In 2017, South Asia was impacted by large-scale natural and human-caused disasters. One of the worst floods in decades affected more than 40 million people and killed over 2,000 people in Bangladesh, India and Nepal.1 In Nepal, which is still recovering from the 2015 earthquake, 1.7 million people were affected, primarily in the southern Terai plain, exacerbating the already vulnerable situation.2 Sri Lanka suffered one of the worst floods and landslides since 2003, with more than 700,000 people temporarily displaced into camps.3 Although some parts of India experienced severe flooding that killed more than 1,000 people, 59 per cent of the country received below average rainfall and continue to face severe drought risks.4 At the end of August, thousands of Rohingya fled into Bangladesh following large-scale violence in Myanmar’s northern Rakhine state. This triggered one of the fastest growing humanitarian crises in the world, with 623,000 Rohingya, half of whom are children, having fled the country by November 2017.5 Afghanistan remains fourth on the global risk index6 and home to one of the most violent armed conflicts and protracted crises in the world. Malnutrition is a major challenge in Afghanistan, where 1.3 million children under 5 require treatment for acute malnutrition, and polio transmission remains endemic in the eastern part of the country.7

Regional humanitarian strategy

The Regional Office for South Asia will continue to provide technical support to fulfil the UNICEF Core Commitments for Children in Humanitarian Action, particularly in the areas of nutrition; health; water, sanitation and hygiene (WASH); education; and child protection. Country offices will be supported to develop skills in the areas of partnership management in emergencies, capacity building for risk-informed programming, emergency cash transfer, emergency preparedness and response, and staff security, with a specific emphasis on strengthening sub-national partner capacities. The Regional Office will also promote peer exchanges and cross-country learning for staff and partners, including through sourcing high-value expertise in academia and think tanks. The recent partnership with the South Asian Association for Regional Cooperation Disaster Management Centre will continue to be pursued, focusing on issues related to child-centred disaster risk reduction and child-sensitive climate change adaptation. The Regional Office will work with regional partners to support country office initiatives related to the implementation of the Sendai Framework for Disaster Risk Reduction regional plan of action. The collaboration with the Regional Office for South Asia Education Section will focus on strengthening comprehensive school safety in the region. In 2018, the Regional Office will roll out the new Emergency Preparedness Procedure and strengthen country capacities for emergency preparedness in the context of earthquakes, monsoon floods and seasonal droughts. UNICEF will also maintain regional technical capacity to support the mitigation and management of risks to staff and assets across the region, focusing on ‘staying and delivering’ in high-threat contexts. The overall approach is to create synergy across the Regional Office’s functions to maximize a comprehensive package of technical guidance and support to UNICEF country offices and partners in emergencies.

Regional results in 2017

As of 31 October 2017, UNICEF had US$6.9 million available against the US$7.7 million appeal (90 per cent funded).8 The Regional Office supported country offices and government partners through regional capacity development initiatives, including on emergency preparedness and risk-informed programming. Emergency preparedness response training was provided to staff and partners in Afghanistan, Bangladesh, Bhutan and Nepal, including through an inter-agency contingency planning initiative in Bhutan. In addition, training on child-centred disaster risk reduction was conducted for staff members in Afghanistan, Bangladesh, India, the Maldives, Nepal and Pakistan. The Regional Office also provided technical support on security risk mitigation and management to UNICEF staff and assets across the region. Multi-sectoral regional emergency surge support covering overall coordination, WASH, health, nutrition, education, child protection, evaluation, information and communication technology and social policy was extended to Bangladesh in early September to support the response to the influx of Rohingya refugees from Myanmar, which was declared a Level 3 emergency. Actions undertaken with this additional support included the provision of safe water and sanitation services to 182,000 people and the implementation of measles and cholera vaccination campaigns benefitting 135,000 and 900,000 people, respectively.
Pakistan

Pakistan is currently facing a number of natural and human-caused disasters. Khyber Pakhtunkhwa (KP) and the Federally Administered Tribal Areas (FATA) are experiencing protracted, large-scale humanitarian situations, including significant population movement and displacement. In 2017, humanitarian assistance continued to focus on supporting displaced populations in the FATA regions. The Government and humanitarian partners facilitated the return of 42,225 families between January and September, 14 per cent of which were female-headed households. In total, 262,623 families have returned to their places of origin in FATA since March 2015. However, 32,455 families are still displaced and living in host communities and will continue to require humanitarian support. The risks that these vulnerable populations face are made worse by limited access to basic services, especially in FATA, where protracted instability and humanitarian access challenges have negatively impacted service delivery and infrastructure. Recent inter-cluster assessments conducted in FATA show that 80-90 per cent of educational facilities and health centres have been completely damaged, approximately 50 per cent of water supply schemes are non-functional and 70 per cent of the population (1,103,017 people) lacks access to safe drinking water.

Humanitarian strategy

In its capacity as Cluster Lead Agency for WASH and nutrition, co-lead for education and sub-cluster lead for child protection, UNICEF Pakistan is facilitating coordination among the Government and non-governmental organizations in KP and FATA. During the fourth quarter of 2017, UNICEF with the Government of Pakistan, the United Nations, the World Bank and other humanitarian partners conducted a vulnerability assessment in FATA with the objective of formulating a joint analysis of both the immediate and longer-term problems and the development of collective outcomes to guide interventions and investment in a three-year transition period. The preliminary vulnerability assessment report shows that a significant number of internally displaced persons remain displaced due to lack of services, opportunities and protection. Humanitarian needs, specifically related to health, psychosocial support, food and nutrition, education, protection and WASH, are significant among returnees. UNICEF will continue to strengthen the capacities of partners, including government partners, on emergency preparedness and child-centred disaster risk reduction to reduce and mitigate risks and vulnerabilities affecting children. To improve routine immunization coverage and to sustain the gains made towards polio eradication in FATA, the synergy between the Expanded Programme on Immunization and the Polio Eradication Initiative will be continued through closer collaboration with polio emergency operation centres.

2018 programme targets:

Nutrition (FATA and Sindh):

- 34,377 children admitted to therapeutic feeding programmes for treatment and management of severe acute malnutrition.
- 173,380 pregnant and lactating women in affected areas receiving multiple micronutrient supplementation (or iron and folic acid)
- 188,050 children aged 6 to 59 months in affected areas receiving multiple micronutrient supplementation

Health:

- 140,000 children aged 6 months to 10 years vaccinated against measles
- 16,000 deliveries assisted by skilled birth attendants
- 32,000 women provided with antenatal care
- 210,000 people reached through health education sessions conducted during mother and child weeks/days

WASH:

- 150,000 people provided with access to water as per agreed standards
- 100,000 people provided with access to appropriately designed toilets
- 150,000 people provided with key messages on safe hygiene practices

Child protection:

- 15,518 children with access to preventive and protective services, including recreational support
- 15,518 children and 13,761 caregivers reached through child protection awareness-raising activities, including mine-risk education and birth registration

Education:

- 18,800 school-aged children, including adolescents, enrolled in school (still functioning, reopened and/or temporary facilities)
- 60 schools supported in the improvement of safe and secure environments
- 18,800 children with access to humanitarian education programmes that incorporate psychosocial support

Pakistan results from 2017

As of 31 October 2017, UNICEF had US$3.6 million available against the US$26.5 million appeal (14 per cent funded). Due to inadequate funding and limited humanitarian access, UNICEF Pakistan was only partially able to achieve its humanitarian targets. Despite the funding challenges, the health sector registered 146 per cent coverage of measles vaccination due to strong government support, effective collaboration among immunization and polio teams, and extensive social mobilization. However, performance was very low against almost all other programme targets due to lack of funds, the limited capacity of implementing partners, lengthy administrative procedures and the inaccessibility of districts due to safety and security challenges. By October, UNICEF and Nutrition Working Group partners had reached 22,800 of the targeted severely malnourished children (62 per cent), and 152,394 pregnant and lactating women (40 per cent) and 120,703 children aged 6 to 59 months (29 per cent) in affected areas with multiple micronutrient supplementation. Pakistan has recorded significant progress towards ending the transmission of wild poliovirus, reporting only five cases in 2017 as of November. In FATA, polio cases have declined from 179 in 2014 to zero in 2017 (16 months polio free).
Nutrition received less than 12 per cent of the appeal, and as a result, most of the targets were underachieved. Health received 15 per cent of the appeal. Apart from the measles target, which was exceeded, all other indicators were partially achieved. Water, sanitation and hygiene received more than the appeal, and as a result, most of the targets were achieved. Child protection received 93 per cent of the appeal. However, limited access and capacity hampered the achievement of the targets. Education received 90 per cent of the appeal. However, due to constrained humanitarian access, the targets were partially achieved.

<table>
<thead>
<tr>
<th></th>
<th>2017 cluster target</th>
<th>2017 cluster results</th>
<th>2017 UNICEF targets</th>
<th>2017 UNICEF results</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>NUTRITION</strong></td>
<td></td>
<td></td>
<td></td>
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<tr>
<td>Children aged 6 to 59 months with severe acute malnutrition admitted to therapeutic care for specified period of time</td>
<td>36,900</td>
<td>22,800</td>
<td>36,900</td>
<td>22,660</td>
</tr>
<tr>
<td>Pregnant and lactating women in affected areas registered in a multi-micronutrient supplementation programme receiving multi-micronutrient supplement (or iron and folic acid)</td>
<td>385,700</td>
<td>152,394</td>
<td>385,700</td>
<td>151,745</td>
</tr>
<tr>
<td>Children aged 6 to 59 months in the affected areas receiving multi-micronutrient supplement</td>
<td>419,800</td>
<td>120,703</td>
<td>419,800</td>
<td>120,239</td>
</tr>
<tr>
<td><strong>HEALTH</strong></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Children aged 6 months to 10 years old vaccinated against measles</td>
<td>222,070</td>
<td>324,717</td>
<td></td>
<td></td>
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<tr>
<td>Deliveries assisted by skilled birth attendants</td>
<td>15,175</td>
<td>3,841</td>
<td></td>
<td></td>
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<tr>
<td>Women provided with antenatal care</td>
<td>30,350</td>
<td>11,481</td>
<td></td>
<td></td>
</tr>
<tr>
<td>People reached through health education sessions during mother child weeks/days</td>
<td>156,200</td>
<td>31,840</td>
<td></td>
<td></td>
</tr>
<tr>
<td><strong>WATER, SANITATION AND HYGIENE</strong></td>
<td></td>
<td></td>
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<td></td>
</tr>
<tr>
<td>People provided with access to water as per agreed standards (context specific)</td>
<td>406,200</td>
<td>216,104</td>
<td>203,100</td>
<td>113,514</td>
</tr>
<tr>
<td>People provided with access to appropriately designed toilets (including self-made toilets through the provision of sanitation kits)</td>
<td>286,875</td>
<td>143,400</td>
<td>56,354</td>
<td></td>
</tr>
<tr>
<td>People provided with key messages on safe hygienic practices</td>
<td>596,628</td>
<td>298,300</td>
<td>102,046</td>
<td></td>
</tr>
<tr>
<td><strong>CHILD PROTECTION</strong></td>
<td></td>
<td></td>
<td></td>
<td></td>
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<tr>
<td>Children who have accessed child protective services</td>
<td>108,020</td>
<td>51,850</td>
<td>7,427</td>
<td></td>
</tr>
<tr>
<td>Women who have accessed child protective services</td>
<td>40,235</td>
<td>24,141</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Children reached through child protection awareness raising activities</td>
<td>21,604</td>
<td>13,000</td>
<td>18,784</td>
<td></td>
</tr>
<tr>
<td>Women reached through child protection awareness raising activities</td>
<td>10,059</td>
<td>6,035</td>
<td>4,906</td>
<td></td>
</tr>
<tr>
<td>Men reached through child protection awareness raising activities</td>
<td>10,606</td>
<td>6,964</td>
<td>3,580</td>
<td></td>
</tr>
<tr>
<td><strong>EDUCATION</strong></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>School-aged children, including adolescents, enrolled in school (including in schools in affected areas still functioning, re-opened schools and/or temporary facilities established)</td>
<td>130,630</td>
<td>78,400</td>
<td>52,560</td>
<td></td>
</tr>
<tr>
<td>Schools supported to have improved safe and secure environments</td>
<td>1,050</td>
<td>436</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Children with access to humanitarian education programmes that incorporate psychosocial support</td>
<td>130,630</td>
<td>78,400</td>
<td>52,560</td>
<td></td>
</tr>
</tbody>
</table>

Results are through 31 October 2017 unless otherwise noted.

Funding requirements

The Regional Office for South Asia requires US$25,868,190 for regional and country-level humanitarian activities, disaster risk reduction and climate change adaptation. This includes US$18,168,190 for Pakistan, including US$16,330,573 to respond to the ongoing displacement and refugee returns in KP and FATA, US$1,425,597 for the nutrition emergency in Sindh province, and US$588,600 for emergency preparedness activities. The regional funding requirement of US$7,700,000 will be used for contingency preparedness and response support for country offices in need, as well as regional technical support and staff security.


4 Hindustan Times, 13 September 2017.


8 Available funds for the Regional Office for South Asia include US$5.4 million raised against the current appeal and US$2.1 million carried forward from the previous year.


10 Ibid.

11 Inter-cluster assessment mission reports for North Waziristan Agency (10-13 January 2017 and 14-18 March 2017) and Orakzai Agency (9-12 March 2017).

12 Available funds for UNICEF Pakistan include US$604,384 raised against the current appeal and US$3 million carried forward from the previous year.

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