

## Pakistan

### Update on the context and situation of children

Numerous challenges and milestones were confronted in 2022 including natural disasters, economic downturn and political transition as the UN and UNICEF developed a new five-year plan of cooperation for 2023 to 2027 with the government of Pakistan. Pakistan's population is nearly 208 million (Population Census 2017), growing annually at 2.4 per cent. About 45 per cent of Pakistanis are under the age of 18.

Pakistan's Gross Domestic Product (GDP) grew by 6.03 per cent in 2021 and was forecasted by the World Bank to grow at a rate of 2 per cent in 2022. Economic instability and inflation, due to the remnants of the COVID-19 pandemic and the catastrophic floods affecting Pakistan in 2022, pushed an estimated 9 million additional people into poverty. Pakistan ranked 161 of 189 countries on the Human Development Index 2021, and 145 out of 146 on the Global Gender Gap Index 2022.

In 2022, Pakistan experienced its worst disaster in decades in the form of extreme floods which left a third of the country submerged, about 15,000 dead or injured and 8 million people displaced. The rise in global fuel and commodity prices has severely impacted Pakistan's economy. The combined effects of the global food and fuel crises adversely affected the economy resulting in unsustainable current account and fiscal deficits and unprecedented high inflation.

The 2022 floods emphasize Pakistan's climate change vulnerability. During the 2022 monsoon season, rainfall was nearly 2.9 times the national 30-year average, causing widespread flooding and landslides with severe repercussions for human lives, property, and infrastructure. With disrupted livelihoods and incomes, more households could not access health, nutrition, and education services, leading to unsatisfactory child development and unhealthier pregnancies, making it impossible to reduce global inequality by 2030, as per the Sustainable Development Goals (SDGs).

In 2022, social protection for the poor and vulnerable became an urgent priority. The Benazir Income Support Programme (BISP) distributed US\$ 261 million among 2.8 million flood-affected families, providing about US\$ 93 per family. However, Pakistan has deep-seated inequalities and significant gaps in social protection service delivery due to intervention fragmentation, inadequate coverage, leakage, administrative inefficiencies, and insufficient fiscal space.

The Pakistan Demographic Survey (PDS 2020) noted declines in infant and neonatal mortality rates at 56 and 42 per 1000 live births respectively, though tripling annual reduction rates is necessary to reach SDG targets. Maternal Mortality Rates are 186 per 100,000 live births (PMMS 2019). Progress in achieving Universal Health Coverage (UHC) is slow due to inadequate health systems and domestic funding (less than 1 per cent of GDP). The UHC coverage index is just 49.9 (2020 UHC).

The flood emergency damaged 2,000 Health Facilities (13 per cent of HFs) and 10,000 Lady Health Worker (LHW) houses, caused disease outbreaks including malaria, and increased child morbidity.

Endemic transmission of polio was interrupted for the first time country-wide except in Southern Khyber-Pakhtunkhwa (SKP), with only one genetic cluster and single lineage identified and linked to

the SKP polio outbreak. Fifty-seven per cent of districts have had no Wild Poliovirus type 1 (WPV1) cases for the last 5 years, and 13 per cent saw no cases for the last 3-4 years. In 2022, 20 WPV1 cases were reported, versus one case in 2021. WPV1-positive environmental samples decreased from 8 to 4 per cent between 2021 and 2022.

Just 47.5 per cent of infants aged 0-5 months are exclusively breastfed. Simultaneously, 40.2 and 17.7 per cent of children under 5 years remain stunted and wasted respectively. Wasting rates have consistently increased until 2018 (Pakistan National Nutrition Survey 2018) remaining above the World Health Assembly child wasting reduction targets.

Only 3.6 per cent of children aged 6–23 months consume a minimum acceptable diet. Nutrition programmes in Pakistan are underfunded as nutrition interventions are not mainstreamed into Primary Healthcare - less than 10 per cent of children with severe wasting accessed treatment in 2022.

Early Childhood Development (ECD) and Nurturing Care indicators in Pakistan are low, with 54 per cent of young children at risk of poor development, 20 per cent early initiation of breastfeeding, 46 per cent anemia, 42 per cent birth registration, 9 per cent child poverty, 32 per cent non-access to toilet facilities, 44 per cent out of school children, and 30 per cent early stimulation. (Country Profiles for ECD, Countdown to 2030).

Pakistan made progress towards improving children, women, and vulnerable people's access to and use of basic sanitation services, with access increasing from 30 to 68 per cent of the population and open defecation practice falling from 38 to 7 per cent between 2000 and 2020 (JMP, 2020). However, 15 million people still practice open defecation.

Rural-urban coverage and income group disparities remain. Only 16 versus 89 per cent of the population in the poorest compared to the wealthiest quintile has access to basic sanitation services. The 2022 monsoon floods destroyed over US\$575 million in WASH infrastructure. Therefore, the challenge remains not just scaling up coverage and sustaining interventions, but also rebuilding damaged WASH facilities, ensuring climate resilience and inclusiveness, leaving no one behind.

Despite significant improvements in overall school participation, 22.8 million children aged 5–16 years are out of school (44 per cent). More girls are out of school than boys at every level. Only 70 per cent of children entering primary school are estimated to reach Grade 5, with considerable provincial differences. The 2022 floods damaged or destroyed 48,259 schools; more than 12 million children's education was interrupted. Out-of-school adolescents have limited employment and entrepreneurial opportunities (bonded labor, high youth unemployment, low social and economic mobility) and weak democratic engagement.

Birth registration rates for children are estimated to be 30 per cent for children under 1 year and for children between 1 and 4 years this is 14 per cent.[1] Local Government Departments allocated US\$ 1.7 million (Fiscal year/FY 2022-2023) for the registration of vital events. Child labor rates in Punjab are 13.4 and 16.9 per cent for children aged 5-14 and 15-17 respectively (Punjab Child Labor Survey/CLS 2022).

[1]Estimates DoH Punjab/DHIS2

### **Health**

UNICEF's technical assistance at policy level included the National Newborn Survival Strategy (NNS); Lady Health Worker (LHW) Strategic Plan 2023-2027; Revised COVID-19 Guidelines for Children 2022; National Guidelines on Management of Oxygen therapy in children. Through 63 newborn care units, 41 Kangaroo Mother Care (KMC) units, and capacity building of 16,175 Lady Health Workers, 3.3 million newborns (100 percent of target) were reached with facility-based and community-based newborn care in 49 districts.

The Larkana HIV outbreak response focused on Prevention of Parent to Child Transmission, Pediatric HIV care, and community-based HIV services, and contributed to reaching 98 per cent of registered patients (1,677 out of 1,699) with Pediatric Antiretroviral Therapy.

UNICEF supported the establishment of 24/7 birth dose sites in urban labor rooms (48 sites) to provide integrated outreach services to urban slums. Integrated referral slips (EPI, Pneumonia, Diarrhea, ANC, Nutrition) contributed to the detection and referral of zero dose and sick children and mothers for TT vaccination and other ANC services during polio campaigns and Frontline Workers (FLWs) community activities. Consequently, 156,236 newborn (96 percent of target) were reached with birth doses through 48 HFs in 13 Districts.

Three thousand newly recruited vaccinators were trained (100 per cent of target). Assistance in COVID-19 vaccine procurement and cold chain system strengthening supported vaccination of 128 million adults (89 per cent of target) and 7.5 million (94 per cent of target) children (6-11 years).

For the flood response, UNICEF procured and delivered lifesaving health supplies (US\$ 5 million). Outreach camp services by 115 mobile health teams benefitted 1,286,384 people including ANC for 32,859 pregnant women (100 per cent of HAC Target). 1,015,907 children including 530,280 girls received immunization against measles (100 per cent of HAC Target). UNICEF is transitioning to recovery programming, to provide health services, and rehabilitation of 105 Health Facilities and 4 warehouses in flood affected Districts.

### **Polio Eradication**

UNICEF supported Polio vaccination of almost 100 per cent of Children 0-59 months (Over 43.5 million children) in two National Immunization Days (NIDs); refusal of polio vaccination of children under 5 averaged below 1 per cent. UNICEF procured and supplied 239.1 million Oral Polio Vaccine (OPV) doses, ensuring all planned campaigns were implemented despite challenges. UNICEF supported polio campaigns through community-based vaccination (CBV), community mobilization and integrated service delivery for reaching and accessing communities most at risk of polio.

### **Nutrition**

UNICEF support strengthened systems, policies, multi-sectoral coordination, and emergency response for nutrition in 2022. Its emergency preparedness and established development programme combined ensured UNICEF's unique position in humanitarian leadership and coordination, and transition to recovery. Through technical and financial contributions to the Ministry of National Health Services, Regulation and Coordination (MoNHSR&C), UNICEF supported the inclusion of

nutrition in key national strategic documents.

Public financing for nutrition increased, including fund allocation by the Government of Sindh Province for the Accelerated Action Plan for stunting reduction programme (AAP), and Procurement of Ready-to-Use Therapeutic Food (RUTF) by Sindh and Punjab Provinces.

UNICEF enabled treatment of 323,032 (146,176 boys and 176,856 girls) severely wasted children with RUTF in 3,336 Outpatient Therapeutic programme sites (100 per cent of target). A total of 822,231 children (409,340 boys and 412,891 girls) and 1,789,507 mothers received multiple micronutrient supplementations (MMS). Over 522,000 adolescent girls (over 100 per cent of target) received iron folic acid. UNICEF support enabled the counselling of 2.1 million mothers on Infant and Young Child Feeding (IYCF), training of 27,763 health workers (100 per cent of target), and the establishment of 20 breastfeeding corners in public and private workplaces. UNICEF established 10,081 peer support groups (3,568 fathers and 6,513 mothers) for improved gender responsive nutrition practices in communities.

### ***ECD***

UNICEF continued to support the Government to prioritize creating a more conducive policy environment for ECD in humanitarian settings, the transition to recovery and development settings. UNICEF technical support resulted in inclusion of ECD in key policies, as well as revision and finalization of the ECD Index, ECD Standard and ECD Policy Framework.

Coordination mechanisms and Technical Working Groups providing a platform for multisectoral coordination on ECD were established in each province to engage across education, child protection, health, and nutrition sectors.

UNICEF supported capacity strengthening including a 'Regional ECD Policy Makers' Course for 12 Manager level Government, UNICEF and WHO staff. Training was provided to 13,467 District Managers, Teachers, LHWs, Nutrition Assistants and Religious Leaders on key Family Care Practices (KFCPs) that benefited 202,121 parents and caregivers with KFCPs in 24 districts (14 per cent geographical coverage).

ECD in emergencies was mainstreamed by integrating KFCPs into the Health, Nutrition, WASH and Education sectors response plans for the 2022 monsoon flooding.

To improve 'Human Resources for Nutrition Development' in the medium to long term, UNICEF technically supported, harmonized, and upgraded Nutrition and ECD Modules for various graduate and post graduate Medical and Allied Health Professionals in KP.

### ***WASH***

In 2022, UNICEF's technical support to WASH through its development program. This included improved Governance for WASH through a stronger policy environment, increased capacity of service providers to plan and budget, and availability, accessibility, and utilization of improved WASH at the community level proved. These efforts were essential in the rapid and agile emergency response, and is a strong basis for the transition to recovery.

Key achievements contributing towards strengthened enabling environment include increased political engagement and commitment to universal climate resilient WASH access expressed through increased policy and financial commitments. UNICEF's technical support – for example through its contribution to the WASH Sector Financing Strategy and other key WASH related policies – contributed to the improved national capacity to implement, leading to increased public expenditure in

FY 2021-22 from 82 to 85 per cent and increased domestic financial allocation for FY 2022-23 by 18 per cent.

UNICEF's led the humanitarian response for the cholera outbreak and flood emergency working closely with concerned Government ministries and departments, strengthened the flood response and the development of the Resilient Recovery, Reconstruction, and Rehabilitation Framework (4RF) for the flood affected population for WASH.

Leveraging its strong partnership with Government and existing cooperation and implementation infrastructures, UNICEF ensured a rapid and agile response and will continue building on this foundation to ensure equitable access to improved WASH for the most vulnerable moving forward. As such, UNICEF enabled over 2,349,336 people (1,170,170 males; 1,179,166 females) (49 per cent of target) and 1,632,801 people (814,148 males; 818,653 females) (370 per cent of target) to access at least basic water and basic sanitation and hygiene services including menstrual health. An additional 4,030,820 people (157 per cent of target) are living in Open Defecation Free communities, 975 schools (140 per cent of target) and 239 health care facilities (77 per cent of target) were provided with gender responsive, disability inclusive WASH services, supporting infection prevention and control.

### ***Education***

UNICEF's coordination and technical support led to the approval of the KP Early Childhood Education (ECE) and Alternative Learning Pathways (ALP)/Non-Formal Education policies, the Sindh School Clustering and Monitoring and Evaluation policies, and the improved Continuous Professional Development programme for teachers. The Education Management Information Systems (EMIS) in Sindh and KP were strengthened for key decision-making. The Education Cannot Wait Multi-Year Resilience Programme was launched for host and refugee populations.

UNICEF's rapid response to the floods was enabled by its surge capacity, drawing on expertise within the country office, and its lead role in sectoral coordination which resulted in quick support to the Government to launch the Education Flood Response Plan for flash appeals. UNICEF's support to the EMIS-linked dashboard development ensured essential data provision into the Post Disaster Needs Assessment (PDNA) and 4RF to guide the recovery, rehabilitation and reconstruction needs.

Studies on ALP and ECE models and governance structures informed policy interventions. A digital learning landscape mapping and analysis of technology-facilitated learning tools and UNICEF engagement strategy were finalized to identify the challenges and opportunities for engagement within Pakistan's Education Technology (EdTech) ecosystem.

UNICEF direct support benefitted 1,321 ALP centers (of 2,106 targeted) and provided access to quality teaching and learning to 57,248 learners (56 per cent girls), while training and mentoring was provided to 938 ALP facilitators (64 per cent women). KP mainstreamed 51 per cent of ALP learners who completed post primary and Balochistan integrated skill development in the ALP curriculum, being implemented in 34 middle ALP centers. UNICEF also supported the establishment of 5,925 ECE classrooms (306,467 learners – 48 per cent girls) and training of 6,319 government teachers (63 per cent females) on ECE.

### ***Child Protection***

UNICEF's continued advocacy for the expansion of birth registration led to registration of

5,514,392 births (47 per cent girls) (168 per cent of target) in all four provinces and the two territories (Pakistan Administered Kashmir/PAK and GB) of Pakistan in 2022. With UNICEF support, Civil Registration and Vital Statistics (CRVS) Monitoring Units were established in Punjab and KP to ensure CRVS Data Quality (Consistency, Timeliness, Completeness, Accuracy and Relevance). A comprehensive monitoring mechanism is in place in both provinces to improve data quality. The CRVS Monitoring Units reached 1,115 Union Councils (32 per cent of total) in Punjab and 1,866 Village/Neighborhood councils (44 per cent of total) in KP.

UNICEF continued evidence generation support to Government on preventing economic exploitation of children through Child Labor Surveys (CLSs) across the country. The CLS investigates causes, circumstances, characteristics, and consequences of child labor on education, health, protection of children's and adolescent's rights, and facilitates decision making on cross-sectoral policy formulation to protect children and adolescents from all forms of economic exploitation. Strategic advocacy led to budget allocation commitments from provincial governments (cumulatively US\$3.6 million).

Technical assistance resulted in operationalization of the Case Management and Referral System (CMRS) for responding to child abuse cases in Balochistan and GB in 2022. System operationalization in Sindh and KP was in advanced stages when the flood emergency took place, and UNICEF responded rapidly to adapt the system. Around 1,729 children (1,147 boys, 582 girls) received services under the CMRS system.

UNICEF supported provincial governments to finalize Social Behavior Change (SBC) frameworks on ending child marriage and -labor and preventing or responding to child abuse. Messaging on violence against children, gender-based violence and stigma prevention was integrated into flood response, reaching 1.4 million people. UNICEF led the reactivation of Child Protection Sub-Working Groups, resulting in coherent and coordinated guidelines and messaging on child protection concerns.

### ***Disaster Risk Management***

UNICEF provided advocacy, capacity building and technical support to enhance readiness for multi-hazard scenarios. With UNICEF support, NDMA organized a Community Based Disaster Risk Management training of trainers in Swat, benefiting 39 officials from various government departments of KP and GB. UNICEF supported NDMA in showcasing Pakistan experiences in the Asia Pacific Coalition for School Safety Partner Event, at the Asia Pacific Ministerial Conference on Disaster Risk Reduction.

UNICEF's emergency preparedness has rested on maintaining a solid foundation of prepositioned supplies (for 150,000 people), on-the-ground human resource capacity in all provinces, strong partnerships with Government, UN agencies and CSOs and strong donor relations which enabled the capacity to rapidly repurpose funds for emergency response.

In the flood response, UNICEF responded in 66 of the government-declared 94 calamity affected districts, establishing four operation hubs close to the hardest hit areas. Until December 2022, out of 6.4 million people targeted with support, over 1.5 million children and mothers received essential nutrition services, 58,530 severely wasted children (32,653 girls and 25,877 boys) were enrolled for treatment, 1,053,076 people (268,282 girls, 235,460 boys, 264,480 women and 284,854 men) reached with access to safe drinking water, 1,453,429 people (401,081 girls, 376,778, 374,235 women and

301,335 men) benefitted from outreach camps and 1,059,092 children (557,005 girls and 502,087 boys) were immunized against measles. Additionally, UNICEF established 837 Temporary Learning Centers (TLCs), supports 101,222 children (41,543 girls and 59,579 boys) via diverse modalities and 193,572 children and parents (79,638 girls, 80,597 boys, 19,996 women and 13,341 men) have received Psychosocial Support and Services. Winterization support benefits 187,000 people.

### ***Social Policy***

UNICEF's technical and financial assistance supported the Governments of PAK, GB, and Punjab in developing inclusive child-sensitive social protection policies, Social Protection Implementation Plans, and the Digital Integrated Poverty Estimating and Graduation Platform. To increase focus on vulnerable populations (disabled, orphans, widows, and transgender people), UNICEF supported the Government of PAK to conduct a large-scale study on the impact of those vulnerabilities, providing evidence to promote child-sensitive social protection policies, contributing to the realization of children's rights.

UNICEF supported the MoPDSI in developing the Multidimensional Poverty National Estimates for the PDNA, estimating physical damages, economic losses, and costs of recovery. Findings led to the development of the UNICEF Recovery Vision and the 4RF, to ensure transformational measures for strengthening long-term resilience to climate change-related disasters.

UNICEF supported MoPDSI to mobilize over 100 national, regional, and global actors to help Pakistan measure and address all dimensions of child deprivation through a three-day high-level national dialogue in Islamabad. Moreover, UNICEF provided support to the Governments of GB and PAK in measuring deprivations using the Consensual Approach.

Under Public Financing for Children (PF4C), UNICEF supported the Government of Balochistan to conduct a gender-responsive, child-sensitive public expenditure review after COVID-19 and catastrophic flooding.

UNICEF facilitated evidence generation in undertaking MICS, CLS and other data products. Punjab, Sindh, KP, and PAK equity- and district profiles were completed. In addition, UNICEF supported MoPDSI to develop an Adolescent Index to inform empowerment programmes for adolescent girls and children facing harmful practices.

### ***Adolescent Development and Participation/Generation Unlimited***

UNICEF strengthened the youth engagement agenda by supporting the development and finalization of: the Generation Unlimited (GenU) Pakistan Operating Model; the Policy brief on COVID-19; and the Skills & Employment Outlook for Young People in South Asia on strengthening and scaling an inclusive agenda on youth skills and employment for organizations and professionals working in policy design and implementation; the GenU Youth challenge 3.0; the policy research challenge; and the Pak-Afghan youth challenge. The Virtual Policy Lab portal was established as part of the inter-agency Adolescent Investment Strategy.

Under GenU, 6.67 million young people were reached through social media and a further 13.3 million people through radio. A team of young people from Pakistan (Int-Tech) were among the 12 global winners of the GenU Youth Challenge 3.0 2021-22 and Life skills programme for 81 secondary

school students implemented with the Otermans Institute.

### ***Other Enablers***

Programme delivery was supported with US\$170 million program funds and US\$210 million Procurement Services modality. This included approximately US\$50 million for the flood response. HACT assurance achieved 192 per cent programmatic visits, 100 per cent financial assurance activities and 29 micro-assessments. To bolster response to the flood disaster, UNICEF's HR team undertook the surge deployment of 63 staff and opened 4 operational hubs in the most affected areas.

UNICEF supported the Launch of National Gender Policy Framework by the Government of Pakistan by providing technical assistance to the Government. UNICEF proactively supported UNSDCF planning and design outcome 2 and the Gender Thematic Group. UNICEF's gender in emergency related initiatives included technical inputs for the PDNA, MSNAs and multiple sector specific assessments including the Rapid Gender Assessment.

## **UN Collaboration and Other Partnerships**

### ***Health***

UNICEF's collaboration with academia and professional associations contributed to strengthening quality of care improvement, advocacy, and implementation. Engagement with the Health Services Academy on policy dialogue and training has helped to sustain efforts on quality of care, reducing preventable perinatal deaths. Partnerships with key CSOs ensured timely and adequate flood response and recovery.

### ***Polio eradication***

UNICEF's continued partnership with the Government, WHO, the Bill and Melinda Gates Foundation, Rotary International and the US Centers for Disease Control and Prevention within the Pakistan Polio Eradication Programme ensures the implementation of polio vaccination campaigns, community-based vaccination, community engagement and awareness raising.

### ***Nutrition and ECD***

Government partnerships supported consultations on the multisectoral Nutrition Action Plan, inclusion of nutrition and ECD in key documents, strengthening LMIS, and development of the Nutrition module in DHIS2. UNICEF's partnership with WFP on the Benazir Nashonuma Programme helped scale up nutrition responsive social protection.

Partnerships with KP and Punjab academia facilitated the upgradation of graduate and post graduate curricula for Nutrition and ECD.

### ***WASH***

UNICEF partnered with the Pakistan Water Operators Network on advocacy for urban utilities, and with WHO and UN Water on the Hand Hygiene for All (HH4A) initiative. A Pakistan case study on HH4A was presented at the Stockholm World Water Week, contributing to the Living Indus Initiative.

### ***Education***

UNICEF's leadership of the Education Sector Programme Implementation Grant (EPSIG) in Balochistan, KP and Punjab, and the Balochistan Education Sector second phase (BES-II) programme supports provincial education departments.

Partnership with the Federal Education Ministry led to finalization of the Education Cannot Wait Multi-Year Response Plan and the Education Flood Response Plan.



### ***Adolescent Development and Participation/GenU***

UNICEF continued its partnership between civil society and private sector via the GenU Secretariat at the National Vocational and Technical Training Commission (NAVTTTC) leading to the finalization of the GenU operating model.

### ***Child Protection***

Partnerships with FCDO, ILO, Pakistan Bureau of Statistics, Ministry of Human Rights (MoHR), Ministry of Overseas Pakistani and Human Resource Development (MoPHRD) and provincial labor departments and Bureaus of Statistics enabled the CLS and the establishment of sustainable data systems and capacity-building.

### ***Social Policy***

UNICEF's partnership with the SDG Parliamentary Taskforce strengthened linkages among stakeholders within the National Assembly and Senate. A Joint Communique was developed and shared with all Members of Parliament to further commitment to work on child rights-related issues at the highest level of national policy.

### ***Advocacy and Communication***

UNICEF leveraged the UN Communication Group (UNCG) to advocate for the inclusion of child, adolescent, and women-related issues in advocacy efforts such as World Food Day and supported the UN Secretary General's visit to Balochistan in September 2022.

### ***Business for Results***

UNICEF's partnership with Telenor supports regulatory measures on online child protection, awareness, and training on online safety and cyber bullying to 750,000 stakeholders.

Our partnership with Santex Ltd. supports Menstrual Health and Hygiene product innovation, period tax reform and awareness.

UNICEF's partnership with the Pakistan Business Council advocates with companies for family-friendly workplace policies, including a 2023 workplan to promote nutrition and ECD.

## **Lessons Learned and Innovations**

### ***Health***

Hybrid modalities combining virtual and face-to-face workshop methods helped in mitigating convening constraints during the emergency flood response and contributed to the continuation of the National New-Born Strategy development. Huge efficiency gains were achieved through this hybrid working modality which enabled meaningful engagement with Government and other partners to deliver results for children within a complex working environment and humanitarian settings.

In 2022, the child health and innovation of UNICEF HQ and Supply Division were critical to guide and review the oxygen therapy management national guidelines; building national public sector capacity to accelerate progress in the long run.

### ***Nutrition***

Reviving the LHW programme for the delivery of expanded integrated packages of community health and nutrition services in 10 Union Councils of District Quetta, Balochistan, enabled the Government to increase the cost-effectiveness in reaching families and communities by avoiding duplication of services and efforts. The trained 250 LHWs and Lady Health Supervisors are now able to deliver messages on Immunization, nutrition, WASH, MIYCN and KFCs. We learned that this

initiative is scalable provided that proper training and support is provided.

### ***ECD***

As an innovation to increase access and cost efficiency, UNICEF engaged the Internet of Good Things Pakistan - IoGT Pakistan (goodinternet.org) - Frontline Worker Resources - IoGT Pakistan (goodinternet.org) online platform for KFCPs during training and for wider dissemination among health workers which was successful in increasing awareness and promote self-paced learning.

### ***WASH***

The UNICEF global approach and shift towards climate resilient WASH tallies well with government priorities under the Climate Change agenda, especially under the advocacy theme of 'Children of Pakistan cannot wait, take climate action now'. This has led to strategic government engagement and understanding of UNICEF support and programs. The 2022 floods further demonstrated the need for climate resilient WASH programming which touches on the broader initiative of helping communities adapt to climate change. A significant learning in 2022 is that WASH infrastructure should adapt better to changing weather patterns and be able to withstand the increasingly prevalent extreme weather events.

### ***Education***

UNICEF's repositioning of education supplies, along with its humanitarian leadership through the Education Sector Working Group, and ability to leverage its development program and resources ensured an agile and rapid response. UNICEF's TLCs saw the enrolment of first-time learners. Registration of these children through UNICEF support provided key data to the Government to ensure retention of these children in school. Innovative solutions initiated during the floods such as Gadi (three-wheeler) schools and mobile learning centers ensured continuity of learning and provided a sense of normalcy to children traumatized by the floods.

### ***Child Protection***

It was seen in Balochistan that an integrated approach for scaling up the child protection case management and referral system, with long term, sustainable technical support to the Social Welfare Department for Social Service work force capacity building, service delivery improvement, awareness raising, and promotion of CP services increases practicality and manageability of child protection.

Adapting already tested approaches, materials, and tools related to COVID-19 and Refugee Response Plan (RRP) helped to speed up implementation and reach children in the early phase of the flood response, such as design of a family wellbeing kit with simple materials to support a family to cope with displacement and loss, and existing Child Protection in Emergencies (CPIE) message bank. These approaches will be institutionalized to sustainably increase resilience of service delivery.

### ***Disaster Risk Management***

*The importance of emergency preparedness, particularly with the increased risk of extreme weather events due to climate change, was made evident through the historic monsoon floods. UNICEF was able to respond quickly due to its strong preparedness but was still overwhelmed by the scale of the disaster. Given Pakistan's existing vulnerability, and additional increasing risk of extreme weather events, scaling up response capacity will be crucial, including increased prepositioning of supplies, human resources and expanded partnerships.*

## ***Social Policy***

In 2022, UNICEF Pakistan learned that a lack of capacity, skills, knowledge and awareness of disability issues, the cross-sectoral nature of disability programming, and limited coordination between sections led to limited inclusion of disability issues in programming. Moving forward, a Disability Task Force within UNICEF will ensure a systematic approach to capacity build with Disability Focal Points in all sections on programming, targeted initiatives and programmatic indicators, and improved coordination.

## ***Adolescent Development and Participation/GenU***

Ensuring equitable distribution of funds to support the new geographic prioritization of the most deprived districts of the country will require a considerable amount of additional funding. UNICEF will build on the strategic provincial partnerships (with GPE and EU) in Punjab, KP and Balochistan, to cover all districts and provinces to focus on intersectoral ADAP programming.

## ***Advocacy and Communication***

The Pakistan country office achieved significant growth on social media, generating 473 million impressions and 45 million video views in 2022. The number of followers increased by 100 per cent on Twitter (220,000 followers), 25 percent on Facebook (900,000) and remained stable on Instagram (170,000). This was achieved through the continued implementation of the 2018-2022 Advocacy, Communication and Social Mobilization strategy, and production of 27 events, 80 videos, 12 stories, 13 press releases, 3 Geneva Palais briefings, and organized several visits for the regional and global directors and several National Committees. The number of posts published in Urdu increased and supported increasing nation-wide reach.

## ***Moving forward***

Lessons learned will be taken forward into the new 2023-2027 Pakistan Country Program and related strategies.