



Reporting Period: 18-30 April 2020

Asia & the Pacific Region

COVID-19 Situation Report No. 2



Highlights

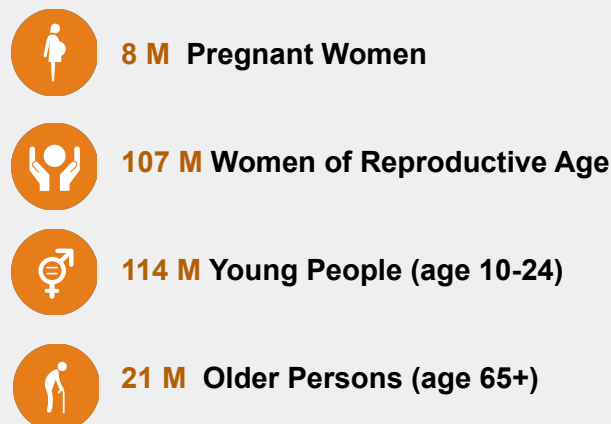
- Iran, China, India, Pakistan, Indonesia and the Philippines have the most cases of COVID-19 and related deaths.
- Bangladesh and Myanmar remain vulnerable with fragile health systems, refugees and displaced populations, including Cox's Bazar with overcrowded conditions.
- Afghanistan, Iran and Pakistan are compounded with significant cross-border movements.
- Lao PDR, Nepal and Papua New Guinea face risk given weak health systems, limited testing capacity and cross-border movements
- Pacific island countries are at risk due to weak health systems, natural disasters and geographic isolation.
- India, Indonesia, Malaysia and the Philippines have rapidly rising cases with health systems at risk of collapsing without sufficient support.
- The 22 UNFPA Country Offices and the Pacific Sub-Regional Office in the Asia-Pacific region are engaged in preparedness and response activities to ensure the continuity of lifesaving sexual and reproductive health (SRH) and gender-based violence (GBV) services, the protection of health workers and to assess health and socio-economic impacts of COVID-19.
- UNFPA Asia and the Pacific regional office (APRO) is providing programmatic, technical and operational support to country offices and the Pacific sub-regional office (PSRO) to the offices in the Pacific. APRO has developed COVID-19 specific guidance on the inclusion of older persons; adaptation of dignity kits and distribution strategies during COVID-19 response; provision of maternal and neonatal health services guidelines; a regional operational guidance on Reproductive, Maternal, Neonatal, Child and Adolescent Health together with WHO and UNICEF; a brief on key considerations for including GBV and gender related questions in socio-economic impact surveys; and a working paper on the socio-economic impacts of COVID-19. APRO is finalising a technical guidance note on Family Planning. PSRO has developed a Pacific dignity kit guidance including kit customisation for women with disabilities; and an advocacy note on the engagement of armed actors in containment and response to COVID-19 in the Pacific.
- Key challenges include limited funding, disruptions to supply chains including for personal protective equipment (PPE), ability to implement activities due to movement restrictions, and closure of SRH and GBV service entry points in many countries.

Situation in Numbers

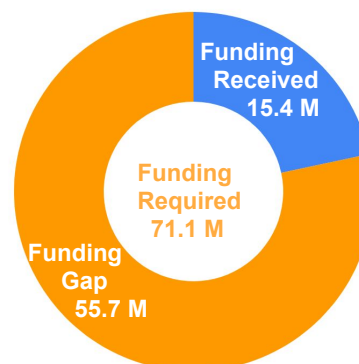


Source: WHO April 30, 2020

Key Population Groups



Funding Status for Region (US\$)



Regional Response Summary

The UNFPA response in the region 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 [UNFPA COVID-19 Global Response Plan](#).

Coordination

Activities are jointly conducted with key partners through the UN country team, humanitarian country team and/or the disaster management team to support government response plans. Activities 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 SRH and/or GBV coordination groups.

At the regional level, UNFPA co-leads: the regional ad-hoc preventing sexual and exploitation abuse (PSEA) task force with dedicated emphasis on PSEA and COVID-19, and the UN Regional Communication Group. UNFPA is an active member of several regional interagency COVID-19 working groups, including the Risk Communications and Community Engagement WG. UNFPA also hosts the Regional Emergency GBV Advisor (REGA) team.

Continuity of SRH interventions, including protection of health workforce

UNFPA is supporting 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.¹
- **Ensuring the continuity of and access to quality life-saving SRH information and services** for women, adolescents and youth.²
- **Strengthening operational and logistics support to global supply chains**, including provision of personal protective equipment (PPE) to health workers and ensuring the supply of modern contraceptives and other commodities.³
- **Investing in SRH capacity building**, including training frontline health workers and government partners on maternal and newborn health services, including infection prevention and control.⁴



¹ All 22 UNFPA COs in Asia Pacific and the Pacific Sub-Regional Office

² All 22 UNFPA COs in Asia Pacific and the Pacific Sub-Regional Office

³ Afghanistan, Bangladesh, Cambodia, DPRK, Fiji, India, Indonesia, Iran, Lao PDR, Malaysia, Maldives, Mongolia, Myanmar, Nepal, Pakistan, Philippines, Papua New Guinea, Sri Lanka, Timor Leste and Vietnam

⁴ Bangladesh, India, Indonesia, Lao PDR, Mongolia, Pakistan, Papua New Guinea and Timor Leste

Regional Response Summary (continued)

Country examples:

- **China:** Based on the COVID-19 impact assessment, UNFPA continues to provide technical assistance for strengthening the health system capacity to ensure accessibility and availability of SRH services for women and young people.
- **DPRK:** 180,000 pregnant women have access to life-saving SRH medicines and other SRH supplies that were prepositioned in the country, ensuring continuity of reproductive health care services despite global supply chain disruptions.
- **India:** 124,889 service providers and nursing students have been trained on maternal health, family planning, safe abortion, basic emergency obstetric skills and necessary COVID-19 preventive measures.
- **Indonesia:** HIV prevention and services are being provided to female sex workers through rapid assessments, shifting of HIV outreach services to virtual support, and developing guidelines in collaboration with the National Network of Sex Workers.
- **Lao PDR:** Supporting midwives to provide maternal health services through outreach and home visits, including provision of guidelines on maternity services and PPEs.
- **Mongolia:** Developing TV programmes for comprehensive sexuality education with the Ministry of Education/Health to be integrated into the national remote e-learning curriculum in response to school closure.
- **Nepal:** Pregnant and lactating women who are now less likely to visit health facilities, given the perceived risk of COVID-19, will soon be able to access information, counselling and referral for SRH services through a helpline.
- **Pacific Sub-Region:** UNFPA has advocated for separate isolation and institutional quarantine spaces for pregnant women, including women and girls with disabilities, that are being supported through the Ministry of Health in order to facilitate access to reproductive health services.
- **Philippines:** In Mindanao, UNFPA has scaled up cash for health support to ensure pregnant women can access health facilities, and to support traditional birth attendants in making referrals to health facilities to ensure quality of care and services.
- **Sri Lanka:** An additional 2,000 maternity kits have been handed over to the Ministry of Health to support pregnant women who are in isolation facilities.
- **Timor Leste:** Establishment of a COVID-19 safe maternity ward including training of health care providers on UNFPA developed protocols for safe delivery.
- **Vietnam:** Guidance on maternity and antenatal care and elderly care has been disseminated to the Ministry of Health and to the Ministry of Labour, Invalids and Social Affairs. Technical assistance has been provided to the Ministry of Health to finalise national interim guidelines on maternal health services.

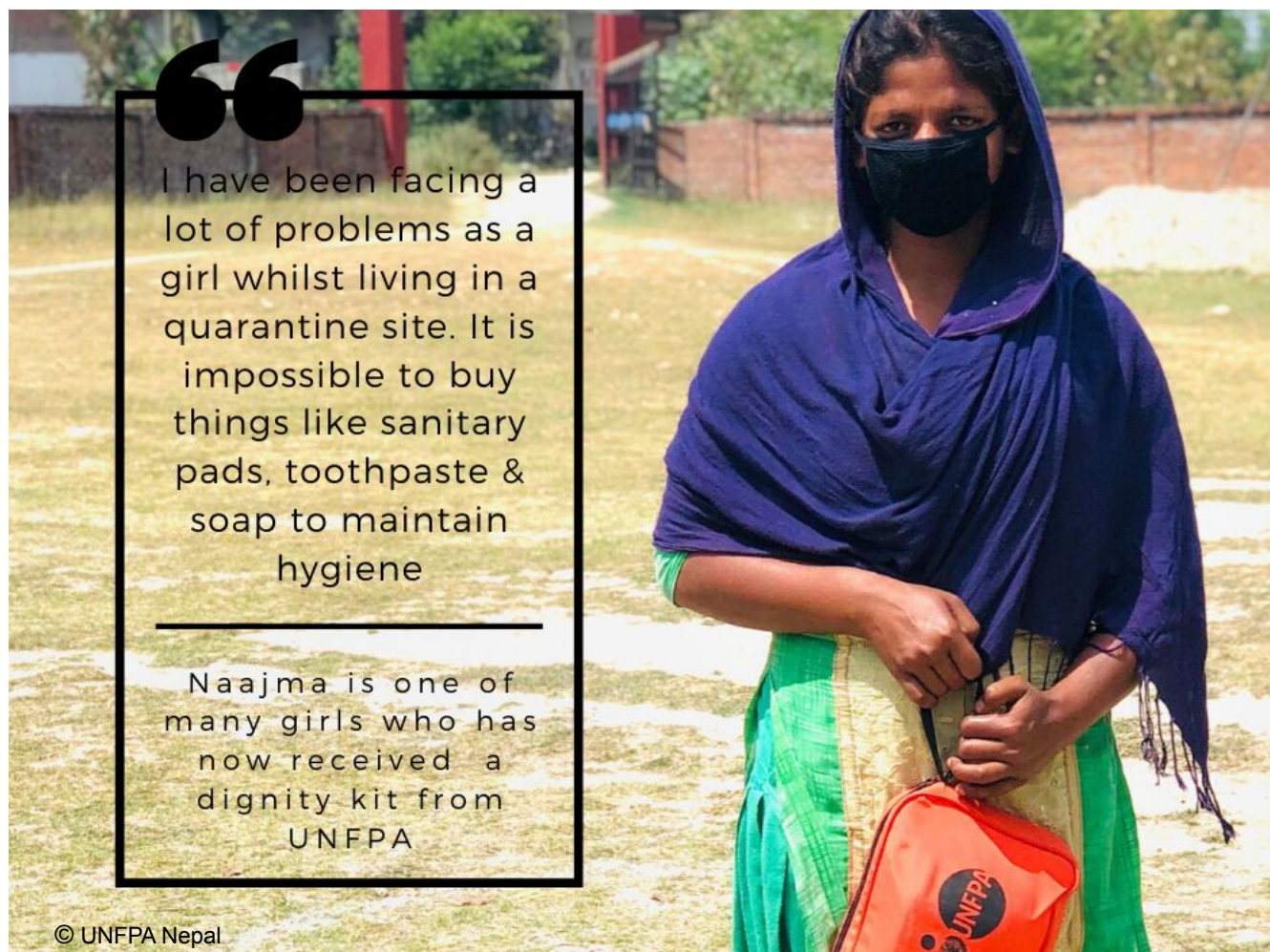


Regional Response Summary (continued)

Addressing GBV

UNFPA Country Offices have addressed gender-based violence (GBV) by:

- **Supporting national and local planning, coordination and monitoring** to ensure prevention and response to GBV, including mental health and psychosocial support (MHPSS) services. Providing technical and programmatic assistance and information management support.⁵
- **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.⁶
- **Ensuring the continuity and accessibility of GBV prevention and response services** for women, adolescents and youth.⁷
- **Leading or co-leading an inter-agency coordination mechanism for GBV in emergencies** prevention and response.⁸



⁵ Afghanistan, Bangladesh, Bhutan, Cambodia, China, Fiji, India, Indonesia, Iran, Lao PDR, Malaysia, Mongolia, Myanmar, Nepal, Pakistan, Philippines, Papua New Guinea, Sri Lanka, Thailand and Timor Leste

⁶ Bangladesh, Bhutan, India, Fiji, Indonesia, Lao PDR, Maldives, Myanmar and Papua New Guinea, Philippines, PSRO and Timor Leste
Philippines, Papua New Guinea, Sri Lanka, Thailand and Timor Leste

⁷ Afghanistan, Bangladesh, Bhutan, Cambodia, Fiji, India, Indonesia, Lao PDR, Maldives, Malaysia, Mongolia, Myanmar, Nepal, Pakistan, Philippines, Papua New Guinea, Sri Lanka, Thailand and Timor Leste

⁸ Afghanistan, Myanmar, Bangladesh (national GBV cluster and Cox's Bazaar GBV sub-sector); India (UN sub group on GBV), Pakistan, Papua New Guinea (Nepal, Indonesia, Iran, Philippines and Fiji/Pacific islands)

Regional Response Summary (continued)

Country examples:

- **Afghanistan:** Through the GBV sub cluster, participating in country level cluster strategic planning for the Humanitarian Response Plan, is developing interagency guidance notes for UN and NGO partners on GBV response to COVID-19.
- **Bangladesh:** To ensure the most marginalised are not left behind, UNFPA has tailored dignity kits to the needs of Hijra (third gender) populations who are at high risk of GBV. 300 kits are being prepositioned through the Regional Prepositioning Initiative supported by Australia.
- **Maldives:** To support women in quarantine facilities, UNFPA is providing technical support to integrate GBV prevention and response, including mental health and psychosocial support.
- **Malaysia:** 10,000 dignity kits are being procured for female refugees, detained migrants, and other migrants in need of dedicated support, in collaboration with IOM and UNHCR.
- **Myanmar:** UNFPA is supporting the Ministry of Health and Sports to ensure that youth mobile apps "Love Question Life Answer" and "Baykin" incorporate COVID-19 prevention and response information on SRHR, GBV and psychosocial support. UNFPA also led efforts as the first GBV sub cluster globally to develop field-level coordination guidance for adaptation of GBV response to the COVID-19 context.
- **Pacific Sub-Region⁹:** Given that women and girls with disabilities are disproportionately affected by GBV, UNFPA is procuring dignity kits adapted specifically to their needs.
- **Pakistan:** Leveraging the power of technology, UNFPA has partnered with Punjab Safe Cities Authorities to upgrade the 'Women Safety App' as an innovative solution for challenges of mobility and GBV during the COVID-19 lockdown and beyond. The app is equipped with essential features to help women in emergency situations seek help and receive immediate response from teams at their precise location.
- **Papua New Guinea:** Provision of technical and programmatic support to the Government of Papua New Guinea/Department of Community Development and Religion in the coordination of prevention and response to GBV.
- **Thailand:** Given anticipated increase in GBV due to restrictions on movement, UNFPA, UN Women and partners are supporting the Government to strengthen the capacity of GBV hotlines.
- **Regional support:** The Regional Emergency GBV Advisor (REGA) team has supported coordination capacity building initiatives including the global GBV AoR weekly webinar series. In collaboration with partners, the REGA team is providing a regional training series that introduces the core inter-agency guidelines and standards to GBV actors who are transitioning from a "development" response modality to deliver services in an emergency response for the first time due to COVID-19. This regional initiative has reached 129 participants from UN agencies, international NGOs and national NGOs.



⁹ Fiji, Kiribati, Federated States of Micronesia, Palau, Marshall Islands, Samoa, Solomon Islands, Tonga and Vanuatu

Regional Response Summary (continued)

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

Afghanistan, Bangladesh, Cambodia, China, India, Indonesia, Lao PDR, Malaysia, Maldives, Mongolia, Pakistan, Papua New Guinea, Philippines, Sri-Lanka, Thailand and **Vietnam** are currently engaged in, or have completed, inter-agency assessments of the socio-economic impact of COVID-19. In some countries, UNFPA is developing more thematic-specific assessments:

- Data collection and analysis for elderly inclusion, in collaboration with MyAgeing (**Malaysia**)
- UNFPA, UNICEF and the UN Working Group on Young People have jointly designed a series of impact surveys focusing on vulnerable children and youth, including those who are stateless, teen mothers, persons with disabilities and youth in deep south provinces (**Thailand**).
- Assessment of SRH and GBV implications and facility readiness (**Cambodia, Bangladesh, Malaysia, Maldives, Mongolia, Nepal, Sri-Lanka, Indonesia** and **Vietnam**).
- Joint UN socio-economic and health systems impact assessment. UNFPA focuses on quality of SRH and GBV services for women, adolescents and youth (**China** and **Papua New Guinea**).
- Assessment of increased maternal death and assessment of the readiness of SRH services provision, including maternity services (**Mongolia** and **Bangladesh**).
- Assessment of secondary impacts on women of reproductive age and older persons (**Iran**).
- Assessment of impact on youth (**Indonesia, Philippines** and **Pacific Sub-Regional Office**).
- Vulnerability population mapping and analysis with UN-Habitat (**Lao PDR**).
- Multi-sectoral anticipatory impact and needs analysis (**Bangladesh**).

Risk communication and community engagement

UNFPA is promoting risk communication and community engagement by:

- **Undertaking SRH and GBV risk communications and community engagement activities** adapted to the local context and language. This includes sharing key messages and health education materials, and GBV and mental health and psychosocial support information for women of reproductive age, pregnant women, youth, elderly, female health workers and internally displaced populations; and supporting toll-free hotlines for provision of accurate information.¹⁰

Country examples:

- **Afghanistan:** 7,377 calls from young people were received in the first two weeks of operation of a toll-free youth-health-line supported by UNFPA.
- **Bhutan:** The dissemination of menstrual hygiene management information to young girls in quarantine and isolation.
- **Cambodia:** Social media interventions on SRHR, GBV and mental health, including targeted messaging for pregnant women, complementing the ongoing media campaign led by the government.
- **India:** 5,288 youth and tribal youth volunteers, district youth coordinators, community members and sanitation workers have been trained on preventative measures, dispelling myths and misconceptions.
- **Iran:** Undertaking risk communication and awareness raising on GBV, and hygiene and health practices targeting pregnant women and elderly men and women.
- **Pacific Sub-region:** Youth peer networks, groups and other existing community networks are being mobilised to support contact tracing for suspected cases as an entry point to influence disaggregation of surveillance data (by sex, disability, pregnancy status and GBV where possible).

¹⁰ Afghanistan, Bangladesh, Bhutan, Cambodia, China, Fiji, India, Iran, Indonesia, Lao PDR, Malaysia, Maldives, Mongolia, Myanmar, Nepal, Pakistan, Philippines, Papua New Guinea, Sri Lanka, Timor Leste and Thailand

UNFPA raises awareness, shares guidance, and showcases achievements through media outreach.

APRO

- [Midwives save lives. Now we have to save our midwives](#)

Afghanistan

- [UNFPA donated infection prevention and control supplies to the Rabia Balkhi National Complex Hospital](#)

Bangladesh:

- [UNFPA predicts calamitous impact on women's health as pandemic continues](#)
- [IEC material for pregnant and breastfeeding mothers](#)
- [IEC Material for women and girls at risk of violence during lockdown](#)
- [Posters targeting youth and adolescents with helpline number](#)
- [Did You Know facts on youth and adolescents](#)
- [COVID-19 precautions for pregnant and breastfeeding mothers](#) ([English](#) | [Bangla](#) | [Rohingya](#))
- [Prof. Dr. Rowshan Ara Begum speaks to UNFPA on maternal health during COVID-19](#) ([link](#))

China

- [IEC materials: animated video on contraception; menstrual health; menopausal health; men's reproductive health; and saying no to domestic violence](#)
- [Message on the Government of China's PPE donation to the Government of Nepal under the China, Nepal and UNFPA South-South partnership initiative](#)



A young mother with her newborn was able to access medical help through the We Care initiative - a collaboration between the Patna Municipal Corporation and UNFPA set up to assist pregnant women and the elderly in slum communities in Bihar State.

Photo credit: UNFPA India

Media & Communications (continued)

India

- [Video for community health workers on providing essential reproductive health services](#)
- [Video on psychosocial wellbeing of health workers in Odia language](#)
- [Adapted and translated video for sanitation workers for municipalities in Odisha](#)
- [Animated videos on contact tracing; elderly care; social distancing; pregnant women and lactating mothers](#) [Posters on testing protocols; maternal health; and adolescents and COVID-19](#)

Pakistan

- [UNFPA delivers PPE to the National Disaster Management Authority](#)
- [UNFPA supported mobile clinics delivering services at the doorsteps](#)
- [UNFPA continues obstetric care services 24/7, saving lives of mothers and newborns](#)
- [UNFPA broadcasts public service messages from OBGYN on pregnancy care, breastfeeding and family planning](#)

Philippines

- [UNFPA continues to support health workers in Taal Volcano affected areas, human interest story](#)
- [Policy brief on the unique needs of women and young people](#)
- [UNFPA donated 100,000 surgical masks to the Department of Health for the protection of frontline health workers](#)

Sri Lanka

- [The needs of women, pregnant mothers and girls at the centre of UNFPA's response](#)
- [Social media messaging on GBV and discrimination](#)
- [Social media FAQ on maternity during #COVID19](#)

Thailand:

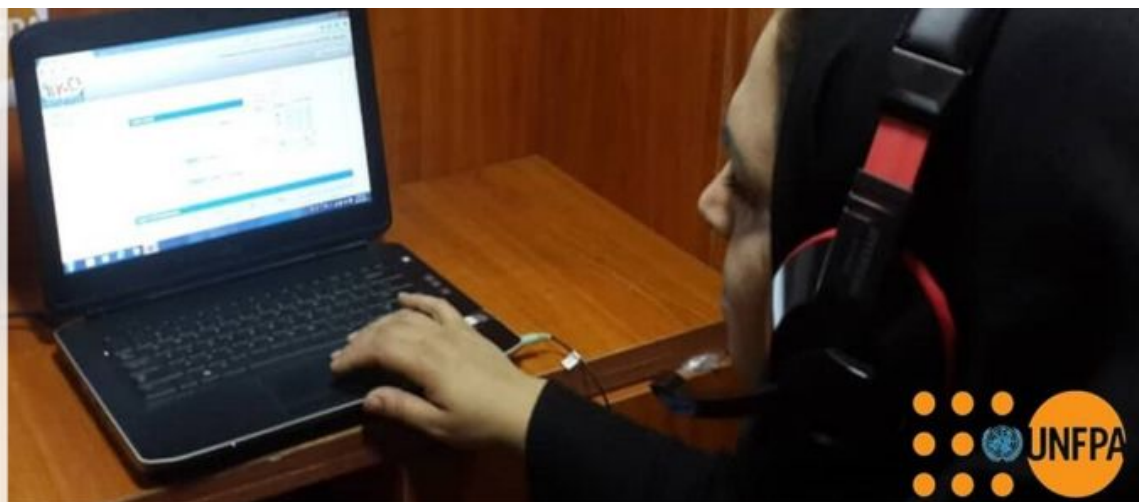
- [Thai PBS, in cooperation with Thailand's youth council & UNFPA, invites young people to send videos showing tips in preventing older person from COVID-19](#)
- [This is not the time to neglect our older generation](#)
- Thai youth worry most about economic impact from COVID-19 ([link](#), [link](#), [link](#))
- [Social media cards on COVID-19 in Thai](#)
- Social media cards in Thai honouring nurses and midwives for World Health Day ([link](#), [link](#))

Vietnam

- [Infection-control supplies delivered to maternal health facilities in Vietnam](#)

7,400 young people received COVID-19 related info through UNFPA Afghanistan supported Youth Health Line.

Photo credit: Youth Health Line Afghanistan



Saima was rarely at ease moving around the city by herself.

The Women Safety app makes the city safer for many in Pakistan's Punjab province, including women with disabilities who are at high risk of harassment and other forms of gender-based violence.



© UNFPA Pakistan



© UNFPA India

Khadija, a twenty five year old woman from a remote village of Ziarat in Pakistan was expecting her first baby. Khadija traveled miles to safely deliver at a hospital where 25 dedicated health workers are continuing obstetric care services 24/7 saving lives of mothers and newborns.

Read the full story [here](#).

INDIA/MADHYA PRADESH: ASHAs or Accredited Social Health Activists are going door to door delivering contraceptives to women. The lockdown in India initially affected access to contraceptives, but this initiative has ensured women and girls continue to access family planning interventions.

Annex: Confirmed COVID-19 Cases and Deaths in APRO (WHO, 30 April 2020)

Country	Confirmed Cases	Deaths
Afghanistan	1,827	60
Bangladesh	7,103	163
Bhutan	7	0
Cambodia	122	0
China	84,373	4,643
Democratic People's Republic of Korea	0	0
India	33,050	1,074
Indonesia	9,771	784
Iran	93,657	5,957
Lao People's Democratic Republic	19	0
Malaysia	5,945	100
Maldives	256	0
Mongolia	38	0
Myanmar	150	6
Nepal	57	0
Fiji	18	0
Pakistan	15,759	346
Papua New Guinea	8	0
Philippines	8,212	558
Sri Lanka	649	7
Thailand	2,954	54
Timor-Leste	24	0
Vietnam	270	0
Total APRO	264,269	13,752

Confirmed Cases by Country and Region

Region ● APRO ● ASRO ● EECARO ● ESARO ● LACRO ● WCARO

