



Responding Today for Tomorrow: South Asia

Summary Brief 2023

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Responding Today for Tomorrow: South Asia

Summary Brief 2023

Foreword

The COVID-19 crisis has sent shock waves across the region, upending lives, plunging families into economic precarity, compounding the existing learning and nutrition crises and propelling anxiety disorders among children to an all-time high.

Food and energy prices have spiked, impacting the most vulnerable families first. A devastating new war and humanitarian crisis in Europe has threatened international stability. And record heatwaves and catastrophic floods have led to a scale of climate devastation in the region unlike anything we have seen before.

This Report is the first in a series that aims to collect evidence and draw lessons on how progress for children can be sustained in the face of multiple overlapping shocks.

Our analysis is resolutely optimistic, befitting a region where economic growth and social progress was strong before the pandemic. Indeed, South Asia has emerged from the economic downturn caused by COVID-19 relatively swiftly- thanks in part to a host of impressive achievements, such as immunizing over 1 billion people and expanding income, food and livelihood support to an additional 400 million.

Still today, South Asia is one of the few regions in the world where prospects for economic growth remain. Acting now to make cost-efficient investments in children's health, nutrition, learning, safety and well-being is one of the most surefire ways to secure long-term social and economic growth for the region.

Such investments need not be costly, but they must be strategic, focusing particularly on safeguarding investment in human capital- especially the cognitive capital of children in the early years- and ensuring child-centred reforms in the health, education, social protection and child protection systems.

This will not only help address upheaval of compounding crises on girls and boys in South Asia, but also build strong systems which help safeguard progress against future shocks.

By firmly placing children at the heart of economic and social policy, countries in South Asia will reap long-term economic and social benefits.

George Laryea-Adjei
Regional Director, UNICEF South Asia

Introduction and Background: Why this Report

The Report *“Responding Today for Tomorrow: South Asia”* focuses on policy responses to the COVID-19 crisis and the rising cost of living across the eight countries of the region. This Brief offers a summary of the Report’s key findings and recommendations.

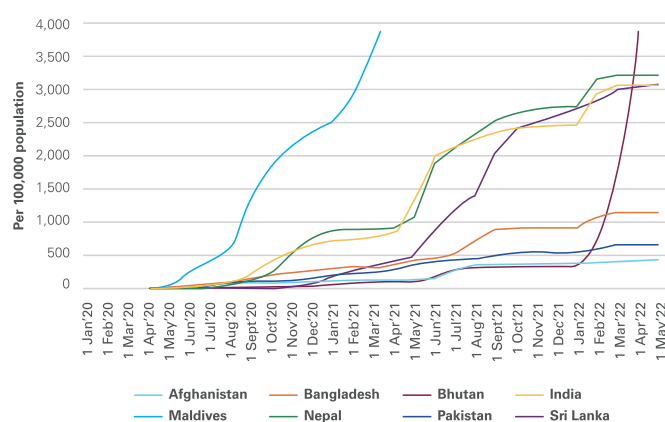
South Asia holds great promises for the over estimated 628 million children and adolescents who call its countries home. Between 2005 and 2019, under-five mortality rates were almost halved in South Asia, from 77 to 40 cases per 1,000 live births. Reflecting progress in gender equity and child protection, early marriage has become less frequent: surveys before the pandemic showed one out of four to five young women were married before their eighteenth birthday, while around the turn of the millennium this ratio was still one out of two. The number of people living in extreme poverty was reduced from 500 to 156 million between 2007 and 2019, despite growing population. These results reflected progressive social policies as well as fast-paced economic growth showing resilience to the 2009-2010 global recession.

Because economic development in the twenty-first century hinges primarily on the cognitive and social development of young children and adolescents – probably nowhere more crucially as in South Asia – the goals of economic, social and child development are closely linked. It is this bright outlook for accelerating human development that the compounding effects of the pandemic and current global economic and political tensions threaten to cloud and darken.

The stakes are high because the region had already been facing headwinds to progress before 2020. As a recent UNICEF analysis has showed the combination of geography, high exposure to climate change and the unfinished agenda for children’s progress make Afghanistan, Bangladesh and Pakistan among the 15 most at-risk countries globally from the viewpoint of children’s vulnerability to climate change; with India- home to 7 out of 10 children in the region – ranking 26th. Due to uneven development deep pockets of poverty existed in the region, where- as the Report notes – still a third of young children had shown stunted height for age before the COVID-19 crisis and over 35 million of school-aged children were missing from the education system.

Over 2020-2021, South Asia has been hit hard by the COVID-19 pandemic, which demanded hundreds of thousand deaths – despite energetic and widescale government response. The Report highlights how countries fought the repeated waves of COVID-19 (Figure 1) carrying out some of the strictest lockdowns globally for several weeks in 2020 and also in 2021, while trying to soften impacts on the economy and people’s livelihoods with fiscal packages, food and cash transfers and liquidity support to enterprises.

Figure 1: Cumulative registered COVID-19 infections, South Asia



Source: EIOS (Epidemic Intelligence from Open Sources) (dashboard), World Health Organization, Geneva, <https://portal.who.int/report/eios-covid19-counts/>; World Population Prospects 2019 (database), Population Division, Department of Economic and Social Affairs, United Nations, New York, <https://population.un.org/wpp/>.

In the early stage of the pandemic, when immunization was not yet available, infections soared in urban and economically developed areas more than in rural and less developed areas. In this stage preventative policies focused on hygiene, mask wearing, social distancing, and economic and social lockdowns. The efficiency of the latter was greatly helped by geographic aptness for isolation as well as administrative capacity for enforcement, monitoring and reporting. In the second stage of the pandemic, most countries achieved high vaccination rates. In some cases, this success arrived too late to prevent a large second

wave in infection and mortality caused by the Delta variant of the virus, but it did save many lives from the Omicron variant across the region.

The analysis sees the relatively subdued spell of the Omicron variant of the virus in all eight countries but Bhutan – the country where strict lockdowns were helped by the geography of Himalayas and rapid progress in vaccinations during the reign of the earlier variants – that the majority of the region's population possesses now a strong, hybrid protection: COVID-19 vaccination as well as immunity through earlier exposure to the virus.

These results were achieved at significant costs in terms of COVID-19 mortality (especially among older adults) as well as social and economic setbacks. Case specific mortality was particularly high in less developed areas. A shrinking economy and continued population growth led to rises in poverty in all countries despite a significant expansion in social protection and a good year in agriculture in 2020. Vulnerable families have also benefitted from increased charity activity, as well as transfers between households and within extended families. Assistance was very much needed as millions of workers, especially those with informal employment had lost their job when the economy came to a standstill in March-April 2020.

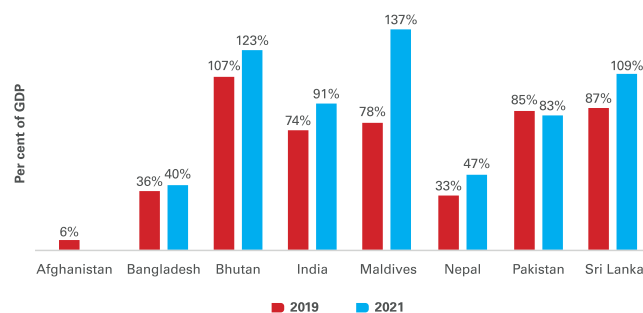
Recovery started already in the second half of 2020, but it was difficult to avoid rises in government debt (Figure 2). By early 2022 the combination of natural immunity and high rates of vaccination allowed a significant easing of lockdowns. This is good news for children, who were impacted by the sharp fall in household's economic opportunities in 2020, family coping strategies, school closures and continued service disruptions and lockdowns during the repeated waves up to early 2022.

Return to normalcy is now hindered by a less favourable international political climate and a new global standard of living crisis reflecting high food, fuel and fertilizers prices in international markets this year. These are driven or exacerbated by the war in Ukraine, supply chain bottlenecks, largely due to continued Omicron-related lockdowns in China, aggressive hikes in international lending rates in OECD countries and a sharply appreciating dollar.

These factors weaken the post-lockdown recovery in South Asia and retroactively raise the effective cost government efforts over the last two years to

shield livelihoods and productive capacity during the pandemic at the cost of higher public debt. It is yet to be seen to what degree extreme weather events in 2022 and the higher prices of fertilizer and fuel have undermined income from agriculture, the main employer of low-income families in much of the region, which remains vulnerable to climate change.

Figure 2: Gross general government debt, 2019 and 2021



Source: IMF 2021.

In countries current (trade) account and balance of payments however, the inflated food, fuel, and financing costs are already causing a havoc - worsening macroeconomic stability and calling for policy adjustments. That this risk is not a distant possibility was dramatically highlighted by Sri Lanka defaulting on its external debt and the fact that another three South Asian countries are in discussion with the IMF as a precautionary move.

Prior to COVID-19, all eight countries of South Asia were experiencing rapid economic growth. Over two years later, Sri Lanka and Afghanistan – the richest and the poorest country in the region, respectively – are now outliers in continuing to see negative or weak growth respectively. The other six countries are back to prior growth trajectories, with Bangladesh, India and Maldives posting particularly strong growth economic despite current global headwinds. This is clearly a success.

However, to continue with robust and sustainable economic growth and intensify labour productivity, countries will increasingly need a workforce that is not just abundant but also healthy, resilient and well trained.

In facing today's layered challenges, children, women and their families in the eight countries of South Asia are facing **three major risks**.

- First, balance of payment pressures and current account deficits could lead to **macroeconomic adjustment policies**

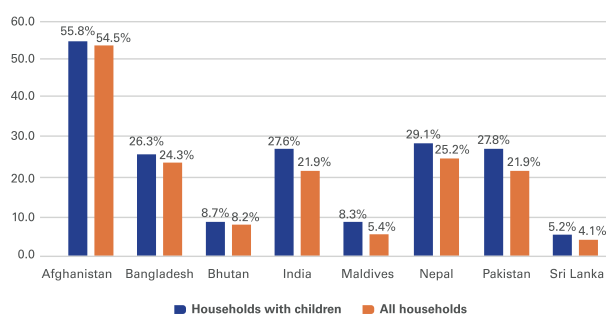
slowing socioeconomic recovery and triggering a standard of living crisis among the vulnerable populations.

- Second, concerns around macroeconomic adjustment may **crowd out much needed political attention on – and fiscal space for – addressing the lasting effects of the COVID-19 crisis on children and women.** This is a serious risk as the next section highlights: unless COVID-19 related setbacks are addressed in due course, the scars on millions of children’s anthropometric and cognitive development, social skills and mental health caused by the lockdown years will become permanent.
- Third, the COVID-19 impacts on children and the threatening **standard of living crisis overlap, to varying extents, with a number of entrenched forms of disadvantage in the region** that require sustained action for children’s rights, gender equality, and human rights.

Households with children had already a higher-than-average risk of living in monetary poverty before the pandemic. The 2022-2023 standard of living crisis will be first of all a children’s crisis, because children and their families will be the most vulnerable to its impacts. As these will be layered on top of the damage done by the ongoing COVID-19 pandemic, as well as the gaps related to the unfinished equity agenda for children, they will **necessitate redoubled attention, effort, and investment.** Nothing less will be capable of delivering on the human rights of children across South Asia, or the long-term economic potential of the region.

Experience shows that reforms that open new development pathways for countries have often been triggered by hard times. The Report retains that although families with children look into the future with concern across the globe, South Asia has a high chance to find the path out of the current challenges in ways which protects its over 600 million children, and invests into their rights, resilience and wellbeing which hold the keys to a brighter future in the region. This optimistic outlook is the scenario of “responding today for tomorrow,” and this is the objective where the Report wishes to make a contribution.

Box 1: Across South Asia, households with children are more likely to live in poverty



Sources: UNICEF estimates calculated using methodology from Fiala et al. Estimates based on data including poverty headcount ratio at national poverty lines (% of population) (dashboard), World Bank, Washington, DC, <https://data.worldbank.org/indicator/SI.POV.NAHC>; Save the Children and UNICEF 2021.

Note: The data refer to poverty prevalence (%). All households include those with children and those without. Accordingly, the gap between the two groups must be higher than the gap shown in the figure. The years of the latest available data are as follows: Afghanistan, 2016; Bangladesh, 2016; Bhutan, 2017; India, 2011; Maldives, 2019; Nepal, 2010; Pakistan, 2018; Sri Lanka, 2016. Edochie et al. (2022) suggest that the headcount poverty ratio was 10.4 per cent in 2017–2018, but they do not give an estimate on child poverty. For more details on the way child poverty is calculated, see Fiala et al. (2021).

Children tend to be overrepresented among those living in monetary poverty. And accelerating inflation, especially of food prices – as experienced in 2022 across

the region – tends to hit families with children harder than households without children.

Childhood deprivations, especially at an early age, undermine human capital development. Human capital – especially cognitive capital – drives the most rapidly growing sectors of the modern economy and develops optimally in children who benefit from good nutrition, stimulation and a supportive and secure family and social environment.

Lasting harm can be done even over shorter periods of stress or deprivation. For infants, young children and adolescents, even a temporary spell of poverty or income loss may derail child development in lasting, irreversible, or tragic ways.

Considering the importance of cognitive capital to the development of countries in the twenty-first century, there is a vital opportunity to strengthen social sectors when it can provide the greatest returns on investment: adolescence, before childbirth and in early childhood. **Investment during the first 1,000 days of life and adolescence makes the biggest difference in child development as well as downstream economic growth.**



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The multidimensional impact of the crises on children

In order to understand the most pressing needs of children at this critical juncture, the Report investigates the multidimensional impact of the COVID-19 pandemic on children's health, nutrition, families, and education, among other aspects of their wellbeing and human rights. It then provides key action items in each area, as well as a set of recommendations not only to bolster support to children through these sectors, but also to provide vital long-term stability through investments in child-sensitive economic and social policy. Because of the proximity of the compounding crises as well as the negative impact of COVID-19 on the production of social surveys and administrative data, much of the evidence on crisis impact is based on statistical modeling and estimates.

Maternal survival, parental health, and caregiving capacity have suffered as a result of COVID-19 crisis. As a result of the pandemic, at least 300,000 children in South Asia lost a primary caregiver between March 2020 and February 2022. Independent experts estimate that this loss could have been much higher. In addition, at least 140,000 children were estimated to have lost a secondary caregiver (typically a grandparent) to COVID-19 crisis. However tragic, this loss constitutes only a relatively small proportion of the children who may have been exposed to parental loss even prior to the pandemic while growing up in the eight countries. Representative household surveys carried out in six South Asian countries in the latter half of the 2010s found that nearly 30 million children had lost one or both parents. Population censuses at the beginning of the 2010s established that, on average, about 1 per cent of the child population – around 6 million children – were living in skip-households: households without any parents in which grandparents raise the children. Before 2020, there was already a significant orphan and care problem in the region; the COVID-19 crisis may have just exacerbated it.

Given the continued existence of the male breadwinner model, a rise in economic insecurity resulted from orphan and care problem. The earned income of many South Asian households' hinges to a large extent on a male breadwinner. In the region, husbands are, on average, significantly older than their wives: in Bangladesh, for example, the average age gap in marriage is 8.4 years, and, in India and Pakistan, it is around 5 years. Because of the dominance of this family model and low female participation in the wage labour market, the particularly high mortality toll among middle-aged men implies a significant rise in economic insecurity among household members, including widows and orphans.

The impact on the mental health of women and children is expected to be substantial. In addition to nutritional stress on households, alongside shrinking availability of interventions, the pandemic has brought about a similar pattern with regard to mental health – particularly for children and women. There is emerging global evidence that COVID-19-related health service disruptions have affected mental health services, at the same time

that greater stress and personal and economic insecurity associated with the pandemic have had a significant negative impact on mental health. While data from the region do not always allow comparison over time, evidence from Bangladesh and other countries suggest that mental health with a strong gender focus should be high on the public health agenda.

The prevalence of anxiety and depression is expected to rise significantly as a result of the pandemic. A major study covering 204 countries and territories projected large COVID-19-related increases in major depressive disorders and anxiety globally, especially among women and young people (COVID-19 Mental Disorders Collaborators 2021). Chiefly driven by the reported SARS-CoV-2 infection rates, rises in mortality and reductions in human mobility, the model suggested that prevalence rates could increase by over a third in South Asia. Bangladesh, India, Nepal and Pakistan were more greatly affected, while Afghanistan and Bhutan were less highly impacted within this regional picture.

Increases in mental health diagnoses may indicate a much broader mental health impact associated with less obvious manifestations that ought to be concerning as well. This is not only a health or welfare issue. It is a problem that has implications for children's cognitive capital, progress in school, and eventual earnings in the workplace, especially when combined with effects from poorer nutrition and reduced childcare capacity.

Covid-19 created environments less conducive to reducing maternal mortality. Many countries in South Asia reported disruptions in maternal and child health services in the second quarter of 2020, and the repeated COVID-19 waves and related pressure on medical services did not promote regular check-ups and access to potentially life-saving interventions. If the 15 per cent rise in maternal mortality projected globally is valid for South Asia, households in the eight countries would have lost an additional 8,550 expectant mothers annually over the trend. A separate South Asia-specific study came to a similar conclusion.

Pandemic-related declines in child and maternal health and nutrition were estimated to be significant. In early 2020, even before WHO declared COVID-19 a pandemic on 11 March 2020, the coverage of maternal, child and adolescent health services was already being affected in several countries in South Asia. The delivery of family

planning, antenatal care, facility births, postnatal visits, routine vaccinations, zinc for the treatment of diarrhea, and so on, were all significantly affected, especially from the second quarter of 2020 onward. This was partly because of falling demand associated with the fear of infection and partly due to the pressure to divert health workers to the COVID-19 response. These service disruptions occurred to a large extent in all countries of South Asia, with implications for young child morbidity and mortality and maternal health. For example, between 2019 and 2020, the region experienced a sharp decline in the share of children receiving three doses of the diphtheria-tetanus-pertussis (DTP3) vaccine, falling from 90 per cent to 84 per cent.

The impact of school closures has contributed to widening learning poverty. The policy decision to close schools beginning generally in March or April 2020 and to undertake remote learning from home had an immediate, far-reaching impact on 434 million students in South Asia. In addition, an estimated 22 million children missed critical preschool sessions as COVID-19 caused the closure of childcare and early education facilities. The dramatic shift from face-to-face learning to remote teaching across all levels of education, from preschools to tertiary institutions, across the region has been a tremendous challenge that has resulted in a major education emergency on top of the ongoing health emergency.

Using the private returns to education at primary and secondary levels for each country with available data, the Asian Development Bank estimates a present value of the total losses at US\$1.25 trillion in developing Asia. This is equivalent to 5.4 per cent of the region's gross domestic product (GDP) in 2020. In terms of lost earnings, every year of schooling lost is equivalent to 9.7 per cent less in potential earnings. For South Asia, the percentage decline in earnings per student per year would be around 4 per cent. This equates to lost future earnings of US\$1.0 trillion–US\$1.9 trillion. These learning and earning losses are likely even higher given that tertiary students are excluded from this analysis.

Children who are already disadvantaged are often most at-risk of missing out on crucial services. Interventions that are both school-based and non-school-based should ideally reach those who need them most. That includes children living in extreme poverty and remote areas, those who are most at risk of dropping out or exploitation, girls at risk of early marriage and pregnancy, children on the move (migrants and refugees), and children with physical disabilities and special learning needs.

Too often, it is precisely these children who are increasingly at risk of missing these services.

The sudden loss of vital health and nutrition services delivered through school platforms meant that many vulnerable children lost or had limited access to nutrition programmes, while poverty rates were simultaneously rising. Children therefore lost out on subsidized nutritious meals at the moment when downward pressure

on income was limiting the ability of households to increase out-of-pocket consumption expenditure.

To facilitate policymakers' response to these issues, it is essential that there is a renewed focus on collecting data to underpin evidence-based policy adjustments and reform. It is essential that policymakers have access to, and proper use of, routine administrative data that sufficiently capture child-specific and child-sensitive issues.

Box 2. Social protection - a crucial response strategy to crises - needs to focus better on family support and child development in the current context

- **Scaling up social protection** was a crucial response strategy to COVID-19, attesting to the importance of political commitment in bolstering the capacity of governments and stakeholders to protect people from external shocks to their lives and livelihoods. Efforts to deliver cash or distribute food can **prevent or mitigate increases in negative household coping strategies** affecting children, through insufficient food intake, school dropouts, child labour and child marriage. At the macro-level, the protective measures probably helped spark economic recovery in 2020 and accelerate the recovery throughout 2021, despite the ongoing pandemic.
- Social protection measures to counter the socioeconomic fallout from the COVID-19 crisis have chiefly focused on large, centrally driven programmes and initiatives, a significant share of which represent one-off handouts or unemployment support for a limited duration. Many of these temporary expansions were rolled back subsequently, yet several countries did institutionalize the expansions. On the whole, **the social assistance systems are considerably stronger in the region in 2022 than they were pre-COVID.** This is a hugely important asset in the current macroeconomic context.
- The large share of informal jobs in South Asia highlights the importance of keeping social assistance measures ready to roll in again. However, because these benefits need to be financed through discretionary measures and from general tax revenues (instead of social insurance contributions), **the fiscal base of social protection is procyclical and fragile in the current situation.** This macroeconomic weakness is closely related to the **high share of informal employment and limited role of social insurance**, which poorly serves mothers and children as well as the SDG targets on universal access to healthcare.
- Existing cash transfers and cash plus programmes that focus on the first 1,000 days of life provide a mix of cash and developmental interventions that are often small in comparison with the needs across the region, but they represent a base upon which expansion could be built. Boosting the capacity of social protection to **respond to risks along the life cycle, especially during the early years and adolescence** could address the higher-than-average risk of monetary poverty among households with children and serve as a platform to strengthen resilience to the ongoing and future shocks that threaten South Asia.





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RECOMMENDATIONS: Priority Areas for child sensitive economic and social policy

Main recommendations:

1. When responding to crises and aggregate shocks **through economic and social policies, consider opportunities for strengthening and safeguarding investment in the human capital, and especially the cognitive capital of children**, particularly in the early years through a coherent set of policies that focus on stability, resilience and investment.
2. **Recognize the need for child recovery** from the compounding effects of the COVID-19 crisis and the current cost-of-living threats and **accelerate systemic reforms in the social sectors**. This entails establishing clear priorities in public budgets and national and sectoral plans so that health, education, social protection and child protection systems can respond to setbacks and accelerate progress through systemic reforms.
3. Underpin systemic reforms, action plans, social sector monitoring and comprehensive situation analyses with **updated and improved evidence**. Enhancing funding to social statistics should enable representative surveys, censuses, administrative data management information systems implemented at greater frequency and using innovative methods. Evidence-based policymaking has greatly enhanced crisis response during the pandemic, and it remains the key to improving child outcomes going forward.

RECOMMENDATION 1

Economic and social and policy for safeguarding children

The first recommendation of the Report focuses on opportunities to strengthen the ten pillars of child-sensitive economic and social policy that highlight opportunities for accelerating progress and addressing the structural reasons of weak resilience to crises. These opportunities are building on, and supporting, each other.



Public revenue to GDP ranges between 10 to 28 per cent.ⁱ



On average public expenditure amounts to **0.9 per cent to GDP and 3.5 per cent of the GDP on health and education** respectively in the region.ⁱⁱ

- **Pursuing fiscal responsibility and prudent debt management.** Prudent fiscal management is vital to underpin effective long-term investment planning. Increases in debt servicing costs put downward pressure on the availability of fiscal space and increase countries' vulnerability to global economic shocks such as the current constraints posed by global supply chain issues and rising interest rates. It is therefore essential that governments implement responsible, clear and ideally countercyclical fiscal strategies, providing sufficient fiscal buffers to maintain sufficient levels of investment during economic downturns. The Report shows evidence how high levels of sovereign debt weakened some countries' capacity to protect their population from the pandemic.
- **Implementing countercyclical macroeconomic policy.** This entails that in times of economic expansion governments reduce their debts, cut back spending and/or raise taxes, while central banks raise interest rates and reduce liquidity. This reduces the risk of inflation and allows authorities to implement fiscal expansion, stimulate growth, and sustain human development in times of recession or crisis. Low revenue to GDP ratio, high costs of existing debt service, and/or limited scope of social insurance have been debilitating factors during the recent crises.
- **Formalizing employment and expanding social insurance.** The formalization of employment and expansion of social welfare is a critical accelerator for poverty reduction, child and family-friendly progress in South Asia. The widely informal nature of employment in South Asia is a significant barrier to the expansion of tax revenue bases and effective countercyclical policy. The expansion of formalised employment, in conjunction with the expansion of social welfare, would reduce the current demands placed upon – and the associated cost of – social assistance in the current context. Governments may also want to consider opportunities posed by emergent work patterns following the COVID-19 crisis, particularly the digitization of work.
- **Promoting the paid employment of women.** It is in paid, formal employment that women face the largest labour-related disadvantage – addressing this barrier will boost poverty reduction and economic and social progress in South Asia. Lower incidence of a second wage earner in families with children may partially explain why households with children could face higher monetary poverty risks than those without children. Actions here also would help to expand gender-transformative family support policies.
- **Ensuring adequate levels of public revenues.** The region's high levels of economic growth can be harnessed to increase the tax revenue base in an equitable way. While the return to economic growth has been uneven in the wake of COVID-19, several countries in the region are currently growing faster than the global average. This boosts government finances, and consideration given to measures that can equitably raise the tax base will boost fiscal space and macroeconomic stability, and enable policies delivering cash and in-kind protection from the effect of the rising cost of living on vulnerable children and their families.
- **Investing in human capital, particularly through public social expenditures in line with the countries' development objectives.** National data and estimates by international agencies both attest that public spending on health, education and social protection is particularly low in the South Asia and rarely conforms with international recommendations. Robust evidence from the region demonstrates that investments into early childhood

development are among the most cost-effective ways to build a country's long-term human capital. Further fiscal space can be found through the reallocation of public revenues, utilizing cost-benefit analyses to identify appropriate areas for expenditure rationalization, supported by financial transparency and reporting.

- **Pursuing universal access to, and adequate quality of, basic social services.** These are the building blocks upon which sustainable economic growth depends. The WHO and World Bank Universal Health Coverage (UHC) Index shows that at the regional level less than 60 per cent of people across the region had access to a set of essential health interventions pre-COVID, with the UHC Index ranging from 37 (Afghanistan) to 67 per cent (Sri Lanka) in 2019. The pursuance of universal access to, and adequate quality of, basic social services is central policy of governments to meet their development goals. Central and local governments could prioritize high-value investments in social sectors and work with the private sector to deliver better results in health, nutrition, water and sanitation, education, family support and child protection services.
- **Harnessing the benefits of digital innovation with focus on equity.** South Asia's investment in digital technology has already shown results in protecting lives and livelihood delivering rapid support to households during the COVID-19 crisis. Indeed, the pandemic has greatly accelerated the use of digital technologies and children and women stand as the greatest potential beneficiaries of this trend. Moreover, the digitalization of technology helps "greening the economy" and increase resilience. It can build and protect human capital through improved service delivery, job creation and empower through inclusion and trust. Yet the digital divide, if left unaddressed, risks intensifying inequalities among children and between men and women. Gaps in cybersecurity adds further risks.
- **Reallocating revenues and engaging in multi-partner collaboration to address uneven development and exposure to global economic shocks.** Inequities in human development among different states or provinces within national boundaries, as well as between urban centres and rural areas, or better-off urban areas and slums, have been major factors in vulnerability to COVID-19. Spatial concentration of poverty could best be addressed by geographical targeting of transfers and other income support, investment in human capital as well as in infrastructure. Regional and urban development require close collaboration or coordinated action between the state, the private sector and development banks. Central governments can play an important role through redistributing public revenues from richer to poorer areas through intergovernmental transfers. Increased trade and economic integration between the nations of South Asia could yield powerful results, and here development banks and agencies for region-wide collaboration can play an important role.
- **Combatting climate change and environmental pollution.** To improve people's lives and insulate livelihoods and government financial planning from the increasing frequency and scope of climate shocks, government have already initiated action to reducing emissions and other forms of pollution, improving sanitation and waste management, and collaborating decisively in international efforts to address climate change. The recent floods in Pakistan have shone a light on the region's vulnerability to severe climate-related shocks, which have devastating implications both for children and their families, and for the economy and public finance. Governments are expected to adopt cost-effective climate change adaptation measures where possible, and to mitigate against environmental pollution which is a significant contributor to ill health among children.



RECOMMENDATION 2

Recognise the need for child recovery

2.1 Engage on learning recovery

COVID-19 IMPACTS ACROSS SOUTH ASIA:



School children collectively lost nearly 700 billion hours of in-person learning by the end of February 2022 due to school closures.ⁱⁱⁱ



78 per cent of 10-year-olds are predicted to lack minimum literacy, up from 60 per cent in 2019.^{iv}

Key opportunities and action items

- Follow the **RAPID framework for establishing a learning recovery program**:
 - » Reaching every child and retaining them in school
 - » Assessing current learning levels
 - » Prioritizing fundamentals
 - » Increasing catch-up learning
 - » Developing psychosocial health and well-being
- Consult with families and communities of out-of-school children to **identify and address the barriers** keeping children out of school.
- Once children are back in school, the **assessment of their learning** is important on two levels.
 - » First, education authorities need reliable information on lockdown learning losses to design policies and launch remedial strategies to address gaps.
 - » Second, diagnostic assessment is also needed at the individual level, as schools and teachers must determine where there are gaps in competencies.
- Take the opportunity to **strengthen and transform education for the future of learning**, with strategic investments such as:
 - » Redesigning curricula to provide foundational, digital, twenty-first century and socioemotional competencies, enhancing the quality and relevance of education
 - » Prioritizing pre-primary education for increased investment and attaining universal primary education
 - » Facilitating mother-tongue learning in the early years
 - » Strengthening data systems to detect, register and target support for the most marginalized
 - » Developing a more modular approach to secondary education to foster greater flexibility for students, including online or self-study courses, with equivalence and certification processes
 - » Including good-quality, contextualized and flexible low-technology and no-technology solutions to reach those who are not yet connected
 - » Capacitating and empowering teachers, revising teaching standards and competency frameworks, improving teacher selection processes, and enhancing related legal and accountability structures.

RECOMMENDATION 2

Recognise the need for child recovery

2.2 Engage on orphanhood, maternal mortality, and access to health



Despite progress, an estimated **177 million children** were living in households with income-consumption under the national poverty lines pre-COVID-19.^v

COVID-19 IMPACTS ACROSS SOUTH ASIA:



At least **300,000 children** lost one or both parents to COVID-19 during the first two years of the pandemic, according to conservative estimates.^{vi}



An estimated **11,000 more women** lost their lives to complications from pregnancy and/or childbirth in 2020 alone due to health service disruptions.^{vii}

Key opportunities and action items

- Address health risks through better preventive care and accelerate progress towards universal health coverage
 - » Increase public expenditures on **primary health care**. This would deliver important efficiency gains through prevention, health awareness and access to basic services.
 - » **Address financial barriers** for patients – payment for services and medicines, as well as indirect expenses such as transportation and opportunity costs while seeking care
- Re-focusing attention on **child-sensitive social protection**:
 - » Adopt social protection floors that build on a **preventative lifecycle approach to risks for children and adults** and benefits from social insurance, as well as assistance enabling stronger responses to idiosyncratic and aggregate risks
 - » Integrate such floors with **shock-responsive systems using digital registries**
 - » Scale up **decisive support for the first 1,000 days of life**, including maternal and child health as well as nutrition
 - » Enhance **support to orphans and other especially vulnerable children** in a coherent fashion
 - » Review and adjust cash and non-cash support regularly and when economic adjustment policies require
- Expand maternal health care and nutrition **where and when it is needed most**
 - » Maternal mortality risks are the highest for those in rural and tribal villages far from access to essential care, in emergency settings; for those who are poor or malnourished, those with little or no education; and for adolescents. These **more vulnerable groups should be prioritized** for increased support and services.
 - » Maternal mortality rates often shoot up during emergencies, crises and service disruptions. Rising food and fuel prices may make good antenatal health care and nutrition harder to attain for many. Governments should increase efforts to **anticipate and mitigate these impacts**.

RECOMMENDATION 2

Recognise the need for child recovery

2.3 Engage on mental health

COVID-19 IMPACTS ACROSS SOUTH ASIA:



6.6 million new cases of anxiety disorders among children are estimated to have arisen during the pandemic.^{viii}



Nearly **6 million new cases of major depressive disorders** among children are estimated to have arisen during the pandemic.^{viii}

Key opportunities and action items

- The **universal health care agenda must fully embrace mental health** in the wake of the COVID-19 crisis. This entails making specialised mental health service a **major priority area** for investment and **mainstreaming mental health into all primary health** interventions with arrangements for monitoring and referral, including in the area of maternal and child health services.
 - » Countries could seize the opportunity of post-lockdown awareness of the issue and **develop national action plans** for promoting prevention in mental health and delivering comprehensive and integrated services in community-based settings. These could take inspiration from the WHO's Comprehensive Mental Health Action Plan 2013–2030.
 - » Countries and communities need to **collect information that enables timely action** focused on minimizing risks and strengthening protection. Evaluations can help identify appropriate interventions and stimulate support from a broad range of stakeholders in child development.
- Throughout childhood, from the antenatal stage to late adolescence, nurturing and supportive parenting is one of the most important protections of mental health. Interventions that **promote early childhood development, nurturing care and responsive caregiving** are crucial. Evidence shows that such interventions have great preventative capacity among boys and girls, often accompanied by curative impacts that ease the symptoms of depression among young mothers.
- **Mental health care should be mainstreamed into community health services.** Community health workers and social care workers, as well as teachers, should receive training in recognizing early symptoms of depression and anxiety in children, young mothers and parents, and community health centres should provide professional mental health care to children and their families.
- **Whole-school preventative interventions** that consider the wider household and community context, and which are delivered by mental health professionals rather than teachers, hold greater promise than narrower interventions at preventing anxiety and depression among students.
- To have a significant impact on mental health, it is not necessary that interventions include specific mental health components. **Livelihood-strengthening programmes** among ultra-poor households have been shown to benefit mental health as well.

RECOMMENDATION 2

Recognise the need for child recovery

2.4 Engage on nutrition

COVID-19 IMPACTS ACROSS SOUTH ASIA:



6.6 million more children experienced wasting from acute malnutrition over 2020-2022, according to moderate-scenario.^{ix}



780,000 more children experiencing stunting from chronic malnutrition over 2020-2022, according to moderate-scenario.^{ix}

Key opportunities and action items

- **Use newly emerging platforms to increase coverage** of maternal and child health and nutrition services
 - » Improved outreach on immunization will create a **platform that should also be used for delivering essential and emergency nutrition interventions** and other services for pregnant women and young children where needed.
 - » Accelerated digitalization arising from the pandemic response should be leveraged to deliver primary health and nutrition services better and more efficiently. **Digital health systems should include information on the nutritional status of mothers and children** as well as geographical information. This way, they can help with intersectoral coordination and outreach – for example, for improved targeting of nutrition-specific and nutrition-sensitive social sector programmes.
- Access to **quality supplementary food for pregnant women** should be of particular concern in countries undergoing high inflation or experiencing food shortages, because there is a real risk that maternal undernutrition, including anaemia, will rapidly increase. This could then drive low birthweight, stunting and wasting in early childhood.
- In countries with significant malnutrition, **high-impact nutrition interventions across the life cycle** are needed, with a special focus on improving adolescent and maternal nutrition and diets of children.
- When preventive actions fail, it is essential that negative outcomes, such as maternal anaemia or severe wasting among children, be **detected and treated early**. However, the capacities of programmes in the region that could do this may require improvement: for example, through **strengthening linkages** among health screenings, nutritional assessment, and nutritional support for pregnant women. Early detection and treatment may also benefit from **improving collaboration** at the local level between health workers and social workers, or between civil society representatives and authorities.
- Inflation is harder on families with children: they tend to earn less on average, and a higher proportion of their spending goes to food. When social assistance programmes for children and pregnant women distribute benefits in cash, periods of high inflation mean that the amount and quality of food that families can buy with their benefits can shrink quickly – unless the benefits are adjusted regularly for inflation. Accordingly, **the local prices of nutritious food items and the quality of diets should be monitored to enable action**.
 - » The recent initiative of Ashoka University in India – a **daily food price index** to track inflation in retail and wholesale food markets in real time – shows how monitoring could be done at the local level.
 - » Strengthening nutrition surveillance and **systematic analysis to identify hotspots** within countries that are more vulnerable to impacts in food security, poverty and nutrition can also help in designing preventative programmes and interventions.

RECOMMENDATION 3

Data, a crucial enabler of evidence based policy

Underpin systemic reforms, action plans, social sector monitoring and comprehensive situation analyses with **updated and improved evidence**. Enhancing funding to social statistics should enable representative surveys, censuses, administrative data management information systems implemented at greater frequency and using innovative methods. Evidence-based policymaking has greatly enhanced crisis response during the pandemic, and it remains the key to improving outcomes going forward.

Key opportunities and action items

- **There is a need to systematically and routinely collect data that measure the issues that children are facing to support effective evidence-based policy.** The incomplete coverage of child-sensitive data and the long intermittent period between representative statistical surveys hinders the breadth and robustness of analysis for effective policy responses. This was acute during the Covid-19 pandemic: in 2020, the impact upon children relied heavily on assumptions to fill gaps left by a dearth of data, constraining governments' ability to take properly informed responsive action.
- **The digital revolution and the collection of regular child-specific data can support the development of more advanced analytical tools that support the timeliness of well-informed policy responses that affect children.** The timely collection of robust and comprehensive statistical data will create the opportunity to develop modelling tools that can, for example, be used to estimate the changing demand for (and cost of) essential social services. This will help to support planning and reporting throughout the public financial management cycle and can strengthen the implementation of outcomes- and/or performance-based budgeting.
- **The immediate open publication of such child-sensitive data will allow governments to harness the expertise of national academics and (inter-)national organisations with the generation of policy-specific analysis.** By ensuring that datasets are publicly released in a timely manner, there is an opportunity for skilled academics and organisations to conduct and share timely policy-specific analysis. This will allow governments to effectively utilize their skills and expertise, complementing their own, to support their policy-making decisions.
- **Enhancing qualitative and quantitative data collection and publication on the following areas would greatly support child-sensitive policy responses:**
 - » The number of children who have lost their caregivers, their situation, social background and support needs
 - » The number of young children and adolescent girls and boys who are experiencing mental health issues, the type of problems they manifest and experience, and their social background and support needs
 - » The number of children who are not growing to their potential because of insufficient food intake, poor hygiene, and lack of stability in care and support – as well as the deeper underlying causes of these outcomes
 - » The number of children who do not return to schools or cannot make progress in learning, together with information about their individual characteristics, household and community backgrounds, and support needs.

Notes

- i. International Monetary Fund (IMF). World Economic Outlook Database. 2021.
- ii. United Nations Children's Fund. State of World's Children, 2021.
- iii. Education: From School Closure to Recovery (dashboard), COVID-19 Recovery, United Nations Educational, Scientific and Cultural Organization, Paris, <https://www.unesco.org/en/covid-19/education-response>.
- iv. World Bank, UNESCO (United Nations Educational, Scientific and Cultural Organization), UNICEF (United Nations Children's Fund), FCDO (Foreign, Commonwealth, and Development Office, UK), USAID (United States Agency for International Development), and BMGF (Bill and Melinda Gates Foundation). 2022. 'The State of Global Learning Poverty: 2022 Update'. Conference Edition, 23 June, World Bank, Washington, DC. <https://www.worldbank.org/en/topic/education/publication/state-of-global-learning-poverty>.
- v. UNICEF calculations based on poverty headcount ratio at national poverty lines (% of population) (dashboard), World Bank, Washington, DC, <https://data.worldbank.org/indicator/SI.POV.NAHC>; Save the Children and UNICEF 2021.
- vi. See Table 3.2 in the main Report (UNICEF 2022. 'Responding Today for Tomorrow Child friendly economic and social policies in times of the pandemic and price inflation in South Asia, 2022, Regional Office for South Asia, United Nations Children's Fund, Kathmandu, Nepal); as well as Hillis, Susan D., H. Juliette T. Unwin, Yu Chen, Lucie Cluver, Lorraine Sherr, Philip S. Goldman, Oliver Ratmann, et al. 2021. 'Global Minimum Estimates for COVID-19-Associated Orphanhood and Deaths among Caregivers: A Modelling Study'. Lancet, 398 (10298): 391–402 for the methodology applied.
- vii. SickKids (Centre for Global Child Health). 2021. 'Direct and Indirect Effects of COVID-19 Pandemic and Response in South Asia'. March, Regional Office for South Asia, United Nations Children's Fund, Kathmandu, Nepal. <https://www.unicef.org/rosa/reports/direct-and-indirect-effects-covid-19-pandemic-and-response-south-asia>.
- viii. See Chapter 3 of the main report (UNICEF 2022. 'Responding Today for Tomorrow Child friendly economic and social policies in times of the pandemic and price inflation in South Asia, 2022, Regional Office for South Asia, United Nations Children's Fund, Kathmandu, Nepal), as well as COVID-19 Mental Disorders Collaborators. 2021. 'Global Prevalence and Burden of Depressive and Anxiety Disorders in 204 Countries and Territories in 2020 Due to the COVID-19 Pandemic'. Lancet 398 (10312): 1700–1712.
- ix. Osendarp, Saskia, Jonathan Kweku Akuoku, Robert E. Black, Derek D. Headey, Marie T. Ruel, Nick Scott, Meera Shekar, et al. 2021. 'The COVID-19 Crisis Will Exacerbate Maternal and Child Undernutrition and Child Mortality in Low- and Middle-Income Countries'. Nature Food, 2(July): 476–484. <https://doi.org/10.1038/s43016-021-00319-4>.

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