

Pakistan

# Consolidated Emergency Report 2023



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*Young girls in the safe and secure environment of a Child Friendly Safe Space established by UNICEF in the flood affected village Wahid Bakhsh of Chatter tehsil, Nasirabad district, Balochistan province. UNICEF established Safe Spaces for creative learning and protection of children and women in flood affected districts.*

Prepared by:  
UNICEF Pakistan  
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## Expression of Thanks to Partners who Made Results Possible

Since the devastating floods of 2022, many districts in Pakistan continue to struggle with persistent vulnerabilities, leaving millions without essential services. The compounded crises of food insecurity, high malnutrition rates, recurring economic crisis and limited fiscal space further exacerbated the humanitarian challenges throughout 2023. Similarly, Afghans of different statuses in Pakistan often faced increased hardship in 2023.

In the face of such adversity, the role of our donor partners has been invaluable. Together, we have remained committed to supporting vulnerable children and communities, facilitating post-flood recovery, addressing humanitarian needs, and strengthening climate resilience and emergency preparedness. Your contributions have enabled UNICEF to respond swiftly and effectively, providing critical support to children and families in need. Your funding has empowered us to deliver life-saving assistance and prepare communities for future emergencies.

UNICEF's work for children is funded entirely through individual donations and the voluntary support of our partners in governments, civil society, and the private sector. Voluntary contributions enable UNICEF to deliver on its mandate to protect children's rights, to help meet their basic needs, and to expand their opportunities to reach their full potential.

Your support has ensured the timely allocation of resources and helped amplify our advocacy efforts and effectively achieve results across programmes.

In 2022-2023, UNICEF required US\$173.5 million to provide life-saving support to women and children affected by the floods. In addition to the re-purposing of core/regular resources, contributions from Australia, Denmark, the European Union, France, Germany, Ireland, Japan, the Republic of Korea, Kuwait, Norway, Romania, Sweden, the United Arab Emirates, the United Kingdom, the United States of America, the UN Central Emergency Response Fund, UNHCR, Gavi, the Vaccine Alliance, Education Cannot Wait, Global Partnership for Education, UNICEF National Committees (Australia, Austria, Canada, Denmark, France, Germany, Hong Kong, Ireland, Japan, Republic of Korea, Luxembourg, New Zealand, Norway, Poland, Switzerland, United Kingdom, United States), private sector partners Telenor, Unilever, Ernst & Young, Z.V.M.G. Rangoonwala Trust, Ze Shan Foundation, DP World, Flexport, Maersk, The Church of Jesus Christ of Latter-day Saints, and flexible thematic humanitarian funding were critical to the response. UNICEF is grateful to its partners for the much-needed resources, as these have been essential for the continued response and recovery. UNICEF also required US\$66.2 million under the 2023 Afghan Regional Refugee Response Plan, launched in April 2023, and is thankful to Japan, the Netherlands, and the United States of America for contributing much needed resources towards UNICEF's response under the plan.

The achievements described in this report were the result of these new and continued partnerships. In particular, UNICEF extends special thanks to all resource partners that contributed thematically to our humanitarian responses, giving us the critical flexibility to respond timely when and where most required. As we reflect on the challenges faced by the most vulnerable communities in Pakistan, we extend our deepest gratitude for your continued, unwavering support and collaboration.

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## Abbreviations and Acronyms

<b>AAP</b>	Accountability to Affected Populations	<b>FAO</b>	Food and Agriculture Organisation of the United Nations
<b>ACC</b>	Afghan Citizen Card	<b>FRP</b>	Flood Response Plan
<b>BoQ</b>	Bill of Quantity	<b>GBV</b>	Gender-Based Violence
<b>CAR</b>	Commissionerate for Afghan Refugees	<b>GHTF</b>	Global Humanitarian Thematic Funding
<b>CER</b>	Consolidated Emergency Report	<b>HAC</b>	Humanitarian Action for Children
<b>CPE</b>	Child Protection in Emergencies	<b>HCT</b>	Humanitarian Country Team
<b>CPU</b>	Child Protection Unit	<b>HPT</b>	High Performance Tents
<b>CSOs</b>	Civil Society Organisations	<b>HQ</b>	Headquarters
<b>DCPU</b>	District Child Population Unit	<b>IEC</b>	Information, Education and Communication
<b>DHIS</b>	District Health Information System	<b>IFA</b>	Iron Folic Acid
<b>ECD</b>	Early Childhood Development	<b>IFRC</b>	International Federation of Red Cross and Red Crescent Societies
<b>EMOPS</b>	Office of Emergency Programmes (UNICEF)	<b>IFRP</b>	Illegal Foreigners Repatriation Plan
<b>ESWG</b>	Education Sector Working Group		

<b>INGO</b>	International Non-Government Organisation	<b>MDGs</b>	Millennium Development Goals
<b>IOM</b>	International Organisation for Migration	<b>MGT</b>	Multi-grade Teaching
<b>IP</b>	Implementation Partner	<b>MHM</b>	Menstrual Hygiene Management
<b>IPC</b>	Integrated Food Security Phase Classification	<b>MHPSS</b>	Mental Health and Psychosocial Support
<b>IPSOS</b>	Institut Public de Sondage d'Opinion Secteur	<b>MICS</b>	Multiple Indicators Cluster Survey
<b>IRC</b>	International Rescue Committee	<b>MMS</b>	Multiple Micronutrient Supplements
<b>ISCG</b>	Inter-Sector Coordination Group	<b>MMT</b>	Multiple Micronutrient Tablet
<b>IYCF</b>	Infant and Young Child Feeding	<b>MUAC</b>	Mid Upper Arm Circumference
<b>KP</b>	Khyber Pakhtunkhwa	<b>MoNHSR&amp;C</b>	Ministry of National Health Services Regulations and Coordination
<b>KWSB</b>	Karachi Water and Sanitation Board	<b>NDMA</b>	National Disaster Management Authority
<b>LHW</b>	Lady Health Workers	<b>NGOs</b>	Non-Government Organisations
<b>LTA</b>	Long-Term Agreement	<b>NNWG</b>	National Nutrition Working Group
<b>MAM</b>	Moderate Acute Malnutrition		

<b>NOC</b>	No Objection Certificate	<b>PLW</b>	Pregnant Lactating Women
<b>NSC</b>	Nutrition Stabilization Centre	<b>PSEA</b>	Prevention of Sexual Exploitation and Abuse
<b>OCHA</b>	Office for the Coordination of Humanitarian Affairs (United Nations)	<b>PSEAH</b>	Protection from Sexual Exploitation, Abuse and Harassment
<b>OIAI</b>	Office of Internal Audit and Investigations	<b>PSS</b>	Psychosocial Support
<b>OTP</b>	Outpatient Therapeutic Programmes	<b>PT/SMC</b>	Parent Teacher School Management Committee
<b>PCO</b>	Pakistan Country Office	<b>POR</b>	Proof of Registration
<b>PCRWR</b>	Pakistan Council for Research on Water Resources	<b>RRP</b>	Refugee Response Plan
<b>PDM</b>	Post-Distribution Monitoring	<b>RUTF</b>	Ready to Use Therapeutic Food
<b>PDMA</b>	Provincial Disaster Management Authority	<b>SAM</b>	Severe Acute Malnutrition
<b>PFA</b>	Psychosocial First Aid	<b>SBC</b>	Social Behaviour Change
<b>PITE</b>	Provincial Institute of Teachers' Education	<b>SEA</b>	Sexual Abuse and Exploitation
		<b>SGBV</b>	Sexual and Gender Based Violence

<b>SHAMS</b>	Self-Care and Hope through Adolescent Mental Health and Psychosocial Support	<b>TSS</b>	Transitional School Shelters
		<b>UASC</b>	Unaccompanied and Separated Children
<b>SHK</b>	Student Hygiene Kit	<b>UN</b>	United Nations
<b>SIB</b>	School in a box	<b>UNCT</b>	United Nations Country Team
<b>SMART</b>	Standardized Monitoring Assessment for Relief and Transition Method	<b>UNFPA</b>	United Nations Population Fund
<b>SMC</b>	School Management Committee	<b>UNHCR</b>	United Nations High Commissioner for Refugees /the UN Refugee Agency
<b>SNIDs</b>	Sub-National Immunisation Days	<b>UNICEF</b>	United Nations Children's Fund
<b>SLK</b>	Student Learning Kit	<b>WASH</b>	Water, Sanitation and Hygiene
<b>SSWF</b>	Social Service Workforce	<b>WFP</b>	World Food Programme
<b>TLC</b>	Temporary Learning Centres	<b>WHO</b>	World Health Organisation
<b>TSFP</b>	Targeted Supplementary Feeding program		

## Executive Summary

This Consolidated Emergency Report underscores UNICEF Pakistan's robust humanitarian response to the multifaceted challenges faced in 2023.

Throughout the year, Pakistan continued grappling with the aftermath of the floods that affected 94 districts and impacted over 33 million people in 2022. Amongst the affected, an estimated 20.6 million people, including 9.6 million children, required humanitarian assistance. Concurrently, the protracted Afghan refugee crisis continued to strain resources, with a population of nearly three million Afghans of different statuses, 49 per cent of whom are under the age of 18, and their host communities often vulnerable and in need of humanitarian assistance. Further, the nutrition situation has been of great concern, and the Standardized Monitoring and Assessment of Relief and Transitions (SMART) surveys conducted in 12 districts of Balochistan, Khyber Pakhtunkhwa (KP) and Sindh provinces in 2023, revealed that prevalence of wasting ranged from 22.1 per cent in Sindh to 13.7 per cent in KP, with many districts exceeding the emergency threshold of 15 per cent set by the World Health Organisation (WHO).

UNICEF remained committed to humanitarian principles, making significant progress through effective cluster coordination and inter-agency partnerships to meet immediate needs and lay the groundwork for long-term recovery and resilience-building efforts. UNICEF collaborated with government entities, UN agencies, and a range of civil society organizations as well as communities themselves to provide critical assistance across the sectors, including child protection, healthcare and nutrition, water, sanitation and hygiene (WASH), education, and accompanied across the sectors by strong social and behaviour change and gender interventions and Prevention of Sexual Exploitation and Abuse (PSEA).

### Results achieved<sup>1</sup>:

**Maternal, Newborn, and Child Health (MNCH):** UNICEF extended primary healthcare services to over **six million individuals, including critical measles vaccinations for 1.9 million children (one million girls and 900,000 boys) and antenatal care for nearly 570,000 pregnant women** in areas affected by the 2022-floods. Moreover, 108 health facilities were rehabilitated in flood-affected areas. An additional half a million individuals among Afghan refugees and their host communities were also supported with access to primary healthcare services.

**Nutrition: Screening of 13,353,505 (6,738,499 girls and 6,615,006 boys) children using Mid-Upper Arm Circumference-tapes (MUAC)<sup>2</sup> in 84 flood-affected districts** allowed identifying over 663,335 (363,576 girls and 299,759 boys) children with severe acute malnutrition (SAM)

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<sup>1</sup> UNICEF programme results reported are for the 2022-2023 period (aligned with the flood response appeal that covered two years), except for Nutrition and Education sectors which reflect results only for 2023. All the Afghan Regional Refugee Response Plan results are for 2023 only.

<sup>2</sup> MUAC is a simple measurement that can be used to identify children (six months to five years) who have malnutrition and are at risk of dying. It uses a coloured tape that is wrapped around the left upper arm. Parents and carers can be trained to measure the MUAC. Children whose arm circumference falls within the red or yellow indicator on the coloured tape (see table below) should be referred to the nearest health or nutrition centre.



and out of these, **540,000 (301,249 girls and 238,751 boys) children suffering from SAM were referred for life-saving treatment at the UNICEF Supported Outpatient Therapeutic Programme (OTP) sites**; in addition, millions were reached with micronutrient supplements. An additional 40,000 children (22,871 girls and 17,129 boys) were admitted for treatment with Ready to Use Therapeutic Food (RUTF) in OTPs among Afghan refugees and their host communities.

**WASH:** UNICEF ensured access to safe water for **2,749,343 people (631,098 girls, 630,676 boys, 691,389 women and 796,180 men) and sanitation facilities for 386,736 people in flood-affected areas**. Besides this, UNICEF provided WASH supplies for general and menstrual hygiene to **2,759,640 individuals**. UNICEF installed and restored WASH facilities in 401 schools and 95 health facilities. These initiatives mitigated waterborne diseases and enhanced the well-being of vulnerable populations, including women and children. Additionally, UNICEF also supported Afghan refugees by rehabilitating **71 safe drinking water facilities for 214,070 refugees** (48,251 girls, 50,221 boys, 56,643 women and 58,955 men), and by providing WASH supplies and hygiene awareness to 157,212 and 90,037 individuals respectively. UNICEF also restored WASH infrastructure in 76 schools and 37 healthcare facilities.

**Education:** UNICEF established **773 Temporary Learning Centres and 323 Transitional School Shelters, benefiting 225,749 children (95,264 girls), conducted minor repairs in 377 schools, as well as dewatering, fumigation and cleaning of 70 schools in flood-affected districts**. Trainings for teachers and caregivers enhanced psychosocial support, contributing to educational continuity despite the challenges. Amongst Afghan refugees, UNICEF supported 91,794 children through catch-up classes and non-formal education.

**Child Protection:** Through partnerships and government systems (District Child Protection Units), UNICEF provided case management services to over **9,670 at-risk children (4,444 girls and 5,226 boys), psychosocial support to 750,000 children and caregivers, and birth registration to 151,115 children**. UNICEF reached more than **5.5 million individuals (1,398,572 girls 1,322,740 boys, 1,815,635 women, 1,321,443 men) with information on key child protection risks and available services**. UNICEF also reached **1,718,249 children and women (564,694 girls, 475,817 boys, 677,738 women) on awareness on gender-based violence (GBV) risk mitigation, prevention and response interventions**. Through UNICEF's model for adolescent-led mental health and psychosocial support (MHPSS), more than 500 school-teachers were trained which impacted over 10,000 adolescent girls and boys across 34 districts.

**Social and Behavior Change:** UNICEF's interventions engaged communities, reaching approximately **7.5 million individuals**, fostering positive behavioral changes, and enhancing resilience amidst emergencies.

**Funding Gap:** Despite significant achievements, UNICEF faced a funding gap of US \$50 million (29 per cent of the requirement) for 2022-2023, hindering the expansion of some of the critical response and recovery activities for the flood response. For the Afghan response 2023, UNICEF faced an overall funding gap of \$8,262,223 (or 20 per cent of the total requirement).

## Humanitarian Context

The humanitarian situation in Pakistan remains challenging, especially for children.

### Continued flood response

In 2023, Pakistan continued to address pressing humanitarian needs resulting from the 2022 floods, the most severe monsoon season on record. The 2022 floods affected more than 33 million people (13 per cent of the population) in 94 (55 per cent) of Pakistan's 170 districts resulting in the loss of 1,739 lives<sup>3</sup>. Among those affected, an estimated 20.6 million people, including 9.6 million children required humanitarian assistance. The hardest-hit districts – host some of the most vulnerable communities in Pakistan – suffered from multiple deprivations already before the floods. According to the National Disaster Management Authority (NDMA) the floods damaged or destroyed more than 2.3 million homes and wiped out over 1.7 million hectares (4.4 million acres) of crops, while over 800,000 livestock perished.

As waters receded, affected populations returned to their communities, where they had to deal with damaged houses and a lack of essential social services. Emergency response transitioned to early recovery and rehabilitation and reconstruction throughout the year, with continued targeted outreach and establishment of temporary services delivery sites in the most affected and vulnerable communities, noting the continued and substantial needs remaining for a full recovery.

The worldwide surge in food and energy prices in 2022-2023, was also felt in Pakistan, impacting consumers, particularly the underprivileged. The economic downturn was exacerbated by the loss of infrastructure, businesses, crops, and livestock and resulted in a surge in poverty levels (estimated as 8-9 million additional people potentially being pushed below the poverty line)<sup>4</sup>.

Amid ongoing recovery efforts from the floods, Pakistan faced a couple of smaller-scale emergencies in 2023. A significant earthquake struck the Hindukush region of Afghanistan in March 2023 with a magnitude of 6.8 on the Richter scale. It caused aftershocks felt across big parts of Pakistan, with some comparatively minor damage also experienced in the KP province. The earthquake resulted in 11 casualties including two children and three women, and 79 individuals injured including 13 children and 32 women. Moreover, 172 houses were fully or partially damaged and seven schools were partially damaged.

During the 2023 monsoon season, heavy rainfalls from April intermittently until the end of July resulted in some overflowing of rivers and flash floods. The most significant damage was experienced in Balochistan province with two damaged bridges, temporary closure of major highways and loss of life. Multiple districts in KP were also affected by the heavy rainfall resulting in landslides, some casualties and damage to property and crops.

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<sup>3</sup> Pakistan Floods Response Plan Final Report October 2023.pdf

<sup>4</sup> The PDNA Human Impact Assessment highlighted that the national poverty rate may increase by 3.7 to 4.0 percentage points, potentially pushing between 8.4 and 9.1 million more people below the poverty line: Pakistan: Flood Damages and Economic Losses over USD 30 billion and Reconstruction Needs over USD 16 billion- New Assessment (<https://www.worldbank.org/en/news/press-release/2022/10/28/pakistan-flood-damages-and-economic-losses-over-usd-30-billion-and-reconstruction-needs-over-usd-16-billion-new-assessme>)

## Nutrition crisis

The 2022 floods have contributed to exacerbating the already precarious nutrition situation, especially for children under the age of five, adolescents and women of reproductive age who were already prior to the floods facing chronic above-emergency threshold malnutrition levels with wasting<sup>5</sup> rates of children under the age of five at 17.7 per cent and stunting<sup>6</sup> rates at 40.2 per cent<sup>7</sup>. The SAM rate in the country is twice that of the South Asian region. A rapid assessment conducted by UNICEF and the Institut Public de Sondage d'Opinion Secteur (IPSOS)<sup>8</sup> post the 2022 floods revealed that acute malnutrition in children is exacerbated by inadequate nutrition, inadequate childcare and feeding practices, food insecurity, deficient sanitation and hygiene facilities and practices, and limited access to essential nutrition services<sup>9</sup>. The results indicated that more than half (55 per cent) of pregnant women were only consuming one food group during the floods. Breastfeeding practices and consequently the nutrition of infants aged 0 to 6 months were also adversely affected by the disaster.

Coupled with the economic crisis and rising food prices, and flood induced aggravating factors, the nutrition situation in especially districts affected by the 2022 floods has remained critical.

In June 2023, the Integrated Phase Classification (IPC) of Food Security and acute malnutrition analysis<sup>10</sup> reported around five million children under the age of five across the country to be in critical need of preventive and curative nutrition services, out of them 1.5 million with moderate acute malnutrition (MAM) and 600,000 children with SAM in 32 flood-affected districts<sup>11,12</sup>. The analysis indicated that 23 districts were classified in phase 4 (Critical) in the IPC Acute Malnutrition (IPC AMN) classification, five districts in IPC AMN Phase 3 (Serious) and four districts in IPC AMN Phase 2 (Alert). The district of Tharparkar

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<sup>5</sup> **Wasting, defined as low weight-for-height**, is the most visible and lethal type of malnutrition. Severe wasting, also known as severe acute malnutrition, is its most deadly form. It is caused by a lack of nutritious food and repeated bouts of diseases such as diarrhoea, measles and malaria, which compromise a child's immunity. (Child alert: Severe wasting | UNICEF)

<sup>6</sup> **Stunting, or low height for age**, is an indicator of chronic undernutrition. Stunting is caused by inadequate intake of nutritious food, frequent illnesses such as diarrhoea and intestinal worms, poor care practices, and lack of access to health and other essential services, especially in the first 1,000 days of a child's life. In addition, a mother's own health and nutrition have an impact on the baby's nutrition.

<sup>7</sup> National Nutrition Survey 2018

<sup>8</sup> The objective of the study was to document the impact of the floods on the nutritional practices and needs of infants and young children of 0 to 24 months of age as well as the nutritional needs of pregnant women.

The study was carried out in the 15 most affected districts across four provinces – Balochistan, Punjab, Sindh, and Khyber Pakhtunkhwa (KP).

Rapid Care & Feeding Assessment in Flood Affected Areas- Assessing Affected Children Needs in Real-time (February 2023, MoNHSR&C, UNICEF & IPSOS) - Pakistan | ReliefWeb

<sup>9</sup> <https://reliefweb.int/report/pakistan/revised-pakistan-2022-floods-response-plan-final-report-issued-15-dec-2023>

<sup>10</sup> The IPC is a multi-partner initiative for improving food security and nutrition analysis – to allow relevant actors to work together to determine the severity and magnitude of acute and chronic food insecurity, and acute malnutrition situations in a country, according to internationally-recognised scientific standards. The present analysis covered 43 rural districts in the three most vulnerable provinces of Pakistan: Balochistan (18 districts), Khyber Pakhtunkhwa (9 districts), and Sindh (16 districts). The vast majority of these districts were severely affected by the 2022 Monsoon rains and flooding. The total analysed population of these collective areas is nearly 37 million people, which accounts for around 16 per cent of Pakistan's total population.

<sup>11</sup> Pakistan: Acute Food Insecurity Situation for April - October 2023 and Projection for November 2023 - January 2024 | IPC - Integrated Food Security Phase Classification (ipcinform.org)

<sup>12</sup> <https://reliefweb.int/report/pakistan/pakistan-ipc-acute-food-insecurity-snapshot-balochistan-khyber-pakhtunkhwa-sindh-april-2023-january-2024>

presented the highest number of acute malnourished children (240,140), followed by Quetta (186,803), Khairpur (170,143), Umerkot (151,008) and Dadu (129,673), all classified in IPC AMN Phase 4 (Critical). UNICEF partnered with the UN Food and Agriculture Organization (FAO) and other agencies and participated actively in the IPC analysis to better respond to the linkages between food insecurity and the high prevalence of wasting.

UNICEF also conducted SMART surveys in 12 districts in 2023 (four in Balochistan, three in KP and five in Sindh) for additional data on the nutrition situation. The prevalence of wasting according to these surveys varied significantly across the provinces, ranging from an average of 16.8 per cent in Balochistan, 13.7 per cent in KP to 22.1 per cent in Sindh. As such, the prevalence of acute malnutrition (wasting) exceeds the emergency threshold of 15 per cent set by the WHO in many of these districts. The high levels of acute malnutrition observed in the analysed districts emphasized the critical necessity for a continued comprehensive public health response to address this urgent crisis throughout 2023 and even beyond.

**Linked to the nutrition crisis**, despite some progress in the last decades in child mortality figures, 63 of every 1,000 children still die before their fifth birthday. One year post flooding, it was estimated that about eight million people, around half of whom were children, continued to live without access to safe water in flood-affected areas. Additionally, over 500,000 households remained without access to household sanitation. While recovery efforts continued, the gaps on the ground also continued to be significant. The Post-Disaster Needs Assessment (PDNA)<sup>13</sup> and Resilient, Recovery, Rehabilitation and Reconstruction Framework (4RF)<sup>14</sup> framework highlighted the WASH needs in terms of transitioning to recovery, reporting damages worth US\$575 million with additional losses of US\$112 million incurred in the sector. Overall, the WASH sector sustained damages to over 4,000 water supply schemes and 2,700 sanitation schemes, with 1,346 schemes fully destroyed, a majority of which were managed by the Public Health Engineering Department (PHED). An estimated two-thirds of the affected population relied on community or privately-owned WASH infrastructure, the restoration of which was a priority for WASH sector partners. An estimated US\$ 327 million was required for resilient WASH reconstruction.

Overall, the issue of water scarcity persists in Pakistan and an alarming 49 per cent of the drinking water in Pakistan is unsafe for human consumption and 9.4 per cent of the population lack access to basic drinking water services. Despite advancements in the last decade, only 70.5 per cent of the population has access to basic sanitation and 15 million people including children still resort to open defecation, and nearly 72 million people lack access to basic sanitation. Unfortunately, many of the basic service needs of the populations to deal with these recurring disasters remain unmet, leaving children in affected areas vulnerable to malnutrition, morbidity, and mortality.

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<sup>13</sup> Pakistan Floods 2022: Resilient Recovery, Rehabilitation, and Reconstruction Framework (4RF) | United Nations Development Programme (undp.org)

<sup>14</sup><https://www.undp.org/pakistan/publications/pakistan-floods-2022-resilient-recovery-rehabilitation-and-reconstruction-framework-4rf>

## Protection concerns

Pakistan's Global Gender Gap Index 142/146 (2023) ranking remains extremely low, with Pakistan at the very tail end, due to cultural norms, infrastructure gaps, gender stereotypes, discriminatory practices, socioeconomic factors, and limited access to quality healthcare services. Child marriage and adolescent pregnancy are prevalent, posing risks to the well-being of adolescent girls and their children. Birth registration rates are low, making Pakistan home to the highest number of unregistered children globally, as per UNICEF's global analysis. Further, individuals with disabilities face consistent challenges, underscoring the need for inclusive policies.

The Child Protection Area of Responsibility (CP-AOR) and Education Sector Working Group (ESWG) jointly conducted a need assessment in 20 flood affected districts across the country. The data was collected through the CP-AOR and the education sector members, the analysis and report writing were supported by the Global Education Cluster. The findings showed an increase in child marriage and child labour in flood affected areas, major drivers include poverty, social and cultural norms and lack of services and opportunities particularly among adolescent girls and boys. There was also an increased need for psychosocial support to enable children to overcome stress and anxiety associated with loss and displacement, especially among adolescent girls and boys. The assessment also found an increase in the risk of sexual violence, sexual abuse, or sexual exploitation of children and gaps in child protection services.

Another, ongoing crisis that has been exacerbated by the floods, is the learning crisis with more than 26 million children in the age group 5-16 years of age, out of school, as of 2024<sup>15</sup>.

All in all, the country also continues being highly vulnerable to climate change<sup>16</sup>, with vulnerable populations lacking access to multiple, resilient infrastructure, services and service delivery systems and facing increased vulnerability to disasters such as floods, heatwaves, and droughts.

## Afghan refugees

Pakistan has hosted Afghans for the past 40 years and the deteriorating humanitarian situation in Afghanistan, exacerbated by the Taliban take-over in 2021 led to an additional influx of Afghan refugees. As of 2023, Pakistan was estimated to host some three million Afghans, 49 per cent of whom are under the age of 18, including 1.3 million refugees with Proof of Registration (POR) cards<sup>17</sup>, approximately 840,000 Afghan Citizen Card (ACC) holders and an estimated 775,000 undocumented Afghans<sup>18</sup>. Refugee children are often at risk of violence, stigma, family separation and lack of access to basic services. Most Afghans of different status (77 per cent) reside in the provinces neighbouring Afghanistan (Balochistan and KP), which are already marginalized and have some of the highest poverty levels in the country.

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<sup>15</sup> <https://acrobat.adobe.com/id/urn:aaid:sc:AP:3d2a01e7-62dd-42b7-97e8-47003364cf42>

<sup>16</sup> The Long-Term Climate Risk Index (CRI): The 10 countries most affected from 2000 to 2019 (annual averages)

<sup>17</sup> 2023 HAC Afghan Outflow

<sup>18</sup> Afghan Refugee Response Plan 2023

In September 2023, the Pakistan government announced the Illegal Foreigners Repatriation Plan (IFRP), to be enacted in three phases, starting with undocumented foreigners, followed by ACC holders and POR card holders<sup>19</sup>. The Ministry of Interior formally announced that all illegal foreigners must leave the country by the first of November 2023. The International Organisation for Migration (IOM) and the UN High Commissioner for Refugees or the UN Refugee Agency (UNHCR) have since been collating data on any arrest, detention, and deportation through the major crossing border crossings of Chaman and Torkham and collected information on the protection environment and movements of Afghans returning from Pakistan. A joint advocacy statement was issued by IOM, UNHCR and UNICEF in November 2023, appealing to the authorities not to force vulnerable Afghans and families back to Afghanistan where their lives might be at risk and to ensure protection rights are adhered to<sup>20</sup>.

Since the initiation of the IFRP, cumulatively, between 15 September 2023 and 6 January 2024, 495,073 individuals were reported to have returned<sup>21</sup>, comprising of approximately 90 per cent of undocumented migrants, eight per cent POR card holders and two per cent ACC holders. Approximately 59 per cent are estimated to be children, and three per cent of the returnees are considered vulnerable persons, including chronically ill and elderly individuals and persons living with disabilities<sup>22</sup>.

### **UNICEF's response and value proposition**

UNICEF's emergency response in 2023 reflected its commitment to saving lives, protecting rights, and building resilience among vulnerable populations, particularly children and women, in Pakistan. Through collaborative partnerships, innovative approaches, and evidence-based interventions, UNICEF continued to mitigate the impact of emergencies and to promote sustainable recovery and development.

While access and security were generally supportive to a rapid humanitarian response and early recovery, operational issues, particularly related to access, were experienced intermittently in some flood affected areas. International Non-Governmental Organizations (INGO) and Civil Society Organizations (CSO) faced challenges in obtaining government approvals or No Objection Certificates (NOC), creating some challenges to the timely provision of humanitarian support. Advocacy with national and provincial level governments were successful in obtaining the requisite approvals, but this remains an ongoing challenge in some security compromised areas.

Throughout the emergency and early recovery efforts in 2023, UNICEF addressed key challenges in reaching and providing essential services to affected populations, especially the most vulnerable. With UNICEF's strong procurement and logistics services, a healthy pipeline of essential supplies was maintained. The operationalization of four new field hubs across the three most affected provinces, in addition to the four provincial Field Offices, allowed UNICEF staff to be closer to the districts and communities where it was supporting services. Improved data collection and management platforms allowed for improved

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<sup>19</sup> [unhcr-iom-pakistan-flash-update-14-arrest-and-detentionflow-monitoring-15-sep-20-jan-2024](#)

<sup>20</sup> [unhcr-iom-and-unicef-call-for-protection-of-children-and-families-seeking-safety-in-pakistan](#)

<sup>21</sup> <https://reliefweb.int/report/pakistan/unhcr-iom-pakistan-flash-update-13-arrest-and-detentionflow-monitoring-15-sep-6-jan-2024>

<sup>22</sup> UNHCR-IOM Pakistan Flash Update #14: Arrest and Detention/Flow Monitoring (15 Sep to 20 Jan 2024) - Pakistan | ReliefWeb

tracking of services provided, and prioritization of most in need populations. Additional human resources were brought in to support the expanded humanitarian support after the 2022 floods and during the early recovery efforts, including for the rehabilitation of damaged health and education institutions. UNICEF also expanded its partnerships to a wider range of CSO partners during and after the flood emergency.

In 2022-2023, UNICEF required US\$173.5 million to provide life-saving support to women and children affected by the 2022 floods. UNICEF also, separately, appealed for US\$42.1 million for Pakistan under the 2023 Afghan Refugee Response Plan (RRP), launched in April 2023, targeting approximately 4.5 million people in Pakistan, comprising of 1.5 million Afghan refugees, 1.6 million Afghans with other statuses and 1.4 million people from host communities, residing near/alongside the refugees, for provision of essential services. The floods Humanitarian Action for Children-appeal was for 2022-2023, and considering the needs, UNICEF continued to respond to the floods throughout 2023.

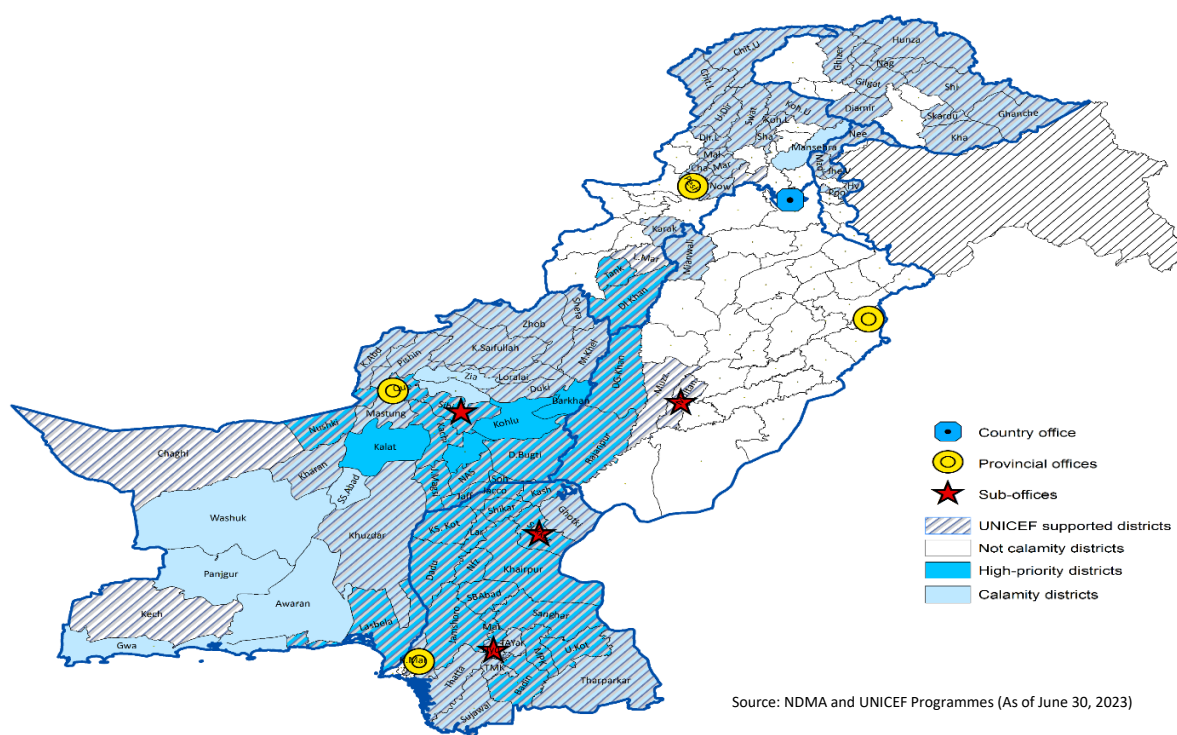


## Humanitarian Results Achieved

UNICEF works collaboratively with the Government, UN agencies, NGO partners, private sector and academia to respond to the needs of the most vulnerable populations. Out of the 94 Government-declared calamity-hit districts after the floods in 2022, UNICEF and its partners have supported the displaced populations and assisted them as they return to their communities in 87 districts.

### Humanitarian Coordination

In 2023, UNICEF continued to strengthen the humanitarian leadership and coordination at the national and sub-national levels through its co-leadership of the education, nutrition and WASH sectors as well as the child protection area of responsibility, and its engagement in the health sector.



The Humanitarian Country Team (HCT)<sup>23</sup>, convened monthly meetings to engage in strategic discussions and take decisions. At the technical level, the Inter-Sector Coordination Group (ISCG), and the Information Management Working Group also met monthly. Led by the UN Office for the Coordination of Humanitarian Affairs (OCHA) Pakistan, an inter-agency contingency planning process was initiated based on lessons learned from the 2022 floods, to develop guidance for the pre-disaster phase, to coordinate responses, and advocate for an active leadership role of the National Strategic Coordination

<sup>23</sup> The HCT is composed of organizations that undertake humanitarian action in-country including UN agencies, OCHA, national and international NGOs, and components of the IRC and IFRC movement, and is comprised of representatives of participating agencies at the highest level – Country Representative or equivalent.



Forum with the NDMA, the Planning Commission, UN, and NGOs. This process was initiated in consultation with the Government, NGOs, the Red Cross Movement, and other humanitarian actors.

As part of its disaster risk reduction strategies, UNICEF collaborated closely with the NDMA and Provincial Disaster Management Authorities (PDMAs) to enhance communities' capacities to prepare and respond to climate related shocks. With UNICEF and other partners' support, the NDMA led a simulation exercise for flood and rain emergencies with first responders and other relevant stakeholders to enhance timely response and coordination mechanisms. NDMA also organized a three-day workshop to strengthen the implementation of the Sendai Framework for Disaster Risk reduction<sup>24</sup>, and to promote gender equality. To create awareness on the effects of climate change, UNICEF supported NDMA to organize the "Pakistan Expo on Disaster Risk Reduction 2023". The expo focused on raising awareness on the effects of climate change and advocate for child centred, gender inclusive disaster risk reduction strategies.

To improve recovery and strengthen the resilience of communities affected by floods and other natural disasters, as well as refugees and host populations, UNICEF prioritized interventions that reduce vulnerability and build resilience, beyond addressing humanitarian needs to facilitate a transition to development programming.

Integrated programming approaches were promoted to improve efficiency and effectiveness of the response and to support humanitarian-development nexus programming.

In terms of prevention of sexual exploitation and abuse across its humanitarian response, UNICEF co-chairs the Pakistan UN Country Team (UNCT) PSEA network and the four provincial PSEA networks in Balochistan, KP, Lahore and Sindh. Two of the four provincial PSEA networks were established in 2023, in Lahore and in Sindh (the others in 2022), and more than 200 Government institutions, National Societies and Academic Institutions, CSOs, NGOs, and INGOs were brought into this coordinated effort.

## Preparedness

UNICEF updated its Emergency Preparedness Platform<sup>25</sup> with 41 contingency humanitarian partnership agreements. Long-Term Agreements (LTAs) for locally procured supplies were also prepared. Pre-positioned supplies were procured for providing immediate support to approximately 200,000 people in case of a multi-hazard emergency response.

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<sup>24</sup><https://www.undrr.org/implementing-sendai-framework/what-sendai-framework#:~:text=The%20Sendai%20Framework%20focuses%20on,existing%20risk%20and%20increase%20resilience.>

<sup>25</sup> UNICEF's EPP application helps teams analyse risks, self-assess and monitor their operational preparedness and identify high-return actions to get ready for immediate response - before an emergency happens or a situation deteriorates. It is integrated with other corporate applications. This allows users to access information such as stock on hand, or details of long term partnerships from within EPP, without creating redundancies. EPP focuses on improving the quality of preparedness plans and their use at the onset of a crisis. This allows for better integration of cross cutting issues in preparedness plans. It also includes mechanisms for handling confidential/politically sensitive information, allowing COs in countries with sensitive risks to create preparedness plans.

## Maternal, Newborn and Child Health



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On 18 April 2023 in Peshawar, Khyber Pakhtunkhwa province, Pakistan, LHW Shamim Hussain speaks with a man and child.

### Flood-response

UNICEF remained committed to ensuring emergency preventive and lifesaving curative services for the flood-affected communities in 37 districts. The districts were prioritized on the basis of damaged health care facilities and health care staff affected by floods.

Through UNICEF-supported health facilities, primary health care services were provided to a total of 6,083,267 individuals including 2,240,361 women, 1,447,985 men, 1,235,381 girls, and 1,159,540 boys. This included antenatal care (ANC) services that were provided to 569,806 pregnant women. Additionally, UNICEF's support to measles vaccination in flood affected districts resulted in 1,947,925 children (1,010,735 girls and 937,190 boys) being identified for immunization against measles. Community outreach sessions for mass MUAC screening, allowed also identifying other health-related needs, including children missed during the vaccination campaigns.

The floods significantly affected the health infrastructure, with over 2,000 health facilities and their contents partially or completely damaged<sup>26</sup>. Due to the significant damage to infrastructure, 112 mobile health teams continued operating in the flood affected areas until

<sup>26</sup> <https://climatepromise.undp.org/research-and-reports/pakistan-floods-2022-post-disaster-needs-assessment>

the first quarter of 2023. At the same time, UNICEF in collaboration with the Ministry of Health, the United Nations Population Fund (UNFPA) and WHO formulated a joint rehabilitation plan for the damaged health facilities. UNICEF supported the rehabilitation of 108 health facilities, of which 88 have been completed and the remaining facilities are in progress. Refurbished facilities were provided with essential equipment and medicines. UNICEF also provided essential supplies including 50 emergency kits, 100 midwifery kits, equipment, and medicines to run the health facilities. The number of people visiting these health facilities after refurbishment increased manyfold – based on the daily patient records from the facilities – thanks to the markedly increased quality of care. UNICEF arranged two two-day trainings for healthcare workers, one in Hyderabad and one in Sukkur in the province of Sindh on Disaster Risk Reduction. The training looked at healthcare needs of communities during emergencies. It was attended by 200 health care staff.

After the launch of the Lady Health Workers (LHW) strategic framework in March 2023, at the request of the Government, UNICEF procured and distributed 7,900 LHW Kits in Balochistan, KP and Sindh. Each kit comprises of essential medicines, equipment, and materials to support service delivery to a population of 10,000 individuals in the LHW's catchment area for a period of three months. LHWs were also trained on the revised counselling cards to cater to various community health needs. For clear identification of the LHWs, identification boards were provided in the flood-affected areas.

Following the floods, Pakistan experienced a long malaria outbreak with approximately five times as many malaria cases reported in 2023 compared to previous years. In response, UNICEF distributed two million long lasting insecticidal nets and supplied 50,000 malaria and dengue testing kits, as well as antimalarial drugs to cover 415,000 patients.

In November, UNICEF responded to an outbreak of Crimean-Congo hemorrhagic fever in Balochistan by providing personal protective equipment and essential medicines.

### **Refugee and host community response**

In response to the Afghan refugee crisis, in Balochistan and KP provinces, in districts neighbouring Afghanistan and with high number of refugees, UNICEF took action to strengthen 46 existing public health facilities. This involved the rehabilitation of labour rooms and WASH facilities, accompanied by the provision of essential medicines and equipment. Additionally, UNICEF established health outreach camps within Afghan Refugee Villages in KP province. Through these comprehensive interventions, UNICEF successfully extended primary healthcare services to 531,626 individuals (190,042 women, 84,737 men, 149,425 girls and 107,422 boys) including facilitating 2,046 deliveries by trained healthcare professionals. The low measles vaccination coverage in the Afghan response are partly due to the lack of data disaggregation between host and refugees populations by the district health office. This means that only those refugees reached through the outreach campaigns in refugee villages are counted towards this target.

**Table 1: Results achieved (health)**

Indicators	UNICEF	
	Target	Results achieved
<b>Flood Response (2022-2023)</b>		
# of individuals provided lifesaving Primary Health Care Services	3,200,000	6,499,854 (2,240,361 women, 1,447,985 men, 1,235,381 girls, and 1,159,540 boys)
# 6 to 59 months old children vaccinated against measles	736,000	1,947,925 (1,010,735 girls and 937,190 boys)
# of Pregnant Ladies provided ANC services	2,543,121	612,048
<b>Afghan Refugee Response (2023)</b>		
# of health facilities supported with equipment, medicines and medical supplies, salaries	37	46
# of individuals who have been supported to access primary healthcare services	257,284	531,626 (190,042 women, 84,737 men, 149,425 girls, and 107,422 boys)
# 6 to 59 months of children vaccinated against measles	189,584	47,396 (23,224 girls and 24,172 boys)

**POLIO**

While covered under UNICEF’s regular country programme, and hence not considered humanitarian response, nor funded under the emergency response, UNICEF Pakistan has decided to include an update on polio in this Consolidated Emergency Report, considering that Polio is a global public health emergency of international concern (PHIEC) under the International Health Regulations (IHR). Although polio is not specifically part of the HAC appeal, polio eradication is an office-wide priority and a level-3 emergency programme for UNICEF globally.

Pakistan, together with Afghanistan are the only two countries globally still experiencing active transmission of polio virus. Pakistan continues to make progress towards the goal

of stopping transmission of wild poliovirus (WPV). Pakistan, together with Afghanistan are considered as one epidemiological block given the extensive cross border movement between both countries. The goal of the National Emergency Action Plan (NEAP) in 2023 was to reach zero cases of WPV by boosting population immunity through supplementary immunization activities. Although neither Pakistan nor Afghanistan completely stopped polio in 2023, there is progress in terms of the decrease in the number of polio cases, the geographic restriction of these cases and the diversity of isolated virus clusters. In Pakistan, endemic polio is restricted to one sub-district in southern KP province, a small geographic area spanning a few kilometres. In total, Pakistan reported a total of six cases of polio in 2023, highlighting the incredible progress made since eradication efforts were initiated.

Pakistan conducted three National Immunization Days (NIDs) and six Sub National Immunization Days (SNIDs) in 2023. National Immunisation Drives (NIDs) consistently cover more than 44 million children, multiple times each year. Two additional outbreak responses and one “mop-up” campaign – door-to-door immunizations that are carried out in specific areas where the virus is known or suspected to still be circulating – were also completed. The administrative coverage<sup>27</sup> in all campaigns remained more than 95 per cent. UNICEF supplied 210.7 million doses of oral polio vaccine for all polio campaigns in 2023.

The ambitious campaign schedule and rapid outbreak responses (OBRs) have contained the virus in southern KP. UNICEF also continued to support the implementation of Community-Based Vaccination (CBV), communication and community mobilization, vaccine procurement, logistics as well as the tailored, integrated service delivery to the most vulnerable communities in critical pockets of Balochistan, KP and Sindh provinces. The integrated service delivery (ISD) initiative stems from a recognition that polio cases are more likely to arise in communities that face multiple deprivations and was also developed in response to feedback from parents and caregivers in poor communities whose demands for improved water, sanitation or basic health services were too often ignored. ISD includes services such as paediatrics, nutrition, family planning, antenatal services, newborn delivery, kangaroo mother care for babies born with low birthweight, birth registration and essential vaccines. In addition, the initiative has provided water filtration plants off-site health camps in the selected communities.

However, challenges persist in ending transmission in the endemic areas of southern KP due to boycotts, mistrust, fake finger marking (FFM)<sup>28</sup>, and security issues. Gender stereotypes and cultural beliefs influence community perceptions about the importance of vaccination for boys compared to girls. Targeted advocacy, social behaviour change (SBC) interventions, mass media campaigns, social media initiatives and community engagement reduced caregiver refusal by 42 per cent in endemic districts from January to November 2023, highlighting progress in rebuilding community trust. The active community participation, awareness and trust building in polio vaccines was ensured by

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<sup>27</sup> In most countries, as per [WHO's definition](#), "administrative coverage data" are the number of doses administered to a target population. In order to estimate percentage immunization coverage, this number is divided by the total estimated number of people in the target population.

<sup>28</sup> The practice of marking a child's finger, as if they've received the polio vaccine, without actually allowing them to take the vaccine.

UNICEF’s communication team through engagement and mobilization of over 5,000 political, religious, tribal, and local elders and influencers across Pakistan, creating an enabling environment for polio vaccination teams to reach unvaccinated children. Reaching refusal families and building trust through influencers remained a successful strategy that helped cover over 90 per cent of the recorded missed children on average through all campaigns conducted in 2023.

Face to face meetings between Afghanistan and Pakistan UNICEF polio teams played a key role in refining and improving cross-border strategies. The focus remains on building a common narrative and joint efforts for SBC and ISD to achieve eradication. The programme also completed social profiling of high-risk mobile population children, providing valuable insights into movement patterns and health seeking behaviours of this population.

**Table 2: Polio campaigns in 2023**

Campaign Name	Target	Coverage	% Coverage
NID JANUARY 2023	44,306,747	44,799,007	101.11
SNID FEBRUARY 2023	6,381,817	6,367,111	99.77
SNID MARCH 2023	21,690,044	20,926,105	96.48
MOP UP MARCH 2023 DI KHAN/TANK DISTRICTS	182,141	106,697	58.58
SNID MAY 2023	22,790,862	23,137,466	101.52
SNID JUNE (OBR) 2023	4,160,816	4,044,419	97.20
SNID AUGUST (OBR) 2023	8,456,115	8,459,138	100.04
OBR SEPTEMBER 2023	1,048,757	1,097,084	104.61
CASE RESPONSE SEPTEMBER 2023 BALOCHISTAN	21,428	23,985	111.93
NID OCTOBER 2023	44,202,635	44,981,109	101.76
SNID NOVEMBER (OBR) 2023	10,100,713	9,589,469	94.94
NID NOVEMBER 2023	44,354,487	44,787,199	100.98



## Nutrition



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Naheed Israr, Nutrition Assistant on the left is examining nine months old Usman held by his mother Khan Zadi, in a UNICEF supported OTP Center in the flood affected Dera Murad Jamali tehsil, Nasirabad district. He recovered from severe acute malnutrition after receiving treatment.

### Flood-response

UNICEF strengthened the nutrition sector emergency preparedness and response, including the nutrition information management, sectoral coordination as, as well as the delivery of life-saving nutrition services including the prevention, early detection and management of wasting, supplementations of micronutrients and promotion of infant and young child feeding for the prevention of malnutrition in all its forms among nutritionally vulnerable groups, including children, adolescent girls and mothers.

UNICEF supported and actively participated in the IPC analysis for food insecurity and acute malnutrition with the aim of strengthening the food security and nutrition monitoring system for better coordination, programming, advocacy and resource mobilization to reach the most vulnerable children, adolescents and mothers with essential lifesaving nutrition services. As described in the Humanitarian Context chapter, UNICEF also conducted 12 SMART surveys across selected districts of Balochistan, KP and Sindh, and the findings

have been widely disseminated with nutrition stakeholders as well as used in the IPC analysis. In addition, UNICEF coordinated the consolidation and analysis of routine nutrition programme data across the country and further shared it with nutrition sector members on monthly basis.

Coordination mechanisms at national, sub-national and hub level remained fully functional, sectoral meetings were conducted monthly, and the nutrition response in camps, communities, and health facilities was closely monitored. The nutrition sector remained active in the inter-sectoral coordination/ISCG. With the support of UNICEF and the nutrition wing of the Ministry of National Health Regulations and Coordination (MoNHR&C) as co-leads, the nutrition sector accelerated the implementation of the Flood Response Plan (FRP) across flood-affected districts in 2023. Under the FRP, 84 districts were targeted for support, with a special focus on 34 of the most calamity-hit districts identified by UN-OCHA and NDMA with relevant nutrition partners. With support of the Global Nutrition Cluster (GNC), UNICEF conducted the Cluster Coordination Performance Monitoring (CCPM) Survey. The findings of the survey will be used to further strengthen the nutrition sector coordination along the cluster core functions of Supporting Service Delivery, Information Management, Strategic Planning, Advocacy, Monitoring and Reporting, Contingency Planning, as well as Accountability to Affected Populations.

UNICEF continued to strengthen community-based service delivery by reviving and capacitating LHWs and other community-based structures, with the intention of scaling up the coverage of essential nutrition services, enhancing community engagement, generating demand, and contributing towards the development of resilient and shock-responsive community-based systems. The most noticeable achievement of this is the introduction and scaling-up of the simplified protocols for mass MUAC screenings and family MUAC as well as the management of wasting, in the flood affected districts. These approaches enhanced the early detection and management of wasting, the engagement of community members, mainly mothers and contributed also to women's empowerment, as well as enhanced the overall coverage of services for the promotion of key family care practices (KFCEPs) including infant and young child feeding (IYCF) and maternal nutrition.

UNICEF's support enabled the screening of 13,353,505 children for malnutrition using MUAC tapes. Of these, 542,842 (302,834 girls and 240,008 boys) were identified as SAM without medical complications and were admitted for treatment at OTPs, while a total of 53,381 children (27,339 girls and 26,042 boys) were identified as SAM with medical complications and were admitted for treatment at the Nutrition Stabilization Centres (NSC), supported by WHO. UNICEF's support also enabled the provision of micronutrient powder (MNP) to 2,521,408 (1,267,552 girls and 1,253,856 boys) children aged 6-59 months, as well as multiple micronutrient supplements (MMS) and/or Iron Folic Acid (IFA) for 2,638,157 pregnant and lactating women (PLW), while 965,540 adolescent girls received IFA supplements. A total of 4,316,951 primary caregivers of children aged 0-23 months and pregnant and breastfeeding women (PBW) were counselled on IYCF practices through various platforms, including through the engagement of CSO partners.



Where possible, nutrition services were closely linked to and integrated with health, food security and WASH interventions. A total of 111,636 (59,591 girls and 52,045 boys) children with MAM were managed at the Targeted Supplementary Feeding Program (TSFP) supported by the World Food Programme (WFP).

### Refugee and host community response

UNICEF as lead agency for the Nutrition Sector, has supported the Afghan refugee response under the regional RRP in close coordination and collaboration with UNHCR, the Government of Pakistan, CAR, and other United Nations agencies, as well as other humanitarian partners both at national and sub-national levels, mainly in the Balochistan and KP provinces. Besides the Nutrition Sector Coordination and Information Management, UNICEF supported the delivery of lifesaving nutrition services across 22 refugee-populated districts in the three provinces identified in the refugee response plan, in which elements of child protection were also integrated. The nutrition working group members collaborated closely with partners and other sectors such as food security, health, and WASH for a coherent and comprehensive response.

**Table 3: Results achieved (nutrition)**

Indicators	Sector		UNICEF	
	Target	Results achieved	Target	Results
<b>Flood Response 2023</b>				
# of children aged 6 to 59 months with severe acute malnutrition registered for treatment	414,176	-	414,176	542,842
# of children aged 6 to 59 months receiving multiple micronutrient powders	583,169	-	583,169	2,521,408
# of PLWs who received IFA/MMT	777,559	-	777,559	3,603,607
# of primary caregivers of children aged 0 to 23 months receiving infant and young child feeding counselling	777,559	93,416	777,559	4,223,535
# of children aged 6 to 59 months with severe acute malnutrition with	38,945	53,381	-	-

complication admitted for treatment in NSC				
# of Children aged 6 to 59 months with Moderate Acute Malnutrition treatment	208,247	111,636	-	-
<b>Afghan Refugee Response 2023</b>				
# of children aged 6 to 59 months with severe acute malnutrition registered for treatment	52,927	39,507	52,927	39,507
# of PLWs who received IFA/MMT	228,464	221,493	228,464	221,493
# of children aged 6 to 59 months receiving multiple micronutrient powders	253,303	256,542	253,303	256,542
Primary caregivers of children aged 0 to 23 months receiving infant and young child feeding counselling	256,943	281,722	256,943	281,722

## Water, Sanitation and Hygiene



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Lali, 18 years old, radiates happiness at the UNICEF-provided water pump in the village of Mir Jan Muhammad, Mirpurkhas, Sindh. Her cheerful expression reflects the positive impact of accessible clean water on the lives of the community's youngest members.

### Flood-response

UNICEF-led WASH sector coordination, in cooperation with government counterparts at the national level, in all provinces, and in three provincial hubs. The sector developed localized plans for the recovery of WASH systems and conducted a gender safety audit and post-distribution monitoring (PDM) assessment. UNICEF and its WASH sector partners were able to provide water to 70 per cent of the population in need and sanitation services were provided to 31 per cent of target population.

UNICEF's WASH response continued in 30 flood affected districts across all four provinces, though the scope of work shifted from immediate emergency response to recovery and rehabilitation. The recovery work was undertaken through different implementation modalities, including through working with WASH service providers, civil society, and the private sector with the aim of restoring access to WASH services with a sustainable lens. To ensure that WASH interventions, including WASH infrastructure, services and people's behaviours are resilient to climate change related risks, various tools, such as the use of alternate energy sources (solar), adjustment of designs for the rehabilitation of damaged water supply systems, and scaling up of sanitation interventions were adopted to account

for seasonal water availability and potential future floods. Despite the ongoing recovery work, communities' needs remain high with many families still unable to access sustainable and safe water, sanitation, and hygiene services.

Through UNICEF's support, a total of 2,749,343 people, including 1,261,774 children (631,098 girls, 630,676 boys, 691,389 women and 796,180 men), were reached with improved access to safe drinking water, of which over 1,750,319 people were reached with access to sustainable water systems. In addition, 2,489,058 people (464,190 girls, 458,620 boys, 759,549 women and 806,699 men) were reached with hygiene promotion messages and 2,759,640 people received WASH supplies that cater to general hygiene needs and menstrual hygiene needs of adolescent girls and women. At least 386,736 people benefited from sanitation interventions, including an estimated 100,671 people (22,958 girls, 22,359 boys, 23,949 women and 31,405 men) from temporary gender-segregated latrines and 286,065 people (65,563 girls, 75,736 boys, 72,902 women and 71,864 men) were provided with support for the restoration of household sanitation facilities. Additionally, 401 schools and 95 health facilities were provided with WASH facilities.

Most of the emergency WASH interventions were planned and implemented in such a way that the affected populations are provided with sustainable services. Of the total population reached with water supply services, 65 per cent was reached with climate resilient and sustainable services including sustainable operation and maintenance systems. Of the total population reached with emergency sanitation support, over 75 per cent was provided with sustainable sanitation services by restoring climate resilient sanitation facilities, and only 25 per cent were provided with emergency sanitation, mainly this was the case in the displacement camps and temporary settlement areas.

Moreover, in July 2023, UNICEF responded to a cholera outbreak in Sindh province. UNICEF supported the Pakistan Council for Research on Water Resources (PCRWR) in testing the water quality of more than 1,400 samples, followed by partnerships with service providers for the chlorination of contaminated sources and hygiene promotion. With the Karachi Water and Sanitation Board (KWSB) and PCRWR, UNICEF ensured the availability of safe drinking water in three districts of Karachi through the chlorination of an average of 75 million gallons of water every day at 12 pumping station, serving an estimated two million people for an average of two months.

### **Refugee and host community response**

Along with the response to natural emergencies and disease outbreaks, UNICEF also supported Afghan refugees under the regional RRP in coordination and collaboration with UNHCR and CAR. Under the RRP, 214,070 refugees (48,251 girls, 50,221 boys, 56,643 women and 58,955 men) and their host communities were provided with access to safe drinking water through the rehabilitation and upgradation of 71 water supply systems. A total of 224,949 people, (50,704 girls, 52,773 boys, 59,522 women and 61,950 men) were provided with access to sanitation facilities. Hygiene supplies, including hygiene kits, dignity kits, and menstrual hygiene management (MHM) kits, were distributed to 157,212 people (49,002 girls, 23,315 boys, 57,525 women and 27,370 men). Moreover, 90,037 people, (20,294 girls, 21,123 boys, 23,824 women and 24,796 men) were reached with messages on safe hygiene practices. Further, 23,572 children benefited from the rehabilitation of WASH

services in 76 schools. WASH infrastructure was also improved in 37 healthcare facilities, benefiting an estimated 120,000 people.

As WASH sector lead, UNICEF undertook a gender safety audit and PDM to further guide the response and learning. The findings of the PDM supported the revision of the content of the various kits based on feedback from the communities. The report highlighted the need to more actively engage with women at the outset of the response, to ensure the most appropriate response for women and girls. Additionally, WASH sector members need to ensure implementation is guided by the sector strategy with adequate attention to the protection measures that ensure women and girls can access WASH facilities with dignity i.e. safely. UNICEF and sector members must ensure a robust complaint mechanism is in place, that allows for feedback from affected communities.

**Table 4: Results (WASH)**

Indicators	Sector		UNICEF	
	Target	Results	Target	Results
<b>Flood Response 2022-2023</b>				
People accessing a sufficient quantity of safe water for drinking, cooking and personal hygiene	3,359,000	4,091,752	2,000,000	2,749,343 (602,806 girls, 579,326 boys, 768,023 women and 799,298 men)
People accessing appropriately designed and managed latrines	1,988,000	1,000,830	440,000	386,736 (98,094 girls, 88,520 boys, 96,852 women and 103,269 men)
People reached with critical WASH supplies (including hygiene items) and services	3,359,837	3,735,950	2,400,000	2,759,640 (605,064 girls, 581,496 boys, 770,899 women, 802,181 men)
<b>Afghan Refugee Response 2023</b>				
# of people reached through installation of new water supply system, rehabilitation/ improvement of the existing water supply	2,583,577	703,470	366,000	214,070 (46,936 girls, 45,108 boys, 59,800 women, 62,227 men)

# of people reached in settlements/ Refugee Villages/hosting communities with installation of new latrines, rehabilitation/ improvement of the existing toilets	1,042,812	362,108	305,000	224,949 (49,321 girls, 47,400 boys, 62,839 women, 65,389 men))
# of persons who have received hygienic supplies	408,300	264,422	190,000	157,212 (34,469 girls, 33,127 boys, 43,917 women, 45,699 men)



## Education



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In the village of Mir Jan Muhammad, Mirpurkhas, Sindh, children play outside a UNICEF temporary learning center.

## Flood-response

UNICEF as co-lead for the Education Sector, plays a key role in strengthening Education Sector coordination at national and provincial levels and in facilitating better planning implementation and monitoring of education interventions. The sector objectives also entail close monitoring and improving access to quality education for the most vulnerable, including girls and marginalized people affected by multiple vulnerabilities and deprivations. UNICEF facilitated the overall coordination of all stakeholders for the flood emergency response throughout 2023 and ensured partners were not duplicating efforts, sharing information, as well as supplementing, and complementing interventions to reach highest possible number of beneficiaries with quality education services in flood affected districts.

UNICEF continued to respond to the flood emergency in close collaboration with provincial education departments, and to provide access to education to vulnerable children through safe and conducive environments. While some emergency response activities continued in 2023 (e.g. dewatering and cleaning of schools, establishment of temporary structures), the focus gradually shifted to recovery and rehabilitation of schools. The flood response and recovery reached 37 districts (13 in Balochistan, 3 in KP, 2 in Punjab, and 19 in Sindh).

Education interventions provided children with opportunities to continue learning and supported their wellbeing through mental health and psychosocial support (MHPSS) services. This was achieved by restoring access to learning through the establishment of Temporary Learning Centres (TLCs) and Transitional School Structures (TSS)<sup>29</sup>, rehabilitation of existing schools, provision of education supplies, training of teachers and community members on MHPSS, and supporting communities to mobilize parents to support enrolment and retention of children in schools.

In total, 344,696 children were reached under UNICEF's flood response between September 2022 and December 2023. In 2023, the emergency response interventions in the flood-impacted districts ensured the continuation of learning of 225,749 children (including 95,264 girls). Besides the provincial education departments, UNICEF also engaged civil society organizations (Strengthen Participatory Organization, Sanj Preet Organization and Thardeep Rural Development Programme) in Punjab and Sindh to support the implementation.

UNICEF supported the establishment of 773 TLCs (49 for boys, 87 for girls and 637 mixed) and 323 TSS (132 for boys, 101 for girls and 90 mixed) benefiting 99,168 (43,828 girls) through TLCs and 30,044 children (11,625 girls) through TSS. In addition, 70 schools (12 boys, 14 girls and 44 mixed) were de-watered and cleaned, benefiting 18,654 children (6,177 girls), and 377 damaged schools (167 for boys, 128 for girls and 82 mixed) were rehabilitated benefiting 77,883 children (33,634 girls). Education supplies including Student Learning Kits (SLKs), Student Hygiene Kits (SHK), Recreational Kits, School in a box (SIBs) and Early Childhood Education (ECE) kits were provided in all UNICEF-supported learning facilities<sup>30</sup>. In addition, 23,602 children were provided with winterisation kits to protect them from the cold weather.

UNICEF supported the training of 4,510 teachers (2,357 females) on MHPSS, multi-grade teaching and teaching in emergencies to support vulnerable children in TLCs and schools. These trainings are intended to support teachers in delivering lessons to overcrowded classes and to deal with children that are traumatized due to the impacts of the floods. In addition, Parent Teachers School Management Committee (PT/SMCs) members were also engaged in school improvement. A total of 7,279 members (3,681 females) of PT/SMC were trained on MHPSS and the safe opening and functioning of schools during 2023.

In 2023, 899,316 children and adults (including 214,201 females) were reached through social and behaviour change communication messages (on social media, mass communication and community engagement events) on back to learning and education services.

Major challenges facing the implementation included the unavailability of safe spaces to install tents for TLCs, ensuring the availability of local teachers for TLCs, and the mobilization of parents to enrol children in the programme supported learning facilities.

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<sup>29</sup> Temporary Learning Centres TLCs are established in camps when communities are displaced and are tent schools. Transitional School Structures TSSs are either pre-fabricated (containers) or brick and mortar constructions in communities (villages) when populations have not had to leave their homes or been able to return to their homes.

<sup>30</sup> SLK includes a school bag with notebooks and stationery items; SHK contains hygiene items including soaps, toothpaste, toothbrush, nail clipper and comb; SIB contains teaching and learning materials including notebooks, stationery items and paint for blackboards, paint brush, crayons, a geometry box and scale; ECE kits contain didactic play items for young children.



UNICEF extensively engaged partners and communities to ensure the identification and availability of safe spaces for TLCs, as schools were under water during the early stages of the emergency. Furthermore, teachers were engaged through education offices at the district level and parents were reached and mobilized through the SMCs to enrol and retain children in learning facilities. These efforts allowed extending the reach of the programme activities; however, challenges remained to reach and retain all children affected by the floods. UNICEF had set the target at 383,000 children to be reached through different interventions, including TLCs, TSS and supplies. The lower achievement of a total of 225,749 children is mainly due to the gap in funding. During 2023, focus shifted towards the TSS and school rehabilitation and hence more children were reached specifically through these components.

### Refugee and host community response

As part of the Afghan refugee response, UNICEF supported 91,794 primary and secondary age children (46,564 girls) in refugee and host communities in Balochistan and KP provinces through catch-up classes and non-formal education in 2023. This included 18,726 Afghan refugees (8,858 girls). UNICEF cumulatively trained 1,099 teachers (617 women) from host communities in Balochistan and Khyber Pakhtunkhwa, including 21 Afghan refugee female teachers. These teachers' trainings focused on classroom management, multi-grade teaching and MHPSS.

**Table 5: Results achieved (education)**

Indicators	Sector		UNICEF	
	Target	Results achieved	Target	Results
<b>Flood Response 2023</b>				
# of Children reached through formal and non-formal education	700,000	486,048	383,000	225,749 (95,264 girls, 130,485 boys)
# of Children received education supplies	700,000	485,404	383,000	225,749 (95,264 girls, 130,485 boys)
# of children (3-16 + years, girls/boys) benefitting from schools dewatered, cleaned, and disinfected	644,213	36,934	383,000	18,654 (6,177 girls, 12,477 boys)
# of children (3-16+ years, girls/boys) benefitting from prefabricated structures in locations with fully damaged schools	20,280	30,469		30,044 (11,625 girls, 18,419 boys)
# of children (3-16 +years, girls/boys) benefitting from TLCs and alternate learning modalities	202,800	125,110		99,168 (43,828 girls, 55,340 boys)

# of children (3-16 + years, girls/boys) benefitting from schools rehabilitated	375,084	168,159		77,883 (33,634 girls, 44,249 boys)
# of children (3-16 + years, girls/boys) benefitting from winterisation kits distributed	270,400	23,602		23,602 (12,113 girls, 11,489 boys)
# of children (3-16 + years, girls/boys) benefitting enrolled in school following the results of the BTC	577,884	136,786		50,403 (22,270 girls, 28,133 boys)
# of children (3-16 + years, girls/boys) enrolled in Foundational Learning Camps	30,000	30,873		This indicator is not for UNICEF
# of children (3-16+ years, girls/boys) benefitting from school feeding programmes	40,000	5,731		This indicator is not for UNICEF
# of teachers and education personnel trained (female/male) on PSS, multi-grade teaching and teaching in emergencies	20,826	6,922		4,510 (2,357 women, 2,153 men)
# of SMC members (female/male) trained on PSS and safe reopening and functioning of schools	40,597	9,558		7,279 (3,681 women, 3,598 men)
# of TLCs / schools established in flood affected districts	5,070	1,129	1,422	773 (87 girls, 49 boys, 637 mixed)
# of schools dewatered, cleaned and disinfected	4,295	155	119	70 (14 girls, 12 boys, 44 mixed)
# of TSS constructed	510	328	364	323 (101 girls, 132 boys, 90 mixed)
# of damaged schools rehabilitated/minor repairs	3,444	778	660	377 (128 girls, 167 boys, 82 mixed)
<b>Afghan Refugee Response</b>				
# of primary school-aged students provided with remedial or catch-up classes	525,301 (315,181 girls, 210,120 boys)	7,727 (3,741 girls, 3,986 boys)	262,500 (157,500 girls, 105,000 boys),	7,727 (3,741 girls, 3,986 boys)
# of primary school-aged students supported to access formal education		14,955 (6,984 girls, 7,971 boys)		9,101 (3,856 girls, 5,245 boys)

# of secondary school-aged students provided with remedial or catch-up classes		582 (267 girls, 315 boys)		351 (134 girls, 217 boys)
# of secondary school-aged students supported to access non formal education (ALP, accelerated education, literacy programs)		2,278 (1,676 girls, 602 boys)		1,547 (1,127 girls, 420 boys)
# of teachers trained	19,500 (11,700 women, 7,800 men)	1,760 (546 women, 1,214 men)	3,000 (1,800 women, 1,200 men)	21 (21 women)

## Child Protection



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On 1 February 2023, Zaheer Ahmad, Planning, Monitoring and Evaluation Officer UNICEF, helps 3-year-old Muskan put on new shoes she has just received as part of the winter kit provided to her by UNICEF during a distribution in Sulool Daramdala village, Upper Dir District, Khyber Pakhtunkhwa Province. As families were left exposed to freezing temperatures and snow, following the 2022 monsoon floods, UNICEF quickly distributed thermal blankets and winter clothes such as jackets, hats, socks and shoes to displaced children and families. As needs grew, UNICEF procured more supplies to see children through the harsh weather.

## Flood-response

UNICEF continued to lead the Child Protection Area of Responsibility (CP-AOR) at the national and provincial level and provide guidance on the development of the Minimum Package for the child protection intervention in the humanitarian situation for uniformity of the approach. UNICEF adapted a range of guidance materials including Psychological First Aid Guidance, and IEC materials on Child protection and GBV risks. The CP-AOR and ESWG jointly conducted a need assessment in 20 flood affected districts across the country. The data was collected through the CP-AOR and the education sector members, the analysis and report writing were supported by the Global Education Cluster. The findings showed an increase in child marriage and child labour in flood affected areas, major drivers include poverty, social and cultural norms and lack of services and opportunities particularly

among adolescent girls and boys. There was also an increased need for psychosocial support to enable children to overcome stress and anxiety associated with loss and displacement, especially among adolescent girls and boys. The assessment also found an increase in the risk of sexual violence, sexual abuse, or sexual exploitation of children and gaps in child protection services. Four provincial level workshops were held to validate the data. The report is finalized and will be disseminated in April 2024.

The CP-AOR also worked on the development of the Minimum Package for the Child Protection Services in the Humanitarian situation. This document is under the process of finalization and will be uploaded on NDMA website after the approval from concern authorities for further reference and use.

UNICEF and partners provided children, families, and communities with interventions to prevent and respond to distress, violence, abuse, and exploitation. UNICEF activated 13 new partnerships with civil society organisations to bring child protection services to flood-affected children and families, covering 35 districts in total across Balochistan, KP, Punjab and Sindh. UNICEF also worked in partnership with the Social Welfare Departments to replicate or expand the Government's District Child Protection Units' (DCPUs) services to support children at risk and survivors of protection violations, including through the deployment of additional case workers and psychologists.

UNICEF reached 9,670 (4,444 girls and 5,226 boys) children at risk and survivors of child protection violations with case management services; 750,058 children and caregivers (262,109 girls, 276,242 boys, 134,287 women, 77,420 men) with psychosocial support (PSS); and 5,858,390 people (1,398,572 girls 1,322,740 boys, 1,815,635 women, 1,321,443 men) with information on key child protection risks and available services through both direct and indirect methodologies. The births of 151,115 children (71,602 girls and 79,513 boys) were registered in flood affected areas – a major step towards establishing children's legal identity and facilitating access to essential services. UNICEF also reached 1,718,249 children and women (564,694 girls, 475,817 boys, 677,738 women) with GBV risk mitigation, prevention, and response interventions. More beneficiaries could be reached throughout the response and the established partnerships than initially planned (targets), as significantly more funding for child protection became available.

UNICEF continued to develop and refine technical guidance on the delivery of child protection services. For example, UNICEF supported the development of standard operating procedures on case management and guidance on ethical transiting and closure of child protection programs. In addition, UNICEF contributed to the development of a new set of information, education, and communication materials to reinforce programming and distribution of PSS kits, recreation kits and tents/solar kits for safe space activities.

UNICEF supported multiple capacity-building initiatives across the country to enhance the skills and knowledge of frontline workers. UNICEF in partnership with the University of Bradford assessed the learning needs of the new Social Service Work Force (SSWF) cohort in Sindh and accordingly developed and delivered a contextualized package of training on

Child Protection in Emergencies (CPiE). The training was supplemented with RapidPro<sup>31</sup>, a mobile tech programming tool which serves as a training and support tool for case workers in Sindh province. To build a community of practice, UNICEF used the RapidPro platform where case workers undertook a pre-requisite training to gauge their knowledge about the fundamentals of child protection. The same platform was subsequently used to share information, relevant resources, and bite sized training material with case workers on regular basis. The expected outcome is to have a pool of well-trained child protection case workers readily available across Sindh province. The results are currently under review for potential replication in other provinces.

In flood affected areas, an initial resistance to MHPSS interventions was observed, but these interventions later proved to be impactful in addressing the psychosocial issues of affected children and communities, with noted increased demand. Partnerships with Civil Society Organizations (CSOs) have proven instrumental in accelerating achievements in service provision. Local NGOs and INGOs played a vital role to bridge the gap for service provision and provided technical backstopping to the SSWF from Government on case management and referral systems. A new web/mobile based application for monitoring attendance in safe spaces to improve the quality of reporting was also developed and rolled out in 2023.

### Refugee and host community response

UNICEF provided support to the Government and civil society for the delivery of child protection interventions for the prevention of and response to abuse and exploitation of refugees and host communities, with a focus on Balochistan and KP provinces.

10 new DCPUs (five each in Balochistan and KP) were established in refugee-hosting districts, which serve as one-stop-shops for child protection issues, specifically for case management services for children at risk and survivors of child protection violations. Case management services were provided to 1,984 children (671 girls, 1,301 boys), including 179 refugees (87 girls, 92 boys) during the reporting period to address their specific needs, including 232 unaccompanied and separated children (49 girls, 183 boys) through family tracing and appropriate alternative care.

UNICEF supported partnerships to strengthen community-based child protection interventions, including psychosocial support and prevention initiatives, targeting both host communities and Afghan refugees. UNICEF also supported the Social Welfare Department with mobile interventions to bring child protection services closer to communities targeting those with significant numbers of Afghans. The expansion of community-based child protection interventions reached 30,805 children and caregivers (8,793 girls, 13,792 boys, 4,512 women and 3,708 men) with psychosocial support and 348,669 individuals (87,380 girls, 121,978 boys, 57,190 women and 82,121 men,) with awareness raising interventions via face-to-face and indirect modalities on child protection risks and available services.

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<sup>31</sup> RapidPro is a free, open-source software that allows users to easily build and scale mobile-based applications from anywhere in the world. RapidPro collects data via short message service (SMS) and other communication channels (e.g. voice; social media channels, such as Facebook Messenger, Telegram, WhatsApp) to enable real-time data collection and mass-communication with target end-users, including beneficiaries and frontline workers.

A total of 1,231 members (545 women and 686 men) of the social service workforce were trained on different areas of child protection. These trainings are designed to enhance the skills and knowledge of the workforce to deliver impactful child protection interventions. In addition, 2,914 individuals (1,327 women and 1,587 men) were trained on PSEA and child safeguarding.

In collaboration with UNICEF's global research centre, Innocenti<sup>32</sup>, research on children on the move was initiated, in partnership with the National Commission on the Rights of the Child (NCRC), following a two-phased approach, covering the lived experiences of internally displaced children and refugee children initially, followed by a second phase that will inform programming and advocacy in 2024. The first phase stands complete, while the second phase will begin in April 2024.

In response to concerns related to the IFRP implementation from November 2023, UNICEF continued to develop and refine the technical guidance on the delivery of child protection services and provided critical support to government partners in navigating complex protection issues, for example, tailored trainings and screening/assessment tools to identify UASC and vulnerable children in holding facilities connected to the deportation of Afghans. UNICEF, UNHCR, PCR, and IOM continue their strong collaboration, which ensures timely responses to concerns that emerge as a result of the implementation of the IFRP.

UNICEF's model for adolescent-led MHPSS, called Self Care and Hope through Adolescent Mental Health and Psychosocial Support (SHAMS), in partnership with a youth-led national CSO, targets adolescents and youth in refugee and host communities. SHAMS harnesses the power of youth to address stigma and discrimination around mental health issues, promotes acceptance of help-seeking, and supports adoption of positive self-care practices. It thereby supports referrals and linkages to specialised services. Included in this model is a peer-to-peer approach to psychological first aid (PFA) which has been contextualized from UNICEF's global directive 'I Support My Friends'<sup>33</sup>. This initiative made a direct impact by engaging and empowering over 10,000 adolescent girls and boys across 34 districts in the country. This extensive outreach was made possible through the training of more than 500 school-teachers. The SHAMS digital campaign on mental health related awareness reached over 5.4 million adolescents and their caregivers.

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<sup>32</sup> Innocenti is UNICEF's dedicated research center. Its core mandate is to undertake cutting-edge, policy-relevant research that equips the organization and the wider global community to deliver results for children. <https://www.unicef-irc.org/how-we-work>

<sup>33</sup> <https://www.unicef.org/documents/i-support-my-friends>



**Table 6: Results achieved (child protection)**

Indicators	Sector			UNICEF		
	Target	Gender	Results	Target	Gender	Results
<b>Flood-response 2022-2023</b>						
Children and parents/caregivers accessing mental health and psychosocial support	501,523	M	89,532	300,914	M	77,420
		W	147,341		W	134,287
		B	304,975		B	276,242
		G	286,851		G	262,109
		Total	828,699		Total	750,058
Girls and boys receiving individual case management and specialized services.	5,239	B	6,979	3,143	B	5,226
		G	5,795		G	4,444
		Total	12,774		Total	9,670
Boys, girls, women, men reached through awareness activities and UNICEF-supported community mobilization interventions on key child protection risks and available services.	5,178,028	M	1,559,753	3,106,817	M	1,321,443
		W	2,267,968		W	1,815,635
		B	1,541,754		B	1,322,740
		G	1,552,174		G	1,398,572
		Total	6,921,649		Total	5,858,390
Women, girls, and boys accessing GBV risk mitigation, prevention, or response interventions.	617,500	W	677,738	617,500	W	677,738
		B	475,817		B	475,817
		G	564,694		G	564,694
		Total	1,718,249		Total	1,718,249
<b>Afghan Refugee Response</b>						
# of caregivers accessing MHPSS activities including parenting support	40124	M	12,112	24,074	M	3,708
		W	13,054		W	4,512
		Total	25,166		Total	8,220



# of children accessing mental health and psychosocial support	217602	B	28,733	130,561	B	13,792
		G	24,742		G	8,793
		Total	53,475		Total	22,585
# of newly identified children at heightened risk who are supported by a Best Interests Procedure (BIP) / Child Protection Case Management	5,075	B	1,753	3,045	B	671
		G	1,351		G	1,301
		Total	3,104		Total	1,984
# of people reached through awareness activities and community mobilization interventions on key child protection risks and available services	1,750,000	M	238,310	1,050,000	M	82,121
		W	452,333		W	57,190
		B	219,014		B	121,978
		G	153,602		G	87,380
		Total	1,063,259		Total	348,669
# of social workforce trained on prevention and response to child protection concerns	9,500	M	2,562	5,700	M	686
		W	2,165		W	545
		Total	4,727		Total	1,231
# of UASC assisted with family tracing, case management and family-based care or suitable alternative	3,000	B	227	1,800	B	182
		G	109		G	87
		Total	336		Total	269

## Winterization

Pakistan is one of the most disaster-prone countries in the world, grappling with profound effects of climate change. In addition to the impacts of the 2022 floods, the country also experienced harsh winter conditions, mostly in its northern regions, with temperatures dropping below 0°C. To support vulnerable populations in these locations, UNICEF provided winterization supplies including warm clothing kits for infants to children up to the age of 12 years, blankets, quilts, jackets shawls and woollen caps. UNICEF also procured and prepositioned winter supplies to ensure a timely response when harsh winter conditions are experienced during the winter of 2023.

## Social and Behaviour Change



*UNICEF Pakistan's participatory research drives tailored solutions: Understanding the needs of flood-affected communities for effective aid distribution. Photo credit: UNICEF Pakistan/ Adil Farooq Pasha*

### **PARTICIPATORY RESEARCH INFORMS FLOOD RESPONSE**

UNICEF employed evidence-based participatory methods to design its community engagement efforts to meet the needs of flood-affected communities in the Balochistan, Khyber Pakhtunkhwa, Punjab and Sindh provinces. By successfully integrating anthropological research with community feedback mechanisms, UNICEF was able to quickly capture and sensitively understand the challenges faced by vulnerable populations.

A concrete example of this approach involved refining the contents and distribution of dignity kits in Punjab and Sindh provinces. Local implementing partners quickly collected feedback about dignity kits from community support groups, while UNICEF was also engaged to conduct anthropological research. This research revealed a lack of comprehension about the items in the dignity kits and a need for culturally appropriate items.

In response, UNICEF developed guidelines ensuring kits contained locally relevant items, such as reusable sanitary cloths and gender-specific hygiene products. Additionally, community trainings associated with the distribution of the kits were enhanced, focusing on clear communication about addressing concerns, the contents and use. The distribution process was improved by involving women in selecting distribution points and dates, discreetly providing information, and organizing separate spaces for dignity kit distribution during larger relief efforts.

In 2023, UNICEF implemented SBC interventions supporting sectors to enhance the well-being of the population in flood affected communities. These initiatives included but were not limited to engaging and listening to communities through community feedback mechanisms and behaviour insight work to strengthen capacities and improvement of delivery of quality of services in flood affected communities.

A spectrum of critical issues included the identification of marginalized groups, food and nutrition impact, vulnerabilities, safety of children, child marriage, child labour, and GBV/domestic violence in the affected communities. The analytical reports resulting from

these efforts have improved planning, monitoring, service delivery, as well as the disseminations in the flood affected communities.

Mobilization of community engagement workforce contributed to strengthen services and platforms. For instance, community mobilizers reached and built the capacity 1,100 religious leaders in in Balochistan and Punjab on Key Family Care Practices in emergency situations. Community engagement sessions, emphasizing two-way dialogue, have been conducted extensively, reaching nearly 92,000 caregivers. In Sindh, SBC initiatives included training sessions for social mobilizers, religious leaders, and district government officials, covering critical areas such as flood awareness, prevention of sexual exploitation and abuse, child protection, and to reach vulnerable communities with lifesaving messages through integrated SBC approaches in flood affected communities.

UNICEF adopted initiatives, including interactive theatre shows, to address mental health challenges in children. For instance, edutainment initiatives supported the "Back to School" to increase understanding on the importance of education an in Punjab. UNICEF used digital engagement platforms and trained implementing partners in qualitative research methodologies to ensure effective SBC and community engagement response. For instance, a rapid assessment survey utilized a human-centred design methodology informing SBC interventions in the flood affected communities in southern KP province. Community sessions by frontline worker in DG Khan and Rajanpur districts supported collecting online community feedback, leading to actionable recommendations for improving behaviour change communication interventions in the flood affected communities.

Overall, the SBC interventions underscore a comprehensive and collaborative approach, addressing a myriad of challenges faced by emergency-hit flood-affected communities. UNICEF aimed to establish a national 'helpline' for all affected populations, to provide critical information, enable concern reporting – Accountability to Affected Populations, share location-specific referrals, offer basic counselling, and foster trust between the government, response partners, and those affected. However, the government did not activate the helpline estimating to receiving minimum 3,000 calls a day, which explains the gap between the projected number of people providing feedback presented in the results table, and actual results. Feedback has instead been received during community engagement sessions and focus group discussions as well as through UNICEF partners in the flood affected communities.

Community engagement interventions ensured two-way communication between the communities and the service providers to meet the needs and concerns of flood-affected communities and Afghan refugee populations the flood and non-flood affected areas. Community dialogues enabled community members to express their concerns to service providers to meet their needs directly. This interactive approach facilitated a deeper understanding of the challenges faced by these communities, enabling UNICEF and implementing government/partners to tailor their response and services according to the needs on the ground. The feedback mechanisms put in place included community sessions and frontline workers to provide a venue for all stakeholders to hold continues dialogue,

receive real-time feedback and make adjustments to the emergency response strategies based on community input.

The integration of feedback and complaint mechanisms into SBC initiatives in flood affected communities allowed for timely identification and resolution of issues, ensuring interventions were responsive to the emerging needs. This allowed the programs to make evidence-based decisions, prioritize interventions and allocate resources effectively.

The ongoing efforts reflect a commitment to continuous improvement, capacity building, and targeted initiatives aimed at enhancing the well-being of vulnerable populations.

**Table 7: Results achieved (social and behaviour change)**

Indicators	Target	Gender	Results
Number of people reached through mass and social media, with risk communication and early recovery messages.	3,500,000	Men	15,190,548
		Women	15,810,570
		<b>Total</b>	<b>31,001,118</b>
Number of people reached through risk communication, community engagement and receiving accurate, contextualized, timely lifesaving and early recovery information.	2,500,000	Men	6,807,469
		Boys	6,387,949
		Women	24,892,245
		Girls	6,898,570
		<b>Total</b>	<b>44,986,233</b>
Number of people sharing their concerns and asking questions/clarifications for available support services to address their needs through established feedback mechanisms.	2,500,000	Men	37,001
		Women	30,058
		<b>Total</b>	<b>67,059</b>

A significant number of people were reached particularly through mass and social media, with early recovery and risk communication messaging. As is evident from the data, the mass and social media campaigns were able to extend beyond the traditional gender boundaries, with a slightly higher number of women reached compared to men.

**SBC initiatives were also conducted in Afghan refugee** communities in close collaboration with government agencies, implementing partners, media organizations, and community-based groups. CSOs and the provincial health education department actively participated in a range of activities:

- o Community engagement sessions
- o School mobilization efforts
- o Influencer interactions
- o Dissemination of critical messages through megaphones, vehicles, and mosque announcements.

The objective of the activities was to raise awareness and encourage preventive behaviours during disease outbreaks (such as Leishmaniasis, dengue, acute watery diarrhoea, and Congo fever) in districts hosting Afghan refugees.

Beyond outbreak response, SBC interventions also prioritized conveying essential information on early childhood development (ECD) and infant and young child nutrition. Capacity-building initiatives were conducted for partners in SBC to enhance interventions within Afghan settlement areas.

### **Community Outreach results:**

Afghan refugees were reached through multiple channels including community awareness sessions, mosque sermons, school and madrassah gatherings, and key influencer interactions. Key messages were effectively disseminated through mobile announcements and mosque channels.

A total of 203,676 individuals benefited from various communication channels:

- 90,664 men
- 81,202 women
- 31,676 children
- 134 people with disabilities

One of the key interventions of SBC was community engagement, ensuring that there is a two-way communication between the communities and the service providers ensuring that the needs and concerns of flood-affected communities and Afghan refugee populations were effectively addressed and led to positive changes. Community dialogue was fostered, which allowed the community to express their concerns and needs directly. This interactive approach facilitated a deeper understanding of the challenges faced by these communities, enabling UNICEF program and government/partners to tailor their response and services according to the needs on the ground.

The feedback mechanisms put in place included community sessions and as well as frontline worker training which provides a venue for all stakeholders to have a continuous dialogue, provide real-time feedback and adjust the emergency response strategies based on community input.

### **Prevention of Sexual Exploitation and Abuse**

UNICEF is committed to preventing and responding to sexual exploitation and abuse (SEA) and is actively engaged in policy and operational efforts to improve the reporting of SEA, in support to survivors of SEA, and in promoting accountability to affected populations. During 2023, UNICEF received complaints about PSEA through Community channels, implementing partners, and the general public.

Survivors received timely and appropriate survivor assistance, referrals, and other services from UNICEF, CSOs, Government, and the UNICEF Headquarters Office of Internal Audit and Investigations (OIAI).

In October 2023, UNICEF established the Inter-Agency Implementing Partnership (IP) Working Group, in line with the global Inter-Agency IP Working Group to support UN agencies in implementing the UN Harmonized IP Protocol in Pakistan. Conducting joint SEA risk assessments and implementing capacity strengthening and improvement plans with CSOs has been facilitated by UNICEF's strategic leadership. This initiative has trained over 220 CSOs (90 women 130 men) and 75 UNICEF staff to implement UN IP PSEA Common Assessments. Through UNICEF lead facilitation, 22 PSEA Focal Points have been trained to conduct joint PSEA assessments.

UNICEF also supported its implementing partners to develop contextualized PSEA messages and IEC materials through a dedicated partnership with IRC. The posters, brochures, pamphlets, and key messages on PSEA are available in English, Urdu, and Sindhi languages. Since the beginning of the response in 2022, 6,112,436 people including 2,506,691 children (1,252,057 girls, 1,254,634 boys, 1,813,362 women, and 1,792,383 men), in UNICEF-supported project implementation sites have been reached with the PSEA messages, including the safe and accessible SEA reporting. In 2023, a total of 1,888,302 individuals were reached, including 469,621 children (201,774 girls, 267,846 boys), 204,702 women, and 1,213,979 men.

UNICEF in Peshawar, capital of the KP province, has established a strategic partnership with the Provincial Disaster Management Authorities (PDMA) to strengthen PSEA within government entities. PDMA KP is the first government department in Pakistan to take the agenda of PSEA to a larger scale. Under this initiative, the PDMA has enhanced the capacity of government entities, CSOs and other humanitarian actors and follows up on the implementation of PSEA with all parties receiving NOC from the PDMA to execute response/humanitarian initiatives. The functional model will also apply to the other PDMAs in the areas supported by UNICEF.

Since the onset of the flood-emergency, 13,149 frontline workers (5,686 women and 7,463 men) have been trained on PSEA through online mandatory trainings and face-to-face training sessions. During the reporting period, 895 frontline workers (181 women and 714 men) received training on SEA, enabling them to be aware of the prohibited behaviours and know where and how to report SEA misconduct.

**Table 8: Results achieved (PSEA)**

Indicators	Target	Results achieved
People with safe and accessible channels to report sexual exploitation and abuse by personnel who provide assistance to affected populations	3,697,379	6,112,436



## Results Achieved with Humanitarian Thematic Funding

In 2023, UNICEF received US\$ 8.042 million in thematic contributions against the HAC appeal. With the support of these flexible funds, UNICEF was able to promptly address immediate humanitarian needs where most needed, and support effective coordination, preparedness and timely response for a range of lifesaving interventions, including health, nutrition, WASH, education, child protection and social protection.

Flexible thematic resources greatly contributed to filling the urgent response gaps, especially to support procurement of life-saving supplies. Thematic contributions supported the health response by improving access to integrated health and nutrition services, including vaccination and maternal and new-born care to the most vulnerable mothers and children, including those in hard-to-reach areas.

Thematic funds were critical in supporting the humanitarian coordination structure via cluster coordination and information management support across sectors where UNICEF is lead or co-lead, allowing for improved coordination and monitoring of key results of the humanitarian action. Funds also ensured timely PSEA activities as part of the response.

Thematic resources were also instrumental in supporting essential operational costs, which enabled UNICEF to maintain its decentralized programming with agility, flexibility and to adapt its operations and footprint to the ongoing crisis.

## Assessment, Monitoring and Evaluation

As part of its commitment to generating and utilizing high-quality evidence, UNICEF conducted a series of evidence generation activities, specifically designed to support evidence-based decision-making processes related to emergency response efforts. Details of the assessments and studies are mentioned below.

### **The Emergency Response Progress Tracker System (September 2022- December 2023):**

UNICEF established an Emergency Response Progress Tracking System (ERPTS) and dashboard to track and visualize its response coverage for each province and sector. The dashboard offered intuitive tools like charts and dashboards for easy data analysis. It provided robust reporting features, allowing for customised reports that effectively communicate emergency response efforts to stakeholders and donors. Developed through a consultative process with all sections, ERPTS ensures the availability of timely data and acts as a data collection and reporting mechanism for many sections, utilised at both the Country Office and Provincial Offices. Moreover, the dashboard provided the first central source for emergency data across all sections, offering a successful use case for further replication and scaling. It offers pre-configured analyses, facilitating informed decision-making and allowing more time for strategic planning.

### **Evaluation of UNICEF's Response to the 2022 flooding in Pakistan (January – July 2023):**

UNICEF Regional Office, in close collaboration with UNICEF Pakistan Country Office, conducted an independent assessment of UNICEF Pakistan's response to the 2022 flooding in Pakistan. This assessment aimed to serve multiple purposes: informing programme design, aiding managerial decision-making to current course correction, providing insights for future/similar emergencies including mitigation strategies to minimize impact, and

support accountability by providing an independent assessment of UNICEF's response to the flooding crisis in Pakistan. The results of this assessment are instrumental in shaping future programme planning and implementation efforts. Additionally, the insights gained from this assessment will inform UNICEF's programming strategy and operational planning at regional, headquarters, and country offices in similar emergencies. The learning from this assessment will also Govt's preparedness and response efforts.

**Rapid Assessment to understand the needs of returned communities in the flood affected areas (October 2023-August 2024):** This rapid assessment to understand the needs of returned communities in the flood affected areas is currently in progress. The key objectives are to assess the current status of households and communities that have returned to flood-affected areas, identify critical infrastructure disruptions, investigate the impact on basic needs and livelihoods, and understand short- and long-term needs and vulnerabilities, focusing on essential requirements such as emergency shelter, clean water, food, healthcare, and other urgent necessities to ensure their immediate well-being and recovery. It also aims to identify public and private sector opportunities for recovery and to provide recommendations to the government and development stakeholders regarding high priority areas for post emergency preparation and recovery programmes. The results of this assessment will help UNICEF programmes, government, and relevant stakeholders in determining the correct mechanisms for sustainable recovery options for returning communities in the continued aftermath of the floods.

**Post-flood assessment on children with disabilities in Pakistan (December 2023 - August 2024):** Another study, a 'post-flood assessment on children with disabilities in Pakistan' was initiated in the last quarter of 2023, with the aim to assess the current condition of children with disabilities impacted by the recent floods in Pakistan. The study will also identify critical data gaps, collect evidence on available services, policies, and support systems on disability, and guide future programmatic actions in UNICEF and strategic programmatic and cross-cutting priorities in Pakistan.

**Education in Emergencies and Child Protection - Joint Needs Assessment: Pakistan 2023:** Education and Child Protection conducted joint need Assessment to assess the needs and gaps in the flood response 2022. The data was collected through the CP-AOR and the education sector members, and the analysis and report writing were supported by the Global Education Cluster. The findings showed an increase in child marriage and child labour in flood affected areas, major drivers include poverty, social and cultural norms and lack of services and opportunities particularly among adolescent girls and boys. There was also an increased need for psychosocial support to enable children to overcome stress and anxiety associated with loss and displacement, especially among adolescent girls and boys. The assessment also found an increase in the risk of sexual violence, sexual abuse, or sexual exploitation of children and gaps in child protection services. Findings from this assessment are used to inform the response on both flood specific needs and the wider situation for children in flood affected districts in Pakistan, particularly related to issues that are not yet addressed, and which need immediate support from government and development partners.

**Standardized Monitoring and Assessment of Relief and Transitions Surveys (SMART) 2023:** UNICEF, together with Action Against Hunger (ACF) and local partners, conducted



SMART surveys in 12 districts of KP, Balochistan and Sindh in 2023 to gain a better understanding of the current nutritional status of these districts, especially among young children. The SMART surveys revealed that the prevalence of wasting ranged from 22.1 per cent in Sindh to 13.7 per cent in KP, with many districts exceeding the emergency threshold of 15 per cent set by WHO. Between 2.7 and 5.1 per cent of children under two surveyed suffered from severe acute malnutrition (SAM) and the wasting rates among children under two were worst in Nasirabad district at 22.6 per cent – well above WHO’s emergency thresholds. Only 9.6 per cent of the children in the age group 6-23 months of age surveyed received a minimum acceptable diet.

## Financial Analysis

### Flood Emergency:

In 2022-2023, UNICEF required US\$173.5 million to provide life-saving support to women and children affected by the floods. The appeal was 71% funded, which left a gap of US\$ 50 million (29%). In addition to the re-purposing of regular resources, funds from Australia, Denmark, the European Union, France, Germany, Ireland, Japan, Kuwait, the Republic of Korea, Norway, Romania, Sweden, the United Arab Emirates, the United Kingdom, the United States of America, the UN Central Emergency Response Fund, UNHCR, Gavi, the Vaccine Alliance, Education Cannot Wait, Global Partnership for Education, UNICEF National Committees (Denmark, France, Hong Kong, Luxembourg, Norway, Republic of Korea, United Kingdom, United States), private sector partners Telenor, Unilever, Ernst & Young, Z.V.M.G. Rangoonwala Trust, Ze Shan Foundation, DP World, Flexport, Maersk, The Church of Jesus Christ of Latter-day Saints and flexible thematic humanitarian funding were critical to the response. UNICEF is grateful to its partners for the much-needed resources, as these have been essential for the continued response and recovery, particularly flexible funds provided to meet the most urgent and emerging needs.

The table below gives a summary of the overall appeal sector wise, total humanitarian funding received in 2022 (already reported in the 2022 CER) and the humanitarian funding received in 2023. Health was 70% funded, Nutrition 80% funded, Education 87% funded, Child Protection 72% funded, Water and Environmental Sanitation (WASH) 47% funded. The HAC appeal has a total funding gap of US\$ 50.16 million, 29% of the total HAC requirement.

**Table 9: Funding status against the 2022-23 HAC appeal by sector (US\$)**

Sector	Total Requirements	Funds Available Against Appeal as of 31 December 2023*		% Funding Gap
		Humanitarian Funds Received in 2023	Humanitarian Funds Received in 2022	
Health	35,000,000	12,542,825	11,972,514	30%
Nutrition	34,669,042	9,140,980	18,687,746	20%

Education	23,290,028	10,806,043	9,387,422	13%
Child Protection	11,262,494	3,229,044	4,891,065	28%
Water and Environmental Sanitation	58,320,324	10,896,022	16,519,298	53%
Emergency Preparedness	11,000,000	6,523,102	4,557,562	-
Cross Sectoral	-	4,226,833	-	-
<b>Total</b>	<b>173,541,888</b>	<b>57,364,84934</b>	<b>66,015,607</b>	<b>29%</b>

**Table 10: Funding available (received + carry over) by donor and funding type:**

The table below shows funding available (received + carry over) by donor and funding type.

Donor Name/Type of funding	Grant reference	Overall Amount
I. Humanitarian funds received in 2023		
<b>a) Thematic Humanitarian Funds</b>		
Global Humanitarian Thematic Fund	SM229910	1,454,500
Country Humanitarian Thematic Fund	SM229930	6,588,221
<b>Total Thematic Humanitarian Funds</b>		<b>8,042,721</b>
<b>b) Non-Thematic Humanitarian Funds</b>		
US Bureau for Humanitarian Assistance	SM220690	9,599,195
Japan	SM230051	6,481,481
The United Kingdom	SM220813	5,458,227
Sweden	SM230131	3,111,908
France	SM230362	3,000,000
Ireland	SM230101	3,177,966
GAVI The Vaccine Alliance	SM230598	3,017,347
UNOCHA	SM230340	2,332,100
Australia	SM230194	2,331,779
UNICEF-United Arab Emirates	SM220099	2,239,545
UNHCR HQ	SM230502	1,500,000
USA (State) BPRM	SM210714	940,500
USA (State) BPRM	SM230022	290,029
European Commission / ECHO	SM220810	872,410
Kuwait	SM230291	646,000
Saudi Arabia	SM230642	523,455

34 \*ACT-A grants are not included in the table as per CER financial reporting guidance.

Hong Kong Committee for UNICEF	SM230128	422,300
UNICEF-Pakistan	SM230312	50,000
UNICEF-Pakistan	SM230313	116,400
Luxembourg Committee for UNICEF	SM230262	121,630
Norwegian Committee for UNICEF	SM230628	15,445
<b>Total Non-Thematic Humanitarian Funds</b>		<b>46,247,717</b>
<b>c) Pooled Funding</b>		
CERF	SM230340	2,332,100
PSFR - Consolidated Pooled Funding	SM220897	64,030
<b>Total Pooled Funding</b>		<b>2,396,130</b>
<b>d) Other types of humanitarian funds</b>		
United Arab Emirates	KM230005	20,761
Danish Committee for UNICEF	KM220104	103,500
French Committee for UNICEF	KM220108	37,212
UNICEF Pakistan	KM220114	72,137
United Kingdom Committee for UNICEF	KM220103	40,000
United Kingdom Committee for UNICEF	KM220112	14,500
United States Fund for UNICEF	KM230004	205,517
<b>Total Other types of humanitarian funds</b>		<b>493,627</b>
<b>e) Other resources – development funding towards HAC</b>		
European Commission/EC	SH230003	4,954,034
<b>Total Other resources – development funding towards HAC</b>		<b>4,954,034</b>
<b>f) Other resources – development funding towards HAC</b>		
European Union	SC210135	1,200,000
Global Partnership for Education	SC210549	1,850,000
Global Partnership for Education	SC220001	1,459,275
The United Kingdom	SC180015	172,800
Global Partnership for Education	SC210462	2,325,520
<b>Total Other resources – development funding towards HAC</b>		<b>7,007,595</b>
<b>Total humanitarian funds received in 2023 (a+b+c+d+e+f)</b>		<b>69,141,824</b>
II. Carry-over of humanitarian funds available in 2023		
<b>g) Carry over Thematic Humanitarian Funds</b>		
Thematic Humanitarian Funds	SM189910	158,286
Global Humanitarian Thematic Funds	SM229910	695,500
Country Humanitarian Thematic Funds	SM229930	7,076,575

2018-2021 Humanitarian Action Thematic Pool	SM189910	424,390
2018-2021 Humanitarian Action Thematic Pool - COVID-19	SM209910	23,256
<b>Total Carry over Thematic Humanitarian Funds</b>		<b>8,378,007</b>
<b>h) Carry-over of non-Thematic Humanitarian Funds</b>		
German Federal Foreign Office	SM220788	7,238,883
Sweden	SM220676	4,221,382
USA (State) BPRM	SM220228	3,693,570
European Commission/ECHO	SM220810	2,481,903
UNHCR HQ	SM220799	2,000,000
Japan	SM220093	1,796,324
Japan	SM220663	1,000,000
Republic of Korea	SM220758	1,000,000
Romania	SM220746	72,674
European Commission/ECHO	SM210874	878,950
European Commission/ECHO	SM200583	397,079
USA (State) BPRM	SM210714	686,019
<b>Total carry-over non-Thematic Humanitarian Funds</b>		<b>25,466,784</b>
<b>Total carry-over humanitarian funds (g + h)</b>		<b>33,844,791</b>
<b>III. Other sources</b>		
Reprogrammed Regular Resources (RR)	Non-grant	688,409
7% Set-Aside/Pakistan Life Saving Services for Flood	GS220011	4,985,155
UNICEF Emergency Programme Fund <sup>35</sup>	GE220016	2,931,359
	GE220018	488,396
Working Capital Advance	GW220001	5,587,785
<b>Total other resources</b>		<b>14,681,104</b>

**Table 11: Thematic humanitarian contributions received in 2023.**

<b>Donor Name/Type of funding</b>	<b>Grant Reference</b>	<b>Total Contribution Amount (in US\$)</b>
Global Humanitarian Thematic Fund	SM229910	1,454,500
<b>Sub-total (allocation from EMOPS/HQ):</b>		<b>1,454,500</b>

<sup>35</sup> The EPF is a revolving fund providing reimbursable loans to offices that require immediate financing of emergency programmes prior to receiving broader donor support. This timely and flexible funding allows UNICEF to scale up lifesaving humanitarian action for children within hours of a disaster.

<b>Country thematic contributions:</b>		
Denmark	SM2299300232	3,756,462
United States Fund for UNICEF	SM2299300181	1,440,619
Danish Committee for UNICEF	SM2299300247	425,440
United Kingdom Committee for UNICEF	SM2299300196	407,611
Austrian Committee for UNICEF	SM2299300295	99,797
German Committee for UNICEF	SM2299300182	99,534
Australian Committee for UNICEF	SM2299300217	85,847
Japan Committee for UNICEF	SM2299300208	76,109
UNICEF Ireland	SM2299300218	60,249
Polish Committee for UNICEF	SM2299300324	49,710
Swiss Committee for UNICEF	SM2299300248	30,878
Canadian Committee for UNICEF	SM2299300195	30,427
New Zealand Committee for UNICEF	SM2299300209	13,553
UNICEF-United Arab Emirates	SM2299300194	7,272
UNICEF-Thailand	SM2299300186	4,714
<b>Sub-total (received directly at CO level)</b>		<b>6,588,221</b>
<b>Total:</b>		<b>8,042,721</b>

### Afghan HAC Outflow:

UNICEF requested US\$42.1 million in its 2023 Afghan Refugee HAC/RRP to cover the requirements for Pakistan. By the end of 2023, UNICEF had available US\$33.8 million in funding from combined new income and carried over funds, earmarked for humanitarian work against the RRP. US\$22.4 million was received in 2023 from Thematic, Non-Thematic and Pooled funding and US\$11.4 million was carried over from previous years. The Afghan HAC outflow has been almost 80% funded with some of the sectors fully funded including Child protection, Education, GBViE and PSEA. Health has a funding gap of 68%, Nutrition 36%, WASH 24%, cross-sectoral 88% and Emergency Preparedness 51%, leading to an overall funding gap of US\$8.2 million, 20% of the total requirement.

**Table 12: Funding status against the Afghan HAC appeal by sector (US\$)**

HAC Sectors	Requirements	Funds Available Against Appeal as of 31 Dec 2023*		Total Available Amount	Funding Gap
		Funds Received in 2023	Carry-Over from previous years		
Health	7,748,851	1,048,820	1,466,000	2,514,820	68%
Nutrition	7,844,663	1,355,400	3,673,383	5,028,783	36%
Child Protection	4,443,000	4,869,628	558,000	5,427,628	0%
Education	6,285,000	7,304,478	1,302,000	8,606,478	0%

WASH	12,759,900	5,234,635	4,446,941	9,681,576	24%
Social Protection	-	1,472,526	-	1,472,526	-
Cross-sectoral	1,000,000	116,100	-	116,100	88%
Emergency Preparedness	2,000,000	971,280	-	971,280	51%
<b>TOTAL</b>	<b>42,081,414</b>	<b>22,372,867</b>	<b>11,446,324</b>	<b>33,819,191</b>	<b>20%</b>

\* Funds available includes funds received against current appeal and carry-forward from 2022.

**Table 13: Funding available (received + carry over) by donor and funding type:**

Donor Name/Type of funding	Grant reference	Overall Amount
I. Humanitarian funds received in 2023		
<b>a) Thematic Humanitarian Funds</b>		
<b>Total Thematic Humanitarian Funds</b>		<b>0.00</b>
<b>b) Non-Thematic Humanitarian Funds</b>		
USA (State) BPRM	SM230526	5,900,000
Netherlands	SM220822	16,472,867
<b>Total Non-Thematic Humanitarian Funds</b>		<b>22,372,867</b>
<b>c) Pooled Funding</b>		
<b>Total Pooled Funds</b>		<b>0.00</b>
<b>d) Other types of humanitarian funds</b>		
<b>Total Other types of humanitarian funds</b>		<b>0.00</b>
<b>Total humanitarian funds received in 2023 (a+b+c+d)</b>		<b>22,372,867</b>
II. Carry-over of humanitarian funds available in 2023		
<b>g) Carry over Thematic Humanitarian Funds</b>		
Global Humanitarian Thematic Funds	SM229910	350,000
<b>Total carry-over Thematic Humanitarian Funds</b>		<b>350,000</b>
<b>h) Carry-over of non-Thematic Humanitarian Funds</b>		
Japan	SM220093	1,796,324
USA (State) BPRM	SM220228	9,300,000
<b>Total carry-over non-Thematic Humanitarian Funds</b>		<b>11,096,324</b>
<b>Total carry-over humanitarian funds (e+f)</b>		<b>11,446,324</b>



## Future Work Plan

In 2024, UNICEF remains committed to supporting the Government with post-flood recovery, addressing humanitarian needs and strengthening climate resilience and emergency preparedness at the national and provincial levels. **UNICEF is appealing for \$135.6 million in 2024<sup>36</sup> to provide life-saving humanitarian assistance to vulnerable Pakistani and Afghan populations in Pakistan.**

### Health

In strengthening health-care services, UNICEF will continue to offer health services through mobile teams, later transitioning to health-care facilities. Measles vaccinations will be provided to children aged six months to 15 years and UNICEF will support the delivery of antenatal care through functional health facilities and specialized mobile teams. Community healthcare workers will be engaged to bolster awareness of health practices to safeguard against disease outbreaks. UNICEF will invest in disaster risk preparedness and response for 250,000 people in case of any emergency and 1.5 million Afghan Refugees living in camps and host communities. Measles and other age-appropriate vaccination will be provided to 705,000 children six months to 15 years of age. UNICEF is also investing in systems strengthening by adopting sustainable clean energy and the use of digital solutions (DHIS 2).

### Nutrition

UNICEF will continue strengthening the leadership in nutrition sector coordination, information management and delivery of nutrition services for the prevention of malnutrition in all its forms, as well as strengthening the capacity of government, implementing partners and community. The nutrition sector response will focus on enhancing access to lifesaving services, including the prevention, early detection and management of wasting among children, as well as prevention of malnutrition among adolescent girls and pregnant and breastfeeding mothers through provision of micronutrient supplements, nutrition education and counselling as well as linkages with other services including social protection. In 2024, UNICEF aims to provide treatment for severe wasting to 217,891 children aged 6-59 months through outpatient therapeutic programs, and will provide micronutrient powder to 435,779 children aged 6-59 months to treat and prevent micronutrient deficiencies. Furthermore, UNICEF aims to reach 2,315,081 adolescent's girls with Iron and Folic Acid supplementation and to provide infant and young child feeding as well as nurturing care counselling to 1,614,000 primary caregivers of children aged 0-23 months.

Special emphasis will be put on community-based programming, including the empowerment of mothers and families to recognize and refer malnourished children or children with danger signs and/or are at risk of malnutrition, as well as the promotion of KFCPs, including IYCF. Support groups for parents will be strengthened to enhance infant and young child feeding practices.

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<sup>36</sup> 2024-HAC-Pakistan.pdf (unicef.org)

## **WASH**

In 2023, the WASH response included interventions aimed at improving access to both temporary and sustainable services. In 2024 interventions will focus on permanent solutions that aim to ensure safe and sustainable water and sanitation solutions to flood affected communities and refugee and refugee hosting populations, including hygiene education to promote safe hygienic practices and solid waste management at the communal level. UNICEF will also support the provision and rehabilitation of WASH infrastructure in schools, in temporary learning centres, in child-friendly spaces, and in health-care facilities. In 2024, UNICEF aims to reach 669,675 people with access to safe water, 304,850 people with basic sanitation and 1.35 million people with improved hygiene services.

In working towards achieving these targets, UNICEF will ensure engagement of local partners as much as possible. UNICEF is also strengthening internal systems and standards to support improved accountability to affected populations to ensure that communities are engaged in planning and activities.

### **Education**

UNICEF played a key role in responding to the flood emergency in 2022 and 2023, ensuring continued learning for children in a safe and conducive environment. As the immediate response led way to recovery, the focus of the interventions started to shift in 2023 toward setting up classroom structures and rehabilitation. In 2024, these interventions will continue to extend to benefit remaining 157,251 children (80,916 girls) against the overall target of 383,000 children, as per the availability of funding. Moreover, to strengthen response and preparedness, training of teachers on MHPSS, MGT and teaching in emergencies will be scaled up. The training and engagement of school management committees on their roles and responsibilities will be continued too. Finally, taken that poor access to education supplies prohibits the delivery of quality education, the provision of education supplies for children and teachers will continue to be paramount. Education supplies including SLKs, SHK and Recreational kits will be procured and delivered to TSS/schools.

### **Child Protection**

UNICEF will strengthen province-level and community-based child protection and gender-based violence response systems, and aims to reach 273,864 children, adolescents and caregivers with community-based mental health and psychosocial support in 2024, and provide 5,478 children with individual case management. Coordinated services for children at risk and survivors of violence, abuse, neglect, and exploitation are priorities. Building a professional social services workforce, extending prevention and response services, and promoting inclusion of vulnerable children within these systems are key objectives. UNICEF aims to reach 1,349,460 women, girls, and boys with violence risk mitigation, prevention and/or response interventions. UNICEF will provide essential information on child protection and gender-based violence risks, support mental health and psychosocial

support activities and establish an integrated case management and referral system, including for unaccompanied and separated children. In 2024, UNICEF will aim to reach 3,751,320 men, women, boys, and girls with information on key child protection risks and available services.

### **Social Policy**

UNICEF Pakistan will use the findings from the L2 assessment to guide the planning and execution of future emergency responses, considering the lessons learned and best practices identified from the assessment. This approach will ensure that future programmes are further tailored to the needs of affected populations, with a particular emphasis on integrating gender, disability, and marginalized segments of the community. The insights gained from this assessment will be used for operational planning and resource allocation and facilitating more coordinated and effective responses for future emergency responses.

Additionally, the findings from other studies will be utilized to improve the areas where additional capacity building and training are necessary for UNICEF staff, government partners and CSOs partners. The findings will also be used to advocate for increased support and funding for emergency response initiatives. By disseminating the key findings from the studies, UNICEF will raise awareness about the importance of emergency response and garner support from donors, policymakers, and other key stakeholders for emergency context.

### **SBC**

UNICEF will be working closely with various stakeholders in streamlining the Accountability to Affected Populations component in our emergency response. An AAP roadmap will be finalized with special focus on capacity building of partners and CSOs on AAP and community feedback mechanisms will be established to enable 30 per cent of the most affected population to provide their feedback. Another key priority area for 2024 is strengthening the Community Engagement interventions to reach 100 per cent and engage 70 per cent of most affected population in response to the emergencies. Moreover, 15,000,000 affected people (children, caregivers, community members) will be reached with timely and life-saving information on how and where to access available services.

UNICEF has also planned CSO trainings in Afghan Settlements with special focus on early childhood development, along with seminars addressing girls' education and the prevention of harmful practices like child marriage. These activities will be focused in 20 refugee villages across districts including Kohat, Peshawar, Mansehra, Swabi, and Peshawar.

# Annex 1. Case Study: Ensuring Primary Health Care Through Integrated Health, Nutrition & Child Protection Outreach Teams

## Issue/Background:

Pakistan is among the top 10 countries most affected by climate change and ranks 14 out of 163 countries on the Children’s Climate Risk Index. This exacerbates the already high exposure and vulnerability to disasters. In 2022, once again, the vulnerabilities in Pakistan were apparent when torrential rains and flash floods resulted in a humanitarian catastrophe of massive proportions. Initially, one-third of the country was underwater. During its worst phase, this emergency affected 33 million people and left 20 million in need, among which 8 million were children in need of life-saving humanitarian services including health, nutrition, WASH, Protection, and shelters.

As a result of the flood, 2,000 health facilities, representing 10% of total health facilities, were fully or partially damaged, reducing the already limited access to primary health care; including essential maternal and newborn care.

## Resources Required/Allocated:

Global and country specific thematic humanitarian funding was utilised in conjunction with Emergency Programme Funds and CERF grants to put in place the set of life-saving activities quickly and effectively in the flood affected areas.

## Progress and Results:

UNICEF supported mobile outreach clinics by providing training to the team members, incentivizing them and supplying essential medications and equipment to conduct the clinics. UNICEF promoted an integrated service delivery approach through community-based facilities increasing access to the communities that had lost their access to health, nutrition and protection services because of the floods.



Specific inputs by health through the outreach teams were light repair and rehabilitation of primary health facilities with essential medicines and medical equipment (such as cold chain) and the establishment of temporary health centres where facilities were destroyed to ensure children, women and vulnerable people continue to access services while

facilities are being reconstructed. ANC services were provided to 289,730 pregnant women and 16,415,222 children were vaccinated against Polio. In addition, capacity strengthening of health workers in health facilities and mobile teams to deliver basic health services including quality perinatal care, safe identification, and referral of violence; especially sexual violence cases and PFA, and community based IMNCI was also done. UNICEF also provided support for the repair of damaged cold chain systems for making immunization services functional. In support of malarial control, UNICEF procured 2 million LLIN and distributed it through MNCH Clinic in flood-affected high malaria Districts.



Nutrition-based interventions focused on responding to nutrition promotion and prevention (maternal and infant young child feeding – breastfeeding & complementary feeding), care, and treatment (wasting management with nurturing care -ECD). Urgent nutrition services are still continued, including strengthening capacity/ developing a costed preparedness plan for nutrition in emergencies with minimum packages of services. Through these mobile health clinics, 799,222 children (407,603 girls and 391,619 boys) were screened for malnutrition using MUAC, 84,568 children (43,130 girls and 41,438 boys) were treated for severe acute malnutrition, 714,622 children (364,457 girls and 350,165 boys) were provided Multiple Micronutrient Powder (MMP), 383,631 primary caregivers of children aged 0 to 23 months were counselled on infant and young child feeding practices, and 2,160 community volunteers and workers were provided orientation and refresher training on prevention of malnutrition and promotion of key nutrition messages.

Through child protection outreach teams, 152,764 children and caregivers accessed mental health and psychosocial support, 845,654 people were reached with community mobilization on key child protection risks and available services, 937 children received case management to respond to child protection violations, 455 frontline workers were trained on CP and GBV, and new tools were developed such as family-level PSS kit and guidance, PFA guidelines from frontline responders, comprehensive suite of community engagement tools to facilitate the protection of children and adolescents during this vulnerable period.



## Challenges and Lesson Learned:



The impact of the floods has made pre-existing inequities distressingly obvious: it is the poorest, most vulnerable boys, girls, and women living in under-resourced areas who are bearing the brunt of the devastation. The 2022 floods have demonstrated yet again that community-based systems are a lifeline during emergencies as evidenced by the reach of these mobile teams. However, it is time to realize that disaster-resilient infrastructure must go hand-in-hand with shock-responsive services that can reach children, mothers and families in even the direst of circumstances. Therefore, it is

important to have a national contingency plan which focuses on all the aspects of preparedness, control and response towards similar disasters as listed below. Moreover, timely and efficient coordination and cooperation between responsible government agencies, local communities, institutions, and NGOs is key to addressing disasters and their impact.

## Moving Forward:

The integrated mobile clinics have been successful in reaching millions of people and will be expanded to respond to the current programme environment where displaced, and residents in communities while water is receding co-exist. Furthermore, UNICEF will continue to respond to acute humanitarian needs in the districts most affected by the floods while supporting the Health Emergency Preparedness plan to guide the national action for a resilient health system and the Integration package for outreach and community-based services. It will invest in strengthened data systems/ DHIS2 scale-up for quickly identifying outbreaks, understanding gaps and providing remedial support.

UNICEF plans to strengthen national provincial and district management's capacity for preparedness, response and recovery, especially when no cluster approach is invoked. Effective resource generation and mobilization strategies will be fundamental to sustaining and scaling outreach services while rehabilitating health, nutrition and protection facilities.



## Annex 2. Compilation of Human-Interest Stories

# Adding colour to children's lives

***How UNICEF's Safe Spaces for flood-affected children are giving them a reason to smile again***

August 23, 2023 | Moeed Hussain | **Naushero Feroz District, Sindh:** "Until 2 months ago, I never had the chance to draw or paint. I didn't have access to water paints, crayons or colour pencils at my school or home," says 14-year-old Eman, who joined the newly opened Safe Space for children in her village – Janalo Khan.

Using art supplies is something that most children living in urban centres take for granted but for girls like Eman in this remote village, it's a luxury. The densely populated village in Naushero Feroz District, Sindh is largely comprised of daily wage labourers who work in the fields or on construction projects in the nearby cities.

Located in a maze of narrow muddy roads, UNICEF's Safe Space for Children is a beacon of joy and the only recreational place for girls and boys in this impoverished community.

"I come to the safe space daily with my sisters and we have a lot of fun. Sometimes, we use plasticine to make things and on other days we paint and draw. We are usually the first ones to come here and the last ones to leave," shares Eman with a smile.

The adolescent girl's exploration of art has brought colour back into her life, providing respite from the challenges she faced over the past year after devastating floods struck her village.

"It rained for a week and dozens of houses in the village collapsed. Cracks appeared in the walls of our house but thankfully they didn't collapse. We continued living there because we had no place else to go. We prayed for the rain to stop," recalls Eman.



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*Eman shows the paintings she created with water colours at the Safe Space for Children in Janalo Khan village, Naushero Feroz District, Sindh.*

Many families in Janalo Khan were displaced after the floods and spent months in nearby camps set up by the Government. While Eman's family continued to live in their house, their village was inaccessible due to the flood water and there was a widespread shortage of essential commodities. Eating food once a day was the norm.

To make matters worse for children, the only school in the village was destroyed. It was closed for almost four months and reopened in January 2023. The children, especially girls, had few activities to occupy them.

"Some of my friends shifted to the camps while the rest of us in the village had nothing to do. I didn't have any toys to play with and the difficulties brought by the flood often made me and my sisters cry," shares Eman.

“I didn’t have any toys to play with and the difficulties brought by the flood often made me and my sisters cry.”



©UNICEF/Pakistan/Asad Zaidi

Eman and her sisters use water colours at the Safe Space for Children in Janalo Khan village, Naushero Feroz District, Sindh.

The situation eventually improved months later when the flood water receded. At the beginning of the year, the school reopened but when summer vacation approached, Eman anticipated getting bored at home again.

To her delight, the safe space was established in their community. Over the last two months, this centre has become a major attraction for all the children. Over 100 girls and boys attend each day to participate in arts and craft activities and counselling sessions conducted by two facilitators. In a community where painful memories of the flood are still fresh, the vibrant artwork by the children is a testament to their strength and creativity, as they overcome this difficult chapter in their lives.

The safe space has been welcomed by parents in the community. Eman and her three younger sisters were the first ones to enroll. “I don’t like my girls loitering around in the streets in this scorching heat. The safe space has given them the opportunity to learn new skills without venturing out of the community,” said Naheed, Eman’s mother.



©UNICEF/Pakistan/Asad Zaidi

Emaan and her sister Hoorain at their home with their parents in Janalo Khan village, Naushero Feroz District, Sindh.

Over the past year, UNICEF has established nearly 520 safe spaces for children and adolescents in the flood-affected areas with support from donors. The aim is to help girls and boys of different ages, to cope with the stress they encountered by providing them with basic counselling and psychosocial support as well as structured recreational opportunities in the form of art activities to help them heal. Each centre has a recreational kit which includes art supplies as well as toys and jigsaw puzzles, according to the age. The centres also sensitize the community including women, men, girls, boys, youths and key influencers about the perils of child marriage, child labour and other forms of abuse and exploitation. This helps raise awareness among children about crucial topics that often remain unaddressed in society.

“These children have been through a lot during the past year due to the floods. Some lost their homes while others lost their loved ones. The safe spaces give them an opportunity to forget about their painful memories and engage in creative activities which they enjoy. It’s important to let children be themselves especially under challenging circumstances,” says Nabia Farrah, UNICEF’s Child Protection Officer.

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# The Unsung Heroes of Community Health

*Lady Health Workers in Pakistan bring vital healthcare services to remote and underserved communities*

December 15, 2023 | Sana'a Zuberi | Hyderabad,

**Sindh:** It's 3:00 in the afternoon and there's a knock at 43-year-old Farida Husain's back door in the Qasimabad township. Above the door, a sign reads 'Health House'. Farida opens the door to her neighbour, Afshan, a young mother of two, who arrives with her 18-month-old daughter, Alisha, who she says is feverish.



©UNICEF/Pakistan/Husnain Ashfaq

Farida is a Lady Health Worker (LHW), an essential part of suburban and rural Pakistan's communities. Owing to cultural sensitivities and the limited access to primary healthcare in remote areas, District Health Offices have established a network of women like Farida who reside in these communities as LHWs. These selected health workers receive training in basic first aid and healthcare guidance. They conduct community-based health interventions, which include registering community members, particularly women and children for services like family planning, maternal and child healthcare, immunization and health promotion.

After greeting Afshan, who recently had another baby, Farida asks her about her post-partum health and the baby's immunization. She then pulls out her UNICEF provided health kit. After sanitizing her hands and putting on gloves, she checks the toddler. Farida checks her temperature with a digital thermometer. She retrieves an infant weighing scale and her special measuring tape, which is used to assess mid-upper arm circumference, a critical metric for identifying malnutrition in children aged 6 months to five years.



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*Farida uses the infant scale to measure 18-month-old Alisha's weight, as her mother Afshan supports her from below*

Farida usually makes house calls in the community. Within the privacy of their homes, women are more comfortable to discuss their health issues. She follows a monthly schedule for her community rounds, covering nearly 1,500 households. Her daily visits are planned to ensure she can cover every household within the month. Her primary focus revolves around the well-being of pregnant women, mothers and children under the age of five. However, since she lives in the community, her job requires her to be available throughout the week for any family's medical emergency.



"Sometimes, families approach me with an injured child, and I provide them with initial first aid treatment for their wounds," shares Farida. While she can handle basic first aid and general healthcare advice, any serious issue requires referral to the nearest hospital or health clinic with a qualified doctor.

"I often accompany pregnant women for their deliveries or arrange vaccination for the children in the area," she adds.



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During her daily rounds, Farida follows up on her visit last month with Amna and her son, Hussain (4), who was suffering from intestinal worms.

Immediately after the devastating floods of 2022, a large number of internally displaced people had sought refuge in her district's public-school buildings. Farida and other LHWs performed their duties there as well. She shared their pain, as Farida herself was impacted by the floods.

"I'm grateful that my own house remained intact despite being inundated with floodwater. Some of my kit supplies were damaged and initially I couldn't go for house calls because our streets were flooded." Fortunately, her town recovered faster than remote areas within the province.

**"We take part in people's joys and sadness. I feel good by serving others, because these children are my children,"**

"We take part in people's joys and sadness. I feel good by serving others, because these children are my children," shares Farida.

As a twenty-year veteran, Farida is well respected in the community. She is able to navigate sensitive topics like family planning and reproductive health with married couples, offering them condoms from her kit or recommendations to visit a gynecologist to get birth control measures prescribed. After serving her community for many years, she feels a deep connection to them. With the additional household income, she has been able to educate her own children and help her son to set up a mobile phone repair shop.

"Our work is crucial because we spread valuable awareness to those who can't easily access good healthcare," she says proudly.

Farida acknowledges that her job would not be possible without the LHW kit sent by the District Health Office, which includes about 25 items like first aid supplies, medicine for diarrhoea and pneumonia, maternal care supplements, an awareness booklet, and basic birth control items.



UNICEF/Pakistan/Husnain Ashfaq

Farida examines the contents of her LHW kit while standing in the Health House, an allotted room in her home.

# Saving young lives with Nutrition services in the flood affected Balochistan

June 27, 2023 | Raheel Khan | Muhammed Usman (9 months), is a playful infant curiously jumping in his mother's lap, trying to grab whatever his hands could reach.

Brought to a UNICEF-supported Outpatient Therapeutic Programme (OTP) center, by his mother Khanzadi, for a routine examination, Usman is all excited as Naheed Israr, a Nutrition Assistant tries to determine his nutrition status by measuring his Mid Upper Arm Circumference (MUAC).

The OTP centre is established by UNICEF as part of the flood response programme in one of the Basic Health Units (BHU) on the outskirts of Dera Murad Jamali, capital of Nasirabad, one of the districts worst hit by the 2022 monsoon floods in Balochistan.

"I am grateful that my boy is healthy and active now, but he was not always like this a few months back," says Khanzadi.

"He was frail and underweight at birth and had to be kept under observation in the hospital for a few days. He was so weak and unwell that he had to be fed through a tube".

"He had digestion problems and would vomit even the breast milk. I was worried for his life".

Later, during one of the visits to the doctor, Usman was referred to the OTP Center for nutrition screening and necessary treatment.

Naheed conducted MUAC test on Usman and diagnosed him as a case of Severely Acute Malnutrition (SAM), a life threatening condition unless treated. She registered him for treatment.

"I provided Usman's mother, Ready to Use Therapeutic Food (RUTF), a life-saving essential

supply item that treats severe wasting in children under 5 years of age," explains Naheed.



© UNICEF/Pakistan/Arsalan Butt

*Usman (9 months), now a health and active child, was treated for Acute Malnutrition through UNICEF-supported Outpatient Therapeutic Programme.*

"I also counselled Khanzadi to regularly breastfeed him and take good care of her own food and personal hygiene."

"Khanzadi is a caring mother who followed my advice to breastfeed him besides giving RUTF regularly. She also followed the schedule of the follow up visits."

"Thankfully, Usman recovered within three months and is now healthy, happy and active," says Naheed with a sense of accomplishment.

Khanzadi and her husband Hasil Khan, live on a farmland with their eleven children, Usman being the youngest.

Khanzadi, in her fifties, had already ten children when she got pregnant with Usman. During this time, she had to manage the domestic chorus, take care of family and work on the farm.

In the massive floods of August 2022, Usman's family was displaced and they had to live in makeshift shelter for weeks on an elevated part of a roadside surrounded by flood water.

The massive floods affected 33 million people including 16 million children, in Pakistan. Sindh and



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*Naheed Israr, Nutrition Assistant, performs Mid-Upper Arm Circumference test to check the nutrition status of Usman (9 months)*

Balochistan provinces were affected the most with widespread displacement and destruction of infrastructure.

"When the floods water came to our area, I was pregnant with Usman," Khanzadi recalls.

"It was a very difficult time. We had to leave our house and move to a safer place. There was not enough for us to eat. And I felt feeble and sick most of the times."

By and large, the communities in Balochistan are poor, living on the margin in rural dwellings with limited access to basic services such as health, education, clean drinking water and other amenities. The devastating floods compounded their problems.

Usman was born on September 6, 2022, in DHQ Dera Murad Jamali about a week after the floods. Khanzadi was shifted to the makeshift shelter on the roadside after the delivery.



©UNICEF/Pakistan/Arsalan Butt

*Health and happy Usman (9 months) enjoys the company of his siblings at home*

"I had never imagined such hard times, staying in the open with water all around. We had sleepless nights in the hot and humid weather with limited food and drinking water. The newborn and other children cramped together crying and screaming," Khanzadi recalls the ordeal with a heavy voice and tears in her eyes.

"If Usman's treatment was not free, we may not have been able to afford it as we did not have the resources."

"Now, he is healthy, crawls and plays around with his siblings. It is a blessing to see him grow. I plan to send him to school and wish he becomes a doctor," she Khanzadi with a smile.

Nearly 38,000 children between the age of 6-59 months were screened for malnutrition whereas around 4,000 were enrolled for treatment of SAM between January to June 2023. During this period over 28,000 Children were provided Multi-Nutrient Powder and almost 50,000 pregnant and lactating women have received Iron Folic Acid for prevention of anaemia in the flood-hit districts of Balochistan.

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# Safe water: essential for all, available to a few

Hope reignites among flood-affected families after months without safe drinking water

March 22, 2023, | A. Sami Malik and Pravaran Mahat| “There was water as far as my eyes could see. But we did not have any to drink,” says Mehreen. The 12-years-old is the youngest in her family.

Six months ago, the raging floods swallowed her entire village, leaving her family and nearly 450 other families homeless, hungry and grappling to survive.

Mehreen lives in Chitool, located in Rajanpur district. The district was the hardest hit by the floods in all of Punjab province.

With her house now underwater, Mehreen, along with her parents and four siblings, lived in makeshift shelters on the embankment of a road. Most roads were washed away by the floods, cutting off the village from receiving any relief for weeks.

“It was hot, humid and scary, especially at night. We had little food and no water to drink. My mother would filter dirty floodwater through a cloth and then heat it on wood fire. We would drink a little after it cooled but knew that it was still not safe.”

Each day, men in the village waded through neck-deep waters to salvage any food left in the village. The only water handpump in the village was destroyed.

“It was a nightmare we relived every day. I hope we never have floods again.”

Communities in Rajanpur were among the most deprived and scattered populations in Pakistan. Most families have historically worked as farm help or as daily-wage labourers.



©UNICEF/UN0805674/Sami Malik

The district was facing an acute safe drinking water shortage even before the floods. Most communities relied on ground water which was unsafe and salty in taste. The water woes were further exacerbated by the floods after handpumps and waterlines were completely destroyed. District authorities had installed water supply systems to supply safe drinking water. Unfortunately, the water supplied was never enough to quench everyone’s thirst.

Unsafe water and poor sanitation are key underlying causes of malnutrition. In Rajanpur and other flood-affected areas, children are now caught in a vicious cycle of diseases and deaths from a lack of safe drinking water, rising malnutrition and improper sanitation. 6 months after the floods, more than 1.5 million boys and girls are severely malnourished, and the numbers will only rise in the absence of safe water and proper sanitation.

After many weeks, flood water finally receded, allowing government authorities, UNICEF, and other relief agencies to come to help Mehreen and her community.

“UNICEF started providing drinking water through water tankers as soon as the roads were cleared,” says Muhammad Tufail Khan, Emergency Specialist at UNICEF Pakistan.

Six months after the floods, the families have since moved back into the village. However, they are still struggling to rebuild their houses and living in tents next to the rubble. Meanwhile, UNICEF has already rebuilt the nearby damaged water supply system and numerous handpumps and is laying new pipes to bring safe drinking water to every household. The damaged handpump and pipelines in Chitool will be repaired soon, but in the meantime Mehreen and others are able to ferry water from the taps in the next village.



©UNICEF/UN0805690/Sami Malik

“The new handpump is only a few paces from my house. I can fetch water easily now,” says Mehreen.

The restoration of safe drinking water supply systems in Rajanpur is a partnership between UNICEF and the Government of Pakistan.

“The old water supply systems were all powered by electricity. The rural communities found it difficult to pay the high electricity bills. Many such systems were therefore abandoned and locals switched to using untreated groundwater,” explains Rauf Sumbal, Community Development Officer at Housing Urban Development & Public Health Engineering Department, Government of Punjab. “The new water supply systems built by

UNICEF use solar energy to power the water pumps. This will lift a huge economic burden off communities who previously struggled to pay their electricity bills.

“Me and my cousins go to the pump together to fill up our buckets. We get as much as we want. It is clean and sweet”, Mehreen says while smiling.

The progress made so far in restoring water supply progress is already benefiting 100,000 people. Once all restoration is completed, over 300,000 people in the flood-affected communities in Rajanpur will have access to safe drinking water.

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# Displaced by the flood

**Children and families uprooted by the floods struggle to survive Pakistan's harsh winters**

March 13, 2023, [Moeed Hussain] 10-year-old Noorullah grew up by the banks of Panjkora river in the tranquil Upper Dir District of Khyber Pakhtunkhwa province. The river has always served as a lifeline for Noorullah's and thousands of families' living alongside the meandering river.

"I used to catch plenty of fish in this river with my grandfather during the summers", reminisces Noorullah. I always felt blessed to be living next to the river."

He cautiously stands on the snow-covered banks and watches the icy cold river flowing. "The sound of the flowing water used to feel soothing. Now I fear it."

Six months back, torrential monsoon rains dumped nearly 10 years equivalent of rains causing the most catastrophic floods in Pakistan's history. The once calm Panjkora river swelled to mammoth proportions and swallowed Noorullah's and surrounding villages.

The river used to give so much. That day, it took everything.

The 4th grader vividly recalls the fateful morning. It was a school day. Noorullah and his family were enjoying their breakfast when the phone rang. A frantic voice on the other end, his father's friend, urged them to immediately evacuate and head for higher grounds. "The river has washed away several houses located upstream. We were next!" says Noorullah. The family hastily grabbed anything they could from the house and left for a relative's house in Dir city.

The raging river swept away Noorullah's house and many of their belongings. The only thing left was the remnants of two rooms. "The rest of the house vanished as if it never existed. The family - six

siblings, parents and grandparents – lived with Noorullah's relative in the city for the next three months before finally returning to what was left of their house.



©UNICEF/Pakistan/Asim Khan

*Noorullah stands in front of a damaged room of his house in Sulool Daramdala village, Upper Dir District, Khyber Pakhtunkhwa.*

"It was hurtful to come back to nothing. My family would often help others in my village. Now we have nothing left and needed help. A few relatives chipped in and helped us to build three makeshift rooms to live in."

The family of 10 had barely squeezed into their tiny abode when the frigid sub-zero winters engulfed the village. Winters in Upper Dir are notably harsher than other parts of Pakistan with heavy snowfalls and temperatures dropping as low as -10 degrees Celsius.

The derelict shelters offered little protection for Noorullah, his siblings, and other children living in Upper Dir. The threat to children's well-being and survival increased with every drop in the mercury. To make matters worse, most lost all their warm clothes and blankets in the floods.

Acting urgently, UNICEF dispatched warm clothes, shoes, gloves, hats, blankets and quilts to flood-affected children and families in Khyber Pakhtunkhwa Province. Working in partnership with the government, UNICEF distributed over 48,000 winter kits, directly benefiting over 2,000 families in eight critical flood-affected districts. Communities in Rajanpur were among the most deprived and scattered populations in Pakistan. Most families have historically worked as farm help or as daily-wage laborers.



©UNICEF/Pakistan/Asim Khan

*Noorullah's grandfather (left) and father (centre) show the damage caused by the floods to their house and the section they managed to rebuild.*

“Winter in Khyber Pakhtunkhwa is extremely cold. We knew we needed to respond immediately to make sure all children and families affected by the flood are able to survive the winter months,” says Zaheer Ahmed Durrani, UNICEF’s Planning, Monitoring and Evaluation Officer and Emergency Focal Person in Khyber Pakhtunkhwa. “With the help of the provincial government, we have reached the most vulnerable children and families in remote areas. It will take families several more months, if not years to rebuild what they lost in the floods but with our assistance, they know that they are not alone in their struggle,” he adds.



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