Highlights

- During 2022, the region was hit with a series of natural disasters and extreme weather events, as well as political and economic crises. 7.2 million people were affected by the worst floods in north-eastern Bangladesh in over 100 years. India experienced multiple extreme weather events, which claimed 3,006 lives and damaged 423,249 houses. In Pakistan, torrential rains led to a record flood that affected 33 million people and displaced 8 million people. In Sri Lanka, the rapidly unfolding economic crisis particularly impacted the poorest and most marginalized populations. Afghanistan remains one of the world’s most severe humanitarian crisis, with multidimensional drivers of need, including drought, natural disasters, economic shocks, disease outbreaks, and protection threats, particularly for women and girls.

- In response to the multiple crises in the region, UNICEF ROSA supported 41 surge support and technical missions to emergency affected countries, including Afghanistan, Pakistan, Bangladesh, and Sri Lanka. Overall, the regional office worked closely with all eight country offices in the region to reach approximately 80 million children in need of humanitarian support.

- UNICEF ROSA supported country offices to provide life-saving services to over 1 million children affected by emergencies in Bhutan, the Maldives and Sri Lanka.

UNICEF’s Response and Funding Status*

*Funding available includes funds received in the current year; carry-over from the previous year; and repurposed funds with agreement from donors. Funds received by programme sections were utilized for many interventions; however, the results show only one key indicator.

** Other resources were used by Bhutan to meet Education needs, resulting in a reflected underfunding of education.

*** Carry-forward funding includes significant COVID-19 response funding for health, explaining the discrepancy between carry-forward and new funds.
Regional Funding Overview and Partnerships

In 2022, UNICEF Humanitarian Action for Children (HAC) appeal for South Asia Region, which included a regional appeal to provide technical support to all eight countries in the region, as well as funding appeals for Bhutan, Maldives, and Sri Lanka, required US$16.1 million to respond to sudden-onset emergencies (e.g., natural disasters, public health emergencies, economic crises, and displacements), support protracted conflicts with cross-border dimensions, and to ensure preparedness for all forms of disasters and COVID-19 response.

UNICEF expresses its sincere gratitude to all public and private donors for their generous contributions, amounting to US$6.7 million (including $2.7 million carried over from the year of 2021), 42 per cent of the total funding requirements. Nevertheless, a substantial funding gap remained for UNICEF to fully deliver its humanitarian assistance required under this appeal.

Regional Situation Overview & Humanitarian Needs

Following the spread of the Omicron variant of COVID-19, South Asia experienced a third wave of the pandemic; sharp upward trends of infection were observed since the early January 2022. The peak of the infection passed in most countries by mid-February. As of 4 January 2023, there have been cumulatively 50,417,779 confirmed COVID-19 cases (of which 49,724,830 have been recovered) and 627,799 deaths in South Asia since the beginning of the pandemic. In 2023, a cumulative 10,940,008 COVID-19 cases were reported, with 54,666 deaths in South Asia. Substantial investment was made on the uptake of COVID-19 vaccines by governments and international community in the first half of 2022 in the region. Bhutan, Maldives, and Bangladesh all met the global target of 70 per cent of the total population fully vaccinated by the mid-2022. India has made marked progress in cumulatively administering more than 2.2 billion doses of COVID-19 vaccines, of which 748 million doses were administered in 2022. By year end, more than 85 per cent of children in India aged 12-18 years had taken at least one dose of the vaccine, and a strategy has been put in place to integrate COVID vaccination into regular immunization programs. As the situation has now stabilized, COVID-19 will no longer be included in 2023 HAC appeals.

During 2022, the region was hit with a series of recurrent and unexpected natural disaster and extreme weather events. In June, 7.2 million people (3.5 million children) were affected by the worst floods in north-eastern Bangladesh in over 100 years. India experienced extreme weather events on 291 of the 334 days from January 1 to November 30, 2022, which claimed 3,006 lives and damaged 423,249 houses. In Pakistan, between June and August 2022, torrential rains - equivalent to nearly 2.9 times the national 30-year average – led to a record flood in which one-third of the country covering 94 districts was inundated. The widespread flooding and landslides had severe repercussions for human lives, property, and infrastructure. Around 33 million people were affected, and 8 million people were reportedly displaced. As a result of this flooding, over 9 million children were in need for humanitarian assistance.

On 22 June, a 5.9 magnitude earthquake struck south-eastern Afghanistan centred around Paktika and Khost Provinces, killing an estimated 1,036 people and injuring 2,924. Barmal and Gayan districts in Paktika Province as well as Spera in Khost province were the most impacted. The earthquake led to wide-scale destruction in already vulnerable districts. The earthquake affected areas, cut off for decades from development and humanitarian assistance, were already “hotspots” for crisis levels of food insecurity and acute malnutrition with extremely low levels of hygiene/sanitation awareness and limited to no health facilities or schools. In late 2022, far-western Nepal was hit by a series of earthquakes. A 6.6 magnitude earthquake struck Doti District in far-west Nepal on 9 November, and claimed six lives, including four children aged 8-14 years, injured eight and affected over 7,000 families. On 12 November, another 5.4 magnitude earthquake hit nearby Bajhang District, with no casualties reported.

Sri Lanka is facing an acute economic crisis with an estimated 6.2 million people moderately acute food insecure and 66,000 people severely acute food insecure by September 2022, meeting humanitarian thresholds. Children are disproportionately affected by the rapidly unfolding economic crisis in Sri Lanka. Rising food and fuel prices, along with

\[\text{References:\} \\
1. SAARC Disaster Management Centre, Situation Report – 1025; Situation_Report_0.pdf (covid19-sdm.c.org) \\
2. SAARC Disaster Management Centre, Situation Report – 1025 and Situation Report – 653 COVID-19 | SAARC Region (covid19-sdm.org) \\
4. ibid \\

frequent power cuts, shortages of life-saving medicine, are particularly impacting the poorest and most marginalized\textsuperscript{11}. Essential health and WASH services have been severely impacted by stockouts of essential commodities, and access to education and child protection services is severely constrained.

Afghanistan remains one of the world’s most severe humanitarian crisis. Following the Taliban takeover in August 2021, the humanitarian situation worsened due to rapid economic decline, heightened food insecurity and malnutrition, a near-collapse of the national public health system, recurring flooding and other natural disasters, and almost-total exclusion of women and girls – almost half the population – from public life. In 2022, the key drivers of humanitarian needs were multidimensional; they included drought, natural disasters, economic shock, disease outbreaks, and protection threats, especially for women and girls. By the end of 2022, there were an estimated 28.3 million people in need of humanitarian assistance, including 15.3 million children (2023 Humanitarian Needs Assessment). In previous years, humanitarian needs were largely driven by conflict.

Regional Humanitarian Leadership, Coordination and Strategy

UNICEF ROSA, building on critical roles UNICEF country offices play at the field level, coordinates and provides overall support to ensure a robust regional response to children, limiting the spread of COVID-19 transmission and mitigate the consequences of COVID-19 pandemic working with government authorities and technical working groups, UN agencies, funds and programmes, civil society organisations at national and sub-national levels and the private partners. Overall, the regional office worked closely with all eight country offices in the region to reach approximately 80 million children in need of humanitarian support.

UNICEF ROSA focuses its efforts on enhancing the emergency preparedness and response capabilities of the eight country offices in the South Asian region, government counterparts and partners by providing technical expertise and strengthening systems for child-sensitive and inclusive humanitarian action, as well as on providing support to country offices under acute humanitarian situation, including support needed for largest-ever UNICEF humanitarian action in Afghanistan, unprecedented flood response in Pakistan, protracted Rohingya crisis in Bangladesh, economic/political crises in Sri Lanka and natural disaster emergencies related to flooding in Bangladesh and India. ROSA supported 41 surge support and technical missions to emergency affected countries, including Afghanistan, Pakistan, Bangladesh and Sri Lanka\textsuperscript{12}. Given the significantly enlarged humanitarian portfolio in past four years, additional investment to have a diverse, well-prepared deployment team, UNICEF ROSA updated the Emergency Preparedness and Response modules to align with the revised Core Commitments for Children and Grand Bargain workstreams, including Cash in Emergencies and Accountability to Affected Populations, and rolled out EPR trainings India and Pakistan, with plans to scale up training in at least four countries in 2023.

UNICEF supports cross-cutting interventions in emergencies, including the integration of cross-sectoral efforts to address the needs of children with disabilities, adolescents, women, and girls in humanitarian settings, focusing on gender-based violence services, shock-responsive social protection systems, accountability to affected populations and the prevention of sexual exploitation and abuse in emergencies with linkages to longer-term development efforts. UNICEF ROSA emergency team, in collaboration with social protection, piloted a webinar series to lay a regional foundation in Cash in Emergencies. Following this webinar series, an in-person training was coordinated with both emergency and social protection staff. The training resulted in four countries beginning to develop action plans for cash in emergencies, which will be finalized and rolled out over the coming year.

The Columbia University’s School of International and Public Affairs and UNICEF ROSA in coordination with UNICEF Bangladesh, India, Pakistan, and Sri Lanka conducted a study titled ‘Nothing About Us Without Us’ on adolescents’ engagement in humanitarian settings. The study involved a desk review of research on international guidelines for adolescent meaningful participation and selected interventions of UNICEF country offices supplemented by data from interviews, questionnaires, and secondary data. The report published in March 2022 represents progress and recommendations toward more inclusive and influential humanitarian programming in line with the Inter Agency Standing Committee Guidelines on Working with and for Young People in Humanitarian and Protracted Crises to build on and strengthen adolescent-centric emergency prevention, preparedness, response, and recovery. The results of this paper will be integrated into Accountability to Affect Populations action plans for 2023.

\textsuperscript{11} \url{https://www.bbc.com/news/business-61976928}

\textsuperscript{12} 14 missions to Pakistan, 7 missions to Sri Lanka, 17 mission to Afghanistan, and 1 mission to Bangladesh
Situation Overview and Humanitarian Needs

As of September 19, 2022, Bhutan reported 61,730 confirmed cases of COVID-19 out of which 61,564 recovered (out of which 3,433 cases were children below 5 years), and 21 died from the infection. The most prevalent variant Omicron triggered the fourth outbreak in the country in the 1st week of January 2022. 98% of the target population 18 years and above, 96% of adolescents 12-17 years and 96% of children 5-11 years were vaccinated with two doses of COVID-19 vaccines.

92% of the target population >18 years, 84% of adolescents 12-17 years and 83% (68,824) of children 5-11 years received first booster doses of COVID-19 vaccines, and 67% (361,758) of adult population above 18 years received a second booster dose. Protecting the vulnerable population and preventing disease severity and hospitalization remains the focus in managing COVID-19 pandemic. To strengthen the supply chain system to better manage the cold chain for COVID-19 and routine vaccines UNICEF conducted a comprehensive cold chain assessment, which was published in August 2022. The assessment identified gaps in the cold chain system, particularly in areas where the power supply was erratic. As a result, UNICEF procured Walk-in-Cooler for National EPI Store, Walk-in-Freezers for the National and Regional EPI Stores, 15 Solar Refrigerators for PHCs where the power supply was erratic, revised all the seven product of stock ledgers and indent books and provided capacity building on these items, conducted unique capacity building of bio-medical and cold chain technicians on cold chain maintenance for better sustainability, and installed real-time temperature monitoring devices across 289 health facilities of Bhutan. A comprehensive assessment of the Medical Oxygen System was carried out in 52 hospitals, and guidelines on the medical oxygen system is drafted. The guidelines will be available in 2023.

Summary Analysis of Programme Response

Health

All the vaccines have been procured and distributed on time to the districts and health facilities, and stock-outs were avoided, benefitting women and children. Eighty-three percent (7,309) of pregnant women availed fourth antenatal care (ANC4), 87 per cent of the women and children received second postnatal care (PNC2), and over 85 per cent (9,692) of children have received 3rd dose of pentavalent vaccine during the year. 237,780 doses of adult Pfizer, 297,200 doses of paediatric Pfizer and 649,600 doses of Moderna COVID-19 vaccines were received and administered to the adult and child target populations in the country during the reporting period.

The supply system has been strengthened through procurement and installation of cold chain equipment for storage and transportation of both COVID-19 and routine vaccines, with cold chain capacity expanded four-fold. 782 health staff (331 females), 90 cold chain and bio-medical technicians (25 females) and 45 health staff were trained on Cold Chain Assessment, 57 health staff were trained on Effective Vaccine Management Assessment, 680 Health Staff were trained on Cold Chain Equipment and vaccine management and 13 Bio-Medical Engineers/Technicians were trained on oxygen management. Fourteen Solar Direct Drive Combos (Refrigerator + Deep Freezers) have been installed in health facilities with unreliable power supply to keep the vaccine potent. Cold chain temperature excursion monitoring devices have been installed at all health facilities.

Funding to support the implementation of WHO UNICEF Joint Program for Mental Health and Psychosocial support was received and workplan has been developed. The program will begin in 2023.

Nutrition

During the reporting period, essential nutrition commodities and supplies were procured namely Combined Minerals and Vitamins, Multibus interface Kits, Growth Monitoring equipment, and Multiple Micronutrient Powder (MNP). 8,687 children have received combined nutrition supplements.

The national guidelines on Infant and Young Child feeding policy (IYCF), GMP (Growth Monitoring Promotion) were revised and updated based on the latest scientific and global evidence and recommendations.

13 After September 19, 2022, the government stopped reporting on COVID-19 cases
100,000 boxes of MNP were procured, delivered, and distributed to 289 health facilities across the country which has resulted in the 97% coverage of MNP supplementation in Bhutan. The MNP supplementation is expected to reduce stunting and prevalence of anaemia amongst Children under 5.

23 health workers were trained at the National Training of Trainers on the updated IYCF, GMP and MNP supplementation guidelines in October 2022. To support Growth Monitoring Promotion of children in Bhutan, 200 digital weighing scales have been procured and distributed to the selected Primary Health Centers and District hospitals.

**Child Protection**
UNICEF in partnership with the National Commission for Women and Children (NCWC) and Civil Society organizations (CSOs) RENEW and Nazhoen Lamtoen, enhanced the capacities of 225 (132 Female) case managers on case management procedures for GBV to handle cases in line with the National Guidelines on Gender Based Violence (GBV) and Child Protection case management. Additionally, 56 (34 Female) GBV specialized service providers were trained to provide mental health and psychosocial support and safety services in line with GBV Standard Operating Procedures. UNICEF supported the women and girls’ safe spaces (WGSS) in Paro, Bumthang, and Tsirang districts, which provided a safe entry point for 16,398 (10,111 Female) women, girls, and boys to access case management, livelihood, and other services. To increase the access to the mental health and psychosocial support for children, UNICEF supported the Ministry of Education to roll out the “I Support My Friends” package on psychological first aid, which was used to train 3,330 peer helpers in 128 schools. The Bhutan Nuns Foundation organized an awareness program with UNICEF support, to enhance the knowledge of over 112 nuns in Bhutan on the importance of menstrual hygiene management and prevention of GBV.

**Education**
The opening of all schools and Early Childhood Care and Development centres was delayed over a month (schools were supposed to open in March) due to lockdown restrictions put in place in the country to ensure that eligible population including all children above five years were vaccinated against COVID-19. All regular schools were reopened for face-to-face learning on 18 April 2022 in a phased manner. Due to loss in instructional time, the mid-term examinations were moved to August. The mid-term break for children and teachers was reduced from 15 days to one week to account for the loss in instructional time. Established COVID-19 safety protocols (use of masks, hand washing with soap, maintaining social distance, reading children’s temperature in the morning) are being implemented across the nation. Candidates qualifying for placement (in country and ex-country professional/tertiary education programmes) will be placed on a priority basis following the announcement of Grade 12 high stake examination results. 64 Disaster Management Focal teachers have been provided a virtual training by the Ministry of Education on Basic Disaster Risk Management and Planning. As a result, the teachers will be able to strengthen School-based Disaster Management Planning, mitigate risks, respond as frontline responders, and facilitate recovery.

159 teachers (17 Female, 142 Male) were part of a participatory review of the Teacher’s Handbook for School Disaster Risk Management and Planning towards Safe and Resilient schools. Review findings will be incorporated in School Disaster Management Plans of the respective schools and will contribute to the development of Standard Operating Procedures (SOP) for education during emergency.

**WASH**
To further strengthen the COVID-19 response capabilities of healthcare facilities, 34 Primary Health Centers (PHC) from five districts were equipped with inclusive hand washing stations and safe drinking water at the Point of Care, benefiting 690 people daily. Funding for an additional 30 PHCs was secured from SBC to install inclusive hand washing stations and safe drinking water and installation is currently ongoing in three districts (Tashigang, Samdrup and Samtse). Once completed 108 out of 185 PHCs will have inclusive handwashing stations and safe drinking water at point of care.

**Social Protection and Cash Transfers**
UNICEF Bhutan is currently working to support emergency financing of health services in the country. Consultations are being held with relevant stakeholders, and a full day workshop on the development of a strategy was held. The strategy for emergency financing of health services is currently under development and will be finalized with UNICEF support in February 2023.
Community Engagement and Accountability to Affected Populations

While violence against children and young people remains underreported, records show that in the last four and half years, Bhutan recorded 970 cases of violence against children and young people aged one to 24 years. To address norms of acceptance of violence among children, young people, parents and caregivers, to raise awareness on the impact of violence in the lives of children and promote help seeking behaviour in Covid-19 pandemic situation, UNICEF in collaboration with National Commission for Women and Children, and a consortium of 14 governmental and nongovernmental agencies discussed and finalized a multi-sectoral Social Behaviour Change (SBC) campaign which has been rolled out on 14th July to End Violence Against Children (EVAC). EVAC reached more than 120,000 people with knowledge and skills to prevent violence, abuse, exploitation, and neglect.

Human Interest Stories and External Media

1. Government of Japan's support boosts cold chain system (unicef.org)
2. Break the silence! | UNICEF Bhutan

Social media

- https://www.facebook.com/UNICEFinBhutan/posts/pfbid028hXQhPmmqSQzfjyDkfb8Gd2DZ3dbKkozUbN1wJbwWiZBHb2knz1USWWDq13JBrHJl
- https://www.facebook.com/UNICEFinBhutan/posts/pfbid0rvZa8Cxr7hoTX12aHr0MuYTcTmuKwae82c5JKxWd11NyEy42H6osUsPQ75Z36NzqI
- https://www.facebook.com/UNICEFinBhutan/posts/pfbid0xzKz8zxtPpSULIXVz2497r56yxKk4BPWuK67yh6BckrSlyDquyp6tSUQA2L5k8L2Jl

Country – Maldives

Situation Overview and Humanitarian Needs

As of January 2, 2023, there have been a cumulative 185,702 confirmed cases of COVID-19 in the Maldives since the beginning of the pandemic, with 311 reported deaths. Of those cases, 87,650 were reported in 2022, with 47 associated deaths. The year began with approximately 200 recorded cases per day of COVID-19, which rapidly spiked to over 2,500 cases per day in late January. In March 2022, the COVID-19 public health emergency was lifted by the Government, due to the high number of double-dosed population and a low number of positive cases and to focus more on restarting the national economy, which was heavily impacted by the pandemic. Case numbers have dropped over the year, and as for December 2022, cases were recorded in the single digits. It was observed that the public was fatigued by the everyday messages around COVID-19, and the dire consequences associated with the pandemic including the mental well-being of people who lost jobs and learning of children that were affected. Vaccination rates remained high, with 70% of the target population being fully vaccinated by mid-2022, meeting the global target.

During the pandemic, teaching pedagogies have changed in the Maldives. Teachers are now actively using ICT in the classrooms and meaningfully integrating technology in their lessons. The experience has strengthened their confidence in integrating ICT tools, since students nowadays are more digitally inclined. The teachers now use quizzes and multimedia content to make the educational process entertaining.

Summary Analysis of Programme Response

Health

Together with the Health Protection Agency (HPA), UNICEF Maldives co-led the RCCE work in the Maldives in 2022. The support focused on building the technical capacity of partners to embed RCCE into the existing work structure so it can be activated in future health emergencies, while at the same time, ensuring that the public understands that RCCE is crucial during those emergencies to provide verified information on life-saving practices and basic services. Additionally, RCCE will allow AAP to be embedded into the existing systems in place.

A shift from instructional or cautionary messaging, which was primarily used in 2020 and 2021, to sharing experiences of how the pandemic has impacted people’s lives to focus on “living with COVID-19” occurred in 2022. Three videos were developed by UNICEF for the Health Protection Agency (HPA) that showcased the socioeconomic impacts people around the country faced during the pandemic.

With lowered uptake of COVID-19 booster doses in 2022, UNICEF Maldives supported the development of six videos for the HPA to encourage all eligible groups (including children between the ages of 11-18) to get vaccinated. The videos were designed to re-engage the public on methods of keeping safe from COVID-19 by taking appropriate steps following two incidences of spikes in COVID-19 cases in the capital city of Male’, which houses more than 40% of the country’s population. UNICEF Maldives also developed 7 videos to highlight the arrival and distribution of COVAX vaccines and supplies across the country to complement public engagement to boost trust in the safety of vaccines.

UNICEF has engaged the Maldives National University (MNU) to determine the impacts of COVID-19 on children and women in the Maldives through an academic study. This study will complement other national assessments done to understand the impacts. The results are expected in 2023.

**Nutrition**

UNICEF is supporting the rollout of Social and Behavioural Change Communication Strategy on first 1,000 days of life, with provision of remote technical support to caregivers with nutrition services in 12 pilot islands. A total of 1,549 parents and caregivers received Nutrition specific interventions, including infant and young child feeding counselling and breastfeeding counselling.

UNICEF continued to support the government in capacity-building programmes to improve the skills and knowledge of healthcare providers on maternal nutrition, breastfeeding and infant feeding. Through this, 45 nurses now have knowledge and skills to deliver information on antenatal care (ANC) in nutrition in the central area and 35 healthcare professionals from five sites within the periphery are equipped to deliver gestational diabetes information and counselling to pregnant women with improved knowledge on infant and young child feeding.

UNICEF supported the Ministry of Health to conduct field visits to six demonstration sites in two atolls and to conduct awareness sessions to improve parents and caregivers’ knowledge on maternal nutrition and Infant and young child feeding practices, reaching a total of 95 parents and caregivers, including mothers from six islands of two atolls.

UNICEF supported the Health Protection Agency to conduct advocacy sessions on the first 1,000 days of life to a total of 56 participants, including Women’s Development Committees (WDCs), schools, healthcare professionals and island councils in 6 islands. Furthermore, UNICEF supported advocacy sessions within the central level for 94 healthcare professionals.

**Child Protection**

UNICEF launched a positive parenting programme with the Government, with a focus on the challenges faced by parents and caregivers from COVID-19, including mental well-being, children’s learning and effective communication. The initial work on the programme includes conducting a KAP study on the prevailing parenting practices and to hire a firm to develop training modules for front-line workers including social workers and teachers for them to engage with parents and caregivers to strengthen parenting skills, especially to address the current-day challenges faced, including due to the impacts of COVID-19.

UNICEF supported the Ministry of Gender, Family and Social Services to incorporate into the training of IBAMA community social groups in island communities, how to conduct mapping of vulnerable families, ensure effective communication with the most vulnerable, understand their needs and learn how to conduct referrals to key Government authorities in the islands are done when support is required by families, especially before and during an emergency.

**Social Behaviour Change**

Based on the need to institutionalise RCCE into national systems, UNICEF Maldives leveraged the opportunity to loop in the National Disaster Management Authority (NDMA), which manages all emergencies in the country. The focus of the intervention was the capacity building of the Community Emergency Response Teams (CERTs), youth groups that were established in selected islands. This innovative concept in the Maldives envisions that the groups will engage with their peers to plan and respond to all emergencies in the island communities. By December 2022, UNICEF Maldives acquired the agreement from the NMDA to incorporate RCCE, Community Engagement for SBC (as a system to be used during all emergencies) and principles of AAP into the guidelines of the CERTs. Training of CERTs will be conducted in 2023 so that the new systems will be learned by the youth and applied accordingly. This will strengthen community-level actions for disaster risk reduction and emergency response, required to compliment central-level interventions (e.g., when the Health Protection Agency (HPA) issues guidance on life-saving behaviours during a health emergency, the CERTs will work with their communities to localise messages and engage people accordingly).
One of the key learnings from 2020 and 2021, COVID-19 response (RCCE) was that people with special needs (PWSNs) were not being appropriately engaged through established systems and platforms. In this regard, UNICEF Maldives engaged the Maldivian Red Crescent (MRC) on a project where people with special needs, such as people with disabilities, migrant workers, and the elderly, were provided life-saving information about COVID-19 and vaccination. The MRC disseminated IEC materials for the target audiences through platforms preferred by the audiences and CSOs who represented them and aired a radio drama series (five episodes). This engagement has paved the way to incorporate engagement of PWSNs into MRC’s work including emergency preparedness, supporting healthy aging for the elder and supporting youth in the NEET (Neither in Employment, Education nor Training) category.

Country – Sri Lanka

Situation Overview and Humanitarian Needs

Sri Lanka reported a cumulative total of 664,704 COVID-19 confirmed cases and 16,535 deaths as of 22 July 2022. From January to 22 July 2022, 77,459 COVID-19 cases were reported in the country with 1,556 deaths. Over 14.5 million people are fully vaccinated (2 doses of recommended vaccines), and 8 million people have received a booster dose of Pfizer vaccine. The Ministry of Health recommends a 4th dose (2nd booster dose) for everyone above 20 years and as of July, 13,959 people had received a 2nd booster dose.

Over the course of 2022, the economic situation in Sri Lanka became a more prominent issue affect children countrywide. Sri Lanka is facing its worst economic crisis since 1948 coupled with an energy crisis sparked by a shortage of hard currency, and this severely affected the health sector, with several major hospitals suspending routine surgeries since March 2022 due to dangerously low lifesaving medicine and equipment stocks. A sudden rise in the price of key commodities and fuel shortages forced tens of thousands of people to queue for hours outside petrol filling stations beginning in March 2022. Sri Lanka’s headline inflation increased to 69.8 per cent in September 2022 from 45.3 per cent in May. Commodities such as food and fuel were either unavailable or exorbitantly priced, and many staples are beyond the reach of many ordinary Sri Lankans.

Sri Lanka’s children are heavily impacted by this crisis. Malnutrition rates have grown significantly, with 15.3% of children being underweight, an increase from 12.2% in 2021. As families struggle to find enough food, public transportation has been cut and children are unable to go to school. Due to a shortage of paper for printing, the Ministry of Education has postponed school examinations. These barriers to accessing schools, learning and the other services they provide is making children increasingly vulnerable to being pushed into child labour and other risks to child protection. Given the deteriorating humanitarian situation, the United Nations Country Team launched a Humanitarian Needs and Priorities Plan (HNP) to support the response to the economic crisis, while UNICEF launched a Humanitarian Action for Children Appeal in June 2022 to support the UNICEF response. More details on the UNICEF Sri Lanka achievements under the HAC can be found in the Sri Lanka Annual SitRep for 2022.

Summary Analysis of Programme Response

Health

- UNICEF supported the strengthening of the COVID-19 vaccination programme through upgrading the website of the Epidemiology Unit, strengthening the Cold Chain Equipment (CCE) system, the vaccine waste management system and supporting infection prevention and control through provision of personal protective equipment (PPE) for 11,500 health staff.
- UNICEF and MoH are preparing and planning to establish 3 oxygen plants (Plant-in-a-box) to strengthen the oxygen production system in the country. The Government of Sri Lanka has plans to establish 10 new oxygen plants at 10 dispersed locations in the country and this support would benefit the population in Western and Southern Province which cater to a population of 7.6 million people, out of which three plants will be directly supported by UNICEF.

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15 This section focuses on results from 1 January-30 June 2022 as Sri Lanka transitioned to a standalone HAC appeal for the economic crisis beginning in July 2022.
Nutrition

- There was an acute shortage of therapeutic food BP 100 to treat under 5 children with SAM. Also, the multiple micronutrients given for infant and young children to prevent micronutrient deficiencies has been out of stock for many months. In responding to the emerging economic crisis, UNICEF immediately procured 630 cartons of BP-100 ready to use therapeutic food in quarter 2 to treat 630 children under 5 years with SAM identified from the field clinics and referred to the specialist hospital for management. This stock would be used to pre-position the depleting stocks of BP 100 previously procured by the Ministry of Health.

- UNICEF continued its support to the Family Health Bureau (FHB) in converting the standard capacity building programme for Infant and Young Child Feeding (IYCF) and growth monitoring to an online module from 2021, when work on the Tamil IYCF online training package was initiated. It benefited approximately 1,500 health care workers in maternal and child health who use Tamil as their first language. In addition, UNICEF commenced printing and distributing of child health development records which includes IYCF key messages to new parents benefiting 158,800 new mothers and fathers.

- UNICEF, WHO and WFP jointly supported the Medical Research Institute of the MoH to conduct a national nutrition and a micronutrient survey to study the prevalence of key micronutrient deficiencies, to assess the coverage of key nutrition interventions and household food insecurity. The data collection was delayed due to severe fuel crisis in the country. The preliminary findings have been presented to the steering committee and feedback incorporated. Additional analysis of sample is ongoing. As a result, the dissemination of the report is anticipated later in February 2023.

Child Protection

- Around 326 community members including children were reached with psychosocial and referral supports for the COVID-19 crisis through already established divisional Mental Health and Psychosocial forums and community support networks in Northern, Eastern, Uva and Central provinces.

- As part of UNICEF continuous advocacy and technical support, around 86 children were reunified with their families from institutions and social service workforce system was strengthened at community level to regularly monitor the progress of already reunified children.

- 152 children in Childcare institutions were trained on skill development training programs which helped to build their resilient skills and coping capacity in response to COVID-19.

Education

- The implementation of the UNICEF-supported learning continuity and learning recovery strategy for primary grades was led by the provincial education authorities at the beginning of 2022 when schools were open. This intervention particularly targeted marginalized children, reaching 834,733 primary children (50 per cent girls). Building on UNICEF’s experience in applying a blended approach (online/offline) in three provinces, this support includes learning assessments, an adjusted curriculum, formative assessments, and individualized teaching with the engagement of parents. Further, this also includes supporting teachers through quality circles.

- To-date, UNICEF through the Ministry of education has organized five Training of Trainers (ToTs) on psychosocial support through schools/teachers (250 master trainers). Over 200,000 secondary students benefitted from the Northern and Eastern provinces to date, where the actual teacher trainings were conducted using both on-line and physical modes. Since schools have remained closed with ad-hoc reopening schedules, the teacher trainings in other provinces have not yet been conducted.

- UNICEF continued to support the provincial education authorities in monitoring student attendance following the school reopening in January. With the evolving nature of the current crises where schools open and close intermittently since April, UNICEF continues to monitor the realities on the ground to help timely advocacy, prioritization, and response

WASH

- UNICEF provided improved hygiene facilities and essential WASH supplies to 1,500 schools in all nine provinces in the country, enabling over 450,000 school children (229,500 girls and 220,500 boys) to resume their education in the new year. Primary schools from the most vulnerable areas were selected for this support in maintaining and operating WASH facilities (cleaning, disinfection etc.), improve hygiene and reinforce hygiene messages among students.

- UNICEF supported the training of 303 master trainers from health staff (medical doctors, Matrons, Sisters, Infection Control Nursing Officers, Nursing Officers, Medical Officers of Health, Supervising Public Health Inspectors and Public Health Nursing Sisters and Public Health Inspectors) of 12 health care facilities covering curative and preventive health care services on healthcare waste management. Post and pre-evaluations were done to assess the improvement of the knowledge after the training.
Two national level consultation workshops were conducted by UNICEF and MoH to design WASH assessments in health care facilities and health staff was trained on using WASH FIT (Water and Sanitation for Health Facility Improvement Tool) developed by WHO/UNICEF to conduct WASH assessments in health care facilities.

In addition, UNICEF together with the Ministry of Health finalized the planning, assessment tools, questionnaire (including the ethical clearance) and necessary training to conduct the national survey on the management of healthcare waste generated during the COVID-19 pandemic in Sri Lanka. The technical working group consisted of experts in the field of Community Medicine, Medical administration, Nursing, Medicine, Microbiology and Public Health.

Social Protection

UNICEF through WFP and the Department of Samurdhi supported 637 families with children under 5 in Kalutara district through cash transfers for 2 months from January to June 2022, to ensure food security amidst COVID-19 and economic crisis. UNICEF completed the 6th round of telephone surveys in April 2022 and the 7th round of telephone surveys in November 2022 on the impact of COVID-19 on households. Most households did not find COVID-19 as a major concern, and instead cited the economic crisis as the cause of loss of livelihoods and inability to meet basic household needs.

UNICEF finalised a public expenditure review on social protection and a documentation of the GoSL’s COVID-19 response. Both these papers provided critical evidence that supported the development of new responses to the economic crisis and stronger social protection programmes.

Cross-sectoral (HCT, C4D, RCCE and AAP)

A Knowledge, Attitude and Practices (KAP) survey was conducted focusing on booster vaccine to gain insights into eagerness and hesitancy. Based on the results, a mass communication campaign to promote the uptake of the COVID-19 booster vaccine was carried out through TV, Radio and print media reaching a nation-wide audience of over 15 million people.

UNICEF conducted national level Training of Trainers (ToTs) programmes and subsequent local level trainings on adapting COVID-19 precautionary measures during the waste collection by engaging 3,108 urban local authority health staff, waste collection supervisors, waste collectors etc. who were identified as some of the most vulnerable groups in terms of susceptibility to the disease and low-adherence to COVID-19 protective practices. UNICEF developed a new calendar to promote COVID-19 protective practices and adaptation to the new "normal," targeting Medical Officers of Health (MOH) clinics, urban local authorities and high-risk health staff.

Targeting the people living in plantation estates, UNICEF trained 210 Plantation Communication Community Facilitators and Community Empowerment Officers and oriented 61 Estate Managers to promote COVID-19 protective practices, to monitor the adherence to the IPC measures and to mobilize communities. Around 500,000 most vulnerable people living in plantation sector were reached through the Risk Communication messages disseminated through public address systems to promote protective practices, increase booster dose uptake and update on the new variants of COVID-19.

UNICEF strengthened the IT infrastructure facilities of the Estate and Urban Health Unit of Ministry of Health to facilitate their COVID-19 interventions targeting estate (plantation) and urban communities, who are considered as some of the most vulnerable communities to COVID-19 infection.

UNICEF amplified the voices of young people through U-Report Sri Lanka by conducting polls on areas that matter to them including the Experiences and feelings of young people during the post-covid recovery & subsequent socio-economic crisis; Availability and Affordability of Food Supplies; and Disaster & Climate Change. Over 7,800 U-Reporters engaged with the polls and shared their voices, while the related communication assets and information reached more than 5.6 million young people on social media.

Next SitRep: 30 April 2023

Who to contact for further information:

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20 [https://www.unicef.org/srilanka/media/3146/file/Summery.pdf](https://www.unicef.org/srilanka/media/3146/file/Summery.pdf)

21 For COVID-19 related queries
### Bhutan

#### Summary of Programme Results by Country

<table>
<thead>
<tr>
<th>Sector</th>
<th>Indicator</th>
<th>Disaggregation</th>
<th>Total needs</th>
<th>UNICEF and IPs Response</th>
<th>Cluster/Sector Response</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td></td>
<td>2022 target</td>
<td>Total results</td>
<td>Change ▲▼</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td>2022 target</td>
<td>Total results</td>
<td>Change ▲▼</td>
</tr>
</tbody>
</table>

##### Health

- **# of children aged 0 to 11 months vaccinated against diphtheria, tetanus and pertussis (DTP3)**
  - Total needs: 10,300
  - Total results: 5,065
  - Change ▲▼: 0

- **# of pregnant women provided with antenatal consultations**
  - Total needs: 9,000
  - Total results: 5,146
  - Change ▲▼: 0

##### Nutrition

- **# of children aged 6 to 23 months receiving multiple micronutrient powders**
  - Total needs: 15,000
  - Total results: 8,687
  - Change ▲▼: 0

##### Child Protection

- **# of children and caregivers accessing mental health and psychosocial support**
  - Girls: 2,681
  - Boys: 2,384
  - Total: 5,065

- **# of girls and women accessing safe spaces services**
  - Female: 3,297
  - Other: 2,734
  - Total: 6,031

- **# of CP and GBV social workers and frontline workers trained on case management, early identification, and safe referrals of high-risk cases**
  - Female: 208
  - Male: 66
  - Total: 274

##### Education

- **# of children accessing formal or non-formal education, including early learning**
  - Total needs: 178,986
  - Total results: 162,536
  - Change ▲▼: -88,313

##### WASH

- **# of children accessing appropriate WASH facilities and hygiene services in learning facilities and safe spaces**
  - Girls: 12,789
  - Boys: 12,093
  - Total: 24,882

##### Cross-sectoral (HCT, C4D, RCCE and AAP)

- **# of people reached through messaging on prevention and access to services**
  - Total needs: 300,000
  - Total results: 500,000

---

22 Result is lower than mid-year report due to new numbers received from the EMIS and statistical yearbook
<table>
<thead>
<tr>
<th>Sector</th>
<th>Disaggregation</th>
<th>Total needs</th>
<th>2022 target</th>
<th>Total results</th>
<th>Change ▲▼</th>
<th>2022 target</th>
<th>Total results</th>
<th>Change ▲▼</th>
</tr>
</thead>
<tbody>
<tr>
<td>Health</td>
<td># of children and women accessing primary healthcare in UNICEF-supported facilities</td>
<td></td>
<td></td>
<td></td>
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<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td># of children aged 0 to 11 months vaccinated against diphtheria, tetanus and pertussis (DTP3)</td>
<td></td>
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<tr>
<td></td>
<td># of pregnant women provided with antenatal consultations</td>
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</tr>
<tr>
<td></td>
<td># of health workers have access to personal protective equipment to prevent the COVID-19 transmission</td>
<td></td>
<td></td>
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</tr>
<tr>
<td></td>
<td># of young children will benefit from strengthened immunization and cold chain systems through continuation of routine vaccination</td>
<td></td>
<td></td>
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<td></td>
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</tr>
<tr>
<td>Nutrition</td>
<td># of primary caregivers of children aged 0 to 23 months receiving IYCF counselling</td>
<td></td>
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<td></td>
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<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td># of children accessing mental health and psychosocial support</td>
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<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td># of people with access to safe channels to report sexual exploitation and abuse by aid workers</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td># of community social groups at island level are supporting community-based child protection services</td>
<td></td>
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<td></td>
</tr>
<tr>
<td>Child Protection</td>
<td># of children accessing formal or non-formal education, including early learning</td>
<td></td>
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<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Education</td>
<td># of primary caregivers of children aged 0 to 23 months receiving IYCF counselling</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td># of people reached with critical WASH supplies (including hygiene items)</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
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</tr>
<tr>
<td></td>
<td># of schools reached with critical supplies for infection prevention and control.</td>
<td></td>
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<td></td>
</tr>
<tr>
<td>WASH</td>
<td># of people reached through messaging on prevention and access to services</td>
<td></td>
<td></td>
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<td></td>
</tr>
</tbody>
</table>

23 Achievement was mistakenly reported in this indicator during the mid-year SitRep. No achievement was recorded in 2022.

24 The result on this indicator reflects the page reach of the UNICEF Maldives Facebook page.
<table>
<thead>
<tr>
<th>Sector</th>
<th>Indicator</th>
<th>UNICEF and IPs Response</th>
<th>Cluster/Sector Response</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td>Total needs</td>
<td>Change ▲▼</td>
</tr>
<tr>
<td></td>
<td></td>
<td>2022 target</td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td>Total results</td>
<td>Change ▲▼</td>
</tr>
<tr>
<td>Health</td>
<td># healthcare facility staff and community health workers provided with PPE, including essential medical equipment</td>
<td>7,500</td>
<td>0</td>
</tr>
<tr>
<td></td>
<td>and WASH supplies</td>
<td>11,500</td>
<td>0</td>
</tr>
<tr>
<td></td>
<td># mothers, children &amp; people with confirmed/ suspected COVID-19 have timely access to essential health services</td>
<td>450,000</td>
<td>0</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Nutrition</td>
<td># of children aged 6 to 23 months receiving multiple micronutrient powders</td>
<td>girls 439,263</td>
<td>0</td>
</tr>
<tr>
<td></td>
<td></td>
<td>boys 422,037</td>
<td>0</td>
</tr>
<tr>
<td></td>
<td># primary caregivers of children 0-23 months receiving IYCF counselling</td>
<td>510,400</td>
<td>0</td>
</tr>
<tr>
<td></td>
<td># of children with SAM have access to treatment with BP-100</td>
<td>25,600</td>
<td>630</td>
</tr>
<tr>
<td>Child Protection</td>
<td># children, parents and primary caregivers provided with community-based mental health and psychosocial support</td>
<td>girls 511,993</td>
<td>0</td>
</tr>
<tr>
<td></td>
<td></td>
<td>boys 492,307</td>
<td>0</td>
</tr>
<tr>
<td></td>
<td></td>
<td>women 10,000</td>
<td>0</td>
</tr>
<tr>
<td></td>
<td># of women, girls and boys accessing gender-based violence risk mitigation, prevention and/or response interventions</td>
<td>girls 7,000</td>
<td>81</td>
</tr>
<tr>
<td></td>
<td></td>
<td>boys 5,000</td>
<td>102</td>
</tr>
<tr>
<td></td>
<td># of unaccompanied and separated children reunified with their primary caregiver or provided with family-based</td>
<td>500</td>
<td>86</td>
</tr>
<tr>
<td></td>
<td>care/alternative case services</td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td># of people with access to safe channels to report sexual exploitation and abuse by aid workers</td>
<td>3,000</td>
<td>0</td>
</tr>
<tr>
<td>Education</td>
<td># of children accessing formal or non-formal education, including early learning</td>
<td>girls 331,500</td>
<td>425,713</td>
</tr>
<tr>
<td></td>
<td></td>
<td>boys 318,500</td>
<td>409,020</td>
</tr>
<tr>
<td></td>
<td># children receiving individual learning material</td>
<td>girls 331,500</td>
<td>1,343</td>
</tr>
<tr>
<td></td>
<td></td>
<td>boys 318,500</td>
<td>1,290</td>
</tr>
<tr>
<td>WASH</td>
<td># girls and women accessing menstrual hygiene management services</td>
<td>2,500</td>
<td>3,800</td>
</tr>
<tr>
<td></td>
<td># children accessing appropriate WASH facilities</td>
<td>girls 153,000</td>
<td>229,500</td>
</tr>
</tbody>
</table>
and hygiene services in learning facilities and safe spaces | boys | 147,000 | 220,500 | 0 | 819,452 | 220,500 | 0

# people reached with hand-washing behaviour-change programmes | | 10,000 | 450,000<sup>26</sup> | 450,000 | 10,000 | 450,000 | 400,000

# people reached with critical WASH supplies (including hygiene items) and services | | 144,050 | 0 | 0 | 0 | 0 | 0

**Social Protection**

# households benefit from new or additional social transfers from the GoSL with UNICEF’s technical assistance support | HHs | 1,800,000 | 637<sup>28</sup> | 0 | 0 | 0 | 0

**Cross-sectoral (HCT, C4D, RCCE and AAP)**

# of people reached through messaging on prevention and access to services | | 5,000,000 | 6,084,140 | 0 | 0 | 0 | 0

# of people engaged in RCCE actions | | 25,000 | 11,179 | 0 | 0 | 0 | 0

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26 These are the same children reached under **# of children accessing appropriate WASH facilities and hygiene services in learning facilities and safe spaces** indicator

27 The overachievement on this indicator is due to additional funding for WASH being received from ACT-A HAC and GAVI, which allowed handwashing awareness activities to be conducted with all children receiving WASH supplies and improved facilities.

28 This indicator was revised and transferred over to the standalone Sri Lanka HAC, where 121,796 households were targeted. Significant funding received at the end of 2022 will be used to reach households with social transfers in 2023.
Annex B

Funding Status by Country

### Bhutan

<table>
<thead>
<tr>
<th>Sector</th>
<th>Requirements</th>
<th>Funds available</th>
<th>Funding gap</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td>Humanitarian resources received in 2022</td>
<td>Resources available from 2021 (Carry-over)</td>
</tr>
<tr>
<td>Health</td>
<td>700,000</td>
<td>510,000</td>
<td>386,603</td>
</tr>
<tr>
<td>Nutrition</td>
<td>290,000</td>
<td>0</td>
<td>0</td>
</tr>
<tr>
<td>Child Protection</td>
<td>460,000</td>
<td>0</td>
<td>1,381</td>
</tr>
<tr>
<td>Education</td>
<td>550,000</td>
<td>0</td>
<td>0</td>
</tr>
<tr>
<td>WASH</td>
<td>300,000</td>
<td>0</td>
<td>0</td>
</tr>
<tr>
<td>Cross-Sectoral (HCT, SBC, RCCE and AAP)</td>
<td>300,000</td>
<td>600,000</td>
<td>10,574</td>
</tr>
<tr>
<td><strong>Total</strong></td>
<td><strong>2,600,000</strong></td>
<td><strong>1,110,000</strong></td>
<td><strong>398,558</strong></td>
</tr>
</tbody>
</table>

### Maldives

<table>
<thead>
<tr>
<th>Sector</th>
<th>Requirements</th>
<th>Funds available</th>
<th>Funding gap</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td>Humanitarian resources received in 2022</td>
<td>Other resources used in 2022</td>
</tr>
<tr>
<td>Health</td>
<td>700,000</td>
<td>0</td>
<td>150,000</td>
</tr>
<tr>
<td>Nutrition</td>
<td>150,000</td>
<td>0</td>
<td>0</td>
</tr>
<tr>
<td>Child Protection</td>
<td>350,000</td>
<td>0</td>
<td>0</td>
</tr>
<tr>
<td>Education</td>
<td>800,000</td>
<td>0</td>
<td>0</td>
</tr>
<tr>
<td>WASH</td>
<td>200,000</td>
<td>0</td>
<td>0</td>
</tr>
<tr>
<td>Cross-sectoral (HCT, C4D, RCCE, AAP)</td>
<td>70,000</td>
<td>0</td>
<td>50,000</td>
</tr>
<tr>
<td><strong>Total</strong></td>
<td><strong>2,170,000</strong></td>
<td><strong>0</strong></td>
<td><strong>200,000</strong></td>
</tr>
</tbody>
</table>

### Sri Lanka

<table>
<thead>
<tr>
<th>Sector</th>
<th>Requirements</th>
<th>Funds available</th>
<th>Funding gap</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td>Humanitarian resources received in 2022</td>
<td>Resources available from 2021 (Carry-over)</td>
</tr>
<tr>
<td>Health</td>
<td>1,000,000</td>
<td>286,789</td>
<td>800,755</td>
</tr>
<tr>
<td>Nutrition</td>
<td>2,000,000</td>
<td>0</td>
<td>180,000</td>
</tr>
<tr>
<td>Child Protection</td>
<td>500,000</td>
<td>0</td>
<td>129,067</td>
</tr>
<tr>
<td>Education</td>
<td>550,000</td>
<td>0</td>
<td>55,922</td>
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<tr>
<td>WASH</td>
<td>300,000</td>
<td>0</td>
<td>0</td>
</tr>
<tr>
<td>Social Protection</td>
<td>300,000</td>
<td>0</td>
<td>3,287</td>
</tr>
<tr>
<td>Cross-sectoral (HCT, C4D, RCCE, AAP)</td>
<td>275,000</td>
<td>0</td>
<td>26,650</td>
</tr>
<tr>
<td><strong>Total</strong></td>
<td><strong>4,925,000</strong></td>
<td><strong>286,789</strong></td>
<td><strong>1,195,681</strong></td>
</tr>
</tbody>
</table>

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29 Funding includes ACT-A funds

30 $100,000 COVAX funding and $50,000 funding from ORR