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for every child

Humanitarian Action for Children

UNICEF is distributing more than 100,000 items of hygiene supplies and learning materials to vulnerable children and families to keep children healthy and learning in Klong Toey community, Thailand.

East Asia and Pacific Region

HIGHLIGHTS¹

- Across the East Asia and Pacific region, the COVID-19 pandemic, compounded by disasters, continues to contribute to severe acute malnutrition (SAM) among children, unimmunized children and children without access to education. Girls and boys are exposed to heightened risks of physical, mental and sexual violence and abuse. Millions of people lack access to safe water, sanitation and hygiene across the region.
- The UNICEF regional office will continue to support country offices, governments and partners by strengthening preparedness, enhancing systems and providing technical expertise for child-sensitive, gender-informed and disability-inclusive humanitarian action and risk-informed programming. UNICEF will also support controlling the spread of COVID-19 and address the associated socioeconomic impacts.
- UNICEF is seeking US\$118.8 million to respond to these critical needs, including US\$99.6 million for the COVID-19 response and US\$19.1 million to address humanitarian needs not related to COVID-19. Twenty-four countries and territories are directly covered by this regional appeal.

IN NEED²



1.7 million children affected by severe wasting in the region³



7.4 million children miss first dose of measles vaccine⁴



89 million people lack basic hygiene services at home⁵



150 million children in psychosocial distress due to COVID-19⁶



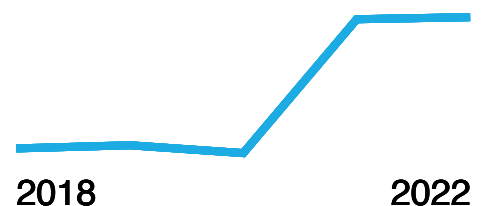
115 million children and adolescents lack access to education⁷



This map does not reflect a position by UNICEF on the legal status of any country or territory or the delimitation of any frontiers. The countries in light blue are embedded in this regional appeal. The countries in dark blue have corresponding standalone appeals or are covered under crisis appeals.

FUNDING REQUIREMENTS

US\$ 118.8 million



Figures are provisional and subject to change upon finalization of the inter-agency planning documents.

HUMANITARIAN SITUATION

Natural hazards, civil unrest, displacement and protracted conflicts continue to impact the lives of children across East Asia and Pacific (EAP). Over 31 million people were affected by disasters triggered by natural hazards in EAP in 2020, more than any other region worldwide.⁸ In January 2021, the West Sulawesi earthquake in Indonesia killed 107 people and affected 99,827 people.⁹ The region is significantly affected by climate change, leading to more frequent and intense heatwaves, storms, floods and drought. Tropical storms and cyclones affected children in the Pacific Islands, Philippines, Indonesia, Cambodia and Viet Nam. In Viet Nam alone, 7.7 million people were affected in 2021, including 2.5 million children.¹⁰ Heavy rains resulted in flash floods and landslides affecting households in China, Indonesia and Timor-Leste.¹¹ In addition, chronic and protracted humanitarian situations due to unresolved conflict and political instability continue to affect millions of children and their families, including those at risk of security threats and protests.¹² Moreover, a surge in COVID-19 cases¹³ further exacerbated existing vulnerabilities and impacted emergency response and recovery in the region. These conditions pose critical threats to children's health, nutrition, education, protection and access to basic life-saving services, including water, sanitation and hygiene (WASH), with profound impacts on the most vulnerable. An estimated 42.5 million children under 2 years of age in the region are not fed a diet diverse enough to grow well. Furthermore, girls and boys, including those with disabilities, affected by disasters, conflict and migration, are exposed to heightened risks of physical and emotional violence, abuse and exploitation, including gender-based violence. Across the region, there are 19 million children living with disabilities,¹⁴ 8 million child migrants,¹⁵ 772,000 children in residential care,¹⁶ 24,000 children in detention,¹⁷ and 25 million children in child labour, including hazardous labour.¹⁸ COVID-19 related school closures continue to disrupt access to education of 270 million children in the region.¹⁹

HUMANITARIAN STRATEGY

UNICEF regional office will continue supporting country offices in emergency preparedness, including capacity building of UNICEF and partners in humanitarian response through simulation exercises. Country offices will be supported with active risk monitoring of political, security and emergency threats. The use of horizon scanning tools will be expanded to cover risks beyond natural hazards, including tapping into external risk analyses on socio-political and security threats. UNICEF will maintain a response fund to enable country offices to rapidly support government response efforts. It will also expand the network of local partners and building capacities of local service providers, thereby contributing to the localization of humanitarian response and the broader Grand Bargain.²⁰ Collaboration with inter-agency partners will be further enhanced to support more coherent and harmonized approaches to preparedness and response planning. Furthermore, UNICEF will address the socioeconomic impacts of emergencies, including COVID-19, by restoring basic services for children in the areas of health, nutrition, WASH, child protection, education and social protection, focusing on the most vulnerable. This includes strengthening the integration of cross-sectoral efforts to address the needs of children with disabilities, adolescents, women and girls in humanitarian settings, focusing on gender-based violence (GBV) services, accountability to affected populations (AAP) and prevention of sexual exploitation and abuse (PSEA) in emergencies. Moreover, UNICEF will support governments and partners to strengthen capacities for risk communication and community engagement (RCCE), child-centred disaster risk reduction and climate change adaptation, including through supporting risk assessments to enable more disaster and climate resilient programmes and thereby contributing to the humanitarian-development nexus. To ensure greater predictability and accountability in humanitarian settings and learn from previous emergencies, including the COVID-19 response, UNICEF will advance knowledge management and evidence-based humanitarian innovations.

STORY FROM THE FIELD



The COVID-19 pandemic continues to disrupt the learning of children in the Philippines for over 18 months, as children cannot meet face-to-face for their classes. Gemma Dumapig, an adolescent with disabilities, and her neighbour Lady Ann Wereda (both 17 years old) receive a home visit from their Alternative Learning System (ALS) teacher, in the Zamboanga Peninsula. Gemma and nearly 50,000 young people learning through ALS are being supported through the Power for Youth Programme. Gemma says: "We have an opportunity to continue our studies, meet new friends and best of all, I'm not discriminated because of my condition."

[Read more about this story here](#)

In Polanco, Philippines, Gemma, a 17-year-old Alternative Learning System learner, is visited by her teacher who has been regularly checking on her through home visitations during the pandemic.

COVID-19 REGIONAL RESPONSE

Cambodia, Indonesia, Lao People's Democratic Republic, Malaysia, Mongolia, the Pacific (Cook Islands, Fiji, Kiribati, Marshall Islands, Federated States of Micronesia, Nauru, Niue, Palau, Samoa, Solomon Islands, Tokelau, Tonga, Tuvalu and Vanuatu), Papua New Guinea, Philippines, Thailand, Timor-Leste and Viet Nam.

HUMANITARIAN SITUATION (COVID-19)

Due to the pandemic, several countries postponed routine vaccination campaigns, increasing the risk of outbreaks of life-threatening diseases such as measles, diphtheria and polio. An estimated 1.7 million children in EAP are affected by severe wasting,²¹ which is expected to increase an average of 14 per cent in the period of 2020-2022 due to the COVID-19 pandemic.²²

Furthermore, access to life-saving WASH services was disrupted for millions of people as service providers struggled with staff health and safety concerns and financial difficulties. Education needs are even more urgent than last year due to the extended school closures combined with insufficient distance learning. At least 80 million children were not reached by distance learning in 2020.²³ Even children with access to distance learning spend less time learning and learn less than in class; UNESCO estimates that 4 per cent of students in the region are at risk of dropping out as a result of the prolonged school closures.²⁴

Meanwhile, the socioeconomic impact of the pandemic continues to drive millions of children into extreme destitution and livelihood insecurity. COVID-19 and prolonged stay-at-home measures continue to negatively impact the mental and physical well-being of children and adolescents as they experience family loss and separation, increased violence and abuse in the home,²⁵ including GBV, and heightened levels of stress and anxiety. Globally, over 80 per cent of affected children and caregivers are psychosocially distressed due to COVID-19.²⁶

HUMANITARIAN STRATEGY (COVID-19)

UNICEF's humanitarian strategy centres around supporting national and regional efforts to respond to the COVID-19 pandemic in EAP. UNICEF will actively monitor the COVID-19 situation to trigger timely mitigation measures to deal with the impacts of COVID-19 on vulnerable children and their families. This will involve implementing infection prevention and control measures, delivering personal protective equipment, providing hygiene and essential WASH services and supplies, and disseminating life-saving information through RCCE. To address the socioeconomic impacts of the pandemic, UNICEF will continue to complement and accompany government and partner efforts to scale up essential social services for children. This will be achieved through restoring essential healthcare and nutrition services, supporting continuity of learning through safe and inclusive school operations and remote-learning options, focusing on cash transfers through national social protection systems, stepping up social protection for the most vulnerable groups, and enhancing the quality and adaptability of child protection prevention and response systems. Mental health and psychosocial support and mitigation of gender-based violence risks will be implemented. A key priority will be to ensure that materials and services are accessible to the most vulnerable, including children with disabilities, pregnant adolescent girls, children who have experienced violence, migrant and refugee children and those from ethnic minorities, low-income families and other disadvantaged groups.

Progress against the latest programme targets is available in the humanitarian situation reports: <https://www.unicef.org/appeals/eap/situation-reports>

This appeal is aligned with the revised Core Commitments for Children in Humanitarian Action, which are based on global standards and norms for humanitarian action.

2022 PROGRAMME TARGETS^{27,28}



Nutrition²⁹

- **64,715** children aged 6 to 59 months with severe acute malnutrition admitted for treatment
- **4,504,000** children aged 6 to 59 months receiving vitamin A supplementation



Health

- **5,355,178** children and women accessing primary health care in UNICEF-supported facilities³⁰
- **35,509,821** children vaccinated against measles³¹



Water, sanitation and hygiene

- **1,075,805** children use safe and appropriate WASH facilities and hygiene services in learning facilities and safe spaces
- **1,294,543** people reached with critical WASH supplies



Child protection, GBViE and PSEA

- **1,337,400** children and parents/caregivers accessing mental health and psychosocial support³²
- **108,000** women, girls and boys accessing gender-based violence risk mitigation, prevention and/or response interventions³³
- **15,156,500** people who have access to a safe and accessible channel to report sexual exploitation and abuse by aid workers



Education³⁴

- **11,840,689** children accessing formal or non-formal education, including early learning
- **218,358** schools implementing safe school protocols (infection prevention and control)
- **102,435** children with disabilities supported to access learning, including remote/ distance learning and return to school



Social protection

- **22,368,500** households reached with cash transfers through an existing government system where UNICEF provided technical assistance and/or funding



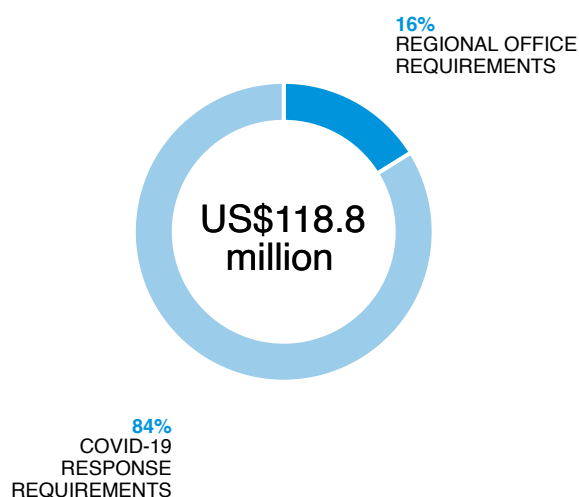
Cross-sectoral (HCT, C4D, RCCE and AAP)

- **303,050,000** people reached through messaging on prevention and access to services
- **5,603,000** people with access to established feedback and accountability mechanisms

FUNDING REQUIREMENTS IN 2022

In 2022, UNICEF requires US\$118.8 million to meet the humanitarian needs of children, adolescents and women affected by emergencies, including chronic, protracted humanitarian situations in the East Asia and Pacific region. Of the overall appealed funding, non-COVID-19 requirements amount to US\$19.1 million. These funds will allow UNICEF to support the response to protracted humanitarian situations, as well as small- and medium-scale sudden-onset emergencies that may not benefit from inter-agency appeals. This support will also be instrumental to strengthening regional partnerships, building national and regional preparedness and response capacities, advancing risk-informed programming, facilitating accountability to affected populations and promoting strong linkages between humanitarian and development programming. UNICEF will contribute to the regional climate and disaster resilience agenda through increased investments in disaster risk reduction, including child-centered risk analysis, national capacity development, knowledge management, youth engagement as well as networking and partnerships. This is particularly important in the East Asia and Pacific region context, where recurring disasters continuously impact people's lives and livelihoods and threaten to erode development gains.

Specifically, UNICEF is requesting US\$99.6 million to continue its humanitarian response to the COVID-19 pandemic in 24 countries across the region. This work will focus on interventions that control the spread of the virus and address its socioeconomic impacts. In particular, UNICEF is seeking increased funding to support priority interventions for children and their families, including dissemination of life-saving messages, resumption of routine vaccination campaigns, facilitation of children's safe return to schools and learning activities as well as expansion of social protection schemes. At the same time, continued funding support is needed to help address severe malnutrition, lack of access to clean water and sanitation, and disruption of child protection and gender-based violence services. Without these funds, children in the region may suffer grave and irreparable consequences to their physical and mental well-being.



Sector	2022 requirements (US\$)
Regional office requirements	19,182,192
Emergency response	14,888,967
Emergency preparedness	2,832,811
Regional office technical capacity	1,460,414
COVID-19 response requirements	99,602,648
Nutrition	9,272,318 ³⁵
Health	23,845,605
Water, sanitation and hygiene	18,754,568
Child protection, GBViE and PSEA	7,814,295 ³⁶
Education	19,207,903
Social protection	6,996,800
Cross-sectoral (HCT, C4D, RCCE and AAP)	13,711,159 ³⁷
Total	118,784,840

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ENDNOTES

1. UNICEF's public health and socioeconomic COVID-19 response, including programme targets and funding requirements, is integrated into the standalone country, multi-country and regional Humanitarian Action for Children appeals. All interventions related to accelerating equitable access to COVID-19 tests, treatments and vaccines fall under the Access to COVID-19 Tools Accelerator (ACT-A) global appeal.
2. The in-need figures reflect the pressing needs of the major sectors that UNICEF supports for all countries in the region.
3. UNICEF, WHO, World Bank Group. Joint malnutrition estimates, 2021 edition.
4. This figure reflects the needs of children under 5 years. WUENIC 2020 estimates (WHO/UNICEF estimates of national immunization coverage).
5. Basic hygiene services are comprised of a handwashing facility with soap and water available. WHO/UNICEF Joint Monitoring Programme for water supply sanitation and hygiene. Regional estimates exclude China, for which no nationally representative data are available.
6. UNICEF's Learning Brief on Responding to the Mental Health and Psychosocial Impact of COVID-19 on Children and Families (2020) <https://www.unicef.org/media/83951/file/MHPSS-UNICEF-Learning-brief.pdf>. The number of children who have experienced psychosocial distress is estimated based on the global MHPSS prevalence rate and the children affected by disrupted child protection services in the onset of the pandemic. The countries that reported child protection service disruption in the onset of the pandemic include Cambodia, Indonesia, Lao People's Democratic Republic, Malaysia, Papua New Guinea, Philippines, Thailand, Timor-Leste and Viet Nam. This is based on the global MHPSS prevalence estimates. UNICEF, 2020, <https://data.unicef.org/resources/protecting-children-from-violence-in-the-time-of-covid-19-brochure/>.
7. UNICEF East Asia and the Pacific Regional Office, Learning Against the Odds: Evidence and policies to support adolescents in East Asia and the Pacific, UNICEF, August 2019; United Nations Children's Fund, COVID-19: Are children able to continue learning during school closures? A global analysis of the potential reach of remote learning policies using data from 100 countries, UNICEF, August 2020.
8. EM-DAT, 2021, the International Disaster Database. CRED/UCLouvain, <https://public.emdat.be/data>.
9. MDRID020du1.pdf (reliefweb.int).
10. UNICEF Viet Nam, Floods and Storms in Central Viet Nam Situation Report No. 6, Vietnam-Floods-SitRep-2-March-2021.pdf (unicef.org).
11. UNICEF Timor-Leste, Humanitarian Situation Report No. 6, Timor-Leste-Humanitarian-Situation-Report-(Flood)-18-June-2021.pdf (unicef.org).
12. riskmap-2021-map-regions-world-a3v2.pdf (controlrisks.com).
13. According to WHO COVID-19 Dashboard (<https://covid19.who.int>), 12,692,316 people were infected and 272,850 died from the virus.
14. Global disability prevalence estimate of 10 per cent in a population of children.
15. Child migration, UNICEF, 2021. <https://data.unicef.org/topic/child-migration-and-displacement/migration/>.
16. Children in alternative care, UNICEF, Dec 2020. <https://data.unicef.org/topic/child-protection/children-alternative-care/>.
17. Protecting Children from Violence in the Time of COVID-19: Disruptions in prevention and response services, UNICEF, 2020, <https://data.unicef.org/resources/protecting-children-from-violence-in-the-time-of-covid-19-brochure/>.
18. Child Labour: Global estimates 2020, trends and the road forward UNICEF/ILO joint publication, June 2021, <https://data.unicef.org/resources/child-labour-2020-global-estimates-trends-and-the-road-forward/>.
19. UNICEF, COVID-19 and School Closures: One year of education disruption - UNICEF DATA, March 2021.
20. The Grand Bargain is a unique agreement between some of the largest donors and humanitarian organizations, who have committed to getting more means into the hands of people in need and improving the effectiveness and efficiency of humanitarian action.
21. UNICEF, WHO, World Bank Group. Joint malnutrition estimates, 2021 edition. 2021. <https://www.who.int/publications/i/item/jme-2020-edition> (accessed May 25, 2021).
22. Headey D, Heidkamp R, Osendarp S, Ruel M, Scott N, Black RE, Bouis H, Flory A, Haddad L, Walker N. Impacts of COVID-19 on childhood malnutrition and nutrition-related mortality. *Lancet* 2020; published online July 27 [http://dx.doi.org/10.1016/S0140-6736\(20\)31647-0](http://dx.doi.org/10.1016/S0140-6736(20)31647-0).
23. UNICEF, COVID-19: Are children able to continue learning during school closures?, 2020.
24. UNESCO, [school_closures_and_regional_policies_to_mitigate_learning_losses_in_asia_pacific.pdf](https://www.unesco.org/en/school-closures-and-regional-policies-to-mitigate-learning-losses-in-asia-pacific) (unesco.org), 2021.
25. Claudia Cappa et al., COVID-19 and violence against children: A review of early studies, *Child Abuse & Neglect*, vol. 116, Pt 2, (2021): 105053, <https://doi.org/10.1016/j.chiabu.2021.105053>; and Petrowski, Nicole et al., Violence against children during COVID-19: Assessing and understanding change in use of helplines, *Child abuse & neglect* vol. 116, Pt 2 (2021): 104757. doi:10.1016/j.chiabu.2020.104757.
26. Hidden Impact of COVID-19 on Child Protection and Wellbeing, SCI, 2020. https://resourcecentre.savethechildren.net/node/18174/pdf/the_hidden_impact_of_covid-19_on_child_protection_and_wellbeing.pdf.
27. UNICEF is committed to needs-based targeting, which means covering the unmet needs of children; and will serve as the provider of last resort where it has cluster coordination responsibilities.
28. This section reflects the consolidated targets of the countries included in the regional appeal only.
29. In comparison to the 2021 HAC, the programme target has been adjusted in light of the joint 2021 WHO/UNICEF malnutrition estimates which have been revised downwards.
30. Includes children and women accessing primary health care in UNICEF-supported geographic areas.
31. In comparison to the 2021 HAC, the target has increased to take into account support to routine immunization services for children in the region, including supporting catch up campaigns which were delayed/missed due to COVID-19. The target also includes children up to 15 years old.
32. In comparison to the 2021 HAC, the decrease in programme target is due to a shift from a mass media approach to more direct outreach interventions.
33. In comparison to the 2021 HAC, the decrease in programme target is due to a shift from a mass media approach to more direct outreach interventions.
34. In comparison to the 2021 HAC, a more focused and targeted approach to reach the most marginalized and in-need children has resulted in a reduction in the programme target. At the same time, the increased use of tech-based approaches has meant that the funding request has remained at similar level to that of 2021.
35. The funding need has increased to take into account the rising cost of providing services due to COVID-19, e.g. shifting services delivery from health facilities to communities, which requires additional investment to develop community systems, investments in digital technology to support remote training, coordination and monitoring, and high cost for transportation for supplies.
36. Including US\$629,859 for PSEA.
37. In comparison to the 2021 HAC, funding requirements have been revised upwards in support of direct outreach interventions and more expanded focus in other cross-sectoral themes, notably AAP/feedback mechanisms.