Since initiating the response to the coronavirus disease 2019 (COVID-19) pandemic in early 2020, UNICEF and partners have assisted 153 countries and territories with critical supplies and financial/technical support; and reached 261 million children with vital health, nutrition, education, child protection, water, sanitation and hygiene (WASH), gender-based violence and social protection services.

To address the socio-economic impacts of COVID-19 mitigation measures, UNICEF has supported adaptations to service delivery systems to limit interruptions, support continuity, facilitate reopening and enable equitable access.

In 2020, 3.3 million health workers were trained on infection prevention and control; 1.8 million health workers benefited from personal protective equipment; 73.7 million people received WASH supplies; and 93 countries received 15,000 oxygen concentrators – innovative devices that help people with COVID-19 breathe.

Risk communication and community engagement interventions implemented through community influencers, traditional/religious leaders, community groups, youth groups, health workers and local organizations have reached 3 billion people.

Global COVID-19 chapeau

HIGHLIGHTS

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This map does not reflect a position by UNICEF on the legal status of any country or territory or the delimitation of any frontiers. The countries in light blue are embedded in the regional appeals. The countries in dark blue have corresponding standalone appeals or are covered under crisis appeals.
HUMANITARIAN SITUATION AND NEEDS

The COVID-19 pandemic has triggered an unprecedented global health, humanitarian, socio-economic and human rights crisis, exacerbating the vulnerabilities of affected children. Since the outbreak began, COVID-19 has spread to over 215 countries and territories.

The response to COVID-19 has overwhelmed health system capacities and forced health systems to adapt and identify ways of safely continuing some essential services and discontinuing others. Mitigation measures designed to reduce virus transmission have reduced access to wider social services and undermined the delivery of life-saving programmes.

The interruption of services such as institutional deliveries and caesareans, antenatal and postnatal care, immunization, HIV treatment, severe diarrhoeal disease, acute malnutrition and pneumonia will lead to increased child morbidity and mortality in the medium to long term. Adequate WASH services are essential to infection prevention and control. However, across the world, 3 in 10 people, or 2.1 billion people, lack access to safe water at home, and 6 in 10 people, or 4.5 billion people, lack access to safely managed sanitation.

Public health measures, such as physical distancing and confinement, which were established to reduce the transmission of COVID-19, are also heightening protection risks and vulnerabilities for already at-risk groups, including children, women and crisis-affected families. Households with limited resources are bearing the full brunt of these measures and the resulting stressors and socio-economic impacts, including intimate partner violence, gender-based violence, civil unrest, child labour and child marriage. These measures and their impacts may also increase children’s vulnerability to recruitment and use by armed forces or groups and sexual exploitation and abuse. Women and girls are especially vulnerable to the impacts of the COVID-19 response due to the additional care burden they bear for their families and the risk of sexual violence as they struggle to meet their daily needs in the context of lock downs and curfews.

STORY FROM THE FIELD

When government officials came to town to talk about COVID-19 best practices, nine-year-old Taofeek had some tough questions to ask. By the time they left, he had discovered he could be part of the solution. Like millions of other children in Nigeria, Taofeek, who lives in Ipakodo community in Ikorodu west local council development area of Lagos State, has seen his life upended by COVID-19-related school closures. And in his community, he has no access to Internet-enabled devices to benefit from the online classes.

To raise awareness about COVID-19 and promote hygiene behaviours that protect against infection, UNICEF has supported the Lagos State Government through motorized campaigns in 20 local government areas. The campaigns worked alongside advocacy with influencers in the communities, interpersonal engagement, and mass awareness activities at major human interface locations such as markets and motor parks.

Aderonke Akinola-Akinwole, UNICEF Nigeria Communication for Development Consultant, stands with Taofeek and his friend as they help raise awareness on how to curb the spread of COVID-19.
HUMANITARIAN STRATEGY

UNICEF’s response to COVID-19 is carried out under the leadership of national governments and in close coordination with the World Health Organization (WHO), humanitarian country teams, United Nations country teams and civil society partners. With its dual humanitarian and development child rights mandate, and existing presence at the field, country and regional levels, UNICEF has a strong comparative advantage for addressing the scale and complexity of COVID-19-related needs globally.

At the country level, UNICEF will protect children and their families from exposure to the virus, minimize mortality and address the effects of COVID-19 mitigation measures. This includes providing accurate life-saving information on COVID-19 through risk communication and community engagement; improving infection prevention and control at health, education and communal facilities; promoting hygiene; and providing essential WASH services and supplies. The response also focuses on strengthening and preparing health care systems for the next wave of COVID-19 cases.

In its response to the socio-economic impacts of COVID-19 mitigation measures, UNICEF will prioritize the most vulnerable children and adolescents, including those living in low-income settings, children living with disabilities, migrant and refugee children and children of ethnic minorities. Key activities include supporting the continuity of essential health services and vaccinations; providing life-saving nutrition interventions; ensuring learning continuity through safe school operations or remote learning; strengthening child protection, mental health and gender-based violence services to better protect children and women; and expanding social protection systems and emergency safety nets, including cash-based programmes.

The majority of UNICEF’s interventions will involve the redesign, reallocation and reimagining of regular programmes based on high-quality evaluative evidence, including real-time data.

UNICEF’s COVID-19 strategy is guided by the Core Commitments for Children in Humanitarian Action but goes beyond humanitarian action. In addition to addressing immediate humanitarian needs, UNICEF will strengthen systems and build technical capacities across all sectors and expand its field presence for decentralized operations. UNICEF interventions are also conflict sensitive and foster inclusion, trust and social cohesion.

UNICEF is supporting the Access to COVID-19 tools-Accelerator (ACT-A), a global collaboration to accelerate the development, production and equitable access to COVID-19 tests, treatments and vaccines. ACT-A has three pillars: vaccines, diagnostics and therapeutics and a cross-cutting health systems connector. UNICEF is playing a key strategic role and is actively engaged across all the pillars and the connector by co-leading several working groups and as the official procurement agency and procurement coordinator for the COVAX Facility – the vaccine pillar.

FUNDING REQUIREMENTS IN 2021

UNICEF’s 2021 Humanitarian Action for Children appeal covers funding requirements related to immediate humanitarian needs, including those linked to COVID-19, and does not include long-term development programming. UNICEF’s public health and socio-economic COVID-19 response, including programme targets and funding requirements, is integrated into the standalone country, multi-country and regional Humanitarian Action for Children appeals. While UNICEF fully supports global resource mobilization efforts for ACT-A financing mechanisms, notably the COVAX facility, UNICEF has identified a number of unfunded or significantly underfunded needs that are critical to preparing and enabling countries to deliver vaccines, therapeutics and diagnostic tools in 2021. UNICEF is therefore directly appealing for US$659 million at the global level to support the three pillars of ACT-A, including COVAX, and the health systems connector. In responding to COVID-19, UNICEF remains committed to establishing effective linkages between humanitarian action and development programming, contributing to peacebuilding, and supporting countries to strengthen capacities and systems. UNICEF will perform a critical enabling role for countries to deploy new vaccines, therapeutics and diagnostics for COVID-19 in 2021.