Despite progress made through vaccination drives, people across South Asia continue to be threatened by new and deadly waves of COVID-19. Hard-won development gains benefiting women and children are compromised, including in learning, due to prolonged school closures and loss of livelihoods, with negative consequences on the nutrition, health and psychosocial well-being of over 600 million children.

Children throughout the region are subjected to natural disasters, including floods, cyclones, landslides, droughts and earthquakes. Harsh winters easily become life-threatening, especially in conflict-affected areas.

Preparedness and disaster risk reduction remain life-saving, needed to prevent systems from collapsing and boost children and communities’ resilience to withstand the impact of recurrent and predictable disasters.

UNICEF is requesting US$16.1 million to provide humanitarian assistance for Bhutan, Maldives and Sri Lanka and overall humanitarian support across the region. This includes supporting healthcare, water and sanitation services, treatment of malnutrition, protection services, safe learning and strengthening social protection systems.

---

**HIGHLIGHTS**

- Despite progress made through vaccination drives, people across South Asia continue to be threatened by new and deadly waves of COVID-19. Hard-won development gains benefiting women and children are compromised, including in learning, due to prolonged school closures and loss of livelihoods, with negative consequences on the nutrition, health and psychosocial well-being of over 600 million children.

- Children throughout the region are subjected to natural disasters, including floods, cyclones, landslides, droughts and earthquakes. Harsh winters easily become life-threatening, especially in conflict-affected areas.

- Preparedness and disaster risk reduction remain life-saving, needed to prevent systems from collapsing and boost children and communities’ resilience to withstand the impact of recurrent and predictable disasters.

- UNICEF is requesting US$16.1 million to provide humanitarian assistance for Bhutan, Maldives and Sri Lanka and overall humanitarian support across the region. This includes supporting healthcare, water and sanitation services, treatment of malnutrition, protection services, safe learning and strengthening social protection systems.

---

**IN NEED**

- **1.6 million** children under the age of five malnourished
- **1.7 million** children in need of access to primary healthcare
- **814,806** children in need of access to WASH services
- **1.2 million** children in need of MHPSS/protection support
- **1.8 million** children in need of continued learning

---

**FUNDING REQUIREMENTS**

US$ 16.1 million
HUMANITARIAN SITUATION

Countries in South Asia, home to nearly one third of world’s child population, are prone to yearly flooding, landslides, droughts, earthquakes and recurrent disease outbreaks. Additionally, the region is faced with the ongoing COVID-19 pandemic and conflict, as evidenced by a system-wide Level-3 emergency in Afghanistan and protracted refugee situations in Pakistan and Bangladesh. In 2021, the region was battered by natural disasters and extreme weather conditions, which seem to intensify and become more frequent as a result of climate change. In mid-May, Tropical Cyclone Tauktae alone affected over 11.7 million people in India, with its storm and flooding causing significant casualties and damage. Moreover, droughts with consequential challenges on access to clean water and food security affect various countries in the region. Sri Lanka remains the seventh-most malnourished country globally and the second-worst affected country in the region for wasting among children under 5 years of age.9

The COVID-19 pandemic caused sharp rises in poverty and inequality and negatively impacted the lives of vulnerable groups including children, women, adolescents, youth and persons with disabilities. South Asian countries have experienced massive outbreaks of COVID-19 that resulted in over 38.5 million people contracting the disease and more than 541,000 deaths (1.4 per cent case fatality rate).10 Socioeconomic impacts remain immeasurable to date and have reversed some of the hard-earned development gains made in recent decades.7

Internal displacement and refugee movements with regard to Afghanistan and the protracted refugee crisis in Cox’s Bazar in Bangladesh spill over national borders, triggering humanitarian challenges with regional dimensions. Continued monitoring, timely preparedness and assurance of swift response remain of vital importance to the most vulnerable children. Multiple concurrent humanitarian crises, some with regional cross-border dimensions, are testimonies of the complexity of humanitarian action in South Asia, calling for urgent UNICEF support.

HUMANITARIAN STRATEGY

Given the elevated risk profile of countries in South Asia with the impact of climate change, and in line with the revised Core Commitments for Children, UNICEF continues to strengthen its approach to risk-informed programming and promotes alignment of development and humanitarian programming. The Regional Office for South Asia will continue to work with Governments, United Nations agencies, national, regional and international organizations to achieve results at scale through innovative, integrated and multi-sectoral approaches.

UNICEF invests in building capacities to reinforce community-based systems and networks that will help reach the most vulnerable and marginalized children. Country offices will be supported in improving risk assessment for better emergency preparedness, and in the aftermath of an emergency through deployment of surge capacity for strengthened humanitarian coordination, needs analysis and leverage means to ensure immediate actions.

UNICEF priorities include strengthening education systems for safe reopening of schools, supporting learning recovery, and ensuring continued delivery of quality and equitable learning opportunities; delivering life-saving and essential health, protection, nutrition and water, sanitation and hygiene services for women and children, and increasing investment in shock-responsive social protection and gender-responsive programming to shield poorer families from the worst impacts of, and to build their resilience to, natural disasters and other emergencies.

Collective partnerships at all levels, including with beneficiaries, remain crucial for delivering results for women and children, realizing their rights and boosting local capacities. The regional strategy will promote direct engagement with affected population and community-based organizations and integration of gender-based violence prevention and response across sectors. This will also include strengthening organizational commitments to accountability to affected populations, prevention of sexual exploitation and abuse, while ensuring access to safe reporting and appropriate response, as well as provision of emergency cash transfers.

STORY FROM THE FIELD

Chimi Wangmo is three and a half years old, and one of many children her age in pockets of rural and urban Bhutan who are unable to access early childhood care services in their communities.

For the past few months, however, she has been spending time playing blocks, her favourite from the several playing and learning materials home-based kits that UNICEF distributed to children like Chimi across the country.

“We are very thankful for receiving the home-based kit, which my daughter loves playing with,” said the mother, Tshewang Wangmo.

Read more about this story here
COVID-19 REGIONAL RESPONSE

Bhutan, Maldives and Sri Lanka. This appeal also covers support to the humanitarian response in all the countries in South Asia region including cross-border operations.

HUMANITARIAN SITUATION (COVID-19)

The COVID-19 pandemic has caused devastating impacts on women and children, pushing millions of families to the brink of collapse in South Asia, which is home to some 2 billion people. Children remain the pandemic’s overlooked victims; many have lost parents and caregivers to the virus, leaving thousands destitute and without parental care. In 2021, an increasing number of children have contracted the virus and fallen ill with COVID-19. Partial and full school closures are particularly affecting children and adolescents belonging to disadvantaged groups, both in their learning and psychosocial well-being, as they lack access to remote or distance learning tools. Despite significant government efforts, low connectivity and access to digital devices have severely hampered efforts to roll out remote learning. In Sri Lanka, 69 per cent of parents of primary school children reported that their children were learning ‘less’ or ‘a lot less.’ Additionally, as resources are diverted and services become saturated, essential healthcare and protection services have been compromised, including routine immunization and treatment for diseases and malnutrition. Prolonged lockdowns have exacerbated vulnerabilities and considerably impacted socioeconomic well-being, leading to greater needs and undermining national and local capacities.

HUMANITARIAN STRATEGY (COVID-19)

The emphasis of regional strategy will be on mitigating disruptions resulting from the COVID-19 pandemic, while ensuring life-saving health and nutrition interventions; learning through safe school operations/remote learning; child protection, psychosocial support and gender-based violence services to better protect children and women; and expanding social protection systems including cash-based programmes. UNICEF will prioritize the most vulnerable children and adolescents, including those living in low-income settings, migrant and refugee children and children of ethnic minorities.

The strategy draws on key lessons learned from the ongoing response, builds on current investments and is aligned with government response plans, including economic recovery plans. At the country level, UNICEF will work with government authorities to protect children and their families from exposure to the virus and mitigate the effects of COVID-19. This includes providing accurate life-saving COVID-19 information through risk communication and community engagement; improving infection prevention and control at healthcare facilities (including avoidance of disruption of regular immunization programme—measles, DTP13, etc.), continued learning and education including through communal facilities; promoting hygiene; and providing essential WASH services and lifesaving supplies and waste management. Investments to strengthen preparedness and response systems are increased to mitigate impact and ensure timely response.

2022 PROGRAMME TARGETS

<table>
<thead>
<tr>
<th>Service</th>
<th>Target</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Nutrition</strong></td>
<td>● 515,400 primary caregivers of children aged 0 to 23 months receiving infant and young child feeding counselling</td>
</tr>
<tr>
<td></td>
<td>● 876,300 children aged 6 to 59 months receiving multiple micronutrient powders</td>
</tr>
<tr>
<td></td>
<td>● 25,600 children with severe acute malnutrition receiving treatment with BP-100</td>
</tr>
<tr>
<td><strong>Health</strong></td>
<td>● 460,000 children and women accessing primary health care in UNICEF-supported facilities</td>
</tr>
<tr>
<td></td>
<td>● 7,500 health care facility staff and community health workers trained in infection prevention and control</td>
</tr>
<tr>
<td></td>
<td>● 13,300 children aged 0 to 11 months vaccinated against diphtheria, tetanus and pertussis</td>
</tr>
<tr>
<td></td>
<td>● 11,000 pregnant women provided with antenatal consultations</td>
</tr>
<tr>
<td><strong>Water, sanitation and hygiene</strong></td>
<td>● 2,500 girls and women accessing menstrual hygiene management services</td>
</tr>
<tr>
<td></td>
<td>● 350,000 children use safe and appropriate WASH facilities and hygiene services in learning facilities and safe spaces</td>
</tr>
<tr>
<td></td>
<td>● 10,000 people reached with hand-washing behaviour-change programmes</td>
</tr>
<tr>
<td></td>
<td>● 226,856 people reached with critical WASH supplies</td>
</tr>
<tr>
<td><strong>Child protection, GBViE and PSEA</strong></td>
<td>● 1,089,300 children and parents/caregivers accessing mental health and psychosocial support</td>
</tr>
<tr>
<td></td>
<td>● 12,000 women, girls and boys accessing gender-based violence risk mitigation, prevention and/or response interventionsul</td>
</tr>
<tr>
<td></td>
<td>● 47,500 people who have access to a safe and accessible channel to report sexual exploitation and abuse by aid workers</td>
</tr>
<tr>
<td></td>
<td>● 500 unaccompanied and separated children reunified with their primary caregivers or provided with family-based care/alternative care services</td>
</tr>
<tr>
<td><strong>Education</strong></td>
<td>● 856,986 children accessing formal or non-formal education, including early learning</td>
</tr>
<tr>
<td></td>
<td>● 650,000 children receiving individual learning materials</td>
</tr>
<tr>
<td><strong>Social protection</strong></td>
<td>● 1,800,000 households benefitting from new or additional social transfers from governments with UNICEF technical assistance support</td>
</tr>
<tr>
<td><strong>Cross-sectoral (HCT, C4D, RCCE and AAP)</strong></td>
<td>● 5,600,000 people reached through messaging on prevention and access to services</td>
</tr>
<tr>
<td></td>
<td>● 25,000 people engaged in risk communication and community engagement actions</td>
</tr>
</tbody>
</table>

Progress against the latest programme targets is available in the humanitarian situation report: https://www.unicef.org/appeals/rosa/situation-reports

*This appeal is aligned with the revised Core Commitments for Children in Humanitarian Action, which are based on global standards and norms for humanitarian action.*
FUNDING REQUIREMENTS IN 2022

UNICEF requires US$16.1 million to support sudden-onset emergencies (e.g., natural disasters, disease outbreaks and displacements), protracted conflict with cross-border dimensions, and ensure preparedness for all forms of disasters and COVID-19 response requirements in Bhutan, Maldives and Sri Lanka that are included in this regional appeal.

The Regional Office for South Asia will continue to work with Governments and in support of their eight country offices to strengthen emergency preparedness and ensure response in the immediate aftermath of an emergency through multi-sectoral technical support, strengthened humanitarian coordination and ensuring adequate capacities to prepare for and develop emergency responses. UNICEF is committed to linking humanitarian action with development programming where possible, building shock-responsive social services, and keeping the protection of women and children at the centre of all humanitarian actions.

Given the scale, severity, complexity and diversity of the humanitarian situations affecting hundreds of millions of children and their caretakers in the region, urgent funding is required so that UNICEF is able to work with Governments, civil society organizations and affected communities in all areas, as outlined in the Core Commitments for Children.

As exemplified by massive outbreaks of COVID-19 in India and Nepal as well as the magnitude of the escalation of violence in Afghanistan in 2021, countries in South Asia remain highly fragile in the face of sudden cross-border shocks. In order to respond to sudden alterations of humanitarian contexts in the region and mitigate their impacts, UNICEF in South Asia requires increased funding to strengthen the regional capacity of its staff and personnel from government and civil society partners in emergency preparedness and response.

UNICEF acknowledges the generous support of donors in 2021, which was essential to protecting children in South Asia from the multifaceted consequences of the pandemic. Continued and flexible funding support will be instrumental to implementing the 2022 regional strategy and addressing the pressing humanitarian needs of vulnerable children and women across this disaster-prone, yet resilient, region.

Who to contact for further information:

George Laryea-Adjei  
Regional Director, South Asia  
T +977 985 102 0913  
glaryeaadjei@unicef.org

Manuel Fontaine  
Director, Office of Emergency Programmes (EMOPS)  
T +1 212 326 7163  
mfontaine@unicef.org

June Kunugi  
Director, Public Partnership Division (PPD)  
T +1 212 326 7118  
jkunugi@unicef.org

<table>
<thead>
<tr>
<th>Sector</th>
<th>2022 requirements (US$)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Regional office requirements</td>
<td>6,319,354</td>
</tr>
<tr>
<td>Emergency response</td>
<td>3,050,000</td>
</tr>
<tr>
<td>Regional office technical capacity</td>
<td>2,728,501</td>
</tr>
<tr>
<td>Emergency Preparedness and</td>
<td>540,853</td>
</tr>
<tr>
<td>Disaster Reduction</td>
<td></td>
</tr>
<tr>
<td>COVID-19 response requirements</td>
<td>9,795,000</td>
</tr>
<tr>
<td>Nutrition</td>
<td>2,440,000(^{36})</td>
</tr>
<tr>
<td>Health</td>
<td>2,400,000(^{57})</td>
</tr>
<tr>
<td>Water, sanitation and hygiene</td>
<td>800,000(^{38})</td>
</tr>
<tr>
<td>Child protection, GBViE and PSEA</td>
<td>1,310,000(^{39,40})</td>
</tr>
<tr>
<td>Education</td>
<td>1,900,000(^{41})</td>
</tr>
<tr>
<td>Social protection</td>
<td>300,000(^{42})</td>
</tr>
<tr>
<td>Cross-sectoral (HCT, C4D, RCCE and AAP)</td>
<td>645,000(^{43})</td>
</tr>
<tr>
<td>Total</td>
<td>16,114,354</td>
</tr>
</tbody>
</table>
which is expectedly less costly.

The substantial number of people benefitting from the investment made in 2021, as well as from WASH interventions at primary healthcare facilities.

ENDNOTES

1. UNICEF’s public health and socioeconomic COVID-19 response, including programme targets and funding requirements, is integrated into the standalone country, multi-country and regional Humanitarian Action for Children appeals. All interventions related to accelerating equitable access to COVID-19 tests, treatments and vaccines fall under the Access to COVID-19 Tools Accelerator (ACT-A) global appeal.

2. This figure consolidates the needs from Bhutan (17,370) and Sri Lanka (1,600,000). This was calculated by UNICEF in collaboration with government counterparts based on the current COVID-19 response.

3. This figure consolidates the needs from Bhutan (60,000), Maldives (4,000) and Sri Lanka (1,600,000). This was calculated by UNICEF in collaboration with government counterparts, based on the current COVID-19 response.

4. This figure consolidates the needs from Bhutan (140,000), Maldives (74,806) and Sri Lanka (600,000). This was calculated by UNICEF in collaboration with government counterparts based on the current COVID-19 response.

5. This figure consolidates the needs from Bhutan (125,000), Maldives (89,000) and Sri Lanka (1,019,800). This was calculated by UNICEF in collaboration with government counterparts based on the current COVID-19 response.

6. This figure consolidates the needs from Bhutan (180,500), Maldives (25,000) and Sri Lanka (1,600,000). This was calculated by UNICEF in collaboration with government counterparts based on the current COVID-19 response.

7. In addition to the estimated poverty number, the impact of the economic crisis that followed COVID-19 was also evident in labour deterioration (lost wages, declines in earnings, job losses, or temporary absences), food insecurity, and increases in informality, all of which could continue to contribute to inequality in the region. South Asia Economic Focus Shifting Gears: Digitization and Services-Led Development, World Bank, Fall 2021.

8. Despite the global recovery in 2021, the economic benefits are unlikely to accrue fast enough to return the poverty level to levels that would have occurred without the pandemic. At the same time, the lingering effects of COVID-19 will continue to push people into poverty even in 2021. In South Asia, the pandemic is estimated to have led to 62 to 71 million new poor in 2020 and 48 to 59 million new poor in 2021, defined as those who would not have fallen into poverty or would have escaped poverty in the absence of the pandemic. The region’s poverty level in 2021 is estimated to remain above the pre-pandemic level. South Asia Economic Focus Shifting Gears: Digitization and Services-Led Development, World Bank, Fall 2021.


10. SAARC Disaster Management Centre, COVID-19 Situation Report Oct 20, 2021


13. diphtheria, tetanus and pertussis.

14. UNICEF is committed to needs-based targeting, which means covering the unmet needs of children; and will serve as the provider of last resort where it has cluster coordination responsibilities.

15. This section reflects the consolidated targets of the countries included in the regional appeal only.

16. Maldives (5,000) and Sri Lanka (510,400).

17. Bhutan (15,000) and Sri Lanka (861,300).

18. Sri Lanka only.

19. Maldives (10,000) and Sri Lanka (450,000).

20. Sri Lanka only.

21. Bhutan (10,300) and Maldives (3,000).

22. Bhutan (9,000) and Maldives (2,000).

23. Sri Lanka only.

24. Bhutan (50,000) and Sri Lanka (300,000).

25. Sri Lanka only.

26. Maldives (82,806) and Sri Lanka (144,050).

27. Bhutan (40,000), Maldives (25,000) and Sri Lanka (1,024,300).

28. Sri Lanka only.

29. Maldives (44,500) and Sri Lanka (3,000).

30. Sri Lanka only.

31. Bhutan (178,986), Maldives (28,000) and Sri Lanka (650,000).

32. Sri Lanka only.

33. Sri Lanka only.

34. Bhutan (300,000), Maldives (300,000) and Sri Lanka (5,000,000).

35. Sri Lanka only.

36. Bhutan (290,000), Maldives (150,000) and Sri Lanka (2,000,000).

37. Bhutan (700,000), Maldives (700,000) and Sri Lanka (1,000,000). The decrease in the funding requirement despite the increase in the overall sectoral target is attributed to the substantial number of people benefiting from the investment made in 2021, as well as from WASH interventions at primary healthcare facilities.

38. Bhutan (300,000), Maldives (200,000) and Sri Lanka (300,000).

39. Bhutan (460,000), Maldives (350,000) and Sri Lanka (500,000). The decrease in the sectoral funding requirement despite the increase in the overall sectoral target is attributed to an inclusion of a large number of school children to be benefitting from mental health and psychosocial support at school, which is expectedly less costly.

40. This includes US$125,000 for PSEA activities.

41. Bhutan (550,000), Maldives (800,000) and Sri Lanka (550,000).

42. Sri Lanka only. This budget is for advocacy and evidence generation.

43. Bhutan (300,000), Maldives (70,000) and Sri Lanka (275,000).