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OVERVIEW



Distribution of emergency relief in the form of a rapid response kit to flood-affected families in a temporary settlement in Al Jawf, Yemen.

UNFPA leads a multi-agency Rapid Response Mechanism, together with UNICEF and WFP. The kits contain women's clothing and essential hygiene items such as soap and sanitary pads, along with jerry cans and ready-to-eat food. Each kit is designed to cover a family's basic necessities for five to seven days. © UNFPA/Yemen

One in every 23 people in the world is currently in need of humanitarian assistance.¹ Expanding global humanitarian needs, rising operational costs and commodity prices, and high inflation are contributing to a significant rise in the financial requirements to meet that need. Forced displacement shows no sign of slowing: more than 103 million of the world's population are displaced, and nearly a quarter of all refugees are hosted in least developed countries² with little means to assist them. Disasters and extreme weather events, such as flooding and drought, are responsible for the majority of forced displacements worldwide. The growing frequency, intensity, and scope of humanitarian emergencies have dramatically amplified the risks for millions of women and girls in terms of their health needs and their vulnerability to gender-based violence (GBV).

Given this context, UNFPA is accelerating humanitarian action in more than 60 countries, providing humanitarian assistance in its core areas of promoting sexual and reproductive health (SRH), combating GBV, ensuring the informed use of population data for crisis response, and addressing the needs of young people. As a dual-mandate agency, UNFPA works in both the development and humanitarian spheres, programming across the humanitarian-development-peace nexus.

- 1 OCHA: Global Humanitarian Overview 2023.
- 2 OCHA: Global Humanitarian Overview 2023.

In December 2022, the United Nations Office for the Coordination of Humanitarian Affairs (OCHA) estimated that a record 339 million people will need humanitarian assistance and protection in 2023 – a significant increase from 274 million people at the beginning of 2022. This year, the United Nations and partner organizations aim to assist 230 million people most in need across 68 countries, which, according to the funding requirements detailed in the various humanitarian response plans, will require \$51.5 billion, with UNFPA specifically aiming to reach 66 million people in 65 countries and requiring \$1.2 billion. This is a notable increase from the previous year: in 2022, with funding from all sources, UNFPA reached 30 million women, girls, and young people with humanitarian assistance in 50 countries, including providing 22 million people with sexual and reproductive health services.

The Humanitarian Thematic Fund (HTF), a co-financing mechanism launched in late 2018, is a funding source for humanitarian action that provides UNFPA with flexible, multi-year financing to respond to emergency situations, including greater opportunities to react immediately when crises arise and to provide for "bridge" funding to ensure continued delivery of services during gaps of dedicated donor co-financing. As UNFPA's most flexible humanitarian funding mechanism, the HTF provides timely, strategic, and multi-year financing to support rapid and ongoing humanitarian response and preparedness and to strengthen the humanitarian-development-peace nexus that links humanitarian response to longer-term development initiatives. During 2022, funding from the HTF supported more than 42 UNFPA country offices and regional offices worldwide in responding to the needs of vulnerable people, especially women and girls.

2022 Allocations

The HTF is aligned closely with the UNFPA Emergency Fund,⁵ funded from UNFPA core resources, to provide life-saving funding to support countries experiencing crises. In 2022, the HTF allocated a total of \$34 million, the highest allocation in its history, for time-critical and life-saving humanitarian support in 42 countries (including regional offices). Aside from core funding, the HTF is the most flexible and rapid central funding source available for UNFPA country offices, and was an important tool for supporting UNFPA's ability to respond to key crises in 2022, including Afghanistan, Ethiopia, Ukraine, and Somalia.

- 3 OCHA: Global Humanitarian Overview 2023.
- 4 <u>UNFPA Humanitarian Action Overview 2023</u>.
- 5 UNFPA's Humanitarian Response Division (HRD) is the administrator of two central supplementary humanitarian funding mechanisms designed to support country and regional offices. Central funding is intended to act as seed or catalyst funding, providing the country and regional offices with time to mobilize additional resources for specific responses. The central supplementary humanitarian funding mechanisms administered by the Humanitarian Response Division are the Emergency Fund, funded by UNFPA's core budget, and the Humanitarian Thematic Fund, which is funded by donor contributions earmarked for humanitarian relief.

Table 1 List of HTF Recipients in 2022

	Country	Region	Roll-over from 2021	2022 New Allocation
1	Afghanistan	Asia and Pacific	\$2,781,150	
2	Armenia	Eastern Europe and Central Asia	\$113,044	
3	Bangladesh	Asia and Pacific		\$532,980
4	Belarus	Eastern Europe and Central Asia		\$58,162
5	Bosnia & Herzegovina	Eastern Europe and Central Asia	\$10,169	
6	Cameroon	Western and Central Africa	\$560,457	\$421,686
7	Central African Republic	Western and Central Africa	\$664,258	
8	Chad	Western and Central Africa	\$447,506	\$534,957
9	Colombia	Latin America and Carlbbean		\$100,000
10	Cote D'Ivoire	Western and Central Africa	\$77,074	
11	Cuba	Latin America and Carlbbean		\$203,410
12	Democratic Republic of the Congo	East and South Africa		\$534,892
13	Democratic People's Republic of Korea	Asia and Pacific	\$787,429	
14	Eastern Europe and Central Asia Regional Office	Eastern Europe and Central Asia		\$1,383,546
15	El Salvador	Latin America and Carlbbean	\$25,680	
16	Ethiopia	East and South Africa	\$568,985	
17	Guatemala	Latin America and Carlbbean		\$355,756
18	Haiti	Latin America and Carlbbean	\$808,326	
19	Honduras	Latin America and Carlbbean	\$141,556	
20	Indonesia	Asia and Pacific	\$23,226	\$279,463
21	Iran	Asia and Pacific	\$330,373	
22	Iraq	Arab States	\$246,438	
23	Kyrgyzstan	Eastern Europe and Central Asia		\$230,157
24	Latin America and the Caribbean Regional Office	Latin America and Carlbbean	\$121,783	
25	Lebanon	Arab States	\$72,705	
26	Madagascar	East and South Africa	\$110,102	
27	Maldives	Asia and Pacific	\$17,175	



	Country	Region	Roll-over from 2021	2022 New Allocation
28	Mali	Western and Central Africa		\$53,000
29	Moldova	Eastern Europe and Central Asia		\$3,660,851
30	Mozambique	East and South Africa	\$488,505	
31	Nigeria	Western and Central Africa		\$320,413
32	Pakistan	Asia and Pacific	\$340,549	\$576,405
33	Papua New Guinea	Asia and Pacific	\$16,352	
34	Republic of Congo	Western and Central Africa	\$17,692	
35	Somalia	Arab States	\$14,364	\$2,553,833
36	Pacific Sub Regional Office	Asia and Pacific	\$30,057	
37	Sudan Arab States		\$648,607	
38	Turkiye	Eastern Europe and Central Asia		\$535,000
39	Uganda	East and South Africa	\$18,593	\$397,203
40	Ukraine	Eastern Europe and Central Asia		\$11,466,210
41	Venezuela	Latin America and Carlbbean	\$280,476	
42	Yemen	Arab States		\$113,461
	TOTAL		\$9,762,634	\$24,311,386

Regional summary

In 2022, the HTF supported UNFPA country offices in all six regions around the world, with a total of 42 country offices and regional offices6 receiving HTF resources. The Eastern Europe and Central Asia region was the largest recipient, with \$17.4 million in allocations, largely in response to the Inter-Agency Standing Committee (IASC) system-wide scale-up response for Ukraine that started in February 2022. The Asia-Pacific region (\$5.7 million) was the second largest recipient, with over \$2 million allocated to Afghanistan, another scale-up response. The third largest recipient was the Arab States region, which received \$3.6 million in 2022. The other regions, namely Western and Central Africa (\$3 million), East and South Africa (\$2.1 million), and the Latin America and Caribbean region (\$2 million), accounted for the remainder.

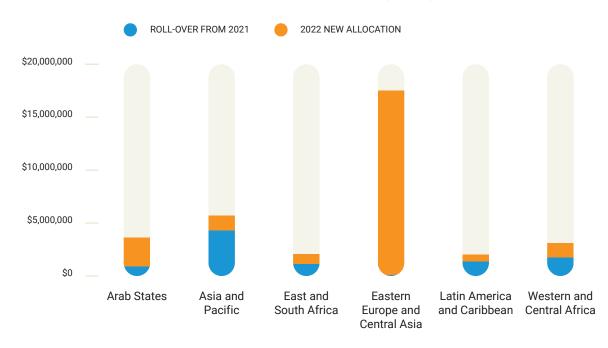


Figure 1 2022 HTF Allocation by Region (in USD)

2023 Allocations: Interim update

This report details HTF funds utilization in 2022, but the first part of 2023 has found the world facing large-scale humanitarian needs, including five IASC system-wide scale-up responses. As of May 2023, around \$17.7 million HTF funding has been disbursed to support these multiple scale-up responses and other humanitarian crises, including Ukraine, Ethiopia, Sudan, and the earthquake in Syria and Türkiye.

In this second year of the Ukraine crisis, approximately \$12 million additional funding from Sweden, Norway, and UNFPA's Individual Giving Programme continues to support Ukraine and its neighbouring countries via the HTF mechanism. According to OCHA, the Ukraine regional response in 2023 will combine both a humanitarian and refugee response plan, aiming to support 13.6 million people with a total requirement of \$5.7 billion,8 which would include the needs for UNFPA programming.

On 6 February 2023, two devastating earthquakes, measuring 7.7 and 7.6 magnitude on the Richter Scale, struck the Kahramanmaraş region in Türkiye, affecting both Türkiye, host to the largest refugee population in the world, and northwestern Syria, where 4.2 million people were already in need of assistance. HTF funding was immediately allocated to the Türkiye and Syria earthquake response and is ongoing. Women and girls are still facing particular challenges in terms of access to essential services and vital relief items, remaining safe, and covering their basic needs for appropriate shelter, hygiene and sanitation, health care, and protection.

The 2023 HTF allocations also include a \$5 million investment for the expansion of the supplies prepositioning fund, which is being complemented by another \$5 million from UNFPA core resources. The \$10 million increase allows for an expansion in the scope and capabilities for UNFPA to preposition globally essential supplies and equipment including increased funding for inter-agency reproductive health kit prepositioning; prepositioning of other life-saving equipment such as maternity clinics, mobile clinics, solar-powered refrigerators, etc.; and prepositioning of key safety and security equipment. Standard operating procedures are being defined by UNFPA to strengthen the management of the prepositioning fund and to maximize its impact.

An additional \$1 million has been allocated for rapid deployment of the Global Emergency Response Team. The funding, earmarked by Denmark for that specific purpose, will serve as the seed capital allowing UNFPA to deploy critical human resources capacities more rapidly at the onset of an emergency.

- 7 IASC Humanitarian System-wide Scale-Up Activations.
- 8 Relief Web: Global Humanitarian Overview 2023.
- 9 <u>Türkiye Humanitarian Needs and Response Overview Interim Update.</u>

DONOR CONTRIBUTIONS

In its fourth year of operations, the contributions to the HTF totaled around \$30.5 million in 2022, almost three times the contributions in 2021. The HTF funders during the year were Norway, Australia, Ireland, Italy, Germany, Republic of Korea, Denmark, Iceland, Open Society Foundation, UNFPA's Individual Giving Programme, Ferring, L'Oréal Fund for Women, and the Brask Foundation. Thanks to the generous contributions from these donors, UNFPA was able to respond to 42 countries facing humanitarian emergencies, including such large-scale responses as those for Ukraine and its neighbouring countries, Afghanistan, and Somalia.

Table 2 Donor Contributions Received in 2022¹⁰

2022 HTF Funder	Amount (in USD)
Norway	\$10,770,755
Australia	\$5,860,806
Ireland	\$3,698,687
Italy	\$3,089,308
Germany	\$2,068,252
Republic of Korea	\$1,500,000
Denmark	\$1,127,937
Iceland	\$532,140
Open Society Foundation	\$800,000
Individual Giving Programme	\$625,273
Ferring	\$273,823
L'Oréal Fund for Women	\$55,804
Brask Foundation	\$43,812
TOTAL	\$30,446,597

¹⁰ The table only includes contributions received during 2022. Funds committed by donors as part of multiyear agreements will be reflected in subsequent years' reporting once those contributions are received by UNFPA.

KEY ACHIEVEMENTS



Deka, 13, had to drop out of school to support her family, in the Somali Region of Ethiopia. Every day she walks hours from home to fetch a few gallons of salty water. Schools in the region are either fully or partially closed, and girls are increasingly forced into child labour and early marriage as their parents search for ways to make ends meet.

© UNFPA/Ethiopia/Paula Seijo

Rapid and life-saving response

In 2022, the HTF continued to enable UNFPA to deliver rapid and life-saving responses in many contexts around the world. In these cases, the utility of HTF funding is readily apparent – it allows UNFPA to step in at the very beginning of a sudden crisis (such as a natural disaster) when assistance is most needed but other funding has not yet been secured. In Uganda, for example, the HTF was allocated in a timely manner in response to the flash floods across several districts. Coordination among GBV actors at district and national level was strengthened, and safe spaces for women and girls among internally displaced communities were established quickly.

Protracted and underfunded crises

The HTF also continues to show its usefulness in protracted and underfunded humanitarian crises where funding for certain needed services may not be available when they are needed. In Yemen, a country that has historically suffered from poor reproductive health indicators including low skilled birth attendance and high maternal and newborn mortality, HTF funding was provided to support four basic emergency obstetric and newborn care facilities and six comprehensive emergency obstetric and newborn care facilities so that it was possible to resume providing the Minimum Initial Service Package (MISP) for reproductive health to the most vulnerable women and girls. Also, with the support of the HTF, UNFPA has been one of the only agencies in Kyrgyzstan to highlight the SRH, GBV and mental health and psychosocial support needs of the population displaced by border conflict and was able to provide them with much needed information and services.

Flexible and multi-year funding

The HTF, as a pooled, multi-year funding modality, is able to support UNFPA's humanitarian response at times when other donor resources have not arrived, and they may be used beyond a calendar year, which is a restriction on some funding mechanisms. In 2022, about one third of the HTF-funded projects were implemented across calendar years and will continue in 2023, as shown in Table 1 above. Because of the often short-term nature of bilateral humanitarian contributions, the flexibility provided by donors contributing to the HTF, in alignment with the spirit of the Grand Bargain¹¹ commitments, is of vital importance to support country offices in planning their projects in a more efficient and predictable manner. It means that they do not have to complete the project within one calendar year, which is a feature of funding from UNFPA's Humanitarian Fund because it is based on core funds that are only expendable during the calendar financial year.

Lower costs of the HTF

The HTF greatly reduces the transaction costs associated with management of individual agreements, allowing for a lower indirect cost rate (7 per cent in lieu of 8 per cent), while harmonizing and simplifying reporting requirements. The HTF is managed through a lean staffing structure within UNFPA's Humanitarian Response Division with very low overhead expenses. The HTF management staff is engaged in strengthening country office proposals based on global best practices in order to ensure well-designed programme implementation and reliable programme reporting. In the spirit of the Grand

¹¹ The Grand Bargain, launched during the World Humanitarian Summit in Istanbul in May 2016, is an agreement between some of the largest donors and humanitarian organizations that have committed to get more means into the hands of people in need and to improve the effectiveness and efficiency of humanitarian action.

Bargain¹², these actions significantly improved UNFPA's ability to provide flexible and rapid resource allocations in response to emergencies and to support underfunded crises.

Leveraging to support resource mobilization

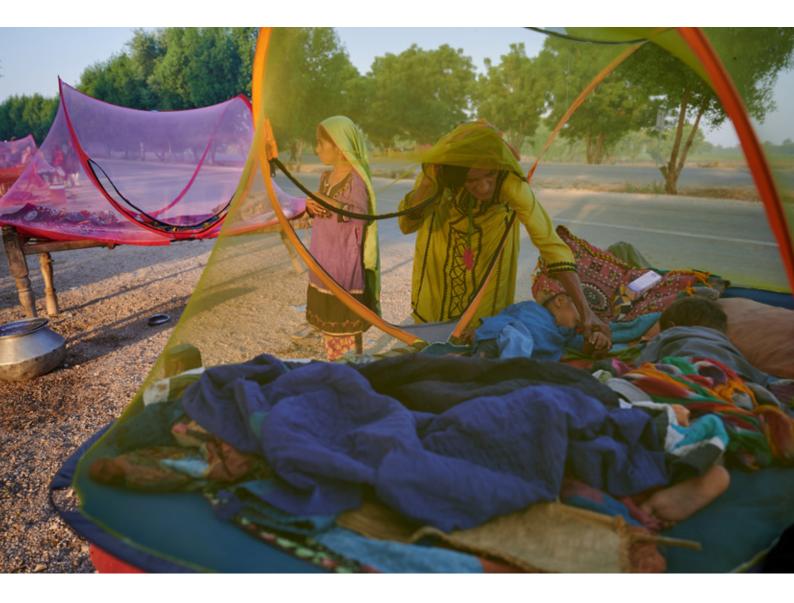
The HTF also continues helping country offices to leverage additional funding from other sources. For example, UNFPA Sudan managed to mobilize additional resources (about \$1.7 million) from OCHA's Central Emergency Response Fund (CERF) for the provision of services to address GBV based on the operations begun with HTF funding. In Pakistan, the UNFPA country office secured an additional \$1.5 million from other donor sources in support of the Regional Refugee Response Plan.

An adolescent girl expresses her thoughts through drawing at a womenfriendly space located in one of the Rohingya refugee camps. This is part of the psychosocial care being provided by UNFPA to displaced people. © UNFPA/ Bangladesh/ Fahima Tajrin



An article on how HTF reduces transaction costs published on IASC Grand Bargain website: <u>The Grand Bargain in Practice: UNFPA's pooled fund reducing the costs of humanitarian response.</u>

EXPENDITURE ANALYSIS¹³



Women, newborns and children displaced by the 2022 flooding in Pakistan. © UNFPA/ Shehzad Noorani

Expenditure by Strategic Plan output

In 2022, the total expenditure of the HTF reached around \$15 million. Expressed in terms of the output categories in the new UNFPA Strategic Plan (2022-2025), most of the HTF funds in 2022 were invested in humanitarian action, representing about three fourths of the total. The second largest output was on quality of care and services, accounting for 15 per cent. This was followed by gender and social norms, adolescent and youth, policy and accountability, and population change and data, together representing around 11 per cent of the total.

¹³ Expenditure figures in this report are interim and subject to change. Final figures will be provided in the Certified Financial Statements to be issued by 30 June 2023.

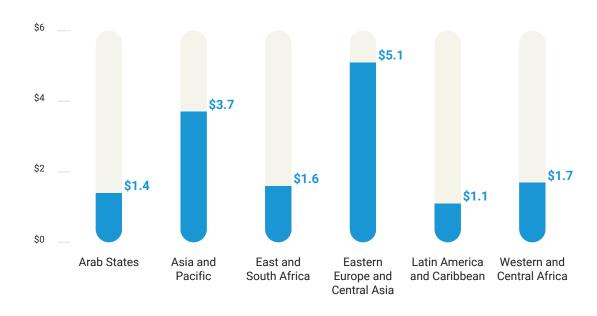
Table 3 Expenditure by Strategic Plan Output (2022)

Strategic Plan Output (2022-2025)	Amount	Percentage
1. Policy and accountability	\$122,468	1%
2. Quality of care and services	\$2,195,336	15%
3. Gender and social norms	\$1,142,538	8%
4. Population change and data	\$12,512	0%
5. Humanitarian action	\$11,109,453	74%
6. Adolescents and youth	\$366,871	2%
TOTAL EXPENSES	\$14,949,178	100%

Expenditure by region

Of the funding allocated by the HTF in 2022 (Table 1 above), the Eastern Europe and Central Asia region and the Asia and the Pacific regions expended \$5.1 million and \$3.7 million of HTF funding, respectively, during the course of the year while the expenditures in the other regions ranged between \$1.1 million and \$1.7 million dollars each. Around one third of the funding allocated for the Ukraine response had been utilized by the end of 2022, and the rest will be under implementation during 2023, as will remaining funding for the other regions.

Figure 2 Expenditure by Region (in millions of USD)



Expenditure by type of implementation

During 2022, 67 per cent of the HTF resources was implemented directly by UNFPA. A significant portion of the UNFPA direct implementation relates to the central procurement of inter-agency reproductive health kits, dignity kits, and personal protective equipment and other related commodities, which were ultimately transferred to governments and non-governmental local partners. The other 33 per cent of the HTF resources were channeled to implementing partners. Of the funding channeled to implementing partners, 67 per cent was transferred to local actors, most notably national non-governmental organizations (NGOs).

Local actors continue to be critical both as first responders in a crisis and providers of long-term support. Local NGOs played a critical role in implementing UNFPA's humanitarian response everywhere in the world. The HTF has functioned as a flexible means of financing adaptive programming that strengthens meaningful partner interaction and coordination, working with both governmental and non-governmental actors. In Bangladesh, for example, the majority of the HTF funding allocated to the response to the northeastern flash floods was channeled to local partners who played a key role in the provision of SRH and GBV services to the affected communities.

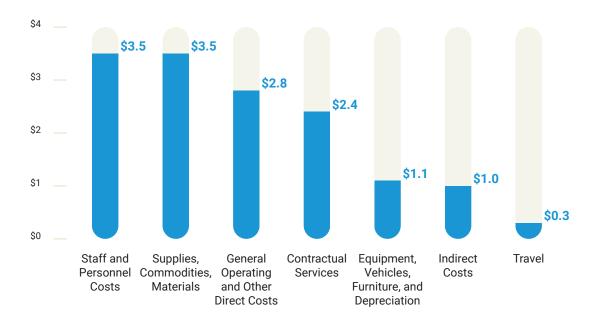
Expenditure by category

The biggest expense categories for the HTF in 2022 were "staff and personnel costs" and "supplies, commodities and materials," accounting for \$3.5 million each, adding up to around 50 per cent of total expenses. The staff and personnel costs category was largely influenced by the response in Afghanistan, where significant investments were required to ensure the continuity of critical services, and the deployment of "surge" personnel to many of the other humanitarian responses supported by HTF. The "supplies" expense category encompasses the costs related to the purchase, storage and distribution of medical and pharmaceutical products and kits, dignity and hygiene kits and personal protective equipment as well as other critical commodities that are needed in emergencies.

The third largest category of expenses is "general operating and other direct costs," constituting 19 per cent (\$2.8 million) of total expenses. Within this category, most of the costs relate to support for capacity-building interventions (e.g., training and workshops) for implementing partners, government entities, beneficiaries, civil society representatives, and other stakeholders. In this category are also included the expenses related to cash and voucher assistance programmes, printing and publication of materials, and the operational costs of supported service delivery points and implementing partners.

The fourth largest category corresponds to "contractual services," with approximately 16 per cent (\$2.4 million) of the total. This category represents the costs of implementing partner salaries and personnel costs, UNFPA consultants, and services provided by companies, such as third-party monitoring. The remaining 10 per cent (\$2.4 million) of expenditures is distributed between travel costs, equipment, vehicles and furniture provided for service delivery points and implementing partners and the reimbursement of indirect costs to the UNFPA budget (7 per cent of the total) .

Figure 3 Expenditure by Budget Category (in millions of USD)



PROGRAMME HIGHLIGHTS¹⁴



Arab States Region

A woman walking through El Jale 1
IDP Camp, Kismayo in Somalia. Makeshift huts can be seen in the background.
Many of the people in the IDP camp have been displaced by the ongoing drought in the Horn of Africa.

© UNFPA/Somalia

SOMALIA

Somalia, with one of the most complex and protracted humanitarian crises in the world, received two allocations from the HTF in 2022, totalling around \$2.5 million. Somalia's prolonged humanitarian crisis is characterized by ongoing internal conflicts, the collapse of state institutions, the degradation of natural resources, recurrent droughts and other natural disasters, communicable disease outbreaks, and weak social protection mechanisms. On 11 August 2022, the IASC Principals agreed to activate the humanitarian system-wide scale-up response in Somalia to urgently support the ongoing drought response and famine interventions in the country. Through the HTF funding support, UNFPA was able to provide life-saving SRH services for drought-

¹⁴ For further details of interventions supported by the HTF in 2022, please visit the HTF Website (https://www.unfpa.org/humanitarian-thematic-fund)

affected populations in the country. At that time, around 7.8 million people were expected to be affected by severe drought and requiring humanitarian or protection assistance.

In 2022, twelve emergency obstetric and newborn care facilities were running in drought-affected locations and free-of-charge referrals to SRH services (including a "24/7" ambulance) were expanded. Continuing in 2023, UNFPA is building upon the previously-established referral mechanism so that it can continue to provide timely and confidential services to survivors of GBV. An estimated 2,000 normal deliveries will be assisted at the mobile emergency obstetric facilities; 1,800 life-threatening obstetric and neonatal complications will be managed at the facilities; and 4,160 patients will receive family planning services at those facilities. A total of 50,000 women, adolescent girls and young women will have benefited from the interventions in the targeted areas through the support of the HTF.

SUDAN

On 24 April 2022, armed nomads attacked Kereneik town and surrounding villages in Sudan, closing markets, schools, and banks and blocking roads. Access to life-saving SRH services and prevention and response to GBV (along with many other services) were impeded by the security situation in an area of limited coverage of services even during more stable times. HTF resources were received in the UNFPA Sudan country office in a timely manner, supporting improved access to integrated life-saving SRH and GBV prevention and response services for the conflict-affected populations in West Darfur. UNFPA, through its implementing partner, the Child Development Foundation, was able to support internally displaced people and vulnerable host communities in the target locations.

The HTF funding helped provide essential primary health care and life-saving services through two mobile clinics and two temporary clinics. Over 40,000 beneficiaries were reached with general medical consultations, including 12,029 unique beneficiaries who received one or more SRH consultations and services; 284 safe deliveries were conducted; and 576 pregnant women received clean delivery kits. The HTF also supported the deployment of a roving midwifery team that provided 1,278 SRH consultations, including 134 safe deliveries. HTF funding also made possible the operation of four women and girls' safe spaces that provided psychosocial support services, including recreational, life skills and skill-building activities. These safe spaces also served as entry points for other specialized, survivor-centred services. A total of 41,182 women and girls were reached under the HTF-funded project.

Asia and the Pacific Region

AFGHANISTAN

Afghanistan has seen an overall increase of people in need, now estimated at 28.3 million people. The HTF allocation of \$2,782,000 to the Afghanistan country office is a cross-year allocation from 2022 to 2023. The IASC system-wide scale-up for Afghanistan was activated on 11 September 2021 and extended until 11 June 2022 as a result of the widespread disruption in services caused by conflict. More than 409,000 people have been newly displaced internally. The HTF-funded project helped the country office deliver integrated SRH and GBV services for women and girls affected by the crisis. This included procurement of reproductive health kits and establishment of three area offices to provide localized support. The three area offices are functioning as regional hubs in the western (Herat), southern (Kandahar), and eastern (Nangarhar) regions of the country. Collectively, they cover 14 provinces with a total population of more than 14.2 million.

The three area offices allowed UNFPA to be present on the ground, resulting in better programme implementation monitoring as well as an improved accountability mechanism. New health facilities and women-friendly health spaces are expected to be established under the guidance of the area offices, which will also take charge of distributing reproductive health kits and tents. The HTF funding has been utilized to scale up the humanitarian interventions that aim to provide life-saving maternal reproductive health as well as prevent, mitigate, and respond to GBV among the affected population, including women and adolescent girls. The funding also supported procurement of 432 inter-agency reproductive health kits to ensure the quality of life-saving services in UNFPA-supported facilities. The project will be completed in 2023, with an estimated 2.9 million beneficiaries.

UNFPA staff member Dr. Farhat meeting with community members affected by the earthquake in Afghanistan on 21 June 2022. He talks to men about the provision and need for reproductive health services. Since the earthquake, UNFPA has been visiting affected communities in the Paktika region in Afghanistan. © UNFPA/ Afghanistan/Zaeem Abdul Rahman





Villagers cross flooded land to get to their home in village Rasool Buksh Channa in Khinyari, Khairpur Mirs District in Pakistan. © UNFPA/ Shehzad Noorani

PAKISTAN

Some 2.9 million Afghans are currently residing in Pakistan; most of them live in districts with poor access to services, including primary health services and protection support services. The HTF supported UNFPA Pakistan to develop a preparedness plan for life-saving interventions to support SRH and GBV services for a potential influx of Afghan refugees starting at the end of 2021 until mid-2022. In order to make up for the lack of SRH services, six mobile health units were established in prefabricated structures to provide safe deliveries, antenatal check-ups, postnatal check-ups, family planning, and services for sexually transmitted infections. SRH services were strengthened in two standing health facilities in which 771 normal deliveries have been conducted, 1,976 women have been provided with antenatal care, and 1,057 women received postnatal care services. Additionally, six women-friendly health spaces were established in prefabricated structures in which women and young girls received GBV protection and support-related information and services while survivors of GBV were provided with relevant assistance, including referrals for specialized services. UNFPA funding procured 850 newborn baby kits, 10,500 women dignity kits, and 2,500 units of personal protective equipment to supply to targeted health facilities and womenfriendly health spaces.

The HTF also supported the Pakistan country office to respond to the monsoon floods emergency in 2022. The flood badly affected 23 out of 29 districts, in which 12 districts were declared as calamity-affected: Mirpurkhas, Shaheed Benazir Abad, Nawsheroferoz, Sanghar, Thatta, Sujawal, Tando Allahyar, Dadu, Umerkot, Jamshoro, Khairpur, Sukkur. 14.5 million people were affected, including 1.6 million people rendered homeless and internally displaced. The cross-year project is still under implementation in 2023, with the objective of providing safe delivery services including emergency obstetric and newborn care services and quality life-saving, integrated SRH and GBV services to women and adolescents in the flood-affected areas, as well as strengthening inter-agency coordination mechanisms. The project aims to reach approximately 60,000 people in total.

Eastern Europe and Central Asia

UKRAINF

On 24 February 2022, the Russian Federation launched an armed invasion of Ukraine. The situation quickly deteriorated, with major attacks reported across the country, including in the capital, Kyiv. The ongoing war has seriously affected people's access to crucial services including water, electricity, heating, health care, education, and social protection. The war has caused widespread death, destruction, displacement, and human suffering, and, as of 19 December 2022, was projected to render at least 17.7 million people in need of multisectoral humanitarian assistance in 2023. UNFPA is a key partner of the Government of Ukraine in coordinating and implementing GBV prevention and response mechanisms and has been providing multisectoral SRH and GBV services to the people of Ukraine. UNFPA's strategy has been anchored in responding to local situations, aiming to fill emergency SRH and GBV service gaps while ensuring complementarity and partnership with ongoing national efforts and early recovery plans, working to avoid parallel systems.

In the case of Ukraine, the HTF was catalytic in stimulating additional funding and provided much-needed flexibility to kick-start the operations as early as February 2022. Early response included opening of survivor relief centres and the procurement and distribution of dignity kits and inter-agency reproductive health kits. The HTF funded the procurement of a mobile maternity unit that is currently operational in the Kharkiv region, reaching into territories that became accessible in September 2022. The mobile maternity unit is a comprehensive-level emergency obstetric and newborn care mobile clinic that allows people to give birth safely in areas where hospitals and medical facilities were destroyed. For GBV survivors, the mobile maternity unit provides treatment for injuries and post-exposure prophylactic treatment to prevent sexually transmittable infections. It is also constructed in a way to allow for carrying out Caesarean-sections for women who have to undergo the procedure in difficult situations.

To help young people overcome the daily challenges in the context of the conflict, UNFPA has developed an online educational course, "Youth Resilience in a Time of Crises," that has been successfully completed by 15,128 students. UNFPA Ukraine has also designed a new comprehensive psychosocial training programme, "Energy of Your Future," aimed at helping adolescents in coping with war traumas and cumulative stress, working to prevent long-term psychological consequences and building key soft and life skills to enhance their employability.

MOLDOVA

Inter-Agency Reproductive Health Kits, for maternal health, at a storage facility in Lviv, Ukraine. © UNFPA/Ukraine/ Halyna Balabanova



The conflict in Ukraine has caused unparalleled levels of displacement in Europe, mainly impacting the countries directly bordering Ukraine, including Moldova. With HTF funding, UNFPA Moldova focused on co-leading and strengthening GBV sub-sector coordination at national and sub-national levels and ensuring the provision of quality life-saving GBV-related services and access to them by GBV survivors and women and girls at risk. Through the HTF, UNFPA established and continues to run eleven static safe spaces (four for women and seven for youth) and procured and operated three mobile safe spaces. At least 4,578 beneficiaries benefited from safe space services, including age-appropriate individual and group-based psychosocial support, recreational activities, non-formal education and intercultural dialogue activities, and legal counselling. UNFPA also provided dignity kits, which serve as a GBV risk mitigation measure and an entry point to share information on GBV.

UNFPA supported capacity-building trainings of frontline GBV responders and key multisectoral actors, including the multidisciplinary teams (health care providers, social workers, police), on safe and compassionate response to disclosures of GBV and to survivors as well as on minimum standards for GBV response in emergencies and GBV risk mitigation. Through the HTF, UNFPA also supported five local women-led organizations to reach women, adolescent girls, and children with food, hygiene products, and clothes as well as psychological first aid, legal support, and recreational activities.

To ensure that women and girls, including GBV survivors, have access to life-saving, quality, and well-coordinated GBV response services, UNFPA Moldova focused on: (a) investment in the national SRH system to strengthen the national capacity for comprehensive emergency obstetric and newborn care provision for women refugees from Ukraine and from host communities; (b)

Executive Director
Dr. Natalia Kanem
meets Ukrainian
Refugees in
Chisinau, Moldova.
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partnership with the National Health Insurance Company to support provision of SRH services for refugees from Ukraine through health institutions; and (c) supporting installation of a generator in Moldova's only level III perinatal centre, providing security in cases of power outages or major accidents.

Going forward, UNFPA will continue to support the Government of Moldova to strengthen national systems to respond to the needs of the refugees and vulnerable host communities. UNFPA will continue to focus on strengthening the localized approach to GBV prevention and response through supporting national organizations, especially women-led organizations, to effectively respond to the needs of refugees and support development and implementation at the national level of a new minimum standard package of support for refugees.

EECA REGIONAL OFFICE

The impact of the war in Ukraine has caused large-scale population displacement in the Eastern Europe and Central Asia region. As a result, UNFPA launched a regional appeal for Ukraine and neigbouring countries, including Belarus and Moldova. Although UNFPA concentrated its efforts on these three countries, the funds received in the region from the HTF were utilized to assist with a regional response in other countries as well, such as Romania. With the support of the HTF, UNFPA country offices and partners in Ukraine and neighbouring countries affected by the crisis received coordinated, tailored and timely technical and strategic support. As a result, about 11,826 women and girls were reached directly with information on SRH and GBV services through face-to-face conversations, workshops, and information, education, and communication (IEC) brochures. Coordination and provision of tailored technical, operational support, and practical solutions on SRH and GBV were also provided in a timely and continuous manner to

Ukraine and the neighbouring countries. The regional humanitarian team will continue these efforts and respond to the ongoing challenges faced by the affected populations. The UNFPA regional office will continue utilizing the HTF to support key staff positions and related activities to respond to the regional crisis at least until the end of 2023.

Latin America and the Caribbean

HAITI

Life-threatening needs in the earthquake-affected southern peninsula in Haiti¹⁵ are still present in different sectors despite the ongoing humanitarian response. In 2022, the HTF enabled Haiti to increase access to essential SRH and GBV services and supplies for women of reproductive age in the areas affected by the 2021 earthquake. The earthquake caused severe damages and casualties. Thousands of people were forced to live in open spaces and in spontaneous sites such as churches and schools with little protection against natural elements. Cases of violence increased dramatically during the emergency, and meeting the protection and SRH needs of at-risk women and girls has been challenging.

The cross-year HTF guaranteed the continuity of essential life-saving SRH services in the areas most affected by the earthquake, including by support for emergency obstetric and neonatal care in functional hospitals and other health centres. UNFPA jointly with UN Women conducted a GBV services mapping exercise in order to establish a national referral pathway. Interagency reproductive health kits, clean delivery kits, and personal protective equipment were procured and distributed to targeted health facilities. Food insecurity and lack of other basic social services, including maternal and newborn health and protection of women and girls, are among the ongoing needs. It is noteworthy that Haiti has seen an increased requirement of up to \$720 million according to the 2023 humanitarian response plan due to growing humanitarian needs, the cholera response, and inflation. IASC system-wide scale-up was activated for Haiti on 17 April 2023. Continuous support to the response is expected.

¹⁵ On 14 August, 2021, a 7.2 magnitude earthquake struck Southwestern Haiti causing severe damages and casualties.

GUATEMALA

HTF funding helped the Guatemala country office to provide life-saving SRH and GBV interventions to improve the implementation of the MISP for reproductive health and GBV in emergencies. Effects of the rainy season and Tropical Storm Julia caused high accumulated rainfall and soil saturation, resulting in damage to homes, educational centres, other infrastructure, and the country's communication networks as well as having adverse effects on the economy, food security, and health services. UNFPA coordinated with UNHCR, UNICEF and the GBV sub-cluster actors to support the protection of women and adolescent girls, the implementation of GBV survivor-centred actions and the provision of dignity kits. UNFPA also coordinated with WHO and the Association of Community Health Services, an NGO with extensive experience in community actions in humanitarian situations, to provide essential and rapid response to women and girls in need. With the support of the HTF, UNFPA was able to strengthen the referral system for GBV cases, supply equipment and transport for communities to hospitals for comprehensive emergency obstetric and newborn care, and provide safe delivery services. About 2,000 dignity kits were distributed for women of reproductive age. The HTF also supported women and girls' safe spaces to promote GBV awareness and mitigation and to assist those seeking help, working through a partnership with the non-governmental organization ECAP.

West and Central Africa

WCA REGIONAL OFFICE

Around \$1.5 million from the HTF was allocated to strengthen humanitarian capacity in the West and Central Africa region, mainly to the Central African Republic, Cameroon, and Chad. These countries have been in protracted humanitarian crisis for several years. Working through a multi-year project that started in 2021 and continued in 2022, HTF funding supported the country offices in their humanitarian programming and allowed them the space to develop strategic resource mobilization plans to meet future humanitarian response efforts. Humanitarian response coordination was strengthened by supporting the staffing of information management officers, helping to fulfil UNFPA's lead role in data collection, analyses of needs, and monitoring of the GBV response. In the West and Central Africa region, UNFPA has been investing in human resource development to ensure the continuity of operational GBV coordination structures that are capable of scaling up to meet needs as they arise. HTF funding filled gaps in SRH and GBV response service delivery, improved quality standards and increased coverage of services in the three countries based on the priority areas identified in the countries' humanitarian needs assessments.

CAMEROON

In addition to the regional funding, additional HTF funding was allocated to Cameroon in 2022 to meet increasing humanitarian needs. Since 10 September 2022, the humanitarian situation in the Far North of Cameroon has been exacerbated by floods resulting from unusually heavy rainfalls. The HTF supported life-saving integrated SRH and GBV response services for populations affected by that flooding. The multi-year project will ensure the management of obstetric and newborn complications through provision of both basic and comprehensive emergency obstetric services. It will also support procurement and distribution of long-acting reversible and short-acting contraceptive methods. Six women and girls' safe spaces will be set up, and cash assistance to women and older girls as part of case management will also be provided. A total of 85,000 people are estimated to be reached through this project, which will continue in 2023.

CHAD

Chad has been experiencing flood emergencies in parts of the country, and UNFPA has been responding in the most affected provinces. Nationwide, around 622,550 people are affected and around 373,530 are displaced. Thanks to the HTF funding, UNFPA was able to deliver integrated SRH and GBV services for the affected population. Women and girls in targeted areas of flood-affected provinces will have access to GBV risk mitigation interventions in line with the inter-agency minimum standards for GBV in emergencies. Services will be provided in safe spaces near internally displaced communities to ensure community awareness-raising on GBV. Women and girls will also have uninterrupted access to quality integrated SRH services (family planning, prenatal care, and safe delivery services, including emergency obstetric and neonatal care). Life-saving supplies such as clean delivery kits, newborn baby kits, inter-agency reproductive health kits, and dignity kits will be distributed as well. In total, the HTF will assist 272,612 people, including 62,701 women of reproductive age, 32,713 adolescent girls, and around 7,000 currently pregnant women to experience safe pregnancies and deliveries and have healthy newborns.

East and Southern Africa

DEMOCRATIC REPUBLIC OF THE CONGO

An HTF-funded project for the Democratic Republic of the Congo sought to support 93,997 people affected by the Movement du 23 Mars (M23) crisis in North Kivu province that broke out in May 2022. Most of the displaced people have been housed in community centres, and others are being hosted by families. The HTF helped strengthen institutional capacities of six health centres and three referral hospitals in three targeted health zones and set up three youth-friendly spaces in three targeted health facilities in North Kivu province. GBV survivors were able to receive quality survivor-centred holistic services according to their needs. Moreover, psychosocial services were provided through creative activities, edutainment, and group therapy psychoeducation sessions. A total of 1,800 highly vulnerable girls and women were provided with dignity kits, which were used as an entry point for GBV services awareness and referrals, and 500 vulnerable women and girls were provided with cash and voucher assistance.

UGANDA

On 20 September, 2022, the Ministry of Health in Uganda declared an outbreak of Ebola virus disease (EVD). The outbreak disrupted supply chains and increased logistical bottlenecks in distributing life-saving SRH supplies to health service delivery points in Uganda. HTF funds were provided in a timely manner to reach 94,010 beneficiaries in the target districts with information on Ebola prevention and access to SRH services, including family planning. In addition, 600 stakeholders, including health workers, para-social workers, head teachers, religious and cultural leaders, and peer educators, were capacitated to disseminate key messages on risk perception and prevention of EVD at the community level, and 656 health workers and 3,400 voluntary health trainers were supported with personal protective equipment and infection prevention and control materials, including surgical and examination gloves, alcohol-based sanitizers, and liquid soap. One hundred midwives at obstetric care facilities were trained on how to assist pregnant women suspected or confirmed with EVD. Two district Ebola task force teams were strengthened, and 250 mother/baby pairs were supplied with dignity kits. A total of 148,382 people received SRH and GBV information and services in the affected districts.







Pregnancies and birth don't wait for disasters. Sita gave birth to her baby during the heavy flooding in her country, Pakistan. Her village was buried underwater. © UNFPA/Pakistan/ Shehzad Noorani





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