UNICEF Europe and Central Asia Regional Office (ECARO) works in 22 countries and territories¹ and is present in Italy, supporting refugee and migrant populations.

- As of June 2022, almost 49 million confirmed COVID-19 cases and 484,974 deaths were reported in ECA region.² The highest peaks occurred with the spread of the Omicron variant from the end of 2021 into February 2022, while a smaller peak is observed during travel season in June. Officially, Turkmenistan maintained it had no confirmed cases.

- UNICEF’s COVID-19 response in the Europe and Central Asia (ECA) region is focused on preventing transmission, mitigating the impacts on vulnerable children and families and addressing misinformation. This includes strengthening systems, services and supply provision for nutrition, health, WASH, education, social protection, risk communication and ensuring protection for at-risk children, adolescents and women.

- In the first half of 2022, disasters including floods, mudflows and civil unrest affected nearly 10,000 people Central Asia. The deteriorating economic situation, increasing political tensions and geostrategic realignments, exacerbated in Central Asian countries and Caucasus by the war in Ukraine, pose a significant risk to social cohesion. UNICEF’s response continued to focus on enhancing emergency preparedness capacity, strengthening risk-informed programming, including social protection mechanisms, to build resilience and supporting response to emergencies.

- In 2022, ECARO received US$ 1.6 million against the US$ 64.6 million HAC request. With an additional US$ 4.5 million from other resources and US$ 12.1 million carried forward, a funding gap of 72 percent remains.

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¹ Albania, Armenia, Azerbaijan, Belarus, Bosnia and Herzegovina, Bulgaria, Croatia, Georgia, Greece, Kazakhstan, Kosovo*²⁶, Kyrgyzstan, Moldova, Montenegro, North Macedonia, Romania, Serbia, Tajikistan, Turkey, Turkmenistan, Ukraine, Uzbekistan
Regional Funding Overview and Partnerships

By June 2022, UNICEF’s 2022 Europe and Central Asia Region Humanitarian Action for Children (HAC) Appeal was 28 percent (US$ 18 million) funded, including other resources and carry forward from 2021, against the US$ 64.6 million ask (US$ 58.6 million for COVID-19 response and US$ 6 million for emergency preparedness and disaster risk reduction support). UNICEF’s ECAR received contributions from the Akelius Foundation, Global Thematic Humanitarian Funds and UNICEF National Committees in Romania, Serbia and Slovakia. UNICEF expresses sincere gratitude for these important contributions. In the first half of 2022, resource mobilization and partnership efforts enabled UNICEF to address urgent needs resulting from the continuing COVID-19 pandemic in the areas of health, nutrition, water, sanitation, and hygiene (WASH), child protection, gender-based violence (GBV) reduction, education, youth empowerment and social behavior change (SBC) as well as to respond to immediate needs of children and families at risk of and affected by several emergencies.

At the regional level, UNICEF continued to participate in regional coordination and technical groups covering supply and logistics, risk communication and demand generation. At country level, UNICEF coordinated closely with partners, particularly the World Health Organisation (WHO), Gavi, the Vaccine Alliance (GAVI), government partners and line ministries, non-governmental organisations (NGOS), and civil society organisations (CSOs) to develop and implement strategic actions to alleviate the negative effects of the pandemic and other emergencies.

Regional Situation Overview and Humanitarian Needs

By June 2022, almost 49 million confirmed COVID-19 cases and 484,974 deaths were reported in ECA. Despite ongoing immunization against COVID-19, the highest peak was observed from the end of 2021 into February 2022 caused by the spread of the Omicron variant, while a declining trend occurred at the end of March 2022. A smaller peak is observed during travel season in June.

The new variant led to a new wave of pressure at the beginning of the year on the already exhausted health care system. Resources and services were redirected to COVID-19 centres and clinics, as well as vaccination points. In turn, this meant that routine health programmes suffered, especially for preventive health services, providing nurturing care and monitoring of children’s health and development, including immunization and parenting support programmes. Particularly, health workers, home visiting nurses, and health mediators have been overburdened. Despite the ongoing spread of COVID-19, most countries have relaxed or completely lifted restrictive measures. While the school start was delayed in some countries due to new outbreaks, schools are at least partially open in all countries across the region. Nevertheless, blended or remote learning approaches are still in place, making it necessary to ensure access to internet and technology for all children.

In addition to COVID-19, cVDPV2 polio outbreaks had been confirmed in Tajikistan in January 2021 and in Ukraine in late 2021. UNICEF and WHO supported the Ministry of Health (MoH) in Tajikistan with the polio outbreak response which was successfully closed in April 2022. In Ukraine, two children with acute flaccid paralysis (AFP) have tested positive for cVDPV2, and the virus has also been detected in 19 asymptomatic contacts. The polio outbreak is ongoing although complicated by the mass movement of refugees triggered by the war, hence increasing the risk of exporting poliovirus to other countries. Despite the ongoing war, the catch-up vaccination campaign is ongoing, though at slow pace. So far, 70% of the targeted children have been vaccinated with Inactivated Polio Vaccine (IPV). With the mass influx of Ukrainian refugees into other countries in the region, almost 5.3 million border crossing as of 21 June, life-saving vaccinations for children are a priority. At the same time, the number of measles cases is spiking globally, while WHO identified outbreaks in seven countries across the region in 2021. UNICEF ECAR continues to support countries to catch up on their routine child immunization schedules by facilitating the procurement of routine vaccines, strengthening supply chain and the capacity of health professionals, supporting evidence generation for decision making and increasing demand for immunization.

The ongoing war in Ukraine continues to impact the socio-economic conditions of all countries in the region, ranging from inflation, increasing prices for oil, gas, and other commodities, influx of refugees, and political polarization. This, in addition to the socio-economic impacts of the pandemic, creates greater needs to protect and improve existing social protection schemes and the provision of cash assistance, particularly for the most vulnerable children and families. Moreover, the war is dominating media coverage, decreasing attention of the populations from other topics such as COVID-19.

The region remains prone to natural hazards, the frequency and intensity of which has been increasing with the adverse effects of climate change. In the first half of 2022, floods and mudflows affected nearly 1,000 households in Kyrgyzstan and

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5 https://www.unicef.org/stories/measles-cases-spiking-globally
6 Belarus, Georgia, Kazakhstan, Kyrgyzstan, North Macedonia, Tajikistan, Ukraine; https://covid19.who.int/data
Uzbekistan. In addition, protests in Kazakhstan partially disrupted the education of thousands of children in January 2022, while the political situation in Bulgaria remains unstable and dependent on the outcome of the expected new elections.

Humanitarian preparedness efforts are being scaled up to respond to the deteriorating humanitarian crisis in Afghanistan which poses a risk of refugee influx to Central Asia and onward to countries within Europe. As of June 2022, countries in Central Asia (Tajikistan and Uzbekistan) are reported to be hosting 25,000 Afghan people. The preparedness and response activities for Afghan refugees in Central Asia is covered under the Afghanistan Outflow HAC 2022.

Regional Humanitarian Leadership, Coordination, and Strategy

In response to the COVID-19 pandemic in the ECA region, UNICEF is working to prevent transmission and mitigate impacts by providing a multisectoral response to children and their families. This includes strengthening systems and services to ensure continuity of health and nutrition services; developing capacities of front-line health and social workers; enhancing disease prevention capacities by providing training and supplies; scaling up WASH facilities and supplies in schools and health care facilities; supporting quality education and early learning services online and in person; supporting child protection services; preventing and responding to Gender-Based Violence (GBV); providing mental health and psychosocial support (MHPSS) services for families and children; promoting social protection services, including cash transfers for vulnerable families; facilitating risk communication and social behaviour change (SBC) activities; as well as engaging adolescents and young people. Through a targeted multisectoral approach, UNICEF is ensuring linkages between humanitarian and development programmes to build sustainable, resilient and child-sensitive systems.

At country level, UNICEF, in cooperation with WHO and other partners, is actively supporting national coordination, providing technical support to governments in programme implementation and communication strategies related to COVID-19 and other country-specific priorities. UNICEF also works with partners to assess the impact of COVID-19 on the socioeconomic situation, mental health and education of vulnerable children and adolescents, generating evidence to inform policies and programmes. At regional level, UNICEF is working closely with WHO, GAVI, the World Bank, and other relevant partners to support countries in the implementation of policies and mitigation programmes to address the impacts of COVID-19 and is participating in regional coordination and technical groups to cover supply and logistics, risk communication, and demand generation.

UNICEF maintains its focus on enhancing capacity in emergency preparedness and response, strengthening risk-informed programming, emphasising child-centred and gender-responsive disaster risk reduction (DRR), and implementing actions to mitigate the impacts of climate change on children in ECA region.

Summary of UNICEF’s response actions in the region

Response actions reported herein were undertaken under the ECA 2022 HAC appeal, which includes UNICEF’s response in Albania, Armenia, Azerbaijan, Belarus, Bosnia and Herzegovina, Bulgaria, Croatia, Georgia, Kazakhstan, Kosovo*, Kyrgyzstan, Montenegro, North Macedonia, Republic of Moldova, Romania, Serbia, Tajikistan, Turkey, Turkmenistan, Ukraine7 and Uzbekistan. Progress of UNICEF’s COVID-19 vaccine roll-out in ECAR is reported separately under the dedicated global ACT-A situation report.

Emergency Preparedness, Response and DRR

UNICEF continued to collaborate with the International Federation of Red Cross and Red Crescent Societies (IFRC), thanks to financial support from Bureau of Humanitarian Assistance, to strengthen emergency preparedness, disaster and climate resilience capacities and national DRR efforts and provide humanitarian response to families at risk of or affected by natural hazards in Central Asia. Emergency response capacities, including prepositioned emergency supplies, were leveraged to respond to earthquakes, floods, and border conflicts in the region.

Political instability in the Republic of Karakalpakstan of Uzbekistan led to human losses and injuries. Floods, mudflows and landslides in Jizzakh region of Uzbekistan (April 2022), in the Osh, Jalal-Abad and Naryn regions of Kyrgyzstan (May and June 2022) caused flooding and damages to the houses, schools, kindergartens, and other facilities. In total, UNICEF and Red Crescent teams in Uzbekistan and Kyrgyzstan reached out and provided humanitarian support to 880 affected people (435 male, 445 female), including 425 children (212 boys, 213 girls), including distributing family hygiene kits, kitchen sets and other necessary items to the most affected families.

In Tajikistan, UNICEF carried out the second round of the comprehensive 4-day training on child protection, reaching 57 government and Red Crescent stakeholders with essential knowledge and practical skills to address the child protection needs of people on the move (including Afghan refugees). Additionally, UNICEF and Red Crescent Society of Tajikistan strengthened the Emergency Information Management System (EIMS) to boost emergency preparedness and early-action capacities through the application of modern needs assessment and data collection tools.

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7 To response for the ongoing war in Ukraine is covered under the 2022 HAC appeal for Ukraine and Refugee Outflow.
To ensure GBV is well integrated in disaster preparedness and response, UNICEF, in partnership with IFRC, is engaging a consultant to develop a Gender in Emergencies Strategy, Safety Audit tool, and deliver GBV Risk Mitigation training in Kazakhstan, Kyrgyzstan, Tajikistan, Turkmenistan and Uzbekistan. A second consultancy has been prepared to strengthen Accountability to Affected Populations and Community Engagement in disaster preparedness and response in the five countries by enhancing participation mechanisms that ensure two-way communication with affected communities. In addition, UNICEF supported WASH preparedness activities and the development of WASH in emergency tools and mechanisms in the five countries.

Following the public protest and disruption of basic services in Kazakhstan, UNICEF provided 500 food and hygiene kits to affected low-income families with children in Almaty city. UNICEF also provided 380 school kits for children of preschool and school age from low-income families and children with disabilities, left without parental care or with migration background. Furthermore, UNICEF provided case management and counselling services to children and women and developed a training module on prevention of violence against children in emergencies.

Following the arrival of over 18,000 refugees and migrants from the Middle East in Belarus in the second half of 2021, almost 2,000 of them were still accommodated at a logistic center at the beginning of 2022. UNICEF continued to provide PSS and essential non-food items, 600 hygiene kits, 400 developmental kits and financial support to the Red Cross who had permanent access to the border zone. In March 2022, the center was closed, and it is not clear how many refugees and migrants stayed in Belarus. With the influx of Ukrainian refugees, the situation has become even more precarious, and UNICEF significantly scaled up efforts to address refugee’s needs.

UNICEF provided services to Afghan families staying in North Macedonia, varying from 379 beneficiaries at the beginning of February to 131 at the end of June 2022. UNICEF supported activities related to child protection, health and nutrition and education, as well as coordination among partners and stakeholders. During the reporting period, in 837 cases child protection services were provided, in 172 cases education and in 756 cases health services. Around 2,341 Afghan refugees (1259 female, 1055 male) also arrived in Albania since October 2021, with around 800 still present as of June 2022. UNICEF reached 347 children and 784 adults with health care services and provided health education to 361 community members. 1440 children benefitted from online and in-person education and Early Childhood Development (ECD) activities, 380 teachers and 60 parents strengthened their capacities and 235 children, and 150 parents/caregiver benefitted from child protection services.

**Nutrition**

UNICEF continued working with the governments and local partners to disseminate age-specific information promoting breastfeeding and Infant and Young Child Feeding (IYCF), in the context of COVID 19. In first six months of 2022, 452,893 primary caregivers of children (0-23 months) receiving IYCF counselling in Albania, Armenia, Bosnia and Herzegovina, Kosovo*, Moldova, North Macedonia, Serbia and Tajikistan.

In Tajikistan, the COVID-19 pandemic pushed more households into poverty and increased the number of children with severe acute malnutrition (SAM). In response, UNICEF provided nutrition supplies and increased capacities of healthcare workers in targeted districts which enabled the treatment of 4,789 children. In Kyrgyzstan, UNICEF is supporting evidence generation, including on the impacts of COVID-19, to assess the nutritional and micronutrient status of children, adolescent girls and women and determine risk factors for deficiencies. The report is being finalized and includes guidelines on IYCF, anaemia, child growth monitoring and SAM management.

**Health**

UNICEF continued to support governments and communities in preventing the spread of COVID-19 and restoring essential health services, overstretched by the pandemic and other emergencies. During the reporting, UNICEF supported the training of 26,612 healthcare facility staff and community health workers in infection prevention and control (IPC) in Albania, Armenia, Belarus, Georgia, Moldova, Serbia, Tajikistan and Uzbekistan.

In Georgia, training and information to improve the quality of maternal and paediatric care reached 100 doctors and 1,180 rural doctors (90%) respectively, contributing to the provision of quality health services for 46,881 children.

To ensure continuity to routine immunization during COVID 19, UNICEF facilitated capacity building trainings for 2,864 health professionals to strengthen communication around childhood immunization in Belarus, Kazakhstan, Moldova, North Macedonia, and Romania. In Serbia, UNICEF developed a Guidance on Vaccination of Children during the COVID-19 pandemic. Moreover, the Ministry of Health in Montenegro, with the support from the EU and UNICEF, is organizing Measles, Mumps and Rubella immunization campaign as part of a two-year health initiative. In Bosnia and Herzegovina, UNICEF assessed 39 institutions to strengthen cold chain capacities, centralized temperature monitoring and digital collection of immunization data.
UNICEF continued working with national and local government authorities to support children and their families with critical WASH supplies, reaching 36,183 people in Albania, Bosnia and Herzegovina, Kosovo*, Moldova, and Serbia. Thanks to EU funding, UNICEF initiated the rehabilitation of WASH facilities in 15 healthcare facilities (56,796 patients, 4,962 staff), and coverage of 750 facilities with handwashing stations and Health Care Waste Management equipment in Tajikistan.

In Georgia, UNICEF partners with Helping Hand on a volunteer engagement project for the COVID-19 response and trained 150 volunteer adolescents from 63 municipalities on safe hygiene, IPC measures and volunteerism. Following the trainings, hygiene clubs were established in all municipalities, uniting 740 youth club members, engaging 14,580 adolescents (8,770 female, 5,810 male) in peer-education activities. UNICEF, in partnership with the Adjara Organization of Scouts Movement, mobilized and trained 7,306 adolescents on sanitation and hygiene.

**Child Protection, GBV and PSEA**

UNICEF supported governments and partners to sustain community-based child protection services, reaching 191,014 children and caregivers with mental health and psychosocial support (MHPSS), including through national helplines and online platforms, in Albania, Armenia, Bosnia and Herzegovina, Kazakhstan, Kyrgyzstan, North Macedonia, Serbia and Uzbekistan. In addition, 81 counsellors were trained in Bosnia and Herzegovina and Serbia. In Serbia, UNICEF, together with the MoH and partners, piloted a multisectoral MHPSS service model, to reach 150 professionals and 1,500 young people.

During the reporting period, 18,054 women, girls and boys accessed GBV risk mitigation, prevention and/or response interventions in Albania, Armenia, North Macedonia and Tajikistan. Trainings on GBV, prevention of sexual exploitation and abuse (PSEA), Violence against Children (VAC) and trafficking reached 544 professionals in Croatia, Albania, Kazakhstan and Kyrgyzstan. In Uzbekistan UNICEF delivered a training on child safeguarding to all its implementing partners and trained 30 border police offers and 45 experts from the Government and other organizations on child protection in emergencies. In Tajikistan, 910 children and 10,340 parents and community members increased their knowledge on detection and prevention of VAC and GBV.

In North Macedonia, families experiencing hardship during the pandemic were supported by ten mobile teams in seven cities, and reached 544 families, 1,654 individuals and 890 children with legal and referral services, provision of educational allowances and other basic needs. UNICEF also supported more than 300 adolescents with disabilities in Montenegro on social, legal and education issues.

UNICEF strengthened systems in prevention, response and reporting of online risks and harms in Albania, Bosnia and Herzegovina and Kazakhstan. In Albania, 382 parents/caregivers and 1,418 children and young people improved their skills in digital literacy and online protection from abuse, exploitation and trafficking.

**Education**

UNICEF worked with governments to ensure continuity of learning through building systems and capacities of education stakeholders to deliver quality, inclusive, blended and face-to-face learning. To support inclusive education systems, UNICEF also supported evidence-generation of access to education and internet connectivity. With the reopening of schools, UNICEF focused on safe return to schools. Between January and June 2022, 1,708,725 children accessing formal or non-formal education, including early learning, in Albania, Armenia, Bosnia and Herzegovina, Georgia, Kazakhstan, Kosovo*, North Macedonia and Serbia.

To ensure continuity of high-quality education throughout the pandemic, online learning platforms were developed and supported to expand interactive content in Albania, Montenegro, North Macedonia, Serbia and Turkmenistan. Teachers were trained to enhance their competences in digital and blended learning skills in Albania, Bosnia and Herzegovina Georgia, Kazakhstan, Montenegro, North Macedonia, Serbia and provided with online resources in Kyrgyzstan and Uzbekistan. In Serbia and Kazakhstan, learning recovery classes were organized to address learning gaps caused by the pandemic, while in Tajikistan the access to basic education services during the COVID-19 pandemic and beyond was increased and strategic interventions on job readiness through vocational education and training were launched.

In Uzbekistan, the Safe Preschool Reopening Guidance is available with an online course for administrators and teachers. At the same time, the upgrading of safety protocols on COVID-19 preventive measures in Tajikistan benefited more than 2 million schoolchildren (980,766 girls) and 151,896 pre-schoolers across the country. In Kyrgyzstan, 79 repatriated children from the Middle East were integrated to educational institutions and 24 participated in intensive literacy courses.

In Bosnia and Herzegovina, UNICEF mapped Information and Communication Technology (ICT) resources in all primary and secondary schools, showing that over 14,000 students do not have access to internet and a low computer/student ratio.
at 0.05, compared to the OECD average of 0.82. To address the gap, UNICEF procured 1,319 laptops and 180 tablets. Moreover, UNICEF’s methodology for real-time monitoring of access to education was rolled out in two districts. In Uzbekistan, data collection system for internet connectivity of 10,000 schools was established, enabling the Ministry of Public Education to address gaps and increase accountability for efficient resource allocation.

**Story from the Field**

*Learning during the Pandemic – The story of English teacher Marija and her students*

Although new technologies cannot replace a good teacher, digital tools are helping Marija Bojic to make teaching better and more interesting for her students. This English language teacher is encouraging generations of students who are growing up with electronic devices to think critically and be creative in their learning.

Over 1,200 teachers from Montenegro participated in the training for the use of digital education during 2021/2022. Under the module ‘improving the quality and inclusiveness of education in the digital environment’, Marija tried to make the activities she recommends to her colleagues adaptable to all subjects, not only to language teaching.

Ivana (left) is extremely satisfied with this type of teaching, where, with the help of teachers and the use of digital technologies, students can be creative and present complex topics. She was part of a group of students from Oktoih Elementary School in Podgorica who used digital tools to mark the anniversary of the Chernobyl nuclear disaster and facilitated discussion about the causes and consequences of this disaster. The topic was presented to younger students via PowerPoint, using a combination of foreign languages, songs, videos, recitations, history and physics.

“Learning during the pandemic was interesting because it was new to us and motivated us to do better in the online environment. However, we felt the absence of friends, teachers and face-to-face interaction that nothing can replace.” - Ivana Srbijanovic, a sixth-grade student

The use of new technologies in teaching creates a stimulating and student-friendly learning environment that further adapts to their individual needs, while teachers acquire skills to develop new teaching practices and develop better cooperation with students. UNICEF will therefore continue to support the education system to ensure that digital education is high-quality and accessible to all children.

The programme “Improving the quality and inclusiveness of education in the digital environment” is part of the UNICEF Regional project to mitigate the impact of COVID-19 on the lives of children and their families in the Western Balkans and Turkey, funded by the European Union. [Read the full story](#).

**Social Protection and Cash Transfers**

UNICEF continued to support governments in implementing cash transfer programmes for low-income, vulnerable populations affected by COVID-19 and other emergencies and strengthening existing social protection systems and services. In the first half of 2022, 2,210,170 households were reached with cash transfers through UNICEF-supported government system in Armenia, Moldova, North Macedonia and Uzbekistan. In Serbia, UNICEF provided cash assistance to 502 families, benefitting 1,899 individuals (767 parents, 1,132 children), with support from the private sector and individual donors. The Government of Tajikistan continues to use the Humanitarian Cash Transfer Programme module, developed with support of UNICEF, to make one-time COVID-19 emergency cash grants to 25,350 vulnerable families with children. UNICEF supported the draft Social Protection Strategy up to 2030 which will allow UNICEF to develop 5-year plan.

In Bosnia and Herzegovina, as a result of social entrepreneurship and shock-responsive social protection trainings, ten grant projects have been designed, expected to benefit 2,000-2,600 social protection beneficiaries, including vulnerable children and families. In Albania, about 1,000 households with 2,100 children receiving economic aid were reached with information and supplies for COVID-19 prevention and vaccination as well as community mobilization meetings to meet and discuss with representatives of different services, such as health, education, and employment. Social administrators were trained on providing access to social protection entitlements to vulnerable and poor families and children in times of crisis.

Real Time Monitoring (RTM) in Georgia provides information on the impact of COVID-19 on the welfare of families and children, results of recent and previous surveys can be found on the Geostat website. In North Macedonia, 108 functional assessments were conducted to address COVID-19-related barriers impacting the ability of children with disabilities to access critical support services in the spheres of social and child protection, education and healthcare.

**Social Behaviour Change (SBC), Adolescent Development and Participation (ADAP), Community Engagement and Accountability to Affected Populations (AAP)**

UNICEF’s Social Behavior Change (SBC) activities focused preventing and mitigating the spread of COVID-19 through the promotion of hygiene practices, countering disinformation and engaging communities and young people. UNICEF continued to support governments and implementing partners to develop context-specific, gender- and age-sensitive, appropriate and accessible messages on access to essential and safe services. During the reporting period, 19,269,292 people were reached through messaging on prevention and access to services in Albania, Armenia, Belarus, Georgia, Kazakhstan, Kosovo*, Moldova, Montenegro, North Macedonia, Tajikistan and Uzbekistan.
UNICEF engaged in (social) media and in-person campaigns in Albania, Belarus, Kazakhstan, Kyrgyzstan, Moldova, North Macedonia, Tajikistan, and Bosnia and Herzegovina on information on IPC, the promotion of routine immunization and COVID-19 vaccines. Moreover, health caravans were organized in Romania and in North Macedonia to increase the uptake of COVID-19 vaccines in areas with low vaccination rates.

To address misinformation related to COVID-19, UNICEF introduced social listening and studies on the behavior of target groups in Moldova, North Macedonia, Kyrgyzstan, Kazakhstan, Romania, Turkmenistan and Uzbekistan. In Kazakhstan, the report “State of Immunization Misinformation in Kazakhstan” was presented to national stakeholders, accompanied by a training on social listening. Young people were trained in Georgia and Uzbekistan to disseminate reliable information among their peers. UNICEF also provided training to over 960 participants on interpersonal communication in Uzbekistan, Kazakhstan and Tajikistan. In Bosnia and Herzegovina, UNICEF organized workshops to engage and train representatives from religious and Roma communities to increase COVID-19 vaccine uptake and trust.

In Bosnia and Herzegovina, out of 600 applicants, 89 young people were selected (44% from marginalized groups) to participate in an UPSHIFT cycle on topics related to inclusion in schools and their local communities, environmental protection, mental health, arts and music. UNICEF also developed SBC activities related to education, ECD and positive parenting, health lifestyle and routine immunization in Bosnia and Herzegovina, Serbia and Turkmenistan.

### Human Interest Stories and External Media

- UNICEF Georgia Press Release: [USAID and UNICEF support young people improve media literacy skills to address COVID-19 disinformation](https://www.unicef.org/)
- UNICEF Georgia Press Release: [Young medical students became active advocates for COVID-19 vaccination](https://www.unicef.org/)
- UNICEF Turkmenistan Press Release: [UNICEF Commends all Women on the Frontline of the Pandemic on International Women’s Day](https://www.unicef.org/)
- UNICEF Turkmenistan Photo Essay: [Gallery of competition posters “Who is my hero?” for the International Day for Protection of Children](https://www.unicef.org/)
- UNICEF Montenegro Article: [Mum knew her milk was the best choice for Zoë](https://www.unicef.org/)
- UNICEF Montenegro Article: [Let’s protect all children from measles, mumps and rubella!](https://www.unicef.org/)
- UNICEF BiH Article: [Ignorance can only be overcome by knowledge](https://www.unicef.org/)
- UNICEF Serbia Article: [Kosta, mom and dad – three superheroes (Breastfeeding during the pandemic)](https://www.unicef.org/)
- UNICEF North Macedonia Press Release: [COVID-19 vaccine caravan brings information and vaccines closer to citizens](https://www.unicef.org/)
- UNICEF North Macedonia Press Release: [UNICEF is calling for national solidarity to keep schools safe and open](https://www.unicef.org/)
- UNICEF Kyrgyzstan Article: ["Keremet Koch" sparks life and joy in Keremet](https://www.unicef.org/)
- UNICEF Tajikistan Article: [Young changemakers in Tajikistan prove they are the ‘Generation Unlimited’](https://www.unicef.org/)
- UNICEF Tajikistan Photo Essay: [Combating malnutrition among young children in Tajikistan amidst COVID-19](https://www.unicef.org/)
- UNICEF Tajikistan Photo Essay: [Transformation in Tajikistan: ‘Baby Homes’ become family-based support centres](https://www.unicef.org/)
- UNICEF Kazakhstan Press Release: [UNICEF to provide 500 food kits and school kits for preschool and school age children in Almaty](https://www.unicef.org/)
- UNICEF Kazakhstan Article: [Psychological aid in emergencies: A new perspective](https://www.unicef.org/)
- UNICEF Uzbekistan Article: [16/19 - Artistic reflection of COVID-19 responses and responsibilities](https://www.unicef.org/)
- UNICEF Uzbekistan Press Release: [Children need to be at the center of all emergency preparedness, response, and recovery efforts](https://www.unicef.org/)

### Next SitRep: 31 January 2023

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### Annex A: Summary of Selected Program Results (January to June 2022)

<table>
<thead>
<tr>
<th>Areas of Response</th>
<th>2022 Target</th>
<th>Total UNICEF Results</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Health</strong></td>
<td></td>
<td></td>
</tr>
<tr>
<td># caregivers and frontline professionals (healthcare, social workers, teachers) provided with Personal Protective Equipment (PPE)</td>
<td>40,239</td>
<td>45,753*</td>
</tr>
<tr>
<td># children and women accessing primary healthcare in UNICEF supported facilities</td>
<td>343,600</td>
<td>47,786</td>
</tr>
<tr>
<td># children aged 6 to 59 months vaccinated against measles</td>
<td>610,000</td>
<td>344,150</td>
</tr>
<tr>
<td># healthcare facility staff and community health workers trained in infection prevention and control (IPC)</td>
<td>10,618</td>
<td>26,612**</td>
</tr>
</tbody>
</table>

**Nutrition**
# primary caregivers of children 0-23 months receiving IYCF counselling | 887,000 | 452,893

**WASH**

# children use safe and appropriate WASH facilities and hygiene services in learning facilities and safe spaces | 273,800 | 11,000

# people reached with critical WASH supplies | 667,530 | 36,183

**Child Protection, Gender-Based Violence & PSEA**

# children [and caregivers] accessing mental health and psychosocial support | 869,200 | 191,014

# women with safe and accessible channels to report sexual exploitation and abuse by aid workers | 672,000 | 632,805

# people engaged in RCCE actions | 11,699,800 | 242,073

**Education**

# children accessing formal or non-formal education, including early learning | 4,963,205 | 1,708,725

# schools implementing safe school protocols (infection prevention and control) | 43,155 | 11,785

# teachers trained in delivering digital, distance, and blended learning | 62,900 | 37,893

**Social Protection & Cash Transfers**

# households reached with cash transfers through an existing government system where UNICEF provided technical assistance and funding | 462,000 | 2,210,170***

**SBC, Community Engagement & Accountability**

# people engaged in RCCE actions | 11,699,800 | 242,073

**Annex B: Funding Status (in USD)**

<table>
<thead>
<tr>
<th>Sector</th>
<th>Total Requirements 2022</th>
<th>Humanitarian Received in 2022</th>
<th>Other Resources Received in 2022</th>
<th>Carry-Forward from 2021</th>
<th>Funding Gap in 2022 (%)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Nutrition</td>
<td>4,150,880</td>
<td>0</td>
<td>0</td>
<td>85,850</td>
<td>98%</td>
</tr>
<tr>
<td>Health</td>
<td>11,751,800</td>
<td>4,060</td>
<td>209,098</td>
<td>3,323,566</td>
<td>70%</td>
</tr>
<tr>
<td>WASH</td>
<td>9,791,000</td>
<td>123,610</td>
<td>0</td>
<td>577,322</td>
<td>93%</td>
</tr>
<tr>
<td>Child Protection, GBViE &amp; PSEA</td>
<td>7,250,000</td>
<td>350,000</td>
<td>374,784</td>
<td>1,391,445</td>
<td>71%</td>
</tr>
<tr>
<td>Education</td>
<td>8,409,000</td>
<td>195,196</td>
<td>3,057,361</td>
<td>3,072,659</td>
<td>25%</td>
</tr>
<tr>
<td>Cross Sectoral (C4D, ECD, specialized GBViE)</td>
<td>9,940,000</td>
<td>3,747</td>
<td>120,020</td>
<td>1,806,611</td>
<td>81%</td>
</tr>
<tr>
<td>Social Protection</td>
<td>7,339,000</td>
<td>28,754</td>
<td>477,766</td>
<td>737,600</td>
<td>83%</td>
</tr>
<tr>
<td>Preparedness, Response &amp; DRR</td>
<td>5,350,000</td>
<td>900,000</td>
<td>0</td>
<td>738,629</td>
<td>69%</td>
</tr>
<tr>
<td>RO Technical Support</td>
<td>650,000</td>
<td>0</td>
<td>249,389</td>
<td>381,460</td>
<td>3%</td>
</tr>
<tr>
<td>Total</td>
<td>64,631,680</td>
<td>1,605,366</td>
<td>4,488,418</td>
<td>12,115,143</td>
<td>72%</td>
</tr>
</tbody>
</table>

*Target has been exceeded in Uzbekistan through the procurement of PPE for immunization staff by non-HAC funding sources.
**Target has been exceeded in Georgia through the establishment of youth hygiene clubs who are reaching peers on IPC.
***Target has been exceeded in Uzbekistan as children in low-income families received one-off cash transfer to protect them from the shock caused by the liberalisation of prices of wheat and flour in May 2022.