



Reporting Period: 1 - 31 July 2020

Eastern Europe and Central Asia Region

COVID-19 Situation Report No. 6

United Nations Population Fund



Regional Highlights

- All countries in Eastern Europe and Central Asia, except Turkmenistan, have officially reported COVID-19 cases. Armenia, Belarus and Moldova are the most affected relative to their population size, with more than 13,300 confirmed cases per million population in Armenia. Turkey is the most affected country in absolute numbers (making up 34 per cent of reported cases among programme countries in the region).
- UNFPA continues to create new partnerships with faith-based organisations, civil society, private sector and digital influencers, all of whom want to play their part in encouraging safe behaviours and protecting societies from COVID-19. UNFPA is acting as a convener between governments and other stakeholders, maximising partnerships for the COVID response.
- UNFPA continues diversifying its support, adapting its sexual and reproductive health programming to the specific needs of each country, from launching mobile clinics in Ukraine along the contact line, to collaborating with leading universities in Azerbaijan and Belarus to develop online learning programmes, distributing personal protective equipment (PPE) and supporting the revision of protocol amendments on distant antenatal and postnatal care in Georgia.
- UNFPA continued to reach out to at-risk population groups, including young people, women, people with disabilities, older people and key populations, with information on how best they can protect themselves from the negative impacts of the COVID-19 pandemic, and ensure their mental and physical health and well-being.
- In collaborating with UN Country Teams, UNFPA supports the roll-out of socio-economic assessments of COVID-19 across the region and supports countries in the development of National Transfer Accounts that can be used to this end.

Situation in Numbers

 **676,948** Confirmed COVID-19 Cases

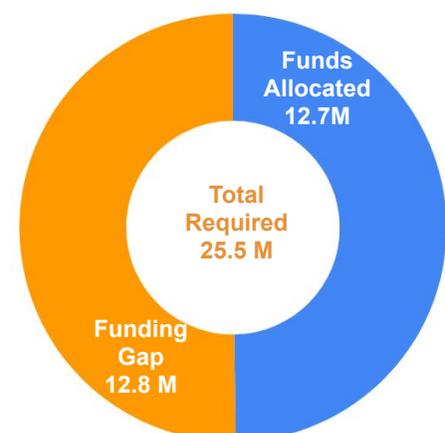
 **14,124** COVID-19 Deaths

Source: WHO 4 August 2020

Key Population Groups

-  **3 M** Pregnant Women
-  **63 M** Women of Reproductive Age
-  **53 M** Young People (age 10-24)
-  **26 M** Older Persons (age 65+)

Funding Status for Region (US\$)



Coordination and partnerships

The UNFPA response in the region aligns with the [2030 Agenda](#), [WHO global strategic preparedness and response plan](#), [UN-coordinated global humanitarian response plan](#), [UN framework for socio-economic response to COVID-19](#) and [UNFPA COVID-19 global response plan](#).

UNFPA continues to benefit from offers of partnership from diverse entities including faith-based organisations, civil society, private sector and digital influencers, all of whom want to play their part in encouraging safe behaviours and protecting societies from COVID-19. UNFPA has been acting as a convener between governments and other stakeholders, maximising partnerships for the COVID-19 response, and seeking out new partners who can help governments reach the most vulnerable.

Country examples:

- **Armenia:** UNFPA is part of the UN Supply Chain Coordination Group that allows for provision of UN support to the Government to fight the COVID-19 pandemic in a well-coordinated manner – through a portal that connects the requests of the Government to the UN agencies.
- **Belarus:** UNFPA signed an MoU with the private company Oyper Inc to support the Belarusian Red Cross by creating a fundraising tool that collects donated funds to support services for older persons and to protect social workers and volunteers.
- **Georgia:** UNFPA facilitated a thematic consultation on health, rights and protection of older persons in the context of COVID-19 with the participation of UNRC, UNDP, WHO, ILO. Priorities and gaps were identified to further integrate into the UNCT's Socio-Economic Response Plan.
- **Kosovo:** UNFPA, in partnership with Kosovo Chamber of Commerce (KCC), initiated discussions on possible engagement to improve opportunities for greater inclusion of women in the labour market particularly in times of COVID-19.
- **Kyrgyzstan:** UNFPA, in close collaboration with WHO, UNICEF and GIZ, worked with the Ministry of Health to establish a coordination body to implement activities on maternal and child health in relation to COVID-19.
- **Moldova:** UNFPA established a partnership with HelpAge International to implement the "Hack Youth Age" programme - an intergenerational dialogue programme to build the digital skills of older persons through engagement of young people in the context of COVID-19.
- **Tajikistan:** UNFPA established a partnership with the National Association of People with Disabilities (PWD) to initiate a new project on building access to SRH and family planning services for PWDs during the COVID-19 pandemic.
- **Turkey:** UNFPA has recently partnered with GroupM (media investment company) to promote UNFPA mandate, particularly on Gender Equality and Gender-Based Violence during the pandemic.
- **Turkmenistan:** The National Plan on Preparing for Prevention and Response to acute infectious diseases and the Plan on Operational Socio-Economic measures in Turkmenistan to counteract the coronavirus pandemic was approved by the President. Developed with UN support, the Plans include UNFPA key focus areas and will be used to mobilize resources.
- **Ukraine:** With partner, AVON cosmetics company, UNFPA shared 80,000 leaflets with safety plans and links to chat-bots as instruments of silent solutions for GBV survivors. UNFPA also held a webinar for 40 representatives of the corporate sector to sensitise businesses on gender equality policies and GBV prevention in the context of COVID-19.

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

UNFPA SRH programme and technical support focuses on three areas:

- Support to the development of SRH service protocols and guidelines to secure the quality and continuity of SRH services for all groups of population, leaving no one behind;
- Health workforce capacity building and protection; and
- Technical support and interagency cooperation efforts, focusing on knowledge management and experience exchange. Thematic web-conferences are organised in response to emerging needs of the countries.

The joint regional SRH programme of UNFPA-WHO/Europe entered into a new phase with support to the finalization of the plans for joint assessments of SRH services in EECA in the context of the COVID-19 pandemic, as well as the strengthening of accountability systems and response to the SRH needs of the most vulnerable.

Country examples:

- **Albania:** UNFPA has developed an online training programme on the integration of SRH services and the strengthening of the capacities of Primary Health Care (PHC) providers in the context of COVID-19.
- **Armenia:** Within the EU 4 Gender Equality project implemented by UNFPA and UN Women, 25,300 medical masks, 1,780 FFP2 respirators, 19,000 gloves, and 200 face shields were [distributed to the Ministry of Health for healthcare providers, maternity hospitals, and pregnant women](#).
- **Azerbaijan:** UNFPA adapted existing MISP training module in line with COVID-19, developed training modules for SRH service providers, and completed training modules for Emergency Helpline (103) on how a COVID-related emergency call from pregnant women should be handled. Additionally, observing World Population Day, UNFPA held online national conversation with its SRH partners to discuss protection of SRHR of women & girls during the pandemic.
- **Belarus:** UNFPA signed a Memorandum of Understanding (MoU) with the leading medical university, aiming to collaborate on the implementation of distance learning modules for obstetricians, gynaecologists and general practitioners on SRH, including on contraception and promotion of healthy behaviour among young people.
- **Georgia:** UNFPA procured and distributed critical PPEs to the healthcare providers specifically designated by MoH to treat COVID-19 suspected/infected pregnant women. The clinical protocol amendments on provision of distant antenatal and postnatal care in the immediate clinical situation during COVID-19, developed with UNFPA support, were approved by the Ministerial order and posted on the [website](#) of the Ministry of Health.
- **Kazakhstan:** [Leaflets](#) on how to protect pregnant and breastfeeding women from COVID-19 were updated in Kazakh and in Russian and disseminated widely (55,000 copies). In addition, the Ministry of Health issued a mandatory 'order' to all the regional health departments to distribute the leaflets and other UNFPA-produced brochures and technical guidelines for health service providers to all obstetric hospitals and primary health care facilities around the country. UNFPA also organized four well-attended and highly rated additional webinars for health service providers on the International Classification of Coding (ICD) for Maternal deaths in the context of COVID-19, and several topics related to antenatal care.
- **Kosovo:** Continuation of Peer Education through online trainings with high school students on puberty, contraception, family planning, unwanted pregnancies of adolescents, STI/HIV/AIDS, with a special focus on the new situation created by COVID-19. Initiation of e-health services at primary health care and continuation of SRHR services, with focus on abortion services.
- **Kyrgyzstan:** UNFPA provided [personal protective equipment](#) to frontline health workers in [partnership](#) with the Swiss Development Cooperation and as part of the MPTF project.
- **Moldova:** UNFPA supported the MoH to review the regulation on the provision of free of charge contraceptives for vulnerable groups purchased from state budget, increasing also the number of beneficiaries to 12 groups. This allows more vulnerable groups to benefit from contraceptives freely distributed at the primary healthcare level. The regulation includes also new provisions on contraceptive distribution in the context of the COVID-19 pandemic.
- **North Macedonia:** UNFPA convened key stakeholders, including UNICEF and WHO, to provide support to the Ministry of Health in assessing the short and long term needs of the maternities in relation to the COVID-19 pandemic. The process is lead by the Safe Motherhood Committee.

Country examples (continued):

- **Tajikistan:** UNFPA started implementation of a new project on rendering alternative online SRH/FP and basic psychosocial support services to ensure continuity and access to SRH and GBV services for women and girls funded by the UN COVID-19 Response and Recovery Multi-Partner Trust Fund.
- **Turkmenistan:** UNFPA supported the MoH in updating the algorithms and clinical practice of care in the country's maternities regarding referral and treatment of women during pregnancy and childbirth. These were based on UNFPA COVID-19 preparedness and response technical briefs on SRH and GBV.
- **Turkey:** UNFPA provided support to the MoH in COVID-19 prevention and response as well as continuation of essential SRH services - via provision of mobile health teams, hygiene kits, PPE, and IEC.
- **Ukraine:** UNFPA launched two mobile clinics in Donetsk and Luhansk regions. Targeting communities residing along the contact line and in isolated settlements, mobile clinics improve citizens' access to healthcare and provide essential medical service as part of COVID-19 response in conflict-affected area. In less than one month of operation, mobile clinics assisted over 400 people. Since the 1 July, UNFPA mobile SRH teams conducted 2753 medical counseling and examinations to people living along the contact line in Popasna rayon and Avdiivka.

Addressing GBV

UNFPA contributed to addressing GBV in the region by:

- Supporting national strategies and response plans to ensure that prevention and response to GBV and domestic violence are in place by strengthening the capacity of health, psychological support, social workers and police; and,
- Convening social media information campaigns aimed at raising awareness on the available services and helplines as well as targeted information and provision of safe services for GBV survivors among ethnic minorities;
- Continuing its extensive GBV/COVID prevention and awareness raising by collaboration with Orthodox Church in one country and engaging religious leaders in other.
- UNFPA EECARO continues to provide technical guidance to country offices to enhance the quality of programme interventions. Bi-weekly coordination calls with gender focals have included series of thematic issues such as: Remote based GBV essential services in COVID context including disability; Prevention GBV through programs on working with perpetrators etc.

Country examples:

- **Azerbaijan:** Developed and disseminated through social media an animation with information about existing hotlines and shelters for GBV survivors. Conducted live webinar on religion's role in eliminating gender stereotypes.
- **Albania:** 164 service providers from multi-sectoral referral mechanisms operating in all 61 municipalities in Albania participated in 9 online information sessions on the new SOPs on GBV for Health Sector, Psycho-Social and in Emergencies.
- **Bosnia:** UNFPA embarked on developing automated solutions (chatbots, applications and SOS hotlines) to provide continuous, non-discriminatory access to information for survivors of GBV/CRSV, new and expectant mothers, youth and medical professionals in cooperation with ministries, CSOs and youth councils.
- **Kazakhstan:** GBV leaflets with step-by-step information on what to do when confronted with violence continued to be [disseminated](#) across Kazakhstan (17,000 copies) through the police.
- **Kosovo:** UNFPA continued training of healthcare providers on GBV, including with regard to COVID-19, and aired a video broadcast via three TV stations against early marriages, an issue exacerbated by the pandemic. UNFPA and the Orthodox Church created a campaign "365 Days of Activism Against Gender-Based Violence."
- **Kyrgyzstan:** UNFPA supported local municipalities in the development of local regulations to address GBV through mobile groups.
- **North Macedonia:** Under a new [project](#) supported by the UK, work has started to improve GBV service provision during COVID-19 in two ethnically diverse municipalities.

Country examples (continued):

- **Tajikistan:** Supported two trainings on GBV prevention including Clinical Management of Rape in the context of COVID-19 by applying updated clinical protocols. Built capacity of 50 police officers on quality services to GBV survivors based on regional SOPs on police services provision, as part of the multi-sectoral response to GBV.
- **Turkey:** GBV case management services continued to be provided to women, men and key groups through women and girls' safe spaces, key refugee group units and social service centres.
- **Ukraine:** Built capacity of seven municipal mobile teams on new approaches and features of GBV response during COVID-19 quarantine (including remotely), allowing for expansion of coverage to vulnerable populations and strengthened access to assistance in remote communities and rural areas of conflict-affected Eastern Ukraine.
- **Uzbekistan:** By 20 July 2020, 1455 calls were received by the UNFPA-supported helpline aimed at providing psychological and legal counseling to women and families during COVID-19. 372 women were assisted and 12 suicide cases prevented. By 26 July, 3,344 calls for legal and psychological support were received by the National Rehabilitation and Adaptation Centers for GBV survivors supported by UNFPA. Since June, the number of calls has doubled, with most calls related to family issues and psychological violence in the family.
- **Belarus and Ukraine** jointly conducted three webinars for care providers to share experience of response to GBV/domestic violence, including during COVID-19, with 6,400 views from the target audience.

Assessment on the health and socioeconomic impacts of COVID-19

In collaboration with UN Country Teams, UNFPA supports the roll-out of socio-economic assessments of COVID-19 across the region. It also supports countries in the development of National Transfer Accounts (NTAs) that can be used to this end.

Country examples:

- **Armenia:** The report of the Rapid Gender Assessment implemented by UNFPA was finalized and will inform COVID-19 Socio Economic Impact Assessment.
- **Azerbaijan:** UNFPA contributed to the Report on Socio-Economic Assessment of COVID-19 developed by the UNCT, focusing on cost impact of the pandemic on GBV and elderly, and pre- and post-pandemic situation analysis.
- **Belarus:** UNFPA conducted Gender Rapid Assessment to inform policy and programme decisions on assistance to the most vulnerable groups.
- **Georgia:** Within the frames of the COVID-19 MPTF funded project, the assessment of the situation and needs of older people living alone under the poverty line in targeted municipalities was initiated to better understand, mitigate and decrease barriers and inequalities caused and revealed by COVID-19. The findings will be integrated into the UN Socio-Economic Response Plan.
- **Kyrgyzstan:** UNFPA in collaboration with UNICEF and RCO completed a survey on the impact of COVID-19 on young people. The results are being disseminated and integrated into the socio economic framework.
- **Moldova:** UNFPA in partnership with RCO conducted a survey on the impact of COVID-19 on young people and in partnership with OHCHR conducted an analysis of the impact of COVID on older persons. The results will be integrated in the UN Socio-Economic Response Plan.
- **Tajikistan:** The pre-final version of the Socio-Economic Assessment was drafted with UNFPA major contributions to the Health First and Social Cohesion pillars addressing continuity of SRH/FP and GBV prevention services.
- **Turkmenistan:** UNFPA supported the Ministry of Health in ensuring continuity of family planning services and supply of contraceptives in the context of pandemic through assessment of the availability and affordability of contraceptives in pharmacies to inform the volume and types of government-sponsored contraceptives to be procured for the most at-risk women.
- **Turkey:** UNFPA contributed actively to the drafting of the health, protection and refugee sections of the Socio-Economic Impact Assessment and Response Plans, which were recently finalized.
- **Uzbekistan:** UNFPA posted rapid assessment questions on the '[No to violence](#)' Telegram channel (launched by UNFPA and the Gender Commission of the Senate of Uzbekistan), related to the roots of disagreements between spouses in the families (which came up as one of the main reasons of conflicts in the families). The survey showed up the following three main roots: differences in the worldview and educational level of the spouses; interference of parents and other persons in the life of spouses, and material difficulties in the family.

Risk communication and community engagement (including with young people)

UNFPA continued to reach out to a range of population groups, including young people, women, people with disabilities, older people and key populations, with information on how best they can protect themselves from the negative impacts of the COVID-19 pandemic and ensure their mental and physical health and well-being.

UNFPA, in partnership with the regional youth-led movement, Teenergizer, address the impact of COVID-19 on youth health and wellbeing in the region through supporting the #StaySafe campaign aimed at empowering youth in the region to feel safe and protected during the pandemic and beyond and to become agents of change within their own families. As part of the project, a first [video](#) (from the planned series of video materials) on promoting psychosocial peer-support was produced by Teenergizer and widely shared throughout social media channels to reach adolescents and youth.

Country examples:

- **Albania:** UNFPA worked actively with youth platforms and Y-peer educators in raising awareness of young people on SRH especially in the context of COVID-19, through social media and other online platforms.
- **Azerbaijan:** UNFPA supported national youth houses via continuing series of its trainings on gender and reproductive health for adolescent and young people. Also, live discussions on men's participation in household chores generated over 1000 views online.
- **Belarus:** UNFPA together with an NGO partner developed a brochure in plain language for people with mental disabilities on using social distancing and protective equipment during the pandemic. Information materials were also developed for service providers to address domestic violence among persons with intellectual disability.
- **Bosnia and Herzegovina:** UNFPA continued supporting the Association XY to adapt #YouthAgainstCOVID19 videos to the country context, and provided online and telephone information and counselling on SRH issues.
- **Georgia:** UNFPA designed and printed older-people-friendly brochures regarding prevention of COVID-19, based on WHO recommendations in Georgian, Armenian and Azeri for distribution to more than 2,300 vulnerable older persons living in target municipalities and the beneficiaries of the state funded care institutions.
- **Kosovo:** Translated materials into local language related to Family-Friendly Policies and their benefits to the business sector with a special focus on the COVID-19 pandemic.
- **Kyrgyzstan:** UNFPA provided support to young girls from local communities in the border areas between Kyrgyzstan and Uzbekistan. Having completed the Innovation and Leadership Academy they are now contributing to their local communities by initiating and implementing [innovative social initiatives](#).
- **Moldova:** UNFPA in partnership with the Ministry of Education completed a programme on psychological assistance for students and teachers in the context of COVID-19 "My choice is to be OK" (15 April - 3 July 2020), including 24 online sessions in Romanian and Russian live streamed on social media.
- **Serbia:** Survey on SRH among youth completed, in partnership with UNICEF and by UReport platform, with over 1800 responses showing that young people would like more frequent and open discussion on sexual and reproductive health issues with parents, professionals, online platforms and school curricula.
- **Uzbekistan:** UNFPA jointly with the Gender Commission of the Senate disseminated a [video](#) focused on male involvement in advancing gender equality and GBV prevention, with engagement of the well-known artists, sportsmen, journalists and bloggers who showcased their experiences with focus on the quarantine period.

Leaving no one behind (with a focus on older people and people living with disabilities or with HIV/AIDS)

A regional [hotline](#) continues to provide information and services to people living with HIV/AIDS and key populations affected by COVID-19. As of 30 July 2020, the hotline helped a total of 88 people living with HIV/AIDS (54 men and 34 women) throughout 14 countries to receive counselling support and life-saving antiretroviral treatment medications while stuck in Czechia, Georgia, Greece, Israel, Latvia, Poland, Kazakhstan, Russia, Turkey, Ukraine, Uzbekistan, the United Arab Emirates and the United States.

Regional Response Summary *continued*

A UNFPA-supported community-led study on the impact of the COVID-19 pandemic and quarantine on access of women living with HIV and women from key populations to SRHR, HIV and GBV prevention services is underway. The study is being conducted by the Eurasian Women's Network on AIDS in Armenia, Belarus, Georgia, Kazakhstan, Kyrgyzstan, Moldova, Tajikistan, Ukraine and Uzbekistan.

At the country level, during the reporting period, UNFPA continued to ensure access to HIV/STI prevention information and services for most-at-risk key populations affected by the pandemic.

A global online convening on scaling up responses ensuring the health and rights of older persons during the COVID-19 pandemic, featuring the directors of UNFPA and WHO, was supported by EECARO in light of the particular relevance of the topic for the region with its high percentage of older people.

Country examples:

- **Albania:** UNFPA organized community-based awareness raising events on SRH priority areas in the context of COVID-19 in the regions of Tirana, Korca, Shkoder and Elbasan, focusing on people with disabilities and marginalized groups (Romas and Egyptians).
- **Armenia:** [UNFPA provided 5,200 masks, 8,000 gloves and 60 pieces of special outdoor wear to NGOs](#) operating in the sphere of children and young people with disabilities. Personal protective equipment provided to them enabled restarting activities in rehabilitation centers.
- **Azerbaijan:** Within its Active Ageing project, UNFPA held online sessions for older people to maintain their mental and physical health in quarantine conditions; one of the sessions conducted by a psychologist was viewed 9000 times.
- **Belarus:** UNFPA conducted two online workshops on assistance to older persons and persons with disabilities facing domestic violence, including during COVID-19, for 165 social care professionals.
- **Georgia:** Standards of care during COVID-19 for older persons in residential institutions and community care homes was developed by a working group supported by UNFPA, based on WHO guidance documents and in consultation with stakeholders, and submitted to the MoH.
- **Kazakhstan:** UNFPA initiated a national survey to assess the socio-economic status and needs of older persons, including with regard to the impact of COVID-19).
- **Moldova:** UNFPA provided support to LPAs to ensure continuity of non-formal education and civic engagement provided by the network of youth centers. 44 youth centers in urban and rural areas were equipped with necessary PPEs and disinfectants to prevent spread of COVID-19.
- **North Macedonia:** A [survey](#) on challenges young persons with disabilities and their parents/guardians face during the Covid-19 outbreak was conducted by UNFPA through Y-PEER to inform the scale-up of responses. A total of 300 hygiene items were distributed for use by persons with disabilities.
- **Serbia:** UNFPA partnered with Danish Refugee Council to support COVID-19 response in five governmental centers accommodating refugee and migrant women, through risk communication, distribution of dignity items, awareness raising activities about GBV services and individual counselling.
- **Tajikistan:** UNFPA started implementation of a new project on building access to safe and no-barrier SRH/FP services for people with disabilities through establishing and equipping new medical rooms within the premises of Public Unions of PWDs at national and regional levels.
- **Turkmenistan:** UNFPA supported the Ministry of Health in ensuring continued access to RH services and supplies for the most at-risk women during a pandemic. RH rooms countrywide were equipped with free contraceptives for most at-risk women and info materials were disseminated by the Ministry countrywide.
- **Turkey:** Protection services continued to be provided to male and female survivors of violence, people at risk of/living with HIV and people living with disabilities. Health services were provided to seasonal migrant workers and rural refugees via mobile health teams.
- **Uzbekistan:** UNFPA provided support to the "Opa-singillar" NGO of women with disabilities and Republican Rehabilitation and Adaptation Center for Victims of Violence and Suicide Prevention, to support women with disabilities and GBV survivors and their children with food, basic needs and social assistance during COVID-19.

Across the region, UNFPA has reached out to the public, through traditional and social media, to raise awareness of COVID-19 related information and guidance and showcase achievements in assisting people during the pandemic.



Story highlights:

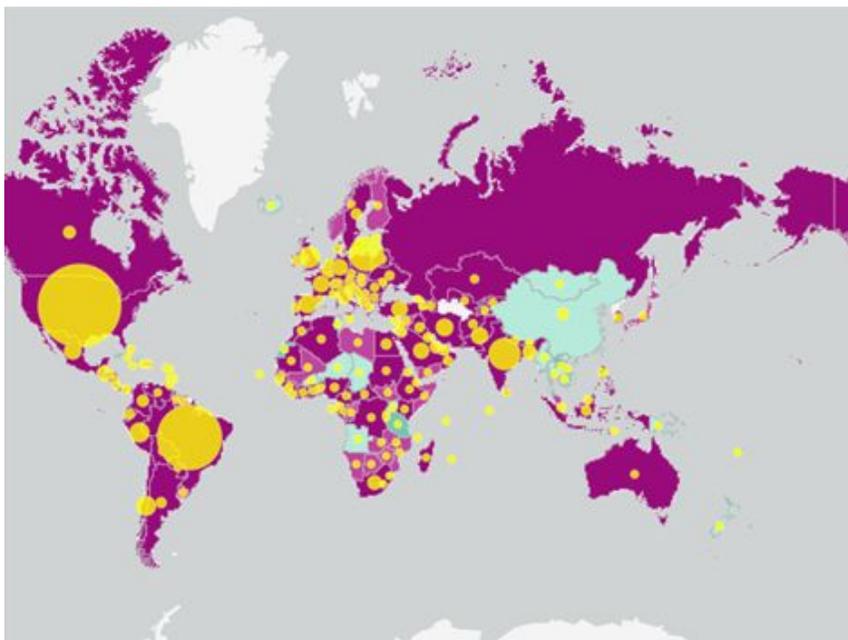
- [“In seeking to “build back better”, countries must put women and girls at the centre of their efforts” - Op-ed by Regional Directors Alanna Armitage and Bjorn Andersson](#)
- [A lifeline for people living with HIV: One woman’s story](#)
- [For Kyrgyzstan’s LGBTQI community, risks escalate under COVID-19 pandemic](#)
- [Helping young people with disabilities cope with COVID-19 in North Macedonia](#)
- [Young and old unite across generations during COVID-19 pandemic in Moldova](#)

Country examples:

- **Armenia:** [Response to COVID-19: Urgent support to three provinces](#)
- **Azerbaijan:** A [press release](#) on a national conversation on protecting the SRHR of women and girls in times of COVID-19 was issued on World Population Day and widely covered by the media.
- **Kazakhstan:** On World Population Day UNFPA launched a campaign based on findings of the Population Situation [Analysis](#), focusing on [vulnerabilities](#) of women during COVID-19, economic [impact](#) of the pandemic, demographic [shifts](#), ways of enhancing the [quality](#) of human capital and new trends in [family](#) life.
- **Kosovo:** UNFPA used the launch of UNFPA’s State of World Population Report and World Population Day to draw attention to the need to safeguard the health and rights of women and girls during COVID-19, including on TV ([here](#) and [here](#)).
- **Kyrgyzstan:** [UNFPA provided PPE](#) to protect health workers and vulnerable populations, including women, and disseminated information through different media outlets.
- **Moldova:** A [media event](#) on the handover of PPE to all 44 youth centres was broadcast live and covered by [Romanian](#), [Russian](#), [local](#) and [national](#) channels. A [World Population Day](#) event on [Demographic Outlook 2020](#) and COVID-19 impact was seen over 21K times on [Facebook](#). A [video](#) about free contraceptives for vulnerable groups was disseminated; the [“Stay Healthy. Do the Pap-test!”](#) campaign was resumed.
- **North Macedonia:** World Population Day was observed with a [press release](#) on the impact of COVID-19 on gender-based violence, widely published in national media outlets.
- **Serbia:** UNFPA marked [World Population Day](#) with an online panel discussion on challenges and solutions regarding the pandemic’s impact on women and girls, older people, migration and family dynamics.
- **Turkey:** In the context of the impact of COVID-19 on the incidence of violence against women and recent cases of femicide, UNFPA conducted a social media campaign with posts on [Twitter](#), [Instagram](#) and [Facebook](#) receiving thousands of likes and interactions.
- **Turkmenistan:** UNFPA-managed [Yashlyk.info](#) is among the few websites to include evidence-based information in Turkmen language [on COVID-19 prevention](#) for young people and parents (34,000 new users visited the page). On World Population Day, UNFPA stressed importance of continued SRH services and supplies through a [human-interest story](#) and social media and poster campaign.
- **Ukraine:** Some 30k people were reached with COVID-related posts on social media. Launch of mobile medical clinics for COVID-19 tests in Donetsk and Luhansk oblasts was covered in 30 [media](#) outlets.
- **Uzbekistan:** On World Population Day, a communication campaign was initiated to raise awareness about the SRH needs and vulnerabilities of women and girls during the pandemic, featuring interviews with health-care providers.

Confirmed COVID-19 Cases and Deaths (UNFPA programme countries) WHO, 4 August 2020

Country	Confirmed Cases	Deaths
Albania	5,620	172
Armenia	11,221	176
Azerbaijan	32,684	468
Belarus	68,166	571
Bosnia and Herzegovina	12,477	358
Georgia	1,182	17
Kazakhstan	93,820	1,058
Kosovo	9,006	246
Kyrgyzstan	37,541	1,427
Republic of Moldova	25,482	800
North Macedonia	11,140	500
Serbia	26,451	598
Tajikistan	7,538	61
Turkey	233,851	5,747
Turkmenistan	0	0
Ukraine	74,219	1,764
Uzbekistan	26,550	161
TOTAL	676,948	14,124



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