Highlights

- All countries in Eastern Europe and Central Asia (EECA) have officially reported COVID-19 cases, except Tajikistan and Turkmenistan. Turkey is the most affected country, accounting for more than 70 per cent of all reported cases in the region (and the most reported cases of all UNFPA programme countries globally). Belarus, Serbia and Moldova are the next three most affected countries, relative to the size of their population.

- Restrictions, lockdowns and border closures continue to impact operations and supply chains, affecting procurement of items such as personal protective equipment (PPE).¹

- Special efforts were made to raise UNFPA’s overall visibility across the region to reach the most vulnerable with information, supplies and services, including survivors of GBV in shelters, pregnant and lactating women, older people, people with disabilities, migrants and refugees, and other key populations. Risk communication materials were produced to reach these vulnerable groups.

- Young people across the region were mobilized through youth networks to contribute to the COVID-19 response, and the needs of young people, including for comprehensive sexuality education and access to services, were addressed.

- A range of activities aimed at engaging men have been implemented, focused on challenging gender roles at home and preventing GBV during lockdowns.

- Within UN coordination mechanisms at regional and country levels, UNFPA has launched, or participated in, socioeconomic risk assessments focusing on implications of the pandemic on SRHR, GBV and gender equality, and demographic security.

- In response to cases of people living with HIV, UNFPA helped launch a regional hotline assisting with access to medication and counselling on SRH and GBV.

¹ Countries with restrictions: Albania, Armenia, Azerbaijan, Bosnia and Herzegovina, Kazakhstan, Kyrgyzstan, Serbia, Tajikistan, Turkey and Uzbekistan. Border closures: Albania, Armenia, Bosnia and Herzegovina, Georgia, Kosovo*, Moldova, North Macedonia, Tajikistan, Turkey Turkmenistan and Uzbekistan.

* All references to Kosovo should be understood to be in the context of the United Nations Security Council resolution 1244 (1999.)
The UNFPA response in the region aligns with the 2030 Agenda, the 2020 WHO Global Strategic Preparedness and Response Plan, the Inter-Agency Standing Committee Global Humanitarian Response Plan, and the UNFPA COVID-19 Global Response Plan.

**Coordination and partnerships**

Playing a key role in new and existing coordination structures, UNFPA is a member of the UN interagency coordination mechanisms, primarily the UN Country Team and other related forums such as the UN coordination COVID-19 groups, including the Security Management Teams.

UNFPA also leads several mechanisms that bring together governments, civil society and other UN agencies, such as the Emergency Preparedness Group on COVID-19, SRH working groups and the coordination body GBV in emergencies. Across the region, UNFPA country offices are working in close collaboration with the various line Ministries, including Ministries of Health (MoH), Labour and Social Policy, Prime Minister offices, and donor and development partners. National governments are managing the overall coordination. In **Tajikistan**, under the leadership of UN regional coordination, UNFPA is coordinating a group of UN medical doctors consisting of staff members of WHO, World Food Programme, International Organization for Migration, UNAIDS, UNICEF and UNFPA to support the UN coordination team in ensuring staff safety and security in light of the pandemic. This also contributes to stronger visibility of UNFPA among its UN partners.

**Continuity of SRH Services and interventions, including protection of health workforce**

UNFPA is addressing continuity of SRH services by:

- Adapting and translating the newest international guidelines and technical documents related to SRH in each country, so that national health experts and service providers have immediate access to the most updated recommendations on SRH services in the COVID-19 context. UNFPA promotes and strengthens south-south cooperation between the countries in the EECA region;
- Mobilising technical and financial resources to set up a telemedicine programme in the region, which will enable health service providers in EECA to remotely deliver family planning counselling, antenatal and postnatal care and other services based on countries’ priorities and resources. This innovative intervention will have significant impact for all women and girls, especially in rural areas, and still requires external financial support; and
- Continuing its extensive work for the provision of PPE and hygiene kits to pregnant women, older people, people with disabilities and SRH and GBV-related service providers, and reproductive health kits to the health facilities.

**Country examples:**

- **Albania**: Distributed PPE supplies procured by UNFPA to two maternity hospitals in Tirana. UNFPA, in partnership with LDS Charities, will soon complete the **procurement process** of a larger quantity of PPE and other supplies to cover mid-term needs of health personnel in maternity hospitals.
- **Armenia**: Continuously updating “COVID-19 in Pregnancy” clinical guidelines on a regular basis, using new international evidence and ensuring its accessibility for doctors.
- **Azerbaijan**: Procured and distributed PPE items to women’s counselling centres, perinatal centres, shelters for survivors of GBV, older people and people living with disabilities. COVID-19 information materials have been distributed among perinatal centres and the local OB-GYN Institute.
- **Belarus**: Supported the development of a **specialised chapter of an online resource** for health care providers on SRH and COVID-19. More than 8,000 booklets for pregnant women were distributed in antenatal care centres to minimize unnecessary visits to the health facilities.
- **Bosnia and Herzegovina**: Distributed the translated “COVID-19 Technical Brief for Maternity Services” to Ministry of Health entities and relevant health professionals (https://ba.unfpa.org/en/node/47570).
- **Georgia**: Contributed to the development of interim recommendations on “Clinical Management of COVID-19 during Pregnancy and Delivery” (posted on the MoH website.) In collaboration with the MoH, delivered PPE to three key medical facilities in charge of COVID-19 response, including for pregnant women.
- **Kazakhstan**: Finalizing, with WHO and UNICEF, guidance on antenatal care, safe delivery and postpartum care in the context of COVID-19. Two brochures were also developed with the MoH for **expectant mothers** and **for mothers during the first 40 days after delivery**.
Country examples (continued):

- **Kosovo**: Distributed in all maternity units the translated COVID-19 Guidance Document for Maternity Services and the Technical Brief for Antenatal Care Services. Continued social marketing of male condoms throughout Kosovo, complementing the scarce supplies of the public health sector.

- **Kyrgyzstan**: Translated and shared the new technical brief on antenatal care for Russian-speaking countries. Finalizing an online training for healthcare workers on clinical protocol on acute respiratory distress syndrome (ARDS), in agreement with the Kyrgyz State Medical Institute of Postgraduate Education.

- **Moldova**: Supported an online training programme designed and conducted for healthcare personnel working in perinatal healthcare centres across the country, in close collaboration with WHO, MoH, Ministry of Labour and Social Protection, State University of Medicine and Pharmacy and the National Agency for Public Health.

- **North Macedonia**: Developing a set of recommendations for prevention and management of COVID-19 for pregnant women at all levels of health care, in partnership with all members of a dedicated working group on SRH appointed by the MoH.

- **Turkey**: Continuing to provide health services including COVID-19 prevention, screening, referral and case management to vulnerable groups among Turkish and the refugee/migrant population (including agricultural workers, people living with HIV, the LGBTI community, sex workers, survivors of GBV, older people and people living with disabilities) in more than 20 provinces.

- **Ukraine**: Distributed SRH kits for complicated deliveries, post-exposure preventive kits and contraceptives in health facilities located along the contact line. One of these kits contains PPE for health workers.

- **Uzbekistan**: Initiated a rapid needs assessment for female health care workers, through social networks of medical professionals throughout the country, to identify challenges and urgent needs.

**Addressing GBV**

UNFPA in EECA region is addressing GBV by:

- Convening partners, as a co-leader of the regional Issue-Based Coalition on Gender jointly with UN Women, to consolidate a resource package on gender equality and the impact of COVID-19, and to consolidate members’ experiences in addressing GBV and empowering women in the context of COVID-19. The resource materials, along with a joint UNFPA/UN Women statement, were shared with regional coordinators;

- Conducting, together with UN Women, a regional rapid gender assessment on COVID-19-related challenges faced by women and men, including economic vulnerabilities and access to GBV and SRH services;

- Assisting countries with sharing good practices to address urgent needs of vulnerable women and girls, especially survivors of GBV through the regional knowledge-sharing mechanism on COVID-19; and

- Supporting governments with adopting standards and protocols on the provision of services in women’s shelters during COVID-19, disseminating information and supporting hotlines for survivors of GBV, supplying the shelters with necessary hygiene products and PPE, promoting men and boys’ engagement in prevention of GBV, and working with the private sector to address prevention of GBV (Turkey). All country offices continue to advocate for the prevention of GBV and ensure governments address this issue within their COVID-19 response.

**Country examples:**

- **Armenia**: Supported the Human Rights Defender's Office in developing an awareness-raising video about the risk of increasing domestic violence during COVID-19 (including in sign language), within the framework of a European Union-funded project implemented by UNFPA, UNDP and UNICEF.

- **Azerbaijan**: Prepared two videos (on the position of young girls in Islam and the risks of violence they face during pandemics) and shared them on social media. Hosted live session on Facebook with participation of psychologists on GBV/domestic violence and women's rights and protection during COVID-19.

- **Belarus**: Together with Ministry of Labour and Social Protection, conducted an online workshop for social service providers on domestic violence response modalities during COVID-19, with a special focus on services tailored to the needs of people living with disabilities and older people, using materials in plain language.

- **Georgia**: Together with Ministry of Education, launched partnership with a local public broadcaster to integrate SRH lessons for teenagers and videos on child marriage, domestic violence and gender equality.

- **Kosovo**: Initiated multi-sectoral dialogue with relevant ministries and the Agency for Gender Equality and the Prime Minister’s Office for establishing transitional quarantine for survivors of GBV/domestic violence prior to admission in shelters.
Regional Response Summary (continued)

Country examples (continued):

- **Kazakhstan**: Adapted and disseminated two leaflets for social media, one with critical information for GBV survivors and one for policy makers.
- **Kyrgyzstan**: Supported Ministry of Labor and Social Development to provide access to safe spaces and mental health and psychosocial support for women and girl survivors of GBV in Bishkek.
- **North Macedonia**: Produced a video on GBV, in coordination with the First Lady, President’s Office, Ministry of Interior and Ministry of Labor and Social Policy.
- **Turkey**: Provided protection services including social services and GBV prevention and case management services, targeting vulnerable groups among Turkish and the refugee/migrant population (including women of reproductive age, older women, female agricultural workers, people with HIV, the LGBTI community and sex workers.)
- **Ukraine**: Supported the national hotline for survivors of GBV to scale up to 24/7 service, and worked with national police to print and distribute posters with safety plan for survivors to be displayed at all settlements across the country (100,000 copies.)

Assessment on the health and socioeconomic impacts of COVID-19

In several countries, UNFPA collaborates on, or conducts its own, crisis impact assessments. UNFPA is well-equipped to lead and contribute to assessing the social impact of COVID-19 on the most vulnerable populations (older people, young people, women and key populations) focusing on GBV, SRH services and education, civic engagement and demographic risk analysis.

Country examples:

- **Armenia**: Started GBV service assessment, including for women with disabilities, children and women from vulnerable groups.
- **Azerbaijan**: Initiated GBV assessment with plans to reach pregnant women, people with disabilities, older people and survivors of GBV. SRH and GBV are central aspects of the assessment.
- **Kosovo***: Launched, with UN Women and UNDP, a rapid socioeconomic, gender and women’s health impact assessment.
- **Kyrgyzstan**: Provided inputs to an analytical framework for assessment of the socioeconomic impact of COVID-19; together with UN Women, and provided support on a rapid gender analysis
- **Moldova**: Part of the joint UN and government COVID-19 Social and Economic Taskforce, advocating for the integration of rights and needs of the most vulnerable, specifically women and girls, survivors of domestic violence, people with disabilities, vulnerable youth and older persons.
- **Serbia**: Part of the UN COVID-19 Socio-Impact Working Group and, with UN Women, started preparation for a joint rapid assessment on the consequences of COVID-19 on economic empowerment, including questions on SRH and GBV.
- **Turkey**: Part of the UN COVID-19 Socioeconomic Impact Working Group, focusing on SRH and GBV implications.
- **Turkmenistan**: Part of the Joint UN and government Working Group on Socioeconomic Impact, which covers multi-sectoral stakeholders. Women and young people from low-income families have been included into the most vulnerable groups affected by the ongoing global crisis.

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1 Albania, Armenia, Azerbaijan, Belarus, Bosnia & Herzegovina, Georgia, Kazakhstan, Kyrgyzstan, North Macedonia, Tajikistan, Turkmenistan, Ukraine, and Uzbekistan.
2 Albania, Armenia, Azerbaijan, Belarus, Georgia, Kazakhstan, Kyrgyzstan, North Macedonia, Moldova, Serbia, Tajikistan, Turkey and Uzbekistan.
3 Albania, Belarus and Moldova.
4 Albania, Armenia, Azerbaijan, Belarus, Georgia, Kosovo*, North Macedonia and Uzbekistan.

* All references to Kosovo should be understood to be in the context of the United Nations Security Council resolution 1244 (1999).
Risk communication and community engagement

UNFPA offices continue to use a range of materials and channels to reach people, including the most vulnerable, with information about COVID-19 and how they can protect themselves and mitigate negative consequences of quarantines and other response measures. All country offices have developed, or are developing, translation of corporate guidance documents and other information materials, as well as country-specific materials. They focus on pregnancy-related questions, GBV, engaging men, older people and other issues. Materials are being disseminated through social media channels.

A map was developed showing COVID-19 risk based on the age structure of countries in Europe.

Under UNFPA leadership, the regional Issue-based Coalition on Gender Equality issued key messages and recommendations for ensuring a focus on gender within the response to COVID-19.

UNFPA has promoted risk communication and community engagement through:

- Communication platforms to reach as many people as possible;
- Interventions to raise awareness, activism and engagement, including with communities; and
- Mobilization of Honorary Ambassadors, celebrity partners, youth networks and other partners and influencers.

A regional hotline was launched, in partnership with the Eurasian Network of Women Living with HIV, to provide information and services to people living with HIV/AIDS and key populations affected by COVID-19 to ensure non-interruption of antiretroviral treatment, SRH and GBV counselling and referral in 12 countries (Armenia, Azerbaijan, Belarus, Moldova, Georgia, Kazakhstan, Kyrgyzstan, Tajikistan, Ukraine, Uzbekistan, Russian Federation and Turkey.) During the first three days of operation, the hotline helped 12 people living with HIV/AIDS who were stuck abroad without access to life-saving antiretroviral treatment medications.

UNFPA partnered with the regional youth-led movement Teenergizer to provide online peer-to-peer mental health and psychosocial counselling and information to adolescents and youth in the region, with a particular focus on youths living with HIV/AIDS.

Country examples:

- **Albania**: In partnership with Health Insurance Fund and Ministry of Health and Social Protection, supported development of an information package to be distributed in 420 primary health care centres and 1,000 pharmacies, as well as on social media, to convey messages about health services for older persons.

- **Azerbaijan**: Launched the #MenEngage social media campaign featuring male celebrities role modelling engagement in household work; produced and disseminated animated video targeting older persons with messages on health and safety during COVID-19.

- **Belarus**: In partnership with an information technology company, equipped the local Red Cross volunteer coordination network with a web app called Volunteers in Action, allowing online registration and real-time coordination of volunteers.
Regional Response Summary (continued)

Country examples (continued):

- **Georgia:** With media portal ON.ge, started weekly blog “Fathers and children – adventures from isolation” as part of the MenCare Campaign; reached out to older persons in Kutaisi with hygiene and protective items and information brochures – in collaboration with 60+ Clubs and Kutaisi Mayor.

- **Kazakhstan:** Produced a series of videos on stigma and COVID-19, including one featuring UNFPA Kazakhstan’s celebrity partner Kaliya and a leaflet on Ramadan during COVID-19.

- **Kosovo:** Advocated for making accessible male condoms at the quarantine sites. Through implementing partner KOPF, started online session with youth on SRH. Adapted module on COVID-19 and its impact on SRH.

- **Kyrgyzstan:** Leaflets for Ramadan adapted with recommendations on physical distancing and social solidarity. Young people in border areas participated in online marathon on COVID-19. With community-led organization “Indigo,” provided support to LGBTI communities and, in particular, to transgender people in need of assistance due to COVID-19 by delivering food packages and essential medicines.

- **Moldova:** In partnership with the MECR, launched new mental health and psychosocial support assistance program for youth titled “My choice is to be OK,” focusing on how to cope with social isolation and other psychological effects of the crisis, how to prevent GBV. The program is live-streamed twice per week, with an average audience of 15,000 viewers.

- **North Macedonia:** Produced two videos, one with the First Lady on GBV through partnership with Ministries of Labor and Internal affairs, and another as a call to leave no one behind and the role of UNFPA. Also produced a video with MoH on pregnancy with over 85K views.

- **Serbia:** With the Red Cross National Society, supported helpline for older persons providing information, medical advice and legal and psychological counselling. #DadinQuarantine posts in 2 weeks had engagement of over 165K Facebook users. #YouthAgainstCOVID19 first episode produced together with IFMSA Serbia. Materials for pregnant and lactating women developed with UNICEF have been translated for use in refugee and asylum support centres.

- **Ukraine:** Over 10,000 teachers joined the UNFPA-led Anti-Crisis National Online EdCamp ‘High Five for Education!’ to acquire up-to-date knowledge and information about the COVID-19 pandemic and self-protection measures to adjust to the distance learning process and communicate with students and their parents.

Branka Jankovic takes calls at the UNFPA-supported hotline. Image courtesy of the Red Cross of Serbia.
UNFPA offices are engaged in media outreach to raise awareness, share guidance and showcase achievements.

Regional highlights:
- TRT World: UN: Prolonged coronavirus lockdown means greater violence towards women (regional)
- Pandemic leaves older populations struggling with isolation in Serbia
- Ensuring access to HIV medications amid the coronavirus pandemic (Turkey and regional)
- When quarantine is unsafe: Domestic violence survivors seek help in Ukraine
- New hotline available for people with HIV affected by COVID19 in Eastern Europe and Central Asia (regional)
- Map on COVID-19 and older people in Europe (regional)
- "10 ways men can step up" social media campaign (regional)

Armenia:
- Video about risk of domestic violence increase during COVID-19
- Press conference of Avet Adonts, Deputy Minister of Foreign Affairs of Armenia, mentioning support from UNFPA.
- COVID19 Response: UNFPA Supports the Ministry of Labour and Social Affairs

Azerbaijan:
- Animated video on COVID-19 and older persons
- Video on protection of girls' rights in COVID-19 pandemic period, with English subtitles
- #Menemgage social media campaign with local celebrities

Bosnia and Herzegovina: Launched ‘Youth Barometer,’ a weekly online talk show developed and produced by youth, for youth, discussing pressing community issues: 50 parcels of hygienic kits to vulnerable Roma families distributed.

Kazakhstan:
- Shared a story on protecting women and girls from discrimination and violence
- Provided and translated advocacy messages on national TV about GBV and critical issues related to crisis centres.
- Advocated through a livestream and wrote an article on the implications of the COVID-19 for women and girls.
- Wrote an article about COVID-19 and people living with HIV/AIDS.

North Macedonia:
- Produced a press release on cooperation with First Lady on combating GBV, published in over 30 media outlets.
- Shared social media highlights and a presentation on youth and COVID-19.

Moldova:
- Produced ‘My Choice is to be OK’ promo video of the programme launched via social media.
- Produced an educational 3 min-video with psychologist on social isolation during COVID-19, targeting youth and their mental wellness.
- Produced a video sharing story of a mother during the pandemic, ‘I Gave Birth Wearing a Mask and Gloves.’

Serbia: Shared a story in which a psychology professor at Belgrade University interviews a dad in quarantine.

Turkmenistan: Released key UNFPA messages and articles to the general public through social media channels, including Facebook and Instagram.

Turkey:
- Disseminated education and communications materials on COVID-19 and SRH and GBV services.
- Shared a story on COVID-19 response in the context of the KRG Project.
## Annex: Confirmed COVID-19 Cases and Deaths in EECARO (WHO, 30 April 2020)

<table>
<thead>
<tr>
<th>Country</th>
<th>Confirmed Cases</th>
<th>Deaths</th>
</tr>
</thead>
<tbody>
<tr>
<td>Albania</td>
<td>773</td>
<td>31</td>
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<tr>
<td>Armenia</td>
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<tr>
<td>Azerbaijan</td>
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<td>Belarus</td>
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<td>Bosnia and Herzegovina</td>
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<td>Kazakhstan</td>
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<td><strong>Total EECARO</strong></td>
<td><strong>168,855</strong></td>
<td><strong>4,008</strong></td>
</tr>
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</table>

### Confirmed Cases by Country and Region

[Map showing confirmed COVID-19 cases by country and region]