



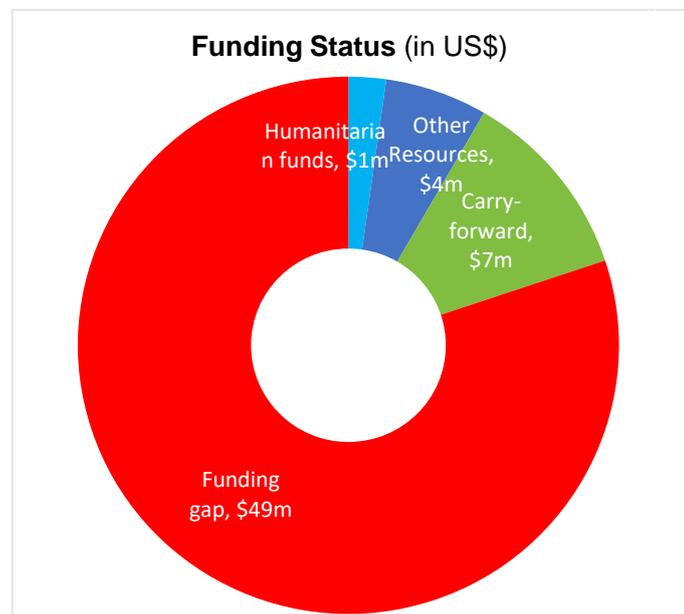
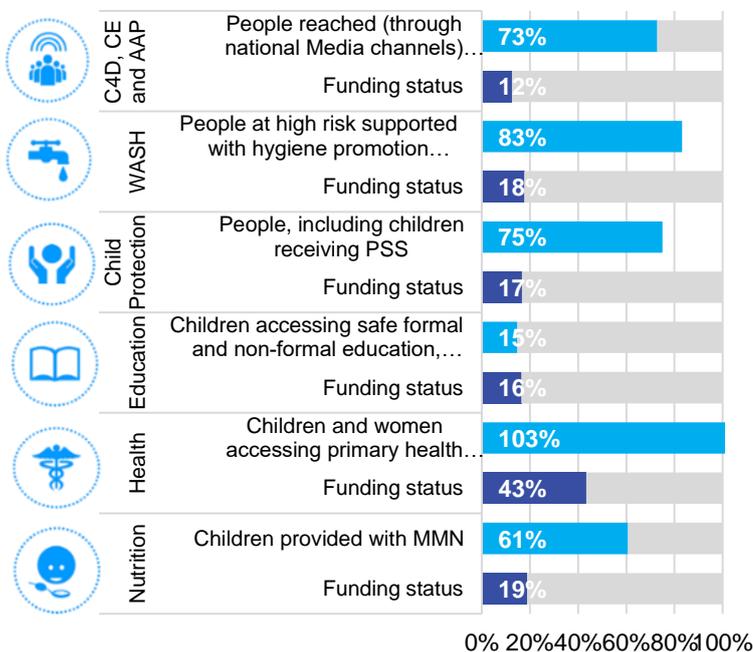
© UNICEF/WASH activities in UNICEF Supported government school, KP

Reporting Period: 1<sup>st</sup> – 30 September 2021 (monthly)

## Key Highlights

- Pakistan is showing a downward trend of COVID-19 in its fourth wave. On 1<sup>st</sup> September the positive cases were 4,103 and on 30<sup>th</sup> September the positive tested cases dropped down to 1,411 with a positivity rate of 5.45 per cent. In total, 27,785 COVID-19 deaths have been reported. (<https://covid.gov.pk/stats/>).
- Over 58.7 million people have been reached with messages on COVID-19 prevention and on access to services.
- Through UNICEF supported health sites, 50,026 children (27,295 girls) have been admitted for Severe Acute Malnutrition treatment.
- Over 3.61 million people benefited from continuity of primary healthcare services at UNICEF supported health facilities.
- UNICEF has reached 334,149 caregivers, children and individuals with psychosocial support through trained social workforce.
- Through UNICEF support, 1.95 million people have been reached with handwashing behaviour change programmes.
- Nineteen per cent of Pakistan's target population (15 years and above) is fully vaccinated, with 32 per cent partially vaccinated.

## UNICEF's Response and Funding Status



# Pakistan Humanitarian Situation Report No. 29

unicef   
for every child

## Situation in Numbers

 **5.9 million** children in need of humanitarian assistance

 **11 million** people in need

 **1,245,127** confirmed corona virus cases in Pakistan (on 30<sup>th</sup> Sept. 21).

 **1.7 million** Children and women require nutrition services

**UNICEF Appeal for Preparedness and Response**  
**US\$ 61.4 million**

<sup>1</sup> Leveraging resources and working with government and partners helped Health WASH, CP and C4D in getting better results

## Funding Overview and Partnerships

With the revised 2021 HAC appeal, UNICEF Pakistan needs US\$ 61.4 million to support the in-country humanitarian response. To date, US\$ 12.2 million (20 per cent) has been received to provide humanitarian support in the country. A critical funding gap of over US\$ 49 million (80 per cent) persists and impedes the provision of essential emergency services throughout the country, especially for preparedness, nutrition, RCCE and education programmes.

In addition to the humanitarian resources received during the year, US\$ 3.76 million of existing resources have been re-purposed to support the on-going response. This includes funds received from the United Kingdom, Canada, UNICEF's set-aside funds, Global Thematic Funds, and regular resources.

UNICEF expresses its sincere gratitude to the Governments of United Kingdom, United States, and the Austrian Committee for UNICEF, Asian Development Bank, Central Emergency Response Fund (CERF), World Bank, ECHO, Global Partnership for Education, Gavi -The Vaccine Alliance, Solidarity Fund, Standard Chartered, along with all its public and private donors for their contributions.

## Situation Overview and Humanitarian Needs

On the 3<sup>rd</sup> of September, the National Command and Operations Center (NCOC), which is the principal body governing the policies and implementation of the national COVID-19 effort of Pakistan, took a detailed stock of current disease situation in different districts: daily hospital admissions, pressure on critical healthcare and availability of oxygen and advised on; ban on all types of indoor / outdoor gatherings; ban on all types of indoor gyms; ban on intercity public transport and lastly closure of education sector in 15 cities<sup>2</sup> of Punjab, 8 cities<sup>3</sup> of Khyber Pakhtunkhwa, and Islamabad. Special Non-Pharmaceutical Interventions (NPI) remained enforced from 4 to 12 September in the above mentioned 24 high disease prevalence districts.

NPIs for high disease prevalence cities<sup>4</sup> and for rest of the country remained enforced from 1 to 15 September. Among the restrictions, educational institutions across the country remained open for three days a week with 50 per cent attendance. On 14<sup>th</sup> September after review of all the cities only five cities in Punjab and one city in Khyber Pakhtunkhwa province continued<sup>5</sup> with the stricter NPIs. All other cities and districts decided to open all types of educational institutes countrywide following staggered opening (50% attendance, 3 days a week) from 16<sup>th</sup> September onwards. On 28<sup>th</sup> September, the NCOC decided to start vaccination of all children of the age of 12 years and above<sup>6</sup>. Special drive will be run for vaccination at schools to make it easier for children to be vaccinated (with Pfizer vaccine free of cost).

Recent events in Afghanistan, and the evolving humanitarian crisis in the country, have created significant insecurity, political, social and economic uncertainty within the country and among its population, especially females. As the situation evolves, with the potential of the crisis spilling over and affecting neighbouring countries, including Pakistan remains, UNICEF is taking substantive steps to improve preparedness and planning to ensure a rapid and comprehensive response, if required. As Pakistan already hosts over 1.4 million refugees, support to enhancing essential services to existing refugees and host communities can address longstanding inequities and strengthen social cohesion.

## EPIDEMIOLOGICAL OVERVIEW

As of 30<sup>th</sup> September, there have been 1,245,127 confirmed cases of the COVID-19, 1,169,566 recoveries and 27,729 deaths reported. The highest number of these cases are in Sindh, followed by Punjab and Khyber Pakhtunkhwa (detailed figures are given in figure below). Based on data from NCOC<sup>7</sup>, as of the end of September, Pakistan conducted 19,386,106 laboratory tests.

<sup>2</sup> Rawalpindi, Gujrat, Gujranwala, Sheikhupura, Sialkot, Lahore, Faisalabad, Sargodha, Khushab, Mianwali, Bhakkar, Khanewal, Multan, Bahawalpur and Rahim Yar Khan

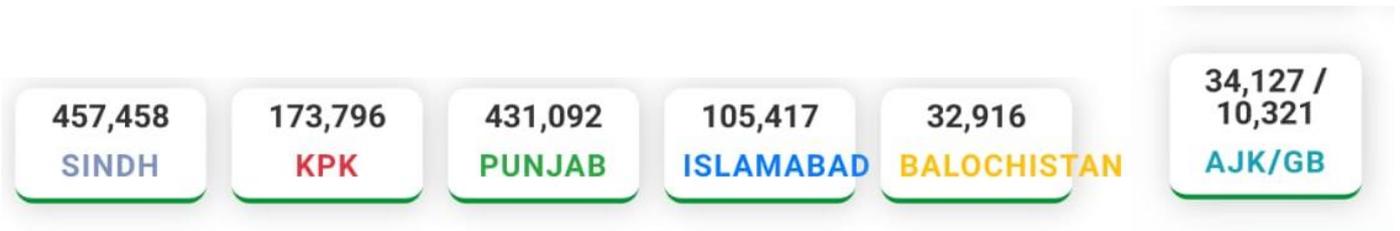
<sup>3</sup> Peshawar, Swabi, Malakand, Swat, Haripur, Abbottabad, Mansehra and D I Khan

<sup>4</sup> Rawalpindi, Lahore, Faisalabad, Khanewal, Mianwali, Sargodha, Khushab, Bahawalpur, Gujranwala Rahim Yar Khan and Multan in Punjab; Peshawar Swat, Haripur, Mansehra, Lower Dir, Swabi, Swat and Chitral and Abbottabad in Khyber Pakhtunkhwa; Karachi and Hyderabad in Sindh; Islamabad; Muzaffarabad and Mirpur in Azad Kashmir; and Gilgit and Skardu in Gilgit-Baltistan

<sup>5</sup> Lahore, Faisalabad, Multan, Sargodha and Gujrat Bannu

<sup>6</sup> <https://www.dawn.com/news/1648933/ncoc-decides-to-start-vaccinating-children-aged-12-and-above>

<sup>7</sup> <https://ncoc.gov.pk/#section2>



**COVID-19 Vaccine Updates:** COVID-19 vaccination started in Pakistan on 3 February 2021. Vaccination is being carried out in a phased manner, with priority first given to frontline health/workers, senior citizens to people in lower age brackets. Starting from 13<sup>th</sup> September, the vaccination is opened for population above 15 years of age, and from 28<sup>th</sup> September it was further extended to above 12 years of age population.

Pakistan has received 116.28 million vaccines doses so far. The different vaccines arrived in Pakistan are given in table below.

Government procurements through Bilateral Agreement and Local Production by NIH (PAKVAC)	
Cansino	2,420,939
PakVac	3,562,100
Sinopharm Bilateral/Donations from China	26,660,690
Sinovac	55,500,000
Sputnick	1,700,000
Pfizer Bilateral	832,400
Vaccines Supplied through COVAX Platform	
Pfizer Covax	10,458,178
AZ Covax	3,482,400
Moderna Covax	5,500,000
Sinopharm Covax	6,166,610

As per NCOC database, the vaccine related statistics are given below<sup>8</sup>. The number of fully vaccinated persons in Pakistan is at 19 per cent of the target population and 32 per cent partially vaccinated.

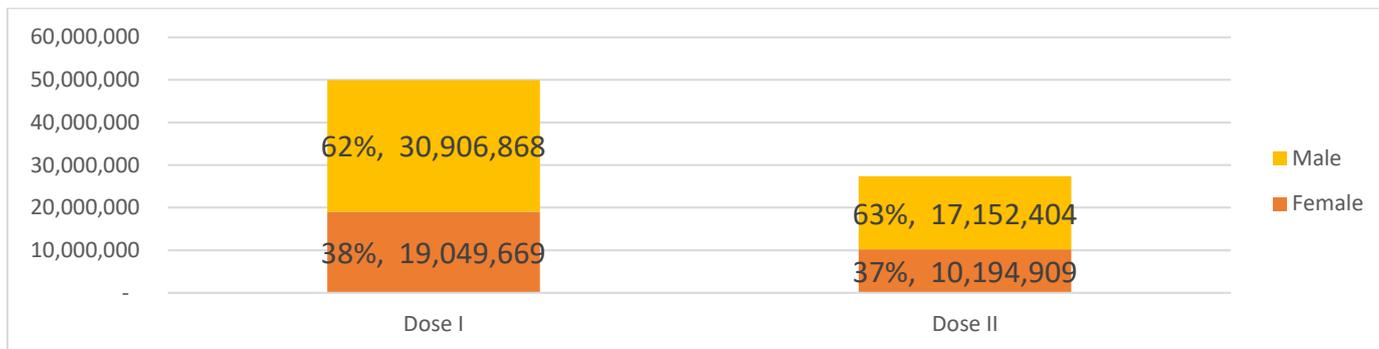
### Vaccine statistics

\* Last updated: 01 Oct, 2021 - 07:13am Islamabad/Pakistan



The gender gap of COVID-19 vaccination is shown in the graph below for both first and second doses of vaccine as of 30<sup>th</sup> September 2021.

<sup>8</sup> <https://ncoc.gov.pk/>



### Cold Chain Expansion and dry storage expansion:

The deployment of COVID-19 vaccine is being implemented through EPI vaccines storage system. EPI, with support of UNICEF, enhanced the cold chain capacity through installation of 39 Ultra Cold Chain (UCCs) equipment for storage of vaccines, such as Pfizer BioNTech. Moreover, dry storage capacity is enhanced through renting dry storage in Islamabad. UNICEF is supporting further enhancing of dry storage capacity at Punjab and Karachi where two big dry stores will be constructed. In addition, EPI is in process of procuring 100 more UCCs to accommodate upcoming shipment of Pfizer and other COVID-19 vaccines which require minus temperature for storage.

**Challenges:** Delays in shipment from China have been registered, due to Shanghai airport lockdown after cargo staff tested positive. Additionally, although the number of fully vaccinated persons in Pakistan is very low (19 per cent and 32 per cent partially vaccinated), vaccine consumption rate is at 93 per cent, demonstrating the country's ability to utilize high quantities of doses.

## Summary Analysis of Programme Response

### 1. Communication for Development, Community Engagement and Accountability to Affected People:

**Coordination:** UNICEF continued to provide leadership, coordination and technical support to the Ministry of National Health Services Regulation and Coordination (MONHSR&C) and its RCCE partners. Both the National and UN RCCE task force teams were established in March 2020. These RCCE forums provide the strategic direction for RCCE efforts in the country. The UN task force team that includes eight UN agencies, meets monthly. In addition to coordination at the federal level, UNICEF is also co-lead in all provincial RCCE task-force, aiming to strengthen coordination, planning, monitoring and ensuring timely implementation at both provincial and district levels.

**Response:** RCCE priorities during this period focused mainly on the implementation of the recommendations that emerged from the national Knowledge Attitude and Practices (KAP) survey on vaccine hesitancy and vaccine confidence.

At policy level, the main recommendations were shared with the NCOC, which include: 1) quickly addressing the system errors for vaccine registration and certification process; 2) consider putting in place female vaccinators in districts where there is low vaccine uptake for women; 3) provide more vaccines and create additional COVID-19 vaccination centers in rural and high-positivity districts; 4) create alternatives for citizens who do not have national identity cards; and 5) include RCCE modules in all formal trainings of health workers and frontline workers. The NCOC has addressed all recommendations.

At RCCE interventions level, recommendations include: 1) increased focus to collect and analyze social data from all high-burden districts; 2) openly address the fear of side effects (through reason-based approaches); 3) assure access to information for women through their preferred channels (family circles, favorite TV channels); 4) train helpline agents to more effectively address and decrease gender barriers for vaccination; 5) address the importance of completing both doses, one is not enough; and 6) address age group 15-30 who have lowest vaccine uptake.

Other relevant information from the KAP survey includes:

- 70 per cent of the population is not convinced that vaccine benefits outweigh the associated risks.
- 45 per cent of those who reject COVID-19 vaccination claim main reasons are fear of side effects and general trust in the efficacy of the vaccine.

- Two in five Pakistanis think nothing will happen to them if they do not get vaccinated, rejectors stand out with extremely low threat perception.
- 43 per cent do not trust that the government is providing sufficient information.
- 30 per cent claim to receive most information from social media, however only 7 per cent trusts it as a credible source of information.
- 47 per cent disagree on making vaccination compulsory for citizens.
- Lowest vaccine uptake are the poor, illiterate and marginalized people.

The government continues to enforce mandatory vaccination for all eligible citizens. It has announced fines for those who are in public without vaccination cards, as well as denied access to schools, clinics, work, and public transportation to any eligible citizen without a certificate of vaccination.

RCCE strategies continue to prioritize the gender lens with influential leaders across Pakistan. In many districts, women are less likely to accept vaccination by a male vaccinator. Initial insight brings attention to the lack of female vaccinators. Other reasons include the vertical family structures for roles and responsibilities.

Successful RCCE approaches remain dedicated to amplify testimonials from those (28 million) fully vaccinated citizens, promote positive statistics and daily increases in the number of people who are vaccinated; focus on positive messaging, promoting the benefits of vaccination; engage in real-life stories; promote solidarity and social accountability; promote use of humor; engage in two-way conversation, challenge misinformation with facts; and prioritize community engagement methodologies in high-burden districts.

Conversations remain active between UNICEF and provincial authorities to build on the investments and lessons learned from the RCCE response to the pandemic. Social and Behavior Change Communications was highlighted as a critical area to be further integrated into programmes and institutionalize across all provinces. Planning includes UNICEF commitment to building capacities, creating cross-cutting RCCE strategies, strengthening government-led RCCE task-force teams and investing in sustainable community structures that remain ready to respond to all future emergencies.

RCCE strategies remain guided by a special focus on high-burden districts, identified by percentage of positive cases and low vaccine uptake. Since these are often changing, the RCCE teams has adapted to a more flexible strategy to quickly intervene in new areas.

**Religious leaders' engagement:** With special focus on high-burden districts, and through health alliances and existing polio structures, 89,004 religious leaders have been engaged and mobilized to promote a higher risk-perception towards COVID-19 and its hidden dangers. Preaching from local mosques, religious leaders reminded followers to complete all COVID-19 vaccination doses, encourage and promote female uptake for vaccines, abide by Standard Operating Procedures (SOPs), and to limit social gatherings.

**Media, social-media and production of educational materials (print/video):** Television and radio remain the primary sources of trusted information on the COVID-19 in Pakistan. Although TV and radio have the highest outreach, social media is catching up with them in terms of outreach. Cumulatively since the beginning of the year, more than 58.7 million people were reached through TV, radio and press.

On social media, Facebook has been the best performing platform for UNICEF Pakistan with 82,573,575 total impressions and 435,491 total engagements between 21<sup>st</sup> August to 24<sup>th</sup> September 2021. On average, each Facebook post received 5,160,848 impressions and 27,218 engagements. On Twitter, the total impressions have been 189,120 and total engagements have been 3,746 during the reporting period. On Instagram, the total impressions have been 130,494 and total engagements have been 6,804. During this period, Pakistan received the Pfizer COVID-19 vaccines through COVAX and social media posts (English and Urdu) regarding these shipments received very high impressions and engagements, especially on Facebook.

With additional support from the Polio teams and local CSOs, community mobilization activities continued in high-risk districts throughout the country. Focus was on completing both vaccine doses, promoting the importance of female vaccination, encouraging younger generations to get vaccinated, continue to wear masks, and to limit social gatherings. During the month of September, nearly 254,000 people have been reached with COVID-19 preventive and vaccination messages.

**Feedback Mechanisms:** The Polio and COVID-19 helpline responds to nearly 9,000 calls each day relating COVID-19 alone. Most of the questions in September were related to the effectiveness of the vaccine, the registration and certification process, and information regarding the second dose. Nearly 13,000 complaints were registered in September, mostly related to registration errors in the portal system (49 per cent of the complaints), inability to download vaccination certificates following completion of both doses (14 per cent), and vaccine unavailability (15 per cent of complaints). All complaints are shared with NCOC and COVID-19 authorities to address as needed.

**Gaps and Challenges:** The arrival of the COVID-19 vaccine continues to overshadow the importance of continued adherence to the COVID-19 SOPs and of the use of masks. It is perceived as if vaccines have already ended the pandemic in Pakistan.

**Partnerships:** UNICEF is working with the federal and provincial governments as well as implementing partners which include: WHO, UNHCR, UNDP, FAO, UNAIDS, UNESCO, UNODC, UNWOMEN, UNFPA, UN HABITAT, UNRC, WFP, ICRC, PRCS, GRASP/ITC, Digital Pakistan, UNILEVER, Daraz.pk, Zong4G, AKF, HANDS, Pakistan Medical Association, Rural Support Programme Network (RSPN), Pakistan Alliance for Early Childhood (PAFEC).

## 2. Water, Sanitation and Hygiene:

**Coordination:** UNICEF works in close collaboration with the Government of Pakistan, WHO and other sector CSO partners. UNICEF advocated and supported the Ministry of Climate Change to convene coordination meetings with WASH partners at the federal level, while the provinces also held regular coordination meetings with WASH partners in collaboration with the provincial departments. WASH sector coordination meetings at federal level brought together over 70 organizations and government representatives from all the provinces. The same support was extended to the departments of local government in the four provinces to hold similar coordination meetings on weekly basis. All participating organizations regularly report their progress through the 4Ws matrix (Who is doing What, Where and When), ensuring effective coordination and efficient use of resources by avoiding duplication.

The Infection Prevention and Control (IPC)/WASH sector, with support from UNICEF and the Global WASH Cluster, has developed an online dashboard which gives a visual view of the 4Ws matrix analysis, showing progress by each partner in each location.

**Response:** UNICEF is implementing country-wide WASH/IPC interventions, focusing its efforts in COVID-19 high burden districts. UNICEF rehabilitated and installed WASH facilities, which included ultraviolet water filters, toilets, and handwashing stations in 108 healthcare facilities (HCFs) - 33 in Sindh, 12 in KP and 63 in Balochistan. To date, more than 380,000 people have gained access to safe drinking water and sanitation facilities in these HCFs, contributing to reducing the risk of COVID-19 infection among the healthcare workers and the general public, especially caregivers and children seeking essential health services.

UNICEF utilized existing WASH programmes such as Clean and Green Pakistan and communication networks of volunteers to undertake hygiene promotion and support RCCE efforts. Given the travel restrictions, UNICEF used digital and social media platforms to engage with communities, including with religious leaders in hygiene promotion. To promote handwashing by the public as one of the critical COVID-19 prevention and control measures, UNICEF supported an overall fabrication and installation of 1,006 handwashing stations placed at strategic points in cities and communities enabling over 2.33 million people thus far (30,000 during reporting period) to wash hands properly. Almost 1.96 million people (160,000 during the reporting period) have been supported with hygiene promotion services including COVID-19 prevention and control information.

To date, UNICEF has supported the training of 4,733 frontline sanitary and health workers on WASH/IPC in HCFs and high-risk communities on WASH/IPC. UNICEF reached an overall of 327,180 children (166,861 girls and 160,319 boys) in 615 schools with WASH/IPC services.

**Gaps and Challenges:** Healthcare waste management remains an area requiring urgent attention from the authorities. UNICEF is therefore engaged with the Ministry of Health to coordinate waste management efforts and mobilize all concerned stakeholders and donors to support the proposed initiatives. Given the lack of resources hindering UNICEF's capacity to address IPC/WASH needs in emerging high-risk areas, it has focused on hygiene promotion and ensuring functionality of already installed facilities.

**Partnerships:** UNICEF worked with the federal and provincial governments as well as with implementing partners including: AKF, Islamic Relief Pakistan, HANDS, Sarhad Rural Support Programme, Water and Sanitation Agency (WASA) Lahore, Water and Sanitation Services Company (WSSC) Swat, WSSC Abbottabad, The Water and Sanitation Services Peshawar, Peshawar, Balochistan Rural Support Programme, Unilever and Foreign, Commonwealth and Development Office, WHO, UNFPA and UN-Habitat.

### 3. Child Protection:

**Coordination:** During the reporting period, coordination of the Child Protection Area of Responsibility continued under the joint leadership of the government and UNICEF at national and sub-national levels. In Punjab, for example, Women and Child Protection working group meetings were organized by Provincial Disaster Management Authority (PDMA) during the reporting period to review partners' progress to respond to COVID-19.

**Response:** UNICEF and its partners have trained a total of 10,275 social workforce professionals (6,148 women and 4,127 men) in psychosocial support and stigma prevention in all provinces through packages developed with support of UNICEF, including 996 (538 women and 458 men) during the reporting period in Sindh and KP. A total of 334,149 children, caregivers and other community members (52,037 girls, 51,111 boys, 119,051 women, 111,950 men) received psychosocial support by trained social workforce professionals in Punjab, KP, Sindh, Balochistan, GB and AJK with 8,980 reached within the reporting period (Punjab: 1,923, KP: 1,918, Sindh: 3,144 and Balochistan: 1,995). This includes 883 individuals (134 girls, 33 boys, 407 women and 309 men) who received counselling sessions in all the provinces.

Messages on prevention of stigma and violence against children have reached a total of 12,273,037 including 968,075 people during the reporting period. The total number of children who received child protection services supported by UNICEF in Sindh and Balochistan has reached 3,721 children (1,606 girls and 2,115 boys), including 75 children (34 girls and 41 boys) attended during the reporting period.

**Gaps and Challenges:** Following COVID-19 SOPs for community engagement sessions on stigma, Violence Against Children (VAC) and Gender Based Violence (GBV) continue to be a challenge, influenced by complacency, misconceptions, and overall denial of the existence of the COVID-19 by some segments of the population. UNICEF continues to work closely with stakeholders to increase compliance with SOPs. Reduced presence in government offices, frequent post transfer and competing government priorities are all factors slowing the pace of implementation in some locations.

**Partnerships:** Ministry of Human Rights, Ministry of Planning, Planning Commission, Provincial Social Welfare Departments, Child Protection and Welfare Bureau Punjab, Child Protection and Welfare Commission, Provincial Departments of Health, National and Provincial Disaster Management Authorities (N/PDMA), Civil Society Organisations, UNHCR, UNFPA among others.

### 4. Health:

**Coordination:** As a frontline partner of Government of Pakistan in COVID-19 response, UNICEF is working closely with MONHSR&C, Provincial and Regional Health Departments, UN partner organizations, Health five partners, Health Development partners, Academia and CSOs since start of the pandemic. UNICEF Health Section is closely working with supply section and MONHSR&C on forecasting, planning, procurement and distribution of COVID-19 supplies including PPEs, cold chain equipment and oxygen equipment. UNICEF is very closely coordinating with National Ministry of Health and provincial health departments on UNICEF procurement services for COVID-19 related supplies to Government of Pakistan.

**Response:** UNICEF is supporting provincial and regional health departments to ensure continuity of essential primary healthcare services including immunization, Ante-Natal Care (ANC), Post-Natal Care (PNC), delivery services, childcare and curative care for adults in 136 targeted health facilities reaching 504,284 people during the reporting period (Balochistan: 8,897; Sindh: 186,577; KP: 2,553; Punjab: 292,693, AJK: 11,000; GB: 2,564) with a total reach of 3.61 million people. Measles immunization reached a total of 9,509 children under one year old (Balochistan: 477; Sindh: 2,051; Punjab: 4,392; KP: 1771 AJK: 407, GB: 411) during the reporting period with a total of 110,595 children vaccinated against measles in the 136 UNICEF supported health facilities to date. UNICEF has provided basic PPEs

(gloves, sanitizers and masks) to 18,475 frontline health workers with 644 during the reporting period (females:302; males: 342).

UNICEF-supported IPC training reached 11,910 frontline health workers in total with 1,905 health workers trained during the reporting period. UNICEF supported the training of 5,293 frontline health workers and community volunteers on COVID-19 and case identification and referral of suspected cases with 1,139 trained during the reporting period (females: 567, males:572). Clinical Management of Children with COVID-19 training was provided to a total of 1,413 paediatricians trained with 13 trained during the reporting period.

Distribution of 1,000 Oxygen Concentrators with accessories to 289 health facilities in all the provinces is completed. In addition, UNICEF distributed 49,462 boxes of face masks to mass vaccination centres around the country.

**Gaps and Challenges:** Despite the ongoing vaccination drive in the country, only 19 per cent of target population is fully vaccinated. Though there is a progress in vaccine uptake since last situation report where fully vaccination coverage increased from 11 per cent to 19 per cent against the target, but with significant geographical and gender discrepancies. Vaccination coverage in some of the geographical areas like Balochistan is very low with only 10 per cent target males and 3 per cent target females partially vaccinated verses 70 per cent of men and 48 per cent of women partially vaccinated in Islamabad Capital Territory. There is no practice of Public Health and Social Measures (PHSM) and lifting of general restriction on markets and opening of schools might have resurgence of new cases, which also need a strong RCCE measure for PHSM compliance.

**Partnerships:** GAVI, MoNHSR&C, Federal and Provincial EPI and provincial and regional health departments and the National EOC on polio. Health Service Academy, Pakistan Pediatric Association, Pakistan Medical Association, Public Health Association, Family Physician Association of Pakistan, Sir Ganga Ram Hospital, SARHAD (a CSO), PHC Global, Aga Khan Foundation and Agha Khan Development Network, in GB and Health Services Academy, Premier Advertisers, for COVID-19 pandemic response.

## 5. Nutrition:

**Coordination:** Sector coordination continued under the joint leadership of the Government of Pakistan and UNICEF. To coordinate and oversee the nutrition response to the COVID-19 pandemic, a total of four meetings of Nutrition Working Group (NWG) took place during this period, two at National and two at the sub-national level (Balochistan: 1 and Sindh: 1). Inception meeting held with Nutrition networks and MoNHSR&C on the National Nutrition Action plan to discuss the process and national consultation on Nutrition Action Plan is planned in mid-October with all key nutrition stakeholders.

**UNICEF Response:** In the reporting month, a total of 2,951 UNICEF-supported Outpatient Therapeutic Programme (OTP) sites provided nutrition services (Balochistan: 185; KP: 126; Punjab: 1,720; Sindh: 920). Around 269,675 (boys: 131,995 and girls: 137,680) children of 6-59 months of age screened for malnutrition using mid upper arm circumference (MUAC) at nutrition sites (Balochistan: 37,819, KP: 37,664; Punjab: 194,192 and Sindh: data not received). Similarly, a total of 50,026 children with severe acute malnutrition (SAM) (boys: 22,731 and girls: 27,295) have been admitted for treatment. In the reporting month 2,356 (boys: 1,036; girls: 1,320) children newly enrolled for the treatment of SAM in OTP sites (Balochistan: 1,162; KP: 575 and Sindh: 619). A total 494,362 children 6-59 months (boys: 242,499; and girls: 251,863) received Multi-micronutrient supplementation with the change of 25,100 during the reporting period (boys: 12,198 and girls: 12,902) from last report and the provincial breakdown is (Balochistan: 5,646; KP: 19,454 and Sindh: data on MMS not received).

With UNICEF's support, counselling on Infant and Young Child Feeding (IYCF) practices in the COVID-19 context through Lady Health Workers (LHWs) and other community-based networks conducted in the community and reached 36,741 pregnant and lactating women in Sindh province during this period through community engagement efforts.

The second round of Vitamin A Supplementation (VAS) campaign conducted from 20th to 24th September 2021 across Pakistan reached more than 33 million children for VAS.

**Global Breastfeeding week:** UNICEF supported newly established baby friendly room were inaugurated at Provincial assembly, KP and Khyber Teaching Hospital during the reporting period. Similarly, one baby friendly room was also established in Balochistan to support mothers to continue optimal IYCF practices (breastfeeding and complementary feeding). In Punjab, High level event conducted at Governor House Punjab on 29<sup>th</sup> August 2021. It was chaired by

Governor Punjab, along with Minister Auqaf and religious affairs with member of Parliaments, academicians, and government department participating in the ceremony in the Governor House.

**Gaps and Challenges:** All the provinces are facing huge stock out of nutrition supplies, which is affecting the continuation of nutrition services in provinces. To address this challenge additional ready to use therapeutic food (RUTF) stock procured worth of 0.8 million from UNICEF internal resources and Emergency Programme Fund (EPF) funds.

**Partnerships:** To respond to COVID-19, UNICEF is working with MONHSR&C, Provincial Health Departments, Ministry of Planning Development and Reform, WFP, WHO, Nutrition Development Partners, CSOs UN, Scaling UP Nutrition (SUN) networks, NDMA, PDMA, Pakistan Paediatrics Association and Pakistan Gynaecologist Association.

## 6. Education:

**Coordination:** UNICEF continued to support as co-leads of Education in Emergency the response coordination with Federal and Provincial Education ministries/departments and humanitarian organizations, UN agencies and development partners for continuity of learning during school closure and adherence to SOPs for safe re-opening of schools.

The Education Sector Working Group (ESWG) conducted the second round of consultation on Education Cannot Wait (ECW) roll out in Pakistan with the Federal Ministry of Education and Professional Training (FMoE&PT), and the Provincial Education Department in Balochistan and discussed the broader objective of the Multi-Year Resilience Programme (MYRP), key recommendations and next steps.

UNICEF conducted a Disaster Risk Reduction (DRR) Working Group meeting on 17th September to review educational planning related to COVID-19. On 3<sup>rd</sup> September Virtual DRR working group meeting conducted to discuss Continuity of Learning initiatives and emergency preparedness for future emergencies particularly, floods in Punjab.

Schools reopened across Pakistan, 50 per cent attendance is practiced in all districts of Punjab, Sindh, and the high burden districts of KP (Khyber Pakhtunkhwa) to minimize the risk of COVID-19 spread, in Balochistan schools are operating with full attendance.

The percentage of teachers' vaccination increased from 83 to 85 in KP, from 94 to 96 in Sindh and 34 to 39 in Balochistan whereas in Punjab teachers' vaccination stands at 99.5 per cent.

Schools in Punjab and KP have started the registration of 15 to 18 years old children for vaccination, while the Government of Sindh has cancelled its initial plan of vaccination of this age group.

**Response:** UNICEF is working with national and provincial education authorities for safe school operations through roll out of SOPs, guidelines and use of corresponding training manuals/packages. 501 teachers and education officers (262 women) accessed training in safe reopening and operation of schools in September, bringing the total number of teachers/education officers trained on safe reopening /operation reached to 10,142 (3,814 women) across Pakistan. In addition, 576 teachers and education officers (262 women) accessed training on mental health and psychosocial support, taking the total numbers of teachers/officials trained to 21,126 (women: 9,394) across Pakistan.

To support Continuity of Learning (CoL) UNICEF continued sharing communication material. In Punjab, UNICEF continued facilitating the Punjab School Education Department in exploring learning models that include blended learning, low and high tech, to reach out to all children. In Sindh, UNICEF and Education Department initiated the development of students' self-access workbooks with home-based assignments, draft rubric for teachers and students have been developed through the Digital Learning Initiative in Sindh.

To increase adherence to Safe Schools Operations, UNICEF provided communication materials on SOP in schools and teachers vaccination at provincial level. With federal level announcement of vaccination of children of age 15 and above, communication materials (flyer and poster) have been developed and are under review.

To encourage learning activities of students, an additional 28,437 parents have been reached with encouraging messages for enrolment/ attendance of children through SMS and different social media platforms, reaching a total number of parents to 565,156. To promote Mental Health and Psychosocial Support (MHPSS) in schools, UNICEF Child

Protection and Education sections jointly conducted sessions on MHPSS in public schools of seven districts in Khyber Pakhtunkhwa province (Swat, Abbottabad, Swabi, Kohat, Mardan, Peshawar) reaching 3,550 (1,600 girls) students .

## Supply and Procurement Services

Under the COVAX Facility till 30<sup>th</sup> September 2021, a total of 28.5 million doses of COVID-19 vaccines have been delivered and distributed within Pakistan, along with associated syringes and cold boxes required to support the rollout of the vaccination program. During October more than 10 million additional doses are anticipated to be provided through the COVAX Facility to Pakistan.

Eighteen Ultra Cold Chain equipment mobilised by UNICEF were all delivered to Pakistan on 31<sup>st</sup> August 2021 and installed at national and districts levels in September. Significantly contributing to the total capacity of the country would reach up to 7.8 million doses of Pfizer at a time. The Government of Pakistan are also procuring an additional 100 UCC through Procurement Service modality, with the aim of having all installed throughout various districts of Pakistan by December 2021.

All supplies procured under the US\$ 15 million World Bank Pandemic Emergency Financing (PEF) Fund allocated to Pakistan have now been distributed as agreed with the Ministry (MONHSRC).

Additionally, 2.4 million surgical masks procured by UNICEF were delivered to UNICEF Warehouse in Karachi and distribution was completed in September to locations as agreed with M/oNHSRC in support of the COVID-19 vaccine rollout in Pakistan.

Delivery of all Laboratory Equipment of the value of US\$ 1.2 million funded by Asian Development Bank (ADB) has now been distributed, after the clearance of fridges and freezers, and already received by 20 laboratories throughout Pakistan.

Under the Supply Financing Facility (SFF) funding, 1,000 oxygen concentrators along with accessories – 50,000 prongs (adult) 15,000 prongs (child) and 500 Pulse Oximeters delivered to Expanded Programme on Immunization in Islamabad. Due to the urgent need, arrangements were made by UNICEF to deliver the supplies up to the health facilities level. A total of 980 OCs with accessories were to health facilities across Pakistan. Distribution will be completed by 30<sup>th</sup> September 2021.

## Humanitarian Leadership, Coordination and Strategy

### NATIONAL COORDINATION

The National Security Committee, chaired by the Prime Minister, established a National Coordination Committee (NCC), to formulate and implement a comprehensive strategy to stop COVID-19 transmission and mitigate its consequences. The NCC established the NCOC to synergize and articulate a unified national effort to respond to the COVID-19 pandemic, and to implement NCC's decision. It also designated the NDMA as the leading operational agency. In each province, the Chief Ministers have convened task forces to coordinate the response, with the PDMA as the leading provincial operational agency. Furthermore, the Emergency Operation Centre (EOC) at the National Institute of Health (NIH) has been activated as an Incident Command and Control Hub. A technical working group with three sub committees for RCCE, supply/cold chain and vaccine logistic and surveillance of Adverse Event Following Immunization (AEFI) have been established at Federal EPI. They regularly report on the readiness level to the MoNHSRC.

UNICEF contributed to the development of the National Vaccine Deployment Plan (NVDP), prioritization of eligible populations for vaccination and application for COVAX vaccines exercise, National Immunization Technical Advisory Groups (NITAG) and National Interagency Coordination Committee (NICC).

UNICEF Pakistan's humanitarian interventions are aligned closely with the interagency Humanitarian Response Plan (HRP) 2021. The humanitarian community aims to provide integrated lifesaving services to some 4.3 million most vulnerable people affected by shocks ensuring living conditions, resilience and protection, whereas the overall humanitarian needs amount to 11 million people across the country.

## UN COORDINATION

The UN in Pakistan has established a Crisis Management Team (CMT) comprising of: WHO; UNICEF; WFP; UNHCR; UNFPA; IOM; UNOCHA; UNDP; UNAIDS; DSS and the RC which meets every Friday. For COVID-19 vaccine introduction, together with national authorities, WHO, World Bank and donors, UNICEF is part of the country technical working group and sub committees on cold chain/vaccine logistics and RCCE. UNICEF is supporting the planning for cold chain and vaccine need assessment and procurement, as well as RCCE.

## UNICEF's Response Strategy

UNICEF Pakistan is working through a multipronged response strategy which includes: (1) public health response to COVID-19; (2) continuity of essential services; and (3) mitigation of the socio-economic impact of COVID-19. To support breaking the current chain of transmission, the public health response is focused on the high burden cities which are most affected with the highest number of new COVID-19 cases and high case test positivity rates since March 2021 – the 4<sup>th</sup> wave of COVID-19 in Pakistan.

### Public health response to COVID-19

- **C4D, Community Engagement and AAP:** to provide timely and accurate information to families and communities and promote behaviour to reduce risk and limit transmission during the second wave of COVID-19 cases. For the third wave response, particular focus will be given to adapt according to the epidemiology and leverage four platforms including 1) Civil society (prioritizing AJK and GB), 2) Religious leaders' engagement and mobilization, 3) Polio Networks mobilizing the community-based volunteers and 4) Youth Groups to be engaged for peer-to-peer awareness.
- **Water sanitation and Hygiene** through (a) Water Sanitation and Hygiene (WASH) support to targeted primary health facilities, quarantine and isolation centres and in the communities and (b) protection of frontline health workers.
- **COVID-19 Vaccine introduction and Deployment:** UNICEF as a member of technical working group is providing support for preparation of COVID-19 vaccine, procurement and deployment including risk communication and awareness raising as well as support for cold chain. UNICEF is also part of the COVAX consortium comprised of GAVI, WHO, CEPI and UNICEF that is supporting Pakistan in the scale up of the COVID-19 vaccination.
- **Procurement services** in support of the Government to ensure timely sourcing and availability of quality essential medical supplies and personal protective equipment (PPE).
- **Child protection**, to ensure children and families of cases and contacts affected by COVID-19 are provided with appropriate care and psychosocial support, and for stigma prevention.

### Continuity of essential services

- **Education** to ensure teachers, parents and students are informed about COVID-19, continuity of learning and facilitate safe reopening of schools and learning education institutions.
- **Health** for managing mild cases and referral of severe cases with the aim to strengthen primary healthcare (PHC) system and ensure continuity of life saving basic health services like MNCH and immunization.
- **Nutrition** with the aim to ensure access to promotional, preventive and curative nutrition services to people affected by and people at risk of Coronavirus infection, with a focus on nutrition vulnerable groups. **Nutrition Emergency:** Similar approach is to be adopted to ensure nutrition services in selected high burden malnutrition districts. It is also important to note that UNICEF in partnership with the government will functionalize nutrition facilities across country by making them safe through provision of PPEs and thus will leverage recourses of Government and secure same services for children with malnutrition.

### Mitigation of the impact of COVID-19

- **Advocacy** through (a) parliamentary engagement on child sensitive budgeting, (b) national and provincial advocacy, including joint advocacy with other un agencies and partners, in support of the COVID-19 socio-

economic impact framework and plan, and (c) implementation of the UNICEF Pakistan advocacy plan ‘response and recover’ to COVID-19.

- **Evidence generation** on (a) multi-dimensional child poverty analysis to influence policy action and allocations, (b) development of nutrition sentinel surveillance system to provide routine information on nutrition and inform policy and programme action and (c) VAC study to identify and respond to violence against children due to the COVID-19 response.
- **Systems development:** (a) continuing engagement in the finalization of the universal health benefit package and tools that are covid-19 sensitive, (b) education sector analysis and planning, (c) provision of alternative care for children without parental / family care and (d) positioning of Civil Registration and Vital Statistics (CRVS) in the context of COVID-19.
- **Social protection:** technical / advisory support (studies) to the emergency cash transfer scheme on children to inform medium term policy action on child-sensitive social protection programme in Pakistan.

## Human Interest Stories and External Media

In September 2021, UNICEF continued to promote vaccination against COVID-19 and adherence to public safety measures through media and social media. As part of its campaign to encourage women to vaccinate against COVID-19 and reduce the gender gap, UNICEF produced a video with a famous actress. A video with a 15-year-old boy was also produced to highlight the opening of the vaccination campaign to adolescent girls and boys from age 15 years.

Under the global ‘Reopen Schools’ campaign, UNICEF published content emphasizing the importance of reopening school and of mitigating the impact of 18 months of intermittent COVID-19 lockdowns on children’s learning, including through remedial learning. UNICEF released videos featuring a 15-year-old girl in Punjab, a 15-year-old boy and a school principal in Khyber Pakhtunkhwa’s Swat. UNICEF also published a video featuring a 16-year-old boy as part of its Pak Youth Diaries series on mental health. Two stories on UNICEF’s support to education were published, one on the UNICEF-supported Alternative Learning programme funded by Japan’s JICA in Balochistan, and one on how school monitoring systems help support quality education in Sindh as part of the EU-funded STA DEEP programme with UNICEF technical support.

### LINKS

#### 1- COVID\_19

Video with actress Aymen Saleem:

[Link](#)

Video with 15-year-old boy: [www.facebook.com/unicefpakistan/videos/183042687260942](http://www.facebook.com/unicefpakistan/videos/183042687260942)

#### 2- #Reopen Schools campaign:

15-year-old girl in Punjab: [Link](#)

11-year-old boy in Swat, KP: [Link](#)

School Principal in Swat, KP: [Link](#)

#### 3- Stories on education

[Link](#), [Link](#)

#### 3- Mental Health:

Video featuring 16-year-old boy: [Link](#)

## Next SitRep: 1 November 2021

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## Annex A Summary of 2021 Programme Results

	UNICEF and Operational partners				Task Force /Sector		
Sector	Target*	Gender	Results	Change since last report ▲ ▼	Target	Results	Change since last report ▲ ▼
<b>C4D, Community Engagement and Accountability to Affected People</b>							
People engaged through social media	550,000	Total	435,491	394,012 ▲			
People reached (through national Media channels) with messages (on COVID-19 prevention and) on access to services	75,000,000	Total	58,714,933	4,100,000 ▲			
At-risk populations reached through community engagement activities.	7,000,000	Total	13,917,258	253,693 ▲			
Callers through the national Helpline who shared relevant concerns, received clarifications, and provided feedback.	3,000,000	Total	2,643,934	528,000 ▲			
<b>Water Sanitation and Hygiene</b>							
People at high risk of COVID-19 supported with hygiene promotion activities.	2,706,253	Males	958,733	95,488 ▲	TBD	958,733	95,488 ▲
		Female	997,864	99,385 ▲		997,864	99,385 ▲
		<b>Total</b>	<b>1,956,597</b>	<b>194,873 ▲</b>		<b>1,956,597</b>	<b>194,873 ▲</b>
Children accessing appropriate water, sanitation and hygiene facilities and hygiene services in learning facilities and safe spaces.	242,500	Boys	160,318	16,367 ▲	TBD	160,318	16,367 ▲
		Girls	166,861	28,556 ▲		166,861	28,556 ▲
		<b>Total</b>	<b>327,180</b>	<b>44,924 ▲</b>		<b>327,180</b>	<b>44,924 ▲</b>
Health facilities provided with essential WASH services.	430	<b>Total</b>	<b>108</b>	10 ▲	TBD	<b>108</b>	10 ▲
Community sites with handwashing facilities in the affected areas.	1,658	<b>Total</b>	<b>1,006</b>	8 ▲	TBD	<b>1,006</b>	8 ▲
<b>Child Protection, GBViE and PSEA</b>							
Children and caregivers accessing mental health and psychosocial support.	445,333	Males	111,950	3,802 ▲	621,107	111,950	3,802 ▲
		Female	119,051	4,597 ▲		119,051	4,597 ▲
		Boys	51,111	659 ▲		51,111	659 ▲
		Girls	52,037	805 ▲		52,037	805 ▲
		<b>Total</b>	<b>334,149</b>	<b>9,863 ▲</b>		<b>334,149</b>	<b>9,863 ▲</b>
People reached with prevention messages on stigma and violence against children, including gender-based violence.	18,025,391	<b>Total</b>	<b>12,273,037</b>	<b>968,075 ▲</b>	<b>19,563,421</b>	<b>12,273,037</b>	<b>968,075 ▲</b>
Children and adolescents who received child protection services, including gender-based violence services.	5,500	Boys	2,115	41 ▲	49,443	2,115	41 ▲
		Girls	1,606	34 ▲		1,606	34 ▲
		<b>Total</b>	<b>3,721</b>	<b>75 ▲</b>		<b>3,721</b>	<b>75 ▲</b>
Number of social and care workers trained on psychosocial support and stigma reduction.	10,234	Males	4,127	458 ▲	17,057	4,127	458 ▲
		Female	6,148	538 ▲		6,148	538 ▲
		<b>Total</b>	<b>10,275</b>	<b>996 ▲</b>		<b>10,275</b>	<b>996 ▲</b>
<b>Education</b>							
	533,451	Boys	38,393	0	1,040,803	51,893	0

Children accessing safe formal and non-formal education, including ECE.		Girls	40,738	0		54,238	0
		Total	<b>79,131</b>	<b>0</b>		<b>106,131</b>	<b>0</b>
Schools (formal and non-formal) implementing safe school protocols (infection prevention and control).	5,335	<b>Total</b>	<b>1,181</b>	<b>0</b>	<b>9,736</b>	<b>1,217</b>	<b>0</b>
Teachers /education officials trained on MHPSS (Mental Health and Psychosocial Support)	10,675	Males	11,564	317▲	16,687	11,564	317▲
		Female	9,562	262▲		9,562	262▲
		<b>Total</b>	<b>21,126</b>	<b>579▲</b>		<b>21,126</b>	<b>579▲</b>
Teachers /education officials trained on safe reopening/operation of schools	10,675	Males	6,328	239▲	16,687	6,328	239▲
		Female	3,814	262▲		3,814	262▲
		<b>Total</b>	<b>10,142</b>	<b>501▲</b>		<b>10,142</b>	<b>501▲</b>
Parents reached with messages encouraging learning activities (through SMS and different social media).	1,067,541	<b>Total</b>	<b>565,156</b>	<b>28,437▲</b>	<b>2,133,804</b>	<b>565,156</b>	<b>28,437▲</b>

### Health

Number of people benefitting from continuity of primary healthcare services at UNICEF supported health facilities	3,511,636	Males		198,874▲			
		Females		263,706▲			
		Boys		16,589▲			
		Girls		25,115▲			
		<b>Total</b>	<b>3,616,491</b>	<b>504,284▲</b>			
Number of children < 1 vaccinated against Measles	247,242	Boys		4,513▲			
		Girls		4,996▲			
		<b>Total</b>	<b>110,595</b>	<b>9,509▲</b>			
Number of frontline health workers reached with basic PPEs (masks, gloves and hand sanitizers)	150,000	Males		342▲			
		Females		302▲			
		<b>Total</b>	<b>18,475</b>	<b>644▲</b>			
Health care facility staff and community health workers trained on infection prevention and control	20,000	Males		518▲			
		Females		1,387▲			
		<b>Total</b>	<b>11,910</b>	<b>1,905▲</b>			
Number of frontline health workers and community volunteers oriented on COVID-19 and referral of suspected cases	50,000	Males		572▲			
		Females		567▲			
		<b>Total</b>	<b>5,293</b>	<b>1,139▲</b>			
Number of Paediatricians & Family Physicians Trained on Clinical Management of Children with COVID	2,000	Males		5▲			
		Females		8▲			
		<b>Total</b>	<b>1,413</b>	<b>13▲</b>			

### Nutrition

Children aged 6 to 59 months with severe acute malnutrition admitted for treatment	102,413**	Boys	22,731	1,036▲	167,857	66,159	18,130▲
		Girls	27,295	1,320▲		81,973	20,719▲
		<b>Total</b>	<b>50,026</b>	<b>2,356▲</b>		<b>148,132</b>	<b>38,849▲</b>
Primary caregivers of children aged 0 to 23 months receiving infant and young child feeding counselling	1,607,460** *	<b>Total</b>	<b>697,449</b>	<b>59,011▲</b>	1,904,864	<b>1,534,691</b>	<b>747,306▲</b>
Children aged 6 to 59 months receiving multiple micronutrient powders	813,940	Boys	242,499	12,198▲	813,940	360,217	58,327▲
		Girls	251,863	12,902▲		359,957	53,397▲
		<b>Total</b>	<b>494,362</b>	<b>25,100▲</b>		<b>720,174</b>	<b>111,724▲</b>

Cumulative Response COVID-19						
Sector	UNICEF Results			Sector Results		
	2020	2021	Cumulative	2020	2021	Cumulative
<b>Risk Communication and Community Engagement (C4D)</b>						
People engaged through Social Media	41,895	435,491	435,491			
People reached (through national Media channels) with messages (on COVID-19 prevention and) access to services	83,000,000	58,714,933	141,714,933			
At-risk populations reached through community engagement activities.	37,102,079	13,917,258	51,019,337			
# of callers through the national Helpline shared relevant concerns, received clarifications, and provided feedback.	5,428,871	2,643,934	8,072,805			
<b>Infection Prevention and Control (WASH)</b>						
People at high risk of COVID-19 supported with hygiene promotion activities and facilities	10,247,624	1,956,597	12,204,221	28,330,000	194,873	28,524,873
Children accessing appropriate WASH facilities and hygiene services in learning facilities and safe spaces.	701	327,180.00	279,967	1,477	44,924.00	46,401
# of community sites with handwashing facilities in the affected areas	2,138	108	2,246	3,767	10	3,777
# of schools in targeted high-risk areas supported with IPC measures and improved water and sanitation	1,352	1,006	2,358	1,750	8	1,758
<b>Psychosocial Support and Child Protection</b>						
Children and caregivers accessing mental health and psychosocial support	216,144	334,149	550,293	219,007	12,273,037	12,492,044
People reached with prevention messages on stigma and violence against children, including gender-based violence	57,532,480	12,273,037	69,805,517	63,863,751	12,273,037	76,136,788
Children and adolescents received child protection services, including gender-based violence services	1,176	3,721	4,897	1,176	3,721	4,897
Social and care workers trained on psychosocial support and stigma reduction	8,290	10,275	18,565	8,388	10,275	18,663
<b>Education</b>						
Children accessing safe formal and non-formal education, including ECE.	79,131	79,131	158,262	8,814,507	106,131	8,920,638
Schools (formal and non-formal) implementing safe school protocols (IPC).	0	1,181	1,181	0	1,217	1,217
Teachers /education officials trained on MHPSS	28,258	21,126	49,384	538,494	21,126	559,620
Teachers / education officials trained on safe reporting/ operation of schools	3,035	10,142	13,177	3,035	10,142	13,177
Parents reached with messages encouraging learning activities (through SMS and social media).	278,857	565,156	844,013	354,864	565,156	920,020
<b>Building Resilient Health Systems</b>						

Number of people benefitting from continuity of primary health care services at UNICEF supported health facilities	3,459,844	3,616,491	7,076,335			
Number of children < 1 vaccinated against Measles	215,241	110,595	325,836			
Number of frontline health workers reached with basic PPEs (masks, gloves and hand sanitizers)	104,565	18,475	123,040			
Number of frontline workers trained on infection prevention and control	137,079	11,910	148,989			
Number of frontline health workers and community volunteers oriented on COVID-19 and referral of suspected cases	92,273	5,293	97,566			
Number of Paediatricians & Family Physicians Trained on Clinical Management of Children with COVID	0	1,413	1,413			
<b>Nutrition</b>						
Children aged 6 to 59 months with SAM admitted for treatment	161,702	50,026	211,728	228,819	2,356	231,175
Primary caregivers of children aged 0 to 23 months receiving IYCF counselling	1,575,965	697,449	2,273,414	1,898,018	59,011	1,957,029
Children aged 6 to 59 months receiving MM powders	0	494,362	494,362	0	25,100	25,100

## Annex B

### Funding Status:

Sector	Requirements	Funds available			Funding gap	
		*Humanitarian resources received in 2021	Other Resources used in 2021	2020 carry forwarded funds	\$	%
Nutrition	18,235,897	300,000	115,000	3,011,199	14,809,698	81%
Health	6,822,354	635,763	0	2,326,955	3,859,636	57%
Water, sanitation and hygiene	13,267,318	0	1,956,868	376,892	10,933,558	82%
Child protection, GBViE and PSEA	11,310,084	85,749	921,950	882,589	9,419,796	83%
Education	4,708,089	0	762,913	9,731	3,935,445	84%
C4D, community engagement and AAP	5,886,000	290,597	0	444,509	5,150,894	88%
Emergency preparedness	1,177,200	64,251	0	28,787	1,084,162	92%
<b>Total</b>	<b>\$ 61,406,942</b>	<b>\$1,376,360</b>	<b>\$ 3,756,731</b>	<b>\$7,080,662</b>	<b>\$ 49,193,189</b>	<b>80%</b>

\*Funding received in 2021 includes HQ allocations to HAC appeal.