

Reporting Period: as of 17 April 2020

## **Highlights**

- China, Iran, India, Pakistan, Malaysia, Philippines and Indonesia have the most cases, with the highest number of deaths in Iran, China, Indonesia, Philippines and India.
- Bangladesh and Myanmar remain vulnerable due to fragile health systems and refugee and displaced populations, including Cox's Bazar with overcrowded conditions.
- Pacific island countries are at risk due to weak health systems, natural disasters and geographic isolation.
- Afghanistan, Pakistan, Iran and Nepal face risk given weak health systems, limited testing capacity, cross-border movements and refugee and displaced populations.
- India, Indonesia, Malaysia and the Philippines have rapidly rising cases with health systems at risk of collapsing without sufficient support.
- Most countries in the region are taking measures to prepare and respond to COVID-19, and urgent actions are required to contain outbreaks and support health systems and communities to mitigate the impacts.
- 22 UNFPA Country Offices and the Pacific Sub-Regional Office are engaged in preparedness and response activities to ensure the continuity of lifesaving sexual and reproductive health (SRH) and gender-based violence (GBV) services and the protection of health workers and engaged in health and socioeconomic impact assessments.
- The UNFPA Regional Office is providing programme, technical and operations support to Country Offices, and has developed guidance for inclusion of older persons, adaptation of dignity kits and distribution strategies, provision of maternal and neonatal health services, and a working paper on the socioeconomic impacts of COVID-19.
- UNFPA works within the UNCT to promote a comprehensive response to COVID-19 at the country level.
- Key challenges include funding and disruptions to supply chains.

# Asia and Pacific Region

COVID-19
Situation Report No. 1

**United Nations Population Fund** 



## **Situation in Numbers**



**203,688** Confirmed COVID-19 Cases



11,141 COVID-19 Deaths

Source: WHO April 17, 2020

## **Key Population Groups**



**50M Pregnant Women** 



**1B** Women of Reproductive Age

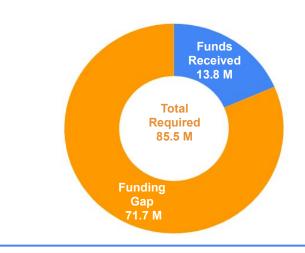


1B Young People (age 10-24)



0.3B Older Persons (age 65+)

# Funding Status for Region (US\$)



## **Regional Response Summary**

The UNFPA response aligns with the 2030 Agenda, the 2020 WHO Global Strategic Preparedness and Response Plan, the Inter-Agency Standing Committee Global Humanitarian Response Plan and the <u>UNFPA COVID-19 Global Response Plan</u>.

#### Coordination

Preparedness and response activities are jointly conducted through the UN country team and humanitarian team to support government response plans and are coordinated through national and sub-national coordination mechanisms, including through the cluster/sector system where activated. In many countries, UNFPA leads or co-leads the sexual and reproductive health (SRH) and/or gender-based violence (GBV) coordination groups.

## Continuity of SRH interventions, including protection of health workforce

UNFPA Country Offices have supported continuity of SRH interventions by:

- Supporting national and local level planning, coordination and monitoring to ensure access to SRH services. This includes provision of technical and programmatic assistance as well as information management support.<sup>1</sup>
- Ensuring the continuity of and access to quality life-saving essential SRH information and services for women, adolescents and youth.<sup>2</sup>
- Strengthening operational and logistics support to global supply chain, including providing personal protective equipment (PPE) to health workers; and facilitating additional supplies of modern contraceptives and other commodities.<sup>3</sup>
- Investing in SRH capacity building, including training frontline workers (midwives and maternal health doctors) and government partners on virtual infection prevention and universal precaution.<sup>4</sup>

### **Country examples:**

- Afghanistan: deployed 22 trained healthcare providers to conduct awareness raising and basic screening.
   41,781 Afghan travelers including returnees from Iran and Pakistan were screened through UNFPA supported clinics, with focus on women on reproductive age and pregnant women, and referrals made for testing and treatment. PPEs are being provided for frontline health workers.
- Bangladesh: procuring PPE for frontline health workers, and capacity building on proper PPE usage, hospital
  management to improve patient triage and awareness raising on COVID-19 infection, prevention and control.
  UNFPA has supported midwives to be placed at national COVID-19 call centres. Awareness sessions are being
  conducted for social mobilisers for Rohingya and host communities.
- **China**: providing technical assistance for strengthening the health system capacity to ensure accessibility and availability of SRH services. Procured and delivered medical equipment, as well as sanitary materials for medical personnel, women of reproductive age, pregnant women and people living with disabilities.
- **DPRK**: provision of uninterrupted supply of life-saving reproductive health medicines and related supplies at the national level and provision of inter-agency reproductive health kits to vulnerable geographic areas.
- **India**: procurement of PPEs for frontline health workers, and development of technical guidelines on pregnancy and maternal care, village maternal child health and nutrition.
- **Indonesia**: providing technical support to the national organisation of midwives to strengthen the provision of family planning and SRH services and commodities utilising online platforms. Provision of online SRH services and consultations for young people by 46 health providers, and provision of PPEs for midwives.
- **Malaysia**: developing IEC materials on SRH and providing technical assistance to the Ministry of Health on antenatal and neonatal care.
- Maldives: providing technical support in ensuring SRH is reflected in guidelines for infection prevention and control to support five COVID-19 health facilities.
- **Pakistan:** provided over 20,000 PPEs, including surgical masks, gloves, gowns, face shields and respirators for health workers, and 4,000 hygiene kits including hand sanitisers to women and girls. 100 mother and child health doctors were trained on infection prevention and universal precaution.

<sup>&</sup>lt;sup>1,2</sup> Afghanistan, Bangladesh, Bhutan, Cambodia, China, Fiji, India, Indonesia, Iran, Lao People's Democratic Republic (PDR), Malaysia, Maldives, Mongolia, Myanmar, Nepal, Pakistan, Philippines, Papua New Guinea, Sri Lanka, Thailand, Timor Leste and Vietnam

<sup>&</sup>lt;sup>3</sup> Afghanistan, Bangladesh, Fiji, India, Indonesia, Iran, Lao PDR, Malaysia, Maldives, Mongolia, Myanmar, Nepal, Pakistan, Philippines, Papua New Guinea, Sri Lanka, Timor Leste and Vietnam

<sup>&</sup>lt;sup>4</sup> Bangladesh, India, Mongolia and Pakistan

## **Regional Response Summary (Cont.)**

#### **Country examples continued:**

- Pacific Sub-region: providing technical guidance on reinforcing infection control measures within facilities
  including segregation of neonatal and maternal health units. UNFPA is working with the Ministry of Health to
  support continued operations of dedicated antenatal and postnatal care facilities and mobile clinics through
  recruitment of midwives, and develop an online app to reach and support pregnant women.
- Papua New Guinea: provision of PPE for health workers, and provision of SRH job aids for health workers.
- **Philippines**: Provided maternity tents for COVID triage to ensure segregation of pregnant women from other health services for infection control and mitigation of transmission risk.
- **Sri Lanka:** 100 maternity kits prepositioned through the Regional Prepositioning Initiative are being distributed to pregnant women who test positive for COVID-19 and are in isolation.
- **Vietnam**: delivering critical supplies for pregnant women and women who have given birth, as well as to frontline health workers.

## Addressing Gender Based Violence (GBV)

UNFPA Country Offices have addressed GBV by:

- Supporting national and local planning, coordination and monitoring to ensure prevention and response to GBV, including providing technical and programmatic assistance and information management support; and ensuring coordination and monitoring applies to mental health and psychosocial support (MHPSS) services.<sup>5</sup>
- Investing in capacity building of health workers to respond to GBV, including providing MHPSS to survivors of GBV; adapting GBV referral pathways and developing GBV referral guidelines; and training government staff in facilitating sessions on MHPSS-related topics.<sup>6</sup>
- Ensuring the continuity and accessibility of GBV prevention and response services for women, adolescents and youth.<sup>7</sup>

#### **Country examples:**

- Lao PDR: training health workers in providing psychosocial support to survivors, and supporting the Government and partners to ensure that psychosocial support hotlines are running, aiming for 24/7 coverage. The hotlines provide services for general emotional stress and GBV response and referrals.
- Mongolia: developed and disseminated guidelines on GBV and COVID-19, including referral guidelines for survivors of GBV, to 15 UNFPA-supported shelters, providing dignity kits to women and girls in quarantine and establishing one stop service centers in the capital city.
- **Myanmar:** conducted online training for 90 government case managers to strengthen their capacity in providing basic MHPSS for survivors of GBV and developed GBV and MHPSS guidance notes for partners.
- **Nepal:** provision of psychosocial support through community psychosocial workers and female community health volunteers who are providing remote counselling and referral to GBV services. Developed guidelines for help lines, women's shelters and quarantine centers, and distributed dignity kits for women accessing these facilities.
- Pacific Sub-region: developed adapted GBV referral pathways, guidance for health workers to identify and refer
  GBV survivors, and emergency cards with information on GBV service access and hotlines, including MHPSS
  messaging. Developing GBV and MHPSS messaging as part of an information package to support faith based
  organizations and church leaders, in partnership with WHO.
- Philippines: community based awareness activities on GBV prevention and response sensitive to physical
  distancing measures, and distribution of dignity kits with COVID-19 responsive contents along with ensuring SRH
  and GBV referral mechanisms are disseminated and well-functioning.
- **Sri Lanka:** supporting shelters to amplify counseling services. Distributed 5,000 hygiene kits for women of reproductive age, and 1,000 dignity kits which had been prepositioned through the Regional Prepositioning Initiative to vulnerable women and girls in lockdown areas.
- **Timor Leste:** included awareness-raising messages and materials on GBV and COVID-19 in 450 dignity kits for women and girls in guarantine and developed GBV training materials for health workers.

<sup>&</sup>lt;sup>5</sup> Afghanistan, Bangladesh, Bhutan, Cambodia, China, Fiji, India, Indonesia, Iran, Lao PDR, Malaysia, Maldives, Mongolia, Myanmar, Nepal, Pakistan, Philippines, Papua New Guinea, Sri Lanka and Timor Leste

<sup>&</sup>lt;sup>6</sup> Lao PDR, Fiji and Myanmar

Afghanistan, Bangladesh, Cambodia, Fiji, India, Indonesia, Lao PDR, Iran, Maldives, Malaysia, Mongolia, Myanmar, Nepal, Pakistan, Philippines, Papua New Guinea, Sri Lanka, Thailand and Timor Leste

## **Regional Response Summary (Cont.)**

## Impact assessment on the health and socioeconomic impact of COVID-19

Afghanistan, Cambodia, China, India, Lao PDR, Malaysia, Maldives, Mongolia, Pakistan, Philippines, Sri-Lanka, Thailand and Vietnam are currently engaged in assessments of the socio-economic impact of COVID-19. Most of these initiatives are conducted at UNCT level, although in some countries agencies are developing more thematic-specific assessments:

- UNFPA/UNICEF/UNDP designed a survey on children and youth (**Thailand**)
- Assessment of SRH and GBV implications and facility readiness (Cambodia, Malaysia, Maldives, Mongolia, Nepal, Sri-Lanka, Indonesia and Vietnam)
- A joint UN socio-economic and health systems impact assessment coordinated by RCO. UNFPA focuses on quality of SRH and GBV services for women, adolescents and youth (China)
- Assessment of increased maternal death & provision of maternity services (Mongolia and Bangladesh)
- Assessment of secondary impacts on women of reproductive age and older persons (Iran)
- Assessment of impact of COVID-19 on youth (Indonesia, Philippines and Pacific Sub-regional Office)
- Vulnerability population mapping and analysis with UN habitat (Lao PDR)

## Risk communication and community engagement

UNFPA country offices have promoted risk communication and community engagement by:

- Supporting SRH risk communications and community engagement activities adapted to the local context and language, including developing key messages and health education materials for pregnant women on hygiene, prevention, danger signs and treatment; developing key messages and health education materials, including SRH, for women of reproductive age, youth, elderly men and women, female health workers and internally displaced populations; and supporting toll-free hotlines for provision of accurate information.<sup>8</sup>
- Undertaking GBV risk communications and community engagement, including sharing GBV and mental health
  and psychosocial support information, awareness raising and advocacy targeting women of reproductive age,
  youth, elderly men and women, female health workers and internally displaced populations; and supporting
  toll-free hotlines for provision of accurate information.<sup>9</sup>

#### **Country examples:**

- Bhutan: consultation with vulnerable groups such as girls working in the entertainment sector, commercial sex
  workers and the LGBTI community to assess their needs and facilitate access to relief services including referral
  and access to health services and counselling.
- **Cambodia**: social media intervention on SRHR/GBV, including targeted messaging for pregnant women, complementing the ongoing media campaign led by the government.
- India: conducting risk communication and community engagement on SRH and GBV in local languages through videos, web, radio messages, state-level hotline Q&A and social media targeting frontline and community-based workers, pregnant and lactating women, adolescents and youth, and people living in relief camps.
- **Indonesia**: engaging youth through serial online surveys and conducting online health campaigns through young creative digital content producers and influencers.
- **Iran:** undertaking risk communication and awareness raising on GBV, and hygiene and health practices targeting pregnant women and older persons.
- Pacific Sub-region<sup>10</sup>: supporting risk communication and community engagement with contextualised IEC materials targeting women of reproductive age, female headed households and pregnant women, and conducting social media outreach on COVID 19 with education materials for pregnant women/families on basic hygiene practices related to COVID-19.
- **Thailand**: supporting the Department of Health to disseminate information and raise awareness targeting pregnant women.

<sup>&</sup>lt;sup>8</sup> Afghanistan, Bangladesh, Bhutan, Cambodia, China, Fiji, India, Indonesia, Iran, Lao PDR, Malaysia, Maldives, Mongolia, Myanmar, Nepal, Pakistan, Philippines, Papua New Guinea and Thailand.

<sup>&</sup>lt;sup>9</sup> Afghanistan, Bhutan, Cambodia, China, Fiji, India, Iran, Indonesia, Malaysia, Maldives, Mongolia, Myanmar, Nepal, Pakistan, Philippines, Papua New Guinea, Sri Lanka, Timor Leste and Thailand

<sup>&</sup>lt;sup>10</sup> Fiji, Kiribati, Federated States of Micronesia, Palau, Marshall Islands, Samoa, Solomon Islands, Tonga and Vanuatu

## **Media & Communications**

UNFPA Asia Pacific offices are actively engaged in media outreach to raise awareness, share guidance, and showcase achievements (click on hyperlinks for each item).

#### **Bangladesh**

Bangladesh midwives continue saving lives as country responds to pandemic

#### **Bhutan**

• UNFPA delivers dignity kits for young girls and women in isolation

#### China

- <u>UNFPA delivers medical equipment</u>, personal protective equipment (PPE) and sanitary items to Hubei in support of the national response to the coronavirus outbreak (press release)
- UNFPA China acknowledges female healthcare workers on Women's Day (statement)
- <u>StarTimes: Video message from Dr. Babatunde Ahonsi, UNFPA China Representative to people in Nigeria and Africa</u> (video)

#### India:

- <u>Interview on CNN-News18 prime time with India Rep on the need to focus on vulnerable populations such as pregnant women, lactating mothers and frontline health workers</u>
- Radio jingles on COVID precautions on Naubat Baja, an edutainment radio programme in Rajasthan
- Creation of newspaper advertisements on correct mask disposal for the Patna Municipal Corporation
- Short video on correct mask disposal for Patna Municipal Corporation
- <u>Information videos on role of the youth in the current situation / general guidelines disseminated to states and through social media</u>
- Social media campaign with Population First on sharing household chores
- Videos and messages on COVID Response on social media handles

#### Iran

- UNFPA Iran, as part of their ongoing series profiling health workers at a time of COVID-19
- Born in a pandemic: Newborns in Iran delivered safely amid COVID-19 outbreak
- The Heroes of COVID-19: UNFPA Iran World Health Day tribute to nurses, midwives and other healthcare workers on the frontlines of the pandemic

#### Lao PDR

- UNFPA provided soaps and sanitary pads for migrants
- Online Psycho social training refresher provided to 20 counsellors from Lao Women's Union, Lao Youth Union and Vientiane Youth center

#### Myanmar

• <u>UNFPA provides psychosocial support online training for Government's case managers in response to COVID-19 outbreak</u>

#### Mongolia

UNICEF and UNFPA join hands

#### **Pakistan**

- UNFPA and Rozan launch tele-psychosocial services
- Key recommendations to protect vulnerable groups, calling for urgent response, as revealed by Impact Assessment jointly by UNFPA, Planning Commission & UNDP
- Supporting the use of technology to protect women facing violence
- UNFPA launches Virtual Infection Prevention & Universal Precaution Cascade Trainings with the Federal Ministry of Health, in collaboration with Pakistan Institute of Medical Sciences and Jhpiego

## **Media & Communications**

Media and communications continued.

## **Philippines**

- <u>UNFPA supports frontline health workers in the Philippines responding to the COVID-19 pandemic with 3 million Peso worth Personal Protective Equipment</u>
- <u>UNFPA Philippines is supporting the response with maternity tents and dignity kits</u>

#### Sri Lanka

• The needs of women, pregnant mothers and girls at the centre of UNFPA's COVID-19 response (Photo Release)

#### Vietnam

• <u>UNFPA Viet Nam supports the response to COVID-19</u> (press release and companion video)

#### **APRO**

- Midwives save lives, now we have to save our midwives
- Social distancing measures urgently needed in refugee camps



In pandemic-affected Madaripur in Bangladesh, midwife Selina Akter safely delivered a baby girl. Image courtesy of Selina Akter

# Annex: Confirmed COVID-19 Cases and Deaths in APRO (WHO, 17 April 2020)

Country	Confirmed Cases	Deaths
Afghanistan	794	29
Bangladesh	1,572	60
Bhutan	5	0
Cambodia	122	0
China	84,149	4,642
Democratic People's Republic of Korea	0	0
India	12,380	414
Indonesia	5,516	496
Iran	77,995	4,869
Lao People's Democratic Republic	19	0
Malaysia	5,182	84
Maldives	23	0
Mongolia	31	0
Myanmar	85	4
Nepal	16	0
Fiji	17	0
Pakistan	6,919	128
Papua New Guinea	7	0
Philippines	5,660	362
Sri Lanka	238	7
Thailand	2,672	46
Timor-Leste	18	0
Viet Nam	268	0
Total APRO	203,688	11,141

Confirmed Cases by Country and Region

