



Pakistan

Humanitarian Situation Report No. 22

Reporting Period: 1st January to 28th February 2021

Key Highlights

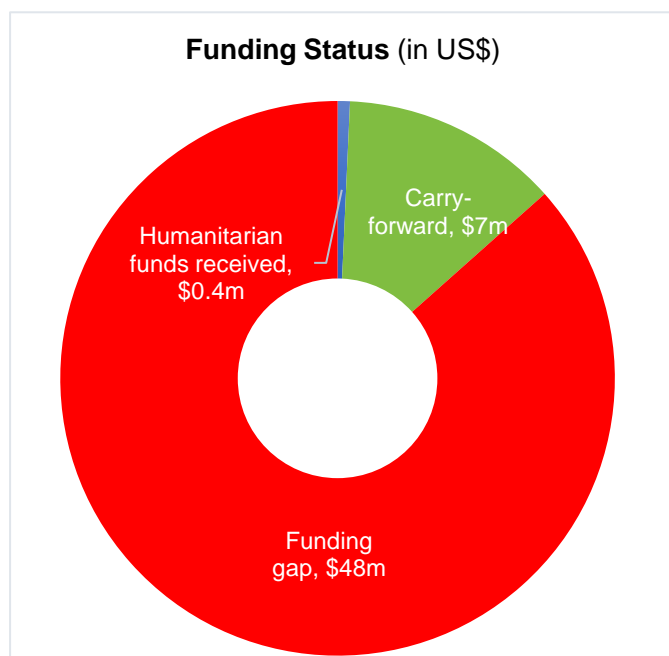
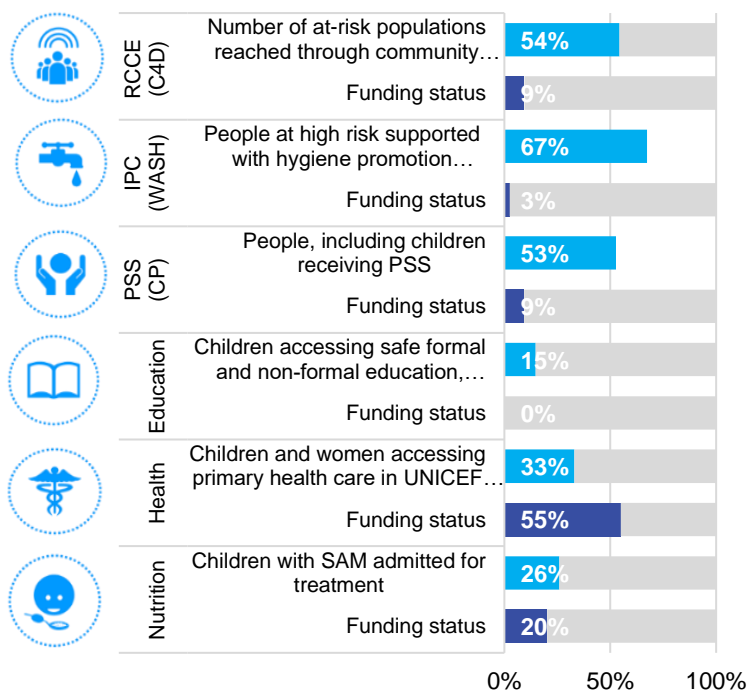
- During the reporting period, the number of daily COVID-19 positive cases ranged from 2,184 on 1st January to 1,176 positive cases on 28th February 2021. (<https://covid.gov.pk/stats/pakistan>).
- 26,545 children were treated for SAM without complication in a safe environment at health facilities through UNICEF support.
- 582,340 people benefited from continuity of primary healthcare services at UNICEF supported health facilities.
- Through UNICEF support, 69,491 parents, caregivers, children and individuals reached with PSS through trained social workforce professionals.
- Through UNICEF support 14,290 Health care facility staff and community health workers trained on infection prevention and control.

Situation in Numbers

- 5.5 m** children in need of humanitarian assistance
- 10.5 m** people in need
- 579,973** confirmed coronavirus cases in Pakistan
- 1.7 million** children and women require nutrition services

UNICEF's Response and Funding Status

UNICEF Appeal for Preparedness and Response US\$ 55.73 million



Funding Overview and Partnerships

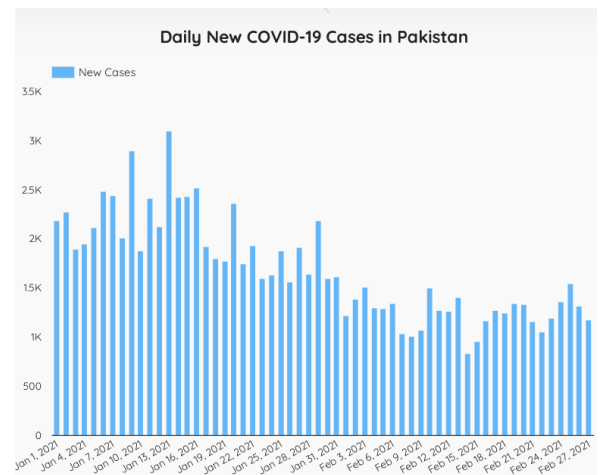
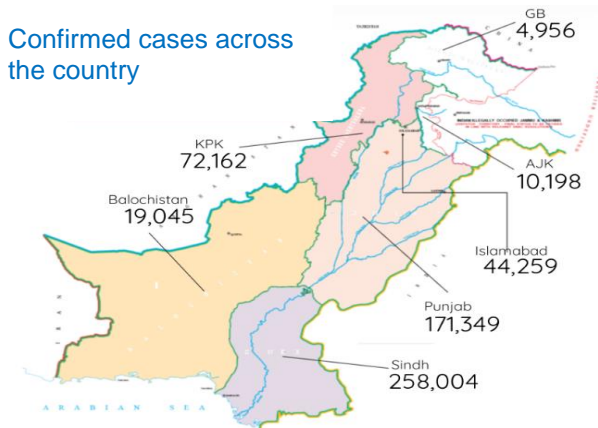
In 2021, UNICEF Pakistan requires US\$ 55.73 million to support the humanitarian response in country. UNICEF has received US\$ 7.48 million (13 per cent) for the on-going humanitarian action in Pakistan. This includes additional Global Thematic Humanitarian funds providing support to Nutrition, Emergency preparedness and Child Protection programmes and US\$ 7.08 million in funds carried over from 2020. Continued predictable, flexible and timely donor support is critical to sustaining vital response activities and preventing further deterioration of the situation in Pakistan. There is still a critical funding gap of US\$ 48.25 million (87 per cent) for the country especially for Education, WASH and RCCE response.

UNICEF expresses its sincere gratitude to the donors for their support to accelerate response in 2020 and continue response in 2021 including the Austrian Committee for UNICEF, Asian Development Bank, CERF Secretariat, CDC, World Bank, ECHO, Global Partnership for Education, Gavi -The Vaccine Alliance, Solidarity Fund, Standard Chartered, United Kingdom, United States along with all its public and private donors for their contributions.

Situation Overview & Humanitarian Needs

EPIDEMIOLOGICAL OVERVIEW

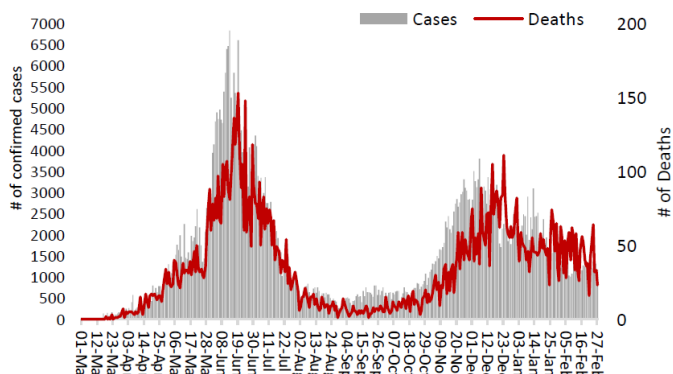
As of 28th February 2021, there are 579,973 confirmed coronavirus cases in Pakistan, with Sindh being the most affected province with 258,004 cases, followed by Punjab with 171,349 cases and Khyber Pakhtunkhwa (KP) with 72,162 cases. Of the total number of confirmed cases, 12,860 patients have died and 545,277 have fully recovered from the disease and have been discharged from the hospital. The map and graph below show positive cases per province/region and the daily COVID-19 incidence as of 28th February 2021.



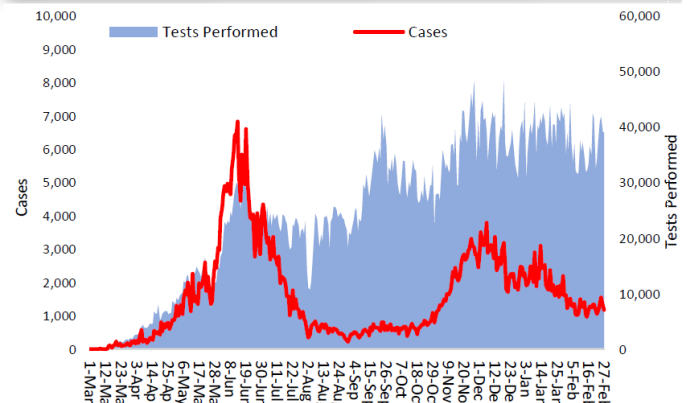
The graphs below show the incidence and deaths and test versus cases performed since 1st March 2020 to 28th February 2021¹

INCIDENCE & DEATHS BY DATE

01-Mar-2020 to 27-Feb-2021



TESTS PERFORMED VS CASES



¹ WHO sitrep 28th February, 2021

Based on data from National Command and Operations Center (NCOC)², as of 28th February 2021 Pakistan has conducted 8.95 million laboratory tests. The total number of positive cases since the beginning of the outbreak is 579,973 with 12,860 deaths (CFR: 2.22 per cent). Out of the total 21,836 currently active cases 1,994 cases are hospitalized³.

Regarding the vaccines, to date, the following three vaccines have been registered in Pakistan by the Drug Regulatory Authority Pakistan (DRAP):

- SinoPharm – Registered on 20th January 2021
- AstraZeneca – Registered on 20th January
- Sputnik – Registered on 8th February

Pakistan is preparing to apply for Pfizer Vaccine in second phase: expression of interest sent on 12th February 2021;

WHO listed AstraZeneca Vaccine under Emergency Use Listing (EUL) on 15th February 2021 and approved by Drug Regulatory Authority of Pakistan for emergency use. Sputnik V is being brought into the country by a private company (Chughtai Laboratory).

Pakistan has signed and submitted Indemnity Agreement to GAVI for AstraZeneca vaccine in order to receive the vaccine, but the supplier required some changes and Government of Pakistan is still waiting for the modified version to be shared by GAVI. The vaccine will be supplied to Pakistan through COVAX: Pakistan has been allocated 17.16 million doses and will receive 4.21 million doses in the first batch. The delivery date is not confirmed yet.

In addition, Pakistan National Deployment Vaccination Plan (NDVP) was uploaded in COVAX portal on 9th February and is now under review. An application to GAVI Cold Chain Equipment was submitted on 22nd February, for 2.5 million to procure 144 refrigerators and 14 walk in cold rooms, 748 cold boxes, under pre-review, as well as an application to Japan grant aid of 6.6 million, to cover cold chain equipment, dry storage space and technical assistance.

In addition to regular freight support from COVAX, UNICEF is negotiating Pro Bono support with private companies like DP World Partnership (in country logistic, transportation, storage and technical assistance).

COVAX/ Vaccination Updates

Following is the update on Vaccine Deployment in Pakistan until 28th February for front line health care workers as decided by the government for the first phase of vaccinations to be completed.

Province	Target	Total vaccinated till 28 th February.	Per cent of Target
AJK	7,325	4,513	62%
Balochistan	4,194	6,958	166%
Gilgit Baltistan	2,529	2,633	104%
Islamabad	10,638	6,416	60%
Khyber Pakhtunkhwa	19,739	16,300	83%
Punjab	73,043	65,650	90%
Sindh	112,935	73,531	65%
Grant total	230,403	176,001	76%

Summary Analysis of Programme Response

1. Risk Communication and Community Engagement:

Coordination: UNICEF continues to provide leadership, coordination and technical support to the Ministry of National Health Services Regulation and Coordination (MNHSR&C) and its RCCE partners. Both the National and UN RCCE task force teams were established in March 2020. These RCCE forums provide the strategic direction for RCCE efforts

² <https://ncoc.gov.pk/>

³ WHO Sitrep as of 28th February, 2021

in the country. The UN task force team that includes 12 UN agencies meet weekly (36th UN RCCE task force held on 24th February 2021), and the National RCCE Coordination Taskforce meets fortnightly with partners. In addition to coordination at the federal level, UNICEF is co-lead in all provincial RCCE task-force teams, aiming to strengthen coordination, planning, monitor and assure quality implementation at district level.

The RCCE COVID-19 vaccine strategy in the National Vaccine Deployment and Vaccine Plan for COVID-19 (NDVP) was updated and validated by the National COVID-19 Coordination Committee. This paved the way to develop operational plans at both federal and provincial levels. Frequently asked questions and questions and answers (FAQs/Q&As), and a communications matrix for the new vaccine introduction was developed and shared with national partners with the aim to inform literate influencers and help address misinformation with facts.

As the new COVID-19 vaccine will be deployed throughout the country, special attention was placed on providing decentralized and provincial technical support to strengthen and assure a more collective and harmonized approach to training modules, key messages, evidence and data analytics and sharing of experiences.

Response:

Evidence-based knowledge, understanding and planning:

On Social analytics, three social surveys were conducted during this period; 1) the 5th of the longitudinal survey on COVID-19 (since Aug 2020) adapted to the current social context in Pakistan, 2) a new Direct Observational survey of COVID-19 SOP compliance and 3) qualitative anthropological surveys on the in-depth investigations of social behaviours related to COVID-19. All 3 surveys brought clarity and understanding concerning the public's sentiment, perceptions, knowledge and attitudes on the new COVID-19 vaccine. 68 per cent say they will accept a Covid-19 vaccine if offered to them, however despite accepting it, 85 per cent still have concerns over its safety. Among those refusing, main reasons include general trust in the new COVID-19 vaccines (efficacy still unproven), fear of adverse effects, and perception that the health centre is not a safe place to go.

As of 3rd February, 32 RCCE briefs were developed and shared. The RCCE briefs consolidated social information and data from multiple sources, aiming to inform policy makers, sectoral managers and RCCE task force teams of the findings and its respective recommendations. A sample recommendation collected from Social Media posts include direct advocacy to federal and provincial authorities to practice positive modelling of SOP preventive behaviours.

RSPN and PAFEC, two local CSO partners, were engaged to intervene in high-risk districts and initiate community-led discussions with community and religious leaders, CSOs, authorities, teachers, Frontline Workers (FLWs), women, adolescents, and special populations to promote adherence of communities to the preventive COVID-19 Behaviours including wearing a mask in public places, social distancing, handwashing, getting tested when experiencing symptoms, and the general effectiveness of vaccination as a protective measure. Both CSOs have already reached over 5.5 million people.

To promote the advantages of wearing a mask, a new two-sided flyer was designed to promote collective usage of masks on front side, and reminders of COVID-19 preventive measures on the other. In response to the population's perception that COVID-19 is not dangerous (it is like the common flu), four human-interest stories and testimonies were produced and broadcast on mass and social media platforms, reaching approximately 4 million followers.

UNICEF also provided technical support in the development of a harmonized knowledge management platform to share core messages / IEC materials, robocalls, digital media sentiment analysis, and RCCE recommendations from regular coordination meetings. The context of what is being reported on social media platforms continues to influence the knowledge, attitude and behaviour of the users. During the reporting period, 6.84 million robocalls and 2 million text messages were disseminated in Pakistan reaching over 2.7 million beneficiaries, of which 30 per cent were female subscribers.

UNICEF supported the MNHSR&C to conduct a web-based poll to understand the impact of COVID-19 on Reproductive, Maternal, New-born, Child, Adolescent Health & Nutrition and to provide evidence for possible strategies to maintain essential health services in Pakistan during this global pandemic. This initiative helped improve critical understanding between public healthcare managers and beneficiaries of essential health services and address community perception that health centres were unsafe and a possible area for infection of COVID-19. Following Government precautions to

maintain IPC standards of health workers (HW) and health clinics, the safety of health centres was identified as a priority, with special focus on nutrition and vaccination. As a result of the findings, RCCE modules included in all healthcare trainings, with a focus on improving interpersonal communication skills for Health Workers (HWs) and Frontline workers (FLWs), and on how to address misinformation and build trust.

UNICEF established partnerships with local Community Based Organizations (CBOs) and provincial governments to support provinces in the implementation of RCCE plans and capacity building of frontline workers. These partnerships (PMA and HANDS in Sindh, AKF in GB, RSPN in KPK, AJK, Punjab and Baluchistan through government) work in coordination with other sectors and used innovative approaches to reach over 36.6 million people through mobile miking, mosque announcements and engaging key stakeholders such as religious leaders and youth groups.

Religious leaders' engagement: Through the existing polio alliances and the health programme, 24,603 religious leaders have been engaged and mobilized to promote the risk perception of the Corona virus, emphasize the importance of handwashing, use of mask and physical distancing as well as convincing other religious leaders on increasing risk perception. The religious leaders use the information provided to talk to their followers during the Friday sermons and to make announcements in mosques with key preventive messages on COVID-19. The religious leaders ensure the delivery of messages at least once a week during Friday sermons. These religious leaders also engage in promoting messages on polio eradication and Essential Immunization (EI).

Media, social-media, and production of educational materials (print/video): Social Media continues to play a very significant role in identifying how citizens perceive and are reacting to the various sources of information on the new COVID-19 vaccine. Examples include widespread mistrust of the initial vaccine, confusion over the eligibility and registration process, and high demand for political VIP to role-model and take the vaccine publicly.

Over the period from the 1st January – 3rd February 2021, UNICEF's Advocacy and Communication and Polio social media platforms have reached over 1.93 million people per Facebook post with the number of total impressions reaching over 123.6 million (Facebook: 123 million, Twitter: 215,669 and Instagram: 446,034). Additionally, WhatsApp continues to be used as an important communication channel and has been used to reach 800,053 people with information on risk perception, infection prevention and key practices related to COVID-19. The number of people engaged through social media⁴ during the reporting period is 53,390 per Facebook post and the total number of engagements reached is 3.5 million (Facebook: 3.4 million, Twitter: 4,944 and Instagram: 9,352). Expert in-depth analysis of these social platforms helped provide critical advocacy to political leaders to demonstrate positive modelling, as well as adapt messages to better reflect people's concerns and current misinformation circulating on social media.

Mobile vans, rickshaws and mobile floats were used in all provinces, including through polio and health structures, to disseminate messages on the importance of physical distancing, preventive behaviours, handwashing and hygiene. During the reporting period 8.7 million at risk people have been reached with preventive messages on COVID-19.

Feedback Mechanisms: The Polio helpline, now also used for COVID-19 purposes, receives nearly 15,000 calls per day. Due to a lack of funding, the number of hotline call-agents were reduced from 250 to 85 in November 2020 which UNICEF continues to support. In February, UNICEF accepted to support 60 additional call agents to fill the void and assure citizen's concerns are responded to. The call-agents are supported by 10 medical doctors to address technical queries from callers. The helpline has shown to have been a very effective tool to build trust between the population, the government and partners. It also informs callers on where they can get tested and/or get treatment for COVID-19, as well as receiving feedback from callers on their views and concerns which helps all partners and sectors to adjust their messaging accordingly. The helpline has received over 143,812 calls and over 142,087 calls have been responded to.

Media orientation and mobilization: A total of 3,120 journalists, reporters and bloggers have been engaged at both federal and provincial level for promoting key messages on COVID-19 and to counter negative media and COVID-19 related myths. To counter the belief that corona virus is fake, journalists and reporters continued writing about the severity of the disease, importance of testing, early professional health seeking behaviours and the importance of physical distancing as well as key behaviours to follow, such as handwashing and general hygiene. UNICEF supported the Ministry of Health in preparation of guidelines on ethical media reporting on COVID-19.

⁴ Definition of social media engagement includes likes, shares and retweets

Gaps and Challenges: COVID-19 vaccine introduction took place in February, targeting initially the most exposed frontline workers, to later expand to other FLW and the general population above 60 year. However, there was vaccine hesitancy among health workers which resulted in slow uptake of vaccine. Registration process also posed a challenge in getting the FLHWs registered.

Also, later when government announced vaccination for people above 65 years of age, there were challenges related to getting registered and access to the vaccination centres. The elderly is not a common participant group for vaccines, so dedicated RCCE efforts are being made to inform and encourage supporting family members to take their elderly to vaccination sites.

In addition, the arrival of the COVID-19 vaccine overshadowed the importance for compliance of COVID-19 SOPs, thinking with the arrival of vaccines, there was no longer a need to observe other preventive SOPs.

RCCE responded to these through massive positive vaccine campaigns, both in media and social media, as well as with key influencers and religious leaders at both federal and provincial levels. Developing the knowledge management cell, with updated FAQ in text, radio and video forms, and strengthening coordination at all levels to work from harmonized approaches and strategies defined in the National COVID-19 Deployment Plan.

Partnerships: UNICEF is working with the federal and provincial governments as well as implementing partners which include: WHO, UNHCR, UNDP, FAO, UNAIDS, UNESCO, UNODC, UNWOMEN, UNFPA, UN HABITAT, UNRC, WFP, ICRC, PRCS, GRASP/ITC, Digital Pakistan, UNILEVER, Daraz.pk, Zong4G, AKF, HANDS, Pakistan Medical Association.

2. Infection Prevention and Control:

Coordination: UNICEF Pakistan aligned its COVID-19 IPC/WASH response with UNICEF global guidelines for emergency prevention and control of the disease and resilience-building against future outbreaks. UNICEF worked in close collaboration with the government, WHO and other sector partners (CSOs).

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

The IPC/WASH sector, with support from UNICEF and the Global WASH Cluster (GWC), has developed an online dashboard which gives a visual view of the 4Ws matrix analysis, showing progress by each partner in each location. The online version is accessible through the following [link](#).

Response: UNICEF implemented WASH/IPC interventions across the whole country, focusing its efforts in 20 of the 27 high burden districts. During Jan-Feb 2021, UNICEF rehabilitated and installed WASH facilities which included Ultraviolet (UV) water filters, toilets and handwashing stations in 71 Healthcare Facilities HCFs, (Sindh: 24, KP: 2, and Balochistan: 45). More than 138,000 people gained access to safe drinking water and sanitation facilities in these HCFs contributing towards reducing the risk of COVID-19 infection among the healthcare workers.

UNICEF utilized existing WASH programs such as Clean and Green Pakistan and communication networks of volunteers in hygiene promotion and in supporting RCCE efforts. Given the travel restrictions, UNICEF used digital and social media platforms to engage with communities, including with religious leaders in hygiene promotion. To promote handwashing by the public as one of the critical COVID-19 prevention and control measures, UNICEF supported fabrication and installation of 718 handwashing stations placed at strategic points in cities and communities. Over 674,295 people were supported with hygiene promotion services including COVID-19 prevention and control information. Over 1.8 million people accessed 718 handwashing stations at communal points in affected areas.

UNICEF supported the training of 869 frontline sanitary workers, health workers on WASH/IPC in HCFs and high-risk communities on WASH/IPC.

UNICEF reached 16,500 children (8085 girls and 8415 boys) in 110 schools (KP: 3, Balochistan: 23, Sindh: 84) with WASH/IPC services, 51 per cent of whom are girls. UNICEF also provided disinfection services and supplies to some of the schools reached so far.

Under the coordination of MOCC, sector partners, including UNICEF have, to date, provided WASH services to 1,501 HCFs reaching more than 9.17 million people. During the reporting period, 4,113 handwashing stations were installed reaching 16,500 children in learning facilities. Over 28.33 million people were supported with hygiene promotion services including COVID-19 prevention and control information.

Gaps and Challenges: Solid Waste Management (SWM) and drainage emerged as major challenge during the pandemic. People discarded used PPE indiscriminately in public places and in healthcare facilities. However, as solid waste management has not been part of UNICEF's regular programme, UNICEF had limited resources and technical knowledge to help government in addressing such challenges including in the highly contaminated areas such as (ICU and Isolation facilities). To mitigate on SWM challenges, UNICEF engaged WHO through the UN technical working group and WASH sector partners through the coordination meetings to allocate resources towards the identified gaps.

Partnerships: During Jan-Fen 2021, UNICEF worked with the federal and provincial governments as well as with implementing partners including: AKF, IRP (Islamic Relief Pakistan), HANDS, SRSP, WASA Lahore, WSSC Swat, WSSC Abbottabad, WSSP, Peshawar, BRSP, Unilever and DFID, WHO, UNFPA and UN-Habitat.

3. Psychosocial Support and Child Protection:

Coordination: Protection sector including child protection and GBV sub sectors are functioning and regularly coordinating COVID-19 response at the national as well provincial level. Protection sector leads (UNICEF, UNHCR and UNFPA) agreed after consultation with National Disaster Management Authority (NDMA) to hold joint coordination meetings instead of separate meetings of the sub sectors. During the reporting period two joint protection sector meetings were held specifically focussing on the COVID-19 response and finalized monitoring mechanism with key indicators for Humanitarian Response Plan (HRP) 2021. Child protection sector along with protection and GBV will monitor the status of implementation of COVID-19 in line with the HRP 2021. A 4Ws (Who is Doing What, Where and When) matrix with monitoring indicators has been finalized and shared with partners for reporting, on quarterly basis, progress in response to COVID-19 and other humanitarian situations. The Minimum Standards for protective spaces were finalized by the KP Child Protection sub working group and has been notified by Provincial Disaster Management Authority (PDMA) for further use by the member organizations.

Response: In the first two months of the year child protection continued with the COVID-19 response initiated in 2020, focusing on provision of MHPSS, response to cases of violence against children and messages on stigma and violence Against Children (VAC) prevention.

To date in 2021, a total of 2,306 social workforce professionals (882 women and 1,424 men) have been trained in psychosocial support and stigma prevention in all provinces through the package developed by UNICEF (Punjab: 80, KP: 1,939, Sindh: 75, Balochistan: 140, GB: 19 and PAK: 53)

A total of 69,491 parents, caregivers, children and individuals (12,679 girls, 11,769 boys, 23,497 women, 21,546 men) received Psychosocial Support and Services (PSS) by trained social workforce professionals (Punjab: 64,101, KP: 3,408, Sindh: 866, Balochistan: 800 and GB: 316). This includes 43,861 Individuals (7,381 Girls, 7,481 Boys, 14,922 women and 14,077 men) who received specialized counselling sessions in Sindh, Punjab, KP and Balochistan. In response to violence against children, a total of 656 children (200 girls, 456 boys) received child protection services supported by UNICEF in Sindh, Punjab and Balochistan.

In the first two months of the year, stigma and violence against children messages reached 202,315 people through various platforms.

Gaps and Challenges: Due to compliance of COVID-19 SOPs and social distancing, the outreach through direct community engagement remained low in Punjab especially with regards to raising awareness on stigma prevention and violence against children issues. Therefore, social and print media was used to disseminate messages for achieving the targets. Likewise, the team in Balochistan faced problems in arranging online trainings for frontline workers due to their busy schedule, extended work hours as well as unavailability of electricity and an internet connection. Additionally, there is significant funding gap to cover psychosocial support and child protection interventions during 2021. However, the ongoing partnerships from 2020 and the previously available resources are supporting continuity of the existing response.

Partnerships: UNICEF is working with the Federal and Provincial Governments as well as implementing partners including DANESH (Drugs and Narcotics Educational Services for Humanity), Agha Khan Foundation, DevCon, School of Leadership Foundation and PAHCHAAN (Protection and Help of Children Against Abuse and Neglect).

4. Health:

Coordination: As a member of the national and provincial level coordination, UNICEF is working closely with MNHSR&C, Provincial Health Departments, UN, Development partners, Academia and CSOs in the response to the COVID-19 pandemic.

UNICEF as the chair of Health Population Nutrition Development Partners Group (HPNDPG) organized first meeting of the Year 2021 on 18th February 2021, where it handed over the chairmanship to the UK's Foreign, Commonwealth and Development Office (FCDO) for this year. During the meeting, UNICEF highlighted the issue of COVID-19 with the development partners. The partners shared details of their respective response activities pertaining to COVID-19 and pledged to continue and coordinate their support to the COVID-19 response.

Response: UNICEF is supporting the Provincial and Regional health departments to ensure continuation of essential primary healthcare services including immunization, Ante-Natal Care (ANC), Post-Natal Care (PNC), delivery services, childcare and curative care for adults in 136 targeted health facilities reaching 582,348 people during the reporting period (Balochistan :14,743; Sindh: 435,659; KP: 17,850 ; Punjab: 114,096). Measles immunization reached a total of 14,290 children (under 1 year) (Balochistan: 1,780; KP: 1,095; Sindh: 6,460; Punjab: 4,955) during the reporting period in the 136 UNICEF supported health facilities. UNICEF has provided basic PPEs (gloves, sanitizers and masks) to 460 frontline health workers during the reporting period (KP:60; Sindh:400). During the reporting period, UNICEF supported the IPC training of 3,844 health workers, 533 in addition, UNICEF also supported the training of 533 frontline health workers and community volunteers (Punjab: 40, KP: 161, Sindh: 332) on COVID-19 and case identification and referral of suspected cases and 229 Paediatricians and Family Physicians were trained on Clinical Management of Children with COVID-19 (Punjab: 18, KP: 211).

Gaps and Challenges: Community adherence towards COVID-19 preventive measures remain a major challenge and disinformation regarding COVID-19 vaccine has created doubts among communities which may lead reduced uptake of COVID-19 vaccine. Also, shortage of PPEs for health care providers remains a major challenge and procurement of UCC completed, equipment received 4th March, is being installed at national level and high burden districts (15) might delay procurement of Pfizer vaccine.

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

5. Nutrition:

Coordination: Sector coordination continued under the joint leadership of the government of Pakistan and UNICEF. To coordinate and oversee the nutrition response to the COVID-19 pandemic, a total of 10 meetings of the Nutrition Working Group (NWG) took place in 2021, 3 at National and 7 at the sub-national level (KP 1, Punjab 02, Sindh 02, and 02 in Balochistan). In Punjab, a nutrition consultative meeting was organised in collaboration with the P&D Board. These

meetings resulted in development of the Nutrition Response Plan and Nutrition road map. The Integrated Service Delivery action plan developed and shared with Punjab EOC for approval and endorsement.

Response: During the reporting period, a total of 2,797 UNICEF supported health sites provided nutrition services across Pakistan. A total of 78,036 children (girls: 39,670; boys: 38,336) were screened while 26,545 children (girls: 14,711 and boys: 11,834) were treated for SAM in 2021 (Balochistan: 4,781; Sindh: 12,982; KP: 5,282 and Punjab: 3,500). A total of 48,520 children 6-59 months (girls: 24,398 and boys: 24,122) received Multi-micronutrient supplementation (Balochistan: 11,329 and KP: 37,191) during the reporting period.

With UNICEF Support, approximately 10,066 people were reached for IYCF messages in COVID-19 context, through social media (Facebook, Twitter, WhatsApp and Instagram). Through community engagement efforts, 345,013 mother/caregivers (KP: 37,444; Balochistan: 31,884, Punjab: 111,375 and Sindh 164,310) were reached for COVID-19 sensitive IYCF, BF and nutrition messages in the community. In Sindh, UNICEF in collaboration with DoH completed integrated health, nutrition, and WASH interventions in 5 rain/flood-affected districts (Mirpurkhas, Badin, Sujawal, Sanghar, Umerkot) with 20 mobile teams, (4 mobile teams/ district) on 4th February 2021 and 24,371 children under age five were screened, 5,506 children were provided with MNP, 1,041 SAM children were enrolled in OTP program and 1,718 IYCF sessions were conducted for PLWS and caregivers. IYCF communication messages were installed at major population sites in 13 districts of Sindh and 1500 flyers on COVID -19 preventive messages are in pipeline for dissemination.

In Sindh, 809 Health care providers (68 male and 741 female) capacitated on IYCF, IPC using training package. In Baluchistan, a total of 158 (40 males and 118 females) frontline health care providers capacitated on CMAM and IYCF in district Kech and Loralai.

UNICEF is supporting the revitalization of the Baby-Friendly Hospital (BFHI) initiative in Pakistan, in this regard, health facility assessment in the prioritized districts has been initiated during the reporting period. During the COVID-19 pandemic 32.3 million children or 88.3 per cent of the target reached with Vitamin A supplementation campaign held in the second week of Jan 2021.

UNICEF bridged the shortfall of nutrition supplies in Punjab with provision of 12,000 RUTF and 100,000 MMS

Gaps and Challenges: UNICEF supported nutrition services in KP, including NMDs, will see a reduction in the number of nutrition sites for SAM treatment by the end of the first quarter of 2021 if additional funds are not available. This would result in closure of 85 Nutrition sites in Newly Merged Districts which will deprive 399,212 children 6-59 months of Nutrition services including 19,961 from lifesaving treatment of severe acute malnutrition without complications.

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

6. Education:

Coordination: UNICEF as education sector lead is supporting education stakeholders including government and non-government partners in coordinated and harmonized response to COVID-19 in Pakistan. With schools now reopened in the country, it is critical that parents, teachers and children follow the COVID-19 Standard Operating Procedures (SOPs) to minimize the risk of infection.

The Education sector organized a meeting on 5th February 2021, to discuss the monitoring mechanism of Humanitarian Response Plan (HRP) 2021 developed earlier. The sector is working closely with Government and sector partners to ensure commitments from various stakeholders are adhered to for smooth operations of schools keeping in view the second wave of Pandemic. The Education Sector is regularly coordinating and monitoring the education response interventions at national and provincial level by collecting and analysing data on standardized performance indicators and ensuring reporting on 4Ws to coordinate the activities.

The School Education Department has launched the Innovative Teachers' Support Package (ITSP) in Punjab for all primary school teachers. The ITSP will utilize a blended learning approach for improving pedagogical skills combined with face-to-face instructions and digital learning. Teachers will also have access to the digital materials at home.

Response: On 4th January 2021, the Minister of Federal Education and Professional Training (MoFE&PT) announced that all educational institutions in Pakistan will reopen in three phases. Grade 9-12 students started schooling on 18th January while students from pre-school to grade 8 returned to schools by 25th January 2021. Universities resumed on campus classes from 1st February and all board examinations have been postponed to May/June 2021. Education departments and related monitoring authorities are conducting extensive monitoring of schools to ensure that SOPs of safe functioning of schools are followed.

To support schools' readiness, UNICEF is working with national and provincial education authorities for safe return to schools. UNICEF is supporting the roll out of the guidelines and SOPs through corresponding training manuals/packages, 7,310 teachers/education officers (2,555 female) were trained in safe reopening of schools, and 2,995 teachers/education officials (1,605 female) on Mental Health and Psychosocial Support (MHPSS). The safe school protocols (infection prevention and control) have been implemented in 1,181 Alternate Learning Programme (ALP) centres and a total of 79,131 children (23,638 girls) were able to access safe education in UNICEF supported ALP centres, encouraged by (SOPs trained) teachers to practice safe school protocols.

Various communication channels were used to reach out to communities, parents such as WhatsApp groups, social media including Facebook, Instagram and Tweeter with messages to encourage the continuity of learning reaching 249,707 parents (27 per cent women),

UNICEF launched the Continuity of Learning (CoL) campaign during the Education Week (20-25 January) which continued in February covering the "International Education Day" on 24th January. These included sharing content through UNICEF Social Media Platforms (Facebook, Twitter and Instagram) which received 7.8 million impressions (Views) and 62,925 engagements (likes, shares and comments). These materials included English and Urdu version of 4 posters and short animated videos. In addition, two celebrity endorsements on Continuity of learning at home and school and being safe at school by adhering to the SOPs video messages were viewed by approximately 2.2 million audience while around 135,000 people have directly engaged with these posts. The same materials have been disseminated by federal and provincial education social media official accounts reaching a wider audience in provinces too. Two hashtags are currently used #LearningNeverStops and #SafeAtSchool. The campaign has progressed from school closure to partial re-opening to the full re-opening. During school closure slogan "Technology has brought school home" along with hashtag #LearningNeverStops was used. During partial school re-opening main campaign title remained same and hashtag #LearningNeverStops and #SafeAtSchool. The campaign is still continuing with more focus on staying safe at school and adhering to SOPs.

To ensure safe and protective functioning of UNICEF supported 380 ALP centres in KP, Risk Communication Community Element (RCCE) material for parents and children has been provided, Health & Hygiene Committees (HHC) have been formed in centres and orientation on the roles and responsibilities conducted in these centres, in total 10,690 learners including 7,117 girls are back to these ALPs.

In Sindh, UNICEF supported the School Education and Literacy Department to design and air Public Service Messages (360 spots) through FM 105 Radio in 18 Districts on COVID-19 SOPs. Messages related to COVID-19 were sent through SMS reaching 296,364 (female 83,336) teachers, education officials at regional, districts and taluka level and members of School Management Committees in all 29 districts. 100,000 copies of the children's version of safe school reopening materials (guide) has been disseminated to public-sector schools.

The National Continuity of Learning Framework is under the final review process.

Gaps and Challenges: Some of the high enrolment urban schools have difficulties to maintain safe distance as recommended in the SOPs. Schools in Newly Merged Districts (NMDs) of KP province face challenges in procurement of necessary supplies including hand soaps, sanitizers for prevention of COVID-19, due to non-availability of Parent Teacher Committee (PTC) funds (such funds were extended to schools in rest of KP). UNICEF supported activation of PTCs and PTCs are encouraged to open bank accounts as accounts are a pre request for accessing school improvement funds. Advocacy has been started with government education and finance departments for the provision

of PTC funds). In Sindh province, overall adherence to SOPs by schools is limited. UNICEF is supporting Education Department to schedule urgent Regional Level meetings of officials of School Education Department to review issues related to compliance of SOPs, the use of SMC Funds for COVID-19 supplies and continuity of learning measures.

Although lack of funding posed significant challenges for the implementation of SOPs after schools were re-opened to ensure safe school operations, UNICEF continued to support the COVID-19 response through existing partnerships and deployment of innovative distance education programmes, such as virtual training of teachers in Balochistan and SMS/Whatsapp messaging to parents and SMC members

Partnerships: Ministry of Federal Education, Provincial Education Departments, Indus Resource Center, Knowledge Platform, Microsoft, Viamo and SABAQ Foundation.

Adolescent and Youth Development and Participation

Coordination: School of Leadership Foundation (SOLF), in partnership with UNICEF, has launched Phase 2 of the "Coping with Corona" campaign which will engage adolescents aged 13 - 19 years in the COVID-19 response. The Campaign was launched in the first week of January 2021. The main objectives are: 1) Strengthen the capacities of adolescents to prevent the spread of COVID-19 infection, to themselves, their families, and communities. 2) Prevent negative behaviours including, abuse, violence, neglect, and exploitation and promote mental health and wellbeing, safe return to schools, and young people's resilience.

Response: A UNICEF Adolescents initiative for COVID-19 engaged and partnered with young people to facilitate adolescents' participation in COVID-19 response and empower them towards resilience building. A core group of 200 adolescent ambassadors from across Pakistan through an online registration process were registered, and were given online 3-hour training on COVID-19 response to improve their ability to prevent negative behaviours including, abuse, violence, neglect, and exploitation, and promote mental health and wellbeing and their safe return to school. Each of the 200 trained adolescents will further train 10 adolescents from their communities on a simplified version of the content through posters, following all SOPs training. Through this campaign, UNICEF will be able to reach out to 4.5 to 5 million adolescents digitally and nearly 20,000 adolescents in person.

Under the partnership with SOLF, 174 Adolescents Ambassadors (98 boys, 76 girls) have been trained through digital sessions on modules focusing on, SOPs, Psychological First Aid, Stigma & Violence Prevention, and Resilience building in young people. To maximize outreach to adolescents in high-risk areas the ambassadors will engage in cascade training through in-person information dissemination sessions through on-ground sessions.

UNICEF and its partners have also conducted a training of trainers with 24 youth facilitators from high burden districts. These 24 youth facilitators have directly trained 25 Adolescents in each district. So far, more than 600 adolescents have been reached out by the adolescents who were trained by the youth facilitators. Now, all adolescents have committed to further cascade the training to 10 other peers in the community. All ambassadors have received their training kits which they will start using in their community Rollouts.

SOLF and UNICEF have also managed to include the session on information collection, analysis, and reporting. The trainers have also discussed the importance and methodology of the process. An online link to the form was shared with them to fill in the details. We have received feedback on some options given in the questions. The survey form has been updated and shared with adolescents in their WhatsApp groups. The form can be accessed at <http://bit.ly/3d21tmy>

SOLF has posted 8 content pieces on all social media platforms including Twitter, Facebook, and Instagram, which were also reshared by our ROSA official Facebook and Twitter accounts. The content was designed around myth-busting, social distancing, mental health, staying safe at school, and prevention of stigma that has reached over 400,000 adolescents and young people. Additionally, young ambassadors and Twitter bloggers have been engaged and have started posting content around #AdolescentsFightCorona on all social media platforms including Facebook, Twitter, Instagram and online blogs.

For a wider outreach of the campaign, with the support of our partner SOLF, UNICEF also designed and aired radio public service messages on leading FM radio channels across Pakistan. The idea was to add some character-based

Public Service Messages (PSMs) for children/adolescents, specifically, and Safe at School, Prevention of Violence Against Children, Prevention of Stigma, and Psychological First Aid. The Captain Care radio message was aired on leading FM Radio channels in Urdu in large urban cities including Islamabad, Multan, Lahore, Karachi, and Peshawar. The radio messages have reached 1.4 million people so far with over 1,500 calls received during the shows where the PSM was aired.

Partnerships: School of Leadership Foundation (SOLF), Viamo, UNDP, UNESCO, UNFPA and UNHCR.

Supply and Procurement Services

Procurement is ongoing for COVID-19 related supplies from both World Bank and ADB funding. During January and February 2021, supplies to the value of approximately US\$5.5 million have been imported into Pakistan through UNICEF to support the COVID response. These include COVID-19 testing kits and associated equipment, PPE and Oxygen equipment. Hand sanitiser has also been procured locally. The distribution of these supplies is currently ongoing in consultation with the Ministry and NIH. A handing over ceremony of the ADB funded oxygen concentrators to MNHSR&C was held on 4th Jan 2021, with the participation of representatives from UNICEF, Ministry of Health, and ADB. The event was highlighted on PCO social media platforms.

To upgrade the storage capacity to meet the requirements for COVID-19 vaccines that require -70C storage, with ADB funding, 23 Ultra Cold Chain (UCC) Freezers along with accessories have been ordered from China. The UCC Freezers will be installed in 17 locations across the country along with training of end-users. To support the operation of the UCC equipment, generators and air conditioners are being procured through the local market will also be installed at the designated facilities as requested by the government.

Ongoing challenges are being experienced in terms of securing supply of COVID related supplies due to the high demand globally. This has led to suppliers being unable to adhere to the delivery dates that were originally agreed to, which has become particularly noticeable during the second wave of COVID-19. In some cases, shipments have been delayed for one to two months. Challenges are also being seen with international transportation, particularly from China, where a shortage of shipping containers in-country is causing delays in manufacturers being able to ship their products. Pakistan is expecting to receive 4,212,000 vaccine doses from the COVAX facility, the delivery date is yet to be confirmed.

Humanitarian Leadership, Coordination and Strategy

NATIONAL COORDINATION

The National Security Committee, chaired by the Prime Minister, established a National Coordination Committee (NCC), to formulate and implement a comprehensive strategy to stop the transmission of the virus and mitigate its consequences. The NCC established the National Command and Operating Centre (NCOC) to synergize and articulate a unified national effort to respond to the COVID-19 pandemic, and to implement NCC's decision. It also designated the National Disaster Management Agency (NDMA) as the leading operational agency. In each province, the Chief Ministers have convened task forces to coordinate the response, with the Provincial Disaster Management Agencies (PDMA) as the leading provincial operational agency. Furthermore, the Emergency Operation Centre (EOC) at the National Institute of Health (NIH) has been activated as an Incident Command and Control Hub. A technical working group with 3 sub committees for RCCE, supply/cold chain and vaccine logistic and surveillance of AEFI (Adverse Event Following Immunization) have been established at Federal EPI. They report weekly on the readiness level to deputy director program at MoH

UNICEF contributed to the development of the National Vaccine Deployment Plan (NVDP), prioritization of eligible populations for vaccination and application for COVAX vaccines exercise, National Immunization Technical Advisory Groups (NITAG) and National Interagency Coordination Committee (NICC). The Pakistan application to the first wave of Pfizer vaccine was not successful and the country has sent an expression of interest for the second wave.

UN COORDINATION

The UN in Pakistan has established a Crisis Management Team (CMT) comprising of: WHO; UNICEF; WFP; UNHCR; UNFPA; IOM; UNOCHA; UNDP; UNAIDS; DSS and the RC which meets every Tuesday. For COVID-19 vaccine

introduction, together with national authorities, WHO, WB and donors, UNICEF is part of the country Technical working group and sub committees on cold chain/vaccine logistics and RCCE. UNICEF is supporting the planning for cold chain and vaccine need assessment and procurement, as well as RCCE.

UNICEF's Response Strategy

UNICEF Pakistan is working through a multipronged response strategy which includes: (1) public health response to COVID-19, (2) continuity of essential services and (3) mitigation of the socio-economic impact of COVID-19. To support breaking the current chain of transmission the public health response is focused on the 15 high burden areas (21 districts)⁵ most affected with the highest number of new COVID-19 cases and high case test positivity rates since October 2020 – the 2nd wave of COVID-19 in Pakistan.

Public health response to COVID-19

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

Continuity of essential services

- **Continuity of education and learning** to ensure teachers, parents and students are informed about COVID-19, continuity of learning and facilitate safe reopening of schools and learning education institutions.
- **Building resilient primary healthcare system** for managing mild cases and referral of severe cases with the aim to strengthen primary healthcare (PHC) system and ensure continuity of life saving basic health services like MNCH and immunization.
- **Essential nutrition support for vulnerable children and families** with the aim to ensure access to promotional, preventive and curative nutrition services to people affected by and people at risk of Coronavirus infection, with a focus on nutrition vulnerable groups.

Mitigation of the impact of COVID-19

Advocacy through (a) parliamentary engagement on child sensitive budgeting; (b) national and provincial advocacy, including joint advocacy with other UN agencies and partners, in support of the COVID-19 socio-economic impact framework and plan, and (c) implementation of the UNICEF Pakistan Advocacy plan 'Response and Recover' to COVID-19.

Evidence generation on (a) multi-dimensional child poverty analysis to influence policy action and allocations, (b) development of Nutrition Sentinel Surveillance system to provide routine information on nutrition and inform policy and programme action and (c) VAC study to identify and respond to violence against children due to the COVID-19 response.

⁵ Mirpur, Muzaffarabad, Hyderabad, Karachi (sub-divided into 7 districts), Peshawar, Quetta, Islamabad, Lahore, Abbotabad, Swat, Gilgit, Rawalpindi, Faisalabad, Multan and Gujranwala.

Systems Development: (a) Continuing engagement in the finalization of the Universal Health Benefit Package and tools that are COVID-19 sensitive, (b) Education sector analysis and planning, (c) provision of alternative care for children without parental / family care and (d) positioning of civil registration and vital statistics (CVRS) in the context of COVID-19.

Social Protection: Technical / advisory support (studies) to the emergency cash transfer scheme on children to inform medium term policy action on child-sensitive social protection programme in Pakistan.

Human Interest Stories and External Media

During the reporting period, UNICEF continued its social media campaign calling on people to keep adhering to COVID-19 preventive behaviours even as the vaccine starts being rolled out in the country. In particular, UNICEF released a video featuring a young girl mobilizing her peers to help reduce virus transmission as part of UNICEF ROSA's 'Team Kind' campaign and released content as part of the joint UN 'Coping with corona: second wave' campaign targeting adolescents and young people.

UNICEF documented the handing over of Oxygen Concentrators to MoNHSRC with support from Asian Development Bank during an official ceremony.

TCV (Typhoid Conjugate Vaccine) campaign: In February, UNICEF supported the TCV campaign to immunize children against typhoid in Punjab and Islamabad Capital Territory through a campaign on social media. The exclusive hashtag #MissionTyphoid reached out to 30.7m+ unique users and created an impact of 93.4m+ impressions.

Other areas of work: UNICEF supported an advocacy seminar on 'Protection & promotion of breastfeeding' at the President Office in the presence of the President, the First Lady, the Special Assistant to the Prime Minister on Health and UNICEF Representative in Pakistan. UNICEF documented the signature of a MoU between UNICEF and the Government's 'Kamyan Jawab' youth programme in support of the development of an Adolescent Equality.

LINKS

COVID-19

Tips on remote learning:

<https://www.facebook.com/watch/?v=737398613630171>

<https://www.facebook.com/watch/?v=1561025130760319>

<https://www.facebook.com/watch/?v=462625561428876>

<https://www.facebook.com/watch/?v=3542879039099010>

<https://www.facebook.com/watch/?v=3688289484621194>

Safe At School video series with celebrities:

<www.facebook.com/unicfpakistan/videos/909152606584291>

<www.facebook.com/watch/?v=243438333996948>

<www.facebook.com/unicfpakistan/videos/719791408903280>

<www.facebook.com/watch/?v=719057108753911>

COVID-19 Youth hero: Mahnoor

<www.facebook.com/watch/?v=1342123159466879>

PakYouthDiaries: COVID-19

Mohammad Fareed: <www.facebook.com/watch/?v=268488404853157>

Handing over of Oxygen Concentrators to MoNHSRC with support from ADB

Video: <www.facebook.com/watch/?v=168944954762482>

TCV SOCIAL MEDIA CAMPAIGN

<www.facebook.com/watch/?v=2779002588986645>

<www.facebook.com/watch/?v=2805187049756483>

<www.facebook.com/watch/?v=1666511486852310>

CLIMATE YOUTH CHAMPION

Zymal Umar: www.facebook.com/watch/?v=1268199080216934

NUTRITION

Advocacy seminar on 'Protection & promotion of breastfeeding' at the President Office

www.facebook.com/watch/live/?v=1148357795608774&ref=watch_permalink

Next SitRep: 1 April, 2021

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Annex A

Summary of Programme Results 2021*

Sector	UNICEF and Operational partners			Task Force /Sector		
	Target	Results	Change since last report ▲▼	Target	Results	Change since last report ▲▼
Risk Communication and Community Engagement (C4D)						
Number of People engaged through social media	550,000	53,390				
People reached (through national Media channels) with messages (on COVID-19 prevention and) on access to services	75,000,000*	42,000,000				
Number of at-risk populations reached through community engagement activities.	16,000,000*	8,700,000				
Number of callers through the national Helpline who shared relevant concerns, received clarifications, and provided feedback.	3 000 000	142,087				
Infection Prevention and Control (WASH)						
People reached with handwashing behaviour change programmes	1,001,038	674,295		1,850,000	674,295	
Children accessing appropriate water, sanitation and hygiene facilities and hygiene services in learning facilities and safe spaces.	72,000	16,500		150,000	16,500	
Number of health facilities provided with essential WASH services.	200	71		370	71	
Number of community sites with handwashing facilities in the affected areas.	800	718		1,450	718	
Psychosocial Support and Child Protection						
Children and caregivers accessing mental health and psychosocial support.	263,664*	69,491		439,438	69,491	
People reached with prevention messages on stigma and violence against children, including gender-based violence.	2,307,050*	202,315		3,845,080	202,315	
Children and adolescents who received child protection services, including gender-based violence services.	65 916	656		109,859	656	
Number of social and care workers trained on psychosocial support and stigma reduction.	10 234	2,306		17,057	2,306	
Education						
Children accessing safe formal and non-formal education, including ECE.	533 451	79,131		1,040,803	106,131	
Schools (formal and non-formal) implementing safe school protocols (infection prevention and control).	5 335	1,181		9,736	1271	
Teachers /education officials trained on MHPSS (Mental Health and Psychosocial Support)	10 675	2,995		16,687	3,115	
Teachers /education officials trained on safe reporting/operation of schools	10 675	7,310		16,687	7,430	
Parents reached with messages encouraging learning activities (through SMS and different social media).	1 067 541	249,707		2,133,804	259,798	
Building Resilient Health Systems						
Children and women accessing primary healthcare in UNICEF-supported facilities.	1 758,163	582,348				
Health care facility staff and community health workers trained on infection prevention and control	20,000	14,290				
Children under 2 years vaccinated against measles.	247,242	460				
Frontline health workers provided basic PPEs.	150,000	3,844				

Frontline HWs and community volunteers oriented on COVID-19.	50,000	533			
Pediatricians & Family Physicians Trained on Clinical Management of Children with COVID-19.	2,000	229			
Nutrition					
Children aged 6 to 59 months with severe acute malnutrition admitted for treatment	102,413	26,545		167,857	35,762
Primary caregivers of children aged 0 to 23 months receiving infant and young child feeding counselling	571,607	345,013		862,915	369,017
Children aged 6 to 59 months receiving multiple micronutrient powders	813,940	48,520		813,940	48,853

*These results are for 2021 response achieved during the current reporting period. Some of the targets (marked with *) are being changed and will be reflected in a revised HAC 2021.

Cumulative Response COVID-19 (2020/2021)**						
Sector	UNICEF Results			Sector Results		
	2020	2021	Cumulative Results	2020	2021	Cumulative Results
Risk Communication and Community Engagement (C4D)						
Number of People engaged through Social Media	41,895	53,390	41,895			
People reached (through national Media channels) with messages (on COVID-19 prevention and) access to services	83,000,000	42,000,000	83,000,000			
Number of at-risk populations reached through community engagement activities.	36,640,791	8,700,000	37,102,079			
Number of callers through the national Helpline who shared relevant concerns, received clarifications, and provided feedback.	5,428,871	142,087	5,428,871			
Infection Prevention and Control (WASH)						
People at high risk of COVID-19 supported with hygiene promotion activities and facilities	10,247,624	674,295	10,921,919	28,330,000	674,295	29,004,295
Number of health facilities provided with essential WASH services*	701	71	772	1,477	16,500	17,977
Number of community sites with handwashing facilities in the affected areas	2,138	718	2,856	3,767	71	3,838
Number of schools in targeted high-risk areas supported with IPC measures and improved water and sanitation	1,352	110	1,462	1,750	718	2,468
Psychosocial Support and Child Protection						
Children and caregivers accessing mental health and psychosocial support	216,144	69,491	285,635	219,007	69,491	288,498
People reached with prevention messages on stigma and violence against children, including gender-based violence	51,820,082	202,315	57,734,795	58,151,353	202,315	64,066,066
Children and adolescents who received child protection services, including gender-based violence services	947	656	1,603	947	656	1,603
Number of social and care workers trained on psychosocial support and stigma reduction	8,290	2,306	10,596	8,388	2,306	10,694
Education						

Children accessing safe formal and non-formal education, including ECE.	79,131	1,181	80,312	8,814,507	1,271	8,815,778
Schools (formal and non-formal) implementing safe school protocols (infection prevention and control).	NA	79,131	79,131	NA	106,131	106,131
Teachers / education officials trained on MHPSS (Mental Health and Psychosocial Support)	28,258	2,995	31,253	538,494	3,115	541,609
Teachers / education officials trained on safe reopening/ operation of schools	3,035	7,310	10,345	3,035	7,430	10,465
Parents reached with messages encouraging learning activities (through SMS and different social media).	278,857	249,707	528,564	354,864	259,798	614,662

Building Resilient Health Systems

Children and women accessing primary health care in UNICEF-supported facilities	3,459,844	582,348	4,042,192			
Health care facility staff and community health workers trained on infection prevention and control	215,241	14,290	229,531			
Children under 2 years vaccinated against measles	104,565	460	105,025			
Frontline health workers provided basic PPEs	137,079	3,844	140,923			
Frontline HWs and community volunteers oriented on COVID-19	92,273	533	92,806			
Pediatricians & Family Physicians Trained on Clinical Management of Children with COVID	NA	229	229			

Nutrition

Children aged 6 to 59 months with severe acute malnutrition admitted for treatment	161,702	26,545	188,247	228,819	35,762	264,581
Primary caregivers of children aged 0 to 23 months receiving infant and young child feeding counselling	1,575,965	345,013	1,920,978	1,898,018	369,017	2,267,035
Children aged 6 to 59 months receiving multiple micronutrient powders	NA	48,520	48,520	NA	48,853	48,853

**This second table provides achievement since the beginning of response in 2020 till the current reporting period.

Annex B

Funding Status:

Sector	Requirements	Funds available		Funding gap	
		Humanitarian resources received	2020 carry forwarded funds	\$	%
Nutrition	16,367,560	300,000	3,011,199	13,056,361	80%
Health	4,237,920	0	2,326,955	1,910,965	45%
Water, sanitation and hygiene	14,642,291	0	376,892	14,265,399	97%
Child protection, GBViE and PSEA	9,887,364	35,749	882,589	8,969,026	91%
Education	4,708,089	0	9,731	4,698,358	100%
C4D, community engagement and AAP	4,708,800	0	444,509	4,264,291	91%
Emergency preparedness	1,177,200	64,251	28,787	1,084,162	92%
Total	\$55,729,224	\$400,000	\$7,080,662	\$48,248,562	87%