



Service provision has continued in all 22 UNFPA-supported health facilities in Cox's Bazar © UNFPA Bangladesh

Reporting Period: 1- 31 August 2020

UNFPA Global COVID-19 Situation Report No. 5



Global Highlights

- UNFPA's response to the COVID-19 pandemic focuses on the **continuity of sexual and reproductive health services (SRH) and gender-based violence (GBV) prevention and response, risk communication and community engagement, and provision of lifesaving supplies** including contraceptives, maternal health drugs and supplies, and personal protective equipment (PPE).
- UNFPA is working with partners worldwide to support SRH/GBV services, risk communication, and supplies. This includes providing PPE and training staff in maternity wards, setting up mobile clinics to reach vulnerable communities, and procuring life-saving SRH commodities. The integrated GBV/SRH mobile teams also provide psychosocial support services such as individual counselling and consent-based referrals. Since April, UNFPA has procured US\$16 million worth of PPE for 86 countries.
- As of 31 August 2020, UNFPA-supported programmes had reached millions of people, including an estimated 10 million women and 5 million young people aged 10-24, in 52 countries covered in the UN-led global humanitarian response plan (GHRP). More results can be viewed in the latest GHRP progress report [here](#).
- A UNFPA survey shows that GBV services, in-person and/or remote, have been maintained with fewer disruptions than in the previous reporting period. Provision of remote services and other alternative modalities are helping to reach more people. The tele-psychosocial services in Pakistan and the Dominican Republic, and psychosocial services provided in quarantine sites in Somalia are examples of successful outreach. However, some countries have seen a substantial decrease in the uptake of GBV services, which UNFPA is working to address through awareness raising and community engagement.
- UNFPA has developed a [body of technical briefs](#) to guide work in countries, in the context of the [WHO global strategic preparedness and response plan](#), [UNFPA COVID-19 global response plan](#), [Global Humanitarian Response Plan](#) and the UN Secretary-General's [policy briefs](#) on COVID-19 response.

Situation in Numbers

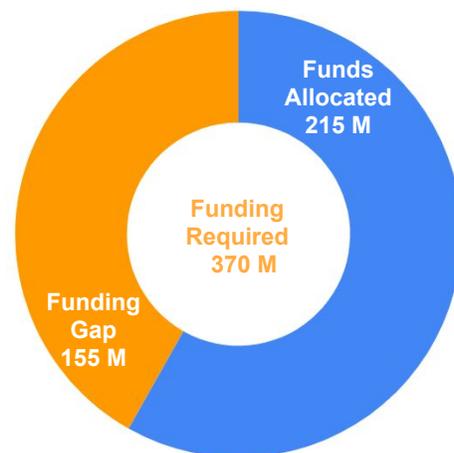


Source: WHO 11 September 2020

Key Population Groups



Global Funding Status (US\$)*



* As of 31 August 2020

Leadership, Coordination and Partnership

At country, regional and global levels, UNFPA is coordinating efforts to reduce the spread and negative impacts of COVID-19, working with governments, other UN agencies, NGO and private sector partners. Using an integrated “whole of organisation” coordination approach, UNFPA is responding to COVID-19 as a protracted situation, focusing on resiliency, flexibility and agility of its operational, programmes and policies. This includes strengthening preparedness capacities for future outbreaks, and in particular in regions where the pandemic has not peaked. UNFPA is leading these efforts through 150 country offices, six regional offices, liaison offices and New York headquarters.

- **At the global level**, the UNFPA Executive Director participates in the Inter-Agency Standing Committee (IASC) Principals meetings coordinating the IASC collective’s COVID-19 response. UNFPA’s Executive Director also participates in meetings of the Secretary-General’s Executive Committee for high-level decision making in the overall COVID-19 response. UNFPA participates at the Deputy Executive Director level in the **UNSDG Task Team on the implementation of the UN framework for the immediate socio-economic response to COVID-19**. In addition, the Director of the Humanitarian Office participates in the IASC Emergency Directors Group. Furthermore, UNFPA’s Humanitarian Office is fully engaged, participating in the IASC Operational Policy and Advocacy Group (OPAG) and related Reference Groups meetings, and the OCHA-led Global Humanitarian Response Plan process.
- **UNFPA collaborates with the Executive Office of the UN Secretary-General** on an ongoing basis to develop Secretary-General reports and briefs on COVID-19 in areas such as gender, human rights, people on the move, children, older persons, and mental health, with participation of field staff. UNFPA co-authored the health pillar of the UN framework for the immediate socio-economic response to COVID-19, and provided contributions to the other pillars of social protection and basic services, economic recovery, and multilateral collaboration.
- **UNFPA is a member of the WHO-led UN Crisis Management Team** that provides strategic leadership on the health response, and is a member of the COVID-19 Supply Chain Task Force (WHO, WFP, UNICEF, UNOPS, UNDP, UNFPA, UNHCR). The Task Force provides strategic direction to ensure that the most critical gaps in supplies are identified and met in a timely fashion. UNFPA is one of 13 UN agencies and NGOs for which UNICEF leads the global tender for procurement of personal protective equipment – masks, gloves, gowns and others – to cover forecasted PPE needs for the COVID-19 response. UNFPA supports the UN global initiative, [Verified](#), to combat misinformation amid the COVID-19 pandemic.
- **UNFPA works within international humanitarian and development coordination systems** to ensure that the needs of women, girls and young people are included in COVID-19 guidance, response plans and country-level implementation. UNFPA’s work contributes to prevention and control of the pandemic to ensure the continuity of essential services for women, young people and vulnerable populations such as older persons, persons with disabilities, LGBTQI, ethnic minorities including Afro-descendants and indigenous people in COVID-19 affected areas. UNFPA also works to protect frontline health and social workers, 70 per cent of whom are women that need PPE.
- **At the regional and country levels**, UNFPA participates in the WHO Regional Crisis Management Group and various coordination mechanisms, including the UN Country Team and Humanitarian Coordination Team, and supports the respective national COVID-19 Preparedness and Response Plans ensuring integration of SRH and GBV concerns, and mitigation of social and economic impacts, including protection from GBV and prevention of sexual exploitation and abuse. UNFPA country offices have been spearheading various COVID-19 impact assessments on SRH and increased risk of GBV among women and girls, including those most vulnerable such as persons with disabilities, older persons, refugees, internally displaced persons and migrants.
- **As the lead agency of the GBV Area of Responsibility** under the UNHCR-led Protection Cluster, UNFPA is leading GBV coordination groups in 43 out of the 63 countries covered by the Global Humanitarian Response Plan. The [GBV AoR](#) has continued to provide support and has expanded the regional coordination teams.
- UNFPA offices are coordinating the procurement and logistics of humanitarian relief supplies as they relate to UNFPA’s mandate and COVID-19 response. UNFPA supports COVID-19 Humanitarian Operation Cells, or similar mechanisms, to address service delivery constraints and advocate for physical access.

UNFPA Global Response Plan to COVID-19

UNFPA appealed for \$370 million through its COVID-19 Global Response Plan. As of 3 September, \$66.4 million has been received. UNFPA's top donors to the COVID-19 response include Australia, Canada, Denmark, Finland, Iceland, Norway, Sweden, and the United Kingdom, the UN COVID-19 Response and Recovery Fund, the UN Central Emergency Response Fund and the World Bank. This support has enabled UNFPA to quickly respond to COVID-19 around the world. Funding provided through the UNFPA Humanitarian Action Thematic Fund (\$22.2 million) allows UNFPA the flexibility to respond to needs as they arise in humanitarian contexts.

Quality Funding

- In line with IASC and Grand Bargain commitments, UNFPA is committed to addressing barriers to cascading quality funding to frontline responders and to continuing to ease requirements especially in the context of COVID 19. We are continuing to advocate for quality funding and better programming.
- The recent UNFPA and UN Women gender funding study underlines the current lack of a tracking mechanism for gender funding flows in humanitarian response, the importance of increasing investment to close the funding gap on programming - including lifesaving services for GBV and SRH and social norms - and leveraging partnerships and leadership of women's organizations in designing and delivering the humanitarian response.

Flexibility Funding

- UNFPA uses flexible funding for onset crises, preparedness and transition settings through the Humanitarian Thematic Fund. For COVID-19, UNFPA was able to prioritize PPE needs and logistics management as the crisis evolved. This allows the allocation of resources globally based on needs, rather than relying solely on contributions earmarked at the country level. Flexible funding is also used to transport PPE and other life-saving supplies with minimal delays, overcoming logistical bottlenecks caused by the pandemic at the international and national levels.
- Furthermore, UNFPA, in line with the IASC harmonized approach to funding flexibility in the context of COVID19, has introduced guidance and measures across budget flexibility/cost eligibility, no-cost extension, reprogramming of funds, simplified due diligence, and risk management processes with its partners. UNFPA is also now exploring ways on how these new measures can be continued beyond COVID-19 response and become part of new way of working.

Strategic Partnerships with the Private Sector

- The Individual Giving Programme continued the COVID-19 digital fundraising effort, with a focus on fundraising for UNFPA's response in Yemen. Since the beginning of 2020, the programme has raised over US\$ 630,000. A campaign to support UNFPA's response in Beirut, after the port explosion, has raised over US\$ 25,000 to date. The Programme will continue with the aim to convert donors to monthly supporters and engaging with high-value individual donors through email marketing and webinars. "Live from Yemen" is the first webinar featuring UNFPA Yemen's Humanitarian Coordinator to discuss the current situation and UNFPA's work, to be held on 23 September 2020.
- Over US\$6 million in contributions from the private sector were mobilized towards UNFPA's COVID-19 response.

Global Response Summary

The UNFPA overall response to COVID-19 aligns with the [2030 Agenda](#), the [WHO global Strategic Preparedness and Response Plan \(SPRP\)](#), the [UN-coordinated Global Humanitarian Response Plan \(GHRP\)](#), the [UN framework for socio-economic response to COVID-19](#), and [UNFPA's COVID-19 global response plan](#).

The UNFPA COVID-19 regional situation reports continue to document the work of regional and country offices supporting SRH and GBV work, championing risk communications, engaging communities, particularly young people, and providing life-saving commodities and supplies. (See links below for the latest editions)

UNFPA COVID-19 Regional Situation Reports for August

[COVID-19 Situation Report No. 7 for UNFPA Arab States](#)

[COVID-19 Situation Report No. 7 for UNFPA Asia and Pacific](#)

[COVID-19 Situation Report No. 7 for UNFPA Eastern Europe and Central Asia](#)

[COVID-19 Situation Report No. 7 for UNFPA East and Southern Africa](#)

[COVID-19 Situation Report No. 7 for UNFPA Latin America and the Caribbean](#)

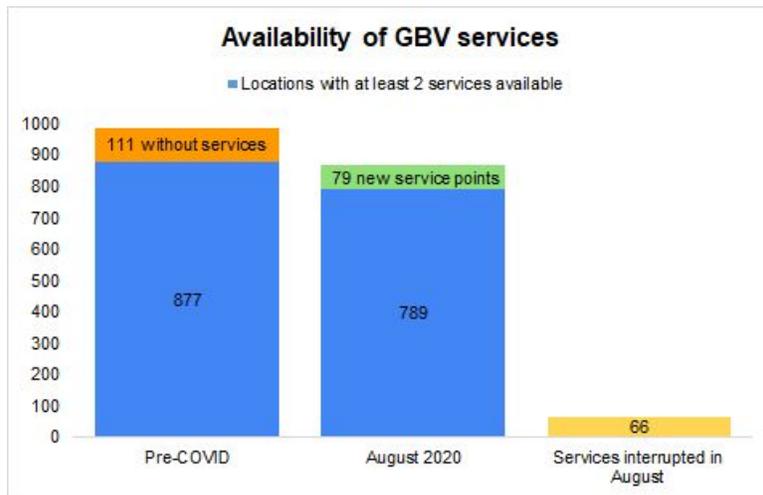
[COVID-19 Situation Report No. 7 for UNFPA West and Central Africa](#)



UNFPA August survey (in Global Humanitarian Response Plan countries)

Gender-based violence

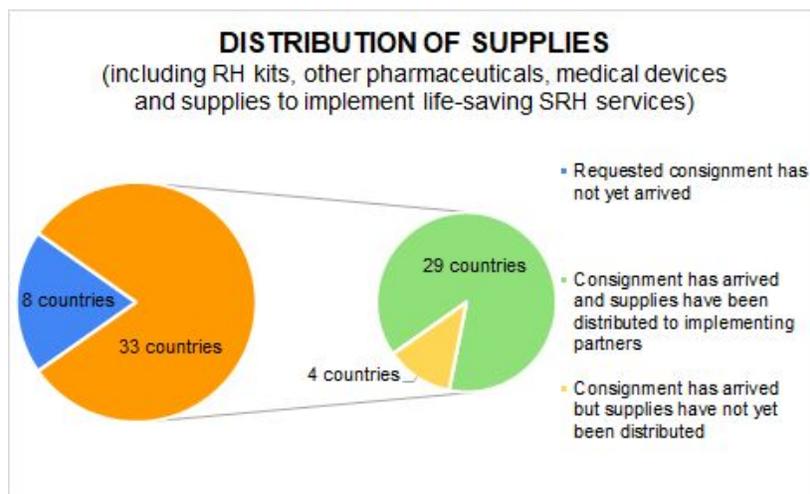
Results of UNFPA's GBV survey showed that, in general, GBV services (in-person and/or remote), have been maintained with fewer disruptions than in the previous reporting period. This is largely due to improved remote and alternative modalities.



UNFPA surveyed 988 GBV service points in 49 countries covered by the UN-led global humanitarian response plan. Minimum GBV response services were available at 877 service points pre-COVID, of which 66 were interrupted by August. About 111 locations did not have minimum GBV services available pre-COVID and continued to lack services by August, while 789 service points were maintained and 79 new ones were established.

Reproductive health supplies

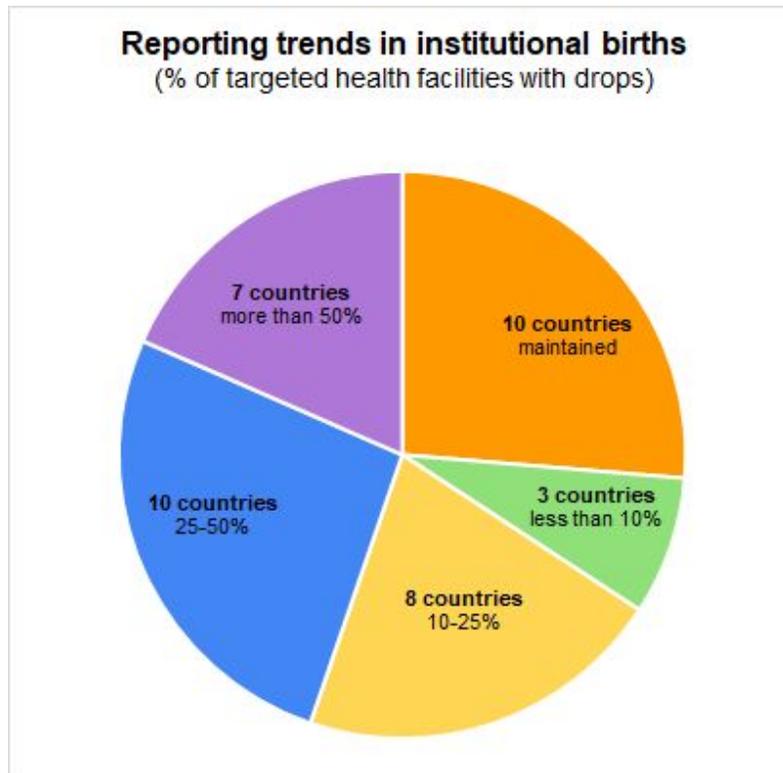
Since 1 March 2020, 41 countries have requested consignments of reproductive health kits and other pharmaceuticals, medical devices and supplies to implement life-saving SRH services.



UNFPA August survey results cont.

Institutional births

Primary data from 38 countries was analysed to identify potential drops in institutional deliveries by comparing the number of institutional deliveries in June 2020 to the average number of institutional deliveries in 2019. Results show that the number of institutional deliveries was maintained in 10 countries and had dropped in 28 countries with declines ranging between less than 10 percent to 88 percent of the targeted facilities in each country.



The decline in institutional deliveries was observed in less than 10% of health facilities in 3 countries, 10-25% of health facilities in 8 countries, 25-50% of health facilities in 10 countries, and 50% of health facilities in 7 countries.

Although interpretation of any changes in institutional births would require an understanding of population movement, these results are concerning as service disruptions in emergency obstetric and neonatal health care services have a direct effect on the continuity of essential SRH care, with serious potential implications on maternal and newborn health.

UNFPA-UNICEF Joint Programme on the Elimination of FGM

UNFPA reaches over 30k grassroots activists through #EndFGM Media Campaigns Training Series

- In partnership with the [Global Media Campaign](#), UNFPA has launched a training series on #EndFGM Media Campaign in May this year. This series aims to increase the capacities of grassroots activists in terms of utilizing media (traditional and digital) in their advocacy work to eliminate female genital mutilation in their communities. The series provides an opportunity for country offices to learn from grassroots activists, as well as to identify opportunities for collaboration on media campaigns, especially during COVID-19. In 5 months, UNFPA has reached over 30k grassroots activists through the series, which will continue till the end of the year.
- The Joint Programme has released its mid-year newsletter, highlighting UNFPA's activities and interventions on female genital mutilation within COVID-19 response. To view the newsletter, click [here](#).

Resilience in Action: Lessons learned from the Joint Programme during the COVID-19 Crisis

- Drawing on rapid assessments and surveys, and consultations with country and regional offices supported by the Joint Programme, the lessons learned [brief](#) presents strategies for adapting interventions to ensure business continuity in the face of the COVID-19 pandemic, and captures learnings that will inform the programme's future strategic planning. The brief is intended for Joint Programme staff and implementing partners, and other stakeholders working towards the elimination of female genital mutilation.

What can we learn from countries on adapting management approach during COVID-19?



INTEGRATION OF FEMALE GENITAL MUTILATION IN COVID-19 HUMANITARIAN RESPONSE PLANS:

1

The COVID-19 humanitarian response has allowed some country offices to leverage longer-term development and resilience outcomes. This includes getting the government's attention to create new guidance and tools for future emergencies.

ADAPTATION OF SERVICES TO COVID-19 CRISIS

2

Successful adaptation of services to the COVID-19 crisis depended on long-term investments in systems strengthening and coordination, as well as the capacity building of government partners.

COMMUNITY SURVEILLANCE ARE MORE SUSTAINABLE AND RESILIENT DURING COVID-19

3

While there was a breakdown in formal protection mechanisms during COVID-19 due to school closures or a disruption in child protection services, community surveillance proved to be more sustainable and resilient.

COMMUNICATION FOR SOCIAL NORMS CHANGE

2

Countries adapted their communication strategies to the COVID-19 crisis utilizing digital technology in communicating with partners and communities.

CHANGING GENDER RELATIONS AND NORMS

2

The Joint Programme prioritized partnering with local women's organizations so that girls and women exercise voice, leadership and decision-making in the planning and implementation of national and local action plans for the elimination of female genital mutilation in development and humanitarian settings.

DATA COLLECTION

2

Leveraging digital technology, various data collection tools have been used by countries for community surveillance or conducting simple community surveys and mapping.

Adolescents and youth and COVID-19

[My Body, My Life, My World: Through a COVID-19 Lens](#): In order to safeguard young people's rights to health, safety, choice and voice, UNFPA has adapted and reimagined its organisational strategy, **[My Body My Life, My World](#)**, to the pandemic. In a new series of technical briefs, **[My Body, My Life, My World: Through a COVID-19 Lens](#)**, UNFPA supports countries and regions in adapting and reimagining a range of interventions across contexts and through several phases of the pandemic. The package of technical briefs provide guidance in modular form, to be read and applied as a whole set or individually, depending on context.

1. **[Q&A: Adolescents, Youth and COVID-19](#)** (WHO, UNFPA) - This Q&A can be put directly in the hands of adolescents to answer their most pressing questions about the COVID-19 virus and the impacts it may have on their health and well-being.
2. **[Not on Pause: Responding to the sexual and reproductive health needs of adolescents in the context of the COVID-19 crisis](#)** (WHO, UNFPA) - This brief sets out adolescent specific and adolescent relevant actions that can be taken by health systems and health service providers to respond to the SRH needs of adolescents in context of the pandemic.
3. **[Invisible but not Forgotten: Risk communication and community engagement with young people left behind during the COVID-19 pandemic](#)** - As critical activities and institutions move online in response to the pandemic, young people living in poverty, or in isolated, hard-to-reach communities, face major access and connectivity challenges. This brief responds to these challenges by offering concrete guidance and resources on engaging young people in risk communication and community engagement (RCCE) related to COVID-19. Recommendations reimagine RCCE in the context of physical distancing and containment, and leverage community-based approaches to effectively and ethically reach marginalised young people.
4. **[Learning Beyond the Classroom: Adapting CSE education programming during the COVID-19 pandemic](#)** - This brief offers guidance on adapting CSE as many schools globally remain closed, it includes a special focus on out-of-school CSE.
5. **[Equality for Girls in Crisis: Adapting child marriage and adolescent girls programming during the COVID-19 pandemic](#)** - Structured around the UNFPA-UNICEF Global Programme to End Child Marriage, this brief guides UNFPA country offices and partners working on child marriage and adolescent girls programming to adapt their interventions. Recommendations focus on (a) marginalized girls, (b) the family and community environment, (c) strengthening systems, (d) addressing drivers of poverty, (e) laws and policies, and (f) data and evidence.
6. **[#youthagainstcovid-19 Campaign: All that you need to know](#)** - This brief guides UNFPA COs on how best to leverage the #youthagainstCOVID19 campaign. Structured in a Q&A format, it presents a) an overview of the content and partners of the campaign, b) information situating the campaign in UNFPA's broader pandemic response and c) information on how to participate in the campaign, including on how to adapt it to local contexts.
7. **[Surveys and assessments on young people and COVID-19](#)** - Developed in response to the rush of surveys and rapid assessments released at the start of the pandemic, this brief offers domains, questions and resources for UNFPA COs to structure future assessments on young people and COVID-19.

HIV Prevention and COVID-19

COVID-19 has impacted the AIDS response, posing significant risks to the continuity of HIV and other essential services and threatening to reverse hard-won progress.

UNFPA within the Joint UN Programme on HIV/AIDS (UNAIDS) is collaborating at country, regional and global level to support COVID-19 responses, building on the lessons learnt from the HIV response and the recommendations of the UNAIDS Programme Coordinating Board. UNFPA and UNDP held an [informal consultation](#) with Board members on 25 August to discuss the way forward. UNFPA and partners are focused on actions to scale up multisectoral HIV and health responses, establish partnerships for financing, highlight the important role of communities and ensure the meaningful engagement of vulnerable populations while calling on countries to ensure that human rights guide responses.

Within the Joint UN Programme, UNFPA has country envelope funding totalling \$ 3.9 million in 70 countries, of which the total amount directly reprogrammed for COVID-19 activities is 14%. The majority of countries - 37, or 52% - reported rescheduling activities or repurposing around COVID-19 in broad terms. This has principally been for community and youth engagement and support, for example through online communications and helplines on remote counselling and referral for HIV/Sexually Transmitted Infections prevention, sexual reproductive health and rights, prevention of gender-based violence and mental health and psychosocial support; livelihood support to key populations; and provision of contraceptives, and dignity kits and medical kits. UNFPA is supporting countries to maintain integrated sexual and reproductive health and HIV prevention services, address sexual and gender-based violence and help young people to play a lead role in COVID-19 responses.

The COVID-19 pandemic threatens to roll back fragile gains to address HIV among adolescent girls and young women. Many girls are at risk of not returning to school after the lockdowns are lifted. Building on the momentum of ICPD25, the 25th Anniversary of the Beijing Platform for Action and the Generation Equality campaign, UNAIDS, UNESCO, UN Women, UNFPA and UNICEF are working to ensure that girls have equal opportunities to access secondary education and economic opportunities to thrive and be free of HIV.

A report from UNAIDS launched on 27 August 2020, [Lessons learned from the HIV response – dangers of failing to respect human rights in the response of COVID-19](#), shows how HIV prevention and treatment services were disrupted in 10 of 16 countries reviewed. It proposes ten immediate areas for action for governments that are looking ahead to build effective, rights-based COVID-19 responses.

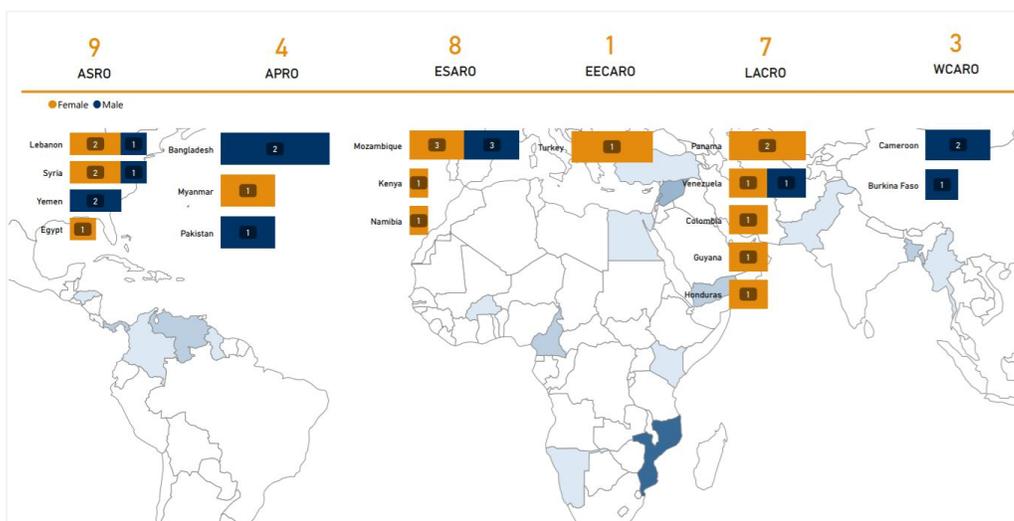
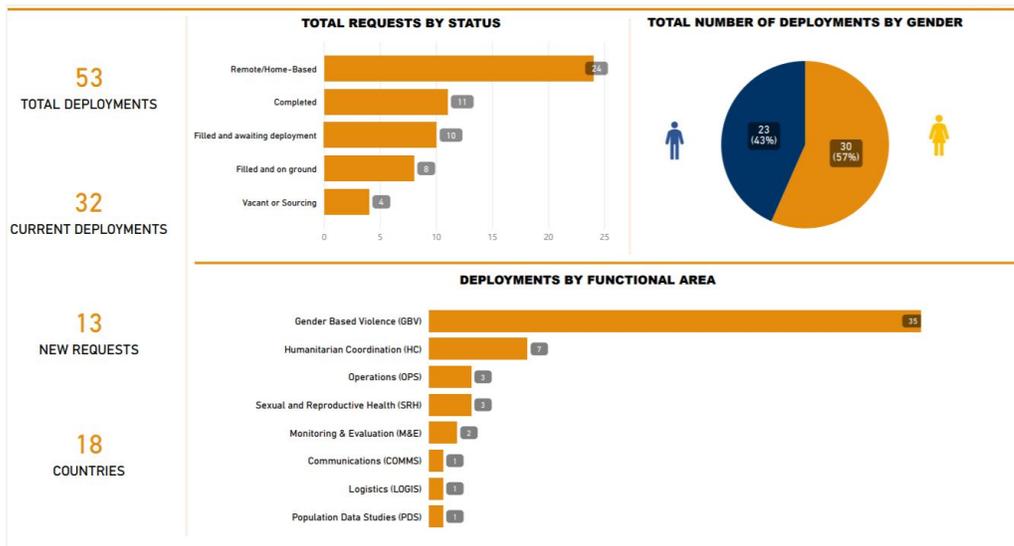


Student leaders working to stop COVID-19 community spread in Senegal.
©UNFPA Senegal

Surge Deployment Overview

By the end of August, UNFPA had deployed 53 persons to country offices throughout the year. During August, there were a total of 13 new deployments making a total of 32 active deployments during the month. A further eight deployments were in process of deployment preparation. The first-ever virtual surge workshop will see 42 potential roster members participate in a three-week virtual workshop further strengthening roster responsiveness during the time of COVID-19.

- Following the port explosion in Beirut, UNFPA filled all surge requests including deployments in Procurement, SRH, Data in Emergencies and Humanitarian Coordination
- The active time it's taking for the Surge Team to identify someone for deployment is four days.
- At the end of August, 8 surge were on the ground, 24 working remotely, and others were deployed through localised surge mechanisms.
- UNFPA continues to receive in-kind support from standby partners and donors such as DFID, NORCAP, the Danish Refugee Council and the Government of Canada. Our partners have also assisted in extending contracts in situations where surge personnel have not been able to leave the country due to border closures to ensure their safety and well-being.



Regional Offices: Arab States (ASRO), Asia & the Pacific (APRO), Eastern and Southern Africa (ESARO), Eastern Europe & Central Asia (EECARO), Latin America & the Caribbean (LACRO) and West & Central Africa (WCARO)

Technical Guidance

UNFPA technical briefs to guide staff and partners in addressing COVID-19 are available through these links:

- [COVID-19 Technical Brief for Maternity Services](#)
- [Impact of COVID-19 Pandemic on Family Planning and Ending Gender-based Violence. Female Genital Mutilation and Child Marriage](#)
- [Implications of COVID-19 for Older Persons: Responding to the Pandemic](#)
- [Technical Brief on the Implications of COVID-19 on Census](#)
- [Adolescents and Young People & Coronavirus Disease \(COVID-19\)](#)
- [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.](#)
- [Sexual and Reproductive Health and Rights. Maternal and Newborn Health & COVID-19](#)
- [COVID-19: A Gender Lens](#)
- [Global Call to Action: Protecting Midwives to Sustain Care for Women, Newborns and their Families in the COVID-19 Pandemic](#)
- [COVID-19: Working with and for Young People](#)
- [My Body, My Life, My World: Through a COVID-19 Lens](#)
- [Q&A: Adolescents, Youth and COVID-19](#)
- [Not on Pause: Responding to the sexual and reproductive health needs of adolescents in the context of the COVID-19 crisis](#)
- [Invisible but not Forgotten: Risk communication and community engagement with young people left behind during the COVID-19 pandemic](#)
- [Learning Beyond the Classroom: Adapting CSE education programming during the COVID-19 pandemic](#)
- [Equality for Girls in Crisis: Adapting child marriage and adolescent girls programming during the COVID-19 pandemic](#)
- [#youthagainstcovid-19 Campaign: All that you need to know](#)
- [Surveys and assessments on young people and COVID-19: Domains, questions and resources](#)

External Media and Human Interest Stories

UNFPA raises awareness and support for prioritising the needs and rights of women and girls and marginalized groups, and continuing sexual and reproductive health and rights and prevention and response to gender-based violence during COVID-19. Here is the [UNFPA COVID-19 page](#) and below are statements of the Executive Director, and human interest stories featured on the UNFPA global website, and highlights of media outreach.

STATEMENTS

- [Celebrating the Real-life Heroes Battling COVID-19, Crises and Disasters](#)
- [Youth leading the way in COVID-19 solutions](#)

WEB STORIES

- [Meeting the needs of older people through solidarity, empowerment and data](#)
- [Amid wreckage in Beirut, health and psychosocial needs are paramount](#)
- [From child bride to fearless face mask maker: Yemen's safe spaces help women reclaim their lives](#)
- [On World Humanitarian Day, UNFPA applauds real-life superheroes](#)
- [Amid pandemic disruptions, Haiti's midwives urge pregnant women to continue antenatal care](#)
- [Mobile medical units deployed as Beirut health system copes after explosion](#)
- [Viet Nam releases landmark follow-up study on violence against women](#)

OPINION EDITORIALS

[Devex](#): The power of choice — ensuring access to family planning in the COVID-19 era

[Rappler](#): To address gender-based violence amid COVID-19, we need creativity, collaboration, and courage

[World Economic Forum](#): What we can learn from 5 innovations helping women during COVID-19

UNFPA IN THE NEWS*

August 1 - [The Lancet](#): COVID-19 has “devastating” effect on women and girls

August 1 - [Reuters](#), [O Globo](#): Pandemic brings growing risk of pregnancy, abuse to Latin American girls

August 1 - [Reuters](#): Hotels to house victims of family violence in Mexico due to coronavirus: UN office

August 2 - [World Economic Forum](#): What's needed to ensure maternal health for women in vulnerable populations

August 6 - [Devex](#): At a Ugandan factory, workers prove that 'periods don't pause for pandemics'

August 9 - [El País Bolivia](#): Unintentionally pregnant amid the COVID pandemic

August 10 - [Financial Express](#): The hidden crisis: Beneath surface of COVID lurks a human rights crisis for women

August 10 - [Healthline](#): How telemedicine can help people access birth control during the pandemic

August 11 - [Reuters](#): Pandemic seen changing how women get reproductive health care

August 14 - [Devdiscourse](#): Uganda: UNFPA asks government to reopen schools following safety measures

August 14 - [Devex](#): Dramatic rise in Kenya early pregnancies amid school closures, IRC data suggests

August 17 - [Economic Times](#): Senior living projects' demand may rise amid COVID-19 uncertainties: Report

August 17 - [Philippines Information Agency](#): Zambo's 628 teen pregnancies during quarantine prompt gov't probe

August 19 - [Washington Post](#), [Telegraph](#): AP: Millions of women lose access to contraception during Covid-19

August 19 - [CBS News](#): Fears coronavirus lockdown could reverse trends and drive teen pregnancy boom in Japan

August 19 - [Global Citizen](#): Rise in teenage pregnancies in Kenya linked to COVID-19 lockdown

August 20 - [Al Jazeera](#), [New York Post](#), [TV New Zealand](#), [New Zealand Herald](#), [Mainichi](#): AP: Millions of women lose access to contraceptives, abortions during COVID-19

August 20 - [Knack](#): The law is already there, now the practice: genital mutilation in Sudan has not yet been eradicated

August 20 - [El País](#): Women and girls in Kenya doubly hit by COVID-19

August 20 - [Reuters](#), [Daily Mail](#): Futures destroyed: COVID-19 unleashes 'shadow pandemics' on Africa's girls

August 20 - [Spiegel](#): Giving birth during the pandemic: The fear of the hospital

August 20 - [Xinhua](#): Feature: COVID-19 pandemic increasing child marriages in South Sudan

August 21 - [Guardian](#): Selective abortion in India could lead to 6.8m fewer girls being born by 2030

August 21 - [Glamour](#): Almost two million women lost access to contraception during the pandemic with 90,000 unexpected pregnancies predicted

August 21 - [EFE](#): Necessary to prioritize the human rights of migrants in Latin America during the pandemic

August 21 - [The Print](#): Study says 1.3 mn Indian women lost access to contraception, abortion services in pandemic

August 24 - [Sputnik World](#): ECLAC and Unesco: COVID-19 exacerbates educational inequality in Latin America

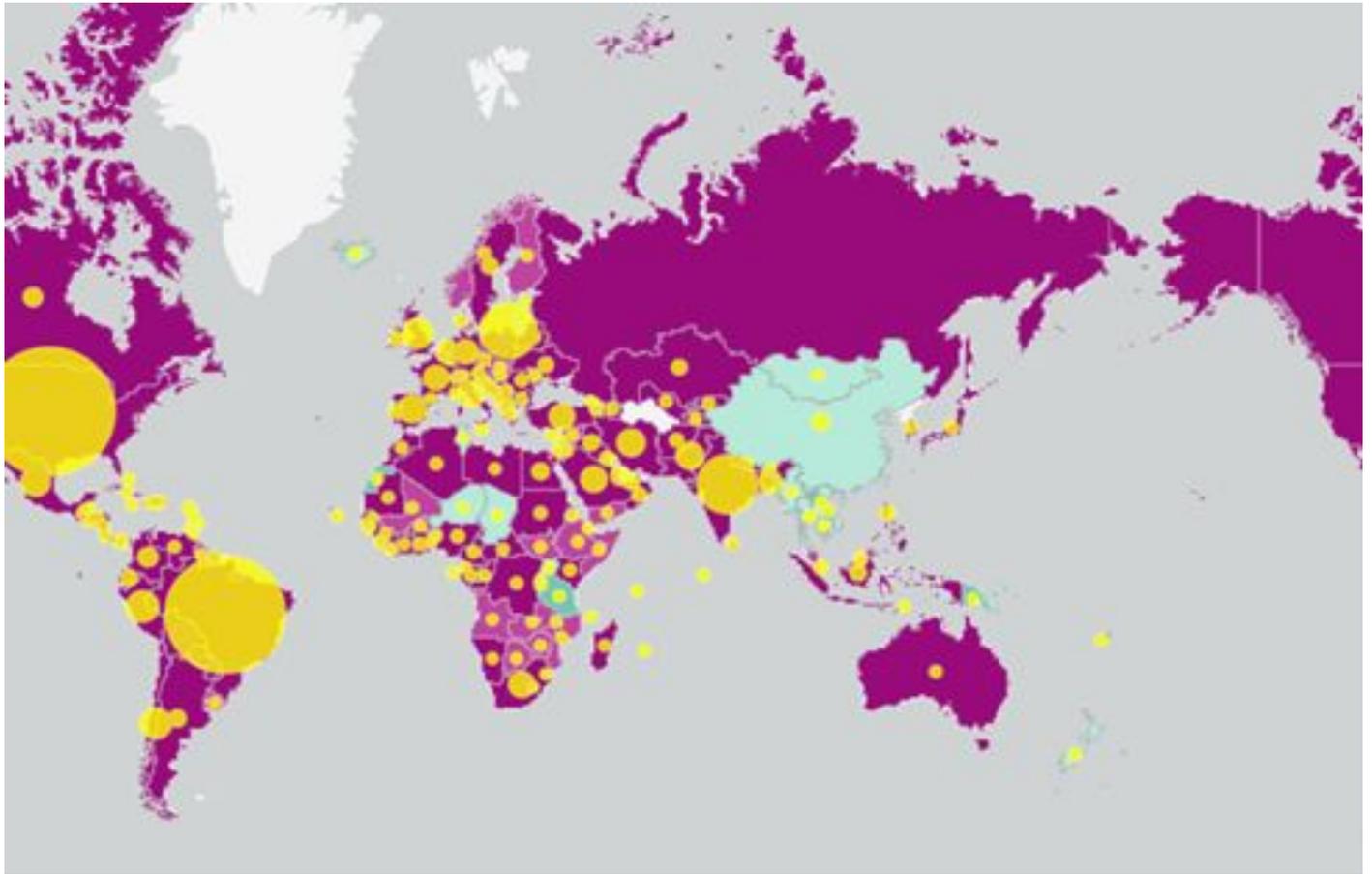
August 24 - [South China Morning Post](#): COVID-19 forces Malaysia's poor to live on instant noodles, abandon school: UN study

August 26 - [World Economic Forum](#): Futures destroyed: COVID-19 unleashes 'shadow pandemics' on Africa's girls

August 27 - [Sputnik World](#): Child pregnancy, the sequel to the pandemic in El Salvador

*The inclusion of articles does not imply endorsement by UNFPA. UNFPA cannot vouch for the accuracy of any of the reports.

Global COVID-19 cases and deaths



See UNFPA's [COVID-19 Population Vulnerability Dashboard](#) for real-time updates