



**World Health
Organization**

Pakistan



WHO PAKISTAN INVESTMENT CASE ACT NOW FOR INTEGRATED HEALTH:

**REACHING EVERY MOTHER AND CHILD, PROTECTING ALL, AND LEADING
THE HEALTH SECTOR COORDINATION IN PAKISTAN.**

MARCH, 2025

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March, 2025

ACRONYMS

AVCs	Additional vaccination campaigns	NEOC	National Emergencies Operations Centre
CC	Climate change	NHV	National Health Vision
CDs	Communicable diseases	OHI	One Health Initiative
EHS	Essential health services	OOP	Out of pocket
EPI	Expanded Program on Immunization	PEI	Polio Eradication Initiative
EWS	Early warning system	PHC	Primary health care
GBV	Gender-based violence	PHI	Public health investment
GDP	Gross domestic product	PHSS	Public health surveillance system
GoP	Government of Pakistan	PSM	Preventing sexual misconduct
GPEI	Global Polio Eradication Initiative	PSN	Polio Surveillance Network
Hep-C	Hepatitis C	RMNCAH	Reproductive, maternal, newborn, child and adolescent health
HSS	Health system strengthening	RRTs	Rapid response teams
MH	Mental health	SAM	Severe acute malnutrition
MMR	Maternal mortality ratio	SDGs	Sustainable Development Goals
MNT	Maternal and neonatal tetanus	UHC	Universal health coverage
NCDs	Non-communicable diseases	UNSDCF	United Nations Sustainable Development Cooperation Framework
NDMA	National Disaster Management Authority	WHO	World Health Organization
CCS	Country Cooperation Strategy		



1. OVERVIEW OF THE HEALTH SITUATION IN PAKISTAN

1 OVERVIEW

THE HEALTH SITUATION IN PAKISTAN

Polio Eradication Initiative

74 polio cases were reported in 2024, and 1 million children missed the oral vaccine in three campaigns.

Non Communicable Diseases

Over **2,400** people die each day of non-communicable diseases.

Communicable Diseases

With an estimated **9.8 M** Hepatitis C infections, Pakistan has the highest number globally.

Climate Change

Air pollution in Pakistan causes over **350** premature deaths daily, totaling **128,000** annually.

Expanded Program on Immunization

1 M children miss routine vaccination doses every year, risking preventable diseases.

Malnutrition

Two in five children under five are stunted.

12 M children are affected annually.

Catastrophic Health Expenditure

Each year, **13 M** people risk poverty due to out-of-pocket health costs exceeding 10% of their income.

Gender & Health Inequities

Daily in Pakistan, over **181,000** women risk lacking healthcare after suffering gender-based violence, and about 118,000 cannot decide on their own health.

Health Workforce

Pakistan has a critical shortfall of **670,000** nurses and midwives, with a density of 0.62 per 1,000 people, far below recommended threshold of 3.33.

Newborn Deaths

Pakistan faces severe neonatal mortality, with over **670** infants under one month dying daily.

Basic Health Services / Emergency

87 M people have limited or no access to basic health services.

WHO integrated approach for the final year of the 2024–2025 biennium is aligned with the National Health Vision 2016–2025, focusing on three key strategic goals:

Reaching every mother and child by

- Increasing access to vital health services, while enhancing primary healthcare in rural and underserved regions.
- Continuing routine immunization and polio eradication efforts while tackling emerging health issues such as malnutrition and infectious disease outbreaks.

Protecting all by

- Improving readiness and rapid response to health events by strengthening outbreak preparedness, enhancing labs and health data systems, and building climate-resilient health systems to address climate-related health threats.

Leading the health sector coordination by

- Ensuring timely and effective healthcare delivery at all levels.

87 MILLION
PEOPLE
REQUIRE BASIC
HEALTH SERVICES

WHO'S ROLE IN THE HEALTH SECTOR IN PAKISTAN

- Advancing universal health coverage via the primary healthcare platform.
- Coordinating health emergency responses.
- Boosting health security through surveillance and innovative healthcare systems.
- Influencing health policy with technical cooperation and contextualized guidance.
- Preventing and controlling diseases.

WHO has a dedicated team of over 15,000 personnel and more than 412,000 door-to-door vaccinators across all provinces and areas. In partnership with the Government of Pakistan, the Health Cluster, the National Disasters Management Authority (NDMA), and the National Emergencies Operations Center for Polio Eradication (NEOC), WHO focuses on delivering essential health services, timely emergency responses, and advancing polio eradication efforts.

Pakistan's health system faces workforce shortages, underfunding, due to competing priorities, worsened by population growth and climate change. Key drivers for health crisis and their impacts include:



INADEQUATE ACCESS TO HEALTH SERVICES

27 mothers die daily from childbirth issues, amounting to over 9,800 yearly.

50% of the population have little to no access to health services.

675 newborns die everyday.

01



ECONOMIC INSTABILITY

62 million people in Pakistan cannot afford healthcare. The country has only 18 health workers per 10,000 people — far below the international threshold of 44.5. Public health investment remains under 1% of the GDP. Households cover 47% of health-related costs.

02



ENDEMIC POLIO

Pakistan is one of the last two countries where wild polio is endemic, with 74 cases in 2024, threatening 45 million children under five. 1 million children were missed in 2024 campaigns.

03

GENDER & HEALTH INEQUITIES

Pakistan ranks 145th of 146 countries in gender equity and 132nd in health and survival.

Gender based-violence affects 28% of women and girls.

Low female labor participation (26% vs. 84% for men) hinders healthcare access.

04



2. HOW WHO DELIVERS



HOW WHO PAKISTAN DELIVERED IN 2024



1 Country office.
4 Sub-offices.
2 Coordinating offices.



+15,000
robust workforce.



412,000
door-to-door polio
vaccinators.



7 M
children protected with
routine life-saving
vaccines.
5.4 M
women vaccinated to
prevent maternal and
neonatal tetanus.



1 M
people benefited from
improved universal
health coverage services
in PHC model districts.



Supported the world's
largest polio
surveillance network
through **12,500**
reporting sites and
127 environmental
sampling sites in **87**
districts.



**Trachoma
elimination**
as a public health
problem validated.



10,000
Over WHO workforce, mainly
female frontline workers,
were trained on preventing
sexual misconduct.



20 M
children and pregnant
women benefited from a
deworming initiative.



4.5 M
Afghan refugees and host
population received
emergency assistance.



5 M
malaria suspects screened.
2 M persons treated.
3.7 M
insecticide treated nets
distributed.



9.6 M
women benefited from
gender and human
rights-responsive health
care and psychosocial
support.



3 M
worth of items dispatched,
including medicines,
supplies, equipment, food
supplements and vaccine
carriers, among others.



45 M
children protected against
polio through vaccination
campaigns.



78,964
severe acute malnourished
children treated.



Validated the elimination
of maternal and neonatal
tetanus (MNT) in Sindh
province.
183 M
Pakistanis (75%) now live
in an MNT-free area in
Sindh and Punjab.



10 M
people benefited from the
refurbishment of 432 priority
health facilities, labour
rooms, and training halls
destroyed by the floods.



5.2 M
women, newborn and
children received improved
reproductive, maternal,
newborn, child and
adolescent healthcare.



3. WHO RESPONSE 2024-2025

3 WHO RESPONSE

Aligned with the **National Health Vision (NHV) 2016–2025**, the **UN Sustainable Development Cooperation Framework (UNSDCF) 2023–2027**, **WHO Country Cooperation Strategy 2020 - 2025**, and the **final year of WHO's 2024–2025 biennium**, WHO Pakistan presents an integrated approach to advancing health programs through a **health systems strengthening lens**.

This strategic direction ensures that all interventions contribute to **building a resilient, equitable, and sustainable healthcare system**, capable of addressing both existing and emerging health challenges.



Dr Hanan Balkhy

WHO Regional Director for Eastern Mediterranean

“

Strengthening Pakistan's health system is not just an investment in healthcare—it is an investment in the country's future. WHO and its partners are working to ensure that all individuals, especially the most vulnerable, have access to quality healthcare services. Together, we are building resilience, advancing universal health coverage, and leaving no one behind.

”

As one of WHO's largest country operations, WHO Pakistan plays a vital role in partnering with the Government of Pakistan to reinforce health interventions at national and sub-national levels. WHO provides strategic leadership, health information, technical expertise, and operational support to strengthen health system resilience.

WHO's work is key to advancing universal health coverage (UHC), health security, and climate-resilient healthcare. The 2025 Investment Case highlights the need for strategic resource allocation and multisectoral collaboration to improve service delivery, expand access to quality care, and reduce health disparities.

By optimizing investments and leveraging expertise, WHO Pakistan remains committed to strengthening health systems and ensuring the sustained delivery of essential, life-saving services.



WHO STRATEGIC GOALS FOR 2024-2025

01



Reaching every mother and child

02



Protecting all

03



Leading the health sector coordination

PRIORITY 1

REACHING EVERY MOTHER AND CHILD

■ Prioritize women’s, children’s, health by strengthening **universal health coverage through primary health care**. ■ Expand service coverage, regulatory frameworks, supply chains, workforce capacity, and gender-responsive health integration. ■ Focus on vulnerable populations, enhance life-course healthcare, nutrition, and routine vaccination, including supporting the Government of Pakistan to lead polio campaigns to immunize **45 million children per year** and improve surveillance.

Healthcare gaps persist for women and children due to fragmented services, shortages, and weak collaboration, hindering disease management.

WHO will enhance disease surveillance, strengthening the prevention of non-communicable diseases, and integrating mental health into primary health care, prioritizing vulnerable populations.

Health workforce shortages and skill gaps hinder access to equitable, quality care and threaten the sustainability of donor-supported initiatives.

WHO will strengthen the health workforce by supporting regulators, promoting multidisciplinary training, and advocating for policies that optimize workforce use for universal health coverage.

46% of the population lacks essential health services, while weak regulations affect the quality, safety, and availability of medical products for universal health coverage.

WHO will support quality essential health services through a primary healthcare-driven system transformation, strengthened regulations, and integrated supply chains.

Three-quarters of the population are reproductive-age women (22%), children and adolescents (47%), and seniors (7%) facing high vulnerabilities and barriers to access essential healthcare.

WHO will adopt a life-course approach to enhance healthcare quality for all ages through technical coordination and system-wide capacity strengthening.

Stunting (40%) and wasting (17%) in children under five endanger their physical, cognitive, and mental development.

WHO will enhance breastfeeding promotion, nutrition surveillance, and severe acute malnutrition treatment.

Nearly 1 million Pakistani children (14%) start but do not complete routine vaccinations, risking preventable diseases.

WHO will prioritize strategies to increase immunization for vaccine-preventable diseases to at least 95%.

Polio transmission persists due to missed vaccinations, inaccessibility, hesitancy, and operational challenges, threatening eradication.

WHO will support high-quality polio campaigns to vaccinate 45 million children, target missed cases, and strengthen surveillance to interrupt virus transmission.

Weak policies and service gaps deepen health and gender inequities, demanding stronger primary healthcare and collaboration.

WHO will ensure equitable, gender-responsive health outcomes for vulnerable populations through multi-sectoral collaboration.



PRIORITY 2

PROTECTING ALL

Protect people every day by scaling up the response to ongoing emergencies and emerging health needs through (a) strengthening disease prevention, emergency preparedness, and response; and (b) improving coverage of polio, measles, and rubella vaccinations through mass campaigns to reduce the potential for outbreaks, while strengthening health information management systems. These objectives will be achieved through the following key interventions:



Support outbreak response immunization campaigns:

- Strengthen surveillance and coordination for the polio outbreak response, organizing additional vaccination campaigns as needed.
- Improve outbreak preparedness and conduct a measles and rubella vaccination campaign to enhance coverage and reduce outbreaks.

Strengthen the response to hazards due to climate change:

- Establish early warning systems in areas prone to climate change.
- Support the establishment of climate-resilient health systems.

Ensure preparedness and rapid response to infectious outbreaks:

- Enhance the capabilities of rapid response teams to be trained and deployed at all levels.
- Develop a national multi-hazard risk profile to support the One Health initiative.
- Implement case management and infection control to decrease morbidity and mortality from emerging pathogens.

Improve early warning system for timely outbreak detection:

- Strengthen the public health surveillance system by digitizing and implementing real-time reporting of notifiable diseases at all levels.
- Support national and provincial public health laboratories for case confirmation.

PRIORITY 3

LEADING THE HEALTH SECTOR COORDINATION

Pakistan remains highly vulnerable to natural and manmade disasters, as well as frequent disease outbreaks, making strong leadership and coordination in the health sector essential. WHO plays a central role in coordinating health sector responses through the Health Cluster, the Health Development Forum, donor/partner platforms, and other coordination mechanisms at national and subnational levels to address health-related humanitarian needs.

As the directing and coordinating authority for health within the UN system, WHO is committed to strengthening the health sector leadership, optimizing resources, and ensuring effective interventions to reduce morbidity and mortality among vulnerable populations.



WHO demonstrates effective leadership of the health sector at the national and local levels, through:



Guiding health interventions with evidence and strategy, from risk and needs assessments to prioritization and continuous monitoring.



Leveraging data-driven coordination to optimize resources, prevent duplication, and address critical gaps in healthcare responses.



Providing strategic oversight for a targeted response that balances acute needs with long-term health system strengthening.

4 RUNNING THE LAST MILE TO ERADICATE THE GLOBAL THREAT OF POLIO

With wild poliovirus now confined to Pakistan and Afghanistan, the world has a historic opportunity to eliminate this global threat – if all necessary resources are mobilized to support Pakistan’s intensified response. The narrow window to reverse the resurgence in 2025 is critical to protecting 45 million children under five from a preventable, paralytic disease.

Since 1994, with support from WHO and partners, Pakistan has reduced polio cases by over 99%, safeguarding millions of children. But the final stretch to preserve the hard-fought gains and end this global threat requires collective action. The cost of inaction – for Pakistan and for the world – would be higher than the cost of action.

WHO and its partners play a vital role in sustaining vaccination efforts and protecting future generations.

As a founding partner of the Global Polio Eradication Initiative (GPEI), WHO remains committed to continue mobilizing every resource and building partnerships to eradicate polio. This requires sustained investment in immunization, surveillance, and targeted outbreak responses, particularly in high-risk areas.

WHO stands with Pakistan to run the last mile to end polio. Even a single child affected by this paralytic disease is already one too many. No child in Pakistan – or anywhere in the world – will be safe until every child is safe.



Every year,

45 million children under five

receive the polio vaccine through nationwide house-to-house campaigns, strengthening their immunity against paralysis.



WHO mobilizes over

412,000 vaccinators,

mostly women, who overcame challenges to reach every child.



WHO supports in Pakistan the

world’s largest and most sensitive poliovirus surveillance network,

with over

12,500 reporting sites and 127 environmental

sampling points ensuring rapid detection and response.



74 children were affected in 2024, and 1 million missed vaccination

in the last 3 campaigns of 2024. Closing this gap is critical to interrupt virus transmission.



Two of three wild poliovirus types

have been **eradicated** through mass vaccination.



Since 1994,

polio **cases** in Pakistan have been

reduced by 99%

from 20,000 per year to 74 in 2024.



5. WHO'S WORK WITH PARTNERS



5 WHO'S WORK WITH PARTNERS

WHO Pakistan is dedicated to achieving the highest level of health for everyone through collaboration and dynamic partnerships. By uniting our efforts, we unlock innovative solutions to address Pakistan's most pressing health challenges. Providing health for all is crucial to advance the 2030 Agenda and to accelerate progress for all Sustainable Development Goals (SDGs).

Working closely with UN agencies, government partners, and stakeholders, WHO Pakistan aligns with the UN Sustainable Development Cooperation Framework (2023–27) to promote people-centered, integrated health solutions. These partnerships harness expertise, resources, and innovation to advance universal health coverage, pandemic preparedness, and resilient health systems.

WHO continues to collaborate with Pakistan's Ministry of Health, Agriculture, Climate, Planning, and other key government bodies to enhance disease surveillance, strengthen healthcare infrastructure, and address the social determinants of health. Through these

joint efforts, WHO supports maternal and child health, malnutrition prevention, climate resilience in health, and access to essential medicines and vaccines. These initiatives also focus on tackling zoonotic diseases, improving food safety, and reinforcing primary healthcare systems to achieve sustainable and equitable health outcomes.

With over 60 partners, WHO is also engaging with non-state actors and other stakeholders to drive progress toward the Sustainable Development Goals (SDGs). Our work spans maternal mortality reduction (SDG 3), malnutrition prevention (SDG 2), infectious disease control (SDG 3), and gender-based violence response (SDG 5). We are also committed to ensuring safe water in healthcare facilities (SDG 6), combating climate change (SDG 13), fostering sustainable food systems (SDG 12), promoting human rights (SDG 16), and advancing health equity (SDG 10).

As we move forward, WHO Pakistan remains steadfast in its commitment to human rights, equity, and ensuring that no one is left behind in the pursuit of better health for all.



Mr Mohamed Yahya

United Nations Resident &
Humanitarian Coordinator in Pakistan

“

Investing in health is investing in Pakistan's future and its path toward achieving the Sustainable Development Goals by 2030. WHO, in collaboration with the government and partners, is committed to strengthening health systems, expanding access to essential services, and building resilience against emerging challenges. As climate change increasingly affects health, we must ensure that communities are protected, prepared, and able to thrive in a changing world.

”

“

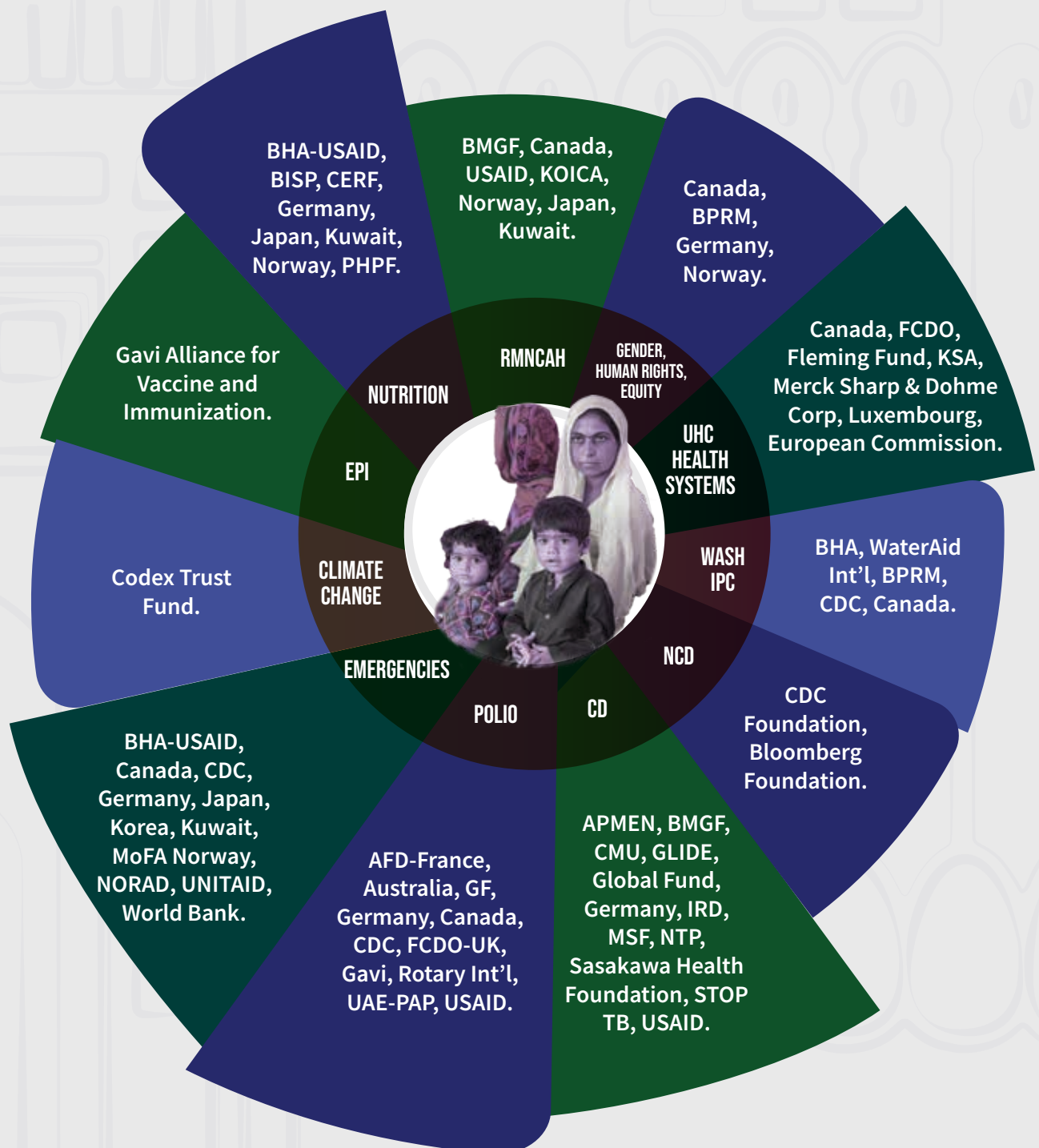
Health knows no borders, and neither does Canada's commitment. Canada is proud to stand with WHO in eradicating polio, delivering lifesaving, gender-responsive care to Afghan refugees, and strengthening the communities that support them. Our commitment goes beyond immediate aid. We are investing in a future where every man, woman, boy, and girl in Pakistan has access to a stronger, more inclusive, and resilient health system – one that protects, empowers, and endures for generations to come.

”



Mr Luke Myers

Counsellor (Development) and Head of Cooperation, High Commission of Canada in Pakistan.





6. WHO'S FINANCIAL REQUIREMENT: 2024-2025 BIENNIUM

6 WHO'S FINANCIAL REQUIREMENTS FOR THE REMAINDER OF 2025

Much work still needs to be done to deliver on the three strategic areas and drive impact in Pakistan. With a budget of **US\$ 385 million**, WHO will need an additional **US\$ 95 million** of predictable and thematic funding to be able to continue to implement its remaining plan for the 2024–2025 biennium: **US\$ 75 million** to Protect All; **US\$ 19 million** to Reaching every mother and child; and **US\$ 1 million** to continue effectively Leading the Health Sector Coordination for maximum impact.



US\$ 19 million

to reach every
mother and child.



US\$ 75 million

to protect people
every day.



US\$ 1 million

to coordinate the health
sector for maximum impact.

7 CONSEQUENCES OF INACTION



Over 500,000
children under one will miss key
vaccines, raising their risk of
suffering preventable diseases.



Over 1 million
people will die from
non-communicable diseases by
the end of 2025.



Suboptimal service
delivery due to shortage of
700,000
nurses by 2030.



193 million
people need healthcare
assistance.



Polio immunity gaps will
rise, threatening the lives of

45 million
children under five, posing a
global threat.



29 mothers
will die daily from preventable
pregnancy issues.



657 newborns
will die each day.



114 million

The number of people lacking
essential health services will
rise from 87 million.



For every dollar not spent in nutrition, we
will miss the opportunity of generating

23 US\$ in return



1 in every 3
women, girls
and children

will face health issues from gender
inequities and gender-based violence.



Affordable nutrition interventions
in Pakistan can save

\$17 billion
preventing 113,000 child deaths
yearly and boosting productivity.



Dr Luo Dapeng
WHO Representative in Pakistan

“WHO stands beside Pakistan to provide high-quality technical and operational support aimed at achieving health for all. This support is essential in a context characterized by increasing challenges such as climate change and global health threats. The cost of inaction far exceeds the cost of taking action. To realize sustainable development, we need healthy populations, healthy mothers and newborns, healthy elders, healthy workers, healthy families, and healthy communities... And no one is safe until everyone is safe.”

8 APPRECIATION FOR OUR PARTNERS



With the gracious and steadfast support of our partners, about US\$ 300 million of predictable funding has been entrusted to WHO to date for the 2024–2025 biennium. WHO Pakistan would like to take this opportunity to acknowledge this crucial support and thank you.

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