Tajikistan

HIGHLIGHTS

- Tajikistan, one of the most disaster-prone countries in Europe and Central Asia, and the only low-income country in the region, has been severely impacted by the coronavirus disease 2019 (COVID-19) pandemic, which has triggered unprecedented health, humanitarian and socio-economic crises. Some 6.9 million people, including 2.8 million children, require support due to high malnutrition rates, inadequate access to water and hygiene, disruptions to learning, exacerbated poverty and heightened protection risks.

- UNICEF will use its strategic position in Tajikistan to reach children, adolescents and their caretakers with life-saving interventions. The strategy will focus on outbreak control and mitigating the immediate impacts of the pandemic on children and their families by ensuring continuity of and access to health, nutrition, education, protection and water, sanitation and hygiene (WASH) services.

- Given the inadequate resources for humanitarian response across all sectors, UNICEF requires US$17.9 million to provide immediate support.

KEY PLANNED TARGETS

- **550,000 children and women accessing health care**
- **643,400 people reached with critical water, sanitation and hygiene supplies and services**
- **2 million children accessing educational services**
- **44,772 households reached with cash transfers where UNICEF provided technical assistance**

IN NEED

- **6.9 million people**
- **2.8 million children**

TO BE REACHED

- **5 million people**
- **2.5 million children**

FUNDING REQUIREMENTS

- **US$ 17.9 million**
Tajikistan is one of the poorest nations in Central Asia. Over 27 per cent of the population lives below the national poverty line.\(^8\) As of 10 September, Tajikistan has confirmed over 8,900 COVID-19 cases and 72 deaths. The situation continues to deteriorate, with an average of 30 to 40 confirmed cases per day.\(^9\) The pandemic has triggered unprecedented health, humanitarian and socio-economic crises. Health care systems were overwhelmed within two weeks of the first recorded cases in April. Persons with disabilities, particularly women and girls, have been disproportionately impacted due to underlying health conditions, lack of information, undernutrition and limited access to health, WASH and protection services. Reliance on service providers, lack of access to remote learning options, and pre-existing isolation and marginalization have also increased vulnerabilities.\(^10\)

The pandemic has had significant macroeconomic impacts on health, nutrition, education, child and social protection, and employment in Tajikistan. An estimated 3.3 million people, or one third of the population, are food insecure, including 1.6 million people who are severely food insecure.\(^7\) Reported real gross domestic product growth fell by 3.2 per cent in the first five months of 2020.\(^11\) These rising vulnerabilities have left the country more exposed to emergencies and shocks, increased children and women's vulnerability to gender-based violence,\(^12\) and left more children living in poverty. In addition, 2 million students and 130,000 teachers have been affected by school closures.\(^13\)

Tajikistan has among the worst nutrition indicators in Europe and Central Asia: 18 per cent of children under 5 years are stunted, 6 per cent are wasted and 1.8 per cent are severely wasted.\(^14\) This situation, combined with the weak health care system, growing food insecurity, limited access to WASH, and suspension of nutrition services, seriously threatens the nutritional well-being of children and women.

The number of children living below the national poverty line – currently nearly one third of all children in the country\(^15\) – is expected to increase. Due to lockdown and travel restrictions, remittances have dropped sharply and put children from migrant families at high risk of multiple deprivations.\(^16\)

Across Tajikistan, 4.9 million people lack access to basic sanitation at home and 1,500 schools lack adequate WASH facilities and services, leaving a significant portion of the population at risk of COVID-19.\(^17\) Lack of WASH resources in schools and health facilities will also affect school reopenings and infection prevention and control in health facilities.

STORY FROM THE FIELD

Many families in Tajikistan are affected by migration. Eighty per cent of households have at least one family member in migration, and an estimated 500,000 children have been left behind. These children are more likely to suffer neglect, abuse, poverty and have poorer school performance.

During the COVID-19 pandemic, the socio-economic conditions of children affected by migration have deteriorated and the number of vulnerable children and families is rising. UNICEF, the Government of Tajikistan and other partners are working to improve the quality and accessibility of child protection support services, and improve the lives of children affected by migration.

Read more about this story here

Children gather behind their family’s new sewing machine, which was provided through a UNICEF co-funded project as part of COVID-19 support to families affected by migration.
HUMANITARIAN STRATEGY

With its humanitarian mandate and existing presence at the local and central levels, UNICEF has a strong comparative advantage for addressing the COVID-19 needs of children in Tajikistan.

UNICEF’s humanitarian action in Tajikistan is guided by the Core Commitments for Children in Humanitarian Action and inter-agency standards. UNICEF strives to ensure that all children’s rights are fulfilled in all situations, including emergencies.

In line with the 2020 World Health Organization (WHO) Global Strategic Response Plan, the Inter-Agency Standing Committee Global Humanitarian Response Plan and the National COVID-19 Preparedness and Response Plan, UNICEF is contributing to outbreak control and mitigating the immediate impacts of the outbreak, including interruptions to health, nutrition, education, protection, gender-based violence, WASH, and essential social services for children, women and vulnerable populations.

UNICEF’s COVID-19 preparedness and response strategy aims to reduce transmission and mitigate the impact of the pandemic on children, youth and care providers, particularly the most vulnerable. UNICEF implements an integrated and multi-sectoral approach, focusing on providing critical WASH services in education and health facilities; ensuring the continuity of health and nutrition services for children and pregnant women; facilitating treatment for children with severe acute malnutrition (SAM); helping low-income families access cash transfers through existing social protection systems; supporting access to education; and reaching children affected by violence, abuse and neglect with prevention and assistance, including gender-based violence prevention services.

UNICEF works under the Government’s leadership and in close coordination with WHO, the United Nations Country Team and civil society partners, including the Red Crescent Society of Tajikistan, to protect children and their families from exposure to COVID-19 and minimize mortality. In line with the Grand Bargain commitments, UNICEF has initiated steps to ensure that implementing partners – including local civil society and national and international non-governmental organizations – have the flexibility needed to respond to COVID-19.

UNICEF’s strategy also emphasizes meeting immediate needs while addressing vulnerabilities and building resilience for long-term progress and impact. It will build on lessons learned from previous health emergencies, such as the importance of collaboration with national and local governments and the sustained presence of partners and civil society organizations. The strategy will also expand on the significant investments that have been made in strengthening the national health care system during previous outbreaks, and draw on risk communication/community engagement networks, emphasizing reaching the most vulnerable communities nationwide.

2021 PROGRAMME TARGETS

Health and nutrition
- 550,000 children and women accessing primary health care in UNICEF-supported facilities
- 17,000 children aged 6 to 59 months with severe acute malnutrition admitted for treatment
- 500,000 primary caregivers of children aged 0 to 23 months receiving infant and young child feeding counselling
- 500,000 children aged 6 to 59 months receiving multiple micronutrient powders

Water, sanitation and hygiene
- 49,000 children accessing appropriate water, sanitation and hygiene facilities and hygiene services in learning facilities and safe spaces
- 643,400 people reached with critical water, sanitation and hygiene supplies (including hygiene items) and services

Child protection, GBVIE and PSEA
- 11,250 children and caregivers accessing mental health and psychosocial support
- 32,000 women, girls and boys accessing gender-based violence risk mitigation, prevention or response interventions
- 1,000 unaccompanied and separated children reunified with their primary caregiver or provided with family-based care/alternative care services

Education
- 2,000,000 children accessing formal or non-formal education, including early learning
- 13,000 teachers trained on delivering digital, distance and blended learning
- 250,000 parents and caregivers of children under 5 years receiving early childhood development counselling and/or parenting support

Social protection and cash transfers
- 44,772 households reached with cash transfers through an existing government system where UNICEF provided technical assistance and funding

C4D, community engagement and AAP
- 2,683,800 people participating in engagement actions for social and behavioural change
- 50,000 people who shared their concerns and asked questions/clarifications to address their needs through established feedback mechanisms
FUNDING REQUIREMENTS IN 2021

UNICEF requires US$17.9 million to meet the growing needs of children impacted by COVID-19 and continue and expand support for Government efforts to meet the needs of affected children, adolescents and women.

This appeal is aligned with the key priorities outlined in the UNICEF Tajikistan COVID-19 Preparedness and Response Plan. The funding requirement is a part of the Government's 2020–2021 COVID-19 Action Plan, which will be revised as the needs evolve across various sectors.

Flexible resources will remain critical to UNICEF’s ability to respond effectively and efficiently to the COVID-19 pandemic and cover unfunded priority areas, including nutrition, WASH, child protection, gender-based violence in emergencies, protection against sexual exploitation and abuse, social protection, communication for development, community engagement and accountability to affected populations. Without adequate and timely funding, UNICEF and its partners will be unable to support an adequate response to the humanitarian needs of children and families in Tajikistan.

<table>
<thead>
<tr>
<th>Sector</th>
<th>2021 requirements (US$)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Health and nutrition</td>
<td>3,719,756</td>
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<tr>
<td>Water, sanitation and hygiene</td>
<td>4,455,540</td>
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<tr>
<td>Child protection, GBViE and PSEA</td>
<td>1,065,717</td>
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<tr>
<td>Education</td>
<td>1,509,783</td>
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<tr>
<td>Social protection and cash transfers</td>
<td>5,350,254</td>
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<tr>
<td>C4D, community engagement and AAP</td>
<td>1,762,826</td>
</tr>
<tr>
<td>Total</td>
<td>17,863,876</td>
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</tbody>
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2. These figures were compiled based on the Government’s national and sectoral COVID-19 preparedness and response plans, situation monitoring reports, multi-sectoral assessments, surveys (i.e., the demographic and health survey, poverty monitoring, national statistics, etc.) and other credible studies and reports.

3. Ibid.

4. Ibid. Children make up 41 per cent of the total population.

5. This was calculated based on the highest coverage programme targets for education (2,263,000); health and nutrition (1,525,500); child protection (51,050); social protection (44,772); and a portion of those to be reached with community engagement and resilience support to avoid double counting (1,134,800). The total figure includes 1,569,217 women, 934,043 men, 2,515,862 children and 150,574 people with disabilities. UNICEF is committed to needs-based targeting, which means covering the unmet needs of children; and will serve as the provider of last resort where it has cluster coordination responsibilities.

6. This was calculated based on the highest coverage programme targets for education (2 million); nutrition (500,000); and child protection (15,862). The total figure includes 1,247,868 girls, 1,267,994 boys and 75,476 children with disabilities.

7. World Food Programme (WFP), April 2020.


10. 'Integrated Socio-Economic Response Framework to COVID-19 (ISEF) for Tajikistan'.

11. Agency on Statistics under the President of the Republic of Tajikistan, June 2020.

12. 'Integrated Socio-Economic Response Framework to COVID-19 (ISEF) for Tajikistan'.


15. ‘Poverty in Tajikistan 2019’.


20. Due to space constraints, the following acronyms appear in the appeal: GBViE (gender-based violence in emergencies); PSEA (prevention of sexual exploitation and abuse); C4D (communication for development); and AAP (accountability to affected populations).

21. This figure was compiled based on the Government’s national and sectoral COVID-19 preparedness and response plans and situation monitoring reports.


25. The Grand Bargain is a unique agreement between some of the largest donors and humanitarian organizations, who have committed to getting more means into the hands of people in need and improving the effectiveness and efficiency of humanitarian action.

26. This includes strengthening systems, developing risk-informed programmes, engaging community participation, planning and preparing for emergencies, fostering partnerships and mobilizing vital resources to ensure that all programmes are designed and delivered in a more complementary manner.

27. The planned activities and results described in this appeal complement those contained within the UNICEF regular programme in terms of infection prevention and control in health care and education-related interventions.