



PAKISTAN

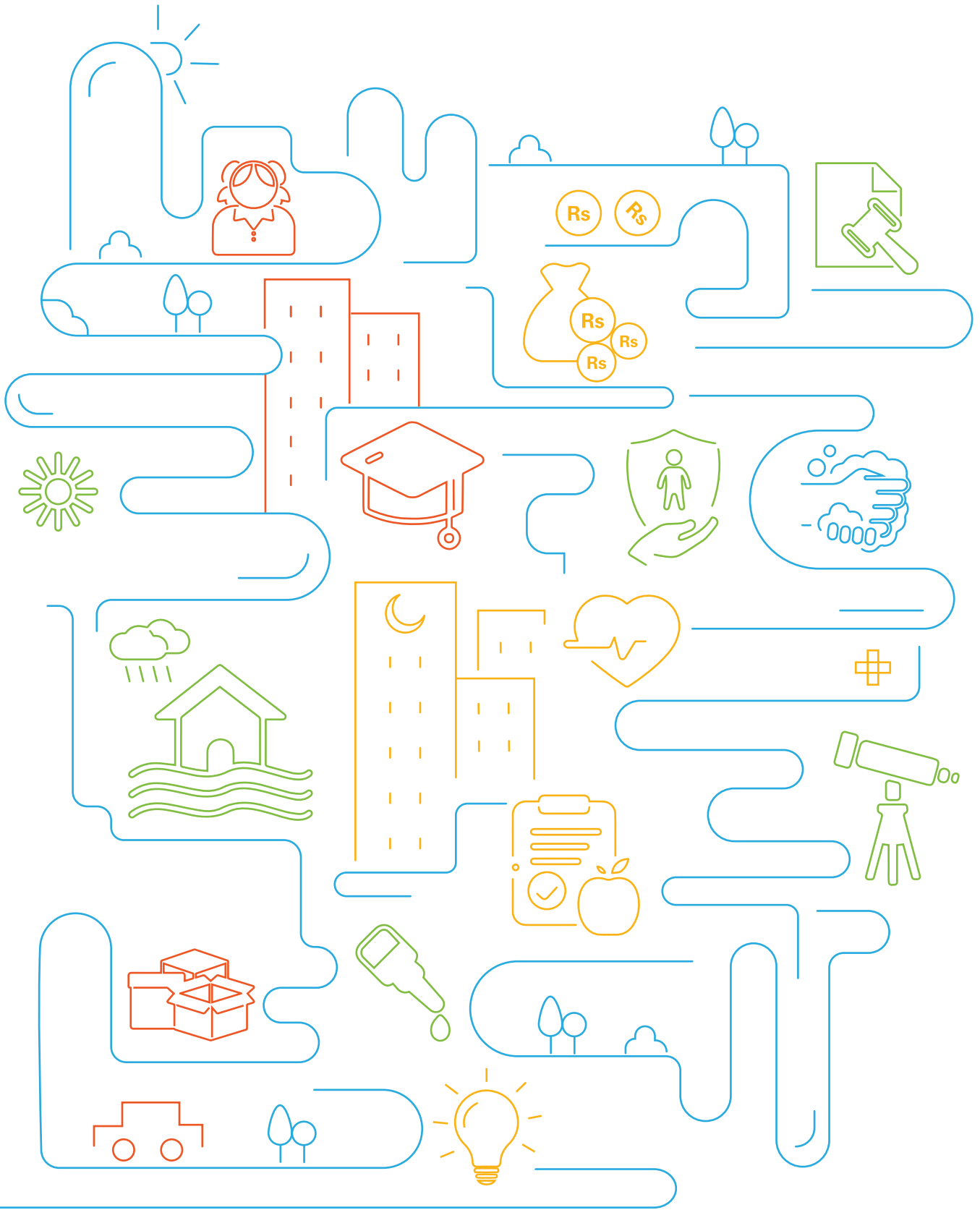
ANNUAL
REPORT
2020



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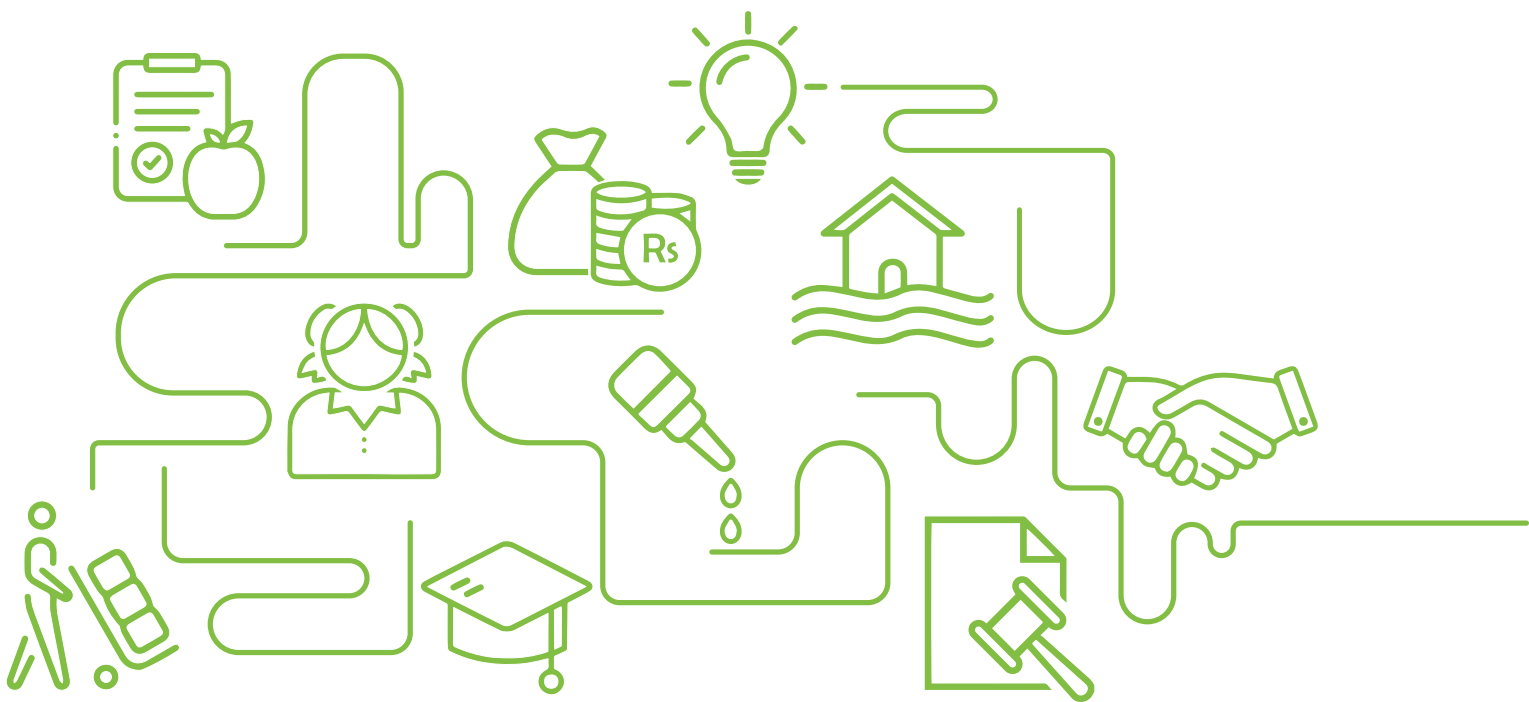
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2020

Pakistan



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FOREWORD

For much of humanity, 2020 was a year unlike any other. As the novel coronavirus (COVID-19) swept around the world, schools and borders closed and aeroplanes stopped flying. Human contact, our most elemental need for togetherness, became suspect as the infection jumped from hand to hand and breath to breath.

Many of our family members, colleagues and friends have been personally affected by COVID-19. Some have died. On behalf of all UNICEF Pakistan staff, I take this opportunity to extend our sincerest condolences to those affected by this tragic illness.

The pandemic response necessitated a change in how we worked. At the most simplistic level, it entailed working from home for all but essential staff, and resorting to video conferencing and email instead of face-to-face interaction. More fundamentally, however, COVID-19 required us to refocus our programming. In addition to building on the progress made during this country programme, our staff worked closely with counterparts in government, civil society and the donor community to maintain essential services, while ensuring that service providers and users alike could protect themselves from infection. We drew on UNICEF's global pool of expertise, procured essential supplies including PPE, and developed innovative communication tools to dispel rumours and educate the public about COVID-19.



Aida Girma,
UNICEF Country Representative

Coincidentally, 2020 was also the midpoint of UNICEF's current country programme, which offered us an invaluable opportunity for reflection. The office conducted a major midterm review of the country programme and assessed progress made and challenges faced. Together, we reflected on our results framework and the best ways to accelerate results for children. Finally, we considered how COVID-19 has changed our priorities and the context in which we operate in Pakistan.

We concluded that, in fact, the pandemic has only strengthened our close partnerships with government and United Nations counterparts and other partners. We agreed that there were many valuable lessons to be learned from this unprecedented year, and innovations that could lay the foundation for the remainder of the country programme.

As 2021 dawns and countries begin to vaccinate their populations, we begin to see the first glimpses of a post-pandemic world. In this new world, UNICEF Pakistan staff join me in celebrating the partnerships that have carried us through the past year.

These partnerships, and our shared vision for Pakistan's children, will propel us to a future in which every child survives and thrives, in which polio is eradicated, where every child learns and flourishes in a safe and clean environment, and where every child is protected from all forms of harm.



The UNICEF Pakistan Country Programme (2018–2022) is aligned to:



Government
of Pakistan's
Vision 2025



UNICEF Global
Strategic Plan
(2018–2021)



Sustainable
Development
Goals



One-UN
Programme III



Highlights 2020



HIGHLIGHTS 2020



POLIO

- 302 million doses of **polio vaccine** procured by UNICEF
- Polio vaccine **refusals fell** from 0.47% in February to 0.33% in November 2020
- Half of **zero-dose children referred** through integrated service delivery received routine vaccinations



HEALTH

- Investment case developed for **universal health coverage**
- 399,299 newborns benefited from measures to improve **quality of care**
- 1.67 million children were **treated for pneumonia**
- 14.3 million people were reached by **health messaging** to seek services
- 24-hour **birth dose vaccination** rose in 2 Balochistan hospitals from 5% to over 95%



NUTRITION

- Five-year **federal and provincial nutrition project** developed with UNICEF support to reach 11 million children and 5 million women.
- 4.4 million children screened, 244,565 children with **severe acute malnutrition** treated, 88% recovered
- Information on **infant and young child feeding** reached 48.2 million social media users, 83 million radio/TV audiences, 1.3 million people in communities
- 27.3 million children protected through **vitamin A supplementation**
- 1 million children and 0.45 million mothers protected against **micronutrient deficiency** through multiple micronutrient supplements
- 14 million children and mothers received **COVID-safe nutrition services** from trained service providers



CHILD PROTECTION

- **CRVS legislation and bylaws** were drafted with UNICEF support
- 784,432 children (71% under five) completed **birth registration** in 2020
- Sindh, KP **child protection bills** were drafted with UNICEF support
- **Child Ombudsman** institutionalized within the Federal Ombudsman's office after decade-long UNICEF advocacy and technical support
- Minimum standards and a policy framework on **alternative care** developed in line with international standards with UNICEF support
- GB, Punjab **child labour survey** data collection completed
- **Child Protection Case Management and Referral System** operationalized in Balochistan and GB, with MHPSS mainstreamed for COVID-19 response

EDUCATION AND ADOLESCENT DEVELOPMENT



- Balochistan, KP developed **education sector plans** with UNICEF support
- 215,161 **out-of-school children** (54% girls) accessed pre-primary, formal and nonformal education
- 8 million students **sustained learning** during pandemic shutdowns through high-tech, low-tech and no-tech support
- 1.7 million education staff and school management committee members received **COVID-19 prevention** information via text messages
- 4.5 million **young people** received COVID-19 prevention messages

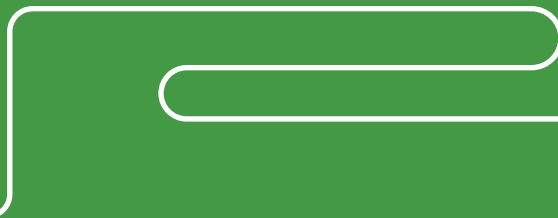


WASH

- 20 cities cleaned up to compete in the **Clean Green Pakistan Index**
- 1.1 million more people now live in **open-defecation-free environments**
- 1.4 million people now drink **safe water**
- Population of over 11.2 million protected through **WASH services and education** in 787 hospitals
- 9.5 million people availed hands-free **handwashing facilities**



PAKISTAN 2020





Pakistan in 2020

Of Pakistan's population of 212 million, nearly half – 45 per cent – are children under 18 years of age.¹ With an annual growth rate of 2.4 per cent, the population doubles every 29 years. This puts immense pressure on social services, exacerbated by Pakistan's rapid urbanization.

In recent years, economic turmoil has affected the wellbeing of Pakistan's children. The annual GDP growth rate increased from 5.6 per cent in 2016 to 5.8 per cent 2018, and then declined to 0.98 per cent in 2019.²

Consumer Price Index inflation rose to 12.6 per cent (2019) from 5.4 per cent in 2018.³ In 2015/2016, a quarter (24.3 per cent) of Pakistanis were below the poverty line,⁴ however many more are vulnerable to sudden shocks that could drive them into poverty. These may include personal shocks, such as a family health crisis, and broader trends in the national economy.

Nevertheless, since 2018, the Government of Pakistan has driven socioeconomic reforms especially in poverty alleviation, malnutrition, climate change and fiscal policy stabilization. Public Sector Development Programme budget allocations, which accounted for 8 per cent of GDP in 2018/19 have increasingly shifted towards pro-poor spending.

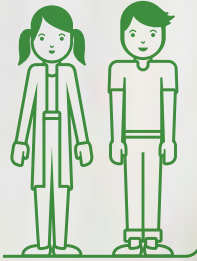
The first case of COVID-19 in Pakistan was reported on 26 February 2020. Ten months later, on the last day of 2020, Pakistan had 479,715 confirmed cases

of COVID-19, with 10,105 deaths. At this time, the country was in its second wave of the pandemic, with a case positivity rate exceeding 2 per cent and about 2,500 daily cases, after an initial decline to below 500 daily cases from August to October.

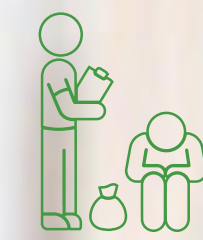
The pandemic had severe impacts on services for children across Pakistan, and may have long-lasting effects due to its ongoing economic impacts. A contraction due to the pandemic will leave many Pakistani children at risk, with more household food insecurity and greater vulnerability to exploitation. It is estimated that 126 million people are likely to be pushed into multidimensional poverty due to COVID-19.⁵

While the only major disaster Pakistan confronted in 2020 was its share of the broader COVID-19 crisis, smaller and long-running emergencies continued to affect children's wellbeing in different parts of the country. This reinforced the need for communities and government staff to build the resilience to withstand natural and human-made disasters.

In Sindh and Khyber Pakhtunkhwa (KP) provinces, monsoon floods affected 2.5 million people. About 16,780 families remain displaced from KP's Merged Districts (KPMD), while in Punjab severe air pollution persisted through the winter. Early rainfall in 2020 provided relief to drought-affected areas of Sindh and Balochistan, however locust infestations increased food insecurity countrywide.



45
per cent
of Pakistanis are
children

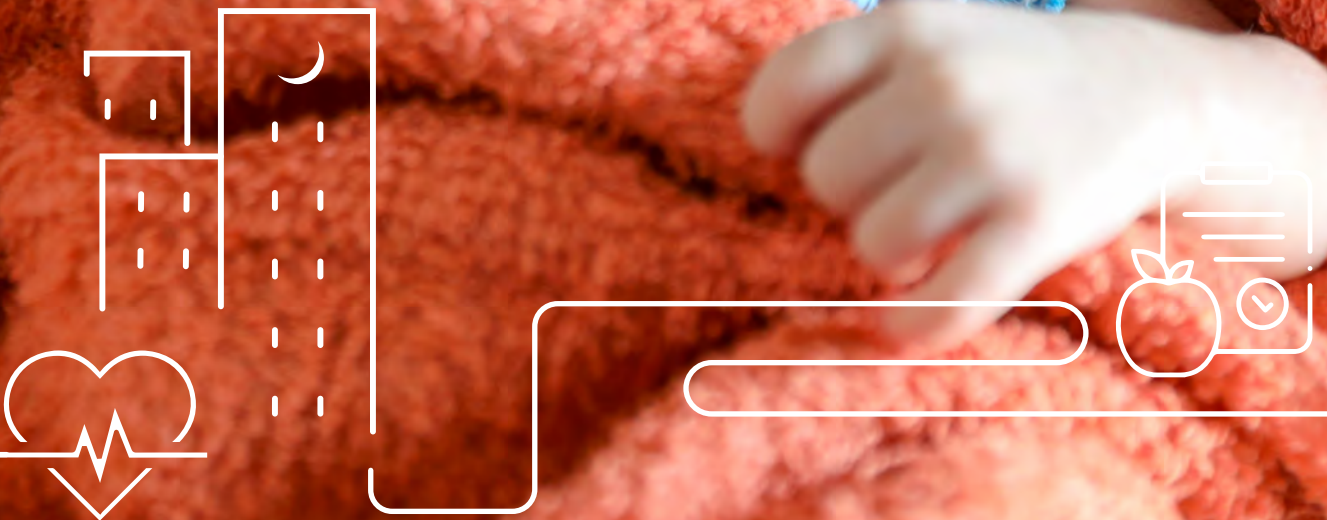


126
million
people expected
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multidimensional
poverty due to
COVID-19





HEALTH





Health

Out of every 1,000 babies born in Pakistan, 42 die before completing the first month of life, and 74 will not live to see their fifth birthday.⁶

For every 100,000 children born alive in Pakistan, 178 mothers die of causes related to childbirth.⁷ However this shows an improving trend in maternal health, with better antenatal care for mothers during pregnancy, and an increase in the proportion of deliveries that are conducted by skilled birth attendants.

Vaccinations give children lifesaving protection against potentially deadly diseases such as diphtheria. Recent health surveys suggest that on average only 75.4 per cent of children receive a full course of the Penta-3 vaccine.⁸

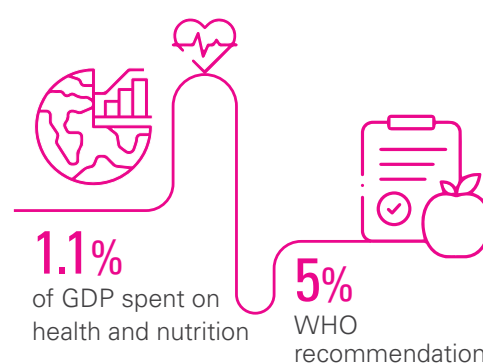
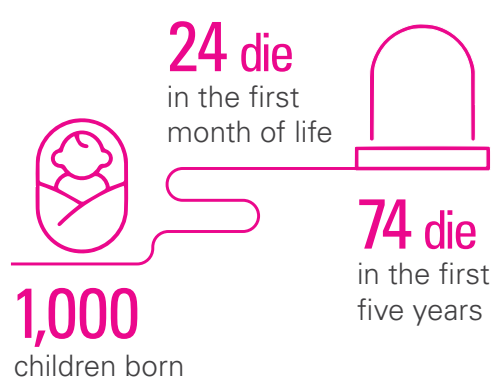
These nation-wide figures disguise severe inequities in the health of children and mothers, with variations by province, rural or urban location, and by socioeconomic status.

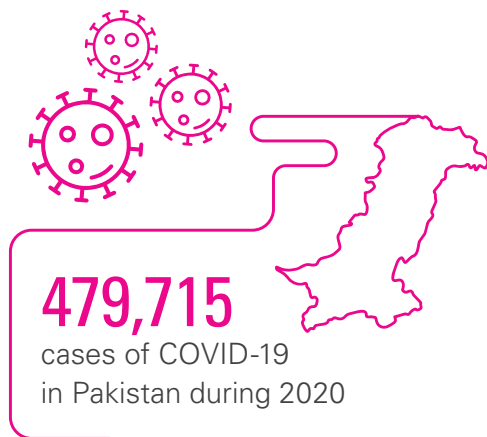
The COVID-19 pandemic severely affected children's access to lifesaving health services.

At the peak of the pandemic, restrictions on movement and services led to decreases of 30 per cent in family planning services, 19 per cent in skilled attendance at birth, 10 per cent in newborn care and 26 per cent in vaccination coverage.⁹

As the year progressed, however, administrative data in 2020 shows that 83 per cent coverage was eventually achieved for Penta-3 vaccination.

Pakistan's health expenditure remains low considering the needs of its population. Only 1.1 per cent of GDP is spent on health and nutrition, far below the 5 per cent recommended by the World Health Organization. In 2020, an important step was taken when immunization was moved from the development to the recurrent budget, ensuring that that this vital service is sustainably financed in the future.





Health care for all

In 2020, UNICEF developed an investment case for universal health coverage, aligned with Pakistan's process to access the Global Financing Facility for Women, Children and Adolescents and gain funding to provide reproductive, maternal, newborn and child health care services, especially for the most marginalized.

In 2019, UNICEF had supported a major

evaluation of the Lady Health Worker programme, through which thousands of trained women provide outreach services to women and children in communities. In 2020 government endorsed reforms to the programme based on evaluation findings. As the reforms progress, they will ensure that, even in the most remote areas of Pakistan, families avail of quality services on their doorsteps.

Caring for mothers and children

About 40,000 sick newborns received medical care, and 1,150 pre-term babies were managed using kangaroo care at 17 centres, via a strategic accountability framework for maternal and newborn healthcare.

Measures to improve the quality of care for newborns, including home-based newborn care, lifesaving kangaroo care, and treatment for possible serious bacterial infection were scaled up in seven districts, where they enhanced the quality of care and improved survival for 399,299 newborns.

Over 1.67 million children were treated for pneumonia and diarrhoea in 2020, using a module developed with UNICEF support.

In 2019, a major HIV outbreak had mostly affected children in a deprived area of Sindh province. Despite limitations on face-to-face interaction due to the pandemic, UNICEF provided doctors with online training, enabling them to manage the care of children living with HIV. As a result, 1,339 children living with HIV enrolled in antiretroviral therapy centres.



Protection through immunization

In 2020, the Government of Pakistan moved immunization from the development to the recurrent budget – making immunization financing sustainable.

With UNICEF support, 4,476 cold chain equipment were installed, with continuous temperature monitoring systems. These help ensure that vaccines reach children even in the most remote areas, without any loss of quality.

The improvements in the vaccine cold chain, along with local planning to identify and reach children at the household level, communication to increase demand, and an aggressive recovery plan, were critical to help reverse the drops in vaccination coverage during the height of the COVID-19 lockdown measures.

Through these measures, 83 per cent of targeted children received Penta-3 vaccination, and 94 per cent were protected against measles.¹⁰

Essential health services

At the height of the COVID-19 pandemic in 2020, accessing essential health services became almost impossible for children and women. In many areas they were unable to travel to the nearest health facility, especially to another town. Health workers, who risked exposure to infection at work, suffered from PPE shortages and faced challenges in treating children without being exposed to COVID-19.

In these challenging conditions, UNICEF introduced new ways of keeping services going. This included telemedicine so families could consult doctors remotely, providing personal protective equipment to frontline health

In 2019, UNICEF had conducted the first-ever urban profiling in Pakistan that identified the immunization needs of children living in slum areas. Based on this exercise, in 2020, a costed plan for urban immunization was rolled out, to help ensure that children in these congested environments are protected against preventable illnesses.

Over 14.3 million people received messages encouraging them to seek health services, with immunization as the entry point.

Children who receive their first dose of hepatitis B vaccine within 24 hours of birth are better protected against this illness. In Balochistan, four hospitals pioneered the 24-hour birth dose vaccination in 2020, and reported that newborns vaccinated in those facilities increased from only 5 per cent to 95 per cent.

workers so they could safely treat children.

The novel nature of COVID-19 meant that doctors were unfamiliar with the recommended protocols to treat children with the infection, so UNICEF provided online training for paediatricians.

Through such measures, 4 million children were reached monthly with essential health services.

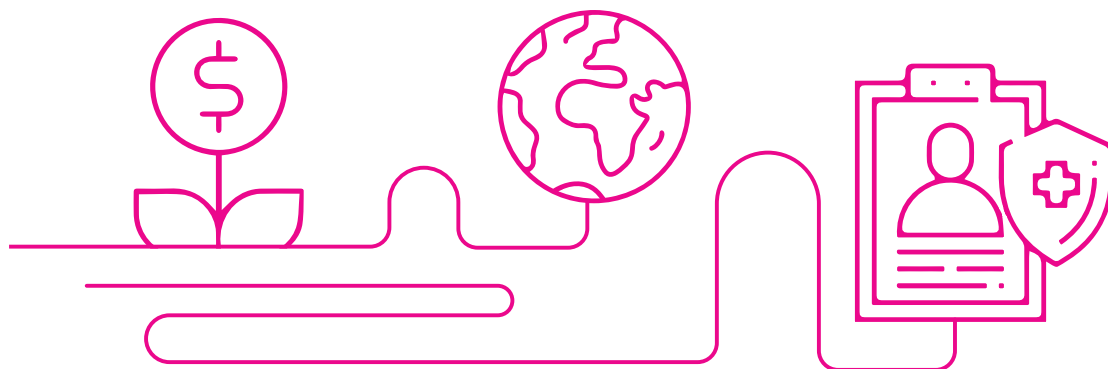
In five flood-affected Sindh districts, 111,772 people, of whom 28 per cent were children under five, received integrated health, immunization and nutrition services through 20 mobile teams.



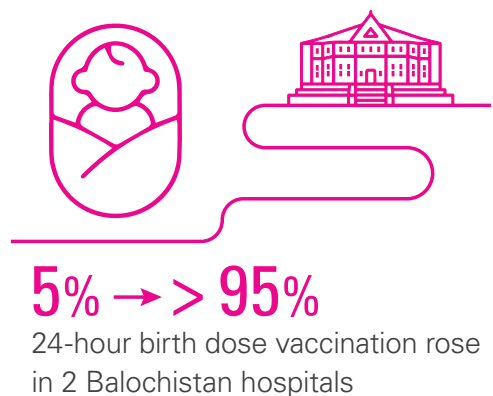
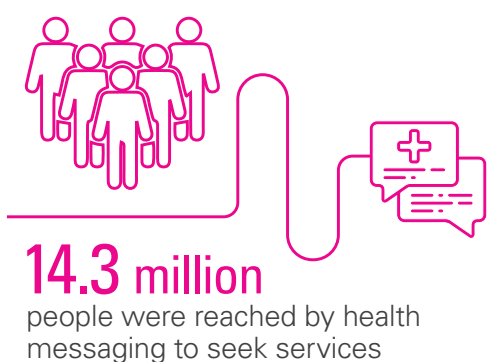
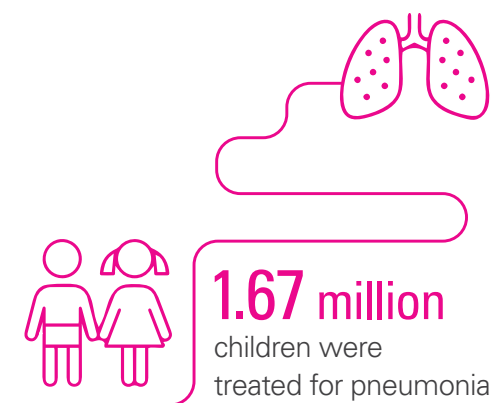
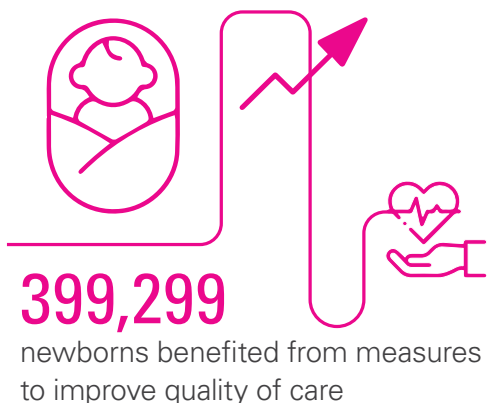
Partnerships for health

UNICEF chaired the H5 partnership with UNAIDS, UNFPA, WHO and World Bank, and the Health Development Partners

Group. These led advocacy for the universal health coverage agenda and an essential health services package for COVID-19.



Investment case developed for universal health coverage





New initiative helping every child survive



Eight-month old Muhammad Kabir is one of many children who recovered from possible bacterial infection thanks to a programme supported by UNICEF with funds from the Bill & Melinda Gates Foundation.

In a modest dwelling in Punjab, 15-day-old Ajwa was coughing and panting. Hour after hour, her body temperature rose. The local doctor in Fatehpur diagnosed her with a possible serious bacterial infection (PSBI). Normally, this would be treated at a higher-level facility located in the nearest town, 20 kilometres away. But for Ajwa's mother Khalida, travelling was impossible as her other children were at home.

Through a new UNICEF-supported initiative, however, staff at remote primary health facilities are trained to manage PSBI in children up to two months of age, even if parents cannot take them to a higher-level facility. The staff at Fatehpur provided

the baby girl with antibiotics and, within a week, Ajwa recovered.

“

“I am so happy that my Ajwa is fine now,” says Khalida Bibi. “I could not afford to travel to Kasur as it is far away. I am scared to think what could have happened had the treatment not been available here.”

”



POLIO





Polio

Polio is a highly infectious disease which spreads rapidly, especially in areas where sanitation is poor. Polio can have potentially devastating consequences for children's health and wellbeing. The most serious cases can lead to death, lifelong paralysis, or an inability to breath without assistance.

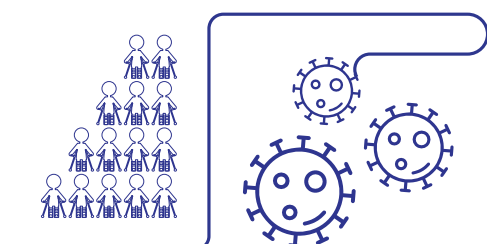
Today, Pakistan is one of only two countries in the world where polio remains endemic – the other is its neighbour, Afghanistan.

These two countries are the frontline of the global effort to eradicate polio, and conduct mass campaigns to reach every child with vaccinations, and report and respond to every case, including in areas

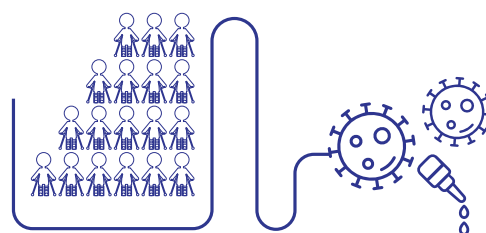
where historical deprivations often lead parents to refuse to allow their children to be vaccinated.

In 2020, efforts to eradicate polio were affected by the COVID-19 outbreak, when almost 40 million children in Pakistan did not receive polio vaccinations between April and June, when all polio campaigns were suspended. However, vaccination campaigns resumed in the summer.

In 2020, 83 cases of wild poliovirus were reported in Pakistan, a decline from 147 in 2019. However, the number of vaccine-derived cases rose, from 22 in 2019 to 121 in 2020.



83 cases of wild poliovirus reported in 2020



121 cases of vaccine-derived poliovirus reported in 2020

Toward eradicating polio

Under the umbrella of the National Emergency Operations Centre, UNICEF supported 14 polio vaccination campaigns in 2020. These campaigns provided 97.8 per cent of 39 million targeted children with oral polio vaccination – a crucial step in the effort to eradicate polio worldwide.

UNICEF procured 302 million doses of polio vaccine, which ensured 100 per cent vaccine availability for all campaigns.

A nimble, responsive polio communication strategy, with targeted research on why parents do not allow their children to be vaccinated, resulted in vaccine refusals declining from 0.47 per cent in February to 0.33 per cent by November 2020.¹¹

The complex communication infrastructure developed to support polio eradication over the years provided a foundation for quickly developing effective COVID-19 data management and surveillance systems.



Integrated service delivery

In many areas of Pakistan, parents are reluctant to have their children vaccinated against polio. These are generally areas where public services are weak and communities suffer multiple deprivations.

In 40 of these super-high-risk union councils, UNICEF rolled out a unique

integrated service delivery package to address multiple deprivations.

This approach recognises that, to eradicate polio, it is essential to also provide other services that parents value: health, nutrition, immunization, WASH and birth registration.



Polio staff Husna Bibi (24) is vaccinating a four-month old girl on the lap of his father UC-117, Maraghar Colony, Lahore, Pakistan during case response in August.

In 2020, UNICEF conducted 80 health camps in the 40 super-high-risk union councils.

Alongside polio vaccination campaigns, children were assessed for other needs to improve their health and wellbeing. For example, pregnant women were advised to access antenatal care from skilled providers, children with diarrhoea or pneumonia received treatment, and those found to have severe acute malnutrition were enrolled for treatment.

A pilot initiative distributed 13,000 referral slips during polio campaigns, and found this to be a successful means of connecting children to services. About 35 per cent of those referred used facility-based services, and half of the children who had not received any routine immunization were vaccinated.

These early results show promise as a way of connecting the most marginalized communities to a wide range of essential services.



302 million

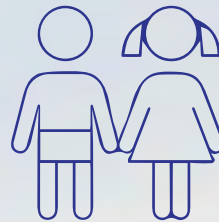
doses of polio vaccine procured by UNICEF



0.47%
in February
2020

0.33%
in November
2020

polio vaccine refusals fell



1/2 of zero-dose children
referred through integrated
service delivery received
routine vaccinations





NUTRITION





Nutrition

To grow and flourish, girls and boys need the right amounts and types of food for their age and stage of development. Yet extremely high rates of malnutrition persist in Pakistan amongst young children, adolescents and mothers.

The UNICEF-supported National Nutrition Survey conducted in 2018 showed that Pakistan is experiencing a triple burden of malnutrition. Children and adolescents suffer from undernutrition, micronutrient deficiencies and increasingly, overweight.

About 40.2 per cent of children in Pakistan are stunted (short for their age), while 28.9 per cent are underweight.

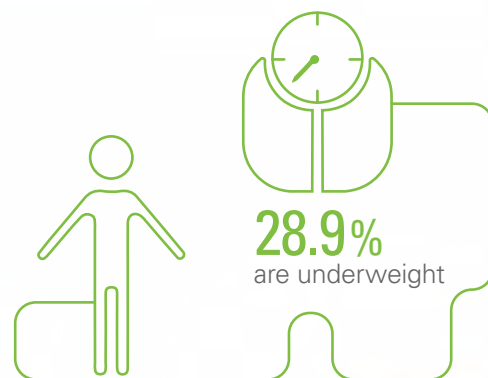
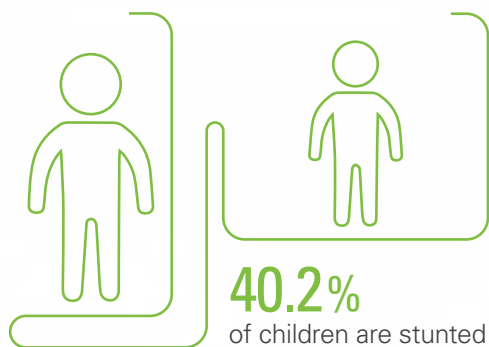
Wasting, or being too thin for their age, has increased from 15.1 per cent in 2011, to 17.7 per cent in 2018. Wasting is associated with increased child mortality.

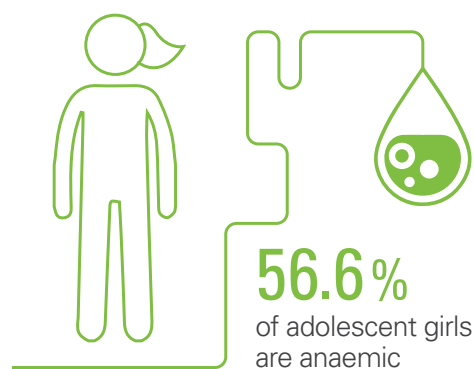
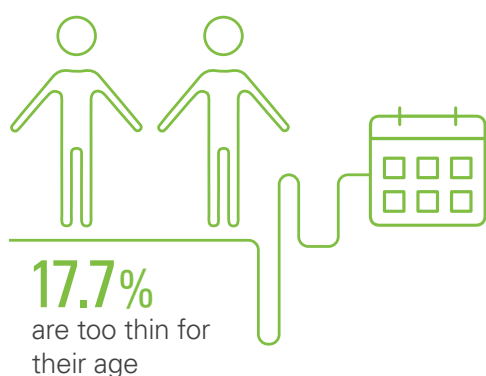
More than half (56.6 per cent) of adolescent girls in Pakistan are anaemic.¹²

Poor nutrition is due to a range of factors. Less than half of children (48 per cent) are exclusively breastfed for the first six months of life, when breastmilk provides all the nutrition a child needs. Only a third (35.9 per cent) are fed the right quantity and variety of food after this age.¹³

Food insecurity is common in Pakistan, and renders women and children more vulnerable to malnutrition. Malnutrition rates are particularly high in areas affected by drought in Sindh and Balochistan.

COVID-19 led to interruptions to nutrition services, potentially affecting the health of millions of Pakistani children. The effects on livelihoods for the poorest families may cause even more food insecurity and lead to further malnutrition.





Institutionalizing nutrition services

UNICEF has long been at the heart of advocacy and technical support for nutrition in Pakistan. This included the development of a nutrition dashboard to monitor nutrition data and interventions, and a policy brief produced with the Ehsaas programme.

These products influenced the Pakistan National Nutrition Coordination Council to commit to a multisectoral National Nutrition Action Plan and scale up nutrition action for 11 million children and 5 million women in 67 districts with high rates of nutrition. The plan has received US\$

2.4 billion in federal funding, and Gilgit-Baltistan (GB), Azad Jammu and Kashmir (AJK) and KP have committed an additional US\$20 million in their respective regions.

In Pakistan's public financing nutrition has historically been treated as a project, for which funding has to be approved. In 2020, UNICEF achieved a breakthrough by incorporating nutrition services into Pakistan's universal health coverage investment case process. This will help to ensure that primary and community nutrition services are considered an integral part of health care in Pakistan.

Better nutrition at home

Many Pakistani families mistakenly believe that breastmilk substitutes are superior to giving children breastmilk alone. This is a significant contributor to high rates of malnutrition, and is also a needless financial burden for families.

To help address this, in 2020, UNICEF supported revisions of federal and provincial legislation on breastmilk substitutes. These are expected to be adopted by parliaments in 2021.

1,220 health service providers trained on baby-friendly hospital guidelines encouraged early initiation of breastfeeding for 300,000 newborns annually.

A strategy to promote adolescent nutrition and reduce the high rates of micronutrient deficiency and rising overweight and underweight was developed. Once implemented, Pakistan's 47 million adolescents will benefit from action by government and



other partners to protect their health and development at a critical stage of life.

Movement limitations due to the COVID-19 pandemic put lifesaving nutrition services for children at risk. To help protect both families and nutrition workers, UNICEF developed guidelines on safely providing nutrition services during the pandemic and trained 16,022 service providers. This ensured that safe nutrition services were offered to 14 million children and mothers.

4.4 million children aged 6–59 months were screened for malnutrition. Of these, 244,565 children were identified to have severe acute malnutrition (56 per cent of them girls) and were treated by UNICEF and government partners. These included 54,745 children (52 per cent girls) who were treated with direct UNICEF support.

Partnerships for nutrition

The UNICEF-led Nutrition Development Partners Forum advocated for services to continue during the pandemic, developed

Of those treated, 88 per cent recovered and death rates were kept below 1 per cent – in line with international SPHERE standards.

How and when parents feed children, and what foods they provide, lays the foundation for lifelong health. Information on how to feed children the right food at the right age reached 48.2 million users of social media, 83 million audience members for radio and television, as well as 1.3 million people in communities.

Micronutrient supplements protected 1.01 million children and 459,517 women against deficiencies.

27.3 million children received vitamin A supplements procured by UNICEF (88 per cent coverage) during 2020.

a shared understanding of the nutrition services children need, and advocated for sustainable nutrition funding.

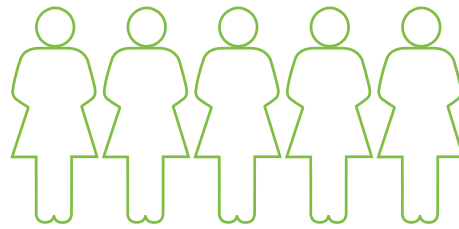




Five-year federal and provincial nutrition project developed with UNICEF support to reach

11 million children and

5 million
women

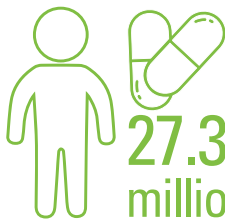


4.4 million children screened,
244,565 SAM children treated, **88** per cent



Information on infant and young child feeding reached

48.2 million social media users,



27.3 million children protected through vitamin A supplementation

1 million children and **0.45 million** mothers protected against micronutrient deficiency



83 million radio/TV audience, and



14 million children and mothers received COVID-safe nutrition services from trained service providers



1.3 million people in communities



Early childhood development

During the earliest days, months and years of life, children need the right nutrition for healthy development, protection from social and environmental stresses, and stimulation to ensure their young brains develop correctly.

Early childhood development (ECD) programmes aim to make sure that children receive the right food at the right age. Children must also be able to access health and immunization services for a healthy infancy; clean and safe environments; and plenty of love and opportunities to play, learn and grow.

In 2020, with UNICEF support, the Government of Pakistan began developing an ECD framework, standards and index that will guide efforts to support every child's healthy development.

Twenty-five radio programmes on ECD developed by UNICEF were aired, with about 83 million listeners.

While full ECD implementation was delayed due to the COVID-19 pandemic, in 2020, 113 master trainers were oriented on a parenting package which will be used to educate parents to care for young children at a crucial phase of life.





unicef

WATER, SANITATION AND HYGIENE





Water, sanitation and hygiene

Clean and plentiful drinking water, safe sanitation and good hygiene protect children from deadly diseases such as diarrhoea. Poor water, sanitation and hygiene (WASH) also contributes to the spread of illnesses such as polio and COVID-19, while the lack of WASH facilities in school keeps children, especially adolescent girls, out of education.

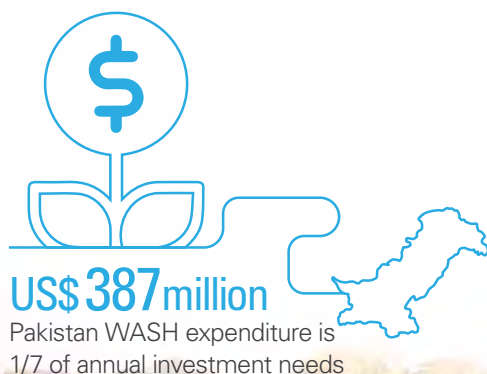
With the spread of COVID-19, WASH services in health facilities, schools and communities, and promotion of handwashing with soap, have gained new importance for infection prevention and control.

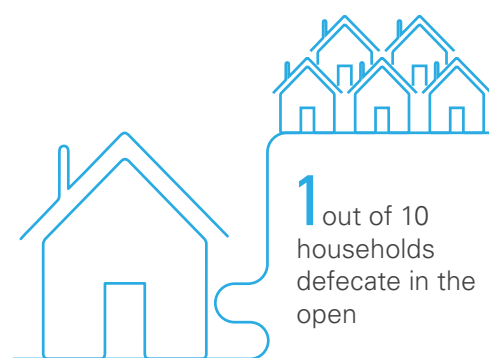
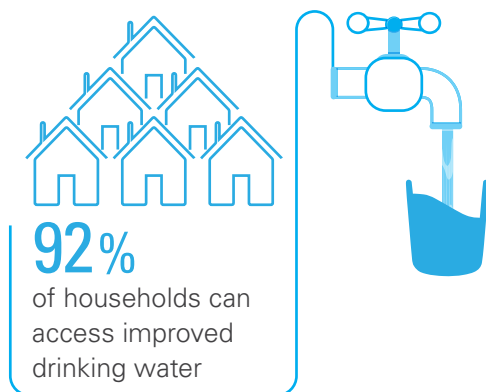
Although there have been improvements in recent years, many Pakistanis still lack universal and equitable access to

safe drinking water, especially in rural areas. About 92 per cent of households have access to improved drinking water, and over 70 per cent to improved toilet facilities. However a tenth of households, largely located in rural areas, still defecate in the open and risk spreading waterborne diseases through communities.¹⁴

Through the Clean and Green Pakistan movement, the Government of Pakistan has recently renewed its commitment to ensuring WASH services and addressing the severe environmental challenges of water stress and climate change.

Expenditure on WASH in 2018/19 stood at PKR 62 billion (US\$ 387 million), only a seventh of annual investment needs.





A cleaner, greener Pakistan

In 2020, the Clean Green Pakistan Movement was an unprecedented opportunity to leverage government spending to create safer, more hygienic environments for children. With UNICEF advocacy, government doubled its spending on WASH to US\$ 346 million.

The Ministry of Climate Change and the provincial governments of KP and Punjab piloted the Clean Green Champions programme to create green jobs, as well as the Clean Green Pakistan Index, with UNICEF support. Twenty cities in the two provinces competed to provide climate-resilient and gender-responsive urban environments for children. The success of

the index led to its approval for rollout to all Pakistani cities.

With the completion of the Joint Sector Review of WASH in Sindh and AJK, the Ministry of Climate Change was able to develop a national mechanism to review progress on the Sustainable Development Goals (SDGs) related to WASH (SDGs 6.1 and 6.2) and to use the data to improve national planning. With an eye to the COP-21 summit on climate change in 2021, UNICEF supported the ministry to update Pakistan's Nationally Determined Commitments to climate change action, and to incorporate climate-resilient WASH mitigation as a key commitment.

Sanitary environments for marginalized children

By the end of 2020, 1.1 million more people were living in open-defecation-free environments than at the start of the year. This was achieved through the Pakistan Approach to Total Sanitation, a unique initiative that encourages communities to collectively stop defecating in the open to protect their children's health.

1.4 million people now use safe drinking water from climate-resilient sources, and 531,775 have access to gender-sensitive toilets.

A population of over 11.2 million was protected from the spread of COVID-19 through the provision of WASH facilities and education at 787 health facilities.

9.5 million people were able to wash their hands and prevent COVID-19 spread in places which had lacked hygiene facilities when UNICEF supported governments to install hands-free handwashing stations equipped with soap.

In 1,533 schools, 365,414 students accessed toilets and water supply in 2020.



These included 46,074 adolescent girls in 131 schools who were educated on managing menstruation hygienically, and were provided sanitary supplies.

Through UNICEF support for innovation

Red Code, a team of young entrepreneurs, scaled up a reusable sanitary pad concept developed with funding from the Generation U Global Challenge. They donated supplies to marginalized girls in Sindh and KP.

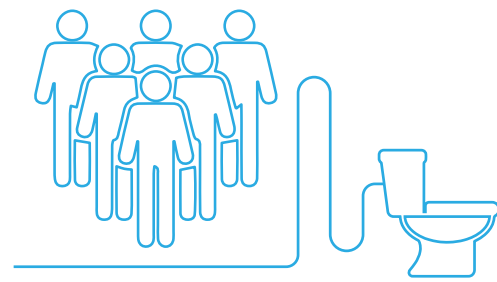
Partnerships for WASH

UNICEF co-chaired the IPC-WASH working group with the Ministry of Climate Change, which convened 70 partners

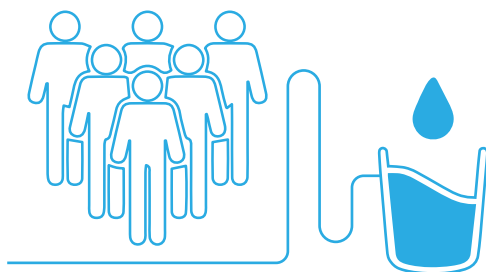
to develop and roll out the COVID-19 response plan to create systems for infection prevention and control.



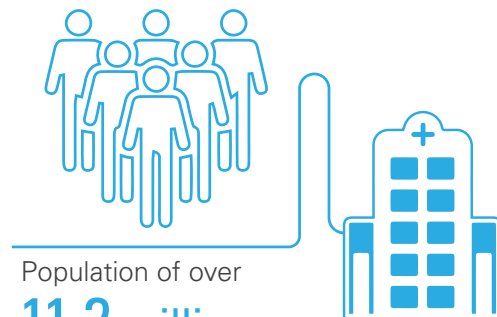
20 cities cleaned up to compete in the Clean Green Pakistan Index



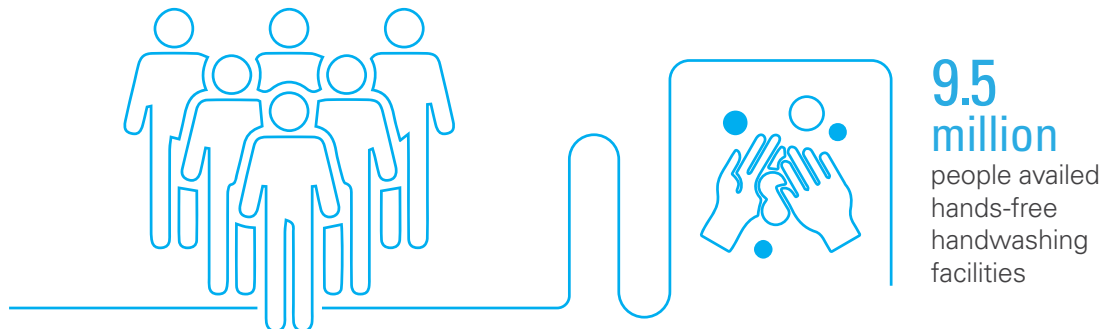
1.1 million more people now live in open-defecation-free environments



1.4 million people now drink safe water



Population of over **11.2 million** protected through WASH services and education in **787** hospitals



9.5 million people availed hands-free handwashing facilities



Handwashing stations enable vulnerable youth to maintain hygiene

“From sunrise to sunset, I search through roadside garbage dumps looking for metal scraps or any other item that could fetch me some money at the end of the day. This is my livelihood and my family depends on it,” says 19-year-old Naseeb Gul, who lives in Abbottabad, KP.

For people like Naseeb, there is limited access to soap and water and it is impossible to wash their hands during the day, despite the importance of handwashing to prevent COVID-19.

Following the COVID-19 outbreak, UNICEF supported the installation of 54 handwashing stations around Abbottabad.

Today, over 300,000 people use the handwashing stations daily.

“

“Now I wash my hands with soap many times a day, including each time after I touch garbage. I hope that these water drums and soap will stay even after the virus is gone,” Naseeb says.

”





EDUCATION





Education

Over a quarter of Pakistan’s population comprises children of school-going age. Of these, 22.84 million children are out of school, including 12.16 million girls.¹⁵ This vast population of children risk growing up with limited opportunities in a world where education is increasingly necessary.

Even children who attend school receive relatively poor quality of education: 65 per cent do not achieve minimum proficiency by the time they leave primary school.¹⁶

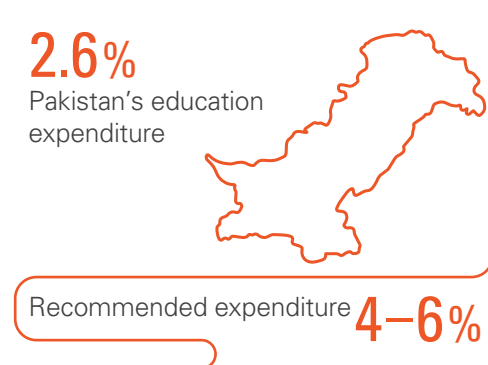
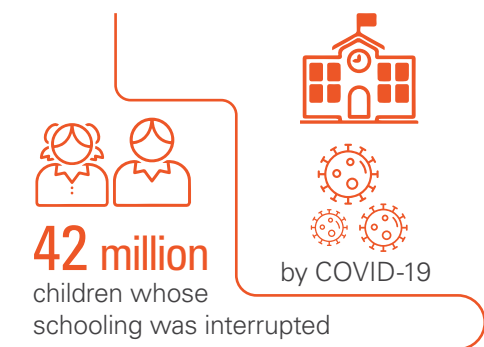
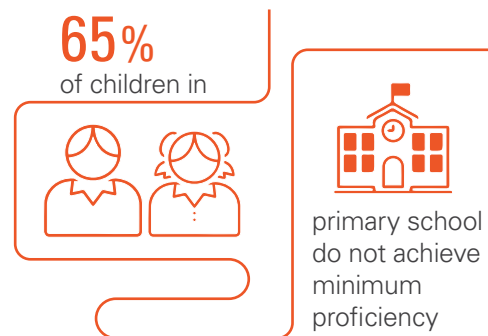
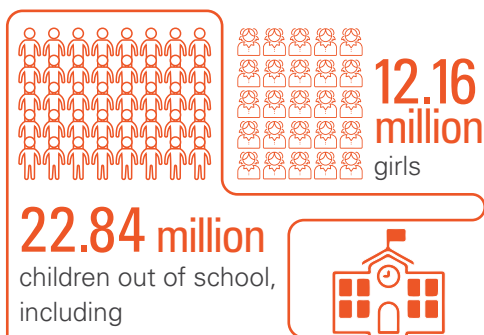
There are widespread inequities in access to quality education. Girls are less likely to be in school than boys, the poorest children are less likely to complete schooling than

the wealthiest. In primary school, there are only 92 girls for every 100 boys, and this ratio plummets in KPMD and Balochistan.¹⁷

Dropout rates are high, with adolescent girls at particular risk of leaving education.

Education sector expenditure was only 2.6 per cent of GDP in 2019, well short of the 4–6 per cent recommended in the Education Framework for Action, 2030.

In this fragile environment, the COVID-19 outbreak created unprecedented risks for education. Schooling was interrupted for about 42 million learners, many of whom were already at high risk of dropping out.





Stronger education governance

UNICEF supported education sector coordination in all provinces.

Balochistan and KP developed and endorsed Education Sector Plans that will guide provincial efforts to provide quality education to some of Pakistan's most marginalized girls and boys.

UNICEF supported the governments of Balochistan, KP and Punjab to

develop programmes to implement their education sector plans, with US\$94 million in funding from the Global Partnership for Education.

European Union funding was instrumental in enabling UNICEF to help improve education quality and governance in Balochistan, and annual planning, school clustering, and data systems in Sindh.

Bringing children to school

In early 2020, before the start of the pandemic, 215,161 out-of-school children accessed pre-primary, formal and non-formal education through direct UNICEF support. More than half – 54 per cent – of these children were girls.

These included 86,332 girls and boys who accessed early learning, while 48,984 over-age and marginalized children had the chance to learn through non-formal education.

Keeping children learning

As schools were suspended due to the COVID-19 pandemic, new governance plans had to be rapidly developed to reduce the impact on children's education. With UNICEF support, the Government of Pakistan developed a national response plan for education accompanied by a simulation and costing model, guidelines for safe school reopening, and a continuity of learning framework. Collectively, these documents guided national efforts to keep children learning.

Across Pakistan, children have dramatically different degrees of access to digital technologies, and it was immediately clear that a one-size-fits-all approach would not reach every child, everywhere.

With government and innovation partners UNICEF developed a blended approach to remote learning which sought to keep children learning during lockdown and

meeting them at the level of technology available to them.

Through high-technology (apps, websites), low-technology (television, SMS) and no-technology (worksheets, homework), UNICEF supported teachers, parents and communities to sustain learning for over 8 million students.

28,258 teachers learned to safely reopen school, and provide and mental health and psychosocial support (MHPSS) for their pupils and themselves.

Over 1.7 million people – members of school management committees, teachers and education staff – were sent text messages on preventing COVID-19.

277,977 parents also received messages encouraging learning to continue during school closures, and members of 2,705 school management committees were orientated to play a crucial role in bringing children safely back to school.



Partnerships for education

UNICEF supported governments to apply for and use education sector plan implementation grants to support education for all. Development partners

organized into Local Education Groups brought technical expertise to protecting education during the COVID-19 lockdown.

Balochistan, KP developed education sector plans with UNICEF support



215,161
out-of-school children



54% accessed education- pre-primary, formal and nonformal



8 million
students sustained learning during



pandemic shutdowns through high-tech, low-tech and



no-tech support



1.7 million
education staff

and school management committee members received information via text about COVID-19 prevention



Adolescent development and participation

More than a fifth of Pakistanis today – 22.7 per cent¹⁸ – are between 10 and 19 years of age. This is the largest generation of young people in Pakistan's history, and it is coming of age in an unprecedented time of growth and opportunity.

Yet as Pakistani adolescents start to explore the world around them, and begin to find their place in society, many are prevented from realising their rights and fulfilling their potential.

To take advantage of this unique window of opportunity, in 2020 UNICEF supported the validation of a Generation Unlimited working paper and a business case for investing in education, skills training, employment and entrepreneurship for adolescent Pakistanis. This analysis of the return on investment in young people will be used to advocate with private sector companies and to inform the country investment agenda.

Strategies to improve adolescent health and nutrition were approved, and will be implemented in 2021.

Through online mentoring for 209 young leaders provided in partnership with UNFPA and UNDP, adolescents had the opportunity to play a part in the national response to COVID-19. These young

people engaged 970 of their fellow adolescents on COVID-19.

The UN partnership also conducted a youth perception survey, which found COVID-19 impacts on education and household income were the primary concerns of young Pakistanis.

The Sparking Wellbeing enquiry, which was led by young people, enabled 19 girls and 29 boys to take charge of their lives and strengthen their ability to support their fellow adolescents. Twenty-eight adolescents also participated in a COVID-19 youth innovation challenge, and received seed funding to develop innovative solutions to improve their own and others' lives.

More than 4.5 million young people (49 per cent of them aged 10–19 years) received COVID-19 prevention messages through a joint UN youth engagement programme.

4.5 million

young people
received
COVID-19
prevention
messages





Children keep learning despite the COVID-19 lockdown

“When schools closed due to the coronavirus, what bothered me the most was that it disrupted children’s education,” says 19-year-old Najeeba, a college student in Balochistan. “I wanted for every child in my family to keep studying, but this was a challenge due to the lockdown as people could not leave their homes. To turn this challenge into an opportunity, I decided to teach them myself at home.”

Najeeba is one of 12,000 people in the UNICEF-supported “My Home, My School” initiative, helping children

continue learning during the pandemic. Najeeba receives regular guidance on how to teach children at home, protection against COVID-19 and how to stay physically and psychologically fit.

“Gaining children’s attention was not easy at the beginning, because I am not a trained teacher,” says Naseeba. “However, once I started receiving academic content and guidance on home schooling through the WhatsApp group, especially videos, it became easy for me.”





CHILD PROTECTION





Child protection

Children in Pakistan remain vulnerable to violations of their right to protection from violence, exploitation and abuse.

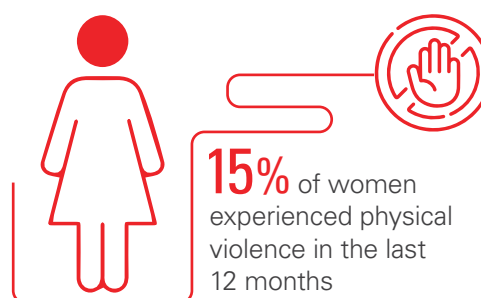
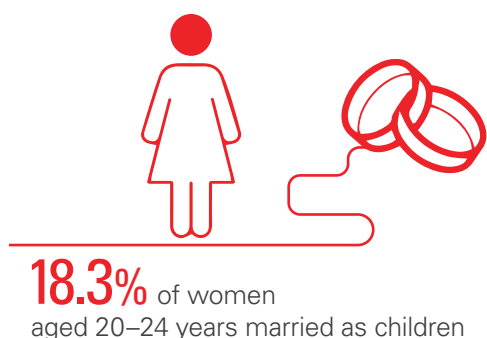
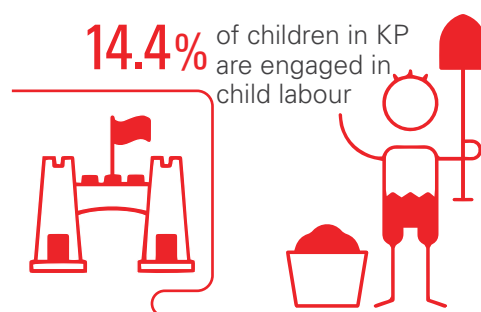
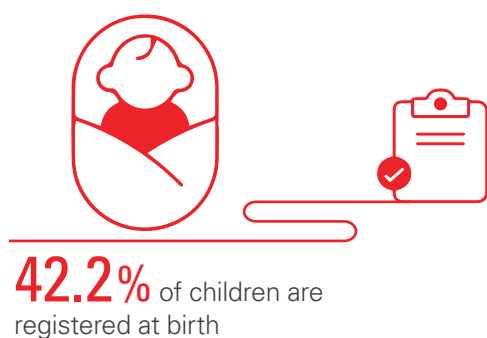
Birth registration is an important tool for protecting the rights of children and ensuring that they receive essential services. Pakistan has historically had low rates of birth registration, however recent years have seen dramatic improvements. In 2017/2018, about 42.2 per cent of children under five had been registered, an encouraging rise from 34 per cent in 2012/2013.¹⁹ Registration rates are generally higher in urban areas, where there is greater awareness and less time and expense required to go to government offices.

While a historic child labour survey is currently taking place across Pakistan, and will provide nationwide data on its

prevalence, other studies have showed 13.4 per cent of children aged 5–17 years in Punjab and 14.4 per cent in KP are engaged in child labour.²⁰ Nearly a fifth – 18.3 per cent – of women aged 20–24 years are married when they were themselves still children.²¹

Gender-based violence remains a serious and under-reported issue. In a recent survey, 15 per cent of women aged 15–49 years reported physical violence in the last 12 months.²²

Restrictions on movement due to COVID-19, loss of income, isolation and stress have increased the likelihood that children and women will experience mental distress, violence and abuse. As family incomes drop, children are more vulnerable to being put to work or married before reaching adulthood.





Every child needs an identity

In 2020, UNICEF advocacy and technical support led to the drafting of civil registration and vital statistics (CRVS) regulations and by-laws to fill crucial gaps in the legislation for registering births and deaths.

In Sindh, a CRVS unit was established by government using its recurring budget.

Structures for government departments to collaborate and coordinate on CRVS were developed. By leveraging a World Bank lending package, the Government of Pakistan

allocated US\$188 million to implement the CRVS Regional Framework for Action.

UNICEF's public-private partnerships, advocacy and investments in technological solutions resulted in birth registration of 784,432 children (71 per cent under five) in 2020.

Since the start of UNICEF's country programme in 2018, the births of over 2.56 million children have been registered.²³

Protecting children from violence and abuse

Bills on the protection of children were drafted in Sindh and KP, and aligned with the recommendations of the Committee on the Rights of Children.

Islamabad, which had already has the Islamabad Capital Territory Child Protection Act 2018, finalized Rules of Business to effectively implement the legislation.

The establishment of the National Commission on the Rights of the Child marked an important step in institutionalizing children's rights in Pakistan, and UNICEF entered into a partnership with this new body.

With UNICEF technical support, the Ehsaas programme finalized minimum standards and a policy framework on alternative care, aligned to international standards. This will help ensure that the rights of children in care (i.e. not living with their families) are protected.

A framework to guide abuse, prevention and promotion of child protection services

was finalized by the Ministry of Human Rights with UNICEF support.

In KP, 9,145 girls were empowered to take positive action to protect themselves through life skills-based education.

Pakistan's biggest ever data collection exercise, the child labour survey, continued in 2020 with UNICEF support. Despite some delays due to COVID-19, by the end of 2020 data collection was completed in GB and Punjab and household lists were nearly completed in Sindh and KP. In Balochistan, AJK and Islamabad, surveys were delayed.

Following an assessment of COVID-19 impacts on children. UNICEF supported services to prevent and respond to violence against children in Balochistan and GB. In these two regions, alternative care services linked with the Child Protection Case Management and Referral System protected 42 girls and 161 boys.

Partnerships for child protection

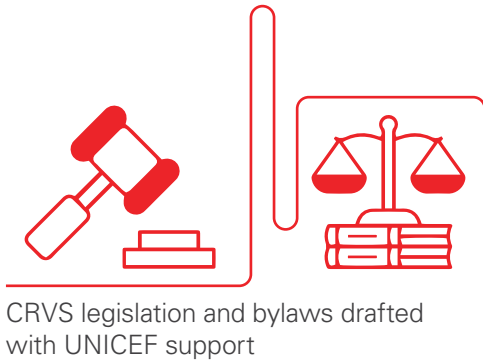
Through the Aawaz-II UN joint programme with UNFPA and UN-Women

in Punjab and KP, UNICEF helped build the institutions needed for a well-

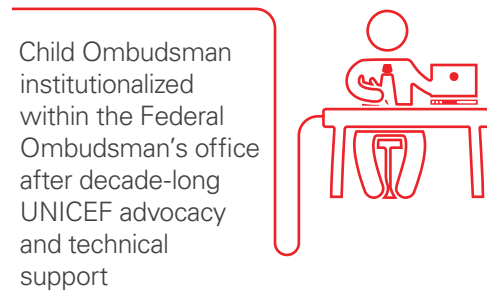


functioning CRVS system, child labour surveys, and strategies on child marriage and gender-based violence.

A partnership with NADRA, local government and health departments developed systems to ensure that children born in hospitals are registered at birth.



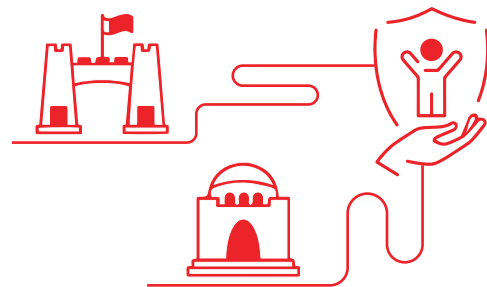
CRVS legislation and bylaws drafted with UNICEF support



Child Ombudsman institutionalized within the Federal Ombudsman's office after decade-long UNICEF advocacy and technical support



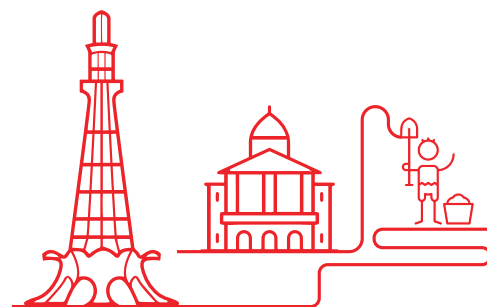
784,432
children (71 per cent under five) completed birth registration in 2020



Sindh, KP child protection bills drafted with UNICEF support



Minimum standards and a policy framework on alternative care developed in line with international standards with UNICEF support



GB, Punjab child labour survey data collection completed



Child Protection Case Management and Referral System operationalized in Balochistan and GB, with MHPSS mainstreamed for COVID-19 response



Ensuring child rights through birth registration in KP

When Shah Zaman Khan's son turned 18, he travelled to the city to find work. "He came back saying that no one was willing to employ him without a national identity card," Shah Zaman remembers. "When we tried to get one made, they asked for the birth certificate. At that time, I realized how important it is to register a child as early as possible."

In a joint effort to ensure that every birth is registered, UNICEF and government

officials initiated a campaign to educate families and hold on-site birth registration camps. A separate camp with female staff registered women and girls.

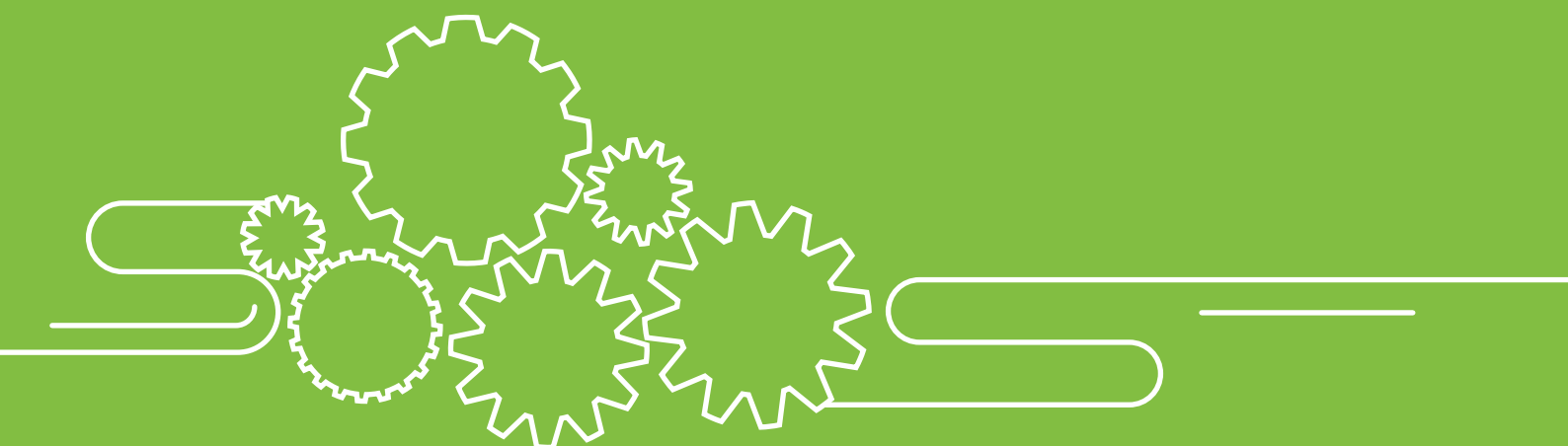
The campaign was a success. Whereas in the past four years only 146 children had been registered in Shah Zaman's village, on the day of the campaign, 425 children gained official identities, and will be counted in allocations to this impoverished region of KP.



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CROSS- CUTTING PROGRAMMES





Operations and risk management

Supply and procurement valued at US\$120 million supported high-quality programme delivery.

164 long-term agreements with suppliers and vendors increased efficiency and rapid response to changing situations.

Using the Harmonized Approach to Cash Transfers, UNICEF verified that funds provided to partners in the field were spent as they were intended, through 249 per cent programmatic visits and 82 per cent financial assurance activities against target, and seven micro-assessments.

UNICEF had 334 staff members at the end of 2020, based in four field offices in each provincial capital, with the country office located in Islamabad. Gender balance remained a challenge, and women comprised 39 per cent of the UNICEF

workforce, despite proactive efforts to attract qualified women.

Protections for the most vulnerable were strengthened through awareness and training on how to manage risks related to protection against sexual exploitation and abuse (PSEA). 165 UNICEF and implementing partner staff completed PSEA training.

UNICEF was lead agency for OneUN in developing the COVID-19 business continuity plan to ensure that operations were not affected by the unique situation.

Staff members affected by COVID-19 availed of flexible working arrangements, wellbeing initiatives, innovative and secure technological solutions and support for home-based connectivity.

Programme planning, monitoring and reporting

In 2020, UNICEF reviewed progress on its country programme, highlighting achievements and recommending course corrections in a changing national context.

An annual management plan and guidance and technical support to federal and provincial governments improved understanding of programme prioritization in the changing context of the COVID-19 pandemic.

In particular, remote monitoring was embraced to track implementation of UNICEF programmes where access was constrained due to COVID-19, with a

review of third-part field monitoring, the development of clear guidance and tracked shift work. This enabled UNICEF to meet and exceed programme monitoring targets. In future, remote tools will be combined with face-to-face monitoring to remain in constant communication with remote locations, with periodical physical cross-checks.

UNICEF revised its fundraising strategy to reflect donor satisfaction and to facilitate private sector partnerships, and ensured high-quality timely reporting for accountability to donors.



Advocacy, communication and communication for development

UNICEF public communications resulted in nearly 700 mentions of UNICEF in national media, with posts seen 707.5 million times online. For World Children's Day, UNICEF and the Ministry of Human Rights turned 31 iconic monuments blue in seven cities along with advocacy around the global theme of "COVID-19 crisis, child rights crisis", increasing awareness and visibility.

UNICEF's early investment in social listening, data analysis and evidence-based planning and monitoring was a key driver for government to prioritize risk communication and community engagement (RCCE). This contributed to 71 per cent of the population being made aware of COVID-19 prevention.

Gender

UNICEF supported gender-responsive policies, strategies and training aligned with the global Gender Action Plan to ensure that all children – regardless of gender – receive appropriate support.

The midterm review of the country programme was enriched through a gender programme review and an analysis of the impacts of COVID-19, with 30 UNICEF staff trained.

Social policy

UNICEF's advocacy with parliamentarians and policymakers contributed to the preparation of bills on corporal punishment, domestic violence and immunization.

Following this, the Government of Pakistan presented a ground-breaking PKR 1.2 trillion (US\$ 7.5 billion) social protection stimulus package, with an emergency cash transfer that gave a lifeline to 16.9 million families.

Children's issues were brought to the floor of parliament as the members of the Parliamentary Group for the Convention on the Rights of the Child drew on UNICEF's technical advice to support public allocations to education, nutrition and health in the midst of the pandemic.

For over 20 years, UNICEF has helped governments collect detailed, reliable data through the Multiple Indicator Cluster Survey (MICS) for informed policymaking. In 2020, data collection for a nationally coordinated MICS was completed in Sindh, Balochistan and KP. In pandemic conditions, surveyors protected themselves and the homes they visited by following coronavirus protocols and using computer-assisted interviewing.

A UNICEF study shared lessons on how social protection programmes could be used to help vulnerable families weather the COVID-19 pandemic, including Ehsaas Kafaalat which benefits disadvantaged women, and Nashomuna which benefits pregnant and lactating women.

Internally, UNICEF programme evaluations assess quality and effectiveness providing



evidence and lessons. All evaluations from UNICEF Pakistan were rated satisfactory or highly satisfactory, and 93 per cent of actions recommended were on track.

UNICEF also worked to improve evidence-based planning in government. With UNICEF assistance, the Ministry of Planning, Development and Special Initiatives developed a capacity assessment toolkit for monitoring and evaluation, and developed a policy framework to guide monitoring, evaluation and research.

Disaster preparedness and response

While the only major disaster Pakistan confronted in 2020 was its share of the broader COVID-19 crisis, smaller and long-running emergencies continued to affect children's wellbeing in different parts of the country. This reinforced the need for communities and government staff to build the resilience to withstand natural and human-made disasters.

With UNICEF support, the National Disaster Management Authority (NDMA) assessed gaps and needs in national institutional capacity for disaster preparedness and response. UNICEF also supported a gender and child expert at NDMA to ensure girls and women were prioritized in the COVID-19 response.

A disaster risk management toolkit was used to educate parliamentarians and

The ministry revised the chapter on monitoring and evaluation in the development project manual which will inform budget allocations and ensure they are based on robust evidence.

As the world enters the final decade of the global effort to achieve the SDGs by 2030, UNICEF helped Pakistan improve and streamline its reporting on 80 SDG indicators, with provincial scorecards to identify data gaps on children's needs.

build their commitment to disaster risk reduction.

UNICEF arranged training on emergency preparedness for its own staff as well as provincial government officials. 63 staff and officials in Balochistan and Sindh were trained in 2020, will more planned for 2021.

Internally, UNICEF preparedness using the Global Online Emergency Preparedness Platform, achieving 88 per cent. Nineteen contingency partnership agreements were maintained so partnerships could be rapidly activated. UNICEF also pre-positioned supplies for 100,000 people in case of sudden need.

Under the Humanitarian Action for Children appeal, prior to the start of 2020, UNICEF had requested US\$52.5 million to respond to the impacts of emergencies on children. Of this only 20.4 per cent of requested funds were received.



In drought-affected areas of Sindh and Balochistan:



373,570 people accessed clean drinking water



32,667 people received health, hygiene and nutrition messages



80,660 mothers received micronutrient supplements



In Sindh, **42,072** people were screened for HIV.

Among families returning to KPMD:



6,288 women gave birth attended by skilled healthcare workers



4,862 children accessed education



15,521 children were treated for severe acute malnutrition



5,767 children and caregivers increased awareness of child protection

UNICEF also provided nutrition and WASH services to children affected by flooding in KP and Sindh, and established integrated health camps following heavy

snow in Balochistan. Women and child-friendly centres were established in earthquake-affected areas of Mirpur, AJK.

Responding to COVID-19

As part of a global appeal for funds to respond to COVID-19, in Pakistan UNICEF requested US\$ 50.2 million to strengthen public health, prevent interruptions to essential services for children, and to mitigate the socioeconomic impacts of the pandemic. Of the requested funds, UNICEF mobilized 43 per cent.

Preventing the spread of misinformation about the new disease, and ensuring that all Pakistanis know how to protect themselves and others, UNICEF supported the innovative Risk Communication and Community Engagement (RCCE) strategy. This

brought together communication partners to strategically use social analytics and social and traditional media to design critical messages.

The RCCE platform contributed to 71 per cent of the population becoming aware of COVID-19 prevention measures.²⁴

Through community engagement, 22 million people (11 per cent of target) received messages on prevention.

9.4 million people (94 per cent of target) were mobilized for hand hygiene, while 45 million (91 per cent) received messages on stigma.²⁵



Emergency preparedness saves lives

“I was still at school when children from my neighbourhood came looking for me,” says 13-year-old Kailash Kumar. “My uncle’s daughter had fallen into a nearby pond.”

The children knew Kailash was the only person who could help. Kailash performed first aid on the unconscious child and saved her life.

Kailash lives in the Thar desert in Sindh which has been hit by repeated floods

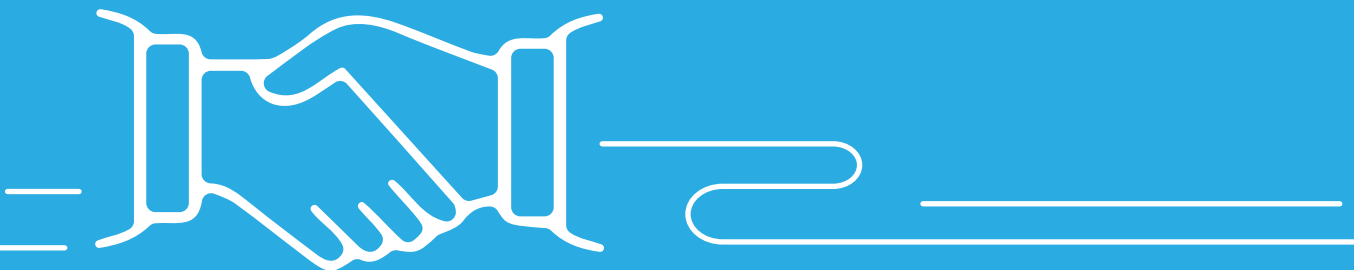
and drought. As part of a UNICEF-supported project, Kailash and his teachers have been trained in first aid and disaster risk reduction: how to identify hazards and to take appropriate measures to reduce potential damage.

Jaman Bheel, Kailash’s teacher says: “This whole concept was new to us. It was particularly interesting to learn that sometimes a timely action is enough to prevent a bigger loss.”





PARTNERSHIPS





Partnerships

Close partnerships with government, UN agencies, civil society organizations and

communities lie at the heart of UNICEF work.

Stronger partnerships in pandemic times

UNICEF is a member of the Humanitarian Country Team, leading the UN response to COVID-19.

With the UN Resident Coordinator's Office, UNICEF participated in the Common Country Analysis, taking stock of SDG progress and COVID-19 impacts.

As part of the United Nations Crisis Management Team, UNICEF supported development of the Pakistan Humanitarian Needs Overview for 2021.

In 2020, UNICEF inaugurated a new partnership strategy to guide its work with

civil society organizations, with COVID-specific guidance that emphasized a coordinated and agile response.

UNICEF strengthened its relations with donors, establishing a donor reporting portal which improved quality and responsiveness.

Relationships with donors were critical to adjusting programmes for COVID-19 realities. Donor flexibility enabled UNICEF to quickly change course to meet the need of children. For example education programming was rapidly adjusted to account for school closures.

Working with the private sector

An updated fundraising strategy directed the resources and expertise of private sector companies to the children in greatest need.

During pandemic restrictions, 46,000 adolescent girls managed

menstruation hygienically using supplies from Procter and Gamble.

Using soap provided by Unilever, 29,240 children in Punjab maintained hygiene.

A longstanding partnership with Telenor contributed to birth registration.

New partners, new approaches

The all-of-society approach needed to tackle COVID-19 led to important new partnerships for UNICEF.

With professional organizations, such as the Pakistan Paediatric Association, UNICEF jointly developed a training manual

on COVID-19 case management, and a policy statement on protecting children during the pandemic.

With utility companies, UNICEF supported installation of innovative hands-free handwashing stations so people in



congested, high-risk areas could take action to prevent the spread of COVID-19.

Through the RCCE framework, partnerships strengthened with telecoms Zong and Digital Pakistan.

Partnerships with telecoms and EdTech supported learning continuity, with WhatsApp home-schooling materials used by 13,890 teachers and parents.

Our partners in 2020

UNICEF's work in Pakistan was made possible under the leadership of the Government of Pakistan and the provincial and area governments.

Our donors: Asian Development Bank, Canada, Consolidated Funds from NatComs, European Union, Gavi, Global Partnership for Education, Japan, Norwegian Committee for UNICEF, Nutrition International, Pakistan, Procter & Gamble Pakistan, Sweden, The United Kingdom, UNICEF Mexico, United Kingdom Committee for UNICEF, United States Funds for UNICEF, UNOCHA, USA, World Bank

International finance institutions: Asian Development Bank, Islamic Development Bank, World Bank

Our sister agencies in the UN: Food and Agriculture Organization (FAO), International Labour Organization (ILO), Joint United Nations Programme on HIV and AIDS (UNAIDS), Office of Coordination Humanitarian Affairs (OCHA), UN Women, United Nations Development Programme (UNDP), United Nations Educational, Scientific and Cultural Organization (UNESCO), United Nations Human Settlements Programme (UN-HABITAT), United Nations Office on Drugs and Crime (UNODC), United Nations Population Fund (UNFPA), United Nations Refugee Agency (UNHCR), World Food Programme (WFP), World Health Organization (WHO)



LESSONS LEARNED





Lessons learned

COVID-19 demonstrated how humanitarian and development assistance support each other.

The pandemic led to political momentum to support handwashing and fast-tracked WASH services in schools and healthcare facilities. UNICEF leveraged this high-level interest and developed a roadmap to promote Hand Hygiene for All in 2021.

Recognizing the impacts of years of insecurity on children, UNICEF had previously supported the KP government in an innovative integration of MHPSS with health services. In 2020, this was used as a model for COVID-19 response in other provinces.

The COVID-19 RCCE strategy built on the communication infrastructure developed for polio eradication and scaled up innovations around community engagement, new technologies and the use of social and behavioural analytics. These innovations and investments in COVID-19 communication will now be leveraged for development communication.

Integrating and consolidating interventions can help ensure effective, sustainable services.

Mainstreaming nutrition into the universal health coverage package was a fast and sustainable way to ensure that children who need nutrition support receive it at primary health facilities and in the community.

Applying a similar approach to the nutrition information system, by linking it with the DHIS2 system for health, will help institutionalize nutrition as an essential service for Pakistani children.

Integrated Service Delivery for polio super-high-risk union councils demonstrated that providing a package of essential services – health, nutrition, WASH and birth registration – can reach children who suffer multiple deprivations. For example, simply giving parents referral slips for routine immunization during polio campaigns led to half of the identified unvaccinated children being taken for health-preserving vaccinations.

School closures were a crucible for innovations to keep children learning.

When schools closed due to COVID-19, there was a fear that many children would not return to education.

Government, UNICEF and education partners were forced to devise new ways to keep children learning even during lockdown and in communities where digital solutions could not be used.



Innovative learning modes evolved, with over 8 million students able to keep learning through the means available to them, ranging from high-tech online platforms and mobile phone apps for the digitally connected, to low-tech lessons via television and SMS, to worksheets and homework that teachers could assign on paper for children with no access

to technology. Although the reach of these methods was relatively small, UNICEF and JICA are now supporting the Government to develop a Continuity of Learning framework adapted to local contexts, which will guide measures to help ensure children complete a full course of education.

Communication approaches developed for the pandemic showed new ways of reaching people with information to protect child wellbeing.

Communication using multiple channels – television, WhatsApp, social media – reached a vast audience with professional multilingual content, including messages recorded by adolescents and celebrities. Girls and women are far less likely to be online, so UNICEF complemented online messaging with traditional media such as television and radio, as well as women-focused platforms such as Ehsaas to reach the most marginalized.

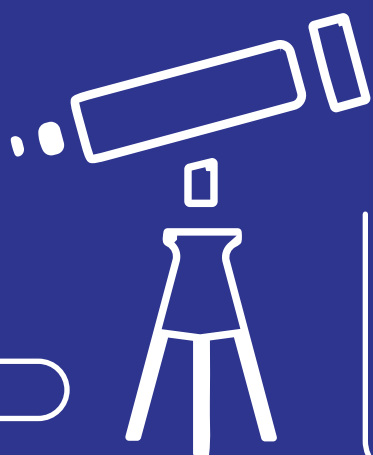
The RCCE platform demonstrated the use of new technologies for reaching people with the right messages, such as interactive robocalls and behavioural analytics.

The nationwide effort to control the spread of COVID-19 led to fruitful new partnerships. Working with the Pakistan Paediatrics Association, UNICEF produced and disseminated materials to frontline health workers, while city utilities installed safe handwashing stations in public spaces.

UNICEF's work with communities also bore fruit as members of school management committees and village WASH committees worked tirelessly to keep children learning and to promote hygiene at times when government and UNICEF partners could not easily travel due to lockdown restrictions.



LOOKING AHEAD





Looking ahead

2020 was the halfway point of UNICEF’s Country Programme in Pakistan (2018–2022), and an important opportunity to reflect on what had worked and what needed adjustment to meet the needs of children in a post-pandemic world.

In the remainder of its country programme, UNICEF will design holistic programmes that keep in view the needs of children across the lifecycle, from before conception to adulthood. UNICEF will focus on ECD and adolescent wellbeing, particularly for girls.

UNICEF will mainstream gender in all its programmes, ensuring that the specific needs and experiences of both girls and boys are acknowledged and addressed, and will advocate for legislation to build gender-responsive systems. Internally, UNICEF will work towards

staff gender parity by implementing the recommendations of a corporate gender analysis and proactive outreach to qualified women candidates.

Gender mainstreaming will focus on transformative actions and will be systematized to capture gender results.

Integrated programmes, such as the Integrated Service Delivery package, will reach the most marginalized children with the support they need, and support the wellbeing and empowerment of adolescent girls.

Across all UNICEF focus areas, integrating disaster risk management will help communities prepare for and recover quickly from the impacts of disaster as the effects of climate change take hold.

Strategies for change



leverage business for results



ensure gender equality programming with explicit programmatic targets



promote child-focused social policy



change social norms and behaviours through communication for development



enhance advocacy and communication in support of children’s rights and needs



build partnerships with UN, public and private sectors, civil society, foundations and academia



conduct research and evaluation for evidence-based action



strengthen supply, procurement and logistics



FINANCIAL RESOURCES





Financial resources

In 2020, the UNICEF Pakistan Country Office mobilized US\$ 286.44 million. Of the funds allocated, programmes expended US\$ 144.01 million to achieve results for Pakistan's children, including US\$ 36.38 million from Regular Resources and US\$ 107.63 million from Other Resources.

With a strong focus on enhancing the efficiency and effectiveness of its programming amid the COVID-19 response, UNICEF Pakistan expended 23 per cent less of development resource and 58 per cent more of humanitarian resources in 2020 compared to 2019. The polio eradication programme continued to be the priority during the year and mobilized over US\$ 63.20 million (funds received in-country), or 44 per cent of total expenses. The health, WASH and nutrition programmes followed, with US\$ 22 million, US\$ 17.97 million and US\$ 12.14 million respectively.

The United States Funds for UNICEF was the top donor in 2020, with funds also contributed by the United Kingdom, United States of America and Japan. National Committees continued to be key partners in channelling significant resources from private partners, including US\$ 60.48 million from the United States Funds for UNICEF, consolidated funds from National Committees and Norwegian Committee for UNICEF.

In 2020, of the US\$ 52.54 million requested for humanitarian response the

office received only US\$ 13.65 million (23 per cent). In particular, preparedness and disaster risk reduction remained critically under funded, with a (91 per cent funding gap. This was followed by nutrition (89 per cent) and child protection (87 per cent).

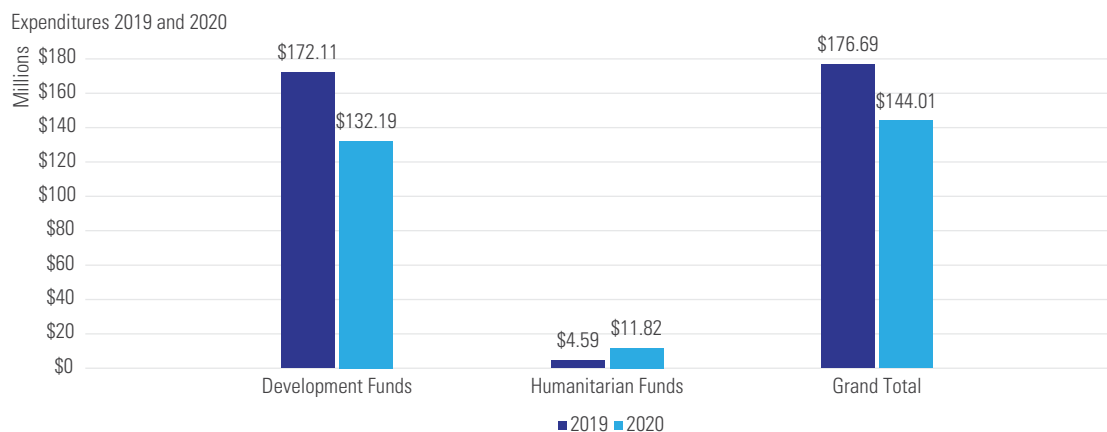
Humanitarian response to the COVID-19 pandemic required US\$ 50.2 million to support the country-wide response. During the year, US\$ 21.37 million (43 per cent) was received against the appeal. A significant gap of 28.83 million (57 per cent) remained until the end of the year, especially for coordination and technical support (98 per cent), WASH (72 per cent) and risk communication and community engagement (66 per cent).

During 2020, UNICEF and donors worked closely achieve results for children under the Delivering as One programme and in the face of the global COVID-19 crisis. In the time remaining of its country programme, UNICEF will seek to expand its public and private sector partners and pursue new opportunities to raise financial resources to achieve results. Current collaborations, including joint programming with United Nations partner agencies, will also be strengthened.

UNICEF Pakistan extends its deepest gratitude to all partners that provided regular, other and humanitarian funds and other support in 2020. Their commitments play an indispensable part in reaching Pakistan's most vulnerable and disadvantaged children.

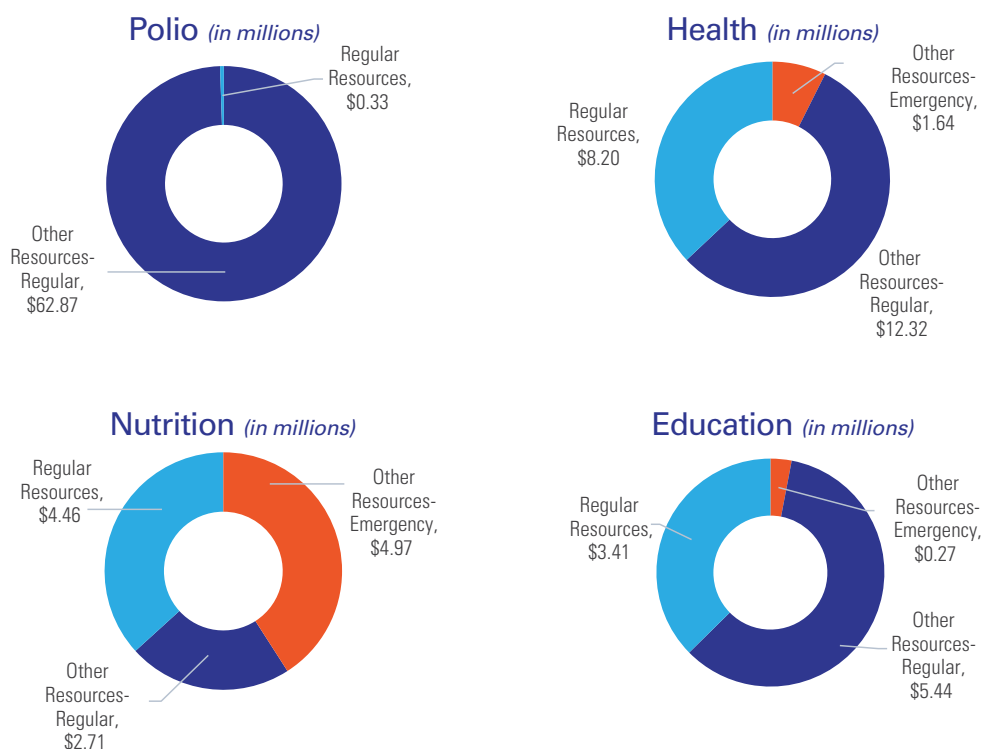


Figure 1: Expenditures 2019 and 2020



The expenditure does not include the integrated budget (UNICEF internal resources) amounting to US\$ 4,056,882. This includes cost of human resources (including senior management), corporate communication, information technology, administration, security, equipment and other services.

Figure 2: Financial highlights by programme



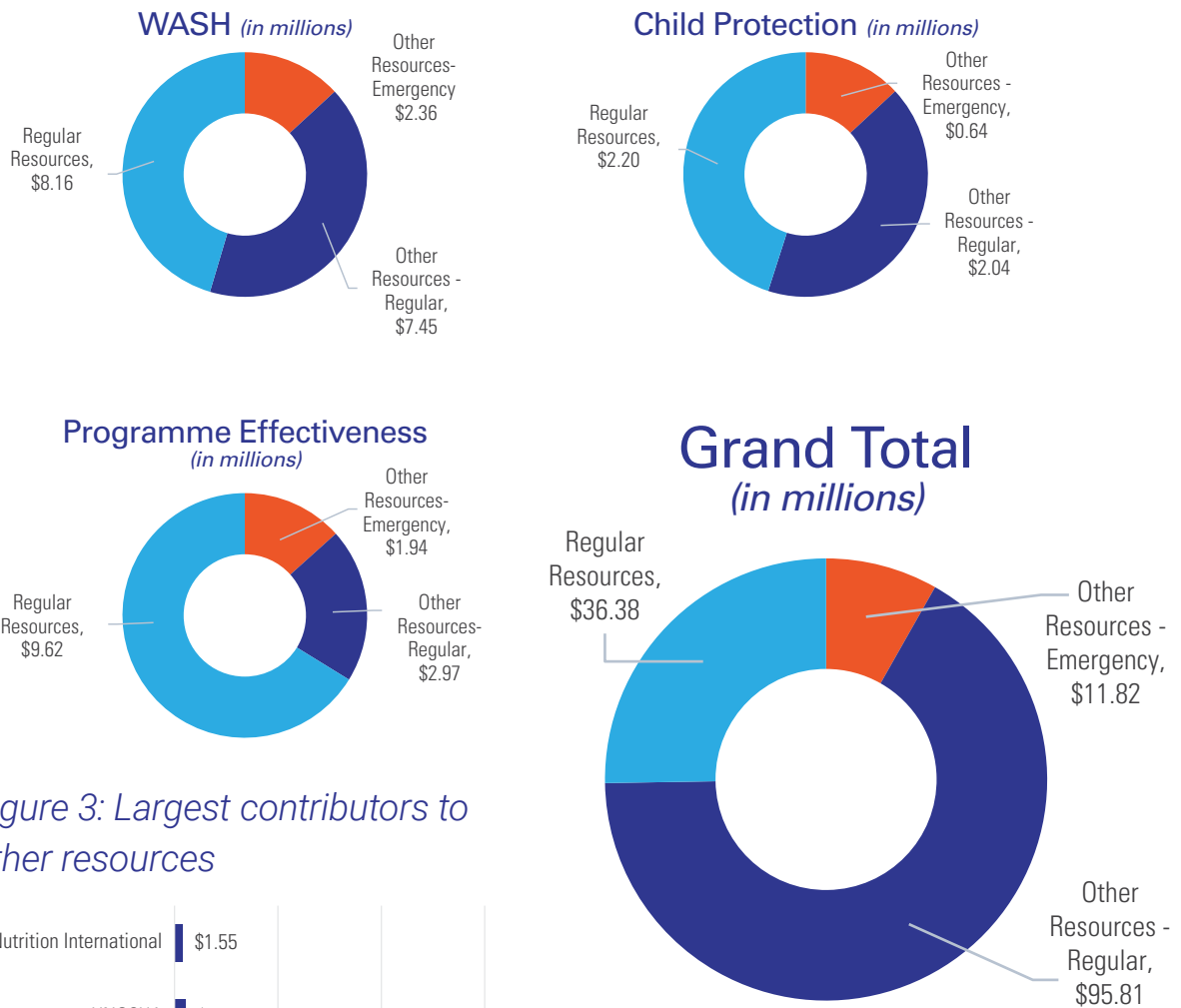
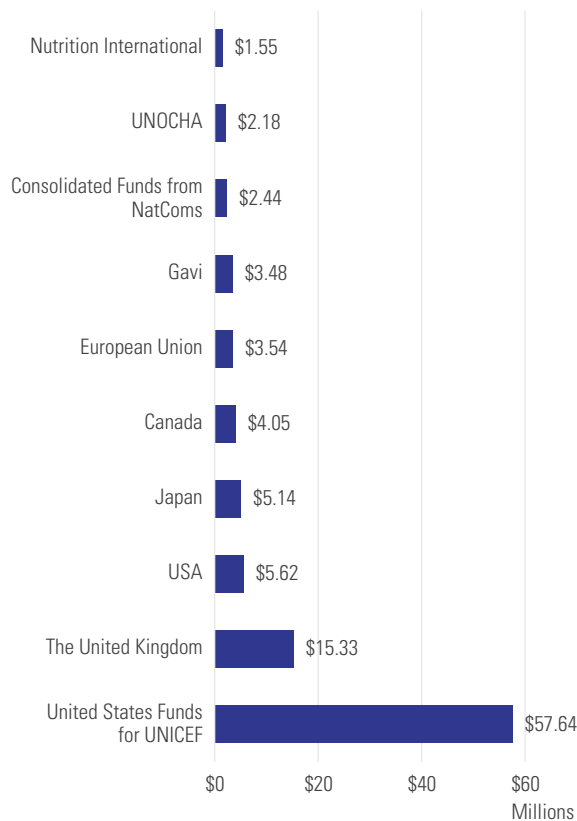


Figure 3: Largest contributors to other resources





Acronyms

AJK	Azad Jammu and Kashmir
CRVS	Civil Registration and Vital Statistics
ECD	Early Childhood Development
GB	Gilgit-Baltistan
KP	Khyber Pakhtunkhwa
KPMD	Khyber Pakhtunkhwa Merged Districts
MHPSS	Mental Health and Psychosocial Support
MICS	Multiple Indicator Cluster Survey
NDMA	National Disaster Management Authority
PSBI	Possible Serious Bacterial Infection
PSEA	Protection Against Sexual Exploitation and Abuse
RCCE	Risk Communication and Community Engagement
SDG	Sustainable Development Goals
UN	United Nations
UNDP	United Nations Development Programme
UNFPA	United Nations Population Fund
UNICEF	United Nations Children's Fund
WASH	Water, Sanitation and Hygiene
WHO	World Health Organization



Endnotes

- 1 Pakistan Demographic and Health Survey (PDHS) 2017–2018.
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- 11 IDIMS.
- 12 National Nutrition Survey 2018.
- 13 Ibid.
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- 15 Education Management Information System (EMIS), 2016/17.
- 16 World Bank, 2019.
- 17 Pakistan Living Standard Survey, 2018/19.
- 18 PDHS 2017–2018.
- 19 Ibid.
- 20 Punjab Multiple Indicator Cluster Survey 2017–2018; Khyber Pakhtunkhwa Multiple Indicator Cluster Survey 2016–2017.
- 21 PDHS 2017–2018.
- 22 Ibid.
- 23 According to local government records.
- 24 According to media monitoring and trend analyses.
- 25 Figure based on social media analytics.



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