



# Asia and the Pacific Region

## COVID-19 Situation Report No. 8

United Nations Population Fund



Reporting Period: 1 - 30 September 2020

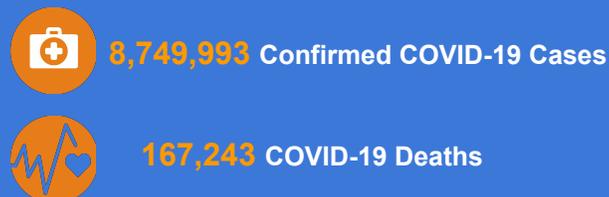
### Regional Situation

- With over 6.6 million confirmed cases, India has the highest number of COVID-19 cases in the region, and second globally.
- On top of the COVID-19 pandemic and other emergencies there is a 75% likelihood of La Niña materialising between September 2020 - March 2021. Countries at high risk of possible La Niña impacts in Asia and the Pacific are: Papua New Guinea, Timor-Leste, Indonesia, the Philippines, Tonga, Kiribati, Solomon Islands, Vanuatu, Afghanistan and Iran.
- The pandemic continues to spread across Asia and the Pacific. India, Iran, the Philippines and Indonesia continue to experience a steady increase in new cases.

### UNFPA Results Highlights

- **At least 81,696 youth have received support through youth health lines** in Afghanistan (15,300), Bangladesh (6,459), India (19,640), Indonesia (7,104), Lao PDR (26,800), Mongolia (590), Nepal (4,073) and Papua New Guinea (1,730).
- Across Asia and the Pacific, UNFPA has provided capacity building initiatives reaching:
  - **226,485 front line SRH service providers** (including maternal health, family planning and infection prevention and control).
  - **9,695 front line GBV service providers** (including case management, referral pathways and mental health and psychosocial support).

### Situation in Numbers

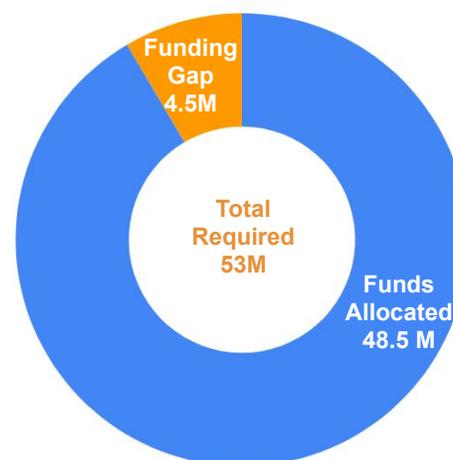


Source: WHO, 6 October 2020

### Key Population Groups



### Funding Status for Region (US\$)





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**Dignity kits distributed in quarantine centers in Susta, Nepal, help women and girls meet their basic hygiene and protection needs**

# Regional Response Summary

## Coordination

### National level:

- UNFPA's activities are in support of government response plans and are conducted in partnership with the UN country team, humanitarian country team and/or disaster management team. Activities are coordinated through national and sub-national coordination mechanisms, including through the cluster/sector system where activated.
- UNFPA leads or co-leads the GBV and SRH sub-sectors/clusters or working groups in most countries, as well as co-leads selected pillars of the UN's framework for the socio-economic response to COVID-19 in several countries.

### Regional level:

- UNFPA co-leads the regional Protection against Sexual Exploitation and Abuse (PSEA) task team. UNFPA also co-leads the UNiTE working group on eliminating violence against women and the Risk Communication sub-group on Vulnerable and Marginalised Populations.
- UNFPA chairs the H6 platform for the countries in the WHO South East Asia region to coordinate support on sexual and reproductive, maternal, neonatal, child and adolescent health. UNFPA is a member of several regional inter-agency working groups, including the COVID-19 Working Group, Gender in Humanitarian Action Working Group and the Logistics Working Group as well as Issue Based Coalitions.
- UNFPA hosts the inter-agency Regional Emergency GBV Advisor (REGA) team. In September, the first remote GBV coordination training series was piloted with 13 UNFPA GBV sub-cluster coordinators in Myanmar. At the regional level, the REGA team and partners built capacity on the inclusion of persons with disabilities and older persons in coordination of and response to GBV reaching more than 474 people.
- UNFPA Pacific Sub-Regional Office (PSRO) <sup>1</sup> co-leads the mental health and psychosocial support cell, the health services delivery cell and telehealth sub cell.

## Continuity of SRH interventions, including protection of health workforce

All 22 UNFPA country offices in Asia Pacific and the PSRO are supporting continuity of SRH interventions by:

- **Ensuring the continuity of and access to quality lifesaving SRH information and services** for women, adolescents and youth.
- **Supporting national- and local-level planning, coordination and monitoring** to ensure access to SRH services. This includes advocacy, provision of technical and programmatic assistance as well as information management support.
- **Strengthening operational and logistics support to global supply chains**, including provision of personal protective equipment (PPE) to health workers and ensuring the supply of modern contraceptives.

### In addition:

- 18 country offices and the PSRO are investing in SRH capacity building, including training frontline health workers and partners on maternal and newborn health services, including infection prevention and control.<sup>2</sup>

## Country examples:

- **Afghanistan:** 500 women have been provided with antenatal, postnatal and safe delivery services since April through Family Health Houses in Daikundi.
- **Bangladesh:** 7,446 facility-based deliveries were recorded at health facilities with 24/7 coverage in Cox's Bazar between April to June 2020.
- **Bhutan:** Across 66 quarantine facilities, 5,000 individual sanitary pads were distributed to women and girls together with menstrual hygiene management information and COVID-19 prevention messages.
- **China:** Through strong advocacy, UNFPA China helped mobilise funds from the Government of China to support the procurement of PPEs and contraceptives in Sri Lanka, Nepal, Lesotho, Botswana, Sao Tome and Principe and the Gambia.

<sup>1</sup> Fiji, Kiribati, Federated States of Micronesia, Palau, Marshall Islands, Samoa, Solomon Islands, Tonga and Vanuatu

<sup>2</sup> Afghanistan, Bangladesh, Bhutan, Cambodia, DPRK, India, Indonesia, Iran, Lao PDR, Mongolia, Myanmar, Nepal, Pakistan, Papua New Guinea, Philippines, Timor-Leste and Viet Nam



## DUAL CALAMITY AS FLOODS HIT INDIA'S BIHAR STATE AMID PANDEMIC

Life came to a standstill in much of India's Bihar State, as a ferocious monsoon season coincided with the COVID-19 pandemic.

Coronavirus cases continue to climb while floods affect millions across the state. "The people in the community were in a state of fear due to COVID-19 and during the same time, the flood waters entered the village suddenly. We all left our houses and shifted to the village embankment with our limited belongings," recalled Sri Ramsagar Sahni, a ward member in Muzaffarpur District.

Access to services and essential items was disrupted by the floods, with women and children most severely affected. "We were not able to purchase basic essential commodities due to non-accessibility to shops as our area was flooded. We also did not have surplus money to invest in personal hygiene and menstrual health," recalled a woman from Sitamarhi District.

UNFPA and Plan India are partnering together to ensure that flood response in Sitamarhi and Muzaffarpur, two of the worst-affected districts, prioritizes the needs of women and girls affected by the disaster. More than 5,600 dignity kits have been distributed, containing supplies such as sanitary pads, underwear, toothbrushes, toothpaste, shampoo and soap, to help women and girls maintain their personal hygiene and dignity.

"The items in the kit are very useful to adolescent girls, pregnant women and lactating mothers," said Punita Devi, a community childcare worker in Sitamarhi district.

Today, as flood waters recede and people slowly begin to return home, UNFPA and partners are looking ahead to support the recovery of individuals, families and communities.

### Continuity of SRH interventions, including protection of health workforce

#### Country examples:

- **DPRK:** Sufficient stock of emergency life-saving medicines for pregnant women has been ensured at the national level. Additional procurement has been initiated to ensure the uninterrupted supply throughout the lockdown period.
- **India:** 10 Adolescent Friendly Health Clinics have been established in Gajapati in Odisha with support from UNFPA, the National Health Mission Odisha and district health authorities.
- **Indonesia:** Over 60,000 female sex workers have been reached through online outreach and provided with information on HIV/AIDS prevention and treatment.
- **Iran:** UNFPA is working with the State Welfare Organization and government partners to protect the rights and dignity of older persons during the COVID-19 pandemic.
- **Lao PDR:** Comprehensive sexuality education provided online through Yahoo Apps and videos to ensure information reaches young people despite disruptions to the school term.
- **Malaysia:** UNFPA together with the National Population and Family Development Board is providing SRHR outreach for low income groups at their households to overcome challenges in accessing services as a result of restricted movement.
- **Maldives:** Service disruptions in the Maldives due to COVID-19 mean that there may be two additional unintended pregnancies every day, raising an already high total to 12 a day. UNFPA works to ensure that sexual and reproductive health information and services remain available and accessible for all, even during COVID-19.
- **Mongolia:** Online counseling on adolescent and youth health issues through online platforms where adolescents and youth can access information on SRH, family planning and mental health. A total of 268 adolescent and youth have so far received online counseling.
- **Myanmar:** Integration of SRHR, GBV and MHPSS modules in training curriculums for 35 nursing and midwifery schools in coordination with the Department of Human Resources for Health and the Ministry of Health and Sports.
- **Nepal:** Even before the pandemic, only 41% of health facilities in Nepal were providing five methods of contraceptives. UNFPA and partners have mobilised 61 service providers who support government health facilities in the provision of long acting reversible contraceptives, so far benefitting 1,058 women.
- **Pakistan:** 20 static health centres and three mobile medical units ensure continuity of integrated SRH and GBV services for Afghan refugees. On average, 935 women receive skilled birth attendants support per month.
- **Papua New Guinea:** Capacity building of 15 frontline workers on infection prevention and control and provision of SRH in the East New Britain Province. 48 village health volunteers in the Western Province have been trained on pregnancy danger signs, family planning, referrals, risk communications including COVID-19 infection symptoms and related hygiene messages.
- **Philippines:** Supporting a 24/7 safe pregnancy helpline for pregnant women having difficulty accessing birthing facilities in the provinces of Southern Luzon.
- **Thailand:** A one-year project on safe delivery targeting vulnerable populations in areas with high maternal vulnerabilities will be implemented by the Ministry of Public Health supported by UNFPA and Reckitt Benckiser.
- **Timor-Leste:** Since April, more than 285 health professionals have been trained on protocols on antenatal, intrapartum and immediate postpartum care for pregnant women and mothers with COVID-19. The trainings have reached health professions in each of the municipalities of Timor-Leste.
- **PSRO:** A telehealth pilot project for antenatal care, postnatal care and family planning in three health facilities was recently initiated.



Twenty year old Bhawan thanks Dr. SherShah and UNFPA after her successful fistula repair surgery at Koochi Goth Hospital

**“IT’S AS IF I WAS REBORN AFTER THE SURGERY.”**

*After a month of a successful surgery, Bhawan was able to leave happily with her family, going back home.*

## FIGHT AGAINST FISTULA CONTINUES AMID COVID 19

Obstetric fistula is a devastating and preventable tragedy that primarily affects young and poor women who lack access to quality maternal care.

Twenty-year-old Bhawan lost her first baby and developed an obstetric fistula after a prolonged and difficult labor. She was brought to Koochi Goth Hospital in Karachi by her husband from the drought stricken village in Tharparker, Sindh. Bhawan was immediately admitted to receive a fistula repair surgery.

During the COVID-19 pandemic, 53 women have received successful fistula repair surgeries at Koochi Goth Hospital supported by UNFPA Pakistan and Government of Australia (DFAT).

**Obstetric fistula is preventable, yet 4,000 – 5,000 women suffer from it every year in Pakistan.**

Limited access to maternal, newborn and reproductive health services and increased risk to gender-based violence in the context of the COVID-19 pandemic compound women’s suffering and lead to preventable conditions such as obstetric fistulas.

As the gap widens with COVID-19, UNFPA continues to support the campaign to end fistulas in Pakistan and restore dignity for women and girls suffering from this debilitating condition. We must ensure that every woman and girl has access to quality reproductive health information and services.

### Addressing Gender-Based Violence

UNFPA Country Offices are addressing GBV by:

- **Supporting national strategies and response plans** to strengthen GBV prevention and response services through technical and programmatic assistance.<sup>3</sup>
- **Investing in capacity building of GBV response service providers, including health practitioners**, to provide timely, quality and confidential services to survivors of GBV.<sup>4</sup> Topics include adapting to remote service delivery modality for case management, psychosocial support, updating referral mechanisms and safe and ethical data gathering.
- **Ensuring the continuity and accessibility of lifesaving GBV services** for women and adolescent girls. This includes medical support, psychosocial counseling, hotlines, shelters, one-stop crisis centres, case management, dignity kit distribution and referrals.<sup>5</sup>
- **Leading or co-leading inter-agency coordination mechanisms for GBV** risk mitigation and response in emergencies.<sup>6</sup>

#### Country examples:

- **Afghanistan:** UNFPA and partners' mobile health teams continue to provide necessary health, GBV and psychosocial support to Afghan returnees in Nangarhar province.
- **Bangladesh:** Integrated sexual and reproductive health services are available in 19 of the 23 Women Friendly Spaces. Emergency referral is available from all 23 Women Friendly Spaces and referral money ensured as needed.
- **Cambodia:** The health sector response to GBV remains an integral part in the provision of SRHR services, supported by UNFPA.
- **Malaysia:** 5,000 Dignity Kits have been distributed to female refugees, migrants and undocumented migrants in jail in collaboration with IOM and UNHCR.
- **Myanmar:** MHPSS roundtable discussions were organised in Kachin and Rakhine states with government, NGO and UN partners. Key issues discussed included stigma towards MHPSS hindering access to services, lower priority of MHPSS during COVID-19, importance of self-care/staff-care for humanitarian/frontline workers and the need for long-term comprehensive capacity building.
- **Nepal:** With the influx of migrant returnees, quarantine facilities, holding and isolation centres are not maintained as per guidelines increasing GBV and protection concerns. Support extended by UNFPA to address gaps include multi-sectoral response services, provision of psychosocial support and ensuring functional referral mechanisms.
- **Philippines:** UNFPA supported the Commission of Human Rights in developing a GBV online reporting portal that provides an accessible confidential platform to facilitate reporting, referral and response to GBV during COVID-19-induced community quarantines. To date, 94 cases of GBV have been documented and progress is being tracked through the online portal.
- **Papua New Guinea:** Provision of Dignity Kits to 940 women. Dignity Kits have been customised in consultation with the GBV sub cluster members and affected women in the communities.
- **Sri Lanka:** National GBV hotline staff have undergone capacity building on how to provide safe, confidential and non-discriminatory support to survivors of GBV.
- **Timor-Leste:** A safety assessment for two government quarantine facilities was conducted which prompted a refresher training on GBV and PSEA for medical and non-medical staff.
- **PSRO:** 100 health workers from 11 countries in the Pacific will undertake a 12 week online course on responding to GBV in partnership with the St. Vincent Health and the Fiji National University. The course will provide practical knowledge and skills required to recognise and respond appropriately to GBV.

<sup>3</sup> Afghanistan, Bangladesh, Bhutan, Cambodia, China, India, Indonesia, Iran, Lao PDR, Malaysia, Mongolia, Myanmar, Nepal, Pacific Sub-Regional Office, Pakistan, Philippines, Papua New Guinea, Sri Lanka, Thailand and Timor-Leste

<sup>4</sup> Bangladesh, Bhutan, India, Indonesia, Lao PDR, Fiji, Maldives, Mongolia, Myanmar, Pacific Sub-Regional Office, Pakistan, Papua New Guinea, Philippines, Sri Lanka, Timor-Leste, Thailand and Viet Nam

<sup>5</sup> Afghanistan, Bangladesh, Bhutan, Cambodia, India, Indonesia, Iran, Lao PDR, Maldives, Malaysia, Mongolia, Myanmar, Nepal, Pacific Sub-Regional Office, Pakistan, Philippines, Papua New Guinea, Sri Lanka, Thailand, Timor-Leste and Viet Nam

<sup>6</sup> Afghanistan, Myanmar, Bangladesh (national GBV cluster and Cox's Bazar GBV sub-sector); India (UN sub group on GBV), Indonesia, Iran, Lao PDR, Mongolia, Nepal, Pakistan, Papua New Guinea, Philippines, Thailand and the Pacific region



**COVID-19 is disproportionately impacting on the lives of older persons. UNFPA reaches older persons in their homes with services and support.**

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

Afghanistan, Bhutan, Bangladesh, Cambodia, China, India, Indonesia, Lao PDR, Malaysia, Maldives, Mongolia, Myanmar, Nepal, Pakistan, Papua New Guinea, Philippines, Sri Lanka, Thailand, Timor-Leste, Viet Nam and PSRO are currently engaged in, or have completed, inter-agency assessments of the socio-economic impact of COVID-19. In many other countries, UNFPA is developing more thematic-specific assessments.

APRO has supported UNFPA country offices modelling the prospective potential impacts of COVID-19 on maternal health and family planning indicators across 21 countries in the region.

### Risk communication and community engagement

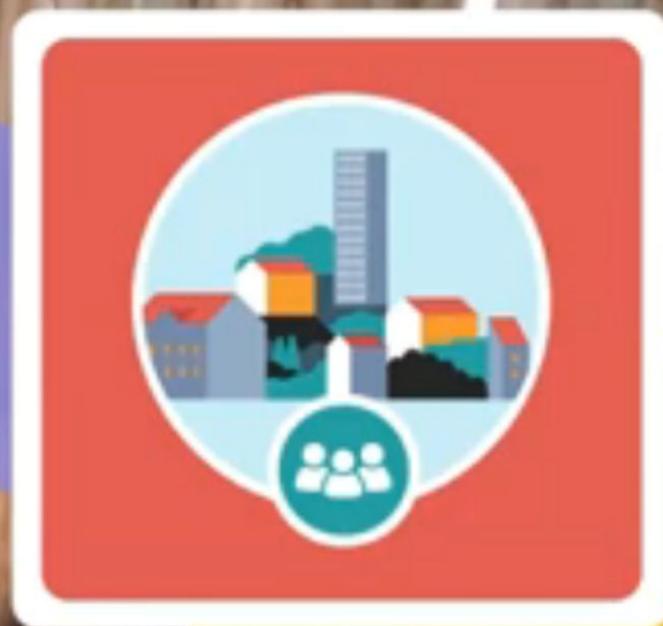
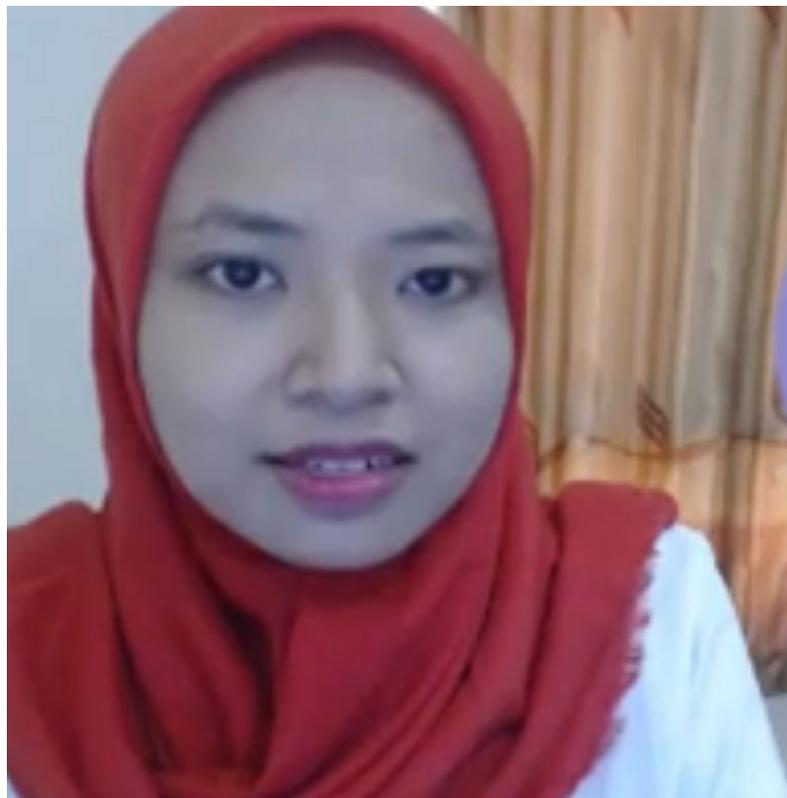
UNFPA country offices are undertaking SRH and GBV risk communications and community engagement activities adapted to the local context and language. This includes sharing key messages and health education materials, GBV and MHPSS information for women of reproductive age, pregnant women, youth, elderly, people with disabilities, LGBTQI communities, female health workers and internally displaced populations; and supporting toll-free hotlines where people can access accurate information.

#### Country examples:

- **Bangladesh:** Social mobilisers, volunteers and case workers continue to provide invaluable information on COVID-19, GBV and emergency referral to community members through home visits.
- **China:** Between February and August an estimated **4 million people** were reached with information on contraception, family planning, safe sex, maternal and child health and gender-based violence through social and other media platforms in partnership with the National Centre on Women and Children's Health and the Xinhua News Agency.
- **India:** A communication campaign in three districts of Rajasthan is ongoing to spread awareness about COVID-19 and reproductive, maternal, new born, child and adolescent health, supported by UNFPA, the National Health Mission, Rajasthan and Rural Electrification Corporation-Power Distribution Company.
- **Mongolia:** Under the theme "let's listen to our youth: the youth in the pandemic" a National Youth Forum was held to discuss how youth are being affected by the pandemic. A set of recommendations were produced for decision-makers to employ youth friendly policies and procedures.
- **Myanmar:** A social media campaign is ongoing to raise awareness on increased risks of GBV, especially domestic violence, during COVID-19 and to promote help-seeking behaviour - in collaboration with the United Nations Office on Drugs and Crime.
- **Pakistan:** A neighbourhood watch project has reached 300,000 people with awareness on COVID-19 and SRH in six districts of Karachi using 600 youth, transgender and women activist volunteers.
- **Viet Nam:** UNFPA is supporting ministries to implement a series of talk shows on domestic violence to raise awareness on the increased risk of violence against women at home during periods of lockdown.
- **PSRO:** Inclusion of GBV and MHPSS messaging as part of an information and support package to support Faith Based Organisations and church leaders in partnership with the WHO.

#### Humanitarian Data Highlights:

- **Indonesia:** Earthquakes and other hazards and disasters are not on pause despite COVID-19. UNFPA supported the development of the Indonesia One Disaster Data which is the latest breakthrough in disaster preparedness and response. With accurate and easy-to-use baseline disaster statistics data and information, decision makers can respond to disasters and the needs of all impacted populations.
- **Philippines:** Developed a prototype for violence against women and children database in collaboration with the Department of Health to strengthen the documentation, tracking, analysis and reporting of the health sector response to GBV cases.



For our community.

## YOUTH AGAINST COVID-19

When the COVID-19 pandemic hit, young people across the world were criticised for not respecting public health measures. At the same time, many young people faced information overload, including inaccurate information about COVID-19.

In response to these challenges, UNFPA in partnership with Prezi, a technology company, and global youth networks launched the global campaign **#Youthagainstcovid19**. The campaign shares youth-friendly data, facts and figures as well as stories about COVID-19 with young people and what they can do to help their friends, families and communities to stay safe.

In Asia and the Pacific, UNFPA actively engaged in the campaign by translating and adapting campaign videos and scripts to their local contexts. Tapping into influencers was proven to be a highly effective strategy. **Bangladesh** engaged Miss World Bangladesh 2019 and also hosted a Facebook live event with six singers. **Sri Lanka** partnered with musicians to celebrate the important role young people play in the fight against COVID-19.

Collaboration with youth networks was key to success. **Indonesia** engaged their Youth Advisory Panel. **Iran** partnered with Adolescent Wellbeing Clubs of the Iranian Ministry of Health and Medical Education. **Lao PDR** engaged the Vientiane Youth Centre and the Lao Youth Union. Interns working with **Tokyo** and **Seoul** liaison offices led this campaign in Japan, Korea and China.

The campaign shed light on the different ways young people engage in the fight against the global pandemic in their local contexts and offered a youth-friendly path to share their own experiences to a broader audience.

REGIONAL

## Media & Communications

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

### **Asia Pacific Regional Office:**

- World Humanitarian Day: Celebrating the real-life heroes battling covid-19, crises and disasters ([link](#))

### **Cambodia:**

- SRH and GBV orientation among migrants in Battambang, Siem Reap and Banteay Meanchey ([link](#))

### **India:**

- Serving on the front lines, India's midwives and nurses save lives ([link](#))

### **Indonesia:**

- Innovative reproductive health efforts, financing crucial during pandemic ([link](#))

### **Lao PDR:**

- Lao girl in pursuit of her calling as a midwife ([link](#))
- Protecting Lao adolescent girls - in times of COVID-19 ([link](#))
- Midwives-ensuring safe deliveries despite COVID-19 ([link](#))
- Comprehensive sexuality education a must for all schools ([link](#))
- UNFPA cooperate on social work curriculum development ([link](#))
- UNFPA, Ministry of Health to safeguard essential services amidst COVID-19 ([link](#))
- The Unintended Pregnancy Rate in Lao is High ([link](#))
- Lao PDR: investing in family planning for sustainable growth, addressing setbacks of COVID-19 ([link](#))

### **Mongolia:**

- UNFPA to enhance maternity health services to respond to COVID-19 pandemic ([link](#))

### **Myanmar:**

- UNFPA Dignity Kits reach women and girls at the quarantine facilities in #Taunggyi ([link](#))

### **Pakistan:**

- UNFPA Pakistan COVID-19 Response Sitrep # 4 ([link](#))
- The Resident Coordinator in Pakistan visited the UNFPA supported Family Health Centre in Punjab Province ([link](#))
- UNFPA Pakistan supporting the National Disaster Management Authority during the floods needs assessment in Karachi and adjoining areas affected by flash floods ([link](#))
- UNFPA Pakistan and partners acknowledged frontline health workers for their efforts in fighting COVID-19 ([link](#)) ([link](#)) ([link](#))
- Learning about menstrual hygiene management -animated video ([link](#))
- Ideas on how to lessen gender stereotypes - animations ([link](#)) ([link](#))
- How to manage your psychosocial well-being during the pandemic - animated video ([link](#))
- UNFPA acknowledges psychological wellbeing during emergencies - animated video series - ([link](#))([link](#))([link](#))
- Inequality and impact on gender-based violence - animated video ([link](#))
- Information about gender inequality and gender-based violence and what may be done in response to it - animations ([link](#)) ([link](#))

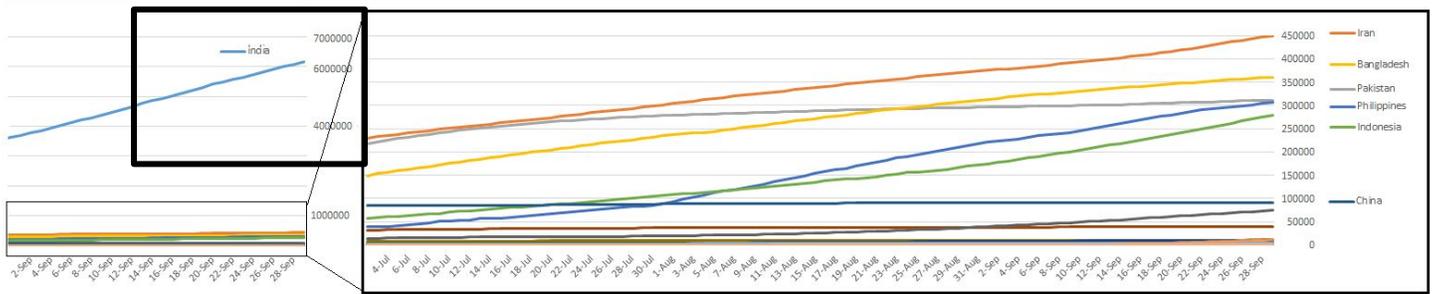
### **Philippines:**

- Barmm, UNFPA turn over Covid-19 equipment to Cotabato Regional and Medical Center ([link](#))
- UNFPA provided Dignity Kits, maternity packs and an Emergency Tent Facility to support needs women affected by the recent earthquake in Masbate ([link](#))

## Confirmed Cases and Deaths

### Number of cumulative cases

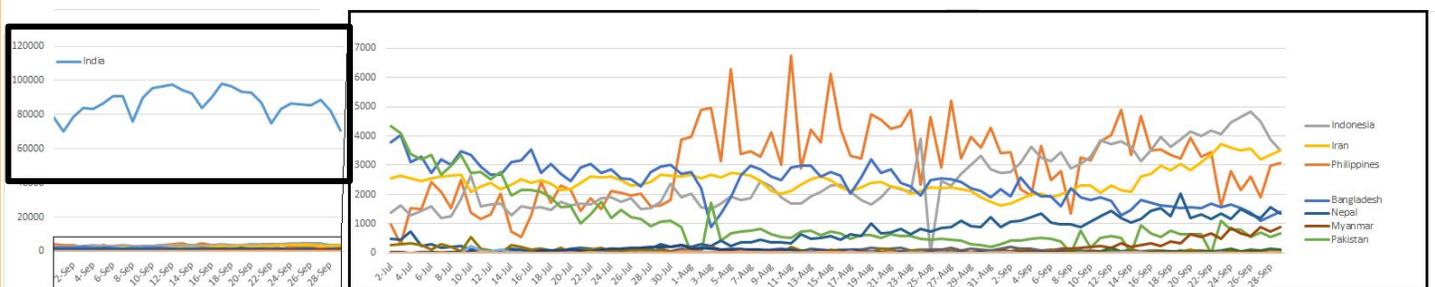
Top 7 countries with highest COVID-19 cumulative caseload in Sep 2020. Duration: Jul - Sep 2020 (WHO, <https://covid19.who.int/>)



- **India** has the most cumulative cases in the Asia Pacific region, reaching more than 6 million cases alone.
- **Iran, Bangladesh** and **Pakistan** each has over 300K cases, followed by the **Philippines** and **Indonesia**.

### Number of new cases per day

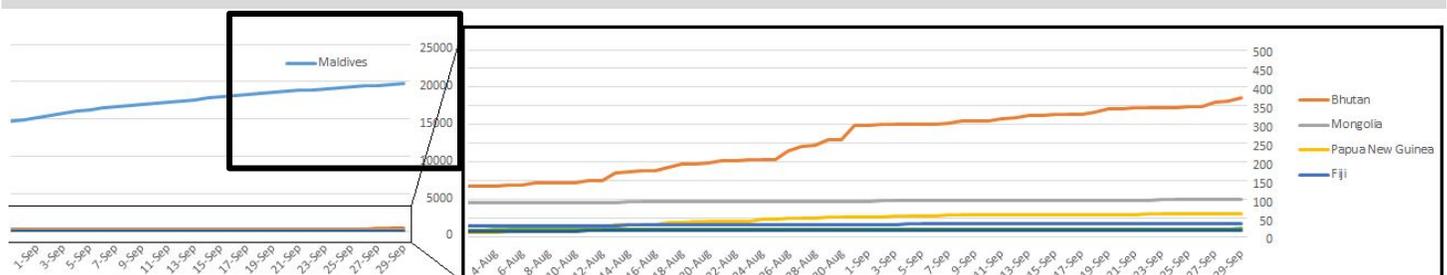
Top 8 countries with highest COVID-19 daily caseload in Sep 2020. Duration: Jul - Sep 2020 (WHO, <https://covid19.who.int/>)



- (1) **India** continues to experience a sharp increase of new cases, at around 80K -100K new cases per day.
- (2) **Philippines, Indonesia** and **Iran** are still seeing sustained numbers of new cases, with 3,000 - 5,000 new cases per day in September, 2020.

### Number of cumulative cases per million population

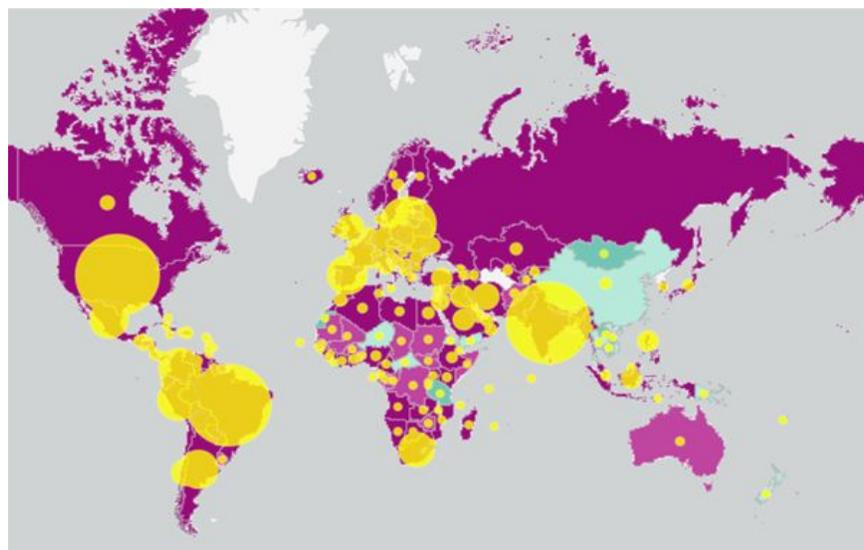
In Asia Pacific countries with small population size (< 5 million), Aug - 30 Sep 2020 (WHO, <https://covid19.who.int/>)



Among Asia Pacific countries with small population size (< 5 million), **Maldives** has the highest number of cumulative cases per million population (**19,695 cases/ million population**) as of 30 Sep, 2020 (as compared to 15,156 cases/million population on 31 Aug, 2020).

**Confirmed Cases and Deaths (UNFPA programme countries) WHO, 6 October 2020**

Country	Confirmed Cases	Deaths
Afghanistan	39,422	1,466
Bangladesh	370,132	5,375
Bhutan	299	0
Cambodia	280	0
China	91,170	4,746
Democratic People's Republic of Korea	0	0
India	6,685,082	103,569
Indonesia	307,120	11,253
Iran	475,674	27,192
Lao People's Democratic Republic	23	0
Malaysia	12,813	137
Maldives	10,567	34
Mongolia	314	0
Myanmar	18,781	444
Nepal	89,263	554
Fiji	32	2
Pakistan	315,260	6,517
Papua New Guinea	541	7
Philippines	324,762	5,840
Sri Lanka	3,733	13
Thailand	3,600	59
Timor-Leste	28	0
Viet Nam	1,097	35
<b>TOTAL</b>	<b>8,749,993</b>	<b>167,243</b>



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