



@UNICEF Pakistan 2017

PAKISTAN

Humanitarian Situation Report

SITUATION IN NUMBERS

01 January - 30 June 2017

- 1,600,000**
of children affected out of
- 3,200,000**
of total affected population in conflict areas
(Humanitarian Strategic Plan, 2017)
- 45,500**
of families still displaced in KP & FATA
(UNOCHA, June 2017)
- 259,400**
Families returned to Govt. declared safe areas in FATA
(UNOCHA, June 2017)
- 29,200**
of registered IDP families returned in 2017
(UNOCHA, June 2017)

UNICEF Appeal 2017
US\$ 26.6 million

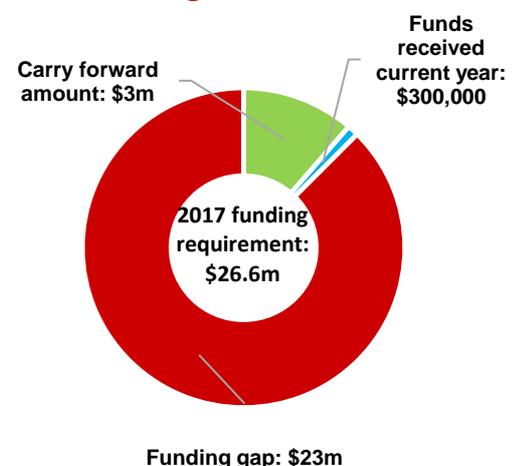
Highlights

- In 2017 UNICEF humanitarian support continued for displaced and returning families in Khyber Pakhtunkhwa (KP), Federally Administered Tribal Areas (FATA), and the drought-affected population in Sindh. A total of 29,192 families returned to FATA since January 2017, while 45,488 families remained displaced.
- UNICEF's humanitarian response is critically underfunded, impacting required scale up and achievement of results especially health (98 per cent), education (97 per cent) and nutrition (91 per cent) sectors. Against an overall funding requirement of US\$26.6 million, UNICEF has only received US\$3.3 million to support the humanitarian response.
- Despite an overall funding gap of 88 per cent, UNICEF was able to utilise previous year's funds as well as leverage Government and partners' resources to achieve results for its humanitarian interventions. At the midyear stage, the support from UNICEF and its partners has resulted in the vaccination of over 324,000 children (6 months to 10 years) for measles, provided over 51,000 people with access to water, ensured that nearly 17,000 children with severe acute malnutrition (SAM) are receiving appropriate therapeutic treatment, given 16,665 children access to education services, and provided 18,216 children access to protective services.

UNICEF's Response with partners

UNICEF and Cluster Response for the KP & FATA Complex Emergency and Sindh Drought (30 June 2017)	UNICEF		Cluster	
	UNICEF Target	Cumulative results (#)	Cluster Target	Cumulative results (#)
Indicator				
WASH: Number of target population provided with access to water as per agreed standards (context specific)	203,100	51,064	406,200	122,968
Education: Number of school-aged children including adolescents enrolled in schools (including in schools in affected areas still functioning, re-opened schools and/or temporary facilities established)	78,400	16,665	130,630	25,980
Health: Number of children (aged 6 months to 10 years) vaccinated against measles	222,070	324,717		
Nutrition: Number of targeted children 6-59 months with SAM admitted to therapeutic care for specified period of time	36,900	16,964	36,900	17,104 ¹
Child Protection: Number of targeted children who accessed child protective services	51,850	18,784	21,604	22,074

Funding Status 2017*



*Funds available includes funding received for the current appeal year as well as the carry-forward from the previous year.

¹ Cluster and UNICEF targets are the same but cluster progress is higher as it includes achievements from cluster partner, Action Against Hunger, whose targets are not reflected in the overall cluster targets of 2017 HSP and Humanitarian Action for Children (HAC) as these were not available/determined at the original planning phase.

Situation Overview & Humanitarian Needs

According to the 2017 Humanitarian Strategic Plan (HSP)² it is estimated that 3.2 million people, of whom 1.6 million are children, are in need of humanitarian assistance in Pakistan. Major humanitarian situations include the displacement and return of families in KP and FATA, and the drought-like situation in some districts of the Sindh province. Overall the HSP 2017 identified 780,000 disaster-affected people in need of education interventions, 1.2 million for health, 530,000 for nutrition, 1.1 million for WASH and 1.4 million for protection.

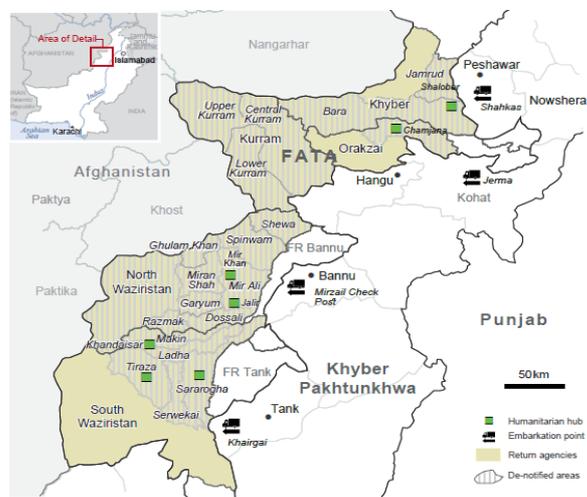
Complex Emergency in KP & FATA: During 2017, humanitarian assistance continued to focus on supporting displaced populations living in hosting areas and those returning to their areas of origin in FATA.

The Government and humanitarian partners facilitated the returns of 29,192 families³ from January to June, of which 15 per cent were female headed households. Since 16 March 2015, a total of 259,360 families have returned to their places of origin in FATA. However, 45,488 families are still displaced, all living in host communities, and continue to require humanitarian support. The risks that these vulnerable populations face are worsened by the limited access to basic services, especially in FATA where protracted instability and ensuing access issues have negatively impacted the service delivery capacity and infrastructure.

Four inter-cluster assessments were conducted between January to June 2017 in FATA (North Waziristan, Orakzai and Kurram Agencies) to collect key information on time-sensitive and life-saving humanitarian needs, and to plan the strategic humanitarian response. In Orakzai, findings showed that 80-90 per cent of the educational facilities and health centres have been completely damaged and lack water and sanitation infrastructure. About 29 health facilities were reported damaged, and there is a severe shortage of trained female healthcare staff. Meanwhile in North Waziristan, 35-40 per cent of the education facilities in areas visited by the assessment mission team were non-functional and 60 per cent lacked water, sanitation and hygiene facilities. Approximately, 50 per cent of water supply schemes are non-functional and 70 per cent of the population are deprived of access to safe drinking water.

Drought in Sindh: Pakistan is also experiencing the devastating effects of climate change as demonstrated by the severe drought in parts of Sindh province since 2013. The drought situation has exacerbated the nutritional status of women and children in affected areas. The Sindh Multiple Indicator Cluster Survey (MICS) 2014 shows alarming figures with an infant mortality rate of 82 per thousand live births.⁴ Additionally, 190,000 children and 75,000 pregnant and lactating women in Sindh are malnourished and are in need of humanitarian support.⁵

A joint UN mission was conducted in February 2017 to assess the situation in Tharparkar, Umerkot and Sanghar districts of Sindh. The mission report recommended continuation and scale up of multi-sectoral actions to effectively mitigate the consequences of drought-like situation, which can be further aggravated by the absence of monsoon rainfall this year.



Estimated Affected Population in Need of Humanitarian Assistance (Estimates calculated based on initial figures from HSP 2017)

Start of current humanitarian response: 01 January 2017

Affected Population	Total	Male	Female
Total Affected Population	3,200,000	1,568,000	1,632,000
Children Affected (Under 18)	1,600,000	784,000	816,000
Children Under Five	544,000	266,560	277,440
Children 6 to 23 months	224,000	109,760	114,240
Pregnant women	128,000	--	128,000

² UNOCHA, *Pakistan Humanitarian Strategic Plan (HSP) 2017*, January 2017.

³ UNOCHA, 'FATA Return Weekly Snapshot (from May 26, 2017 to June 1, 2017)': <https://www.humanitarianresponse.info/en/operations/pakistan/infographic/pakistan-fata-return-weekly-26-01-june-2017-humanitarian-snapshot>

⁴ Bureau of Statistics, Sindh, 'Multiple Indicator Cluster Survey', 2014, <http://sindhbos.gov.pk/mics-report/>

⁵ UNOCHA, *Humanitarian Needs Overview 2017*, October 2016.

Possible humanitarian situation: Monsoon rainfall, and subsequent flooding, is a key risk for Pakistan as per the UNICEF's Emergency Preparedness and Response Plan for 2017. Humanitarian situations arising out of earthquake and/or conflict are also a probability. UNICEF Pakistan has therefore prepared 22 contingency Programme Cooperation Agreements for KP, 9 for Sindh, 5 for Punjab, and 2 for Balochistan and Islamabad Capital Territory based on susceptibility to risk.

Humanitarian Leadership and Coordination

UNICEF actively participates in the Humanitarian Country Team (HCT) at the national level, and inter-agency planning and coordination forums at provincial levels. At the provincial level UNICEF is a member of the Humanitarian Regional Team (HRT), Return Task Force and Policy and Strategy Group in KP.

UNICEF is a key partner along with the Government and other humanitarian partners including UN agencies and national and international NGOs, in the humanitarian cluster mechanism in Pakistan, and is supporting delivery of a coordinated and coherent humanitarian response in KP and FATA. UNICEF is the cluster lead agency for WASH, nutrition, education; and sub-cluster lead agency for child protection under the protection cluster. With the closure of camps and reduction in need of temporary camp-based assistance the UN agencies including UNICEF are supporting the Government and partners in setting up a Working Group modality and possible deactivation of clusters by the end of this year, provided no major humanitarian situation occurs. UNICEF actively and regularly participates in the OCHA-led Inter Cluster Coordination Mechanism (ICCM) meeting which lead strategic and cross-sectoral coordination of humanitarian response. In Sindh province, UNICEF is supporting the Nutrition Working Group to lead and coordinate the implementation of ongoing nutrition response in Sindh along with the Government and other humanitarian partners.

UNICEF Pakistan with UNDP, FAO and WFP, also developed a joint programme on community resilience and recovery to support the FATA Sustainable Return and Rehabilitation Strategy.

Humanitarian Strategy

Humanitarian partners in Pakistan including UNICEF are coordinating to deliver a multisector response that focuses on strengthening Government's capacity to deliver critical life-saving services as well as strengthening linkages with early recovery and overall development programmes in the affected areas to help build disaster resilient systems and communities. The humanitarian response in Pakistan is guided by the Humanitarian Needs Overview (HNO) 2017 and the inter-agency Humanitarian Strategic Plan for Pakistan (HSP) 2017. The HSP 2017 has been endorsed by the HCT with a total of US\$339 million required for 2017⁶ to address the critical humanitarian needs of 2.2 million people out of the 3.2 million in need. The targeted population is being supported through different approaches including implementation in collaboration with government line departments, as well as direct implementation with national and international NGOs and UN agencies. Through active coordination between all key stakeholders, UNICEF seeks to ensure there is no duplication in the response and that all critical gaps are covered.

In 2017, the humanitarian response in Pakistan is focusing mainly on vulnerable groups, including children, female-headed households, the elderly, persons with disabilities, and minorities. Protection and gender mainstreaming remain a key priority across the humanitarian response. Addressing malnutrition among affected populations is also being prioritized, and the HCT will continue to strengthen preparedness for drought and other natural disasters.

UNICEF Pakistan reflected the country's humanitarian needs, priorities and funding requirement under the Regional Office for South Asia (ROSA) Humanitarian Action for Children (HAC) 2017. UNICEF requires US\$26.6 million⁷ in 2017 of which **US\$3.3 million** is available including US\$3 million in carry-over funds from 2016. The **funding gap is 88 per cent**, which is hampering the provision of critical life-saving interventions at the required scale. Despite this huge funding gap UNICEF has been able to make good progress against the response plan by leveraging its own core and other resources which link humanitarian assistance to early recovery and development programmes. Similarly UNICEF's convening and coordination roles helped leverage Government and partners' resources to support delivery of needed humanitarian interventions in affected areas. This included preparedness, DRR and resilience programmes to build longer-term capacity of both communities and Government to respond to similar future challenges in a sustainable manner.

Summary Analysis of Programme Response

Nutrition

UNICEF and partners supported key nutrition interventions for displaced and returning populations in KP and FATA and people affected by drought in Sindh, with particular focus on children and women. In the first half of the year, 16,964 or 46 per cent of targeted 36,900 SAM children were admitted to therapeutic care programmes while sustaining high quality of treatment outcomes consistent with Sphere standards with over 90 per cent cure rate. Additionally, 88,447 children aged 6-59 months, – (44,297 girls and 44,150 boys), or 21 per cent of the targeted 419,800, were provided with multiple

⁶ UNOCHA, *Pakistan Humanitarian Strategic Plan (HSP) 2017*, January 2017.

⁷ UNICEF, 'Humanitarian Action for Children 2017': [https://www.unicef.org/appeals/files/2017_ROSA_HAC\(1\).pdf](https://www.unicef.org/appeals/files/2017_ROSA_HAC(1).pdf)

micronutrient (MM) supplements in KP, FATA and Sindh. However, there are critical resources constraints (gap: 91 per cent) and immediate funds are required to meet the humanitarian needs.

Displacement and returns in KP & FATA

To promote optimal nutrition practices, a Nutrition in Emergency training was completed for 21 Government healthcare providers including Lady Health Visitors, Lady Health Workers (LHWs) and doctors from FATA, UNICEF and partners⁸. These providers were supporting the nutrition response at 257 functional nutrition sites housed in government health facilities in KP and FATA, where 227,533 girls and 225,146 boys under five were screened through on-site and outreach activities for malnutrition and referred to appropriate therapeutic programmes. This approach not only addresses the immediate needs, but also strengthens the Government's systems and capacity for sustainable service delivery.

In the first half of 2017, 13,613 SAM children (6,762 boys and 8,580 girls), or 63 per cent of planned 21,700 children, were provided life-saving nutrition treatment while sustaining over 90 per cent cure rate in line with the Sphere standards. Additionally, deworming tablets/treatment was given to 27,093 children (14,102 girls and 12,991 boys) in KP and FATA with UNICEF, government, NGO partners' support. To build community resilience, UNICEF and partners' response has a community engagement focus wherein preventive activities are undertaken through community-based health care providers such as LHWs who deliver key nutrition messages using Information, Education and Communication (IEC) material on maternal nutrition, breastfeeding, complementary feeding and SAM. These materials were developed by UNICEF through a consultative process with the Nutrition Technical Working Group and also distributed in the communities.

Due to funding constraints UNICEF will only continue limited supply and human resource-support to the KP and FATA governments for six months in support of nutrition intervention for the returning families in South Waziristan, Orakzai, Kurram and Khyber agencies. Additionally, UNICEF will continue supporting nutrition interventions in Kohat and DI Khan in support of displaced children and women in host communities through NGO partner, FPHC, until September 2017.

Drought in Sindh

UNICEF sustained a high cure rate of over 90 per cent for SAM treatment in drought affected areas of Sindh. About 3,351 SAM children (2,003 girls and 1,348 boys), 22 per cent of planned, have been registered at 23 UNICEF and WFP supported nutrition sites/ outpatient therapeutic programmes (OTP). UNICEF and partners provided counselling to 38,387 women on improved feeding practices, while 9,593 children (5,233 boys and 4,360 girls) and 28,725 pregnant and lactating women (PLW) received MM supplements. To sustain Government's continued support for quality nutrition service delivery UNICEF also trained 30 senior and mid-level managers from government line department and development partners on Nutrition in Emergency.

Nutrition Cluster/Working Group

In KP and FATA UNICEF is leading the nutrition cluster along with the Health Department to coordinate nutrition response with other partners including UN agencies and NGOs, both national and international.⁹ The Nutrition Information Management is shifted to an online system to capture real time data ensuring timely need identification and swift response.

Similarly, in Sindh coordination of nutrition response is being done through the UNICEF-led Nutrition Working Group comprising 13 organisations.¹⁰

The cluster partners through the community based Infant and Young Child Feeding (IYCF) programme reached 33,382 pregnant women and 59,461 lactating mothers (with children under six months) with counselling for early initiation and exclusive breast feeding, while 34,302 mothers with children between 6-23 months were counselled for appropriate feeding in KP and FATA. Through health facility based IYCF programme, 33,399 pregnant women attending antenatal care (ANC) and received Iron Folic Acid/MM supplementation, and were counselled on the appropriate maternal diet. About 4,314 health facility staff were assigned for IYCF counselling as a result of which 49,371 mothers and caregivers of children (under two years) received IYCF counselling.

Cluster meetings were held to support submission of four proposals for Pakistan Humanitarian Pooled Fund (PHPF) 2017 funding for procurement and supply of Ready-to-Use Therapeutic Foods (RUTF) and supplements, and establishment and operationalization of nutrition sites with government and NGO partners.

Health

During the first half of 2017, UNICEF support focused on provision of health services to returning families in FATA by revitalizing and strengthening the Government's primary healthcare systems including Mother and Child Health (MNCH) and reproductive health services. Although UNICEF's health response was critically underfunded at 98 per cent, UNICEF's strategic approach to leverage Government resources and strengthen health systems resulted in good progress including 7,542 women (25 per cent of planned 30,350) receiving antenatal care (ANC) and 1,121 deliveries assisted by skilled birth

⁸ Nutrition partners in FATA include line departments, Relief Pakistan, Centre of Excellence for Rural Development (CERD), PEACE, Prime Foundation and Social Services Pakistan (SSP), and in KP, line departments, Frontier Primary Health Care (FPHC), PEACE, Prime Foundation and CERD

⁹ Relief Pakistan, Centre of Excellence for Rural Development (CERD), PEACE, Prime Foundation, Frontier Primary Health Care FPHC, SSP, Community Development Organization -Pakistan and Medical Emergency Resilience Foundation, and from UN agencies, WFP, WHO and UNOCHA.

¹⁰ Nutrition Support Programme of the government, WHO, HELP, Peoples Primary Healthcare Initiative, Concern Worldwide, Shifa Foundation, Hands PK, Action Against Hunger, MI, Save the Children, World Vision and Blessing Foundation

attendants. UNICEF's support to Government and NGO partners resulted in vaccination of 324,714 children for measles against a target of 222,070 in just six months.

UNICEF supported the Mother and Child Days and community based MNCH interventions, through NGO partner CERD, benefitting a population of 100,000 in Bara, Khyber Agency. This low cost high impact intervention package includes antenatal care, deworming of 2 to 5 year old children, identification and vaccination of defaulter children (children not vaccinated or missing vaccination routine immunization), MM supplementation for children (aged 06 to 59 months), social mobilization and health education and provision of life saving commodities (clean delivery kits, new-born kits). Through this MNCH package, 3,852 women were provided ANC, and 2,905 pregnant women given clean delivery kits, and 2,946 were given new-born kits.

To strengthen Government's disaster preparedness and resilience, 40 health care providers were trained on Community-Based Disaster Risk Management in FATA. Furthermore, to address limited neonatal service delivery in FATA two Sick New-born units were established in Kurram and Bajaur agencies in the Government's existing health facilities. These units provide high quality and timely services to sick new-borns in addition to fulfilling critical equipment gaps.

Polio Eradication

In FATA some areas affected by conflict are also priority areas for polio. During the first half of the year, four OPV and one IPV campaigns were conducted in KP targeting 5,631,689 children (aged 0-5 years) and 891,410 children (aged 4-23 months) respectively. During these campaigns 98 per cent of children were vaccinated. While in FATA two IPV campaigns targeting 292,371 children (aged 4-23 months) and four OPV (oral polio vaccine) campaigns targeting 1,040,861 children (aged 0 to 59 months) were conducted, and 97 per cent of the children were vaccinated. In line with UNICEF's multi-sector intervention approach Vitamin A supplementation was provided during the polio campaigns benefitting 727,606 children.

For displaced families returning to FATA, UNICEF and Polio Eradication Initiative (PEI) partners supported polio vaccinations at government designated embarkation points and in areas of return/origin. To support PEI outreach about 2,280 Community-Based Vaccination (CBV) staff members are working in Bannu (KP), Khyber, South and North Waziristan Agencies (FATA) while 236 COMNet staff are working in the remaining districts and agencies of KP and FATA. Outreach to reduce the missed children has improved through community engagement sessions and tracking of missed children through COMNet staff, CBVs and social mobilizers.

WASH

In 2017, UNICEF focused on re-establishing access to safe water, sanitation and hygiene services in IDP hosting and returning areas. UNICEF and partners have provided over 51,064 people (23,617 children, 13,669 women, and 13,778 men), an estimated 25 per cent of the planned 203,100 with access to clean drinking water through rehabilitation of water supply schemes and installation of hand pumps. About 17,435 (4,016 girls, 4,048 boys, 4,667 women and 4,704 men) or 12 per cent of the target reached with access to improved sanitation, and 76,460 IDPs (17,611 girls, 17,752 boys, 20,466 women and 20,631 men) or 26 per cent of the target were reached with key hygiene messages

UNICEF and partners¹¹ continue supporting residual earthquake and flood response in Shangla and Chitral in KP, by providing WASH services and restoration/rehabilitation of existing water and sanitation infrastructure. Thanks to restoration/rehabilitation of seven water supply schemes and installation of six dug wells with hand pumps, 10,950 people (2,522 girls, 2,542 boys, 2,931 women and 2,955 men) have access to safe drinking water. Construction of disaster risk reduction (DRR) compliant latrines and bathing places at *Bashaliny* (place where women and adolescent girls stay at the time of menstruation as per their local culture) and provision of sanitation kits for Kalash women/girls in Chitral benefitted 4,875 girls/women. Additionally, 18,599 people were sensitized on key hygiene messages in Chitral and Shangla.

The early recovery WASH programme under DFID-funded National Disaster Consortiums in Chitral and Shangla through two NGO partners (AKRSP and SABAWON) reached 15,501 people with critical WASH-related information to prevent water borne illnesses, especially diarrhoea. Rehabilitation work on Chitral Angarghon Water Supply Scheme (benefiting 80,000 individuals of Chitral main town and surrounding communities) was completed through the Tehsil Municipal Administration.

In areas of return, 40,114 people (9,241 girls, 9,312 boys, 10,738 women and 10,823 men) were able to access safe drinking water through rehabilitation of water supply schemes and installation of hand pumps, and 12,560 extremely vulnerable¹² people were given sanitation kits during their return to FATA. A total of 42,360 people were reached with key hygiene messages through interpersonal communication sessions. UNICEF provided 6,925 returning families (48,475 people) of South Waziristan, Orakzai, and Kurram agencies with access to clean drinking water, sanitation facilities and hygiene messages at embarkation points.

WASH Cluster

¹¹ Public Health Engineering Department in Khyber and Kurram, FATA, and Local government & Public Health Engineering Department in Shangla, KP. Civil society partners include Sarhad Rural Support Programme (SRSP), SABAWON, Muslim Aid, Islamic Relief, Human Development Organization Doaba (HDOD) & Aga Khan Rural Support Programme.

¹² Extremely Vulnerable: women-headed households, widows, people with disabilities, people having income less than PKR 10,000 and those with severely damaged households.

UNICEF leads the WASH Cluster with the WATSAN Cell of the Local Government Department in KP, which includes 24 national and international NGO partners and UN agencies. WASH Cluster is engaging stakeholders on transition to Working Group coordination modality and eventual deactivation of the Cluster. In this regard, capacity gaps/needs were identified with stakeholders and the Thematic Working Group on WASH was reactivated while WASH Working Groups in five agencies of FATA were established in addition to ongoing planning and capacity building with government. The WASH Cluster established technical working groups led by humanitarian organizations on water supply, sanitation, hygiene promotion and inclusiveness to develop sectoral guidelines on the standardization of response.

Through interventions by cluster partners 122,968 people (28,319 men, 29,476 women, 31,935 boys and 33,238 girls) gained access to clean drinking water. About 102,214 people (23,530 men, 24,501 women, 26,545 boys and 27,628 girls) gained access to sanitation, while 177,194 (36,625 men, 38,121 women, 41,301 boys and 42,987 girls) were sensitized on key hygiene messages.

WASH Cluster also provided returnees in South Waziristan, Orakzai, Khyber, and Bakakhel Camp for Afghan refugees from Khost, Afghanistan with access to WASH services. The response activities included water trucking, reactivating motorized water distribution systems along with disinfection and chlorination, construction/repair of toilets with desludging services and distribution of hygiene items at the embarkation points and the camp for the returnees.

Two trainings on 4 Ws (OCHA's tracking and monitoring system) were organised to strengthen capacity of 24 staff of 16 partners in FATA and KP to improve quality of monitoring and reporting. The WASH cluster's planning and tracking was enhanced through the development of an online dashboard providing monthly progress updates against targets laid out in the HSP. The WASH Cluster was allocated US\$2 million from PHFP 2017 in support of four in FATA (targeting 177,921 people).

Education

UNICEF supported education interventions focused on improving access to quality education for affected children in areas of return and hosting communities as well as building longer term service provision capacity in the affected region. Additionally, linkages were strengthened with early recovery, DRR and social cohesion initiatives of UNICEF and partners¹³ programmes promoting reliance and sustainability. Although UNICEF's education response remains critically underfunded at 97 per cent, UNICEF's approach to strengthen partnerships and linkages with development programmes helped to reach 16,566 children (5,333 girls and 11,233 boys) or 21 per cent out of planned 78,400 school-aged children affected by conflict through education programmes that also incorporated psychosocial support in FATA.

UNICEF also supported the FATA government's campaigns to mobilize communities and parents to enrol their children in schools, with special focus on areas of return. Based on the information received from six out of 13 agencies, 71,667 children, including 27,690 girls, have been enrolled. The data on new enrolments from all agencies will be reflected in the next report. As part of the ongoing initiatives to empower citizens to take informed decisions regarding education for their children and to improve overall safety of schools and access to education, 40 *Taleemi Islahi Jirgas* (TIJ) or School Management Committees have been formed in KP and FATA with 320 members, who receive regular training to support education services at school and community levels.

Education Cluster

UNICEF leads the Education Cluster and holds monthly meetings with representation from government officials and 40 agencies including national and international NGOs and UN agencies. As emergency needs are reduced, the cluster is moving towards deactivation with the formation of the Education Technical Working Group FATA Secretariat, facilitated by the Rehabilitation and Reconstruction Unit and led by the Department of Education.

In 2017, the education cluster partners received funds for establishing sixteen pre-fabricated structures in North Waziristan Agency under the current PHPF allocation. The Cluster is actively engaged in the review and selection process of additional PHPF support for education sector.

The cluster partners have, so far, reached 21,765 children, including 7,617 girls, in return areas (Khyber, Orakzai, Kurram, South Waziristan and North Waziristan agencies) with access to humanitarian education programmes that incorporate psychosocial support. Support includes provision of teaching-learning materials and training of teachers on multi-grade teaching and psychosocial support, formation of TIJs and other community mobilization interventions. Additionally, nine pre-fabricated structures have been installed at damaged school sites in Kurram and Orakzai agencies with cluster partners' support.

Child Protection

In the first half of the year, 7,427 displaced children (14 per cent of planned 51,850 children) in host communities benefited from child protection services. Funding gap for child protection response stands at 78 per cent. Funding constraints along with access issues and cultural norms that limit the mobility of women outside their homes, especially in FATA, resulted in underachievement of targets especially provision of protective services to women.

¹³ UNICEF partners include government line departments, SRSP, HDOD and Pak Women.

UNICEF worked with partners, CERD and Pakistan Village Development Program (PVDP), to devise a new modality to reach affected communities through mobile child protection vans. However, PVDP did not receive the required approval (No Objection Certification - NOC) from the Government resulting in the closure of the project in Bannu. However, the initiative was piloted in areas of return in Bara, Khyber Agency, and host communities in Bannu, KP. A total of 9,801 people (2,872 girls, 3,027 boys, 2,284 women, and 1,618 men) in Bara were provided with protective/relief services such as mine risk education, birth registration information and communication for development activities through vans that travelled to target areas. Future modalities for this project are being planned.

To support the repatriation of Afghan refugee children, UNICEF and Aurat Foundation, a local NGO, established two child-friendly spaces at the UNHCR Repatriation Centre in Chamkani, near Peshawar, which provides relief and recreational support to refugee children. So far, 8,415 children (3,942 girls and 4,473 boys) have benefited from these services which will continue until end of August 2017.

For protection awareness raising for resilience building of vulnerable communities UNICEF and partners disseminated key protection messages through engagement with communities and reached 18,784 children, 4,906 women and 3,580 men.

UNICEF formalized a partnership with the KP Provincial Disaster Management Authority (PDMA) from June to December 2017, focusing on the roll-out of the Mine Risk Education toolkit through schools in eight disaster risk districts.

Child Protection Sub-Cluster

During 2017, the Child Protection sub-cluster did not receive any funding other than funds bilaterally mobilized by UNICEF. As humanitarian needs reduce the sub-cluster is developing a joint strategy for cluster deactivation. Once finalized and endorsed, it will guide the future modality and functionality of the sub-cluster.

Communications for Development (C4D), Community Engagement & Accountability, Disaster Risk Reduction and Humanitarian Preparedness

C4D and community engagement are a key component of UNICEF's humanitarian response and complement humanitarian service delivery as reflected in the above programme response. UNICEF provided multi-sectoral life-saving information to affected populations through multiple channels in coordination with cluster partners and government authorities. Accountability to affected populations was strengthened by developing innovative real time solutions such as the U report and UNICEF mobile monitoring system, which effectively engaged with beneficiaries using mobile technology to monitor the quality of services and identify emerging needs.

UNICEF is supporting the National Disaster Management Authority (NDMA) for cross-sectoral DRR initiatives. The Pakistan School Safety Framework was piloted in selected schools and launched at the federal level. In 2017, risk awareness raising products (radio messages and flyers) were developed by UNICEF to disseminate precautionary measures for heat waves and extreme cold weather as part of DRR Communication kits.

For public risk education a Television Infotainment Game Show called "*Tayar Pakistan*" was aired by NDMA through UNICEF's technical and financial support. Additionally, curriculum revision based on DRR to cover all text books from Federal and Provincial Boards is underway. In order to further engage with members of the youth, key messages pertaining to disasters were disseminated through U-Report. A storybook on precautionary messages on extreme weather was finalized and is being printed. An orientation workshop was organized for UNICEF's implementing partners, government staff and sister UN agencies (40 participants) in Sindh in April 2017 on the use of DRR awareness raising kits produced, printed and disseminated by UNICEF.

As part of annual emergency preparedness exercise, UNICEF updated the national level multi-hazard, cross-sectoral EPRP 2017. Based on the potential scenarios, 40 Contingency Partnership Agreements were signed with implementing partners, contingency stock was pre-positioned for 100,000 people and long-term agreements for goods and services prepared. Additionally, Surge and Rapid Response Teams lists were updated in the past six months.

Supply and Logistics

UNICEF maintains humanitarian supplies at six warehouses across Pakistan. Two warehouses are managed by a firm called Agility Logistics in Karachi and Islamabad; three by WFP in Quetta, Peshawar and Karachi; and one by UNICEF in Karachi. The Federal Government has provided the Karachi warehouse to UNICEF for supporting humanitarian response in KP, FATA and Sindh. UNICEF signed a service level agreement with WFP for warehousing services in KP that directly provides support to the Peshawar Field Office. While there is no specific supply plan for humanitarian support, as part of preparedness, 15 Long Term Arrangements were signed with local vendors for emergency supplies in 2017. This ensures timely response should the need arise in Pakistan. In 2017, supplies worth US\$ 1.9 million were dispatched from the warehouses for humanitarian response and handed over to partners in support of programme implementation.

Security

Major security incidents in the first half of 2017 include improvised explosive device (IED) blasts in KP and FATA, however, all UNICEF staff and operations remained safe. Meanwhile, Government-led military operation *Radd ul Fasaad* was

launched to eliminate militancy from affected areas, in the short run this should increase instability. The Government's law enforcement agencies are setting up 473 border forts with elaborate surveillance systems along the Pak-Afghan border, which will improve the security situation in the coming months.

Funding

In 2017 UNICEF's requires US\$26.6 million in support of the humanitarian response in KP, FATA and Sindh. So far, UNICEF has only US\$3.3 million available funds, of which US\$3 million are carry-over funds from 2016, with a funding gap of 88 per cent. Health and Education sectors are critically underfunded with funding gaps of 98 and 97 per cent respectively. This is hampering the delivery and required scale up of critical humanitarian interventions and negatively impacting the most vulnerable children and women. Donor support is critical to provide life saving time critical humanitarian support to the most vulnerable children and women in KP and FATA and drought affected areas in Sindh.

UNICEF wishes to express its gratitude to the Governments of Canada (CIDA), Sweden (Sida), United States (USAID/OFDA), United Kingdom (DFID) and ECHO for the generous contribution received in support of the humanitarian response in KP, FATA and Sindh. Additionally UNICEF leveraged its core and other resources to support the humanitarian response in the affected areas.

Funding Requirements (as defined in Humanitarian Appeal of 2017 for a period of 6 months)					
Appeal Sector	Requirements	* Funds available		Funding gap	
		Funds Received Current Year	Carry-Over	US\$	%
WASH	7,103,494	67,161	1,586,524	5,449,810	77%
Education	4,694,674	62,090	71,457	4,561,127	97%
Health	2,426,073	32,788	17,713	2,375,571	98%
Nutrition	9,890,505	110,473	816,498	8,963,534	91%
Child Protection	2,435,669	24,886	511,849	1,898,935	78%
Total	26,550,415	297,398	3,004,040	23,248,977	88%

* Funds available includes funding received against current appeal as well as carry-forward from 2016.

Next SitRep: October 2017

UNICEF Pakistan Crisis: <https://www.unicef.org/appeals/rosa.html>

UNICEF Pakistan and Humanitarian Action for Children Appeal: <http://www.unicef.org/appeals/index.html>

UNICEF Pakistan CO Facebook Page: <https://www.facebook.com/unicefpakistan/>

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SUMMARY OF PROGRAMME RESULTS

	Overall needs ¹⁴	Cluster Response			UNICEF and IPs		
		2017 Target	Total Results	Change since quarter 1 ▲▼	2017 Target	Total Results	Change since quarter 1 ▲▼
WATER, SANITATION & HYGIENE							
Number of target population provided with access to water as per agreed standards (context specific)	1.05 million	406,200	122,968	▲ 81,283	203,100	51,064	▲ 12,314
Number of target population provided access to appropriately designed toilets (including self-made toilets through provision of sanitation kits)		286,875	102,214	▲ 35,316	143,400	17,435	▲ 9,325
Number of target population provided with key messages on safe hygienic practices		596,628	177,194	▲ 101,693	298,300	76,460	▲ 41,424
EDUCATION							
Number of school-aged children including adolescents enrolled in schools (including in schools in affected areas still functioning, re-opened schools and/or temporary facilities established)	0.78 million	130,630	25,980	▲ 21,765	78,400	16,566	▲ 16,566
Number of schools supported having safe and secure environment		1,000	275	▲ 229	1,050	165	▲ 165
Number of children with access to humanitarian Education programmes that incorporate psychosocial support		130,630	21,765	▲ 21,765	78,400	16,566	▲ 16,566
HEALTH							
Number of children (6 months to 10 years old) vaccinated against measles	1.2 million				222,070	324,717	▲ 324,366
Number of deliveries assisted by skilled birth attendants (SBA)					15,175	1,121	0
Number of women provided with Ante natal care (ANC) new contact					30,350	7,542	▲ 3,852
Number of people reached through health education sessions conducted during Mother Child Week/Days					156,200	28,632	▲ 2,616
NUTRITION (KP and FATA)							
Number of targeted children 6-59 months with Severe Acute Malnutrition admitted to therapeutic care for specified period of time	0.23 million	21,700	13,613	▲ 7,328	21,700	13,613	▲ 7,328
Number of pregnant and lactating women in affected areas registered in a multi micronutrient supplementation programme receiving multi-micronutrient supplement (or iron and folic acid)		295,000	106,558	▲ 54,616	295,000	106,558	▲ 54,616
Number of children 6-59 months in the affected areas receiving MM supplement		325,000	78,854	▲ 28,019	325,000	78,854	▲ 28,019
NUTRITION (Sindh)							
Number of targeted children 6-59 months with Severe Acute Malnutrition admitted to therapeutic care for specified period of time	0.3 million	15,200	3,491	▲ 3,351	15,200	3,351	▲ 3,193
Number of pregnant and lactating women in affected areas registered in a multi micronutrient supplementation programme receiving multi-micronutrient supplement (or iron and folic acid)		90,700	28,725	▲ 28,457	90,700	28,725	▲ 28,457
Number of children 6-59 months in the affected areas receiving MM supplement		94,800	9,593	▲ 9,207	94,800	9,593	▲ 9,207
CHILD PROTECTION							
Number of targeted children who have accessed child protective services	1.36 million	108,020	15,272	▲ 7,427	51,850	7,427	▲ 7,427
Number of targeted women who have accessed protective services		40,235	1,251		24,141		
Number of children reached through child protection awareness raising activities		21,604	22,074	▲ 14,227	13,000	18,784	▲ 14,227
Number of women reached through child protection awareness raising activities		10,059	5,386	▲ 2,896	6,035	4,906	▲ 2,896
Number of men reached through child protection awareness raising activities		10,606	4,444	▲ 2,015	6,964	3,580	▲ 2,015

¹⁴ UNOCHA, *Pakistan Humanitarian Strategic Plan (HSP) 2017*, January 2017.