

Reporting Period: 1 January - 30 June 2022

### **Highlights**

- Pakistan witnessed the fifth wave of COVID-19 in January which lasted till March 2022. Since June there has been a surge in COVID-19 cases hence Pakistan entered a sixth wave of COVID-19. At the beginning of the year, the number of cases were 594 and at the end of June there were 694 confirmed cases. The peak of the fifth wave saw 8,183 cases diagnosed in one day.
- Through UNICEF supported health sites 64,751 children (34,697 girls) received treatment for Severe Acute Malnutrition.
- 2,554,269 people benefitted from the continuity of primary healthcare services supported by UNICEF.
- UNICEF supported 16,542 children and parents/caregivers with access to mental health and psychosocial support.
- UNICEF faces a funding gap of US\$ 67.3 million (97 per cent) to provide critical humanitarian support.

**UNICEF's Response and Funding Status** 

# **Pakistan**

**Humanitarian Situation** Report No. 35



#### Situation in Numbers

#### 3.8 million

children in need of humanitarian assistance



#### 7.4 million

people in need



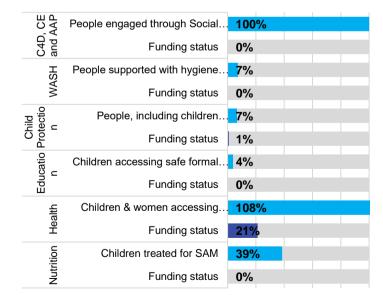
**1,536,479** confirmed COVID-19 cases in Pakistan (on 30<sup>th</sup> June 2022)



#### 1.5 million

Children and women require nutrition services

### **UNICEF Appeal** US\$ 69.5 million



0% 20% 40% 60% 80% 100%

Funding Status (in US\$) Carry-forward, -Humanitarian \$2m unds, \$0.35m Other \$m gap, \$67m

Over achievement in health is reported because UNICEF worked on system strengthening and leveraging partnership with the government health departments.

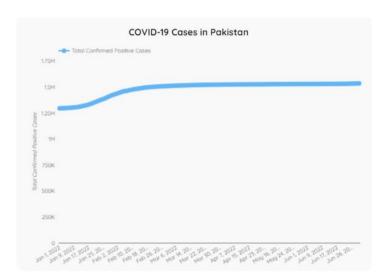
<sup>&</sup>lt;sup>1</sup> C4D and WASH programmes did not receive any additional funding during the reporting period. However, the programmes used other available resources to achieve the reported progress.

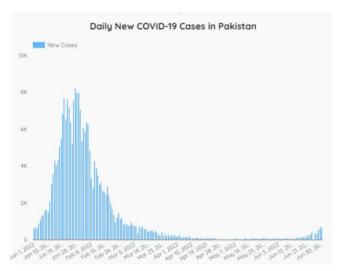
### **Funding Overview and Partnerships**

In 2022, UNICEF requires US\$ 69.5 million to deliver an integrated package of nutrition, health, education, WASH, and child protection services to address the needs of nearly 7.4 million people, in need, including 3.8 million children. So far, in 2022, available funds amount to only US\$ 2.15 million, resulting in a funding gap of 97 per cent. Without adequate funding, UNICEF and partners will be unable to continue supporting integrated humanitarian programmes focusing on a COVID-19 response, a nationwide chronic nutrition emergency and emergency multi-hazard emergency preparedness and response interventions across the country. Funds were received from the Government of Japan and UNICEF's Global Thematic Humanitarian funds. However, UNICEF Pakistan has a critical funding gap of US\$ 67.3 million (97 per cent) for country wide response.

#### Situation Overview and Humanitarian Needs

**COVID-19 Situation:** Since the beginning of January till March/April, Pakistan went through the fifth wave of COVID-19 cases, which gradually declined (positvity reached less than 1 per cent; 208 cases on 1st April). May and most part of June continued with lower numbers reported (daily positive cases remained below 100). From mid-June the number of cases increased with positivity going up to 3.93 per cent by the end of the month (694 cases on 30th June). This is primarily due to non-adherance to COVID-19 Standard Operating Procedures (SOPs). The country is now going through the sixth wave of COVID-19 and the government has reinforced implementation of COVID-19 SOPs. 87 per cent of the target population has received the first dose of COVID-19 vaccine and 80 per cent is fully vaccinated. Booster doses are also being administered. The graphs below show the daily cases and trend of COVID-19 cases reported in the first half of the year.





**Nutrition Emergency:** Pakistan was already going through drought situation in Sindh. UNICEF is providing nutrition services through integrated services to the affected of acute watery diarrhea in Balochistan and Khyber Pakhtunkhwa.

**Acute Watery Diarrhea Situation:** Pakistan is reporting an increased number of cases of acute watery diarrhoea from all the four provinces. UNICEF is closely monitoring the situation and has prepositioned Health, WASH and Nutrition supplies in the provinces. Water testing is ongoing in hotspot districts in all four provinces.

## Summary Analysis of Programme Response

#### **Nutrition**

UNICEF, in close collaboration with the Ministry of National Health Services Regulations and Coordination (MoNHSR&C) and respective regional health bureaus, supported the treatment of Severe Acute Malnourishment (SAM) children, with a particular focus on regions hosting a large number of Afghan Refugee population and current influx of Afghan refugees in the bordering districts. COVID-19 nutrition sector coordination continued with 19 total Nutrition Working Group (NWG) meetings held during the reporting period, eight at National level and 11 at sub-national level (Sindh 3; Khyber Pakhtunkhwa (KP) 3; Punjab 1; and 4 in Balochistan). In terms of preparedness Nutrition maintains minimum of stock for 150,00 People in need at UNICEF warehouse however can leverage on Government partners stocks if available. Furthermore, Pakistan being well above emergency threshold of children under 5 with acute

malnutrition coupled with likelihood of floods, drought, internal displacement and poor economic situation needs at least preparedness level of 300,000 people in need.

In the first six months of the year, a total of 2,920 UNICEF-supported Outpatient Therapeutic Program (OTP) sites provided nutrition services in all the four Provinces, (Balochistan: 121; KP: 125; Punjab: 1,755 and Sindh: 919). Approximately 1,098,476 children aged 6-59 months were screened for malnutrition (548,598 boys and 549,878 girls) Similarly, a total of 64,751 children suffering from severe acute malnutrition (SAM) (30,054 boys and 34,697 girls) were admitted for SAM treatment while 133,346 children aged 6-59 months (65,407 boys 67,939 girls) received multimicronutrient supplementation (MMS). With UNICEF's support, counselling on Infant and Young Child Feeding (IYCF) practices in the COVID-19 context was conducted during the reporting period and reached 29,621 pregnant and lactating women (Balochistan: 9,719 and KP: 19,902 through Lady Health Workers (LHWs) and other community-based networks. Around 91% of the children were reached through a Vitamin A Supplementation (VAS) campaign held along with the Polio National Immunization campaign which was held in May 2022.

It is also important to note that almost all districts providing services for refugees were also high burden COVID districts as well where services were provided to both refuges and host communities. Furthermore, funds in this regard are from multiple sources including RR from integrated funds, leveraging on Government resources etc.

#### Health

As part of the response to the COVID-19 pandemic, UNICEF supported the continuation of essential health services, capacity building of frontline workers, provision of basic Personal Protective Equipment (PPEs) and the provision of essential supplies. In addition, UNICEF supported infection prevention control (IPC) and paediatric case management of COVID-19. UNICEF also facilitated, the introduction and scaling up of COVID-19 vaccination and strengthened the cold chain capacity in the country through the COVAX facility. From January to June 2022, UNICEF supported provincial and regional health departments to ensure continuity of essential primary healthcare services, including immunization, ante-natal care, post-natal care, service delivery, childcare, and curative care for adults, reaching 2,554,269 (1,434,097 females and 1,120,172 males) people in 136 targeted health facilities of 29 High Burden Districts (HBD). In total, 114,153 children (56,185 females and 57,968 males) were vaccinated against measles in the 136 UNICEF supported health facilities during the year.

UNICEF-supported IPC training reached 245 frontline health workers (102 women and 143 men) and Clinical Management of Children with COVID-19 training was provided to a total of five paediatricians (two women and three men). In response to increasing Acute Watery Diarrhoea (AWD) cases in Pakistan, UNICEF provided the following support; capacity building for Lady Health Supervisors on the Integrated Management of Childhood Illness (IMNCI) Guided Management of diarrhoea; distribution of Doxycycline, ORS and Zinc to target Health Facilities (HF) in Sindh (6) and Balochistan (10); initiation of procurement of supplies for Khyber Pakhtunkhwa and Punjab provinces; establishment of 230 oral rehydration therapy (ORT) corners in health facilities (Sindh 6; Balochistan 74; Punjab 150); provision of masks and sanitizers in Peshawar; and the initiation of procurement of supplies for Diarrhoea Treatment Units (DTUs). A total of 17 Interagency Emergency Health Kits (IEHK) were provided for AWD response in Swat and Malakand, with 15 kits to be prepositioned in hotspot districts.

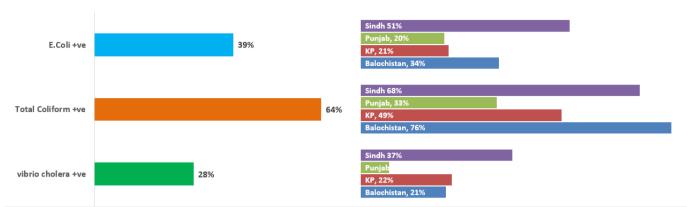
#### **WASH**

During the reporting period, and in response to COVID-19, UNICEF convened a joint sector review meeting at the federal level with WASH partners, while the provinces held regular coordination meetings with WASH partners in collaboration with the provincial departments. Since the outbreak of AWD cases in Balochistan and Sindh, UNICEF has been coordinating closely with the WHO and government by conducting weekly meetings to ensure an effective and efficient response.

Throughout the reporting period there were ongoing regular hygiene promotion initiatives combining IPC for AWD together with COVID-19 prevention messages. The WASH sector participated in the regional training on Health Care Facility (HCF) assessments using WASHFIT – the training is planned to be cascaded to government partners in the future. UNICEF reached to over 85,000 people with hygiene promotion messages as part of the AWD response. This is

coupled with water quality testing, and chlorination to reduce the risk of infection as highlighted below:

# **Water Quality Testing and Analysis**



Summary of collected Samples and Results									
Province	Samples	Collected	Water quality results						
	Cumulative	This Week	vibrio cholera + <u>ve</u>	Total Coliform +ve	E.Coli +ve				
Balochistan	569	167	118	430	191				
KP	360	44	80	176	77				
Punjab	187	50	13	62	38				
Sindh	1107	194	408	751	562				
Total	2223	455	619	1419	868				

Chlorinating an average of 82 million gallons of water every day at 10 pumping stations in Karachi serving around 7.45 millions people every day. More than 2,200 samples of water tested, 28 per cent reported to be vibrio cholera positive. However, result shows decreasing trend of positivity rate. This was possible because of awareness messages on household water treatment and handwashing with soap at critical times through more than 5,000 BCC hygiene sessions.

WASH strategically ensure any WASH related intervention in HCF should be sensitive to COVID –19 response. As such, during the reporting period UNICEF rehabilitated and installed WASH facilities, which included ultraviolet water filters, toilets, and handwashing stations in 10 health facilities (HFs) in Punjab province. During 2022, more than 22,418 people gained access to safe drinking water and sanitation facilities in these HFs. Over 180,666 people during the reporting period have been supported with hygiene promotion services including COVID-19 prevention and control information. These activities are done through the UNICEF annual program funded from other resources ensuring additional WASH IPC intervention.

#### **Education**

To provide a better and safe learning environment for children, UNICEF along with its partners supported safe school operations and functioning in 819 formal and non-formal schools, benefiting 27,455 children (17,481 girls) during the first half of 2022.

A total of 822 teachers and education officials (484 women) were trained on safe schools reopening. In addition, 851 teachers and education officials (415 women) were also trained on Mental Health and Psychosocial Support (MHPSS). To encourage learning activities of students, 10,832 parents were reached with messages on enrolment/ attendance of children through SMS and different social media platforms. In Sindh, messages related to COVID-19 vaccination and compliance of COVID-19 SOPs sent to 10,231 education managers through WhatsApp groups. Education Sector Working Group (ESWG), co-lead by UNICEF, continued to provide support to ensure continuity of learning and adherence to approved standard operating procedures (SOPs) for safe re-opening of schools. Coordination and governance structure of Education Cannot Wait (ECW) led Multi-Year Resilience Programme (MYRP) was established by ESWG. Steering Committee (SC) was formed for MYRP and its first meeting was held on 17th March 2022. Under its capacity building plan, ESWG conducted three days training on Education in Emergencies for members in June 2022 attended by 40 members, including 12 women.

Low vaccination remains a broad issue in Balochistan where only 64 per cent of education staff and 96 per cent of eligible students are vaccinated. To this end, UNICEF is conducting focused sessions on vaccine awareness in the professional development programme for teachers in Balochistan to identify issues restricting vaccination rates in schools. The challenges identified through these FGDs have been shared with stakeholders to help enhance vaccination coverage. Funding constrains has been a huge impediment for the implementation of interventions.

#### **Child Protection**

In 2022, UNICEF and its partners have so far trained a total of 1,734 social workforce professionals (894 women and 840 men) in psychosocial support and stigma prevention in all the provinces. A total of 16,542 children, caregivers and other community members (2,940 girls, 2,594 boys, 5,780 women and 5,228 men) received psychosocial support from trained social workforce professionals in Punjab, KP, Sindh and Baluchistan. A total of 129,163 people were reached through messages on stigma and violence against children since the beginning of the year. A total of 655 children received child protection services through UNICEF support (149 girls and 506 boys). The low coverage is attributed to the reduction in the incidences of COVID-19, which resulted in less demand of MHPSS services from the population.

#### Protection from Sexual Exploitation and Abuse (PSEA)

In 2022, UNICEF stepped up the implementation of measures to strengthen systems for prevention, reporting, response and accountability to survivors of sexual exploitation and abuse. UNICEF continued to implement the PSEA assessment procedure to identify and mitigate SEA risks derived from partnerships. UNICEF supported 60 partners to complete PSEA assessments and provided IPs with ongoing technical support to address gaps in their PSEA systems. Of the 60 partners, 59 now have functional PSEA systems. Currently 22 are Low Risk, 37 Moderate Risk while 1 is High Risk. The partnership with the High-Risk IP was suspended until it is proven that the IP has fully addressed all PSEA gaps. UNICEF also scaled up capacity building of partners specifically targeting the Moderate Risk and the one rated as High-Risk to ensure that they improve their PSEA systems to meet the minimum operating standards for prevention, reporting, community engagement, and accountability to survivors. A total of 55 partners designated and maintained 66 PSEA focal persons who were oriented on their role and how to receive and process allegations. The partners also deployed multiple channels such as hotlines, complaints boxes, special email address, and sharing contacts of trained PSEA Focal Points with communities to ensure safe and accessible reporting of allegations. During the period 809,900 people (300,500 women, 319,600 men, 98,910 boys, and 90,890 girls) had access to safe reporting for PSEA. UNICEF also trained 123 PSEA investigators (67 males and 56 females) from 42 partners. UNICEF also provided technical support to the inter-agency PSEA Network and collaborated with UNHCR to train 20 PSEA Focal Points from UN agencies and supported the UN PSEA Task Force to develop SOPs for the joint Community Based Complaints Mechanisms (CBCM) to ensure safe and accessible reporting of SEA allegations.

#### Social and Behaviour Change Communication, Community Engagement & Accountability

In past months, Risk Communication and Community Engagement emergency interventions intentionally merged with long-term Social and Behaviour Change (SBC) programming. Interventions related to COVID-19 were streamlined in all program sectors, including promotion of COVID-19 preventive activities in schools, communities as well as integration in all health campaigns. Critical messages remained focused on vaccination uptake, with a special focus on promoting booster shots, increased women participation, adolescent engagement, and solidarity among the population to unite and avoid another COVID-19 wave. Over 65 million people were reached through social media platforms. Four TV/Radio campaigns were completed in five provinces, and a continuation of a partnership with faith leaders was maintained throughout this transition, including Polio social mobilization work with over 70,000 religious' leaders. All information platforms can be activated to respond in high-burden districts, as required by the government. A COVID-19 lessons-learned evaluation and assessment will be conducted, covering the response from the beginning of the pandemic.

#### **Supply and Procurement Services**

Of the 124,486,420 doses of COVID-19 Vaccines allocated to Pakistan by the COVAX facility, 111,949,260 doses have been delivered to date. The Government of Pakistan has requested the delivery of 2 million doses of the Pfizer vaccine from the COVAX allocation to be delivered in August and the balance of 3,002,092 doses to be delivered in September 2022. The COVAX Facility has also allocated 64 million doses of Paediatric Pfizer vaccines to the Government of Pakistan. Sixteen million (16 million) doses will be delivered in August for paediatric vaccination campaigns in September for Sindh and Punjab provinces. UNICEF is working with Supply Division for the delivery of 16 million 0.2ml syringes by the end of August. The Government of Pakistan was also allocated 2,546,5788 doses of Oral Cholera Vaccines by the International Coordination Group. Shipments for Baluchistan (754,784 doses) and Sindh (590,878 doses) were received on the 28th and 30th of June and have been issued to the provinces for the implementation of Cholera Vaccination campaigns. The allocation for Lahore (1,200,916 doses) was received on the 20th of July at Federal

level. To date UNICEF has provided Procurement Services worth US\$ 125million, mostly driven by vaccine procurement. Procurement Services have also been utilized to procure RUTF for Sindh province, Hygiene material (masks, disinfectants and sanitizers) for 8,689 schools through the World Bank RREP project as well as hygiene material for the National TB Programme through the Global Fund.

### Humanitarian Leadership, Coordination and Strategy

UNICEF is co-leading three clusters and one Area of Responsibility (AoR). UNICEF co-leads both the Child Protection AoR and the Education Cluster with Save the Children, the Nutrition Cluster with Concern, Action Against Hunger (ACF) and the World Food Program (WFP) and the WASH Cluster with the Norwegian Refugee Council (NRC). Memorandums of Understanding have been signed between UNICEF and each co-Lead Agency at Country level to guide effective and efficient Coordination and ensure clear roles and responsibilities of each party. UNICEF co-led clusters and AoR are all part of the Inter-Cluster Working Group (ICWG) led by OCHA at the national and sub-national levels. UNICEF participates in the in-country interagency PSEA Task Force.

#### **Human Interest Stories and External Media**

Pakistan was the first country to receive UNICEF Executive Director Catherine Russell, three weeks after she assumed her functions. UNICEF documented her three-day visit to Islamabad in February to support advocacy for children's rights and access to essential services, and adolescent participation, generating wide media coverage. In the first half of 2022, UNICEF continued to support MoNHSR&C to reduce COVID-19 virus transmission through adherence to SoPs for COVID-19 with a focus on wearing a mask, and through COVID-19 vaccination with a focus on women to reduce the gender gap. A series of videos, some involving celebrities and religious leaders, were published and disseminated, along social media content. During the reporting period, UNICEF also supported access to essential health services, including immunization and neonatal survival services, as well as access to adequate nutrition, WASH services, birth registration and quality education.

#### **LINKS**

#### COVID-19

Videos:

<u>Vaccine advocacy for pregnant and lactating women, COVID-19 vaccine and booster advocacy, Testimonial of COVID-19 Victim's son, COVID-19 booster advocacy</u>

Story: How an adolescent girl helped her community fight COVID-19

Urdu Posts: Link 1, Link 2, Link 3

Regional Posts: Balochi, Punjabi, Sindhi, Pashto

#### **NUTRITION**

**Story: Tackling malnutrition during COVID-19** 

Posts: Link 1, Link 2, Link 3

#### <u>HEALTH</u>

National Oxygen Therapy Guidelines for Children training to help children survive pneumonia: Link 1, Link 2

National dialogue conference on "Putting Children First: Identifying issues and defining solutions to address Children's, especially girls' deprivation in Pakistan": Link 1, Link 2

#### **WASH**

Santex & UNICEF Launch #NoChuttiPlus Campaign: <u>Press Release 1</u>, <u>Press Release 2</u> Virtual reality Video

#### **CHILD PROTECTION**

Story on Birth Registration - An Efficient and Streamlined DBR System Producing Desired Results in Pakistan

#### **EDUCATION**

Story - Non-formal education centres help out-of-school girls learn in Pakistan's Punjab

**Story** - New digital application helps monitor student attendance in Sindh

Press Release - Prioritizing girls in COVID-19 recovery

Story on humanitarian and development assistance - Supplying hope for children in Pakistan

## Next SitRep: 1st October 2022

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#### Annex A

### Summary of Programme Results

	UNICEF and Operational partners				Task Force /Sector			
Sector	Target*	Gender	Results	Change since last report ▲ ▼	Target	Results	Change since last report ▲ ▼	
Nutrition								
	167,594	Boys	30,054	13,294▲	465,552	79,753	49,620▲	
Children aged 6 to 59 months with severe acute malnutrition admitted for treatment		Girls	34,697	17,871 ▲		66,731	36,535▲	
		Total	64,751	31,165▲		146,484	86,155▲	
Primary caregivers of children aged 0 to 23 months receiving infant and young child feeding counselling	854,829	Total	382,818	224,275▲	1,667,542	668,153	607,824▲	
		Boys	65,407	37,042▲	1,250,657	83,929	38,282▲	
Children aged 6 to 59 months receiving multiple micronutrient powders	552,995	Girls	67,939	37,814▲		103,822	57,093▲	
·		Total	133,346	74,856 ▲		187,751	95,375▲	
Health								
	2,362,662	Males	506,009	82,918▲				
Number of people benefitting from continuity of		Females	644,957	147,418▲				
primary healthcare services at UNICEF supported health facilities **		Boys	614,163	439,573▲				
		Girls	789,140	561,975▲				
		Total	2,554,269	1,231,884 ▲				
		Boys	57,968	9,105▲				
Number of children < 1 vaccinated against Measles	82,693	Girls	56,185	9,486▲				
		Total	114,153	18,592 ▲				
Health care facility staff and community health workers trained on infection prevention and control	10,000	Males	143	0				

		Females	102	0			
		1 ciliales	102	0			
		Total	245	0			
Number of Pediatricians and Family		Males	3	0			
Physicians Trained on Clinical Management of Children with COVID-19	4,000	Females	2	0			
Crilidien with COVID-19		Total	5	0			
Water Sanitation and Hygiene							
December of the board constitution to the constitution		Males	88,526	0			
People reached with hand-washing behaviour- change programmes	2,480,000	Female	92,140	0			
		Total	180,666	0			
Oblidate in extract contract of with IDO		Boys	15,641	0			
Children in schools supported with IPC measures and improved water and sanitation	237,599	Girls	16,279	0			
		Total	31,920	0			
Public handwashing stations installed	900	Total	21	0			
Healthcare facilities provided with essential WASH services	350	Total	10	0			
Child Protection							
		Males	5,228	910 ▲			
	250,000	Female	5,780	1,287 ▲			
Children and parents/caregivers accessing mental health and psychosocial support		Boys	2,594	271 ▲			
mental nealth and psychosocial support		Girls	2,940	332▲			
		Total	16,542	2,800 ▲			
People reached with prevention messages on stigma and violence against children, including gender-based violence	10,000,000	Total	129,163	7,273▲			
Children and adolescents who received child		Boys	406	232▲			
protection services, including gender-based	2,500	Girls	149	100▲			
violence services		Total	655	332▲			
	8,000	Males	840	0			
Social workforce trained on prevention and response to child protection concerns		Female	894	0			
- Copposed to Simula procession consolino		Total	1,734	0			
		Males	319,600	194,600 ▲			
People who have access to a safe and		Female	300,500	160,100 ▲			
accessible channel to report sexual exploitation	2,000,000	Boys	98,910	62,210▲			
and abuse by aid workers (*PSEA)		Girls	90,890	56,790▲			
		Total	809,900	473,700 ▲			
Education							
		Boys	9,974	3,919▲		35,298	3,724▲
children accessing formal or non-formal education, including early learning	691,079	Girls	17,481	4,459▲	1,382,158	58,383	6,385▲
, , , , ,		Total	27,455	8,378 ▲		93,681	12,345▲
Schools (formal and non-formal) implementing safe school protocols (infection prevention and control).	6,911	Total	819	154▲	13,882	1568	154▲
Number of teachers / educations officials trained		Males	436	275▲		596	255▲
on MHPSS (Mental Health and Psychosocial	13,822	Females	415	284▲	27,644	1152	304▲
Support)		Total	851	604▲		1748	744▲

		Males	338	50▲		824	51 ▲		
Number of teachers / educations officials trained on safe reporting/ operation of schools	13,822	Females	484	33▲	27,644	1431	37▲		
Chi cano reperanty operanter of concern		Total	822	128 ▲		2255	133▲		
Number of parents reached with messages encouraging learning activities (through SMS and different social media).	1,382,200	Total	10,832	3,671▲	2,764,400	11605	3,671▲		
C4D, Community Engagement and Accountability to Affected People									
People engaged through Social Media	550,000	Total	9,124,464	8,749,108▲					
People reached through messaging on prevention and access to services	4,500,000*	Total	65,000,000	42,500,000 ▲					
People engaged in risk communication and community engagement actions	1,500,000	Total	484,690	70,000 ▲					
People with access to established accountability mechanisms	1,500,000	Total	813,525	808,129▲					

<sup>\*</sup>there was a calculation error while developing the HAC it will be revised once its open for revision

#### Annex B

# **Funding Status**

			Funding gap			
Sector	Requirement s	Humanitarian resources received in 2022	Other Resources used in 2022	2021 carry forwarded funds	\$	%
Nutrition	30,568,036	-	-	57,450	30,510,586	100
Health	9,421,570	350,000.00	-	1,655,989	7,415,581	79
Water, sanitation, and hygiene	12,120,451	-	30,000.00	5,143	12,085,308	100
Child protection, GBViE and PSEA	6,742,413	-	-	57,657	6,684,756	99
Education	5,995,860	-	-	-	5,995,860	100
Emergency preparedness	3,000,000	-	-	651	2,999,350	100
Cross Sectoral (HCT, C4D, RCCE and AAP)	1,648,080	-	-	-	1,648,080	100
Total	\$69,496,410	\$350,000	\$ 30,000	\$1,776,890	\$67,339,520	97

<sup>\*\*</sup> Over achievement in Health is attributed to strengthened health systems and partnerships forged with government health departments