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PAKISTAN
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BRIEF

UNITED NATIONS RESPONSE TO COVID-19 IN PAKISTAN

Update 13 July 2020

SUMMARY

This brief summarizes the United Nations' (UN) support for Pakistan's Federal and Provincial Governments to address the COVID-19 crisis, between 5 June and 13 July 2020.

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“No one is safe until everyone is safe. This is the truth laid bare by COVID-19. Only if we ensure that no one is left behind can we overcome this unprecedented crisis. It is clear that the Sustainable Development Goals are our best option to recover better – to build a more equal, inclusive and resilient Pakistan that can withstand future crises, and turn the tide of COVID-19 now.” –

– Julien Harneis,
Resident and Humanitarian Coordinator,
United Nations Pakistan

The UN family is supporting the Government of Pakistan to minimize, mitigate and manage COVID-19's impact – to save lives, protect people and recover better. Our response is three-fold: an immediate WHO-led health response to suppress the virus' transmission, a comprehensive socio-economic response to address the human crisis affecting the core of Pakistan's society and economy, and a humanitarian response to address the humanitarian impacts of the pandemic on the most vulnerable groups in Pakistan.

Led by the UN Resident Coordinator, UN agencies are supporting country-level coordination, planning and monitoring so that Pakistan's COVID-19 response meets real needs. We are identifying gaps and keeping key players up-to-date on who is doing what, and where, to ramp up the response. Risk communication and community engagement is sensitizing the public on how to keep safe – through physical distancing, preventive measures, handwashing, hygiene and health-seeking. We are combatting the scourge of COVID-19 misinformation by increasing the volume and reach of trusted, accurate information across Pakistan. Engaging with influencers is helping to spread the word, including the media, religious leaders and young people. Our rapid response assistance is striving to improve testing capacity, surveillance and case management. On the frontline of infection prevention and control (IPC), UN agencies are distributing personal protective equipment (PPE), delivering training, spearheading awareness raising, and supporting water, sanitation and hygiene (WASH) facilities to protect those most at risk – from health workers and COVID-19 patients, to women, the elderly, children, youths, and people living in urban slums and remote rural areas.

The socio-economic response is guided by the five pillars of the UN's COVID-19 Pakistan Socio-Economic Framework. Our first priority is health. We are pairing support for the immediate health response with moves to strengthen Pakistan's health system, so that it continues delivering essential health services for the most vulnerable – such as immunization, maternal and newborn care, and HIV/AIDS treatment. Social protection and basic services are our second focus. We are prioritizing nutrition services, the continuity of education and learning through remote and alternative solutions, social protection, psychosocial support, shelters and services for survivors of gender-based violence (GBV). Economic recovery is our third guiding pillar, where we focus on at-risk workers, especially daily wage earners, alongside assistance for small and medium-sized enterprises (SMEs), the self-employed and entrepreneurs. The fourth and fifth pillars of our work champion multilateral collaboration and macroeconomic response, while fostering social cohesion grounded on community resilience.

The UN in Pakistan thanks the United Kingdom's Department for International Development (DFID), Global Affairs Canada, Australia's Department of Foreign Affairs and Trade (DFAT), the United States Bureau of International Narcotics and Law Enforcement Affairs (INL), the US Agency for International Development (USAID), the Governments of Japan, Norway, Germany, the Netherlands, Sweden and the European Union (EU) for supporting the COVID-19 response actions highlighted in this brief.





SUPPRESSING TRANSMISSION OF THE VIRUS



COUNTRY-LEVEL COORDINATION, PLANNING AND MONITORING

The United Nations Resident and Humanitarian Coordinator (UNRC/HC) leading the UN's health, humanitarian and socio-economic response to the COVID-19 crisis in Pakistan, bringing the UN system together to support the Government.

WHO is supporting Pakistan with science, solidarity and solutions. In June and July 2020, it focused on coordination, alongside improving testing capacity, infection prevention and control (IPC), case management and surveillance.

UP TO DATE INFORMATION

- **WHO** co-chaired the Health sector partners' virtual meeting (9 June 2020) with the Ministry of National Health Services, Regulation and Coordination. Highlighting the need for collective efforts to scale up the response, the meeting gave an overview of the current COVID-19 situation, UN and donors' support, government actions, and pressing challenges and gaps. WHO also briefed the Ambassadors of Norway, Sweden and Denmark and discussed their support for Pakistan's COVID-19 response.
- **UNFPA** recruited and deployed a senior public health expert, an epidemiologist and consultants to the Ministry of Health to boost COVID-19 response capacity on strategic communications and data analysis.

PARTNERS' PLATFORM:

Tracking spending and response

- **UNRCO** and **OCHA** coordinated with key partners – including the National Disaster Management Authority, the Ministry of Health, UN agencies and others – to help donors use the WHO 'Partners' Platform & Supply Portal. Pakistan's Economic Affairs Division (EAD) circulated letters with instructions on how to use the portal to register all the contributions to Pakistan's COVID-19 response. So far:
 - 19 donors have registered on the platform, with a total outlay of US\$1.8 billion. This includes US\$533.4 million pledged for the COVID-19 Pakistan Preparedness and Response Plan (PPRP) and US\$269.5 million for the socio-economic response
 - Regular quality checks are underway, as UNRCO assists donors to correct figures and details.
 - OCHA trained provincial staff from WHO, Departments of Health and Provincial Disaster Management Authorities (PDMAs) on the platform's three key components: assessing health actions, resource tracking and the supply portal.

COORDINATION AND ADVOCACY

- **UNDP** assisted the NDMA on inter-provincial coordination, supply chain management and financial oversight mechanisms, while supporting the Government of Khyber Pakhtunkhwa on human rights mechanisms and business continuity.
- **UNFPA's** senior technical experts on gender equality, and sexual and reproductive health and rights (SRHR) helped NDMA to integrate women's health and rights within Pakistan's COVID-19 response.



RISK COMMUNICATION AND COMMUNITY ENGAGEMENT (RCCE)

Led by UNICEF, the UN is supporting 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.

APPROACHES AND COORDINATION

- **UNICEF's** RCCE team used surveillance and social data to design a differentiated RCCE approach in settings with high burdens of COVID-19, urban slums and rural areas, as well as among health workers and the general public – all with a view to boosting effectiveness and optimizing resources. The team prioritized five key messages, based on the recommendations of RCCE briefs: (i) social/physical distancing, (ii) handwashing, (iii) using face masks, (iv) staying at home if you have symptoms, (v) and increasing risk perception. In tandem, it will continue messaging that encourages testing and early health-seeking behaviour.
- **UNDP** assisted the Ministry of Health to incorporate behavioural insights into crisis communication, data analysis and research. In Khyber Pakhtunkhwa, it supported the provincial government's COVID-19 awareness campaign by disseminating patient testimonials via social media, preparing infographics with key public health messages, and developing a 12-week work plan that reflects the province's needs.

OUTREACH:

Community mobilization and youth engagement

- **WHO** launched a high-level advocacy platform with Pakistan's medical associations to strengthen community mobilization, with an emphasis on busting myths and correcting misconceptions.
- **UNICEF** backed the use of the Sehat Tahafuz Polio Helpline (1166) for the COVID-19 response, supporting 85 of its 250 agents. To date, they have received 4.6 million calls and responded to over 2.2 million.
- **UNFPA** launched a neighbourhood watch project in the most socio-economically disadvantaged neighbourhoods in six districts of Karachi. Over 600 volunteers – youths, transgender and women activists – are disseminating door-to-door messages on prevention, while rickshaws and FM Radio have reached 300,000 people, to date, with key messages (see the RCCE section for more on UN awareness raising).
- **UNDP** continued to engage with parliamentarians and SDG Task Forces, supporting cross-party messaging for vulnerable groups. It partnered with UNICEF, UNFPA, UNHCR and UNESCO on a Youth and Adolescent COVID-19 Awareness Campaign, organized youth engagement initiatives, and advanced strategic communication with madaris/madrassas (religious seminaries) to raise awareness.

ENGAGING KEY PLAYERS:

Civil society, the media and religious leaders

- **UNICEF** has engaged 97,603 religious leaders to date through existing polio alliances and health programmes, mobilizing them to improve risk perception of COVID-19, emphasize the importance of physical distancing, and share preventive messages. These leaders communicate vital information through mosque announcements and during Friday prayers.
- **UNICEF** engaged 14,230 journalists, reporters and bloggers to promote key messages on COVID-19 across Pakistan, while countering myths. Working with civil society, **UNESCO** promoted fact-finding initiatives that yielded an online COVID-19 'disinformation resource hub', which was widely shared with media professionals, journalists and Community Support Officers. Its webinar on the challenges of providing accurate information to the public engaged more than 50 participants, in partnership with the EU Delegation and the Embassies of the Netherlands and Sweden. UNESCO also shared an online course on journalism in pandemics, audio messages on fake news, and two policy briefs on deciphering disinformation.

RAISING AWARENESS:

Gender and SRHR

- **UN Women** sensitized the public on COVID-19's gendered impact through the mainstream media, social media and radio campaigns. In Khyber Pakhtunkhwa's Merged Districts, a radio campaign reached 2.6 million people, including women and girls with IPC messages. A campaign in six languages with Radio Pakistan, FM and Medium Wave raised community awareness nationwide, while a joint press release with the Ministry of Human Rights reached 1.7 million people via 10 leading publications and news websites.
- **UNFPA** handed over 24,000 printed information, education and communication (IEC) materials – with messages on hygiene, pregnancy, breastfeeding and maternity care – to Pakistan's provinces. It also supported provincial partners to reprint and disseminate IEC materials on sexual and reproductive health.

ENGAGING WITH REFUGEES

- **UNHCR** and its partners redoubled their efforts to share preventive messaging and engage with refugee communities through What'sApp, telephone calls, SMS, and groups meetings at the village level. UNHCR staff visited refugee villages in Khyber Pakhtunkhwa, Balochistan and Punjab, meeting with community representatives, outreach volunteers, NGO partners and government counterparts to assess the situation. UNHCR community health workers delivered health sessions to communities in small groups on preventing COVID-19 transmission, referrals, and following the instructions of local and provincial administrations.



SURVEILLANCE, RAPID RESPONSE TEAMS AND CASE INVESTIGATION

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

STUDYING PREVALENCE

- **WHO** signed letter of understanding with the Health Services Academy in Islamabad to conduct an age-stratified 'Seroprevalence Study' to determine COVID-19's prevalence among Pakistan's population. Its meeting with Sindh's Chief Minister and Minister of Public Health advocated for increased laboratory testing, active case finding, testing all patients suffering from severe acute respiratory infections (SARI) and influenza-like illnesses (ILI), improving case management, and slowing transmission by placing patients with mild or moderate symptoms in isolation facilities.



LABORATORIES

WHO is supporting efforts to strengthen laboratory capacities in Pakistan.

- **WHO** handed over two real-time polymerase chain reaction (PCR) machines to Khyber Pakhtunkhwa's Minister of Health and Finance to improve the province's testing capacity.



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.

STRATEGIC PLANNING

- **UNICEF** developed an integrated IPC-WASH Strategy to optimize the use of limited resources to control and prevent the risk of infection. The strategy focuses on primary health care facilities in 11 districts with a high burden of COVID-19 – they are home to 65% of Pakistan's caseload, and 41% of COVID-related deaths.

PPE AND HYGIENE KITS

- **WHO** provided protective personal equipment (PPE) to a range of stakeholders, including the Obstetric and Gynecological Unit of Bolan Medical Complex and Sandeman Provincial Hospital in Quetta, Balochistan. It supplied 3,000 medical masks and 100 sanitizers to the Coordinator of the Expanded Programme on Immunization (EPI) in Islamabad Capital Territory. PPE was also handed over to Khyber Pakhtunkhwa's Director General of Health Services.
- **UNDP** also provided PPE to Khyber Pakhtunkhwa's rule of law institutions, including the Department of Home and Tribal Affairs, the police, provincial and district judiciary, and lawyers through the Bar Council.
- **OCHA** reached refugees with PPEs, infection detection kits, essential medicines and psychologist services, with funding from the Pakistan Humanitarian Pooled Fund. In tandem, **UNHCR** distributed consignments of PPE to refugee leaders, outreach volunteers, refugee community members and street food vendors.
- **UNFPA** began its third round of PPE provision, bringing the total number of PPE items distributed through the NDMA to 37,474. It also partnered with Punjab's Social Welfare Department and STEP to safely distribute hygiene kits to women with disabilities who are homebound or live in shelters. **UN Women** is distributing 10,000 hygiene kits to the most vulnerable women in Khyber Pakhtunkhwa's Merged Districts.

FRONTLINE WORKERS

- **WHO** supported the Ministry of National Health Services to develop and roll out the We Care campaign, designed to protect frontline health workers from the risk of infection by improving their adherence to, and understanding of, IPC guidelines through awareness raising training sessions. **UNICEF** and the Ministry of Health produced a video as part of the 'We Care' campaign for health workers, highlighting how serious COVID-19 is, how important it is to follow Standard Operating Procedures (SOPs) to reduce transmission, and how frontline workers are playing leading role in saving lives. Disseminating the video will boost risk perception and solidarity with Pakistan's frontline workers.



- **UNICEF**-supported IPC training strengthened the capacities of 34,279 frontline health workers. It also supported the training of 42,839 frontline health workers and community volunteers on COVID-19 case identification and referral, alongside training for 3,769 frontline sanitary workers on WASH and IPC in health facilities and high-risk communities.
- **UNFPA** trained 1,049 health workers – including doctors and nurses – as master trainers, enabling them to train 3,000 health workers through ‘trickle down’ trainings. The agency delivered 56 on-site, virtual and blended trainings across the country on IPC and standard precautionary measures, including training in quarantine facilities that targeted managers, support staff, cleaners, ambulance drivers and security guards.
- **UNICEF** rehabilitated and installed WASH facilities in 260 health facilities across Pakistan, easing 372,000 people’s access to safe drinking water and sanitation.
- **UNHCR** began rehabilitating water and sanitation facilities in 21 Mother and Child Health Centres in Khyber Pakhtunkhwa – repairing toilets, handwashing areas and water systems. **OCHA**-supported projects also installed handwashing points in Balochistan and Khyber Pakhtunkhwa. VII. Quarantine and case management.

WASH FACILITIES



QUARANTINE AND CASE MANAGEMENT

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

CASE MANAGEMENT TRAINING

- **WHO** partnered with Balochistan’s Department of Health to conduct a ‘Case Management Training Course on COVID-19’ for District Health Officers, Medical Superintendents and physicians from Quetta, Ziarat and Loralai. In Punjab, WHO and the provincial Department of Health conducted the second round of a case management training course for participants from Multan, Bahawalpur and Muzaffargarh.



OPERATIONAL SUPPORT AND LOGISTICS

The UN is actively supporting the timely sourcing and availability of quality essential medical supplies and protective equipment for the COVID-19 response.

MEDICAL SUPPLIES

- **WFP** is providing supply chain and logistical support to help procure, store and track medical supplies. The Logistics and Supply Chain Working Group, co-chaired by NDMA and WFP, is conducting a national level logistics capacity assessment to identify gaps and bottlenecks in the health supply chain.



HUMANITARIAN RESPONSE

The UN is addressing the humanitarian impact of COVID-19 on the most vulnerable groups in Pakistan.

WHO IS DOING WHAT, AND WHERE

- **OCHA** organized a Strategic Coordination Forum meeting (9 June) with the UNRC and National Disaster Management Authority (NDMA) to review the national and provincial situation, challenges, and the Government's planning and response to COVID-19, the locust emergency and upcoming monsoons. It also developed and disseminated daily situation reports to humanitarian and development partners, including donors, and provided information management support.
- **OCHA** consolidated the first round of data collected on the '4Ws' (who is doing what, where, and when) into a 4W matrix (see below). **UNICEF** co-chaired three meetings of the Child Protection Sub-Working Group with the NDMA, which integrated the inputs of the Child Protection and GBV Sub-Groups into the 4Ws matrix. UNICEF and the Global WASH Cluster helped the IPC-WASH sector publish an online 'Pakistan Sector Dashboard', which turns 4Ws analysis into a tool to visualize progress by each partner in each location.

CONNECTING PARTNERS

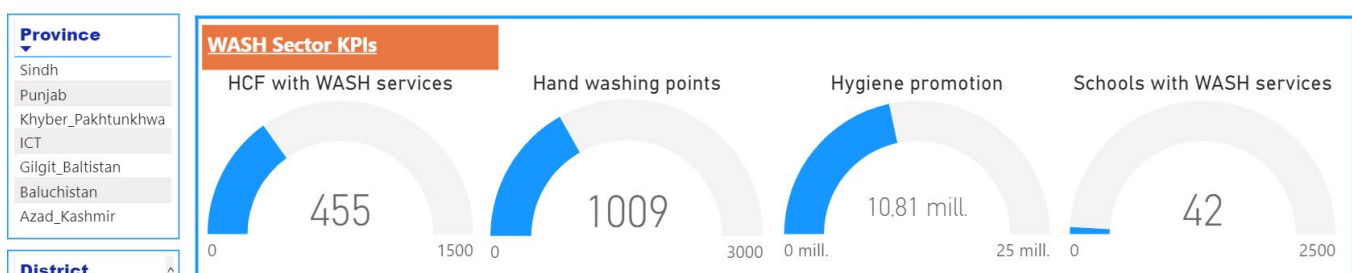
- **OCHA** provided coordination and advocacy support through the meetings of all sectoral Working Groups under the Humanitarian Response Plan. It linked humanitarian and development partners with PDMA and Health Departments, and is helping international and national non-governmental organizations (NGOs) to obtain the No Objection Certificates (NOCs) needed to implement projects.

IMMEDIATE RESPONSE

- **OCHA** manages the Pakistan Humanitarian Pooled Fund, through which it disbursed US\$2.5 million for three projects in Khyber Pakhtunkhwa (with CHEF International, EHSAR and SHED) and two in Balochistan (with BRSP and the Taraqee Foundation). The projects are focus on capacity building for health staff on IPC in selected health facilities, in coordination with PDMA and Departments of Health, coupled with capacity building initiatives that targeted refugee communities.

SNAPSHOT OF THE PAKISTAN SECTOR DASHBOARD

Pakistan WASH Sector Working Group - COVID-19 Response 4Ws Data Analysis





PAKISTAN

As of 24 June 2020

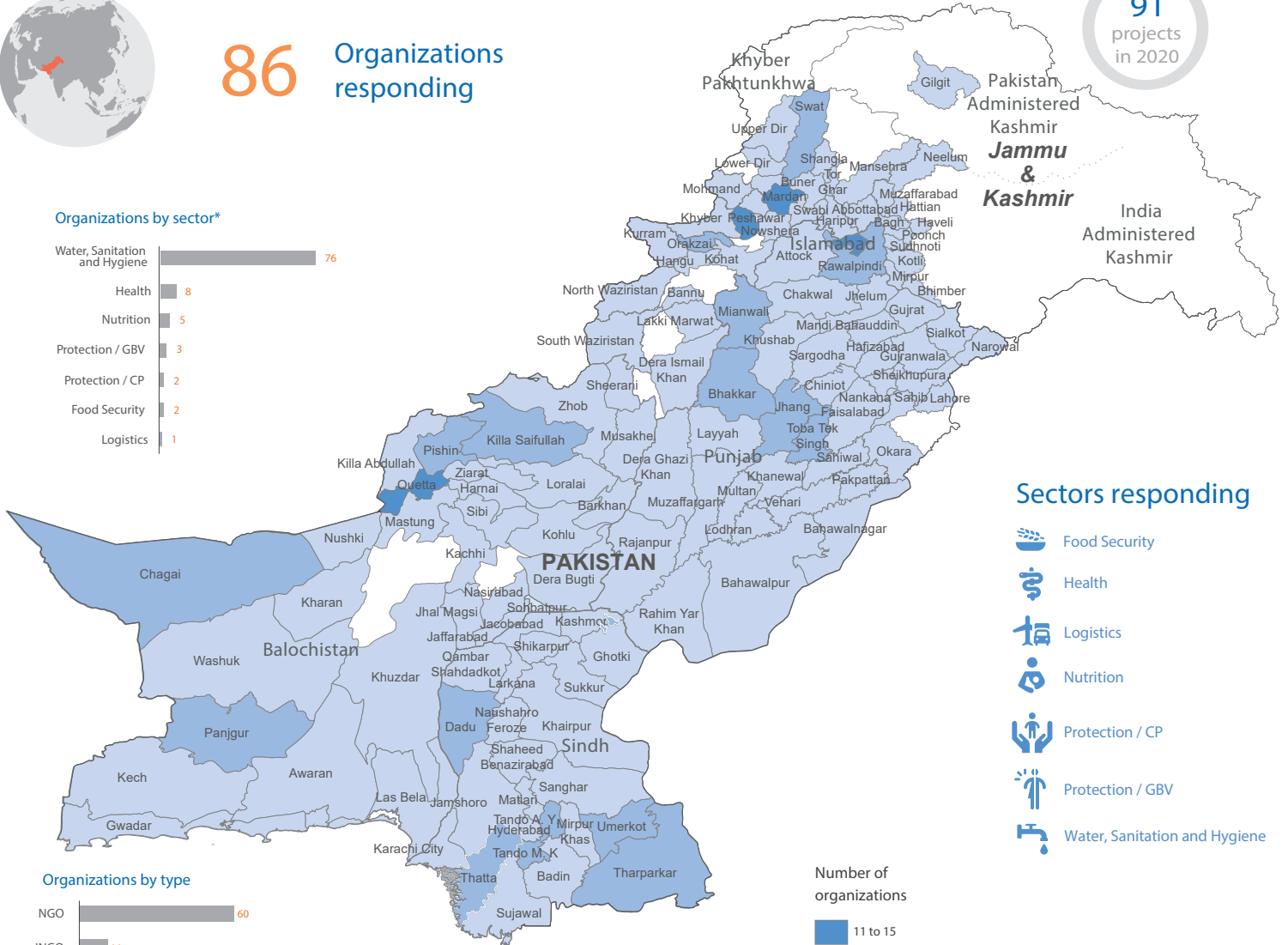
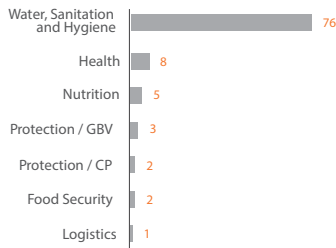
Who is doing what and where (4W matrix) - Jan to June 2020



86 Organizations responding

91 projects in 2020

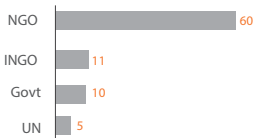
Organizations by sector*



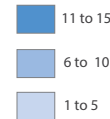
Sectors responding

- Water, Sanitation and Hygiene
- Protection / GBV
- Protection / CP
- Nutrition
- Logistics
- Health
- Food Security

Organizations by type



Number of organizations



*Number of organizations are part of more than one sector

The boundaries and names shown and the designations used on this map do not imply official endorsement or acceptance by the United Nations. Dotted line represents approximately the Line of Control in Jammu and Kashmir agreed upon by India and Pakistan.





SOCIO-ECONOMIC RESPONSE

The UN Resident and Humanitarian Coordinator is leading the overall UN response to COVID-19 in Pakistan based on five key pillars, 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 the COVID-19 response.

BENEFICIARY DATA

- **WFP** is rolling out its corporate biometric beneficiary information and transfer management platform (SCOPE) across the country. Its use will reduce duplication and help identify beneficiaries targeted by multiple government social protection, education and health programmes.

GENDER-SENSITIVE planning, budgeting and data collection

- **UN Women** delivered training on gender-responsive planning and budgeting guidelines, with a focus on addressing gender inequalities that are growing in the wake of COVID-19. It trained planning officers, budgeting officers and senior decision-makers of the Departments of Labour, Social Welfare, Women Development, and Planning & Development Departments in Punjab and Khyber Pakhtunkhwa.
- **UN Women** and the National Commission on Status of Women began setting up Pakistan's first National Gender Data Portal to improve the production, collection and use of gender statistics to inform gender-sensitive policies and programmes. Federal and provincial stakeholders attended the portal's first Technical Review Group meeting in June 2020.



I. HEALTH FIRST: PROTECTING HEALTH SERVICES AND SYSTEMS DURING THE CRISIS

TELEMEDICINE

- **UNDP** is working with the Ministry of National Health Services to pilot a telemedicine intervention that links junior doctors in under-equipped and understaffed intensive care units (ICUs) with critical care specialists who can provide guidance on patient care. The intervention is backed by the core funds of UNDP and **UNFPA**.
- **UNICEF** is supporting Khyber Pakhtunkhwa's Public Health Association to provide telemedicine services. To date, the association has received 4,152 calls.

ESSENTIAL CARE

- **UNICEF** is assisting the Departments of Health in Pakistan's provinces and administrative areas to ensure the continuation of essential primary health care services – including immunization, antenatal and postnatal care, delivery services, childcare and curative care for adults. By targeting 136 health facilities, this support has reached 967,810 people in Pakistan since the onset of the COVID-19 crisis.
- **UNICEF** met with the Expanded Programme on Immunization to discuss Pakistan's immunization catch-up strategy for children, financing for the procurement of vaccines, and current vaccine stocks. The Polio Technical Advisory Group meeting discussed on the resumption of National Immunization Days, immunization services, challenges due to COVID-19 and possible mitigation measures.
- **UNICEF** followed up with 1,133 HIV patients in Sindh's Larkana district through telephone calls and home visits, as part of community-based interventions to ensure the continuity of paediatric HIV services and antiretroviral therapy for communities at the epicentre of 2019's HIV outbreak.



II. PROTECTING PEOPLE: SOCIAL PROTECTION AND BASIC SERVICES



1. SOCIAL PROTECTION

LEAVING NO ONE BEHIND

- **UNICEF** supported a parliamentary session on child-sensitive budgeting to ensure that the plight of children – especially in the context of COVID-19 – is addressed in the next budgeting cycle.
- **WFP** and the Benazir Income Support Programme (BISP) provided cash top-ups to 50,000 severely drought-affected BISP beneficiary households in six districts of Sindh and Balochistan. In parallel, an innovative nutrition-sensitive safety net programme focused on stunting prevention is in the final stages of preparation.
- **UNHCR** will replicate the Government's emergency *Ehsaas* assistance programme for vulnerable Pakistanis by providing PKR 12,000 in cash assistance to the most vulnerable refugees in Pakistan. A community profiling exercise identified over 45,000 households, and assistance has been approved for 22,000 of them.



2. FOOD AND NUTRITION

SURVEILLANCE AND AID

- **WFP** is working with the Federal Government and UN partners to set up a country-wide surveillance system to monitor the impacts of COVID-19 on households' food security and nutrition. Moreover, the agency appropriated US\$1.5 million from its other operations to provide emergency food assistance to over 120,000 people in Khyber Pakhtunkhwa and Balochistan.

ADDRESSING MALNUTRITION

- **UNICEF** developed an online training course for health workers on infant and young child feeding (IYCF) practices and the management of wasting. The course was submitted to the National Nutrition Working Group for endorsement.
- **UNICEF** supported 2,828 health facilities to treat children for severe acute malnutrition (SAM). To date, 27,216 severely malnourished children have been admitted for treatment to date across all four provinces.
- **UNHCR** reached an agreement with the Government of Khyber Pakhtunkhwa to ensure that Afghan refugees have access to government-managed nutrition stabilization centres near refugee villages.

MYTH BUSTING

and awareness raising

- **UNICEF** helped inter-personal communication on infant and young child feeding practices reach 201,708 mothers and caregivers. In Punjab, video messages on IYCF in the context of COVID-19 were played at health facilities, reaching 0.6 million caregivers. UNICEF's 'Frequently Asked Questions' (FAQ) addressing food-related myths and misconceptions was endorsed and will be shared with federal and provincial call centres.



3. EDUCATION

REMOTE EDUCATION

- **UNICEF** is leading the development of National Learning Continuity Framework to ensure that all policy and programmatic responses cater to the diverse range of technologies, geographies, languages, grade levels, and students' family support levels. In this context, UNICEF is supporting the Ministry of Federal Education and Professional Training's 'Teleschool' broadcast – aired for 8 hours, Monday to Saturday, using repurposed content provided by private sector EdTech providers. The Gallup survey estimates that around 7 to 8 million children between the ages of 5 and 15 are tuning in to the broadcasts.
- **UNESCO** will broadcast radio programmes for primary school children, in collaboration with the Ministry of Education. The programmes focus on children unable to access television or digital technologies, between Grades 1 and 3 in 18 marginalized districts. The broadcasts will follow the approved curriculum and student learning outcomes (SLOs), while including public service messages, infomercials, jingles and 'infotainment' on COVID-19 awareness and prevention.

ALTERNATIVE LEARNING

- **UNICEF**-supported alternate learning opportunities have reached 80,230 children to date. In Sindh, the learning application 'Mera Sabaq' ('My Lesson'), supported by the provincial School Education Department is gaining popularity, as videos and content are increasingly downloaded.

PLANNING THE REOPENING OF SCHOOLS

- **UNESCO** and its implementing partners developed plans to facilitate the safe reopening of educational institutions – addressing school safety aspects, health and hygiene, the provision of COVID-sensitive school facilities, psychosocial support sessions for students and parents, and awareness-raising through School Management Committees and community support groups.
- **WFP** and the Khyber Pakhtunkhwa Department of Education are finalizing preparations for a new cash-based education programme targeting 20,000 girls studying in secondary schools in all the Merged Districts and Frontier Regions of the province. Initially unconditional, this cash assistance become will become conditional based on students' attendance once schools re-open in order to incentivize parents to send their daughters back to school.
- **UNICEF** trained 570 teachers on the safe reopening of schools and psychosocial support.



4. CONTINUITY OF SOCIAL SERVICES AND ACCESS TO SHELTERS

BUSINESS CONTINUITY AND JUSTICE

- **UNDP** provided business continuity support to the Government of Khyber Pakhtunkhwa by distributing computer hardware, including webcams and microphones.
- **UNDP** supplied Zoom licenses to the Peshawar High Court, Peshawar's Central Police Office and the Khyber Pakhtunkhwa Bar Council to support justice services. The agency is working with the Peshawar High Court to establish virtual courts in the province, including in the Merged Districts. The first virtual facility will begin work in Peshawar in the first week of July 2020; other districts will follow suit in July and August.

DATA PROTECTION

- **UNESCO** and the Parliamentarians' Commission for Human Rights conducted multiple focus group discussions on upholding the right to privacy and data protection during and after the COVID-19 crisis.

WOMEN'S SHELTERS AND SRHR

- **UNFPA** and the NDMA developed 'Guidelines for Minimum Standards of Care' during the COVID-19 crisis for women's shelters, including *darulaman* and centres for women.
- **UNFPA** supported the continued functioning of Women-Friendly Health Spaces for Afghan refugee settlements in Balochistan, Khyber Pakhtunkhwa and Sindh, which provide case management, referral, basic GBV and SRHR services. To date, 1,330 women in Balochistan and Khyber Pakhtunkhwa have participated in awareness raising sessions in these spaces.
- **UNFPA** partnered with the Population Council to launch a reproductive health helpline, enabling women to seek counselling and advice from women doctors on family planning, maternal health and newborn care.

PSYCHOSOCIAL SUPPORT

- **UNICEF** supported the training of 1,821 social workers (942 women and 879 men) on psychosocial support and preventing stigma in all of Pakistan's provinces. Trained professionals have delivered psychosocial support and services (PSS) to 26,047 parents, caregivers, children and adults to date.
- **UNDP** provided psychosocial support to COVID-19 patients, their families, and health care professionals in Sindh through a dedicated helpline, web portal and mobile application.
- **UNFPA** and Aahung conducted Facebook Live sessions with experts on menstrual hygiene management, young people's psychosocial well-being during the lockdown, gender based violence, and inequalities.
- **UN Women** is working to increase the capacity of Provincial Disaster Management Helplines to provide psychosocial support for survivors of gender-based violence.

DATA ON MENTAL HEALTH

- **UNICEF, UNFPA** and **UNDP** conducted a youth perception study on COVID-19, engaging 10,437 young people between the ages of 15 and 29. Close to 60% (more young women than men) feel that COVID-19 has had an adverse impact on their mental well-being. More than 43% fear that many youths will drop out of school to look for work, prompted by COVID-19's devastating economic impact on households nationwide.
- **UNICEF** analysed data on a sample of 350 beneficiaries who have sought mental health and psychosocial support services (MHPSS) to understand pressing needs. Far more adults (89%) than children (11%) have accessed these services, as have more men (67.4%) than women. While 230 people reported common mental health concerns, 40% reported that their children are experiencing challenges – from nightmares to bed wetting or clinging to parents. Further analysis will be conducted to understand these trends.



5. SUPPORT FOR SURVIVORS OF GENDER-BASED VIOLENCE

HELPLINES

- **UN Women** is supporting national and provincial partners to strengthen response helplines on gender-based violence and cyber harassment. Their data will highlight trends that can be used to formulate evidence-based interventions and policies to address increased cases of violence and harassment. For instance, the agency supported the Digital Rights Foundation's Cyber Harassment Helpline to ensure that their operations remain available to survivors 24/7, amidst the surge in harassment cases during the COVID-19 crisis. UN Women is also helping the Ministry of Human Rights to integrate a panic button, equipped with geo-tagging, into its National Helpline – a boon for swift redressal support – while supporting the SMS Helpline and the inclusion of referral pathways specifically for GBV survivors.
- **UNFPA** supported Rozan's National Helpline for GBV survivors and the Bolo Helpline in Khyber Pakhtunkhwa with technical input and equipment.

TOOLS AND DISCUSSIONS

- **UNFPA** partnered with Punjab's Safe Cities authorities to upgrade the 'Women Safety App' – an innovative solution to the challenges of women's restricted mobility and gender-based violence during the lockdown, and beyond. Equipped with essential features, the application will enable women in emergencies to call for help and get an immediate response from teams deployed to their precise location.
- **UN Women** and Khyber Pakhtunkhwa's Ombudsperson Secretariat launched a toolkit on 'Understanding Sexual Harassment and Role of Duty Bearers and Right Holders' to guide institutional capacity building, with a view to strengthening the implementation of sexual harassment legislation. A webinar organized with the Noor Education Trust shed light on how to counter cyber harassment and secure data privacy.



III. ECONOMIC RECOVERY: PROTECTING JOBS, SMALL AND MEDIUM-SIZED ENTERPRISES, AND THE MOST VULNERABLE PRODUCTIVE ACTORS

PROTECTING WORKERS

- **UNDP** provided short-term employment for daily wage earners in the suburbs of Peshawar, Khyber Pakhtunkhwa, through cash-for-work activities that aim to sustain livelihoods during the pandemic.
- UN Women advanced income replacement opportunities for women home-based workers to build their economic resilience, with the support of private sector partners, including companies that have signed up to the Women's Empowerment Principles.
- **UNESCO** organized online webinars with artists, performers and cultural professionals to assess COVID-19's economic impact on Pakistan's culture sector. The debates recommended innovative solutions to sustain culture-based livelihoods. UNESCO also re-oriented its culture initiatives to address COVID-19's impact on artisans, performers and artists by engaging Pakistan's most marginalized communities in income generation interventions.





SMES AND ENTREPRENEURS

- **UN Women** supported women-led small and medium-sized enterprises (SMEs) to access new procurement opportunities, alongside opportunities for climate-resilient agriculture for women farmers.
- **UNDP** helped the Small and Medium Enterprise Development Authority (SMEDA) to build a platform for SMEs to develop personalized e-commerce websites, list their products on existing websites like daraz.pk, and build their online presence on social media. The agency will train SMEDA officials to deliver these services. UNDP also delivered online business incubation training and mentoring to young people in Khyber Pakhtunkhwa's Merged Districts, equipping them to pursue new avenues of income generation and employment. It is providing business development grants to small-scale entrepreneurs in the districts to help them start, or scale up, their businesses. In June 2020, 406 entrepreneurs – 43 of whom are women – received business development (in kind) grants.



IV. MACROECONOMIC RESPONSE AND MULTILATERAL COLLABORATION

PARTNERSHIPS

- UN agencies continued to prioritize multilateral collaboration to support Pakistan's response to the COVID-19 pandemic.



V. SOCIAL COHESION AND COMMUNITY RESILIENCE

ENGAGING YOUTHS

- **UNESCO** collaborated on the Ministry of Information's 'Pakistan Peace Collective' project to build youth's long-term resilience through media and information literacy and a mentorship programme. These initiatives will also raise awareness on issues linked to social media – such as stigma, intolerance, fake news, and gender-related issues.

DATA ON EXTREMISM

- **UN Women** worked to generate evidence on the drivers of extremist violence, in order to support Pakistan's national and provincial authorities to effectively respond to the gendered dimensions of violent extremism. This was paired with moves to ensure that women in hard-to-reach communities have access to the information they need to engage in building social cohesion and community resilience.

