"COVID-19 is the greatest test that we have faced since the formation of the United Nations."

António Guterres, United Nations Secretary-General
The COVID-19 pandemic constitutes the largest global public health crisis in a century, with daunting health and socioeconomic challenges. As the UN Secretary-General \(^1\) noted, this “is the greatest test that we have faced since the formation of the United Nations”. Governments are taking unprecedented measures to limit the spread of the virus, ramping up health systems and restricting the movement of millions. The pandemic has already severely disrupted access to life-saving sexual and reproductive health services. It is worsening existing inequalities for women and girls, and deepening discrimination against other marginalized groups. Sexual and reproductive health and rights is a significant public health issue that demands urgent and sustained attention and investment.

Health and social systems across the globe are struggling to cope. The situation is especially challenging in humanitarian, fragile and low-income country contexts, where health and social systems are already weak. Services to provide sexual and reproductive health care risk being sidelined, which will lead to higher maternal mortality and morbidity. All women and girls must have access to a continuum of sexual and reproductive health services, including antenatal, perinatal and postnatal care, and screening tests according to national guidelines and standards.

The pandemic is compounding existing gender inequalities. There are growing reports of increases in gender-based violence and sexual exploitation and abuse, even as related services for prevention and response are under pressure. With restrictions to freedom of movement, combined with the fear, tension and stress related to COVID-19, and the negative impacts on household incomes, risks of violence will grow. Women are also more vulnerable to economic fragility during confinement and movement restrictions, for reasons that include their far greater representation in informal sector jobs, particularly in Africa and Asia. This vulnerability in turn affects family income and food availability, and leads to malnutrition, especially for children, and pregnant and breastfeeding women. Furthermore, since women represent nearly 70 per cent of health-care workers globally, it is critical to support their needs, including on the frontlines of the COVID-19 response. Yet not enough attention has been given to women health-care workers in terms of how their work environment may be impacted, their safety requirements, or their sexual and reproductive health and psychosocial needs.

Shortages of vital supplies for sexual and reproductive health loom large. Life-saving medicines for maternal health and contraceptives are less available given the closure of production sites, and breakdown of global and local supply chains. In Latin America and the Caribbean, an estimated 18 million women will lose regular access to modern contraceptives. It is essential that women, adolescent girls and couples can still access a choice of effective short- and long-acting modern contraceptives, information, counselling and services (including emergency contraception) during the COVID-19 pandemic response.

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UNFPA STRATEGIC PRIORITIES AND INTERVENTIONS

The UNFPA Global Response Plan is fully aligned to and part of the UN Secretary-General’s three-step plan to respond to the devastating socioeconomic impacts of COVID-19. UNFPA’s plan complements the WHO COVID-19 Strategic Preparedness and Response Plan. At the global and regional levels, UNFPA is part of the coordinated UN response under the Inter-Agency Standing Committee (IASC) COVID-19 Global Humanitarian Response Plan. At the country level, UNFPA works within UN country teams under the leadership of the UN Resident/Humanitarian Coordinator and designated COVID-19 Outbreak Coordinator. Under the IASC cluster system, UNFPA leads coordination of the gender-based violence area of responsibility within the protection cluster.

Active in more than 150 countries and territories, UNFPA operates across the humanitarian and development spectrum. Its country and regional office network is a considerable asset given the scale of the pandemic. It also offers close partnerships with governments, in particular with ministries of health, and other national and international actors, especially implementing partners comprising international and national non-governmental organizations, civil society groups, and women’s and youth groups.

The 2030 Agenda for Sustainable Development and the Decade of Action to deliver the SDGs frame UNFPA’s COVID-19 global response, which further operates in line with the UNFPA Strategic Plan 2018-2021 with its three transformative results. These are to end unmet need for family planning, preventable maternal deaths, and gender-based violence and all harmful practices. UNFPA’s engagement in countries covers the continuum of preparedness, response and early recovery, with the ultimate aim of saving lives and building back better through more resilient societies and communities. Its response will create long-term benefits for health systems by supporting improved quality of care and better disease prevention in maternity care, and by building stronger national capacities to respond to future outbreaks.

UNFPA’s response at the country level is based on national contexts and operational realities, and is focused on the following three strategic priorities.

COVID-19 IN HUMANITARIAN SITUATIONS

UNFPA’s pandemic response is a “whole of organization” approach, integrating enhanced humanitarian and development assets. It aims to effectively respond in all country contexts struck by the pandemic.

An increasing number of COVID-19 cases are appearing in countries with ongoing humanitarian operations, where containing the rapidly spreading virus is even more daunting.

The world cannot forget the most vulnerable and marginalized. Supporting people affected by existing humanitarian crises is the right and the smart thing to do to save lives and avoid the threat of COVID-19 circling back around the globe.
STRATEGIC PRIORITY 1:

Continuity of sexual and reproductive health services and interventions, including protection of the health workforce

UNFPA is supporting governments to keep health systems functioning, to maintain the provision of sexual and reproductive health and rights information and services, to protect health workers and to limit the spread of COVID-19. These essential efforts aim at avoiding higher rates of maternal mortality and morbidity, unintended pregnancies, teenage pregnancies, unsafe abortions, HIV and sexually transmitted infections (STIs).

UNFPA is developing and implementing interventions that strengthen the capacity of health systems to respond effectively to COVID-19, including quality sexual and reproductive health services. UNFPA works to ensure that women and girls, especially pregnant, delivering and lactating women, and including those under quarantine, have timely access to safe and quality health care, including sexual and reproductive health care. This includes a full range of maternal, newborn and comprehensive reproductive health care services (in accordance with national policies and legislation), sexual health services and treatment for STIs, HIV and AIDS, and support for survivors of gender-based violence. UNFPA applies a human rights focused approach to ensure that no one is left behind.

Achieving safe and quality services depends on an adequate workforce, in terms of numbers, skills, and relevant medical supplies, equipment and material for infection prevention and control. These elements are particularly important in containing and responding to COVID-19 in countries and communities with weaker health systems, a problem that is often most acute in countries facing long-running crises, conflict, natural disasters, displacement and other emergencies. Such situations make it particularly difficult to provide health care to infected people and to sustain health services to the general population.

UNFPA will also provide dignity kits to address the hygiene needs of women and girls, based on local needs and procurement realities, so that homebound/quarantined women and girls have access to essential sanitary items.

COUNTRY ACTION

- In China, UNFPA is supporting public health efforts, including by delivering critical medical supplies for front-line health workers as well as sanitary items for women, girls and vulnerable populations such as older persons.
- In the Philippines, UNFPA provided handheld thermometers, surgical masks and other personal protective equipment to front-line health workers.
UNFPA is ensuring the continuity of life-saving, multisector services for survivors of gender-based violence and the most at-risk women and girls. Within national COVID-19 strategies, UNFPA is helping to adapt service provision based on implications for service providers and case management. It will ensure that referral pathways and risk-mitigation information are updated and disseminated regularly to facilitate access to services throughout the pandemic. It is prioritizing strengthened response capacities for hotlines and remote services, including through the adaptation of interventions like Women and Girl Safe Spaces. This will decrease the risk of exposure and provide remote service delivery, including for case management and mental health and psycho-social support (MHPSS), while encompassing protection measures for counsellors.

To address gender-based violence and harmful practices in all settings, UNFPA emphasizes prevention, protection, response, coordination and capacity development. It is integrating prevention into COVID-19 response plans; extending the reach of hotlines (assuming service availability); supporting the dissemination of messages on gender-based violence in the context of COVID-19 through social media, radio and/or TV programmes; and establishing remote social support such as virtual chat groups.

Partnerships with civil society are defining who remains in place in providing front-line support, and, of paramount importance, how to assist them to safely scale up their work. UNFPA is investing in support shelters or one-stop centres, safe spaces, etc. that minimize COVID-19 transmission and address specific risks of violence among those infected. Work with uniformed services and other responders will improve their capacity and responsiveness to gender-based violence prevention and response.

In the Caribbean, UNFPA is working with partners to develop and disseminate communication materials to support vulnerable populations, and is supporting referral pathways for gender-based violence survivors and those most at-risk.

In Nigeria, UNFPA has mobilized the private sector to contribute to procurement and ensure safe health services for women and girls, including gender-based violence survivors.
STRATEGIC PRIORITY 3:

Ensuring the supply of modern contraceptives and other reproductive health commodities

UNFPA is acting to mitigate the impact of the COVID-19 pandemic on reproductive health supplies, including modern contraceptives and maternal health medicines. Established mechanisms in all UNFPA programme countries monitor and track stock levels, consumption rates, risk of stock-out or overstock, and pipeline orders for every contraceptive method and life-saving maternal health medicine.

UNFPA is communicating with countries regarding their inventory levels by product; reviewing purchase orders, shipments and production; and continuing to work proactively with suppliers to understand and mitigate the impact of delays and price increases on family planning in developing countries. Data collected by forecasting, monitoring and tracking will be used for decision-making on where transfers from one country to another might be needed, or where increased stocks now might prevent shortfalls later.

UNFPA will support ministries of health and other institutions to provide online screening, information, and reproductive health and contraception counselling services, using means such as mobile technology in countries with high COVID-19 burdens. It will partner with private-sector health-care providers to extend counselling and contraceptive services while relieving pressure on public health systems. UNFPA will also promote primary health-care and community empowerment programmes to shift commodity distribution from clinical settings to communities.

REGIONAL ACTION

In the Pacific, UNFPA has provided risk communications for women and girls, including through social media. Outreach touches on pregnancy, contraception, gender-based violence and mental health.
ACCELERATOR INTERVENTIONS

Under these three strategic priorities, four accelerator interventions are critical to UNFPA’s response:

- **Leaving no one behind**: UNFPA is acutely aware that overcoming the multiple dimensions of social inequality represents a key challenge to sustainable development. Leaving no one behind implies training a spotlight on gaps among different population groups and areas of residence. UNFPA’s interventions focus on and advocate for those most at risk from COVID-19, including older persons and the immunocompromised. Special attention goes to those left furthest behind, as they are the most vulnerable to the secondary impacts of COVID-19 on societies and economies. They include women, adolescents, persons with disabilities, indigenous people, people of African descent, refugees and migrants.

- **Data**: UNFPA supports governments to collect and analyze data to track COVID-19 cases, including disaggregated data on specific vulnerable groups, and with a view towards informing targeted interventions to address the pandemic. A particular focus is to identify the absolute numbers of older persons, where they are clustered, and how many live in dense urban areas or alone without support. Where recent census data are available, these quick mappings can go far in bolstering government preparedness and response.

- **Risk communication and community engagement**: UNFPA offers extensive expertise in community engagement and social mobilization, and longstanding multistakeholder partnerships, including with youth networks, religious and traditional leaders, and women’s rights and women-led organizations. It will leverage these to support risk communication and community engagement in primary prevention and stigma reduction, with a constant focus on people’s safety, dignity and rights. A multisectoral approach will protect and support families and communities, and build their knowledge and capacities to protect themselves and prevent further spread of the virus. In particular, women’s front-line interaction with communities positions them to positively influence the design and implementation of prevention activities and community engagement.

- **Youth engagement**: UNFPA is strengthening the capacity of youth organizations to engage safely, effectively and meaningfully in ways that enable young people to augment their knowledge on the virus and play an effective role in the prevention and response, including as social and community workers and as assistants to professional health staff, where needed and possible. UNFPA will ensure that measures are in place to mitigate risk of all forms of violence against adolescents and youth, particularly adolescent girls and young women, in quarantine settings, isolation processes and procedures. UNFPA country offices will adopt creative and flexible outreach strategies to reach young people through digital platforms that UNFPA is already using to promote comprehensive sexuality education. UNFPA is leveraging the Compact for Young People in Humanitarian Action to provide concrete operational guidance to steer humanitarian action towards young people.

**COUNTRY ACTION**

- **In Moldova**, UNFPA helped launch an online dashboard, updated in real time, showing caseloads disaggregated by location, sex, age, and pregnancy status.

- **In Liberia**, UNFPA is working with the National Public Health Institute of Liberia on disease surveillance and contact tracing. This includes supporting the training and deployment of community residents, as well as general and community health workers, to serve as contact tracers and health supervisors.

- **In Iran**, UNFPA acquired supplies such as masks, disinfectants and gloves for more than 400 centres for older persons and those living with disabilities.
UNFPA has launched the following six technical guidance notes:

- **Technical Brief on the Implications of COVID-19 on Census**
- **Sexual and Reproductive Health and Rights, Maternal and Newborn Health & COVID-19**
- **Gender Equality and Addressing Gender-based Violence (GBV) and Coronavirus Disease (COVID-19) Prevention, Protection and Response**
- **Sexual and Reproductive Health and Rights: Modern Contraceptives and Other Medical Supply Needs, Including for COVID-19 Prevention, Protection and Response**
- **Adolescents and Young People & Coronavirus Disease (COVID-19)**
- **COVID-19: A Gender Lens**

## RESULTS INDICATORS BY STRATEGIC PRIORITIES

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<tr>
<th>STRATEGIC PRIORITY</th>
<th>INDICATORS²</th>
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| 1. Continuity of sexual and reproductive health services and interventions, including protection of the health workforce | 1.1: Proportion of COVID-19–affected countries with emergency obstetric and newborn care coverage, as per the international recommended minimum standards  
1.2: Number of safe deliveries in UNFPA-supported facilities in COVID-19 affected countries  
1.3: Number of women and young people who have utilized integrated sexual and reproductive health services in COVID-19 affected countries |
| 2. Addressing gender-based violence                                                      | 2.1: Number of women and girls, including disabled, subjected to violence who have accessed essential gender-based violence services |
| 3. Ensuring the supply of modern contraceptives and other reproductive health commodities | 3.1: Proportion of COVID-19 affected countries that reported no contraceptive stockouts  
3.2: Total couple-years of protection for contraceptives procured by UNFPA, including condoms in COVID-19–affected countries |

² Indicative indicators to be further refined.
UNFPA RESOURCE REQUIREMENTS
AND PARTNERSHIPS

UNFPA’s financial requirement for the global response is $187.5 million (as of 1 April). UNFPA is part of the UN’s Global Humanitarian Response Plan and $2 billion appeal (UNFPA: $120 million) for managing the COVID-19 threat in humanitarian situations. Additional need outside of humanitarian situations, and until the end of April, is US$67.5 million. As the pandemic evolves and expands, UNFPA will revise its overall appeal, factoring in needs and appropriate responses within its mandate and across all settings – humanitarian, fragile contexts and development.

Core resources are contributions without restrictions that form the bedrock of UNFPA operations. Core contributions are more important than ever as UNFPA responds to the COVID-19 pandemic. They enable global reach and the leveraging of additional resources, especially in emergency contexts. It is critical that the existing response to COVID-19 does not divert resources from UNFPA’s ongoing life-saving interventions in humanitarian settings.

UNFPA is reaching out to existing private partners globally, and at regional and country levels, to solicit support for the COVID-19 appeal. The request focuses on in-kind contributions of goods and services, such as personal protective equipment and materials needed to operate mobile clinics and scale up dignity kits, as well as financial donations. UNFPA is also working with visibility partners to expand communication of risk-related messages and stories regarding the broader drive to promote and protect access to services for sexual and reproductive health and gender-based violence. UNFPA’s new digital fundraising campaign will reach new audiences and raise additional funding from individuals to fuel life-saving operations during the crisis.

In all settings, UNFPA is responding to the COVID-19 pandemic with the critical support of its key partners to achieve maximum impact across our three strategic priority areas. UNFPA is partnering with governments, civil society and the private sector, UN entities, international financing institutions and philanthropic organizations, so that we can deliver more and faster towards life-saving interventions and sustainable results to the people we serve.

"Now is a time for solidarity, resolve and selflessness. We must not forget that there are people we may not immediately see, who are at great risk as a result of the consequences of the crisis."

- Dr. Natalia Kanem, UNFPA Executive Director

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