka, UNICEF is actively engaged in the UNCT coordination mechanism to support the government response. In Afghanistan, Bangladesh and Nepal where government led cluster or sector mechanism remain active, UNICEF co-leads the WASH sector, Education, Nutrition and Child Protection and is

engaging in the inter sectoral working group to develop joint inter-sectoral preparedness and response plan. In Sri Lanka, as the lead of the UN Social Protection working group, UNICEF has been convening coordination meetings with International Financial Institutions (IFIs) including IMF, World Bank, ADB, EU, and UN agencies to discuss support to the government response to COVID-19 with a particular focus on providing social protection assistance to the most vulnerable households. In India, UNICEF is co-leading with UNDP the UN wide rapid assessment of socio-economic impact on the vulnerable groups in coordination with UNSDF Result Group 1 on Poverty and Urbanization. Collaborating the national network of NGOs across the country, the conceptual framework and methodology are being finalized, using RapidPro, focusing on vulnerable groups such as children, adolescents, women, urban poor, migrant families and socially excluded groups.

**Summary Analysis of Programme Response**

The Regional Office and Country offices response plans have been developed in alignment with the 2020 WHO Global Strategic Preparedness and Response Plan (SPRP), and the 2020 UNICEF COVID-2019 Humanitarian Action for Children Appeal. The key priority for the RO/CO response plans is on the immediate measures that must be undertaken to ensure preparedness and response actions to prevent and respond to the COVID-19 outbreak in each country focusing on the following areas; (1) risk communication and community engagement, (2) critical medical and Water Supply and Hygiene (WASH) supplies and services, (3) provision of healthcare and nutrition services, (4) access to continuous education and child protection services, and promoting cash transfers to address the social impact of the epidemic. Recognizing the specific impact on women, adolescents and children, the strategy includes engagement with women leaders and organizations to reach communities, and integration of measures for Gender Based Violence (GBV) prevention and response across sectors.

Building on UNICEF wide network of offices, ongoing programs and vast network of partners, UNICEF in South Asia stepped up its engagement in risk communication and community engagement relying on its know-how on hygiene promotion, social and behaviour change communication and experience from previous epidemics, including in this region (SARS, H1N1 etc).

**Afghanistan Country Office;**

*Provision of adequate health and nutrition care*

- Using the existing infrastructure, UNICEF has deployed Fifteen Mobile health Teams (MHT) to support the government on community engagement and awareness in the worst affected districts by COVID-19. Through the engagement the teams have so far identified around 60 people showing COVID symptoms and referred 5 adults who returned from Iran for medical test.
- UNICEF has trained 50 team members of the Mobile Health Teams on infection prevention and control. In addition, all members of the Mobile Health teams including midwives, vaccinators, and doctors/nurses have been equipped with personal protective equipment (PPEs) to enhance their personal protection.
- As part of strengthening preparedness in view of the ongoing movement restriction, UNICEF has continued to preposition Therapeutic supplies in provinces and health facilities.

*Access to continuous education and child protection services*

- The Education section continues to engage with Minister of Education at the National and provincial level to produce and broadcast education programme on TVs and radios. Thus far, 500,000 children, were reached in one region.
- A total of 6,637 people including 2,652 children (girls: 664, boys: 1,988) and 3,985 community members (women: 1,697, men: 2,288) received knowledge and skill on COVID-19 and importance of strengthening protection mechanisms during COVID-19 pandemic
- In addition, 4,957 including 3,504 children (girls: 1,479, boys: 2,025) and 1,453 community members (women: 162, men: 1,291) received psychosocial support to enable them to cope with the current situation during COVID-19 and maintain their resilience and normalcy. This is very critical in Afghanistan as there are reports of increasing stigma attached to people affected by COVID-19 and those returning from Iran

**Bangladesh Country Office;**

*Risk Communication and Community Engagement*

- UNICEF Bangladesh posts on #StayAtHome, focusing on how to recognize symptoms, how to protect people around you and when to see /not to see a doctor reached 12.5 million people.
- Through engagement with the Islamic Foundation and Islamic Scholars 11.5 million people from 230,000 mosques were reached across the country with messages on 20 second handwashing and the importance of keeping social distance and using soap.
- In Cox’s Bazar, radio programmes continue to air every 30 minutes (jingles, magazines, live shows and call-ins). A PSA on general food distribution and social distancing in the camps has been broadcasted by Radio Naf
99.2 FM, which covers about 70 per cent of the camp. Radio is the main source of information in the camps as the use of cell phones has been blocked

Critical medical supply and WASH Services
- UNICEF supported the continuity of water supply for 102 million people across all 64 districts by transferring funds to the Department of Public Health Engineering (DPHE) for pre-positioning of bleaching powder, tools and spare parts for operation and maintenance of tube wells.
- UNICEF conducted a WASH assessment and engineering visit to the site identified for constructing the COVID-19 isolation and treatment unit in Cox’s Bazar. As part of disaster risk mitigation in this flood prone area, land filling of the site will be initiated this week to protect the infrastructure from flooding during Monsoon season.

Provision of adequate health and nutrition care
- With the ongoing lockdown provision of basic services such as immunization has been affected. While all static immunization centres in urban areas were open this week, only 25-30 per cent of planned immunization sessions were conducted. In Cox’s Bazar District, 71 per cent of planned activities were completed.
- An outbreak of measles in a remote area in the Chittagong Hill Tracts has underscored the need for ensuring routine immunization and an outbreak response was conducted despite COVID-19. An expanded campaign targeting 11,500 children is planned this week. Additional outbreak response immunization may also take place as required.
- This week, 1,426 primary caregivers of children aged 0-23 months in camps and 5,309 in host communities received IYCF counselling through facilities and community platforms. Group sessions have been suspended to minimize the risk of COVID-19 transmission.

Access to continuous education and child protection services
- The Ministry of Education is airing recorded classes for Grades 6-10 for three hours a day through national television since 29 March. UNICEF is providing technical and financial support to plan and coordinate the remote learning with multiple agencies and partners to maximize the reach.
- On 4 April strong winds destroyed either fully or partially 61 learning centres in the camps in Cox’s Bazar. Due to restrictions, it may not be possible to rebuild the sites until the situation improves.
- The UNICEF-supported Child Helpline received over 9,000 calls this week, an increase of 40 per cent in the past two weeks due to COVID-19. Callers were supported with referrals to health services and temporary shelters, including for children and families living on the streets.

Bhutan Country Office;
Risk Communication and Community Engagement
- UNICEF is supporting the Ministry of Health and other relevant ministries to promote risk communication and community engagement.
- Approximately 35% of total population of the country reached through engagement of 232,474 community influencers (local leaders, health assistance, teachers and students, religious persons, and volunteers) in all 20 districts coordinated by the district health officials.
- UNICEF has procured and distributed portable megaphones for community workers and volunteers to disseminate messages in rural communities.
- The UNICEF supported Risk communication and community engagement plan has been endorsed by the government and is currently being implemented.
- UNICEF has initiated engagement of children through Ministry of Education’s virtual learning programmes on risk communication.
- The country office has initiated a rapid PULSE survey on information needs and assessment through engagement of youth volunteers.

Critical medical supply and WASH Services
- Construction of one additional handwashing station with provision of safe drinking water supply has been completed for Changangkha Monastery taking the total number of such facilities in Thimphu to 7. These handwashing facilities are expected to benefit about 7,500 people.

Access to continuous education and child protection services
- 170,263 students of grade PP-XII are expected to be benefiting from the education in emergency classes being broadcast over national television and other media.
- UNICEF continue to engage the Mental Health Task team under the Ministry of Health to roll out the Mental Health and Psychosocial Response to the COVID-19 pandemic.
- 37 adults and children have been supported through the Sherig Counselling-an online platform set up to provide counselling and psychosocial support in response to COVID-19 pandemic.
- 7 social media posts on Mental Health and Psychosocial support were developed by the Child Protection, C4D and communications teams.
India Country Office;

Risk Communication and Community Engagement
- Training of Trainers have been completed at national and states level, for cascading essential training packages for frontline workers, including community based health providers (AAAs), nurses, medical officers, Ayush doctors, swachhagrahis (sanitation volunteers), and public health engineering department officials (PHED), as well as partners such as Red Cross, National Youth Network.
- UNICEF State offices continue RCCE implementation, engaging religious leaders, broadcast media, community radio and other channels. During the reporting period, a total of 58 million people were reached bringing the total number of people reached in the month of March to 253 million people. On average UNICEF content appears 14.3 million times and is seen by 8.3 million every day. A total of 486 million impressions total – including almost 100 million this week.

Critical medical and WASH supplies and Services
- Facilitated the orientation of local government officials, or Panchayati Raj Institutions (PRIs), on the establishment of quarantine facilities in Odisha; IPC assessments in isolation / quarantine facilities in Karnataka; orientation of Tea Garden Authorities on COVID-19, including technical support to disinfect 200 tea gardens in Assam.
- Supported promotion and scale up of social distancing nudges at community water points in multiple states
- Developed foot operated handwashing station designs / BOQs with social distancing nudges and assessment to understand the market and production capacity (availability of suppliers, manufacturers).
- Technical support provided to state level PHED water quality laboratories on production of hand sanitizers in multiple states.

Provision of adequate health care, including case management, WASH and nutrition
- UNICEF continue to liaise with Indian Academy of Pediatrics (IAP), National Neonatology Forum (NNF), and Federation of Obstetric and Gynecological Societies of India (FOGSI) for dissemination of the Clinical Practice Guidelines and trainings for perinatal and pediatric COVID19 management
- In collaboration with WHO, the field offices provided support to states governments in coordination on assessment of the COVID19 designated facilities UNICEF has updated the POSHAN COVID-19 Resources – an Online Archive for COVID-19 Related Resources on Nutrition, ECD, Food Security, Agriculture

Access to continuous education and child protection services
- An online career guidance and counselling webinar has been initiated; 1,350 counselors are part of this training programme to support students during the COVID -19 crisis In Assam, 0n-line orientation of 65 district education officers on COVID response planning around risk communication and continuity of children's learning using distance learning platforms.
- UNICEF is supporting CHILDLINE, a large helpline with outreach capacity across the country, to deliver support to children affected or in distress because of the pandemic. CHILDLINE has seen a rise in call volumes by 50% compared to their average regular calls.
- In partnership with the National Institute of Health and Neuroscience (NIMHANS), UNICEF has contributed to the development of a package for psychosocial support to children under care (quarantine/isolated/hospitalized) from COVID 19, and the psychosocial care for the health care providers.

Social Protection/Humanitarian Cash Transfers
- Mapping and assessment of existing social transfer schemes completed for policy recommendations for horizontal and vertical expansion of existing cash transfer schemes to the national and state governments (UP, Tamil Nadu, Bihar, Maharashtra, Jharkhand, Chhattisgarh, Gujarat, Assam)
- UNICEF is conduction assessment of functionality of mechanisms for cash transfers to ensure continuity of regular social protection delivery are ongoing in all 16 states Advocacy is ongoing to promote Gram Panchayats’ tracking and monitoring of the Social Protection package for the COVID-19 response are reaching beneficiaries and awareness raising including risk communication.

Maldives Country Office;
Risk Communication and Community Engagement
- Risk Communication and Community Engagement plan implementation ongoing, with specific focus on disseminating key messages on focused on: COVID-19 prevention, public awareness on domestic violence that can occur due to extended home isolation, advising the public on restricting their movement, how to access psychosocial and mental health support and updates on continuation of essential services especially to the most vulnerable.
- A new booklet on the guidance for home isolation for families was developed and disseminated to households to provide the public with the right information on importance of isolating oneself if certain symptoms have been identified.
- Daily messages and infographics are disseminated on UNICEF Maldives social media – this week’s focus has been on; guidance to parents and caregivers on speaking to children about being safe from COVID-19, and guidance to parents and caregivers on protecting themselves and children from COVID-19.

Access to continuous education and child protection services
- Tele-classes for all secondary grades (from Grade 9 – 12) continued last week, which targeted 14,852 children. A mechanism to monitor the actual number of children reached is being developed in the EMIS. Tele classes for students of grades 7 and 8 began from 6 April 2020, targeting around 12,750 students.
- Preparations to provide home-based learning for grades 1 – 6 are underway and is expected to start from 8 April 2020, targeting 44,000 students.
- Training of teachers on Google Classroom platform is underway for the first batch of 100 teachers.
- To strengthen the state-run children’s homes, UNICEF is providing 2 teachers, 7 care workers and 2 sports and recreational teachers. This will further enhance the capacity to cater for the 172 children in the two homes during a time when the schools are closed, and the children are confined to the home.

Nepal Country Office;
Risk Communication and Community Engagement
- UNICEF reached more than 15 million people with key messages on COVID-19 focusing on social distancing (stay home) and COVID-19 preventive and protective messages through multilingual radio public service announcements, megaphone announcements, television spots, mobilisation of influencers, print media, telecommunication partners, private sectors and social media channels. In addition to Nepali, key messages are being disseminated in different local languages such as Maithili, Awadhi, Bhojpuri. Out of a total of 10.5 million reach of social media messages, 45 per cent are female and 55 per cent are male whereas one-third of this reach comprises of adolescents and youths aged 13-24 years.
- Partnership signed with the community radio broadcasters and television channel to produce and air COVID-19 messages and issues. The radio programme will be on air from 9 April 2020.
- Multilingual Radio public service announcements on child protection produced and aired through various radio stations across Nepal.
- UNICEF with cluster colleagues updated the RCCE strategy with overall content planner to drive a more coordinated interagency response. Over 60 agencies have access to the planner.
- First round of community perception survey tools finalized, and data collection started from 31 March 2020 targeting 1,000 people to get feedback on concerns, comprehension of risk communication efforts.
- More than 10,450 calls answered through hotlines services. 8 calls were on clarification on misinformation and rumors, 178 report on suspected cases or sharing and remaining on COVID-19 symptoms, period of isolation, test and quarantine.

Critical medical and WASH supplies and Services
- UNICEF dispatched 60,000 surgical mask and 10,000 pairs of disposable gloves to Karnali and Sudurpaschim Provincial Health Directorate, and blankets to Teku hospital for patient accommodation in isolation and quarantine
- UNICEF coordinated the assessment of WASH services in 5 selected health facilities, where initial findings suggest gaps in following areas: i) lack of water quality treatment facilities ii) lack of disability and menstruation hygiene friendly toilet, iv) lack of adequate handwashing facilities, v) lack of personal protective equipment for health care worker and auxiliary staffs who deal with cleaning and waste management, vii) lack of disinfection equipment such as autoclaves and other cleaning supplies, viii) open drainage around the hospital premises.

Access to continuous education and child protection services
- UNICEF jointly with Save the Children provided technical support to Ministry of Education, Science and Technology (MoEST)/ to develop and finalize the COVID Education Contingency Plan with a budget of $4.4 million.
- UNICEF is part of the technical working group formed to develop a home learning pack for children from ECD to Grade 3.
- School Management Committee Federation has issued an appeal to avoid the use of schools as a quarantine centre, following several reports that over 295 schools have been turned into quarantine centres.
- Out of the total of 116 people seeking psychosocial support through helpline, 55 people (32 male and 23 female) were supported through UNICEF’s support. Eight counsellors have been dedicated to providing counselling service. Among the total callers, 7 were referred for psychiatric support. Most of the calls were related to information on symptoms of COVID-19 and to share their feelings of fear and anxiety. Follow up calls were also done to individuals in need.
- The National Child Rights Council (NCRC) monitored 233 residential care homes in Kathmandu Valley and found out that some were lacking basic supplies like cooking fuels and sanitation supplies.
- UNICEF has developed and recorded in five major languages child protection messages highlighting the vulnerability of children in the current situation and promoting the use of Help-line services including the Hotline of Nepal Police for assistance to unaccompanied, separated or other vulnerable children
Provision of adequate health care, including case management, WASH and nutrition

- UNICEF provided 42 square meter medical tent to Janakpur Provincial Hospital to operate as a fever screening clinic to maintain physical distancing of the patients who come for check-up.
- UNICEF and WHO are supporting National Health Training Centre (NHTC) to develop a training package for IPC, case management for health workers in hospitals providing isolation and ICU services including a package for public health managers. Four packages of online courses that are in WHO portal have been selected for translation into Nepali.
- UNICEF provided technical support to IYCF and IMAM technical working groups to develop guidance notes for healthcare workers related to breastfeeding and treatment of severe acute malnutrition.
- Procurement underway of 2,000 cartons of Ready to use Therapeutic Food (RUTF), 250 cartons of F-100 and 200 cartons of F-75 needed for the treatment of children with severe acute malnutrition.

Social Protection/Humanitarian Cash Transfers

- UNICEF is providing coordination support to the Nepal Social Protection Task Team and helping develop a joint advocacy and programming position focusing on providing social protection measures such as emergency cash transfers to poor and vulnerable groups, income support for affected workers, subsidized health insurance and other measures.
- UNICEF is engaging with Ministry of Finance and National Planning Commission on economic relief packages and is planning to implement an emergency cash transfer programme jointly with WB and DFID.

Data Collection and Analysis of collateral impacts of COVID-19

- Impacts of COVID-19 and ongoing lock down to contain the spread of corona virus are beginning to surface. Reportedly there has been decrease in institutional delivery and ante-natal check-ups; and regular immunization services have been halted in many health facilities. There are early indications from the field that the distribution of social security allowances to elderly, widowed and disabled people has been impacted. In Province 2, municipalities have not distributed the second tranche of social security allowances yet due to the absence of municipal staff as a result of the extended lockdown.

Pakistan Country Office;
Risk Communication and Community Engagement

- Social media has been used as a platform for both advocacy and to promote key messages on behaviour change. UNICEF’s social media platforms (including the polio social media platform) have reached a total 7,747,130 people with risk communication messages.
- The Polio helpline is being used for COVID-19 and has received a cumulative total of 966,889 calls with 517,060 being received during the reporting period. The Punjab helpline is also operational and till date has responded to a total of 5,600 calls.
- A combined poster with key messages on prevention, signs and symptoms as well as social distancing was developed and is now being used across the country to promote positive behaviours. Videos in local languages featuring religious leaders and other influencers were disseminated via WhatsApp to encourage positive behaviours particularly on social distancing. A total of 27,210,000 IEC materials have been printed and distributed with UNICEF’s support. A total of 231,470 at risk people have been reached through community engagement.
- Making use of the already existing communication networks in WASH, a total of over 811,000 people were reached with COVID-19 hygiene promotion messages with 366,588 people reached during the reporting period.
- UNICEF supported the Ministry of Health in creating a chat bot which gives information in seven languages. It is an interactive chat bot designed for users of WhatsApp.
- Through existing health and polio alliances 14,208 religious leaders are engaged and mobilised to promote social distancing, to encourage praying at home and to promote key messages on COVID-19. Many religious leaders have recorded video messages shared through WhatsApp, talked on media channels and have been engaged in mosque announcements. Although there was initial resistance in all provinces, intensified engagement has led to positive shifts.
- Orientation has been provided to journalists and 730 reporters and bloggers and have been engaged consistently at both federal and provincial level for promoting key messages on COVID and to counter fake news and myths on the coronavirus.

Critical Medical and WASH Supplies and Services

- In the absence of IPC coordination platform, the government is using the WASH sector coordination mechanism both at federal and provincial level to plan and implement the COVID-19 response.
- UNICEF is facilitating the process of the development of a Federal level WASH sector COVID-19 preparedness and response plan aligned with IPC and RCCE. The draft plan is under review and expected to be endorsed in the next meeting on 9th April 2020.
- UNICEF supported the training of 40 sanitary staff in Punjab and 104 social mobilisers and community resource persons (CRPs) in Sindh to reduce the risk of infection among the frontline workers providing essential IPC and hygiene promotion services.
• UNICEF supported Balochistan Rural Support Programme (BRSP) to train 25 staff to be deployed for the COVID-19 response on COVID-19 IPC/WASH services in 18 health facilities in 11 Districts.
• To further enhance the capacity of health care facilities to implement IPC protocols, UNICEF provided 22,000 bars of soap, 102 solid waste bins and 285 boxes of aqua tabs to the department of health in Balochistan. These will be distributed to 18 health care facilities initially assessed by UNICEF.
• UNICEF has assessed 155 designated case management, isolation and quarantine facilities and supported the installation of WASH facilities in 44 of the 155 facilities to date as well as in 17 non-assessed facilities in Punjab that urgently needed access to water (11 in Sindh, 43 in Punjab and 7 in KP) reaching 20,890 people who have visited the facilities to date, contributing towards reducing the rate of infections within health care facilities.
• A total of 156 communal points (93 in KP and 40 in Punjab, 4 in Baluchistan and 19 in Sindh) have been provided with handwashing facilities (mobile and fixed) reaching 153,241 people across the four provinces. These facilities have also helped in raising awareness on the importance of handwashing to fight COVID-19.

Access to continuous education and child protection services
• A total of 149 schools in Baluchistan (14) and KP (137) have been designated as quarantine and/or isolation centres by the provincial governments. UNICEF is advocating with Federal and Provincial governments against the use of use of schools as quarantine and isolation centres because of the potential negative impact on enrolment and retention of children after school reopening. UNICEF is also preparing guidelines for safe reopening of schools, including specific actions needed for schools used as quarantine centres.
• UNICEF supported the Department of Education of Baluchistan in starting outreach activities which reached 8,105 parents (26 per cent women) with messages on the importance of learning during the period of school closure.
• In KP, 34,305 members of the Parent Teacher Councils, education department officials, CSOs, Cadet Colleges and local government officers were reached with information messages on prevention and precautions against COVID-19.
• 1,774 teachers and head teachers (1,052 females) in KP benefitted from a radio programme aimed at addressing mental health and psychosocial support.
• To ensure a consistent and coordinated response, the Education sector partners co-led by UNICEF has activated a DRR Working Group for education in Sindh. UNICEF provided take home worksheets to support 10,188 students (5,998 girls) that were enrolled in its Accelerated Learning Programme centres so that they would be able to continue their structured learning at home.
• In Punjab, UNICEF in consultation with the Education department has finalized Education COVID-19 Preparedness Response Plan and have also reviewed education messages.
• Using a training package developed by UNICEF, a total of 201 social workforce professionals (85 women and 116 men) have been trained in psychosocial support and stigma prevention in all the four provinces.
• A total of 52 children in addition to 681 (291 male and 390 female) parents, care givers and individuals have been provided with psychosocial support and services by trained by social workforce professionals in Punjab. Currently the major challenge encountered is in reaching people in quarantine or isolation centres due to non-availability of PPE.
• In KP, UNICEF supported the government to develop the Sector Engagement Framework/Operational Plan on Mental Health and Psychosocial Support which is now operational. As a result, a number of initiatives were implemented including a live MHPSS radio show which reached about 37,000 people and a live intervention of a senior psychologist on the MHPSS Facebook page, viewed by 12,000 people.

Provision of adequate health and nutrition care
• UNICEF continues to strengthen the capacity of frontline workers on infection prevention and control and, to date, a total of 5,464 frontline health workers have been oriented on COVID-19 community awareness and management of mild cases.
• UNICEF is collaborating with Polio Eradication Initiative (PEI) in Pakistan to use thousands of polio health workers to maintain and strengthen routine immunization and social mobilization for the COVID-19 response.
• In collaboration with the government, UNICEF is co-leading the Nutrition Working Group coordination of nutrition sector response to COVID-19 both at the provincial and federal level.
• As a result of restrictions on movements several health facilities providing treatment for children affected with Severe Acute Malnutrition (SAM) suspended services. In KP 105 OTPs were closed and 48 in Sindh.
• UNICEF and partners’ advocacy made it possible for services to resume in all but 6 OTPs in Guadalajara Town, Karachi and a total of 82 OTPs out of 113 are now functional in KP. A total of 37,000 cartons of RUTF are being distributed to KP, Balochistan and Sindh to ensure adequate treatment of SAM cases in districts most affected by COVID-19.

Sri Lanka Country Office;
Risk Communication and Community Engagement
• The 14-day UNICEF and WHO mass media campaign on key prevention messages through hygiene ended. On social media the campaign reached 3.6 Million with video assets accumulating 2 Million views with over 702,000 engagements.
UNICEF, in collaboration with WHO and RCO, is currently working with the Health Promotion Bureau of the Ministry of Health to develop a risk communication strategy and the phase 2 communication campaign which will be launched today.

Critical Medical and WASH Supplies and Services

- With financial support from London Stock Exchange, UNICEF SLCO procured and delivered some essential medical equipment to the Ministry of Health (MoH) on 1st April 2020. Given the shortage of supplies within the country, SLCO is working with the Supply Division Copenhagen to procure essential PPE supplies which will arrive in Sri Lanka during the first week of April.
- Hand sanitizers urgently required for the field health staff were procured and provided to the MoH on 3rd April 2020.

Access to continuous education and child protection services

- UNICEF SLCO has been invited by the government to be a technical partner to this Presidential Task Force to ensure continuity in the education sector in the context of COVID-19, while also recommending methods to modernize primary, secondary and tertiary education sectors
- The Emergency Education Cluster meeting convened by UNICEF together with MoE, identified the immediate need to develop an overall response plan and a costed-contingency plan covering area such as continuous learning, water, sanitation, hygiene, child protection, psychosocial support, principal/teacher awareness etc.
- The MoE has activated its web-based learning platforms and have sought partnership with private network service providers to ensure free access for students to these platforms. However, MoE recognizes that children in remote and lower-income quantiles may not have the facility to access these services. In consultation with the Ministry of Education (MoE), UNICEF has designed a rapid assessment combining both qualitative and quantitative methods to inform the overall Education Response/Contingency Plan.
- UNICEF together with the NCPA conducted digital case conferencing in Eastern, Uva, Central and Northern provinces for 10 children. With these experiences, the Standard Operating Procedures for digital case conferencing will be finalized within this week. UNICEF and the Provincial Probation Department distributed the risk communication materials to the children home managers reaching around 1,000 children last week. UNICEF ensured that 10 children in certified schools were reunified with their families in Northern province.

Provision of adequate health and nutrition care

- Technical guidance provided to the MoH in the development of Interim guidelines for provision of maternal and new-born care services in hospitals and in the field sector during the outbreak of COVID 19 infection. UNICEF continue to engage with the MoH on the maintenance of essential MNCH services during this period with a view to support essential elements technically and financially.
- Technical guidance on IYCF programming in the context of COVID-19, and guidance on donations and financial/in-kind contributions from Food and Beverage industry was shared with the MoH.

Social Protection/Humanitarian Cash Transfers

- UNICEF strategic advocacy with the President Secretariat, Department of National Planning, and Task Force for Poverty Eradication and Livelihoods Improvement has led to a social protection response from the government. Consequently, the government has announced a series of social protection measures to support households withstand the economic impact of the crisis through vertical and horizontal expansion of five different social protection schemes/programmes that will reach 3.3 million beneficiaries (LKR 5,000 transfer).
- UNICEF has initiated a more in-depth analysis of the economic impact of COVID-19 for the Sri Lankan economy and modelling of different potential social protection policy responses and their impact to soften the blow, as well as assessing the cost of these different options and potential sources of financing to support evidence-based responses.

Data Collection and Analysis of collateral impacts of COVID-19

- In collaboration with UNDP, UNICEF has initiated work to monitor how households/families/communities are being affected by the crisis and whether the policies put in place are helping them, specifically through setting up real-time tracking (e.g., sentinel sites using telephone surveys) that continues for the medium term (12-18 months).
## Funding Status

<table>
<thead>
<tr>
<th>Country</th>
<th>Requirements ($)</th>
<th>Humanitarian resources received ($)</th>
<th>Other Resources ($)</th>
<th>Fund available ($)</th>
<th>Funding gap ($)</th>
<th>Percentage (%)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Afghanistan</td>
<td>12,240,000</td>
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<td>10,740,000</td>
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<tr>
<td>Bangladesh</td>
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<td>Bhutan</td>
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<td>Regional Office</td>
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<td><strong>Total</strong></td>
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<td><strong>17,199,084</strong></td>
<td><strong>2,693,589</strong></td>
<td><strong>60,528,367</strong></td>
<td><strong>75</strong></td>
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</tbody>
</table>

Next SitRep: 14 April 2020
UNICEF continues to monitor the situation very closely and situation reports will be issued on regular basis as the developments unfold.

**Internal and External Media**
UNICEF airlifts 14 metric tonnes of protective equipment to Pakistan; [https://bit.ly/2Uc7V0y](https://bit.ly/2Uc7V0y)

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**Case Study**

**Children as leaders in spreading prevention awareness on COVID-19, Sri Lanka**

In Sri Lanka UNICEF promotes a child centered approach to disaster risk reduction (CC-DRR) to safeguard children’s rights in a changing climate. Together with the Department of Probation and Child Care Services (DPCCS) under the Ministry of Women and Child Affairs, UNICEF is providing capacity building support for sub-national level officials of the Government of Sri Lanka to train children as change agents for disaster risk reduction, emergency response and climate change adaptation. So far, this programme has reached over 300 officials and 1,300 children. UNICEF conducted a national level Training of Trainers on CC-DRR where selected officials from 9 districts were trained as Master Trainers. They have commenced implementing CC-DRR activities in their own areas together with the children’s clubs they have established.

With the enhanced knowledge and understanding through CC-DRR programme, the children in one district had taken initiative to create awareness on COVID-19 within their communities. Children had developed posters on COVID-19 prevention and good hygiene practices on their own and had pasted these posters around their village to educate the communities.

Ms. H.M. Priyangika Sriyani, the CRPO in charge of these children clubs in Puttalam very proudly commented: “Two weeks ago, I got a call from Arachchikattuwa children club members expressing their enthusiasm to educate their community members on the risk of Corona virus and to promote positive behavior including promotion of self-reporting, self-quarantine and promote non-discrimination practices for corona victims. I did not encourage the children club gathering but they came up with innovative ideas and working modalities to educate communities on this risk messaging while maintaining all safety measures and physical distancing. I reached out to the DPCCS and UNICEF to receive relevant key messages and shared with the children club members who used their own resources to prepare posters and hang them in public places in their village. This child-lead initiative created a greater value and appreciation for risk communication messages among the community members.”
Caption: “Let’s protect ourselves, our community and country from COVID-19”

By Arachchikattuwa Child Club, Puttalam district

Prevention methods highlighted in the poster:
1. wash hands as many times as possible
2. if you have cough or sneezing, cover your nose and mouth from your elbow
3. when you are in public places, avoid touching your face
4. always wear a mask when going out of your home
5. eat and drink healthy hot food/drink as much as possible (to avoid contracting common cold/flu)