This note summarizes the support provided, to date, by the United Nations (UN) to Pakistan’s Federal and Provincial Governments to address the unprecedented COVID-19 crisis.

The UN’s response to the COVID-19 pandemic in Pakistan is two-fold: an immediate WHO-led health response to suppress the transmission of the virus; and a socio-economic response to address the crisis’ social and economic dimensions. Our aim is to support the Government to minimize, mitigate and manage COVID-19’s impact – to save lives, protect people and ‘recover better’.

UN agencies are ramping up support for country-level coordination, planning and monitoring so that the Government’s COVID-19 response addresses urgent needs. Risk communication and community engagement is saving lives by sensitizing the public on physical distancing, preventive measures, handwashing, hygiene and health-seeking. Alongside surveillance and rapid response, the UN is aiding efforts to stem the spread of the virus at points of entry, helping laboratories scale up testing capacities, spearheading infection prevention and control – including by providing personal protective equipment – and assisting improvements in quarantine facilities and case management to keep patients and health workers safe.

In tandem, the UN is scaling up an effective socio-economic response. COVID-19 is not only a health crisis. The magnitude of its societal and economic disruption makes this a human crisis like no other. UN support is guided by five pillars of our COVID-19 Pakistan Socio-Economic Framework. Health is our first priority, especially protecting the continuity of essential health services and systems for the most vulnerable – from newborns to women and the elderly. Second, we are focusing on social protection and basic services, from nutrition and food security, to the continuity of education and learning through online and paper-based solutions, and social services, shelters and uninterrupted services for gender-based violence survivors. Third, we are assisting economic recovery to protect the jobs of at-risk workers – from small scale farmers to daily wage labourers – and provide urgent aid for small- and medium-sized enterprises and vulnerable productive actors hit hard by the pandemic. The fourth and fifth pillars of our work are about facilitating macroeconomic response and multilateral collaboration, while cementing social cohesion and community resilience by reaching out to women and girls, men and boys, nationwide.

“COVID-19 is the defining crisis of our time. On behalf of the UN family, I must pay tribute to all of Pakistan’s frontline workers, battling day and night to protect us all. We are striving to support their dedication with an urgent, effective response – to suppress the virus, save lives and protect people. Everything we do must ensure that Pakistan’s gains are not pushed back, that sustainable development is not derailed. We need to ‘recover better’, building a more equal, inclusive and sustainable Pakistan that is resilient in the face of crises, and that leaves no one behind.”

– Julien Harneis, UN Resident and Humanitarian Coordinator, Pakistan
I. COUNTRY-LEVEL COORDINATION, PLANNING AND MONITORING

The United Nations Resident and Humanitarian Coordinator (UNRC/HC) is leading the UN response to COVID-19 in Pakistan, under WHO’s technical guidance.

OVERALL:

- The UN Crisis Management Team (CMT), led by the UNRC/HC, continues to meet regularly to coordinate effective and coherent UN support for the Government’s COVID-19 response.

- The UN Resident Coordinator’s Office (UNRCO) is facilitating the registration of financial contributions to the Pakistan Preparedness and Response Plan (PPRP), using the COVID-19 Partners Platform (https://covid-19-response.org) to provide a transparent overview of donor contributions to the COVID-19 response. Developed by WHO, the platform is a web-based tool which features real-time tracking to support the planning, implementation and resourcing of country preparedness and response activities. To date, 16 donors have registered on the platform, and financial contributions of US$484 million by nine donors have been recorded. Discussions are underway with the Economic Affairs Division (EAD) to develop an off-budget assistance management system along the same lines.

- has convened regular UN and donor coordination meetings since 7 February 2020 as the health cluster lead. It assisted the revision of Pakistan’s COVID-19 National Action Plan and supported the creation National Operational Cell at the Ministry of Health. WHO staff are sharing inputs and supporting rapid assessments as members of the Technical Working Group on coordination, surveillance, infection prevention and control (IPC), laboratory, case management and risk communication. By the end of April, WHO mobilized US$5 million locally, and shared the recommendations of a high-level technical expert mission on surveillance, IPC, international health regulations, and points of entry.

- is supporting Pakistan’s National and Provincial Disaster Management Authorities (NDMA/PDMAs) to bridge capacity gaps. Two technical WFP staff members – a nutritionist and logistician – have been seconded to NDMA to assist the COVID-19 health response.

- is supporting evidence generation so that gender is integrated into COVID-19 preparedness and response plans, including a gender analysis of the UN’s Rapid Socio-economic Impact Assessment and the Global Humanitarian Response Plan.

- is finalizing the results of a mobile survey on changes in women’s economic status, unpaid domestic and care work to inform decision-making, with support from Jazz.

- developed Gender-Responsive Planning Guidelines with the Khyber Pakhtunkhwa (KP) Labour Department and the Punjab Labour and Human Resource Department. The departments have notified these guidelines, which will be implemented in the provinces Annual Development Programmes to ensure resource allocations that meet the specific needs of women and girls, as identified in the Socio-economic Impact Plan.
II. RISK COMMUNICATION AND COMMUNITY ENGAGEMENT (RCCE)

Led by UNICEF, the UN is providing technical and financial support for the National RCCE Plan on responsive, empathic, transparent and consistent messaging in local languages through trusted communication channels, community-based networks, key influencers, and by building local capacities.

OVERALL:

- The UN has released the 7th RCCE Brief, informed by combined analysis of social and behavioural data, social media sentiment data and Polio Helpline records (1166). Key findings include: (i) social acceptance of handwashing is growing to prevent COVID-19 transmission – although not necessarily with soap – given the perception that routine handwashing is an Islamic practice; (2) the belief exists that social distancing is only for women, which increases the risks of gender-based domestic violence, including against women and girls who test positive for COVID-19; (iii) despite global research highlighting increased COVID-19 severity among smokers, media coverage notes the ‘yet to be confirmed’ position of the tobacco industry on smokers’ susceptibility. The RCCE Task Force is addressing these gaps.

- is supporting the Ministry of National Health Services, Regulation and Coordination (MNHSR&C) to convene RCCE Task Force meetings and leads the UN Communications Group on RCCE. Thus far, 16 RCCE Task Force meetings, seven UN Communication Group meetings, and three federal and provincial coordination meetings have taken place. Weekly RCCE Task Force meetings are held at the provincial level.

- worked with its partners to engage 86,621 religious leaders through polio alliances and health programmes to raise awareness of COVID-19 risks and promote physical distancing, praying at home, and infection prevention. Leaders of different faiths in high risk areas have been approached on following the Government’s Standard Operating Procedures (SOPs) on handwashing and distancing during prayers.

- has reached 124 people through its advocacy, communication, polio and social media platforms, while 250 million have been reached by the Government and UN agencies collectively. Over 13.8 million people have been engaged through social media (including 2.13 million between May and June 2020).

- has engaged 10,670 journalists, reporters and bloggers (7,962 during the reporting period) at the federal and provincial levels to promote key messages on COVID-19 and counter negative media and COVID-19-related myths.

- is supporting the use of the Sehat Tahafuz Polio Helpline (1166) for the COVID-19 response. It has received 3.4 million calls and responded to 1.5 million, thanks to its increased capacity of 250 agents, 85 of whom are supported by UNICEF and the rest by Digital Pakistan. Calls concern: (i) COVID-19 symptoms; (ii) preventative measures; (iii) general information, including on food rations. Complaints have been registered on quarantine facilities and a lack of testing.

- has used What’sApp 68,740 times to disseminate behaviour change communication information on COVID-19. Mobile vans, rickshaws and 336 mobile floats across provinces have played 182,924 loudspeaker announcements, reaching high-risk communities with messages on physical distancing, preventive behaviours, handwashing and hygiene.

- worked with ZONG 4G to reach 12 million people through print media, and 16 million via digital media, with MNHSR&C-approved information, education and communication (IEC) materials on social distancing, handwashing, sanitation and health-seeking behaviour.
UN WOMEN: • is sensitizing the public on COVID-19’s gendered impact through social media and the mainstream media, including radio campaigns. Key messages and a policy brief have been shared with WHO and RCCE partners for them to adapt and adopt. A radio campaign in five of KP’s Merged Districts broadcast messages on the COVID-19 response, with a focus on sensitizing women and girls through three popular radio channels, reaching 2.6 million people. A nationwide campaign with Radio Pakistan FM and Medium Wave channels has been designed to sensitize communities in six languages. A joint press release with the Ministry of Human Rights on COVID-19’s Gendered Impact and Implications reached out to 1.7 million people through 10 leading publications and news websites.

FAO: • technical experts are giving interviews on healthy, nutritious diets in light of COVID-19 in Sindh to raise public awareness.
• will host a virtual dialogue, through its First Policy Programme, on COVID-19’s relevance to the structural issues that face Pakistan’s food and agriculture system, including climate change, land tenure, water governance, and gender inequality.
• is raising awareness among rural farming communities in remote areas – where FAO has wide networks and is running parallel campaigns – both online and in the field.
• has set up four lines of engagement: (i) awareness raising campaigns for rural shoppers, especially women; (ii) coordination with the Ministry of Health, led by WHO and UNICEF; (iii) on-the-ground activities (e.g. ‘production to market’ value chains, realigning active projects to overcome COVID-19 challenges, adjusting field-level teaching tools, etc.); and (iv) adjusting Farmer Field Schools to focus on pastoralists and new modules on WASH, hygiene and nutrition.

ILO: • has shared COVID-19 awareness raising materials with brick kiln stakeholders, and a prevention checklist required for opening businesses with the Brick Kiln Owners Association.

UNODC: • has launched awareness campaigns to promote social distancing and prevention measures.

UNDP: • is engaging with parliamentarians and SDG Task Forces, supporting cross-party messaging for vulnerable groups, partnering with UNICEF and UNFPA on a Youth COVID-19 Awareness Campaign, organizing youth engagement initiatives, and advancing strategic communication with madaris/madrassas to raise awareness of COVID-19.

WHO: • is supporting awareness raising campaigns, myth buster cards, and messages on prevention, stigma, sexual and reproductive health (SRH), and gender-based violence.

UNFPA: • has contextualized and shared flyers, posters and infographics, and spearheaded a radio campaign, Neighbourhood Watch Programme and a media plan for youth on SRH.

UNHCR: • has translated government materials into Pashtu and Dari, disseminated messages to refugees, and trained refugee outreach volunteers on COVID-19 prevention and referral.

UNESCO: • is coordinating with civil society to promote fact checking initiatives, and supporting the UINSPIRE Pakistan Youth Network’s myth busting and preventive messages.

UNAIDS: • has translated information materials into local languages.

IOM: • is distributing brochures on infection control at health centres and clinics.

III. SURVEILLANCE, RAPID RESPONSE TEAMS AND CASE INVESTIGATION

The UN is supporting the Government’s detection of COVID-19 cases, contact tracing and case identification.

WHO: • polio staff are supporting COVID-19 surveillance data collection and analysis.

UNDP: • is assisting the Ministry of Health to develop a digital system to identify COVID-19 patients.
UN WOMEN: • is supporting national and provincial partners to strengthen response helplines on gender-based violence and cyber harassment. UN Women’s radio campaign in five Merged Districts (Kurram, Khyber, Orakzai, North and South Waziristan) shared information on respiratory hygiene, social distancing, coughing etiquette and handwashing. The agency also helped Pakistan’s Ombudsperson offices contextualize the COVID-19 response for working women.

UNFPA: • is assisting the Ministry of Health and the NDMA through human resource support and a telemedicine platform to enable young women doctors to work from home.

IV. POINTS OF ENTRY

WHO has assessed capacities at point of entries for COVID-19 preparedness and response.

WHO: • has provided technical support for SOPs, protocols and passenger screening at major airports, land crossings and the Karachi seaport, alongside logistical support, equipment and supplies. The monitoring of implementation is ongoing.

V. LABORATORIES

WHO has supported the development of national laboratory guidance and protocols.

WHO: • assisted the development of a Priority Strategy for COVID-19 Testing, guidance for the authorization of new laboratories, proposed categories of COVID-19 labs, guidance on specimen collection, storage and transport, testing recommendations, and quality assurance. WHO has also provided human resources and training, validated testing equipment, backed operational research through ‘UNITY’ sero-epidemiological studies, and procured and delivered supplies, such as COVID-19 tests and personal protective equipment (PPE).
VI. INFECTION PREVENTION AND CONTROL (IPC)

The UN is supporting IPC efforts in communities and health facilities to enhance awareness, good hygiene practices, and disease prevention and control.

**UNICEF:**
- coordinated with WHO and other UN agencies to establish the UN IPC Technical Working Group to support government efforts to enhance IPC initiatives nationwide.
- is supporting the Ministry of Climate Change to convene weekly virtual federal WASH sector coordination meetings, drawing together over 70 participants. The meetings enable the Government to coordinate the WASH sector response, and keep development partners abreast of progress, challenges and gaps. UNICEF is also supporting all provincial Local Government Departments to hold weekly coordination meetings.
- has rehabilitated and installed WASH facilities that include ultraviolet (UV) water filters, toilets and handwashing stations in 242 healthcare facilities (32 in Sindh, 25 in KP, 167 in Punjab, and 18 in Balochistan). These ensure access to safe water and sanitation for 233,700 people, and reduce the risk of COVID-19 infection among health workers. Over 1.1 million people will benefit from 501 (including 39 new) communal handwashing stations.
- supported training for 3,513 frontline sanitary workers to enhance their capacities on WASH/IPC in healthcare facilities and high-risk communities.
- distributed detergents and disinfectants to health facilities for effective cleaning and disinfection to reduce infection risks among health workers and patients. Partnering with UNILEVER Pakistan, UNICEF distributed 8,000 bottles of bleach and 14,000 bars of soap to 38 healthcare facilities (20 in Sindh and 18 in Punjab), alongside 60,000 bars of soap to communities in Punjab.
- used its WASH communication networks to reach 5 million people with hygiene messages to curb COVID-19.
- is supporting the Government’s ‘We Care’ campaign on health worker protection, working with the MNHSR&C.

**UN WOMEN:**
- supported the development of gender-sensitive SOPs for quarantine centres in KP and Balochistan. UN Women is also working to strengthen essential GBV services (police, social workers, prisons and shelters) nationwide, especially in hard-to-reach and high-risk areas, by training police and prison staff, and by providing hygiene supplies.
- held a virtual consultation with women with disabilities to discuss how COVID-19 has affected them.

**UN WOMEN & UNODC:**
- have delivered a session for police in Quetta, Balochistan, on the increase in GBV during the lockdown and the need for a prompt, sensitive police response.

**UNODC:**
- is delivering personal protective equipment to the police, prisons and criminal justice officials, alongside policy briefs and advocacy materials. These include SOPs to enhance law enforcement’s and prison staff’s understanding of COVID-19 risks and build their capacities to mitigate these risks.
- is continuing to provide technical assistance to Pakistani stakeholders through regular webinars and virtual workshops. UNODC has also developed and disseminated guidance on HIV service provision for people who use drugs and prisoners in the context of IPC.

**WHO:**
- has conducted IPC assessments at quarantine, health and isolation facilities, supported the integration of technical guidelines on IPC into national SOPs and protocols, delivered virtual training for healthcare staff, and supported IPC implementation and monitoring.

VII. QUARANTINE AND CASE MANAGEMENT

WHO is supporting healthcare facilities’ capacities to address COVID-19 cases.

**WHO:**
- has conducted systematic assessments of designated quarantine facilities and case management practices, strengthened quarantine and isolation facilities by providing capacity building and supplies, and supported the establishment of medical clinics.
- has provided technical and logistical support for SOPs and guidelines, including on clinical care and prevention, and conducted online training for health care staff.
VIII. OPERATIONAL SUPPORT AND LOGISTICS

The UN is actively supporting the Government to ensure the timely sourcing and availability of quality essential medical supplies and personal protective equipment (PPE) for the COVID-19 response through offshore and local procurement.

**WFP:**

- partnered with the NDMA to activate and co-chair a national Logistics/Supply Chain Working Group, and has been requested by the NDMA to lead a national logistics capacity assessment to help the Government identify gaps in preparedness. The forum emphasizes the need for improved data management and integration in the Logistics Management Information System (LMIS), as well as in the UN’s common platform and supply portal to improve the Government’s and partners’ procurement and management of equipment for the COVID-19 response. The forum allows all stakeholders to review logistics and supply chain issues, and to discuss how to enhance coordination, collaboration and integration.
- is providing critical logistical and supply chain support to NDMA and PDMAs for the COVID-19 health response, including: the installation of five mobile storage units (MSU) at NDMA’s warehouse in Islamabad; the procurement and installation of six heavy duty, ultra-low medical grade freezers for storing COVID-19 testing kits at NDMA’s main warehouse; the provision of 12 MSUs and a hub-in-box to Balochistan’s PDMA; the provision of three MSUs to KP’s PDMA; and storage space at WFP’s warehouses in Karachi and Peshawar. WFP’s support is financed from its available resources; additional funding is being mobilized to address capacity needs across the national supply management system.
- has re-appropriated US$ 1.4 million from other programme to provide lift-saving support for people affected by the COVID-19 crisis in two districts in KP.
- is preparing to provide life-saving cash assistance to over 25,000 families in six districts (two each in Sindh, Balochistan and KP) with funding from potential donors.
- delivered personal protective equipment in March and May 2020, on behalf of the Ministry of Health. PPE procured with US$1.5 million re-appropriated from the National Immunization Support Project, funded by the Government and the World Bank, includes: 60,480 N-95 masks, 50,521 gowns, 33,600 surgical caps, 47,840 coveralls, 525,000 surgical mask, 634,800 gloves, 2,500 face shields, 1,868 boot covers, 1,869 boot rubbers, and 336 aprons. The ministry allocated these items to Islamabad Capital Territory (ICT), Gilgit-Baltistan (GB), and Azad Jammu and Kashmir (AJK).
- procured 125 oxygen concentrators, 65 of which have arrived and are being delivered to hospitals.
- is facilitating the procurement of PPE, testing kits and medicines using additional National Immunization Support Project funds (US$7 million) on behalf of the Ministry of Health; these will be delivered in June/July.
- coordinated with the Gavi Alliance, which approved US$ 5.5 million for the procurement of basic PPE, including 16,682,172 gloves, 5,818,332 surgical masks and 947,736 sanitizers.
- is coordinating at the regional and global levels to resolve delays in the procurement and delivery of COVID-19 supplies. High demand is constraining the global supply of PPE and diagnostic equipment, exacerbated by limited logistical options for delivery.
I. HEALTH FIRST: PROTECTING HEALTH SERVICES AND SYSTEMS DURING THE CRISIS

**UNICEF:**

- chaired two meetings of Health Population Nutrition Development Partners’ Group (HPNDG) as a forum to harmonize information and support health partners’ response.
- assisted the MNHSR&C to organize partner coordination meetings that provide updates on COVID-19 and discuss the continuity of essential health services.
- chairs the H5 Group (UNICEF, WHO, UNFPA, UNAIDS and the World Bank), which has developed a framework for the continuation of reproductive, maternal, neonatal and child health (RMNCH) service delivery. The plan has been shared with MNHSR&C to support the ministry and provincial Departments of Health to prioritize RMNCH services.
- is supporting sub-national Departments of Health to ensure the continuation of essential primary healthcare services, reaching 811,837 people with immunization services, antenatal and postnatal care, delivery services, child health services, and curative care services for adults in 136 health facilities.
- provided basic PPE (gloves, sanitizer and masks) to 16,096 frontline health workers and supported the training of 7,738 workers on IPC. To date, 16,484 frontline workers and community volunteers have been oriented on identifying and referring COVID-19 cases.
- is supporting telemedicine services in KP through an implementing NGO partner, the Public Health Association. To date, these services have benefitted 2,489 people.
- worked with the Health Services Academy to conduct a rapid survey on the perceptions of key informants – who work on RMNCH – on COVID-19’s impact. Its findings are informing advocacy to mitigate the crisis’ effects on mothers, children, adolescents, their families and communities.

**UNDP:**

- led a rapid impact assessment to draft the COVID-19 Pakistan Socio-Economic Framework, at the request of the Planning Commission and the UNRC, in line with the UN’s global response framework. UNDP worked with UN AFPs, development partners, international finance institutions and the Government to develop the framework’s recommendations, which aim to inform the 2020-21 budget and Pakistan’s National Action Plan for the COVID-19 response.
- supported the creation of a COVID-19 Secretariat at the Planning Commission to help the Government coordinate its socio-economic response. A research analyst and a senior policy and communications analyst are providing technical and administrative support.

The UN Resident and Humanitarian Coordinator is leading the overall UN response to COVID-19 in Pakistan based on five key pillars, and supported by the technical guidance of UN agencies, funds and programmes (AFPs). The RC/HC continues to meet federal and provincial government counterparts to extend UN assistance for COVID-19 response planning and implementation.
II. PROTECTING PEOPLE: SOCIAL PROTECTION AND BASIC SERVICES

1. SOCIAL PROTECTION

**WFP:**
- is partnering with the Benazir Income Support Programme’s (BISP) social protection interventions on stunting and drought response. Preparations are being finalized to launch the stunting prevention programme in July in nine districts across Pakistan.
- is working with the KP Education Department to launch a conditional cash assistance programme in KP’s Merged Districts to reduce adolescent girls’ dropout rates and improve secondary school retention with monthly cash incentives. The programme will also build the department’s capacity to launch a similar initiative for all of the province’s public schools.

**UNHCR:**
- is providing – alongside provincial Commissionerates for Afghan Refugees and the Pakistan Post – one-time cash assistance of PKR 12,000 (equivalent to US$77) to over 36,000 vulnerable refugee families to cover their needs for four months. If funds are secured, the initiative will be expanded. Through a network of over 2,000 outreach volunteers, UNHCR has communicated 1 million government-approved messages on COVID-19 prevention to refugee communities, using digital communication and observing physical distancing.

**UN WOMEN:**
- is partnering with Shirkat Gah to distribute rations to vulnerable women in five districts. A rapid assessment in 10 districts will inform the formulation of 10 situation reports and four policy briefs, that will be used for advocacy with policy-makers.

**FAO:**
- has built water structures through a cash-for-work modality in arid parts of Sindh.
- is providing critical support to smallholders engaged in livestock rearing and agriculture to secure their livelihoods and promote hygiene in the field, in order to prevent COVID-19’s spread.

**ILO:**
- is supporting the Ministry of Overseas Pakistanis and Human Resource Development to roll out an initiative to reintegrate returning migrant workers, largely from Gulf countries.
- is designing a nationwide campaign to sensitize social partners and advocate for expanded social security coverage. This will focus on coverage for informal workers in the context of COVID-19, as well as on designing a new unemployment benefit scheme. IEC materials are being developed to raise awareness and influence the behaviour of employers and workers. These feature simple messages on compliance with social security, registration, costs vs benefits, legal obligations, and complaint and grievance redress mechanisms.

**UNICEF:**
- is supporting the Government of Punjab’s Multidimensional Poverty Index analysis, which includes a dimension on COVID-19’s impact. The analysis’ recommendations will inform policy planning on essential service delivery for children, and highlight structural bottlenecks that impede efforts to eliminate child poverty.

**UNDP:**
- is partnering with the BISP to identify vulnerable persons for immediate assistance.

**IFAD:**
- has allocated US$6.8 million, through the IFAD-funded National Poverty Graduation Project, to build household resilience by providing conditional cash grants of PKR 6,000 (US$39) each to 177,000 households in 25 of Pakistan’s poorest districts.
2. FOOD AND NUTRITION

**UNICEF:**
- co-chairs the Nutrition Sector Coordination Team with federal and provincial governments and is supporting the COVID-19 nutrition response in affected districts. Punjab’s Nutrition Working Group has finalized a Nutrition COVID-19 Response Plan, which is pending government endorsement. Simplified guidelines on the management of wasting and promoting infant and young child feeding (IYCF) in the context of COVID-19 have been translated into local languages and adopted by PDMA’s for dissemination.
- developed social media videos and leaflets, endorsed by the Ministry of Health, that have been used by a range of partners – the ministry, NGOs, PDMA’s and Scaling Up Nutrition (SUN) Units – reaching 43.9 million viewers through Facebook, Twitter and Instagram.
- provided online training to 128 service providers on IPC, wasting management and IYCF in Balochistan and Sindh. In Sindh’s district of Tharparkar, UNICEF and the Shifa Foundation set up 10 mobile nutrition teams to reach 650 remote villages.
- 2,799 UNICEF-supported health facilities treated 21,165 children with severe acute malnutrition (SAM).
- supported counselling for 124,082 mothers and caregivers on IYCF practices in the context of COVID-19 (e.g. breastfeeding and complementary feeding), including through the mass media and social media.

**FAO:**
- has seconded a technical staff member (nutritionist) to NDMA to support the food security-related response.
- is supporting the Ministry of National Food Security and Research by developing a food price monitoring dashboard for the ministry’s use, as well as policy briefs on COVID-19’s immediate and expected impacts on food security, livelihoods, agriculture and markets.
- is recommending priority actions to address short- and medium-term needs, based on a rapid assessment of changes in the food and agriculture system across all of Pakistan’s provinces since the pandemic began. FAO is using available data, including government data and on-the-ground observations, to compile briefs and weekly agriculture price monitoring bulletins.
- is finalizing a COVID-19 Emergency Programme for Balochistan in 2020, involving:
  - integrated household food system (IHFS) activities – e.g. kitchen gardening, poultry rearing, and nutrition education – providing nutrition-sensitive food production support and training on nutrition and food safety for 10,600 households, whose members include pregnant and lactating women, in Kech, Panijur, Chaghi, Washuk, Nushki, Khanar, Ziarat and Barkhan;
  - irrigation works for horticulture production areas in Pishin;
  - animal feed distribution in Pishin and Killa Abdullah;
  - animal vaccination campaigns in Chaghi, Nushki and Killa Abdullah;
  - veterinary support in Lorali and Zhob; and
  - emergency support for key value chains (dates, grapes, onions, sheep, goats and poultry) and seed production in Kech, Panijur, Chaghi, Washuk, Nushki and Khanar.
- is providing policy advice to the Ministry of National Food Security and Research, and sharing guidelines and best practices to safeguard the continuity of food supply chains, including the Pakistan Dietary Guidelines for Better Nutrition. Messages developed on food safety in light of COVID-19 will be incorporated into training and awareness raising. Gender has been integrated in planning and programmes to address women’s and girls’ vulnerability in accessing safe food, a decent income, social protection and good nutrition.
- is working to protect vulnerable groups’ nutrition and food security. Its Building Disaster Resilience in Pakistan (BDRP) programme is mitigating COVID-19’s impact on livelihoods by providing 9,000 small-scale farmers with agricultural inputs and livestock-related support.
- is collaborating with partners in the Natural Disaster Consortium, funded by the United Kingdom’s Department for International Development (DFID), to provide livelihood assistance packages for 9,150 food-insecure farming households in Sindh.

**FAO & WFP:**
- as co-chairs of the Food Security and Agriculture Working Group, organized group meetings at the national and provincial levels in Sindh and Balochistan.
- developed joint Food Security and Nutrition Analyses using available secondary data, which informed the UN’s COVID-19 Pakistan Socio-Economic Framework and can be used to inform the Government’s immediate, medium- and long-term planning on food and nutrition security.

**WFP:**
- will assist 1 million people via cash and food-based livelihood programmes in areas most affected by COVID-19.
- undertook a Vulnerability Analysis and Mapping exercise using available data to classify all of Pakistan’s districts into three categories based on how food insecure, hazard-prone and affected by malnutrition they are. Overlaying this information with data on COVID-19’s prevalence offers a clear picture of vulnerability, which has been shared with stakeholders to inform planning.
- has proposed collaborating with the BISP on the horizontal and vertical expansion of social safety net coverage in the most vulnerable areas of 23 districts nationwide to reach 800,000 beneficiaries. The proposed two-phase programme will use up-to-date vulnerability assessments to reach marginalized areas and households.
- has proposed implementing two phases of the Community Management of Acute Malnutrition (CMAM) programme in 23 districts with very high malnutrition rates. The first phase will reach 20–30% of the population, before rising to 50% during the second phase.
3. EDUCATION

UNICEF:

- worked with the National Education Development Partners Group (NEDPG) to support the Federal Ministry of Education to coordinate the COVID-19 education response. The ministry and group have both endorsed a National Education Response and Resilience Plan (NERRP) on COVID-19. Provincial coordination meetings have been held in two provinces. These meetings of the Balochistan Education Working Group and the KP Technical Working Group discussed the common themes of continuity of learning and the safe re-opening of schools.
- 89,342 children are benefiting from UNICEF-supported alternative learning opportunities.
- provincial offices are developing paper-based learning packs for children without access to technological platforms, enabling them to follow the curriculum and student learning outcomes through home-based worksheets. In Sindh, 10,188 children received learning packs. Additional print content will be disseminated once government are issued.
- worked with its partners to reach 14,095 Parent Teacher Associations with messages encouraging learning, alongside 1.38 million School Management Committee members, teachers and education personnel with COVID-19 prevention information via SMS and social media.
- conducted 30 online sessions on menstrual hygiene management (MHM), reaching 91 girls in 11 districts in Balochistan.
- is supporting provincial Departments of Education to localize general SOPs to their contexts to ensure the safe re-opening of schools. It assisted the creation of a sub-committee in KP, whose first meeting discussed the phased opening of schools, their de-contamination and the dissemination of COVID-19 messages.
- aims to provide conditional cash assistance to support children’s return to education in five districts of Balochistan with low retention and high dropout rates.
- collaborated with the National Vocational and Technical Training Commission to hold a multi-stakeholder online consultation on mitigating COVID-19’s effects on technical and vocational education and training (TVET). The webinar highlighted good practices by institutions worldwide to continue delivering TVET during the pandemic, expected changes, and TVET’s role in improving workers’ employability post-COVID-19. The event engaged representatives from Pakistan’s TVET authorities, foreign institutions and donors.
- is developing a preparedness, prevention and response to mitigate the pandemic through e-learning, and supporting the Open Science initiative.

WFP:

- collaborated with the National Vocational and Technical Training Commission to hold a multi-stakeholder online consultation on mitigating COVID-19’s effects on technical and vocational education and training (TVET). The webinar highlighted good practices by institutions worldwide to continue delivering TVET during the pandemic, expected changes, and TVET’s role in improving workers’ employability post-COVID-19. The event engaged representatives from Pakistan’s TVET authorities, foreign institutions and donors.

ILO:

- is developing a preparedness, prevention and response to mitigate the pandemic through e-learning, and supporting the Open Science initiative.

UNESCO:

- is supporting psychosocial support and referrals to services through the National Reproductive and Maternal Health Helpline, tele-psychosocial support services, and the upgraded Women Safety App, among others.

4. CONTINUITY OF SOCIAL SERVICES AND ACCESS TO SHELTERS

CHILD PROTECTION

UNICEF:

- developed a package that has been used to train 1,444 social workers (718 women and 726 men) on psychosocial support and stigma prevention in all four of Pakistan’s provinces.
- supported the provision of psychosocial support and services (PSS) by trained social workers in Punjab, KP and Sindh, reaching 10,117 parents, caregivers, children and adults (478 girls, 437 boys, 4,868 women and 4,334 men). Of these recipients, 459 (four girls, four boys, 25 women and 426 men) accessed specialized counselling sessions across all provinces.
- conducted a rapid needs assessment with the Aga Khan Rural Support Programme (AKRSP) that shortlisted 13 quarantine and isolation centres for the provision of mental health and psychosocial support services (MHPSS). These centres for COVID-19 patients, and those prioritized for WASH support, offer an opportunity to deliver an integrated package of services. The Sehat Call Service in Gilgit-Baltistan began providing online psychosocial support and counselling, receiving 200 calls to date.
- reached 6.6 million people through stigma prevention messages on various platforms.

5. SUPPORT FOR SURVIVORS OF GENDER-BASED VIOLENCE

UN WOMEN:

- is coordinating COVID-19 GBV services, that are provided or supported by UNODC, UNFPA, WHO and UN Women, in line with the Essential Services Package for GBV Survivors, including technology-based solutions and advocacy campaigns

UNFPA:

- is supporting psychosocial support and referrals to services through the National Reproductive and Maternal Health Helpline, tele-psychosocial support services, and the upgraded Women Safety App, among others.
III. ECONOMIC RECOVERY: PROTECTING JOBS, SMALL- AND MEDIUM-SIZED ENTERPRISES, AND THE MOST VULNERABLE PRODUCTIVE ACTORS

**ILO:**
- contributed to the *Employment, Enterprises and Social Protection* chapter of the COVID-19 Pakistan Socio-Economic Impact Assessment, offering policy recommendations to address the pandemic’s impact on the labour market, employment and skills.
- provided technical assistance to social partners (employers’ and workers’ organizations) to help them respond to their members’ needs. For instance, the ILO supported the Pakistan Workers’ Federation to update its website with information on COVID-19, and held discussions with the Employers’ Federation and trade unions on materials they require.
- adapted the ILO employers’ guide, produced a short summary guide for employers on Sindh’s SOPs, and developed 14 posters on the SOPs for employers to display in workplaces to enhance safety and health as employees return to work.
- provided information, through ILO trainers, on safety and health during the return to work to factories participating in the Sustaining Competitive and Responsible Enterprises (SCORE) programme, in line with Sindh’s SOPs. Webinars were held for SCORE enterprises, trade associations and town associations on the SOPs. The ILO also trained SCORE trainers and presented SCORE factories with COVID-19 compliance software designed by a firm in Lahore, Punjab.
- met with the Special Assistant to the Prime Minister on Commerce and members of the Pakistan Buyers’ Forum to discuss policy responses to the COVID-19 crisis.

**UNIDO:**
- is assisting research on COVID-19’s impacts on SMEs and manufacturing firms.

**UNESCO:**
- is re-orienting ongoing initiatives to address COVID-19’s impact on artisans and artists.

**UNODC:**
- is working with the Government to ensure that criminal elements do not take advantage of the COVID-19 crisis to ramp up illicit trafficking and smuggling.

**IFAD:**
- has launched a *Rural Poor Stimulus Facility (RPSF)* to support farmers’ resilience. IFAD also granted a no-cost extension to the *Gwadar Lasbella Livelihood Support Project (GLLSP)* to provide cash grants of PKR 50,000 each of 8,200 of the poorest households, to help them acquire productive assets.

IV. MACROECONOMIC RESPONSE AND MULTILATERAL COLLABORATION

**UNDP:**
- supported the Planning Commission assess COVID-19’s macroeconomic impact and response measures, with inputs from the International Monetary Fund and the World Bank.

V. SOCIAL COHESION AND COMMUNITY RESILIENCE

**UNDP:**
- is reviewing local government structures to evaluate their effectiveness for the COVID-19 response, with a focus on promoting social dialogue, political engagement, community resilience, participation, service delivery, governance and the rule of law.

**UN Women:**
- is generating evidence on the drivers of extremist violence and its impact on women and girls in the context of COVID-19 to support authorities’ response, women’s access to information, and women’s participation in social cohesion and community resilience.