WHO has warned of a potential explosion of cases in the South Asia region due to alarming increase with the total number of cases passing half a million people. During the reporting period South Asia region recorded a total of 237,228 new cases (cumulative total reaching 511,376 confirmed cases) and 11,909 deaths. This represents a 86% increase compared to previous reporting period.

With the relaxation of the lockdown measures across the region there are concerns that cases could spike further across the region due to mass movement of people particularly migrants labourers returning home. The rapid increase in number of cases will increase the demand for care which could overwhelm the health systems.

UNICEF and partners in the region have reached a total of 13 million people (54% of the target) with critical WASH services and supplies as part of infection prevention control with 3 million people reached during the reporting period.

An estimated 90 million people (88% of the target) have been engaged through risk communication and community engagement using various platforms and networks across the region.

UNICEF and partners have reached 534,862 people including children (43% of the target) with community based mental health and psychosocial support.

With high rate of infections amongst health workers, (for instance 8% of health workers are affected in Afghanistan) UNICEF has procured and delivered critical Personal Protective Equipments (PPEs) to support and protect 35,423 health workers.

A total of 1.8 million health care providers have been trained to detect, refer and manage COVID-19 cases in children, and pregnant and breastfeeding women. Similarly, in collaboration with government and partners, UNICEF has reached 7.5 million women and children with essential health care services including immunization, prenatal and postnatal care, UNICEF Supported facilities.

UNICEF’s Response Budget in South Asia

UNICEF in South Asia
COVID-19
Situation Report No.13

Reporting Period: May 29 – June 10, 2020

UNICEF Appeal 2020
For South Asia
US$ 243.5 million

Situation in Numbers

237,228
No. of new cases over the past week (SAARC DMC June 11, 2020)

511,376
Total cases of COVID-19 (SAARC DMC June 11, 2020)

1,000,000,000
# of targeted population to be reached with risk messages by UNICEF response (ROSA Response Plan 2020)

94,000,000
# of targeted children to be reached with home learning (UNICEF 2020)
Funding Overview and Partnerships
As part of a Global COVID-19 Appeal, UNICEF South Asia has revised its appeal to US$ 243.5 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 ensuring continuous access to essential health services and responding to the social economic impacts of the disease. This appeal increased substantially in line with the escalating needs due to the spread of COVID-19 in South Asia. UNICEF South Asia has so far received $71.5 million from the Asia Development Bank, Bill and Melinda Gates Foundation, CERF, CIDA, DFAT, DFID, Facebook Foundation, Global Partnership for Education (GPE), Government of Denmark, Government of Finland, Government of Germany (KFW), Government of Japan, London Stock Exchange, World Bank, UN Solidarity Fund, Standard Chartered Bank, Government of Sweden (SIDA), Unilever and Government of USA (USAID). In this COVID-19 response, partnership with IFIs has substantially increased, with all country offices in the region benefitting from the generous contribution of the Banks to support government responses. In view of the worsening situation, the requests for support have sharply increased and 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 which threaten to reverse development gains.

Situation Overview & Humanitarian Needs
The World Health Organization has warned of a potential explosion of cases in the South Asia region due to alarming rate of case increase, including for example in India where cases are doubling every three weeks. During the reporting period South Asia region recorded a total of 237,228 new cases bringing the cumulative total to 511,376 confirmed cases and 11,909 deaths. This represents a 86% increase compared to previous reporting period. Nepal continues to recording the highest percentage increase (393%) while India reported the largest increase in absolute numbers 128,246 new cases, Pakistan added 58,309 new cases, Bangladesh 36,573 new cases, Afghanistan 9,686 new cases, Maldives 505 new cases and Sri Lanka 400 new cases. With the relaxation of the lockdown measures the number of cases continue to spike across the. In Pakistan, due to the rapid increase in cases hospital capacity in major hotspots is quickly running short and WHO is recommending the government to reimpose targeted and intermittent lockdown. In India and Nepal millions of migrant labourers are expected to return home thereby increasing the risk of further spread of the disease. While the testing capacity remains low across the region, there is a major concern that the number of cases could be much higher than the current numbers. For instance, in Afghanistan 42 percent of those tested are found to be positive yet the country has tested only 47,327 people.

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), Humanitarian Response Plans (HRP) and the 2020 UNICEF COVID-19-2019 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) Improve Infection and Prevention Control (IPC) and provide critical medical and water, sanitation and hygiene (WASH) supplies, (3) Support the provision of continued access to essential health and nutrition services for women, children and vulnerable communities, including case management, (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.

1 https://www.who.int/emergencies/diseases/novel-coronavirus-2019/situation-reports/
2 http://www.COVID-1919-sdmc.org/
With more cases concentrated in urban centres, UNICEF is adapting its response approaches to focus on these densely populated areas with low capacity including slums. Similarly, building on UNICEF country wide networks, ongoing programs and vast network of partners, UNICEF in South Asia has 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 polio and previous epidemics, and engagement of local leaders.

**Afghanistan Country Office;**

**Risk Communication and Community Engagement**

- As a strategic partner of the Risk Communication and Community Engagement (RCCE) Task Force of the country COVID-19 response, UNICEF is using mass media, social media and community awareness to provide timely and accurate information to families and communities. Support has been provided to the Government to develop and implement integrated awareness messages on proper hygiene, hand washing, community mobilization and health self-care. A media spots campaign on COVID-19 was launched, broadcasted across 167 channels and has reached close to 8 million people so far (89% of the target).

- Aligned with the power of influence of the religious leaders in their communities, UNICEF engaged with more than 1,600 *mullahs* and religious scholars to support preventive measures of COVID19, especially during the month of Ramadan. At the communitarian level, the risk communitarian interventions have been using existing networks and influencers, such as religious leaders, community health supervisors, community health workers, youth and adolescents, school management Shura, child protection action network, extenders and subcontractors in all the five regions in Afghanistan. More than 1 million individuals have been mobilized and engaged and received guidance about prevention of COIVD 19, handwashing, nutrition, reference to health facilities and practice of physical distance. In addition, the resources from the Immunization Communication network (ICN) of the Polio programme have also been mobilized, with social mobilisers engaging in sensitizing families and communities with COVID-19 messages since March, visiting more than 1.9 million households reaching over 10 million people.

**Improve Infection and Prevention Control (IPC) and provide critical medical and water, sanitation and hygiene (WASH) supplies**

- With the increasing caseloads across the country and particularly amongst health workers where at least 10% are also affected, protection of health workers is very critical in the fight against the pandemic. Therefore, with the support from the World Bank, UNICEF has procured and delivered a shipment of 150,000 PPEs to be used by 6,821 frontline health care providers over an initial 6 months period. This will enable health care providers to scale up the identification and management of up to 10,000 hospitalized COVID-19 patients.

- WASH programmes have reached over 208,512 people with hygiene supplies along with hygiene promotion to practice and promote healthy hygiene behavior and contain from possible transmission of Covid-19 virus in families and communities. During the reporting week over 134,599 people are benefitting with installation of WASH services and facilities in border crossing points (Herat, Nangahar, Kandahar and Nimroz) with Iran and Pakistan, IDP sites, host communities as well as in health care facilities in Covid-19 prone provinces and districts.

**Support the provision of continued access to essential health and nutrition services for women, children and vulnerable communities, including case management**

- Due to the lockdown measures introduced in recent months, a reduction of attendance in health facilities has been observed, prompting higher demand for services provided by the 60 Mobile Health Teams (MHTs) supported by UNICEF in 14 provinces. Since the start of the response in March, 124,038 women and children have benefitted from continued access to obstetric, neo- and postnatal and child health care, including immunization services provided by mobile teams.

- In addition to regular service provision, MHTs support identification of patients with COVID-19 symptoms and conduct community sensitization. UNICEF supported 60 mobile health and nutrition teams in 14 provinces and the teams have referred 673 suspected cases of COVID 19. Over 7500 health care providers including 340 community health workers (of which 163 females) have been trained on detecting and referrals of COVID-19 are helping with management of COVID-19.

**Access to continuous education, social protection, child protection and gender-based violence (GBV) services**

- With school closures, restrictive movements and interruption to normal routines, stigma and discrimination have been exacerbated, especially for children on the move returning from Iran, increasing their vulnerability to abuse, exploitation and violence. In cooperation with Ministry of Labor and Social Affairs, Ministry of Refugee and Repatriation (MORR), IOM and UNICEF are rolling out the Standard Operating Procedures (SOP) on Case Management to address stigmatization and discrimination to ensure continuum of care to child migrants returning from Iran/Pakistan especially during COVID-19.

- The Child Protection response has focused on raising awareness in communities and ensuring access to hygiene kits to the most marginalized children such as those who are in detention, orphanages, children on the move and those without parental care. So far 150,000 people in high risk communities have been reached with messages on child protection, COVID-19 Prevention and addressing stigma and discrimination.

- Nearly 50,000 children and parents have benefitted from Psycho-social first aid and positive parenting messages to promote their resilience, maintain normalcy and to minimize negative coping mechanisms during COVID-19. Similarly, UNICEF is on the front-line supporting the unaccompanied and separated children (UAMS) including those
UNICEF together with other member of the RCCE Pillar is working to ensure the over 160 million people in Bangladesh have the information they need to protect themselves and their families from COVID-19 and its socioeconomic impacts. To date, 76 million people have received messages through pre-call notifications on mobile phones. A key challenge has been to identify and meet the most important information needs of audiences at any given point in time given the rapidly changing situation. In, addition, misinformation is a major threat for online messaging. During the reporting period, 61 cases of misinformation were reported to Facebook for removal.

The UNICEF partnership with Islamic Foundation under Ministry of Religious Affairs resulted in the issuance of a directive on 20 May to all national and sub-national officials to reinforce mosque-based interventions to prevent COVID-19. This includes the reinforcement of the use of mosque loudspeakers to share key COVID-19 messages, a critical channel reaching over 50 million people. About 47 million people, mostly men and boys, have been further engaged through Friday prayers led by trained Imams from 238,000 mosques. In a mobile-based survey administered to 119,841 respondents (21 per cent female) between 21 May and 1 June, 84 per cent of respondents who attended Friday Prayers reported that Imams shared messages related with COVID-19 during their sermons.

With the increasing number of cases in Cox’s Bazar District, RCCE efforts have been intensified across all 34 camps and eight upazillas of the district. This week, over 52,000 Rohingya refugees and host community members were engaged in two-way communication while messages were pushed out across the catchment area through loudspeakers, radio, TV, social media and other channels. According to a radio listenership feedback, radio is one of the most critical modalities for reaching populations: 90 per cent of respondents have heard radio messages on COVID-19, 94 per cent found the messages useful and 99 per cent wished to have more information through radio channels.

UNICEF is supporting the Government of Bangladesh to scale up its COVID-19 testing and treatment capacity. There are currently 49 testing laboratories and 111 COVID-19 treatment centres nationwide. While the number of samples tested has increased steeply over the last few weeks, substantial gaps persist in lab and testing capacity; data entry; and effective turnaround from sample collection to results communication to the affected person. UNICEF is supporting the information management system to improve data availability for decision making, but more data clerks are needed to cope with the huge volume of data and ensure that data is available for decision making.

During last two weeks, 180 health service providers (148 female) from UNICEF-supported districts and city corporations received online IPC training. To date, 1,632 of the targeted 2,000 health service providers have been trained. In addition, 20 physicians participated in the ‘National IPC training for COVID-19 management’ Training of Trainers (ToTs) and have gone on to train 270 health professionals posted in different government hospitals. In addition, 1,293 Rohingya refugees have been trained in essential IPC measures, includes members of water and latrine user groups, hygiene promotion volunteers, teachers, imams and local leaders, to ensure that supplies and services are maintained and continuous services.

Department of Public Health Engineering (DPHE) and UNICEF are aiming to secure an uninterrupted water supply across the country, to ensure safe water is available for handwashing as well as to protect against other waterborne diseases. From 22 May to 4 June, 1,019,500 people (591,820 women) were supported with WASH services through the repair of 9,698 handpumps, chlorination of 133 piped water systems, distribution of 169,498 bars of soap and construction of 1,100 handwashing devices in public places. Cumulatively, the DPHE and UNICEF have ensured an uninterrupted water supply across the country for 4.45 million people (out of a target of 10 million) during the COVID-19 period.

Menstrual hygiene management (MHM) day was marked on 28 May with the distribution of MHM items for all 72,000 women and girls in the UNICEF-supported camps, covering their needs for 3 to 6 months. Distributions were done in line with COVID-19 physical distancing requirements, and will reduce the number of future distributions required, which is critical in case of COVID-19 lockdown.

The COVID-19 pandemic and related restrictions are having a significant impact on children’s access to lifesaving vaccines, with the number of children receiving their third dose of pentavalent vaccine are below targets by 16 per cent in March, 52 per cent in April and 55 per cent in May. UNICEF is working with MOHFW to increase demand, including informing parents how they can safely bring their children for vaccination.

Recent analysis of routine health facility data has shown a drop in essential services, including a 90 per cent reduction in admissions of children with severe acute malnutrition for treatment. FAO, UNICEF, WFP and WHO have signed a Joint Statement on Nutrition, a key advocacy piece that calls on the Government of Bangladesh,
together with all donors and partners to take continued action to protect the nutritional status of the most vulnerable during the COVID-19 pandemic.

- **Access and movement restrictions are also constraining the identification of the 8,000 Rohingya children under 5 years with severe acute malnutrition targeted by UNICEF and partners. Over the past two weeks, 23,433 children were screened for acute malnutrition, which is half as many as were screened on average during a two-week period before COVID-19 restrictions. UNICEF has trained 10,649 mothers of children 0-59 months and 428 adolescents 10-18 years to support screening, increased from 194 to 320 Rohingya nutrition outreach volunteers and updated admissions criteria. These changes are starting to help reverse the decline in SAM admissions, with 538 children admitted in May.**

- **All group and community-based infant and young child feeding (IYCF) activities have been put on hold, reducing UNICEF’s ability to reach 20,000 mothers and caregivers in camps with critical best practices. To ensure that IYCF counselling is available every day, nurses have now taken on this extra duty. In the past two weeks, 649 women were counselled and over 4,600 mothers/caregivers have been counselled on one-to-one basis since 1 March.**

**Access to continuous education, social protection, child protection and gender-based violence (GBV) services**

- **So far, 20 per cent of the school year in Bangladesh has been interrupted, affecting 42 million children and their teachers. Prolonged absence and disengagement from teaching is expected to affect the quality of teaching and teacher’s motivation. In consultation with the Directorate of Primary Education (DPE) and National Academy for Primary Education (NAPE), UNICEF supported the development of a concept note on online/remote training for teachers. In addition, a customized IT training module is under development to build the capacity of NAPE faculty members and teachers on digital content development and how to use various platforms optimally**

- **To enhance caregiver-led home-based learning for the over 300,000 Rohingya children whose education was interrupted in the camps, UNICEF and Education Sector partners have developed new guidelines and learning activity-focused materials to support learning. A survey conducted by UNICEF and partners from 3 to 11 May 2020 showed 77 per cent of children are engaged in caregiver-led learning at home, which translates to approximately 165,000 children in UNICEF supported learning centres across the camps. Over 90 per cent of caregivers surveyed said their children need activity books and notebooks to support learning at home. The new materials have been developed in response to this feedback and will be distributed to all children in coordination with the Education Sector.**

- **UNICEF and its partners are targeting 500,000 children, parents and caregivers with psychosocial support in response to the psychosocial impact of COVID-19 and its related lockdowns and restrictions. As of 3 June, 53,367 children (20,160 girls; 260 children with disabilities) and 14,916 parents (6,332 female) were reached with case management and follow up, including psychosocial support. Additionally, 1,241 children affected by sexual exploitation and abuse were supported with psychosocial support and casework within 12 brothels.**

- **Children need to be urgently released from detention, as these overcrowded facilities make is impossible to practice physical distancing or adequate hygiene. As of 3 June, 405 (16 female) children have been granted bail and released, out of which, 355 children were reunited with their parents and guardians. UNICEF supported the facilitation of the virtual court system and social workers to provide for psychosocial support for children before reunification and follow-up.**

- **UNICEF and the Child Protection Sub-Sector (CPSS) conducted a consultation with children in camps, finding that the three most common concerns are getting infected (64 per cent), distress over the closure of multipurpose and learning centres (48 per cent) and fear of losing their lives (39 per cent). With the increased levels of fear and distress in the camps, UNICEF is aiming to reach 20,000 children with one-on-one psychosocial support in line with CPSS guidelines, of whom 45,337 children (23,203 girls) have been reached to date.**

**Bhutan Country Office; Risk Communication and Community Engagement**

- **In terms of engagement, 16,266 influential persons (volunteer groups, local leaders, district health officials, school health coordinators, local leaders, Desuung volunteers, religious persons, youth volunteers and CSOs) were engaged to reach approximately 388,000 people (300,000 in last report) with messages on COVID-19 prevention and containment and access to services.**

- **UNICEF supported Ministry of Health and Ministry of Education in training more than 466 youth volunteers including, Youth Service Center Managers, Community Based Support Service volunteers and private sector volunteers, on COVID-19 and dengue prevention and containment; GBV, domestic violence and child protection issues and advisories. The volunteers have committed to reach family members, neighbors and peer in their own locality to discuss issues and on seeking services.**

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5 As of February 2020, 215,000 children (48 per cent girls) were enrolled in 2,500 UNICEF supported learning centres across the camps. These children were targeted by UNICEF partners to engage in learning activities at home with support from caregivers.

6 UNICEF expects to increase this target during the next HAC revision, as access has increased since the target was set.
UNICEF together with UNFPA supported the Ministry of Health in providing 240 sets of dignity kits (face mask, T-shirt, umbrella, sanitary pads, soap and hand sanitizers) to youth, CBSS, Scouts and private sector volunteers in Phuntsholing, border town in southern Bhutan to support their community engagement initiatives on COVID-19, Dengue, GBV and domestic violence messaging.

Improve Infection and Prevention Control (IPC) and provide critical medical and water, sanitation and hygiene (WASH) supplies

As part of the infection prevention and control, UNICEF is supporting the government to procure Personal Protective Equipment (PPE) health workers. During the reporting period a shipment of (20,000 coverall, 8,700 face shields and 105,000 surgical masks) was delivered to the Ministry of Health on 7 June 2020. The shipment has been significantly delayed because of the logistical challenges due to border closures and suspension of commercial flights. In addition, a total of 5,000 COVID-19 testing kits are being shipped and expected to arrive in-country in mid-June 2020, while the remaining PPE items are anticipated to arrive in-country by the end of June 2020

Support the provision of continued access to essential health and nutrition services for women, children and vulnerable communities, including case management.

To ensure continuity of essential MCH services during COVID-19 pandemic the MOH has conducted several online and face-to-face trainings on MNCH. So far 550 participants (doctors, nurses and health workers) have been trained on use of MCH handbook and Bhutan Child Development Screening Tool (BCDST) through Zoom. In addition, UNICEF has procured and delivered of 7,680 single dose vial of Human Papilloma virus (HPV) vaccines to the ministry of Health. The delivery had been delayed due to disruption in international commercial flights.

To ensure continuity of national nutritional services, 60 health workers (30 male and 33 female) have been trained on micronutrient powder supplementation with IYCF counselling using Zoom. Meanwhile, advocacy and promotion of IYCF including messages around breastfeeding practices is being done through social and broadcast media.

Access to continuous education, social protection, child protection and gender-based violence (GBV) services

Based on the Education in Emergency phase II COVID-19 Response Plan developed a month ago, the Ministry of Education has prepared a plan for reopening schools under different scenarios. The plan identifies 3 risk zones (high, medium and low risk) and priority groups to guide the re-opening of schools.

With UNICEF support the Prioritized Curriculum of the Education in Emergency phase II Plan has been completed and is being implemented. This curriculum will be used for assessing student learning as well as to determine promotion to the next higher grade. The prioritized curriculum emphasizes fundamental key concepts and engages students to explore further on the concepts through interactive learning activities and more importantly sets out the new direction for school curriculum post COVID-19.

Following an analysis of the distribution of Self-Instruction Materials (SIM) to 17,000 children identified as being unable to access any form of online or broadcast media, the Ministry of Education identified an additional 15,135 children without access to online learning. UNICEF will continue supporting the distribution of SIM to the additional children bringing the total number supported with SIM to 32,135.

In terms of access to service, 259 children (113 boys and 146 girls) and 108 (48 male and 60 female) adults have been referred to counsellors in their respective districts and provided with counselling services through the Shergho Counselling online platform set up to provide counselling and psychosocial support in response to COVID-19 pandemic.

India Country Office;

Risk Communication and Community Engagement

UNICEF ICO continues to coordinate the National anti-stigma and discrimination campaign with Ministry of Health and Family Welfare, UN agencies and development partners. UNICEF state offices of MP, Rajasthan, Andhra Pradesh, Telangana, Odisha, Chhattisgarh, Maharashtra, Jharkhand, Bihar, and Uttar Pradesh reached 813,400 Panchayati Raj Institutions and Self-Help Groups and trained 270,280 youth network members on anti-stigma and discrimination messages.

UNICEF facilitated a variety of RCCE interventions to reach 17,462,410 people during the reporting period in 16 states, empowering the citizens with the appropriate information and to take precautions as per the advisories being issued by Ministry of Health & Family Welfare. Social media reached 238 million (24 May - 6 June 2020) and 1.2 billion since 3 March 2020.UNICEF India COVID-19 content appeared on social media feeds 21 million times on average every day during the overall 68-day campaign period and was seen by around 12 million on average per day. Total of 2 billion impressions and more than 424 million video views during the entire campaign.

UNICEF's advocacy and strategic support to State Swachh Bharat Mission (SBM) Directorates/Public Health Engineering Department (PHED)/Panchayat & Rural Development departments in building capacities of Swachhagrahins, PRLs, CSO and FLWs resulted in reaching more than 23 million people till date (hygiene promotion and protective measures).
Improve Infection and Prevention Control (IPC) and provide critical medical and water, sanitation and hygiene (WASH) supplies

- Critical WASH services ranging from water and sanitation facilities to hygiene supplies such as sanitizers, soaps etc. were provided to over 1 million vulnerable communities in villages, quarantine centers, and migrant camps/people on the move. In most states, UNICEF leveraged government funds dedicated to WASH services and supplies. UNICEF has supported monitoring of the services and tracked WASH supplies through supporting states and districts in establishing monitoring trackers.

- Ten thermal scanners for various domestic airports are being procured with support from ADB and will be installed at airports in June. Medical equipment/supplies including testing kits, PPE kits for health care providers and oxygen concentrators amounting to US$ 12 million are under procurement with BMZ/KfW support.

- 182,533 individuals that included Village Social Transformation Foundation (VSTF) fellows, teachers, students, caregivers, NGO members, Sanitation workers, Jal Sahiyas, Swachhagrahis, and PRI representatives supporting WASH services have been trained till date on IPC. In coordination with the Health section, IPC training in health care facilities (HCF) was conducted for nurses, janitors in WB. A total of 75,000 doctors & nurses, 2,000 sanitation workers in MP were provided with hand sanitzers.

Support the provision of continued access to essential health and nutrition services for women, children and vulnerable communities, including case management.

- UNICEF teams are working with the Indian Council of Medical Research to support operational research on impact of COVID19 on MNCH services, and in supporting the health care workers with psychosocial care for health workforce resilience during COVID19 response to ensure continuity of services. In Gujarat, UNICEF facilitated the development of a manual for health care workers developed by us for “Ensuring Safety and Well-being through Psychosocial care and support during COVID-19 Pandemic”, adopted by the State Institute of Health and family Welfare.

- Various global and national reports have sounded the alarms for the Nutrition Crises that is unfolding. A study estimated the indirect effects of the COVID-19 pandemic on maternal and child mortality in low-income and middle-income countries, including India. As per these estimates, 10,120 to 49,850 additional children could die per month in India assuming reduction in intervention coverages and increased wasting levels under different scenarios.

- The status of program continuity and delivery of priority nutrition interventions in the 14 UNICEF supported states reveals that while Anganwadi Centers are closed or not providing normal services, the Take Home Rations are being provided to pregnant/lactating women and children in all States. Further, the program provisions have been extended to cover eligible persons from migrant populations as well. State level advocacy efforts by UNICEF and other development partners aided in re-initiation and implementation of Village Health Sanitation and Nutrition Days in 10 States, Nutrition Rehabilitation Centers continued operations in 9 States, Home based Young Child Care services in 4 states, and Growth Monitoring and Promotion services in 3 states.

Access to continuous education, social protection, child protection and gender-based violence (GBV) services

- Continued technical support is being provided to state government and partners in continuity of students learning through broadcasting educational content through TV, Radio and other digital platforms reaching to around 32,570,510 in 10 states. Further, multiple pathways and outreach strategies are being developed towards access and use of e-learning materials to support continuity of learning of students with the support of parents, academic coordinators, volunteers and partners.

- UNICEF in collaboration with Department of Women and Child Development at the state level continues to roll out responsive parenting programme for young children in seven states. Technical support is being provided in preparation and roll out of monthly calendar of activities and key messages on responsive parenting through various pathways including radio, videos, WhatsApp, posters etc. Recently, UNICEF J&K launched Sattahealth App in collaboration with Samagra Shiksha J&K and Mission Directorate ICDS. UNICEF is supporting 14 state governments in roll out of response plans for continuation of learning and around 58,000 education officials were orientated in implementation of response plans.

- 356,419 children and caregivers in institutions/ foster care have received information on prevention and response to COVID 19 in Uttar Pradesh, 71 separated/unaccompanied children were reunified with their family and 1,735 children in 31 Child Care Institutions (CCIs) have received medical services.

- In Maharashtra, 10 child marriages were prevented, and 300 children restored to families from childcare institutions (CCIs) and Ashram Schools by the District Child Protection Unit (DCPU). UNICEF convened Maharashtra Government After Care Association and non-government organisations (NGOs) to scale up support of nearly 600 care leavers. In Jammu and Kashmir, a total of 13,674 children and adolescents were reached and provided PSS support through Institute of Mental Health and Neurosciences (NIMHANS) and Child Friendly Spaces partners.
• Across 17 states, 990,251 adolescents and young people reached with targeted messages and information on prevention of COVID 19. In Assam, more than 10,000 Pratirodhi Bondhu volunteers (Friends for Resistance come closest) have been actively engaged by the Disaster Management Authority in supporting the management of quarantine centres and awareness in public spaces. 157 Community Radio Station representatives from 151 Radio stations were oriented on COVID specific and sensitive programming to address multisectoral issues, including child protection and violence.

• UNICEF and Yuwaah organized the first edition of #YuvaSansad (Youth Parliament), a live stream interaction to bring together young people and Members of Legislative Assembly (MLAs) digitally on a platform to discuss issues faced by young people in the given context of the pandemic in five States- Uttar Pradesh, Maharashtra, Assam, Tamil Nadu and Chhattisgarh. The Facebook live had 11.6 K views and reached 34,000 people.

Social Protection/Humanitarian Cash Transfers

• UNICEF Odisha is advocating for a universal cash transfer scheme for children for their enrolment and retention in the school system post COVID school opening, expected to benefit at least one million children in the state in the age group of 6 to 17 years. In Assam, UNICEF is partnering with the State Rural Livelihood Mission to build financial inclusion approach in select tea gardens in three districts. In Rajasthan, an online forum for Civil Society Partners launched to support vulnerable families mitigate socio-economic impact of COVID. Government of Tamil Nadu and UNICEF are together preparing a roadmap for socio-economic response and recovery.

• Migrants are being supported with social protection measures across States. In Bihar, UNICEF is convening a stakeholders’ platform for social protection, employment and empowerment of labor migrants. In Chhattisgarh, UNICEF developed relevant analysis to create policy level discussion on reverse migrants and developed guidelines for Gram Panchayats and to support pregnant and lactating mothers in quarantine centres. In Odisha, UNICEF is working with the government to establish a PMU for migration tracking and response in the state. In Uttar Pradesh, UNICEF is working with the government to build systems to support migrants with social protection and skilling measures. In Madhya Pradesh, outreach of relief and social protection services to migrants and poor households in 100 Gram panchayats helped reach over 50,000 people with relief services.

Maldive Country Office;
Risk Communication and Community Engagement

• Key messages around the expected easing of the greater Male’ lockdown measures on 28th May was the focus in the reporting period as well as preventing child abuse and domestic violence that can increase with families having to live in cramped households for an extended period. These messages were made available multi-lingual focusing on engaging the public to continue to stay safe at home, practice good personal hygiene and wearing a mask if they must go outside. During the current reporting period, UNICEF and HPA reached 213,560 people via its Facebook channel (as the preferred social media channel in the country with the highest number of active users). The cumulative reach through UNICEF messaging as well as those disseminated through the HPA their social media channels (multiple platforms) reached 100% of the target with some being reached more than 100 times (41,857,709). This is the cumulative figure as of week 12 of the emergency response.

• To encourage information-seeking behaviours in key audiences, both UNICEF and HPA websites provides Dhivehi language articles, videos and resources around COVID-19, making reliable and up-to-date information available to families. During the reporting period users spent an average 6.49 minutes on COVID-19 content and 190 page-views were recorded. Publicly visible engagements from Facebook for UNICEF and partners were monitored and in the reporting period, UNICEF Facebook page observed, 987 post reactions, 9 comments, 22 post saves, 110 post shares and 1,547 link clicks.

• Through both the emergency hotline 1676 and email address, the public has been able to share their concerns as well as seek clarifications in regard to emergency treatment and information on services. During the reporting period 5,645 people were able to seek assistance from the government through this hotline.

Access to continuous education, social protection, child protection and gender-based violence (GBV) services

• A total of 1,144 teachers are currently undergoing training in Google G-Suite with UNICEF support. A total of 95 teachers have been trained in G-Suite since the start of the intervention in April 2020. So far, 2,775 students (1,304 females and 1,471 males) continued learning through Google Classroom, facilitated by the G-suite trained teachers. Out of the total of 2,775 students, 2,681 students were enrolled in the island schools and 94 students were enrolled in schools in the Capital Male’.

• The DV/GBV hotline 1421 has been established and operational in the reporting period with support from UNICEF. 4,715 calls received through the 1421 DV/GBV hotline, but however, most cases – 3,161 were calls from general public stranded in Male’ due to the lockdown requesting assistance to travel back to the islands, while 582 requested assistance in accommodation, 721 requesting for food, 8 seeking social protection support, 6 requiring assistance due to substance abuse, while 230 plus cases related to shopping to clearing of garbage.
Nepal Country Office:
Risk Communication and Community Engagement
- With the influx of returnees/migrant workers from India and other countries, immediate need is to promote key practices to prevent from COVID-19 transmission at the point of entry and quarantine sites, information on available services and clarity on what needs to be done after reaching their respective municipality/gaunpalika.
- More than 12 million people (58 percent male and 42 percent) were reached with key preventive messages such as a) stay home b) wear mask c) wash hand with soap and water or sanitizer d) stay away from people with cold and cough e) anyone can get COVID-19 irrespective of class, ethnicity, age and gender e) physical distance of at least 1 meter through radio, television, social media, mega phone announcements, print materials, community volunteers and mobile phones. Recent survey showed that 84 percent are staying at home; 79 percent wearing the mask in public places, 91 percent washing hands with soap and water and 59 percent staying away from crowd. Television, radio, social media and mobile phone are the trusted source of communication channels for the COVID-19 related information.

Improve Infection and Prevention Control (IPC) and provide critical medical and water, sanitation and hygiene (WASH) supplies
- With massive daily influx of people from India of around 3000 to 5000 people per day per point of entry, the situation at the border resembles a typical refugee crisis. Over 170,000 people are under quarantine (10% women and children) and require basic WASH services. UNICEF provided immediate support to address basic WASH needs in nine Point of Entries and two provincial transit points. Over 32,092 people were provided drinking water together with food assistance. Furthermore, UNICEF constructed 9 toilets for men and women, three drinking water stations, and two garbage pits in transit points were constructed/installed in Karnali province.
- UNICEF provided over a total of 106,500 surgical and 2,000 N95 masks; 35,000 surgical gloves; 3,445 bottle hand sanitizers; 2,000 coverall protection; 2,000 protective goggles and 500 IR Thermometer to designated COVID hospitals and the isolation facilities reaching a total 3,550 health workers.
- Shortage of supplies remains, mainly caused by the ban on international flights/transportation as most of the WASH supplies and its raw materials are imported from abroad.

Support the provision of continued access to essential health and nutrition services for women, children and vulnerable communities, including case management.
- UNICEF assessed continuity of essential health service (EHS) in a total of 211 health facilities in Province 2 (142 HFs), Karnali and Sudurpaschim Provinces (69 HFs). As per the assessment findings, basic health services are functional in all health facilities. To date after the EHS resumed, a total of 92,368 recipients have access to anti-natal care (ANC) services that reached 14,625 women and 8,377 institutional deliveries received. Immunization services mostly through facility-based sessions continue reaching 69,366 children with vaccines (49% boys and 51% girls). However, more than 345,000 women and children are not able to access obstetric, neo- and postnatal and child health care including immunization services as a result of COVID 19 pandemic and subsequent lockdown across the country.
- National Measles Rubella Campaign completed in 14 districts of Karnali and Sudurpaschim provinces targeting 370,768 children age between 0-59 months (49% boys and 51% girls). Campaign ongoing in remaining three districts of Karnali and two districts of Sudurpaschim Province. UNICEF is providing support to the federal and provincial government for the timely delivery of vaccines and commodities into the remote districts.
- Essential health service (EHS) delivery is severely compromised because of inadequate supply of protective gears (mask, gloves and hand sanitizer) as well as difficulty in maintaining physical distance due to congested spaces. (73% unmet need/gap (92,368 children and women access to EHS against the 345,000 targets). It was noted during EHS assessment that most health facilities have run-out of at-least one essential health commodities like misoprostol, Zinc, BCG syringe, ORS, Vit A etc. The stockout will have an immediate impact on the continuation of essential services.
- 40,000 children 6-23 months and 85,000 pregnant women living in 23 flood prone districts require supplementary food to offset decreases in dietary diversity, frequency of meals and amount of food consumed as a result of the indirect impacts of COVID-19 on household food security. In addition, an estimated 10,000 children 6-59 months are not able to access treatment for severe acute malnutrition due to COVID-19 lockdown measures and the suspension of mass active screening activities. Therefore, UNICEF is supporting the government to deliver 1,000 cartons of ready-to-use therapeutic food (RUTF) to different districts nationwide. So far, 1,110 children aged 6-59 months with Severe Acute Malnutrition treated in last 3.5 months at 539 OTCs (out of total 557) and 15 NRH (out of 21). In addition, UNICEF is advocating for blanket supplementary feeding to 6-23 months children, pregnant and lactating women in those districts with multiple vulnerabilities.

Access to continuous education, social protection, child protection and gender-based violence (GBV) services
- To prevent the spread of COVID-19, the government has suspended education activities and closed all schools and educational institutions affecting 995,000 most vulnerable and at-risk children who do not have access to internet, radio or TV for remote learning support (out of which 597,000 children in pre-school and primary level). Therefore,
UNICEF has supported the government with sector coordination, development and distribution of pre-school and primary level self-learning packs to 4,000 children (around 50% girls) out of the total of 20,000 targeted to continue the learning of children especially at pre-school and primary level who do not have access to internet, radio or TV for remote learning.

- Due to isolation and socio-economic impact brought about by the combined effect of the lock down and the spread of COVID 19 an estimated 26,250 persons are in need of targeted psychosocial support. Increases in suicide rates continue to be reported and highlight the interception of mental health, violence and socio-economic conditions. Front-line workers are also increasingly showing signs of emotional and psychological fatigue.

- UNICEF’s response strategy combines remote psycho-social support and deployment of community-based psycho-social workers whenever feasible. This dual set up has reached 707 people (398 males, 307 females, and 2 third gender). Among the total supported, 154 were referred for various services (61 for psychiatric consultations, 33 for relief assistance, 46 for health services, 4 for legal services and 10 for other social support).

- As the support continues to extend to quarantine centers and isolation wards, 2,078 people (1907 males and 171 females) in quarantine facilities were reached with awareness raising interventions on stress management and psychological first aid. An additional 311 people (181 males and 130 females) were reached through awareness raising interventions in communities by community psychosocial workers (CPSWs) in Province 2.

- Survivors’ access to GBV services remains an issue of concern, particularly for younger survivors who represent a significant portion of persons at risk (pre-COVID 19 - between 30-45% of GBV survivors in One Stop crisis Management Centers and 62% of cases reported to the police). These concern specialized police services, shelters and emergency medical response. Adapted community outreach approaches are critical to ensuring cases are identified and referred.

Social Protection/Humanitarian Cash Transfers

- In Nepal, about 40 per cent of the households with children are adversely affected by the COVID 19 related economic hardship, that includes more than 1.5 million children with children of daily wage earners and informal sector workforce being the worst affected. UNICEF has adopted a three -pronged approach to ramping up social protection response in Nepal; as leader of Social Protection Task team (SPTT), UNICEF has been advocating with the govt to strengthen its social protection response: Enhanced research and knowledge in collaboration with OPHI and Development Pathways to compute the impact of COVID on child poverty and advocate for Expanded Child Benefits. In addition, UNICEF has been working with DFID and WB to develop a COVID specific response through expansion of child grants. The expansion approach was driven by both a resource constraint environment while at the same time trying to expand the programme to include the newly vulnerable groups which include returnee migrant workers and daily wage earners.

- Despite this rather weak macro-economic context, UNICEF’s advocacy on strengthening of child grants achieved initial success. Despite fiscal constraints, the Prime Minister and the Ministry of Finance (MoF) maintained commitment to expand the universal child grant to 11 new districts. This expansion will benefit an estimated 415,000 children and their families, many living in COVID-19 hotspots where economic activity is curtailed.

Pakistan Country Office;
Risk Communication and Community Engagement

- An estimated 214 million people have been reached with TV and radio through Government, UNICEF and UNDP resources, including the mass media broadcasting of videos in partnership with UNILEVER which were produced by UNICEF in collaboration with MOH and WHO. Radio Pakistan continues to air the approved COVID-19 messaging content nationally as well as through 48 FM radio stations reaching millions of people, particularly in rural areas. Pakistan Broadcasting Corporation and UNICEF will be signing an agreement with Radio Pakistan which a

- The Polio helpline (1166) which is being used for COVID-19 awareness raising through the Clean and Green Pakistan website, launching capacity building trainings for more than 118,000 champions. A mobile application
which will allow for a two-way communication with the champions has been upgraded and awaits approval from the respective authorities.

- To date, UNICEF has rehabilitated and installed WASH facilities which include Ultraviolet (UV) water filters, toilets and hand washing stations in 242 Health Care Facilities out of the 266 assessed (HCFs, Sindh: 32, KP: 25, Punjab: 167 and Balochistan: 18). More than 290,000 people (56,000 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.

- Hygiene messages are being disseminated through social mobilisers, religious leaders, FM radio, Community Resource Persons (CRPs) by working with government and implementing partners. IEC material is displayed on communal hand washing stations and Clean and Green Pakistan digital and social media platforms reaching more than 5.6 million people (500,000 new) across the four provinces. Around 1.4 million (300,000 new) people have used the 505 (new 4) handwashing stations at communal points in affected. UNICEF supported the training of 3,530 frontline sanitary workers (17 new) to enhance the capacity of sanitary and health frontline workers on WASH/IPC in HCFs and high-risk communities.

Support the provision of continued access to essential health and nutrition services for women, children and vulnerable communities, including case management.

- 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 136 targeted health facilities in high risk UCs reaching 48,157 people in the reporting period (Balochistan: 1139, Sindh: 45,262, KP: 1,756) and 859,994 in total.

- UNICEF continues to support routine immunization and a total of 3,472 children (under 1 year) have been vaccinated against measles (Balochistan:39, KP: 59, Sindh: 752, Punjab: 2622) during the reporting period with a total of 23,155 children vaccinated in 136 UNICEF supported health facilities.

- UNICEF has provided basic PPEs (gloves, sanitisers and masks) to 5,006 frontline health workers during the reporting period (Balochistan: 4,950, KP: 56) and 21,102 in total.

- During the reporting period treatment of Severe Acute Malnutrition (SAM) was available in 2,828 UNICEF supported health facilities, an increase of 29 compared to previous week, where 1,515 new SAM cases in children were enrolled for treatment (Balochistan 329; Sindh 69; KP 476 and Punjab 641), bringing the total to 22,680. The quality of SAM treatment in KP resulted in cure rate as high as 97% and only 2.5% defaulter rate (maximum acceptable is 15%). All performance indicators reported by KP are above minimum acceptable thresholds set by SPHERE standards.

Access to continuous education, social protection, child protection and gender-based violence (GBV) services

- The total number of children directly benefiting from UNICEF supported alternate learning opportunities is 71,890. The newly launched Digital Learning Platform by Sindh Education and Literacy Department has been approved by Microsoft giving teachers and students free access to Office 365 reaching an estimated 150,787 teachers (47,365 females) and nearly 4.2 million children (including 1.7 million girls). Microsoft has also approved the School Education Department as Microsoft Qualified Academic Institution. UNICEF Sindh office played a key role in coordinating and leading the partnership discussions along with Education department with Microsoft.

- Through a campaign of “My Home My school” a total of 14,049 home-based learning centres were established in 11 districts of Balochistan where a total of 36,387 children (21,408 boys and 14,979 girls) are continuing their learning at home. The Education department has scaled up the campaign in 4 additional districts and established 2,301 “My Home My schools” centres with the technical assistance of UNIC in 11 districts of Balochistan where a total of 23,155 children vaccinated in 136 UNICEF supported health facilities.

- A total of 15,895 parents, caregivers, children and individuals (597 girls, 598 boys, 7,344 women, 7,356 men) received Psychosocial Support and Services (PSS) by trained social workforce professionals in Punjab, KP and Sindh provinces with 5,778 reached within the reporting period This includes 422 Individuals (16 Girls, 20 Boys, 25 women and 361 men) who received specialized counselling sessions in KP, Punjab and Balochistan.

- Stigma prevention messages on various mass, social media and interpersonal platform reached to 670,557 and engaged 31,727 people within the reporting period, reaching a total of 7.2 million people.

Sri Lanka Country Office;
Risk Communication and Community Engagement

- Over the past 13 weeks, from 16 March to 4 June, UNICEF has worked with the WHO and the Ministry of Health to design and implement COVID-19 risk communication campaigns, and providing effective public health messaging to reach all Sri Lankans. Using a combination of mass media campaigns, media engagement and digital and social media, a total of 7.7 million people were reached by TV, and 3.3 million people via social media while 678,076 were engaged.

Improve Infection and Prevention Control (IPC) and provide critical medical and water, sanitation and hygiene (WASH) supplies

- UNICEF supported the MOH in refurbishing COVID-19 isolation units at three specialist Hospitals in Sri Lanka including installation of ventilation and sound systems, adequate facilities for infection prevention and water and
sanitation for health and establishing of a layout in line with social distancing requirements. A total of 67 isolation beds have been refurbished to accommodate affected patients.

- As a part of the COVID-19 response plan, UNICEF expanded its scope to the urban sector to support urban poor living in high-density low-capacity settings, which characterized by unhygienic environments and therefore highly vulnerable to the COVID-19 outbreak. As such, UNICEF has entered into a new partnership with the Urban Settlement Development Authority (USDA) under the Ministry of Urban Development, Water Supply and Housing Facilities. The USDA aims to re-house poor families who are in encumbered lands with no titles on the urban underserved settlements and to develop the socio-economic status of those households.

- UNICEF is supporting USDA to conduct hygiene promotion programs and IPC interventions in urban settlements of highly commercialized and populated cities such as Colombo, Galle, Anuradhapura, and Puttalam. As of today, around 45 officers including Development Officers attached to the USDA capacitated as master trainers to support COVID-19 prevention programmes (http://usda.gov.lk/?p=16742#). Further hygiene promotion programmes (6 sessions in two days) conducted in an urban settlement in Colombo district covering 15,000 beneficiaries.

Support the provision of continued access to essential health and nutrition services for women, children and vulnerable communities, including case management.

- The Family Health Bureau (FHB) under the MOH has issued guidelines on resuming routine services in Reproductive, Maternal, Newborn, Child and Adolescent Health (RMNCAH) services in the country. The field health workers (Medical Officers of Health, Public Health Nursing Sisters and Public Health Midwives) who have been maintaining essential RMNCAH services would be moving to provide routine services in the new normal setting in domiciliary setting and at outreach field clinics. UNICEF supported the FHB by providing the much-needed hand sanitizers (10,000 100ml bottles) and surgical face masks (10,000 pieces). This covers all the field health workers in the country.

- The COVID-19 pandemic has the potential to cause severe primary and secondary impacts on the nutritional status of children. Even before COVID-19 became a global pandemic, an estimated 277,716 (15.1%) of children under 5 years of age suffered from wasting in Sri Lanka at any point in time. Therefore, as a country with high burden of child undernutrition, it is critical that measures are in place to continue provision of quality nutrition services at community and hospital level. As such, UNICEF developed a program brief on urgency to address the wasting in SL and had several advocacy meetings with high level decision makers at MOH to discuss the issue.

Access to continuous education, social protection, child protection and gender-based violence (GBV) services

- Together with the Ministry of Education (MoE), UNICEF printed and distributed home-based learning material to Grade 1 and 2 students to ensure continuous learning during school closure. The MoE has not yet decided to re-open schools for Grade 1 and 2 students. The distribution of these learning materials is currently underway and so for approximately 490,000 students out of the total of 670,000 have been benefitted through this support. This includes children who are in rural and difficult areas with no access to internet or other home-based learning opportunities. This support helps the smooth learning recovery after the school re-opening and hence mitigate the risk of future school drop-out and learning gaps. UNICEF is discussing with the MoE and the National Institute of Education in providing similar support to children in grade 3, especially focusing on catch-up learning activities.

- UNICEF and the Department of Probation and Child Care Services (DPCCS) reached 312 children through the digital case management system and 56 children were supported through proper alternative care arrangements.

- UNICEF built the permanent capacity of the National Child Protection Authority (NCPA) on providing virtual psychosocial services. 268 NCPA officers were trained on psychosocial first aid who are actively providing services in the field. UNICEF activated community level psychosocial support in Northern and Eastern provinces through the District Mental Health forums. To date around 3,700 people reached through psychosocial first aid and more targeted supports.

Social Protection/Humanitarian Cash Transfers

- UNICEF continue to lead the development of the Pillar 2--Social Protection and Other Basic Services-- for the Advisory Paper that will be tabled with GoSL, based on the UN Framework for the Immediate Socio-economic Response to COVID-19. Pillar 2 includes scaling up and expanding resilient and pro-poor social protection systems, maintaining essential food and nutrition services, ensure continuity and quality of WASH services, secure sustained learning for all children, support continuity of social services and access to shelter and support victims of GBV. From the outset of the crisis, UNICEF strategic engagement and advocacy with the Presidential Secretariat, Department of National Planning, and Task Force for Poverty Eradication and Livelihoods Improvement contributed to a quick and relatively large cash transfer response from the government which initially was planned to benefit 47% of households was expanded to reach 66% of the households. UNICEF continue to advocate for universal child, old age and disability benefits for 6 months to cushion people from the impact of COVID-19.
### Funding Status

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**Next SitRep: 26th June 2020**

UNICEF continues to monitor the situation very closely and situation reports will be issued on regular basis as the developments unfold.

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