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Nutrition Education Session with Mother Support Group, BHU Niakhū, Upper Chitral, KP

Pakistan

COVID-19 Situation Report No. 25

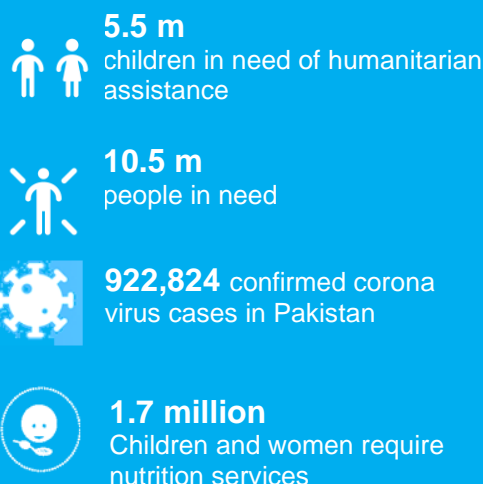


Reporting Period: 1st – 31st May 2021 (monthly)

Key Highlights

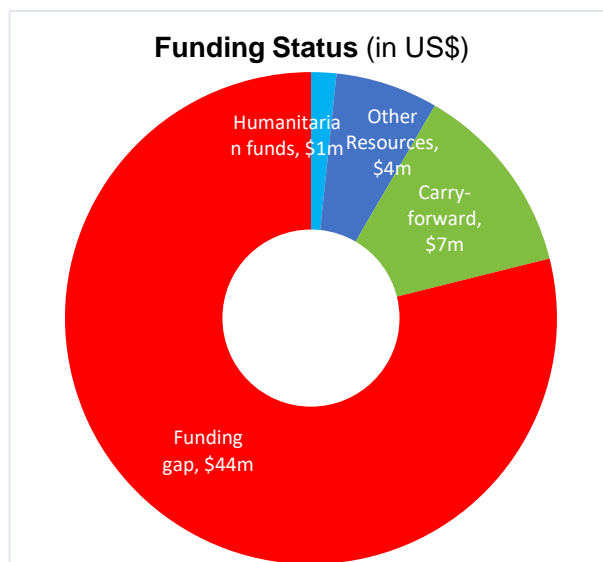
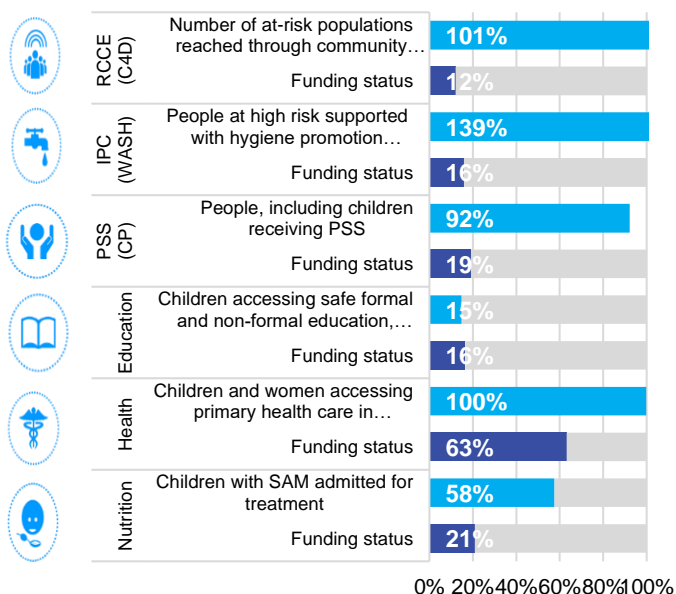
- In May the third wave of COVID-19 continued in Pakistan with positive cases ranged from 4,414 on 1st May to 1,771 positive cases on 31st May 2021. (<https://covid.gov.pk/stats/pakistan>)
- Over 49.9 million people reached (over 2.37 million new) with messages on COVID-19 prevention and on access to services through UNICEF support.
- Through UNICEF supported health sites, 58,939 SAM children were admitted for Severe Acute Malnutrition treatment with 12,906 children admitted during the reporting period.
- Over 1.75 million people benefited from continuity of primary healthcare services at UNICEF supported health facilities, including 285,988 people during the reporting period.
- Through UNICEF support, 330,768 parents, caregivers, children and individuals have been reached with psychosocial support through trained social workforce, 106,238 during the reporting month.
- Through UNICEF support 1,387,713 people (158,915 new) were reached with handwashing behaviour change programme.

Situation in Numbers



UNICEF's Response and Funding Status

UNICEF Appeal for Preparedness and Response
US\$ 55.73 million



Funding Overview and Partnerships

In 2021, UNICEF Pakistan needs US\$ 55.73 million to support the in-country humanitarian response. The country has mobilised US\$ 11.76 million (21 per cent) to provide humanitarian support in the country. Additional funds have been received from World Health Organization and Asian Development Bank to support COVID-19 health services nationwide. A substantial funding gap of US\$ 43.97 million (79 per cent) persists to provide critical emergency services throughout the country.

In addition to the humanitarian resources received during the year, US\$ 3.76 of existing resources are re-purposed to support the on-going response. This includes funds received from the United Kingdom, Canada, UNICEF's set-aside funds, Global Thematic Funds and Regular Resources.

The Humanitarian Response Plan (HRP) 2021 is now approved by the Ministry of Foreign Affairs, Government of Pakistan.

UNICEF expresses its sincere gratitude to the Governments of United Kingdom, United States, and the Austrian Committee for UNICEF, Asian Development Bank, CERF, World Bank, ECHO, Global Partnership for Education, Gavi -The Vaccine Alliance, Solidarity Fund, Standard Chartered, along with all its public and private donors for their contributions.

Situation Overview & Humanitarian Needs

According to the National Command and Operations Center (NCOC) the Minister for Planning, Development and Reforms, around 18 million people could lose their jobs due to the ongoing lockdown imposed to prevent the spread of COVID-19¹. According to the Pakistan Institute of Development Economics (PIDE), around 20 million to 70 million people could fall below the poverty line in the current prospect, yet the government has been reluctant to end lockdowns to avoid putting burden on the health system. While the lockdown was meant to end on 9th May, in view Eid ul Fitr on 13th and 14th May, the lockdown was extended. The NCOC on 19th May announced the lifting of a number of restrictions imposed to control the spread of COVID-19, including the staggered reopening of educational institutions in districts where the positivity rate was less than five per cent and resumption of outdoor dining.² The tourism sector has been reopened under strict COVID-19 protocols from 24th May. The government is urging compliance on wearing masks and broader lockdowns are being implemented with stringent enforcement protocols based on risk assessments.

On 24th May, in Khyber Pakhtunkhwa (KP) province, schools re-opened in 21 Districts, while in 14 districts schools were to remain closed till 27 May 2021. In Punjab, vaccination of teachers is being prioritized through fast track registration and vaccination. In Balochistan, the government lifted the complete lockdown from 17th May with opening of markets till 8 pm, public transport by 50 per cent, hotel and restaurants to provide only takeaway food and public and private offices with 50 per cent staff on work from home modality. In Sindh, where there are maximum number of COVID-19 cases, the government extended the lockdown for another two weeks, wherein the schools/colleges were to remain closed, as will outdoor dining, and intercity travel with 50 per cent occupancy.

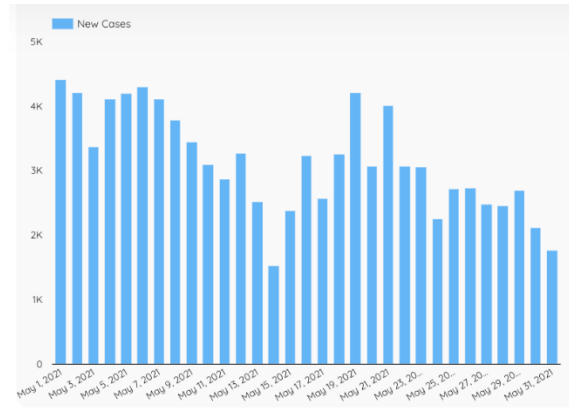
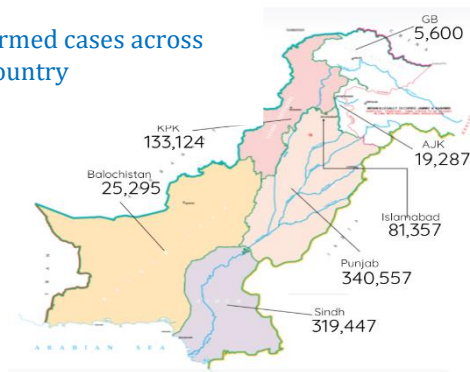
EPIDEMIOLOGICAL OVERVIEW

As of 31st May, there have been 922,824 confirmed cases, 57,336 active cases, 844,638 recoveries and 20,850 deaths reported. The highest number of these cases are in Punjab, followed by Sindh and Khyber Pakhtunkhwa (detailed figures are given in map below).

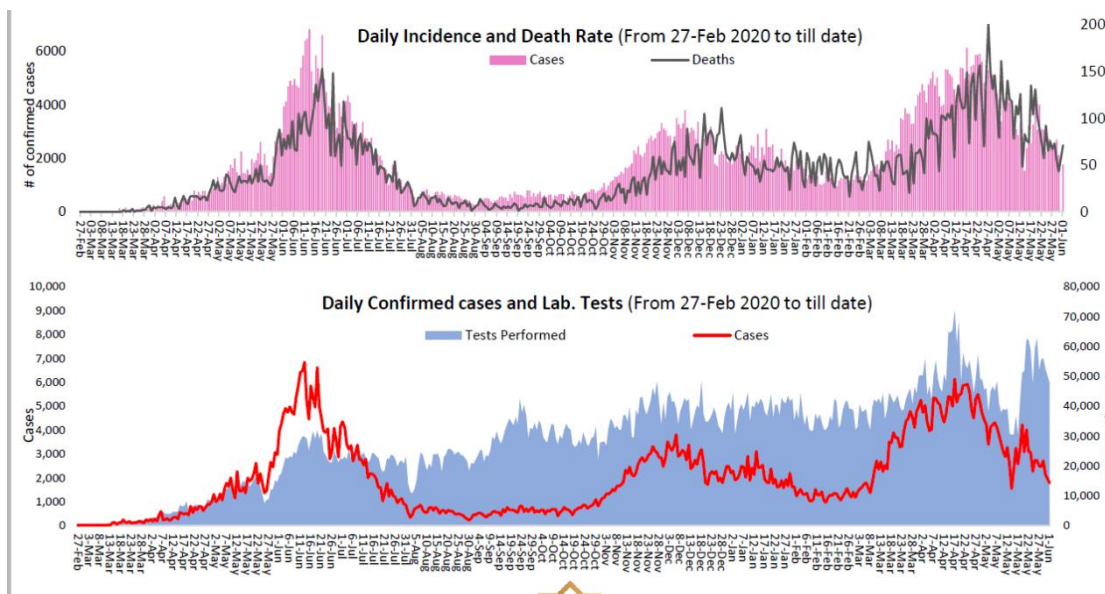
¹ <https://covid.gov.pk/press-release-details/1>

² <https://www.dawn.com/news/1624532>

Confirmed cases across the country



The graphs below show the incidence and deaths as well as tests and confirmed cases from the 27th February 2020 to 31st May 2021.³



Based on data from National Command and Operations Centre (NCOC)⁴, as of 31st May, Pakistan has conducted 13,269,210 laboratory tests.

COVID-19 Vaccine Updates: The COVID-19 vaccination started on the 3rd February 2021 in Pakistan. The vaccination is being carried out in a phased manner with priority first given to frontline health/workers, senior citizens to people in lower age brackets. Starting from 27th May, the vaccination registration has now been opened for above 18 years old; hence, the entire population over 18 years can now get registered and hence vaccinated, provided that the supply chain is maintained.

Pakistan has received 10.8 million vaccines doses so far. As per NCOC databased, the vaccine related statistics are given below⁵;



**as per the figures on the NCOC website dated 31st May 2021*

³ WHO sitrep 1st June, 2021
⁴ <https://ncoc.gov.pk/#section2>
⁵ <https://ncoc.gov.pk/>

On 24th May, Pakistan announced the production of homemade COVID-19 vaccine 'PakVac' through China's single-dose COVID-19 vaccine CanSino at National Institute of Health (NIH).⁶ This facility will produce 3 million doses/month and as a result will significantly reduce Pakistan's dependence on importing vaccine from other countries and in maintaining vaccine supply line.

COVAX Updates:

Pakistan received 1st tranche of shipment of AstraZeneca vaccines on 8th of May through COVAX. Pfizer vaccines (100,620 doses) were delivered to Pakistan on the 28th May 2021, diluents were delivered on 29th May and delivery of syringes for Pfizer vaccine was completed on 31st May.,

COVAX Allocation Round 4 million doses will be confirmed in June and will include three brands of vaccines including AstraZenca, Pfizer and Johnson and Johnson.

COVAX Advance Market Commitment / Purchasing Additional Doses: – The government advised to negotiate with multilateral development banks to secure financing for the procurement of additional doses via the COVAX Facility. Pakistan intend to procure 20,000,000 COVID-19 vaccine doses through COVAX

COVAX has committed to providing all eligible countries, vaccines for 20 per cent of their populations before any other vaccines can be procured through the COVAX facility. With the current constraints in vaccine availability, it is therefore difficult to estimate when countries will have delivery of vaccines that would be procured, as the 20 per cent allocation to all countries needs to be completed first.

So far following vaccines have been registered in Pakistan by the Drug Regulatory Authority (DRAP) and received in-country:

Name of vaccine	Total available doses in country	Registration date.	Total administered	Per cent used
Sinopharma	4,720,000	23 Jan 2021	3,576,542	76%
CanSino	255,000	8 Feb 2021	41,238	16%
CoronaVac	4,500,000	23 Jan 2021	1,343,409	30%
AstraZeneca	1,238,400	8 Feb 2021	647,467	52%
Pfizer	106,000	27 Apr 2021	0	0
Grand total	10,813,400		5,608,656	52%

Cold Chain Updates:

- All 23 ultra-cold chain equipment (CCE) installed: 5 in Federal EPI, 16 in districts and 2 in NIH for lab products.

Expansion of cold chain capacity

- Deployment of Cold Chain Equipment (3,350 Ice line refrigerators/Solar direct drive) at Districts and Health facilities level through the cold chain equipment optimization platform and non CCEOP Deployment of 89 Walk in cold rooms (WICR) as well as 6,500 Combo and Cold Boxes (CBs) and 6,500 Standard Vaccine Carriers: (SCV) is also in progress. Installation expected to start from July 2021

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 in the country. The UN task force team that includes 8 UN agencies, meet weekly, and the National RCCE Coordination

⁶ <https://tribune.com.pk/story/2302863/homemade-pakvac-launched-to-boost-vaccination>

Taskforce meets fortnightly with partners. In addition to coordination at the federal level, UNICEF is also co-lead in all provincial RCCE task-force teams, aiming to strengthen coordination, planning, monitoring and ensuring timely implementation at both provincial and district levels.

Response:

Evidence-based knowledge, understanding and planning: RCCE focus during this period covered three key areas: 1) end of Ramadan and Eid 2) COVID-19 vaccination, and 3) collection and analysis of social data.

Following the end of Ramadan, it is not yet clear whether infection rates will increase as a direct result of widespread unprotected social events that occurred during the last days of Ramadan and on Eid. Religiously oriented messages that were produced for Ramadan, have been replaced by messages promoting COVID-19 vaccination and the adherence to preventive SOPs.

The increase in the number of citizens who have been vaccinated appears to have sparked positive encouragement for others to follow the example, RCCE teams are seeking to capitalize on such positive testimonies and experiences. In addition, the eligible age groups for vaccination have since been expanded from citizens over 50, to over 18 years of age. Although this news was very welcomed by the population, it created new RCCE challenges to effectively communicate with a younger generation (almost 38 per cent of the population), who feel less at risk, less concerned, less engaged, and easily influenced by adults in their household, who may express vaccine hesitancy.

Based on available social research, a new vaccination flyer was designed and approved by the government and has also been translated into two languages. Two animated videos were produced to support social media platforms, as well as four TV videos and five radio spots on the promotion of vaccination and COVID-19 preventive behaviours.

UNICEF and WHO combined efforts to update the vaccination Frequently Asked Questions (FAQs). This will soon be shared widely with partners, websites, religious and community leaders, media personnel and journalists, as well as teachers, frontline workers and medical personnel. The FAQs will be translated to other local languages, and more adaptive versions will be drafted for adolescents and teachers.

A new study in Pakistan however shows positive shifts over the past eight months. People who think they are at risk of COVID-19 increased from 9 per cent to 20 per cent, and those who think that the COVID-19 vaccine is effective, has increased from 15 per cent to 27 per cent. Research has also shown that there is an increase in infections of children, RCCE task force is to meet and discuss ways to promote dedicated care for children. Many adults have the impression that children are immune to COVID-19, and as a result, children are less regulated. If left unaddressed, asymptomatic children may begin to infect adults, mostly mothers. New approaches and messages are being considered to address protecting children from COVID-19.

Religious leaders' engagement: Through existing polio alliances and the health programme, 65,649 religious leaders have been engaged and mobilized to promote the risk perception of COVID-19, emphasize the importance of handwashing, use of mask and physical distancing as well as convincing other religious leaders to talk to their followers during the Friday sermons and to make announcements with key preventive messages on COVID-19 as well as engaging in promoting messages on COVID-19 vaccination, polio eradication, and Essential Immunization (EI).

Media, social-media and production of educational materials (print/video): Television and radio remains the primary source of trusted information on COVID-19 in Pakistan. Although TV and radio have the highest outreach, social media is catching up with TV and radio in terms of outreach but since social media is not well regulated so there is a risk of misinformation.

On social media, Facebook remains top sharing platform, with over 40 million impressions and 1,417,353 engagements. On Twitter, there have been 270,418 impressions and 7,292 engagements, while on Instagram, 84,031 impressions and 2,114 engagements during the month of May.

Community mobilization activities continued in six high risk districts throughout the country. Additional support from the Polio teams was continued to disseminate messages on the importance of respecting SOPs, vaccination uptake and testing along with messages on Polio. During the reporting period, 2.37 million at risk people have been reached with COVID-19 preventive messages with a total reach to 49.9 million during this year.

Feedback Mechanisms: The Polio helpline, now also used for COVID-19 purposes, responds to nearly 40,000 calls each day. Nearly 334,901 calls were answered over the reporting period. From these nearly one-third have been from callers requesting information on vaccination, mostly questions related to effectiveness of the vaccine, registration process, and information regarding the second dose.

The helpline has shown to be an effective tool in building trust between the population, the government and also with implementing partners. It informs callers on how they can register for the vaccine, receive information on eligible citizens, and be directed to the closest vaccination sites. The helpline also provided critical information on where they can get tested and/or get treatment for COVID-19.

Gaps and Challenges: The arrival of the COVID-19 vaccine continues to overshadow the importance to continued observance of COVID-19 SOPs and wearing a mask. It is perceived as if the vaccine has already ended the pandemic in Pakistan. The most common complaints regarding the vaccine are concerns related to side effects, lack of clear, and consistent communications from the government, access to vaccination for remote populations who are less familiar with electronic registration systems, doubt about the general effectiveness of the COVID-19 vaccine, and confusion of the four existing vaccines in Pakistan, and differences between them.

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, Rural Support Programme Network (RSPN), Pakistan Alliance for Early Childhood (PAFEC).

2. Infection Prevention and Control (IPC):

Coordination: UNICEF worked in close collaboration with the government of Pakistan, 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 (Who is doing what, where and when), 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:

<https://www.humanitarianresponse.info/en/operations/pakistan/pakistan-wash-sector-working-group-covid-19-response-4ws-data-analysis>

Response: UNICEF is implementing WASH/IPC interventions country-wide, focusing its efforts in 20 of the 27 high burden districts. UNICEF rehabilitated and installed WASH facilities which included Ultraviolet (UV) water filters, toilets and handwashing stations in 98 healthcare facilities (HCFs): 33 in Sindh, 2 in KP and 63 in Balochistan. More than 385,254 people cumulatively 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 of which 61,413 gained access during the reporting period.

UNICEF utilized existing WASH programs such as Clean and Green Pakistan and communication networks of volunteers to undertake hygiene promotion and support 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 the fabrication and installation of 957 handwashing stations placed at strategic points in cities and communities enabling over 2.2 million people to wash hands properly. Over 1,387,713 people (new 158,915) were supported with hygiene promotion services including COVID-19 prevention and control information.

UNICEF supported the training of 3,617 frontline sanitary and health workers on WASH/IPC in HCFs and high-risk communities on WASH/IPC with 1,681 trained during the reporting period. UNICEF reached 279,266 children (114,500 girls and 164,766 boys) in 467 schools (331 in KP, 28 in Balochistan and 108 in Sindh) with WASH/IPC services.

Gaps and Challenges: Due to limited resources, UNICEF focused mainly on handwashing in public places, schools and HCFs. However, providing handwashing stations and soap to vulnerable households could have had a significant positive impact.

Partnerships: UNICEF worked with the federal and provincial governments as well as with implementing partners including: AKF, IRP (Islamic Relief Pakistan), HANDS, SRSP, Water and Sanitation Agency (WASA) Lahore, WSSC Swat, Water and Sanitation Services Company (WSSC) Abbottabad, The Water and Sanitation Services Peshawar (WSSP), Peshawar, Balochistan Rural Support Programme, Unilever and DFID, WHO, UNFPA and UN-Habitat.

3. Psychosocial Support and Child Protection:

Coordination: During the reporting period the Protection Sector including Child Protection and Gender Based Violence (GBV) sub sectors remained functional and regularly coordinated COVID-19 response at the national level as well as in most of the provinces. In Sindh, messages related to stigma prevention pertaining COVID-19 were also shared with participants of the meeting for further dissemination in the community. In Balochistan, a coordination meeting was conducted with District Health Officer (DHO) Quetta and another coordination meeting was conducted with Session Judge regarding child protection cases and counselling needs.

Response: UNICEF and its partners have trained a total of 6,299 social workforce professionals (3,911 women and 2,288 men) in psychosocial support and stigma prevention in all provinces through package developed by UNICEF, including 939 trained during the reporting period (543 women and 396 men in Sindh, Punjab, KP provinces and Azad Jammu and Kashmir (AJ&K) region).

A total of 262,180 parents, caregivers, children and individuals (42,718 girls, 41,783 boys, 89,946 women, 87,733 men) received Psychosocial Support and Services (PSS) by trained social workforce professionals in Punjab, KP, Sindh, Balochistan, GB and AJ&K with 37,650 reached within the reporting period (Punjab: 30,800, KP: 1,792, Sindh: 5,038 and Balochistan: 20). This includes 13,537 Individuals (2,330 girls, 2,005 boys, 4,967 women and 4,235 men) who received specialized counselling sessions in Punjab, KP and Sindh.

Messages on stigma and violence against children reached additional 997,003 people during the reporting period increasing the total reach to 9,116,746 people. The total number of children who received child protection services supported by UNICEF in Sindh and Baluchistan has reached 2,268 children (759 girls, 1,469 boys), this includes 169 children (75 girls and 94 boys) who received child protection services during the reporting period.

Gaps and Challenges: Due to high positivity rate in major cities during the third wave of COVID-19, Child Protection partners faced delays in conducting some capacity building trainings and community-based interactions which were earlier planned to be conducted physically. 50 per cent presence of government staff in offices also impacted the pace of implementation of many activities. It was also challenging to conduct virtual community sessions due to non-availability of smart phones and internet in vulnerable communities. Communities are also denying the existence of corona virus and while conducting sessions in some communities, it becomes difficult to make them follow the SOPs like wearing a mask or maintain social distancing. To mitigate these challenges smaller groups were formed and masks and sanitizers were also provided for the face-to-face sessions in the communities. Social distancing and open space were also arranged for these sessions. Efforts were also made to have a smart phone and internet connection with at least a couple of participants in the community. Since schools have been closed for a long time again during the 3rd wave of COVID-19, it has been challenging to establish routine coordination with Education Department for delivery of MHPSS and CP services to students and teachers.

Partnerships: During the reporting period, UNICEF continued to work with the federal and provincial governments as well as implementing partners in all provinces and regions. In Punjab, the partnership with PAHCHAAN (a CSO), Centre for Clinical Psychology (CCPSY), Social Welfare Department (SWD) and Health department continued during the reporting period to implement CP Response Plan for COVID-19. In Sindh, partnership with the Social Welfare Department has been further strengthened to reach more vulnerable women, men, girls and boys particularly in the high burden districts which also include South Karachi and Central Karachi. In Sindh, a new partnership is in place with an

institution with support from C4D and Health to reach the affected populations with COVID-19 prevention messages, MHPSS and messages on promotion of vaccines through FM radio.

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.

Response: UNICEF is supporting the Provincial and Regional health departments to ensure continuation of essential primary healthcare services including immunization, Ante-Natal Care (ANC), natal , Post-Natal Care (PNC) services, childcare and curative care for adults in 136 targeted health facilities reaching 285,988 people during the reporting period (Balochistan: 7,632; Sindh: 146,145; KP: 2,337; Punjab: 118,874, AJK 11,000) with a total reach of 1.74 million people. Measles immunization reached a total of 7,154 children under one (Balochistan: 949; Sindh: 1,567; Punjab: 4,638) during the reporting period with a total of 52,748 children vaccinated against measles in the 136 UNICEF supported health facilities to date. UNICEF has provided basic PPEs (gloves, sanitizers and masks) to 466 frontline health workers during the reporting period (women: 241; men: 225) and reached a total of 15,426 frontline workers during 2021 thus far.

UNICEF-supported IPC training reached 7,981 frontline health workers in total with 1,156 health workers trained during the reporting period. UNICEF supported the training of 3,253 frontline health workers and community volunteers on COVID-19 and case identification and referral of suspected cases with 1,112 trained during the reporting period (women: 418, men: 694). Clinical Management of Children with COVID-19 training was provided to a total of 1,323 paediatricians trained in 2021.

Gaps and Challenges: Storage space for supplies has been a challenge for which EPI team is looking for opportunities to secure required funds and needed storage space (which has been a challenge in the midst of COVID-19 pandemic). Space is required for the upcoming Measles and Rubella (MR) campaigns is being planned for 96 million children, Typhoid Conjugate Vaccine (TCV) and Maternal, Neonatal Tetanus Elimination (MNTE) campaigns supplies.

Keeping in mind any upcoming new COVID-19 wave, advocacy is required with government and partners on preparedness particularly for oxygen therapy. UNICEF is procuring 1000 oxygen concentrators along with accessories under the Supply Financing Facility which will help government in minimizing potential oxygen shortage in the country in coming months.

Partnerships: GAVI, MoNHSR&C, 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 7 meetings of Nutrition Working Group (NWG) took place during this period, 2 at National and 5 at the sub-national level (Punjab: 2, Sindh: 1, KP: 1 and Balochistan: 1). UNICEF also Co-led the Nutrition development partners meeting on 20th May 2021 in which updates on the Federal Nutrition PC1 and concerns on funding for emergency nutrition were the main areas of focus. The NWG initially prepared the list of nutrition indicators for inclusion in the District Health Information System (DHIS-2) and this will be followed by provincial meetings to finalize the standard list of nutrition indicators.

To ensure continuation of nutrition services during COVID-19 Pandemic, UNICEF is providing Personal Protective Equipment (PPE) to all the 4 provincial governments based on their forecast plan for 2021. In Punjab, under the leadership of Planning and Development Department Reforms (P&D), 2 meetings were conducted to review the Punjab Multisectoral Nutrition strategy inception report, methodology and formulation of core committees and TWGs. To

implement the Early Childhood Development (ECD) program in the 5 prioritized districts of Punjab, the ECD rollout plan for trainings has been finalized and submitted for approval.

The Breast Milk Substitutes (BMS) legislation Act has been finalized at provincial level and shared with the Nutrition Directorate, Baluchistan for their final review and feedback.

UNICEF Response: As part of the Nutrition Response to the COVID-19 pandemic, 3,065 UNICEF-supported Outpatient Therapeutic Program (OTP) sites provided nutrition services (Sindh: 1042, KP: 120, Balochistan:183 and Punjab:1,720). Around 131,389 children (girls: 67,008, boys: 64,381) of 6-59 months have been screened for malnutrition using Mid Upper Arm Circumference (MUAC) at 3,065 nutrition sites (Balochistan: 23,852, Sindh: 67,327 and KP: 40,210). A total of 58,939 children (girls: 32,779 and boys: 26,160) with Severe Acute Malnutrition (SAM) have been admitted for SAM treatment with 12,906 SAM enrolments in OTP sites in the reporting period (girls: 7,168, boys: 5,738) of which 2,001 are from KP province; 2,993 from Balochistan and 7,912 from Sindh province. A total of 134,748 children between 6-59 months of age (girls: 68,232 and boys: 66,516) received Multi-micronutrient supplementation and during this reporting period 23,431 new children reached (11,508 girls:11,923, boys) of which 8,002 are from Baluchistan; and KP:15,429).

With UNICEF's support, nutrition counselling sessions were conducted on Infant and Young Child feeding practices through the network of LHWs and reached 92,869 pregnant and lactating women during the reporting period (Balochistan: 27,119; KP: 13,111 and Sindh: 52,639) were counselled on Infant and Young Child Feeding (IYCF) practices in the COVID-19 context through Lady Health Workers (LHWs) and other community-based networks, with a total reach of 524,257 individuals.

Gaps and Challenges: The nutrition services in KP province's settled districts are experiencing a shortage of supplies Ready to Use Therapeutic Food (RUTF) especially in the COVID-19 high risk districts of KP. Funding constraints to support nutrition services in the Newly Merged Districts will lead to closure of 74 nutrition sites by 30th June, 2021. UNICEF Pakistan however is continually advocating with donors in this regard.

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

6. Education:

Coordination: UNICEF supports coordination with federal, provincial education ministries/departments, humanitarian organizations, UN and development partners for the Continuation of Learning during schools' closure and adherence to the SOPs for safe reopening of schools.

After closures due to the third wave of COVID-19, it was decided that schools would reopen on 24th May in districts with less than 5 per cent coronavirus positivity rate. Schools reopened on 24th May in all districts of Balochistan, except Quetta. In KP, 21 districts reopened schools while schools in 14 districts remain closed until 27th May. In Punjab, schools in 16 districts reopened for four days a week with a 50 per cent attendance. The Government of Sindh announced extension of closure of all educational institutes till further notice due to high positivity rates. Schools reopening in districts with positivity rates higher than 5 per cent will be reviewed again on 7th June.

The Inter Provincial Education Ministers Conference (IPEMC) decided to hold examinations of classes 10 and 12 after June. Vaccination of teachers on priority basis was announced by the Minister of Federal Education hence commencing teacher's vaccination across the country.

Response: During school closures, continuity of learning opportunities for children was supported through take home assignments in Accelerated Learning Program (ALP) centres in both Sindh and KP provinces. To facilitate a safe return to school, messages on safe school reopening and other information and education materials have been disseminated in all provinces.

Capacity building of teachers and education staff remains a priority, to help prepare them for their roles under education in the context of COVID-19. Mental Health and Psychosocial Support training reached an additional 4,242 teachers and education officers during the reporting period, taking the total number of teachers/officials trained to 8,883 (3,416

women). Cumulatively 9,030 (3,416 women) teachers and education officers accessed training in safe reopening and operation of schools.

To encourage continuity of learning, an additional 124,347 parents were reached with messages through SMS and different social media platforms during the reporting period, increasing total reach to 412,411 parents. In Sindh, 400 devices have been procured and technical assistance brought onboard to support the implementation of the “Digital Learning Initiative for Every Child”, including introduction of the “Learning Passport”, an online, mobile and offline platform enabling high quality, flexible learning. Under the global GIGA⁷ initiative, UNICEF in Sindh is also working closely with the government to initiate a school connectivity mapping.

Gaps and Challenges: School closures have reduced the pace of teacher training activities. UNICEF is working with implementing partners to introduce online training support.

Prolonged school closures increase risks of dropouts. The provincial departments will be supported to develop various approaches to prevent drop-out of students and increase the role of PTCs/SMCs and teachers at community level to bring children back to school. Donor funding for Education COVID-19 response is severely lacking. Resource mobilization strategy is being developed as part of the integrated education response to COVID-19.

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

Supply and Procurement Services

Under the COVAX facility, 1.2 million doses of Astra Zeneca were delivered to Pakistan on 8 May 2021. A second batch of 1.2 million doses have been allocated to Pakistan, however the delivery date of the second batch is currently not confirmed. The Government of Pakistan therefore decided to utilise the 1.2 million doses, for both doses for 600,000 people. The full quantity of 600,000 doses have already been administered. In addition, 100,000 doses of Pfizer vaccine arrived in Pakistan on 28th May 2021.

From the USD15 million Pandemic Emergency Financing (PEF) World Bank Fund allocated to Pakistan, all supplies have now been delivered to UNICEF, with the exception of PPEs that are awaiting delivery from local suppliers. Once the outstanding PPEs are delivered to UNICEF warehouse, distribution will be undertaken as agreed with the Ministry of National Health Services Regulation and Coordination (MNHSRC). All other supplies from the PEF have been delivered to locations as agreed with the MNHSRC.

Under the PEF fund, 1,320 Oxygen Concentrators and accessories were procured, which have now been distributed to the provinces of Punjab (495), Sindh (300), Khyber Pakhtunkhwa (229), Azad Jammu and Kashmir (64), Gilgit-Baltistan (65) and Baluchistan (153). Distribution of 10 units is still outstanding and will be completed soon. UNICEF is delivering directly to the health facilities that will utilise the equipment, to ensure it reaches the beneficiaries as quickly as possible.

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 COVID-19 transmission 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 three sub

⁷ In 2019, UNICEF and ITU (the International Telecommunication Union, a United Nations agency) launched Giga, a global initiative to connect every school in the world to the internet and every student to information, opportunity and choice by 2030.

committees for RCCE, supply/cold chain and vaccine logistic and surveillance of Adverse Event Following Immunization (AEFI) have been established at Federal EPI. They report weekly on the readiness level on a weekly basis to 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).

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 Friday. For COVID-19 vaccine introduction, together with national authorities, WHO, World Bank 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 17 high burden cities which are most affected with the highest number of new COVID-19 cases and high case test positivity rates since March 2021 – the 3rd 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 third 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 group 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. **Nutrition Emergency:** Similar approach is to be adopted

to ensure nutrition services in selected high burden malnutrition districts. It is also important to note that UNICEF in partnership with Government will functionalize nutrition facilities across country by making them safe through provision of PPEs and thus will leverage recourses of Government and secure same services for children with malnutrition.

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.
- **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

In May, UNICEF documented the arrival of the first shipment of 1.2 million doses of AstraZeneca COVID-19 vaccines in Pakistan through the COVAX facility. An official event was organized together with MoNHSRC, WHO and GAVI, with the participation of several donors (UK, EU, USA, Germany), which was partially broadcast live on several television channels. An official video was disseminated on social media channels, as well as a joint press statement in English and Urdu. Three video messages were produced to encourage the public to register for vaccination and to continue adhering to SOPs. Additionally, a video in Urdu encouraging people to mobilize against the pandemic was released on UNICEF's and MoNHSRC's social media, as well as an animated video in Urdu stressing the importance of wearing a face mask.

Moreover, UNICEF continued to unroll its 'Coping with Corona campaign' which encourages adolescents and youth and encourages to adopt healthy behaviours, adhere to COVID-19 SoPs and promote mental health amongst their peers. UNICEF also supported MoNHSRC to organize the virtual launch event of World Immunisation Week to encourage people to vaccinate.



LINKS

First arrival of COVAX-shipped vaccines:

- Official video: [hwww.facebook.com/unicefpakistan/videos/219022506324020](https://www.facebook.com/unicefpakistan/videos/219022506324020)
- Press release in English: www.unicef.org/pakistan/press-releases/English/pakistan-receives-first-consignment-covid-19-vaccines-covax-facility
- Press release in Urdu: www.unicef.org/pakistan/ur/press_release/Urdu/pakistan-receives-first-consignment-covid-19-vaccines-covax-facility
- Video message from UNICEF OIC Representative: www.facebook.com/unicefpakistan/videos/4110212795665593
- Video message from the Supply Team : www.facebook.com/unicefpakistan/videos/4124629544223918

- Video message encouraging people to register for vaccination:
www.facebook.com/unicefpakistan/videos/4113469272006612 -

Mobilization video: www.facebook.com/unicefpakistan/videos/474859757069757

Face mask animated video in English:

www.facebook.com/unicefpakistan/videos

https://twitter.com/UNICEF_Pakistan/status/1395652141008756738?s=20

Coping with Corona Youth Campaign:

www.facebook.com/unicefpakistan/photos/a.191248050895440/4092148960805310/

Immunisation Week Launch Event:

<https://bit.ly/3i9EfxF>

<https://bit.ly/3fnNRmh>

<https://bit.ly/34zQ0p7>

Next SitRep: 1 July 2021

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Summary of 2021 Programme Results

Sector	UNICEF and Operational partners				Task Force /Sector		
	Target*	Gender	Results	Change since last report ▲▼	Target	Results	Change since last report ▲▼
Risk Communication and Community Engagement (C4D)							
People engaged through social media	550,000	Total	1,417,353	625,825▲			
People reached (through national Media channels) with messages (on COVID-19 prevention and) on access to services	40,000,000*	Total	49,917,000	2,377,000▲			
# of at-risk populations reached through community engagement activities.	16,000,000	Total	16,185,464	4,043,360▲			
# of callers through the national Helpline who shared relevant concerns, received clarifications, and provided feedback.	3,000,000	Total	1,179,893	334,901▲			
Infection Prevention and Control (WASH)							
People reached with handwashing behaviour change programmes	1,001,038*	Males	679,979	77,868	TBD	679,979	77,868
		Female	707,734	81,047		707,734	81,047
		Total	1,387,713	158,915▲		1,387,713	158,915▲
Children accessing appropriate water, sanitation and hygiene facilities and hygiene services in learning facilities and safe spaces.	72,000	Boys	142,426	0	TBD	142,426	0
		Girls	136,840	0		136,840	0
		Total	279,266	0		279,266	0
# of health facilities provided with essential WASH services.	200	Total	98	0	TBD	98	0
# of community sites with handwashing facilities in the affected areas.	800*	Total	957	0	TBD	957	0
Psychosocial Support and Child Protection							
Children and caregivers accessing mental health and psychosocial support.	131,832*	Males	87,733	12,438▲	621,107	87,733	12,438▲
		Female	89,946	14,391▲		89,946	14,391▲
		Boys	41,783	5,126▲		41,783	5,126▲
		Girls	42,718	5,695▲		42,718	5,695▲
		Total	262,180	37,650▲		262,180	37,650▲
People reached with prevention messages on stigma and violence against children, including gender-based violence.	461,410*	Total	9,116,746	997,003▲	19,563,421	9,116,746	997,003▲
Children and adolescents who received child protection services, including gender-based violence services.	65,916*	Boys	1,461	94▲	49,443	1,461	94▲
		Girls	759	75▲		759	75▲
		Total	2,228	169▲		2,228	169▲
Number of social and care workers trained on psychosocial support and stigma reduction.	10,234	Males	2,388	396▲	17,057	2,388	396▲
		Female	3,911	543▲		3,911	543▲
		Total	6,299	939▲		6,299	939▲
Education							
Children accessing safe formal and non-formal education, including ECE.	533,451	Boys	38,393	0	1,040,803		
		Girls	40,738	0			
		Total	79,131	0			106,131

Schools (formal and non-formal) implementing safe school protocols (infection prevention and control).	5,335	Total	1,181	0	9,736	1,217	0
Teachers /education officials trained on MHPSS (Mental Health and Psychosocial Support)	10,675	Males	5,445	3,229▲	16,687	5,445	3,229▲
		Female	3,438	1,013▲		3,438	1,013▲
		Total	8,883	4,242▲		8,883	4,242▲
Teachers /education officials trained on safe reopening/operation of schools	10,675	Males	5614	24▲	16,687	5,614	24▲
		Female	3416	50▲		3,416	50▲
		Total	9,030	74▲		9,030	74▲
Parents reached with messages encouraging learning activities (through SMS and different social media).	1,067,541	Total	412,411	124,347▲	2,133,804	412,411	124,347▲

Building Resilient Health Systems

Number of people benefitting from continuity of primary healthcare services at UNICEF supported health facilities	1,758,163	Males		133,485			
		Females		148,979			
		Boys		1,877			
		Girls		1,647			
		Total	1,754,383	285,988▲			
Number of children < 1 vaccinated against Measles	247,242	Boys		3,506			
		Girls		3,648			
		Total	52,748	7,154▲			
Number of frontline health workers reached with basic PPEs (masks, gloves and hand sanitizers)	150,000	Males		225			
		Females		241			
		Total	15,426	466▲			
Health care facility staff and community health workers trained on infection prevention and control	20,000	Males		577			
		Females		579			
		Total	7,981	1,156▲			
Number of frontline health workers and community volunteers oriented on COVID-19 and referral of suspected cases	50,000	Males		694			
		Females		418			
		Total	3,253	1,112▲			
Number of Paediatricians & Family Physicians Trained on Clinical Management of Children with COVID	2,000	Males		0			
		Females		0			
		Total	1,323	0			

Nutrition

Children aged 6 to 59 months with severe acute malnutrition admitted for treatment	102,413	Boys	26,160	5,738	167,857	40,884	7,350
		Girls	32,779	7,168		51,119	8,956
		Total	58,939	12,906▲		92,003	16,306▲
Primary caregivers of children aged 0 to 23 months receiving infant and young child feeding counselling	571,607*	Total	524,257	92,869▲	1,904,864*	976,802	234,951▲
Children aged 6 to 59 months receiving multiple micronutrient powders	813,940	Boys	66,516	11,508	813,940	83,051	15,949
		Girls	68,232	11,923		84,255	16,180
		Total	134,748	23,431▲		167,306	32,129▲

* Some of the targets (marked with *) are being changed and will be reflected in the revised HAC 2021. After consultation on Nutrition IYCF indicator performance and keeping in view the increase in uptake of services with provision of PPEs and functioning Nutrition sites the subject target is increased this has no financial implications as it is actually leveraging Government health Facilities.

Cumulative Response COVID-19						
Sector	UNICEF Results			Sector Results		
	2020	2021	Cumulative	2020	2021	Cumulative
Risk Communication and Community Engagement (C4D)						
People engaged through Social Media	41,895	1,417,353	1,417,353			
People reached (through national Media channels) with messages (on COVID-19 prevention and) access to services	83,000,000	49,917,000	132,917,000			
At-risk populations reached through community engagement activities.	37,102,079	16,185,464	53,287,543			
# of callers through the national Helpline shared relevant concerns, received clarifications, and provided feedback.	5,428,871	1,179,893	6,608,764			
Infection Prevention and Control (WASH)						
People at high risk of COVID-19 supported with hygiene promotion activities and facilities	10,247,624	1,387,713	11,635,337	28,330,000	1,387,713	29,717,713
Children accessing appropriate WASH facilities and hygiene services in learning facilities and safe spaces.	701	279,266	279,967	1,477	279,266	280,743
# of community sites with handwashing facilities in the affected areas	2,138	85	2,223	3,767	85	3,852
# of schools in targeted high-risk areas supported with IPC measures and improved water and sanitation	1,352	957	2,309	1,750	957	2,707
Psychosocial Support and Child Protection						
Children and caregivers accessing mental health and psychosocial support	216,144	330,768	546,912	219,007	330,768	549,775
People reached with prevention messages on stigma and violence against children, including gender-based violence	57,532,480	9,116,746	66,649,226	63,863,751	9,116,746	72,980,497
Children and adolescents received child protection services, including gender-based violence services	1,176	2,228	3,404	1,176	2,228	3,404
Social and care workers trained on psychosocial support and stigma reduction	8,290	6,299	14,589	8,388	6,299	14,687
Education						
Children accessing safe formal and non-formal education, including ECE.	79,131	79,131	158,262	8,814,507	106,131	8,920,638
Schools (formal and non-formal) implementing safe school protocols (IPC).	0	1,181	1,181	0	1,217	1,217
Teachers /education officials trained on MHPSS	28,258	8,883	37,141	538,494	8,883	547,377
Teachers / education officials trained on safe reporting/ operation of schools	3,035	9,030	12,065	3,035	9,030	12,065
Parents reached with messages encouraging learning activities (through SMS and social media).	278,857	412,411	691,268	354,864	412,411	767,275
Building Resilient Health Systems						
Number of people benefitting from continuity of primary health care services at UNICEF supported health facilities	3,459,844	1,754,383	5,214,227			
Number of children < 1 vaccinated against Measles	215,241	52,748	267,989			

Number of frontline health workers reached with basic PPEs (masks, gloves and hand sanitizers)	104,565	15,426	119,991			
Number of frontline workers trained on infection prevention and control	137,079	7,981	145,060			
Number of frontline health workers and community volunteers oriented on COVID-19 and referral of suspected cases	92,273	3,253	95,526			
Number of Paediatricians & Family Physicians Trained on Clinical Management of Children with COVID	0	1,323	1,323			
Nutrition						
Children aged 6 to 59 months with SAM admitted for treatment	161,702	58,939	220,641	228,819	92,003	320,822
Primary caregivers of children aged 0 to 23 months receiving IYCF counselling	1,575,965	524,257	2,100,222	1,898,018	976,802	2,874,820
Children aged 6 to 59 months receiving MM powders	0	134,748	134,748	0	167,306	167,306

Annex B

Funding Status:

Sector	Requirements	Funds available			Funding gap	
		Humanitarian resources received in 2021	Other Resources used in 2021	2020 carry forwarded funds	\$	%
Nutrition	16,367,560	300,000	115,000	3,011,199	12,941,361	79%
Health	4,237,920	350,000	0	2,326,955	1,560,965	37%
Water, sanitation and hygiene	14,642,291	0	1,956,868	376,892	12,308,531	84%
Child protection, GBViE and PSEA	9,887,364	85,749	921,950	882,589	7,997,076	81%
Education	4,708,089	0	762,913	9,731	3,935,445	84%
C4D, community engagement and AAP	4,708,800	126,360	0	444,509	4,137,931	88%
Emergency preparedness	1,177,200	64,251	0	28,787	1,084,162	92%
Total	\$55,729,224	\$926,360	\$3,756,731	\$7,080,662	\$43,965,471	79%

*Funding Received in 2021 includes HQ allocations to HAC appeal