COVID-19 RESPONSE AND EARLY RECOVERY PLAN

March - December 2020

ANNUAL PROGRESS REPORT

Kyrgyz Republic

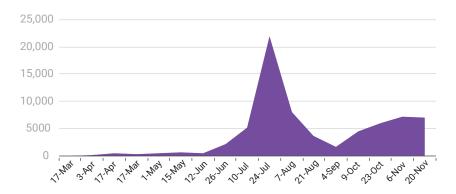
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Summary

The COVID-19 pandemic is unprecedented in terms of scale, complexity and impact across the country. As of 24 November, the pandemic infected 70,366 people and taken 1,241 lives. The Government of the Kyrgyz Republic has taken important steps to contain the spread of COVID-19, but much more remains to be done. Health sector response has not yet been able to respond to health needs of population. Although the National Contingency Plans were flexible and aligned with the prevailing transmission scenarios, existing capacity is limited in terms of the number of beds in the observation and treatment centers. There have been serious gaps in preparedness in such areas as coordination (including planning scenarios), safety (including for hospital staff), and communication (including outreach to local communities), as well as in clinical, nursing, and other support services. Due to lockdown and budget insufficiency majority of regular health services have been suspended. Most suffering were patients with chronic diseases, most of affected by the disease and its multiple complications such as pneumonia and multiorgan failure. On the top of all this problem all Central Asian countries faced common challenges with procurement and delivery of essential medicines and life-saving procurement.

New COVID-19 cases (bi-monthly statistics)



The COVID-19 pandemic is not just a public health emergency but has also aggravated societal challenges such as unemployment and hunger, and highlighted the vast inequalities in the countries, which in turn impacted national ability to handle the crisis. It revealed systemic problems in education, public service competencies, governance, and decision making. The pandemic has put the country's public finances under considerable strain. The overall decline in economic activity has led to a massive drop in public revenues: revenues from trade tax, social

security contributions and value-added tax (VAT) have all but vanished, and are expected to remain low as the crisis unfolds.¹ While the Government has launched a series of emergency schemes, including the provision of loans, guarantees, benefits and subsidies, 8 these are unlikely to offset the pandemic's negative impacts. Combined with the essential increase in health expenditures,9 national responses to the pandemic have already significantly raised levels of public expenditure, and expenditure requirements – not least for the health response in light of the recent surge in confirmed COVID-19 cases – are still rising.

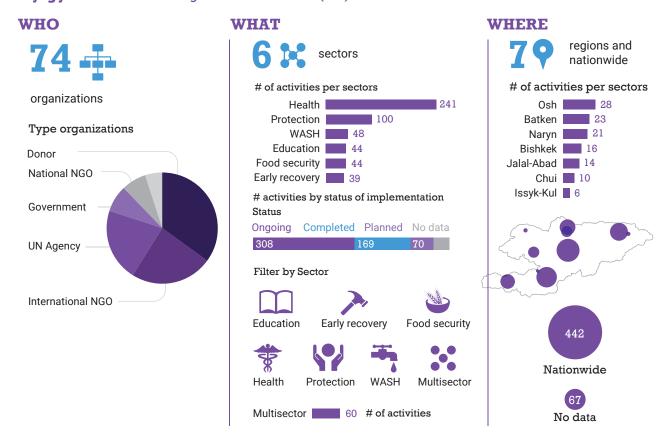
The socioeconomic impact of the pandemic is being transmitted through the following channels: (i) lost income due to lockdowns, disruptions in commercial activities, loss of jobs and reductions in remittances from the large shares of the labour force working abroad; (ii) higher consumer – and especially food – price inflation rates (which were running at nearly 9% and 16% annual levels in April 2020); (iii) reduced access to quality health care and other essential social services; and (iv) increases in the incidence of domestic and other forms of violence. The pandemic is particularly devasting to the most vulnerable parts of the population, including people already in need of assistance, such as returning migrants, as well as women and children, older persons and those living with disabilities.

In March 2020, the Government of the Kyrgyz Republic requested activation of Disaster Response Coordination Unit (DRCU). DRCO was established in 2008 to enhance cooperation and coordination between Government of the Kyrgyz Republic, United Nations Country Team, Red Cross and Red Crescent Movement and other key actors for adequate and effective humanitarian response to emergency situations. It serves as a consultative-deliberative mechanism whose main purpose is to coordinate humanitarian response to emergencies upon the Kyrgyz Government relevant request and enhance collaboration among DRCU partners and other key actors.

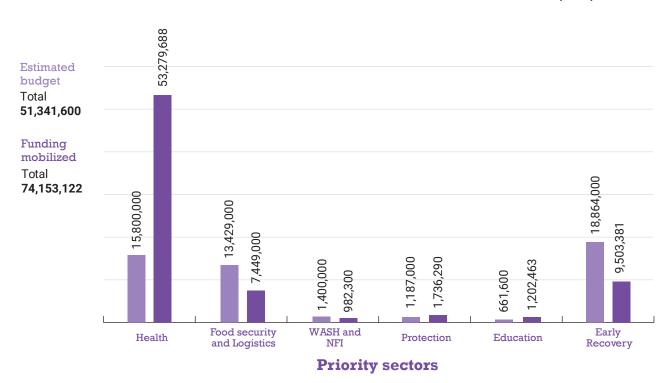
Since the beginning of the COVID-19 pandemic, under the leadership of the UN Resident Coordinator and Ministry of Emergency Situations the members and partners of DRCU have been able to mobilize a coordinated humanitarian response to COVID-19 leading to the development of the COVID-19 Response and Early Recovery Plan in close coordination with the Government's civil protection system and key immediate national COVID_19 response priorities. The COVID-19 Response and Early Recovery Plan was endorsed by the Government and signed by ex-Vice-Prime Minister Ms. Aida Ismailova on June 20, 2020. Through this Plan DRCU prioritized and leveraged a comprehensive support across six priority sectors, e.g.: Early Recovery, Education, Food Security and Logistics, Health, Protection, and Water Sanitation, Hygiene (WASH) and non-food items (NFI). The aim of the Sector Approach in humanitarian settings was to ensure coherent and effective response through the mobilization of government agencies, international organizations, UN Agencies, Programs and Funds, and non-governmental organizations (NGOs) to respond in a strategic manner that closes gaps, increases predictability and strengthens the capacity of humanitarian actors across all key areas of activity in an emergency.

 $^{^{\}mbox{\tiny 1}}$ According to the Ministry of Finance, in comparison

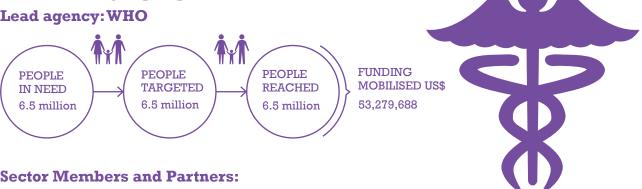
Kyrgyzstan. Who is doing WHAT and WHERE (3W)



THE COVID-19 RESPONSE AND EARLY RECOVERY PLAN FUNDING OVERVIEW (USD)



HEALTH SECTOR Lead agency: WHO





ABT, AKDN, ADB, CDC, EU, GAVI, Germany, GIZICAP, IOM, ICRC, Kyrgyzstan Red Crescent, MSF, Qatar Charity, Russian Federation, Switzerland, Turkey, UNFPA, UNICEF, UNDP, UNHCR, USAID, WB, WHO

State Implementation Partners: Ministry of Health of the Kyrgyz Republic

Objective and the summary of the sector response

The Intersectoral Interagency Contingency Plan for COVID-19 in the health sector aims to support the Government of the Kyrgyz Republic and the Ministry of Health of the Kyrgyz Republic (MOH) to lead and ensure an effective, timely and coordinated response that will mitigate the impact of COVID-19 outbreak in the Kyrgyz Republic, achieved through a clear response coordination mechanism and strategy, and clearly defined roles and responsibilities of all relevant national and international partners.

The Health Sector response to COVID-19 has been organized under two main coordination platforms - the Disaster Response Coordination Unit (DRCU), Health Sector, led by WHO in close collaboration with the MOH, and the Development Partner Coordination Council Health sector group led by WHO and the World Bank.

Under the leadership the MOH and technical leadership of WHO, health sector partners agreed to deliver coordinated response under the Intersectoral Interagency Contingency Plan for COVID-19 that was approved and signed by Vice-Prime Minister of the Kyrgyz Republic Ms. Altynai Omurbekova on March 18, 2020. This Contingency Plan aimed to support a set of strategic measures to strengthen national capacities to combat COVID-19 pandemic, as well as to advancing implementation through the establishing of interagency coordination mechanism with the participation of international development partners, UN agencies and other partners. Intersectoral Interagency Contingency Plan for COVID-19 had later become an integral part of the DRCU COVID-19 Response and Early Recovery Plan.

Intersectoral Interagency Contingency Plan for COVID-19 aimed to support a set of strategic measures to strengthen national capacities to combat COVID-19 pandemic, as well as to advancing implementation through the establishing of interagency coordination mechanism with the participation of international development partners, UN agencies and other partners in the following key priority areas of the response:

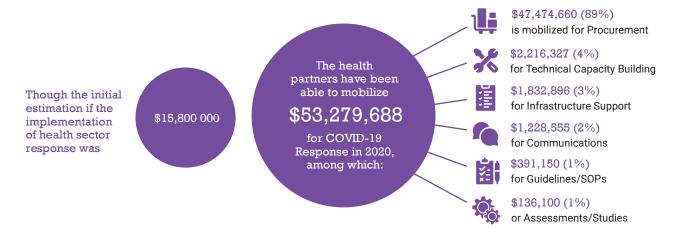
- 1. Country level coordination,
- 2. Surveillance, Case investigation and rapid response,
- 3. Risk communications and community engagement,
- 4. National laboratory system,
- 5. Case management,
- 6. Infection prevention and control (IPC),
- 7. Points of entry,
- 8. Maintenance of Essential Health Services and Systems,
- 9. Logistics and supply management.

Expected outcomes

- Limit human to human transmission including reducing secondary infections among close contacts and health care workers, preventing transmission amplification events, and preventing further international spread;
- Mitigate the impact in country should there be sustained community transmission of infection.

- Launch of the weekly COVID-19 digest helped to provide the regular overview of the epi situation, updates on the progress of the specific contributions of the health partners, and also included the latest guidelines and scientific papers;
- The Seroepidemiological survey was conducted which allowed inferences about the extent of infection and the cumulative incidence of infection in the population;
- Technical support was provided to the Ministry of Health to review of clinical guidelines, protocols, and SOPs in-line with WHO recommendations and disseminate the protocols among all health care facilities;
- Infection Prevention and Control program review and update was supported and aligned with WHO
 COVID19 guidelines. Training developed to ensure IPC compliance with basic IPC principles at
 first point of care of patients (usually primary care): triage, early recognition, standard precautions,
 isolation capacity and referral procedures;
- Additional training packages on the diagnosis and treatment of COVID-19 of adult patients in the Primary Health Care and Hospital Care were revised and updated as informed by the emerging data and guidance from the Ministry of Health and WHO;
- A total of 6,382 of health-care personnel were trained as of November 2020 on the issues of surveillance, contact tracing, laboratory, case management, infection prevention and control for medical workers to address priority public health risks such as COVID-19 based on the WHO latest recommendations;
- Emergency Medical Team from Poland was deployed to Kyrgyzstan to help with strengthening COVID-19 clinical case management and provided on the job trainings at the COVID-19 designated facilities across the country;

- Assessment of the points of entry to was conducted to identify the necessary measures to mitigate
 infection transmission amongst travelers, crews, and points of entry staff in the context of the
 COVID-19 pandemic;
- The development of national Risk Communication Plan was supported, including trainings, and
 production of communication material to increase community awareness and knowledge to adhere
 with the recommended public health measures. Awareness raising among rural population was
 mainly implemented by the Village Health Committees that were engaged into the disseminating
 the information on COVID-19 protection measures, Numbers of video materials were produced and
 aired in the all national TV channels and social networks;
- COVID-19 monitoring dashboard was developed and launched. The dedicated visualization dashboard based on the currently used databases strengthened data analysis and informed actions to respond to the outbreak utilizing evidence-based approach;
- Technical support to the Ministry of Health was provided to forecast the needs for PPE, hygiene, diagnostics, and medicines using WHO COVID-19 essential supplies forecasting tool;
- Procurement and supply of critical medical equipment, PPE, laboratory tests and other essential
 supplies to the Ministry of Health was organized; The procurement and distribution plan also included
 the procurement of essential equipment and supplies to the detention facilities under the SSEP and
 prison facilities established to treat mild cases of COVID-19 following the WHO recommendations
 and SOP for COVID-19 response approved by the SSEP management;
- The capacity of the reference laboratories was reviewed through WHO Laboratory Assessment Tool adopted to analyze the COVID-19 testing. Based on the results of the assessment, the Action Plan to strengthen COVID-19 Laboratory Response Activities in Kyrgyzstan was developed to address priority gaps and provide a framework tailored to advance the national laboratory capacity. As part of the implementation of the Plan, preventive maintenance was supported to inform the certification of biological safety cabinets in all COVID-19 labs in country, in accordance with ISO12469 standards. Some laboratory samples have been sent to the international reference laboratory for the confirmation. shipment of laboratory samples for confirmation by international reference laboratory;
- The dedicated 118 hotline was established in April 2020 with the support from the development partners to respond to the growing demand of the population for medical consultations and guidance on COVID-19 treatment. During the spike of COVID_19 pandemic in summer 2020, the hotline was able to serve 52,000 calls.





beneficiaries in total have been equipped with knowledge on various aspects of the COVID-19 response and those included – the staff of the Ministry of Health, the healthcare workers.



items of essential equipment, PPE and other supplies have been procured and distributed among the healthcare facilities and vulnerable groups.

Training of Trainers to tackle COVID-19 in Kyrgyzstan

As part of the preparation plan for a possible second wave of coronavirus infection, the Ministry of Health in Kyrgyz Republic has developed and approved a training concept note and a training program for a multidisciplinary team (MDT) of doctors and nurses on COVID-19, with the support of USAID. Based on a "training of trainers" model, doctors of various specialties will acquire the knowledge and skills necessary to train other doctors in providing quality care to COVID-19 patients. This program will create an effective system of continuing education for doctors and nurses, and a stable MDT network in all regions of Kyrgyzstan. Leading experts in various fields of medicine were involved as trainers and teachers under the coordination of professors T. M. Sooronbaeva and A. Z. Kutmanova. This approach also helps to strengthen human resources, provide better preparedness in pandemic response, and improve the quality of COVID-19 medical care. It is important to note that the MDT will include motivated doctors of various specialties with existing experience in working in "red zones" in the country: pulmonologists, infectious disease specialists, resuscitators, cardiologists, pediatricians, obstetricians-gynecologists, endocrinologists, psychologists, and other specialists.

The first certified national-level MDT in Bishkek was formed, consisting of 17 doctors and 11 nurses, whose training took place in September. The training of a second national-level MDT in Osh began in September. The MOH plans to train and prepare another 7 mobile MDTs in each region of the country.

Distance Training in Diagnostics and Treatment of Covid-19 for Primary-Level Specialists

The entire period of the first wave of Covid-19 was incredibly stressful for the healthcare system. Volunteer movements and society came to the aid and helped to set up day clinics in sports complexes, schools and hotels, and outdoor areas. The provision of these day care centres fell to the shoulders of primary health care. A revision of the Clinical Protocol was urgently required, as well as an increase in the capacity of the primary level to treat and diagnose Covid-19.

In response to this, USAID Abt LHSS project supported the MOH to develop a training course on the treatment and diagnosis of COVID-19 for primary health care level specialists. The course was approved and institutionalized with the inclusion of materials in continuous medical education courses and posted on the KSMIRCE website in the «Distance learning» section (www.ksmi.kg/elearning). The distance learning was possible due to establishing of Telecommunication Network with support of Swiss Government, which united almost 60 health organizations from all regional health facilities, medical academic institutions and the MoH senior staff.

In September, distance training was conducted for primary health care specialists, including village feldshers who had previously been partially trained, and some had not been trained at all, in the diagnosis and treatment of Covid-19. A total of 786 (37.4%) physicians and FAP feldshers have been trained to diagnose, treat patients and refer to the appropriate levels in a timely manner and in accordance with the 4th version of the Clinical Protocol approved by the Ministry of Health. All specialists from all over the country - oblast, district and rural level - have joined the training. Good feedback has been received on the timeliness and necessity of this training.

During the training, the health workers faced such problems as the lack of internet access in some primary level facilities, including FAPs in villages, and feldshers were unable to download a zoom platform from their phone devices. There were requests to systematize the clinical protocol, to make a simplified version for primary health level specialists. The MoH working group has now been set up to revise version 5 of the Clinical Protocol, and there are plans to develop a user-friendly document for primary level specialists.

Case Management

Figure #: Number of people trained

Number of personnel trained per strategic pillar of PRP







44 Laboratory

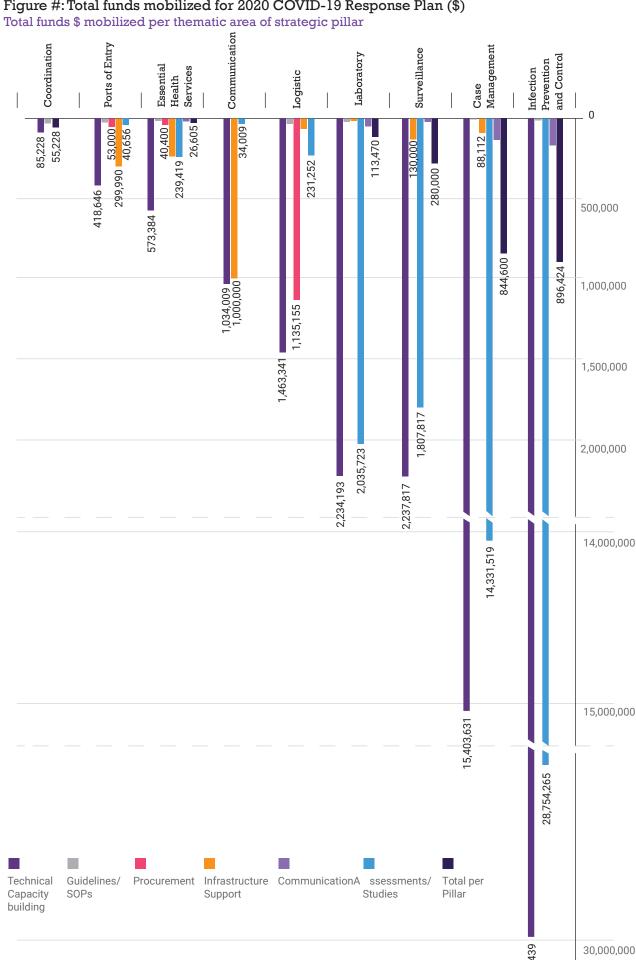


Figure #: Procurement of supplies

Items procured for COVID-19 PRP



Disposable masks 424,250



Disposabe robes 87,735



N95 masks 164,300



PCR tests 71,200



Face shields 46,200



Protective glasses 36,130



Disposable spatulas 24,100



Respirators 20,009



Examination gloves 17,502



Insulin injections 12,000



PPE Suit 11,777



Sample collection kits 11,000



RDTS 10,000



COVID tests 7,720



Adult Oxygen masks 6,000



Biohazard waste sacks 5,780



Hand sanitizers 65ml 2,980



Pediatric Oxygen masks 1,000



Family protective kits 900



Antiseptic L 800



Oxygen concentrators 744



Thermal contactless guns 494



Respirators filters 490



Pulse Oximeters 310



Hand sanitizers 900ml 300



Hospital beds 266



BiPap Machines



UV lamps



Hand santizer 5 L 115



Portable ventilators 103



High flow oxygen devices 86



Bactericidal sets 59



Vehicles for RRTs 44



Gene expert machines



Patient monitors



wthout ventilators

17



Portable ultrasound macines 16



Fixed X Ray machines



Amnulances with ventilators



Medical Tents



Mobile X Ray machines



Doppler ultrasound machines

Key challenges encountered and lessons learnt during the implementation

- The overall capacity of the healthcare system to deliver essential services was severely challenged in the following areas:
 - Process of upscaling laboratory capacities to test suspected cases of COVID-19 was challenged with number of factors including the infrastructure, availability of tests and supplies, quality of tests and availability of surge capacity;
 - Hospital capacity was limited to dear with the increasing number of cases, due to the number
 of factors including infrastructure, availability of supplies, PPEs, equipment, and availability of
 adequate surge capacity. Implementation of the plan of actions to strengthen the capacity of
 hospitals has been delayed due to high bureaucracy and delays in obtaining the formal approvals;
 - The ambulance services and mobile teams were overburdened during the spike of COVID-19 pandemic in June-July 2020;
 - Adherence to Infection prevention and control measures was compromised at hospitals and primary health care centers due to infrastructure limitation (including ventilation system inadequacy), shortages of PPE, and availability of trained surge capacity;
 - Limited global and local markets for the procurement of the essential supplies and equipment, including PPE and breathing support equipment. Due to fluid epidemiological changes, border restrictions, changes in government(s), and overwhelmed MOH personnel, there have been additional challenges in obtaining border entry clearances from recipient country governments in a timely manner. The delivery of humanitarian supplies has been seriously delayed by the burden of customs clearance procedures. This was additionally challenged by the absence of the national monitoring system for forecasting and distribution of humanitarian aid;
 - Weak capacity of the Ministry of Health, shortage of the staff and absence of the key centralized data have led to the delays in the finalization of the various studies that would have supported the evidence for the timely decision making;
 - The pandemic had severe impact on the healthcare workers. Some groups of the medical personnel, like SSEP prison health workers and other medical staff have not received timely compensations;
 - COVID-19 caused disruptions in the continuity of essential health services.
- Weak national communication campaign and spreading the fake news was further challenged by
 the difficulties to reach out the remote communities, non-connected individuals, migrants and the
 elderly. The lack of understanding among the population on the critical needs to adhere to prevention
 measures, including mask wearing, social distancing, avoiding large gatherings had therefore led to
 the spike of the COVID-19 in summer 2020 reaching its pick of daily infection rate and number of
 deaths;
- Political crisis and instability after October 2020 elections to the Parliament followed by the dismissal
 of the President of the Kyrgyz Republic and critical changes in the staffing at key positions of the
 Government, including the leadership of the Ministry of Health had certain impact on mobilization of
 healthcare system and key decisions taking process. In addition to it, the on-going political unrest s

- and massive gatherings have also had its negative impact of the epidemiological situation as they compromised preventive public health measures;
- The process of the implementation of the Intersectoral Interagency Contingency Plan for COVID-19
 for health sector has nevertheless benefited from the centralized and consolidated procurement lead
 by the joint procurement sub-group, fast project preparation cycle, quick disbursement through ERIK
 CERC, strong Project Implementation Unit under the Ministry of Health.

EDUCATION SECTOR

Lead agency: UNICEF





Sector Members and Partners:



ACTED, ADB, Aga Khan Foundation, AUCA, BMZ, EU, GIZ, Kyrgyz-Turkish Manas University, ILO, OSCE HCNM, Soros Foundation, Turkey, UNDP, UNESCO, UNICEF, UN Women, USAID, WB, WFP

State Implementation Partners: Ministry of Education and Science of the Kyrgyz Republic

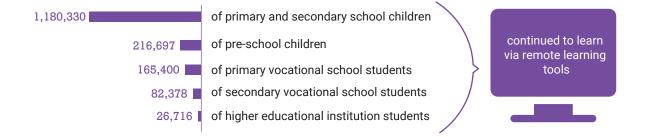
Objective and the summary of the sector response

On 27 March 2020, the Ministry of Education and Science (MOES) of the Kyrgyz Republic endorsed the Anti-Crisis Plan to ensure continuous uninterrupted learning of all children and successful completion of the academic year 2019-2020 by introducing remote learning tools. Building on the Anti-Crisis Plan, Education Sector partners prepared its Sector Response Plan as integral part of the DRCU COVID-19 Response and Early Recovery Plan. The objective of the DRCU Education Sector Response Plan is to ensure continuous learning of all children from pre-school to tertiary education level by establishing various remote learning tools during school closure for the period of April – May 2020 and September – October 2020, as well as facilitating the safe reopening of schools and pre-schools. The sector response in education primarily focused on establishing the system of remote learning during the school closure, procedures of reopening of schools during the academic year 2020-2021 and other forms of support to the most vulnerable children.

Expected outcomes

- 309,000 pre-school children continued to learn via play based remote learning tools;
- 1,311,478 primary and secondary school children continued to learn via remote learning tools;
- 29,684 primary vocational school students continued to learn via remote learning tools;
- 91,531 secondary vocational school students continued to learn via remote learning tools;
- 183,778 higher educational institution students continued to learn via remote learning tools;
- 110,126 teachers of all educational levels built their capacity for providing and monitoring remote learning;
- Approximately 500,000 parents/caregivers received recommendations on how to effectively spend time with children at home.

- Proper mechanisms were established to identify most vulnerable children and provide psychological and pedagogical support to at least 11,916 children through social pedagogues/teachers and hotlines;
- Support was provided to developing the reopening guidelines for preschools and schools. Based on
 the guidelines more than 9,500 pre-school teachers, nurses and other support employees, as well as
 100 heads of oblast and district education management departments across the country were able
 to build their capacity through on-line training prior to pre-school and school reopening;
- 2,985 video lessons in total were developed for the last quarter of the academic year 2019-2020 and
 the first quarter of the academic year 2020-2021 that also included Uzbek or Tajik subtitles, or signlanguage translation. The videos have been broadcasted on TV and stored on the online learning
 platform (https://oku.edu.gov.kg/ru/);
- 207 textbooks in total were digitalized and made available on the e-library on the MOES's site (https://kitep.edu.gov.kg/);
- 60 out-of-school children with disabilities across the Country have been connected to e-platform/elessons;
- Offline digital libraries (IlimBoxes) with e-lessons were delivered to 42 schools across the country with no internet access;
- Three video instructions, five basic teacher training modules, as well as other training materials
 were prepared with 64 teacher-trainers trained to the functioning of e-learning platforms. 15 ICT
 specialist were trained on Moodle server management to strengthen the support infrastructure for
 on-line learning;
- More than 200 social media posts for the period of April June 2020 were published to raise population's awareness and understanding on remote learning and other important information on Facebook, Twitter, Instagram and Telegram accounts of the MOES, reaching 15,114 subscribers in total;
- 3,280 pre-schools and schools have received antiseptic and liquid soap to increase the safety of school workers, children, and their families;
- Almost 33,000 liters of antiseptic were handed over to the MOES. The antiseptic is being distributed to 2,001 schools and 1,279 kindergartens across the country, through district education departments.





teachers and local trainers of all educational levels built their capacity for providing and monitoring remote learning.



of most vulnerable children, including children with disabilities, received psychological and pedagogical support during quarantine and/or remote learning.

Dedicated teachers bring remote learning closer to every child in Kyrgyzstan

Gulsara Kamchybekova starts this day in the COVID-19 shutdown in front of a raft of television prompters, film crew, glaring lights and cameras. The 49-year old, secondary school physics teacher is inside a studio to record lessons which will be broadcast later on television and made available on online platforms so that children can benefit from remote learning. Gulsara is one of more than 200 teachers who have been mobilized to produce video lessons for remote learning in the Kyrgyz Republic.

This is a surreal moment for Gulsara who has more than 27 years of teaching experience and has educated thousands of children. This is the very first time she is teaching in front of a camera, with no students in the room.

Education during COVID-19

As COVID-19 continues its rapid spread throughout the world, countries have been taking unprecedented measures to contain the spread of the virus. The Kyrgyz Republic, like many others, closed its borders, introduced a State of Emergency in the affected areas and implemented quarantine measures. A consequence of these measures: The closer of all 6,426 schools and pre-schools in the country, affecting over 1,7 million children.

To continue education programmes and complete the final quarter of the academic year, the Ministry of Education and Science (MoES) put in place an anti-crisis action plan, focusing on introducing and implementing remote learning. The MoES identified priority lessons and has worked with national TV channels to air video lessons. By 8 April, after three weeks of filming, approximately 1,300 video lessons were ready for dissemination to students of various grades and their families. Even with short notice, Gulsara was ready to jump in.

•••

Main challenges for remote learning

The MoES took proactive steps in planning the remote learning activities, mobilizing development partners to assist with the implementation of activities and urgently producing video lessons aligned with the last part of the school year. Participating teachers faced various challenges, the first being simple logistics. Many teachers live in remote parts of Bishkek, the capital, or in the outskirts. Due to the lockdown and limited means of transport, it was difficult for them to travel to the production site. The MoES obtained special permits for their movement and arranged for their transportation with the support of the development partners.

Preparing the lessons themselves was another challenge. The teachers entered unfamiliar territory, finding themselves serving as directors and script writers for their classes. "It might sound easy but, in reality, it means a lot of preparatory work," says Gulsara. "A minimum of five to six hours went into preparing the slides for every 20-minute video lesson. Normally, you can repeat yourself, and you can approach a student and explain things as needed, but such options are not possible here. We also had to make sure that our topics could be understood by all students. That put a lot of pressure and responsibility on our shoulders".

Speaking in front of the camera, with a green screen in the back and flooded by bright lights also took getting used to, she adds. "You are in the spotlight and you see other people in the studio that are looking at you and waiting for you, while the cameraman and sound specialists were directing me, telling me where to stand, where to look at, and how to speak. During this time, other teachers were waiting for their turn. Am I speaking too fast? Am I explaining the lessons too simply or is it too complicated? Is my voice smooth or trembling? All these questions run through you head at the same time!"

With big hearts and pride

All their efforts have paid off. On 8 April, the government launched the remote learning programmes throughout the country. Like Gulsara, in a short period of time, hundreds of schoolteachers learned how to use tools such as WhatsApp, Zoom and Google Classroom, assessing which applications were needed to reach students and help them continue their learning.

Gulsara sees the pros and the cons in this new way of teaching remotely. On one hand, she is unable to assess how students understand and follow her class, like she would usually do with the 20 to 30 students in her direct care. Moreover, the pace of learning is different for each student. On the other hand, remote learning has its own advantages as it teaches students to be more independent and search for information by using different tools and sources. "It teaches them to be more responsible", says Gulsara.

Key challenges encountered and lessons learnt during the implementation

- Ensuring accessibility of distance learning remains the key challenge. Figures on availability of TV sets, ICT devises and internet in the households across the country are scarce, however existing data suggests that at least 1 of every 10 children may not be able to attend remote lessons;
- Tracking students' participation in remote learning remains a challenging exercise, particularly
 for lessons delivered via TV. Currently the MOES and development partners are conducting an
 accessibility assessment to measure the coverage of remote learning and identify the reasons why
 children are not participating. The study will also feature regional disaggregation;
- Teachers were not fully prepared to transition from in-class to online teaching and during the first months of the response, significant efforts had to be put into building their capacity;
- Schools did not have sufficient funds to autonomously procure IPC supplies required to ensure minimum safety of school-workers, children and their families after school and pre-school reopening.
 The development partners contributed to this effort.

FOOD SECURITY AND LOGISTICS SECTOR

Lead agency: WFP & FAO





ADB, AKF, GIZ, EU, FAO, IFC, IFRC, IOM, IsDB, JICA, KOICA, Kyrgyzstan Red Crescent, Mercy Crops, Russian Federation, Switzerland, Turkey, UNDP, UNICEF, UNFPA, UN WOMEN, USAID, USDA, WB, WFP

National State Implementation Partners: Ministry of Labour and Social Development, Ministry of Education and Science, Ministry of Agriculture, Ministry of Emergencies, the State Environmental and Forestry Agency

Objective and the summary of the sector response

As a part of the COVID-19 crisis response, Food Security partners are continuing to support the Government on food security management and policy development including in food access and availability; social protection; support to strengthen the assessment of the socioeconomic situation; and the monitoring of food security in the country in order to plan appropriate activities. Sector partners are also continuing to advocate for the food security needs and priorities related to the COVID-19 response in the country.

The key objectives of the Sector Response Plan include:

- Support to the most vulnerable and poor populations who are living in extreme poverty with food assistance through national, international and bilateral actions, including where/if necessary, with market interventions;
- Support to populations living just above the poverty line, who due to the crisis, may easily fall back into poverty;
- Support to the Government of the Kyrgyz Republic and private sector in terms of supply chains ensuring market functionality and food availability;
- · Support to smallholders during the vegetation period, ensuring production and productivity; and
- Support for data collection, analysis of market prices, information on the socioeconomic situation
 to altogether better inform government interventions to respond to the slow onset of the crisis and
 its socioeconomic impacts.

Expected outcomes

- · Food security and nutrition for the most vulnerable that are improved and sustained;
- · Supply chains that are uninterrupted, stable and sustainable; and
- Agriculture productivity and production, especially for smallholders that are improved and sustained.

- The weekly/biweekly Food Price Monitoring Bulletins from 18 markets across the country and the
 analysis of the food security situation have been produced regularly to track food security trends,
 availability and the operability of food markets. This analysis provides a detailed overview of food
 access and availability that facilitates the Government's and partners' work within food security;
- The Rapid Household Food Security Assessment was conducted in May 2020 to provide a snapshot
 of households' exposure to shocks and stressors in view of the slow onset of the COVID-19
 emergency, as well as the effects of seasonal issues that affect food security;
- Technical assistance to the MLSD has been provided to improve the 1227.tunduk.kg portal. The
 portal has been designed to facilitate the application process for social assistance, including for
 food assistance from vulnerable groups of the population;
- Support has been provided in strengthening institutional capacities in price and market information systems and policy monitoring in response to the COVID-19 crisis and other shocks. The assessment

- survey of the "COVID-19 impact on smallholder farmers and rural households" has been conducted;
- Technical assistance has been provided to the Ministry of Agriculture in the development of the road map as well as the action plan for the new National Import Substitution Programme to ensure food security and for the country to be less dependent on foreign food imports;
- Support has been provided to 175,000 beneficiaries in supplying of 4,300 mt of food rations in exchange for participation in various community projects. The unified ration distributed was 150 KG of fortified wheat flour and 15 litres of vegetable oil per family;
- Additionally, in August 2020, 440 mt tons of wheat flour were delivered to 80,000 schoolchildren.
 All food distribution is being organized through the Ministry of Labour and Social Development, the Ministry of Education and Science, and local heads of sub-districts and villages. Personal protective equipment was ensured at all food-related distributions;
- In May and June, people living in 22 social inpatient institutions (SIIs) the elderly, people with
 disabilities (PwD) and orphans were assisted with emergency food assistance. A total of 270
 mt of fortified wheat flour and vegetable oil was distributed, with each resident of the institutions
 was provided with fortified wheat flour and vegetable oil per person, including PPE items. Food
 distributions were followed with online training and consultations of COVID-19 preventive measures
 for key staff and administration of these institutions;
- A massive information campaign called "School Meals at Home" was launched to promote healthy nutrition and lifestyles for the schoolchildren and their parents. As a part of the campaign, parents received social media-friendly material containing nutritious recipes, menus and other resources on child nutrition and health. Every week throughout the first quarter of the school year, parents received awareness-raising and behaviour-changing materials on the topics of child health and nutrition on WFP's social media platforms such as YouTube, Instagram and Facebook;
- Support was provided to vulnerable farmers and households through the provision of seeds for spring and winter sowing, agricultural inputs (seedlings, fertilizers, fuels) and IT equipment. Best practices in the areas of drip irrigation systems, mini-greenhouses, toolkits for family poultry farms, and technologies (soil protection, development of seed production and resource conservation) were introduced;
- Training sessions, assessments and consultations on agricultural production to respond to COVID-19
 impacts and climate shocks have been during the growing season for selected self-help groups
 with 300 beneficiaries, including the support and introduction of disaster risk reduction and climate
 change adaptation agricultural practices and preparedness, and emergency response to locust
 infestations;
- Essential assistance was provided to people living in rural areas 100 mt of seeds and 218 mt of fertilizers, gasoline and wheat flour to farmers who were the most affected by the quarantine measures and harsh weather conditions. Ongoing monitoring of fish farmers in Issyk-Kul province showed that a record level of 16.5 million harvested carp eggs at carp farms was achieved, something that has not been achieved since independence. Rapid assessment of supply chain gaps and challenges was conducted. This study helped to understand what the main challenges are are faced by milling companies in relation to the provision of wheat flour to the people of the Kyrgyz Republic and elaborate on the action plan to address these problems.





4,600 mt



100 mt

of seeds distributed

to farmers





218 mt

of fertilizers, gasoline and wheat flour distributed to farmers

of food vulnerable people assisted assistance provided

In recent years, residents of remote areas in south Kyrgyzstan have been facing a host of challenges and difficulties, including two interrelated major issues - migration and weather extremes. Through cooperation and with knowledge from FAO, and emergency nutrition from WFP they are managing to get back on track despite devastating mudslides.

Despite the hot and dry climate, Kyrgyzstan's Batken region is famous for its delicious vegetables, rice, apricots, and peaches, and for the hardworking people living there. Most of them work in agriculture for a living, fighting the vagaries of nature: sudden frosts, heavy rains, and destructive mudslides. One of them is Karamat Omurbayeva, who lives with her family in a small village called Aikol in the Batken region, that was caught off guard by a mudslide in the spring. The heavy rainfall washed away everything she planted in the garden, along with a small greenhouse and her hope for a good harvest. The heavy rains went on for several days and the mudslide took away crops and destroyed houses and buildings in the whole region, threatening the food security and survival of hundreds of families.

"I was lost and didn't know if I would find a way out. My husband remained in Russia in migration, because of the closure of the borders, so his arrival back home was impossible, just as his ability to earn money in a foreign country," remembers Karamat Omurbayeva. "We had only the small social benefit that my mother-in-law revives from the government, but unfortunately that amount is too small to feed three children and two adults."

Neighbours from the village tried to help Karamat's family, too, by giving flour, butter, and other foods. During the COVID-19 crises, 1,140 families, including hers, have been supported by FAO with vegetable seeds and professional advice from an agronomist, and enriched vegetable oil and fortified flour from the WFP. Moreover, people in Aikol were forming groups of mutual assistance to participate in agricultural initiatives and projects and grow their crops together, and improve them.

Karamat has been engaged in agriculture her entire lifetime, and yet, the consultations were beneficial even for her.

"The agronomist taught us simple things that we did not know and had not used for so many years of working in gardens and orchards," told Kamarat. "If we used to throw leaves from trees, now we have learned to collect them and make compost - natural fertilizers for our soil. And, together with my aunt Alima, now we grow tomatoes, cucumbers, cabbage, beets, and some greens in our two gardens. Food assistance that we received from WFP was a first necessity for us in this emergency situation."

Key challenges encountered and lessons learnt during the implementation

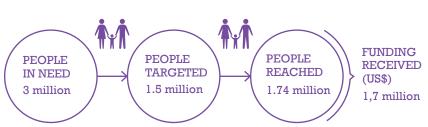
- The political instability following the parliamentary elections in Kyrgyzstan has further aggravated already fragile situation caused by the COVID-19 crisis;
- The political unrest has caused uncertainty in the country's investment climate. The Kyrgyz som has lost 6 percent of its value and following the elections, has led to an overall depreciation of 19 percent since the beginning of the year. By the end of 2020, a 10 percent decline in GDP is expected. Food prices have increased on average by 11 percent since the beginning of the year, with some staples as high as 37 percent, such as for wheat;
- In the context of growing food prices and increasing vulnerability, food security remains a serious concern.

PROTECTION SECTOR

Lead agency: OHCHR

GBV sub-sector lead: UNFPA

Child Protection sub-sector lead: UNICEF





Sector Members and Partners:



Association of Crisis Centers, CSO "DIA", Help Age International, Kyrgyzstan Red Crescent, ICRC, IOM, OHCHR, UK Government, UNCCT, UNDP, UNESCO, UNFPA, UNHCR, UNICEF, UNODC, USAID

State Implementation Partners: Ministry of Health of the Kyrgyz Republic, Ministry of Labor and Social Development of the Kyrgyz Republic

Objective and the summary of the sector response

The objective of the Sector Response Plan is to ensure that during the state of emergency the Government's response is proportioned and adopted public order measures are carried out in accordance with human rights standards, constitutional rights, and domestic legal framework without abuse of power. Child Protection and GBV are two thematic sub-sectors. In addition, the interventions have been focusing on addressing stigma/discrimination against different groups of population, and re-orienting the government towards human rights

obligations and standards during development and adoption of decrees, SOPs, ordinance, by-laws, etc. The target vulnerable groups are children, poor households, persons with disability, elderly, victims of domestic violence, PLHIV, youth, migrants (internal and external), refugees, asylum seekers and stateless person, vulnerable women, persons in residential and close facilities, persons serving sentences. Protection cluster established several crucial mechanisms including services as psychosocial support, monitoring of HR, temporary space spaces for the GBV survivors and children.

Expected outcomes

- At least 1,000,000 people reached through communication, advocacy and prevention measures on non-discrimination, child protection, GBV as well as raise awareness on duties of citizens under the state of emergency;
- Around 50,000 persons with disabilities have access to cash and non-cash assistance during the crisis;
- Almost 30,000 children benefiting from the helpline, psychosocial support and children in residential institutions that are provided with additional support to cope with the situation;
- Around 30,000 women and girls have access to prevention and response information and services on GBV;
- About 3,000 people (almost 100 violating curfews every day) are treated in line with human rights norms and standards;
- 227 HIV+ received food packages, ART and counselling;
- 582 refugees and asylum seekers have access to obtain and renew appropriate documents; 582 refugees and asylum seekers are included in the prevention and response programs to COVID-19 as a category of vulnerable persons;
- Other individuals (including persons in residential and close facilities) and communities whose rights have been affected or violated have access to legal advice and protection.

- Support was provided to state working groups in the development and revision of legislation and policies, including Gender Equality Strategy, Constitutional Law on the State of Emergency, Criminal Code, the Code of Misdemeanors, Code of Violations, and Criminal Procedure Code;
- Experts and technical support was provided to the National Human Rights Institutions (Ombudsman's
 Office and the National Center for Torture Prevention) for effective monitoring of the human rights
 situation in the context of the state of emergency, with a focus on closed and semi-closed institutions
 and protection of especially vulnerable groups;
- Government partners and civil society organizations were supported to conduct research, analysis
 and surveys to identify the impact of government actions on human rights and freedom in the
 pandemic, focusing on vulnerable groups such as children, women, people with disabilities, people
 with chronic diseases, migrants, and others;
- Human rights-based and gender-sensitive SOP/guidelines (available in Russian and Kyrgyz) have been developed ensuring that law enforcement agencies' steps/actions in emergencies are compliant

- with human rights standards, as well as legitimate and proportionate;
- Gender Equality Strategy is being developed in close cooperation of national partners and development partners under the leadership of MLSD and an inter-ministerial working group with integration of Oxford Scenario Planning Approach and Adaptive Leadership concepts into the design process. Nationwide holistic review of legislative and policy frameworks on VAWG and women's rights to inform law and policymaking is being endorsed. The GES will include the comprehensive approach to prevent, respond and address gender-based and domestic violence in humanitarian and development settings;
- Access to qualified assistance has been provided through online hotlines: 111 for children; 112 for qualified legal assistance; 1,227 - on social issues, humanitarian support and response to GBV;
- Strong Government commitment has been raised through establishment of the Interagency working
 group on countering GBV and domestic violence consisting of 25 members from Ministry of Labor
 and Social Development, Ministry of Interior, Ministry of Emergency, Ministry of Health, UNFPA, UN
 WOMEN, OSCE and CSOs. Parliament has established a Council on Women's rights and countering
 gender-based violence to be chaired by a Vice-speaker;
- The draft Regulation on multi-sectoral response mechanism to SGBV between the service providers/ state agencies was developed for the review of the Interagency Working Group under the leadership of the MLSD and Association of the Crisis Centers. The draft of Unified instruction on MSR mechanism to GBV cases in emergency has been submitted to the members of the Interagency working group under the Ministry of Labor and social development and it is now under review;
- Crisis centers have been supported to provide safe spaces and social/psychosocial support to GVB survivors in the context of emergency (COVID-19);
- Grants to local CSOs were provided to respond to the increased need to support victims of domestic violence. The grants program aims to secure timely emergency response to domestic violence in all seven oblasts of the country, improve access to information and conduct awareness campaigns on GBV/ domestic violence prevention, and to support relevant legislative initiatives. This support included monetary allowances, psychological support, shelter, and legal assistance in filing complaints and pursuing legal actions. The overall number of victims who have received support and assistance from constitutes 708 individual women and 121 families (women and children);
- IGG members conducted a series of online community outreach activities. Participants of the online community meetings included representatives of LSG, teachers, social workers and other community members. In total, 47 online community outreach activities were conducted with 652 participants (women 542, men 110), among them youth representatives 172 (132 women, 40 men);
- Hackathon with youth was organized to seek for the provision of innovative solutions to address
 the COVID-19 Emergency and to address GBC and VAC. The three selected projects will be further
 supported for scaling up;
- A mobile application "My community policing officer" has been supported with a new function for improving response to gender-based violence and creating an interactive communication system between police and citizens;
- Emergency GBV Mobile Groups established in Bishkek and will be replicated in Osh and suburbs. Each
 mobile group will consist of representatives of social development department, district department
 of internal affairs, psychologist/social workers of crisis centers;

- Ministry of Labor and Social Development of KR was supported to adapt referral pathways to COVID-19 response with the increased use of hotlines, tele operators. The existing 1,227 hotline will be transformed into regular information support (117 line) to provide information on social issues, humanitarian support and respond to GBV;
- Aiming to assess the target and the need of children living in residential institutions a census
 has been conducted. The assessment of situation of children returned from the residential care
 institutions to their families has been conducted by the Ministry of Labour and Social Development
 and sector partners;
- The smart fairytale website to support parents-children interactions has been launched and can be accessed through phone via www.smartjomok.kg Available stories help parents to builds closer bonds with their children through reading these fairy tales and discussing them, as such developing skills and competencies of self-awareness, expression communication, empathy etc. Another one is labyrinth fairy-tale which also help developing competencies of critical thinking, innovation etc. A the third one is for kids to read on their own and learn such skills of courage, commitment, kindness;
- New program of psychosocial support to children with disabilities countrywide has been launch. This
 on-line support will be provided via psychologists and special pedagogues of 25 Day Care Centers
 that are now closed due to COVID; A new project aiming to provide psychosocial support to children
 left behind by migration has started in July reaching out 84 children and 31 families;
- Extensive information campaigns were conducted, including through social media, to increase
 access to information for the population and especially vulnerable groups on issues related to the
 requirements to protect oneself from infection, SGBV and DV, legal and psychosocial consultations,
 social and medical assistance, etc.



women and children received a safe space at crisis centers



dignity-hygiene kits were provided to observation points and vulnerable people (such as elderly people, persons with disabilities, migrants)



children with disabilities received psycho-social support



social pedagogues increased capacity in addressing children's concerns, building knowledge of children's rights and promotion of Helpline 111



children and their families were informed about 111 hotlines



representatives (including 173 women) of administrations and departments of family and child support from Bishkek, Chuy and Osh oblasts increased capacity on gender equality and GBV prevention.

Aravan is a small town in Kyrgyzstan's south, near the border with Uzbekistan. On its outskirts, runs the difficult life of two girls, Tolgonai, 14, and Aisuluu, 17.

Over the last years, the two girls struggled to keep up a sort of normal life, managing to have the ends meet each month only through the financial support sent by their mother and older brother who had migrated to Russia. However, the abrupt loss of remittances, owing to the COVID 19 emergency, further escalated the difficult relations with their father suffering from chronic alcoholism amid violence and abuses. Life became more anguish than ever, and they could only continue to keep on going through occasional charity and food assistance.

This was the moment when Akchach, one of the psychologists from the "Center for the Development and Protection of Vulnerable Populations" supported by UNICEF in the framework of the EU project "Protecting children left behind by migration", came into their lives offering a very much needed support and concrete help.

At first the support was based on remote over the phone psychological assistance in order to comfort them and rebuild – at least partially—their self-confidence. The following step was to provide them with a safe space in the neighboring "Crisis Center", where they could run a life without violence and continue their studies. In parallel, the legal procedure for assigning a legal guardian within the extended family was initiated with the local court through the Ministry of Labor and Social Department.

According to 2019 estimates, in Kyrgyzstan there are over 250,000 children left behind by migrating parents with 120,000 of them separated from both parents. The current COVID-19 pandemic, unfortunately, has already proven to make their lives even harder and expose them to higher risks of violence. For this reason, UNICEF is stepping up its support to make sure that each child will have an accountable and responsible adult ready to

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protect their best interest. At the same time, a rapid assessment to assess the specific challenges emerging from the COVID-19 crisis has been launched in cooperation with IOM and shall be the basis for future targeted interventions.

When asked about their hopes and fears, Tolgonai and Aisuluu firmly agree on their decision not to come back to their father to avoid further violence and abuse. At the same time, they express their worries in being negatively judged by their relatives, a hard choice they will need to take with the support of specialized psychologists as well as social workers. While the project has reached so far over 1,200 children, continuous efforts will be invested in devising structural solutions.

Overall, while Tolgonai and Aisuluu's present looks so uncertain, they are at least comforted of the support they are receiving and look at their future with more optimism and hope.

Karamat has been engaged in agriculture her entire lifetime, and yet, the consultations were beneficial even for her.

"The agronomist taught us simple things that we did not know and had not used for so many years of working in gardens and orchards," told Kamarat. "If we used to throw leaves from trees, now we have learned to collect them and make compost – natural fertilizers for our soil. And, together with my aunt Alima, now we grow tomatoes, cucumbers, cabbage, beets, and some greens in our two gardens. Food assistance that we received from WFP was a first necessity for us in this emergency situation."

Key challenges encountered and lessons learnt during the implementation

- No reliable data on GBV [most cases of GBV remained unreported due to the pre-existing lack of available, safe, ethical and quality response services, restricted movement, fears of stigmatization, reprisal, and lack of access to appropriate information on seeking help];
- Lack of coordination for EVAWG across key sectors (health, social services, law, police, justice, and humanitarian settings), and significant gap in comprehensive and regular provision of services to SGBV survivors nation-wide;
- State funded medical, psychological, social, legal and emergency services remain largely unavailable for SGBV survivors; especially in rural areas [rural areas lack access to information];
- Non-governmental crisis centres, which provide limited range of service, remain largely underfunded [only five were provided state funding in 2018];
- Lack of procedure and modality for remote/online/digital service provision and work of state personnel;
- Lack of a systematic approach to administering the database of people in need of humanitarian assistance, which needs to include undocumented and unregistered persons, as they are among the most vulnerable groups;
- · Unavailability of a sufficient pool of quality psychosocial support;
- Difficulties in reaching out Government counterparts owing to the political unrest;
- The current crisis has demonstrated the need of coordinating with other pillars in a timely fashion
 in order to avoid overlapping, particularly in the WASH Sector, at the same time the crisis has
 demonstrated more than ever the need of digitizing records and case management of children so to

allow proper identification and support in a timely manner;

- The immediate aftermath of the crisis has shown the tendency of creating an excessive number
 of uncoordinated hot lines for children, women, legal assistance etc. For the sake of outreach, it is
 important to provide a more streamlined answer with multi-service phone lines rather than creating
 additional ones;
- The government must ensure human rights despite the state of emergency by ensuring the proper response by law enforcement agencies, courts and social services. It is important to ensure that that law enforcement agencies involved in response act in full compliance with laws and human rights principles to prevent harassment, abuse of authority or extortion;
- Access to information must be ensured for all segments of the population, including linguistic minorities. Information should be accessible to persons with disabilities;
- Lack of a proper access to food and access to humanitarian assistance for persons who do not have
 valid identification documents. Persons without registration at their place of residence, are excluded
 from the lists of those in need of State humanitarian support. Stateless persons and internal migrants
 living outside the places of registration are in a particularly vulnerable situation.

When Ainura*, 30, arrived at the medical centre in Karakol she was so badly bruised that the doctor asked how she could endure the pain. It wasn't the first time that her husband had beaten her and kicked her out of the house. But, like many abusers, he had grown increasingly violent under lockdown. Before the COVID-19 crisis, more than one in four Kyrgyz women experienced physical and/or sexual intimate partner violence in her lifetime. During lockdown and a strict curfew caused by pandemic many women foud themselves trapped at home with their abuser. In Bishkek, the rate of violence against women and girls has increased by more 60 per cent compared to the same period the previous year. "Inequality between men and women in Kyrgyzstan during the Coronavirus pandemic has increased," says UNFPA representative Nazira Satyvaldyeva. "We are continuously searching for new ways to help women subjected to violence and to ensure that they are not abandoned during the pandemic."

After the attack, Ainura and her eldest son were able to seek refuge at a Spotlight Initiative-supported crisis centre near their home in the centre of Karakol. There, they could access accommodation, food, psychosocial support and legal assistance. The staff were also able to reunite Ainura with her youngest son, whom Ainura's husband had taken to his parents' house. When Ainura had tried to leave her husband before – even filing for divorce – she'd been blackmailed into returning by threats to prevent her from seeing her youngest son.

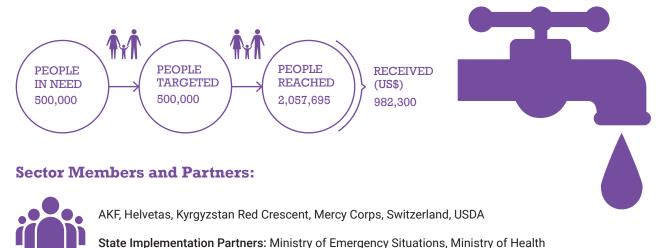
"I am not afraid of physical pain, but I am afraid of being separated from my children," Ainura explains.

Ainura and her children had a safe place to go, but many Kyrgyz women simply don't have this option. The Kyrgyz Republic has approximately 14 crisis centres and two shelters to cater to a population of more than six million people, according to an OHCHR report – nowhere near enough to meet demand. To make matters worse, the few resources that are available have been ordered to close their doors to newcomers to stop the spread of COVID-19.

"I feel safe for the first time in a long time" - Ainura*, 30

WATER, SANITATION AND HYGIENE (WASH) SECTOR

Lead agency: UNICEF



Objective and the summary of the sector response

The main objective of the WASH Sector Response Plan is to contain and manage the spread of the COVID-19 disease and decrease morbidity and mortality. It mainly focuses on provision of WASH and infection prevention supplies to the government ministries such as MES and MoH as well as to local municipalities and institutions on WASH interventions in public, schools and healthcare facilities at country and regional levels as an immediate response measure.

Expected outcomes

- The supply of disinfectants to the Ministry of Emergency Situations for disinfection of public institutions and spaces including schools, institutional care facilities, municipal offices and observation points;
- Training of Ministry of Emergency Situation officials and Local Government officials on disinfection
 of public spaces in order to combat the spread of infection at the municipal level;
- Reach 500,000 people in high risk areas with high impact interventions and messaging on water, hygiene and sanitation;
- Support affected municipalities on standards for waste management during COVID-19;
- Targeted household reached with WASH kits and hygiene messages;
- The supply of logistics to the Ministry of Emergency Situations for conduction of disinfections activities.

- Ministry of Emergency Situation (MES) was provided with water filtering and purification items such as 28 units of Water drinking emergency filter kits, 36,000 pack of water purification tabs, 680 units of protective suits, 2,000 pairs of rubber boots, 3,200 units of water container, 2,000 pieces of soap, 2,350 kgs of chlorine-based disinfectant reaching 1,380,000 beneficiaries in total;
- 5,800 pieces of soaps were donated to the Osh, Jalalabad and Batken oblasts FMCs to contain the spread of the virus among the health workers and visitors reaching 174,000 beneficiaries;
- Three-month WASH supplies were donated to tree maternity hospitals in Bishkek and Osh cities in response to their appeal reaching 3,250 beneficiaries;
- 200 units of Baby Hygiene kits with water heaters were distributed in 3 Maternity hospitals of Bishkek
 and Osh cities for newborns children and their mothers to be able to cope with faced challenges of
 personal hygiene while at hospital reaching 400 beneficiaries including 5-showers and water-heaters
 to the same hospitals with plans to reaching 30,000 beneficiaries;
- 30 kindergarten in Osh and Naryn provided with WASH kits with total amount of reaching 4,000 beneficiaries;
- Improvement of the sanitation and students' hygiene infrastructure at 356 public schools across the
 country including installations of handwashing stations, water heaters, renovations and construction
 of school latrines, of min two-month supply of hand soaps, disposable towels, and detergents to the
 same schools provided;
- 1,000 units of family hygiene kits with basic hygiene items were distributed to returned migrant families from Osh, Jalal-Abad, Batken, Naryn and Talas oblasts reaching 5,000 beneficiaries, 280 units of family hygiene kits were distributed to most disadvantaged communities of Karasu District of Osh oblast reaching 3,400 beneficiaries, 3,340 vulnerable families in Jalal-Abad, Osh, Naryn and Batken oblasts provided with personal sanitation and WASH kits reaching 16,700 beneficiaries, hygiene and food assistance to 629 vulnerable families in 15 municipalities of Jalalabad and Issyk-Kul oblasts were provided reaching 3,145 beneficiaries;
- Drinking water systems in the villages of Chet-Kyzyl and Bai-Karabak (Kara-Bak AO, Batken Oblast) and latrine in maternity department in Beshkent AO (Batken Oblast) were rehabilitated providing an access to clear drinking water to 8,400 beneficiaries;
- 26 service providers of drinking water supply and waste management from 24 municipalities received
 the financial support to continue their operation and provision of service to population. All service
 providers were equipped with PPE;
- Additional procurement of IPC tools to 44 hospitals of Osh, Jalalabad, Batken and Issyk-Kul oblasts is underway to reach 300,000 beneficiaries;
- Two comprehensive assessments are at the stage of finalization to analyze the conditions of the WASH facilities in 1,212 preschool, 1,766 high school institutions and 163 Health Care Facilities (HCF). The results of the assessments will inform better budget planning and resources mobilization to address WASH needs;
- Intensive COVID-prevention public information campaigns delivered via 3 TV channels, printed information materials (posters & leaflets) guiding on handwashing technique and personal hygiene were distributed via communities reaching 150,000 beneficiaries. 14 videos in three languages

(Kyrgyz, Russian and Uzbek) have been regularly aired in TV. In overall, 3,000,000 people were reached through television with awareness-raising messages. 30 municipalities in Jalalabad and Issyk-Kul have been reached with awareness raising on COVID-19 prevention and importance of regular due payment for drinking water supply and waste management among the population;

 In December 2020 the sector partners will be launching the education campaign with students and teachers in 40 schools of Osh, Naryn and Chui oblasts on the design and implementation of lowcost solutions to address WASH-related challenges in their learning environment and plans to reach 10,000 beneficiaries.



197,645

vulnerable people reached with hygiene materials



396

schools' WASH facilities rehabilitated



44

hospitals reached with IPC tools



2,057,695

people reached in total vs 500,000 planned

Support to migrant families in times of pandemic

According to the State Migration Service of the Kyrgyz Republic, the number of Kyrgyz labour migrants abroad amounts to more than 710,000 citizens. The remittances sent by these migrants play a very significant role in advancing the country's economy but the social consequences of migration are highly negative with more than 99,000 left behind by both parents in unofficial care of extended family members and acquaintances.

The situation has been further worsened by the outbreak of COVID-19 with thousands of Kyrgyz labour migrants losing their jobs and facing difficulties in returning to Kyrgyzstan. The World Bank has already reported a 30% decrease in remittances, and this in turn is worsening well-being of families.

According to the rapid needs' assessment conducted by UNICEF and IOM in Kyrgyzstan, more than 60% of families affected by migration have experienced significant decrease in the remittances, 30% have been facing psychological pressures and more than 80% do not receive any social support payments.

Islombek Mamajanov, 34, a resident of Jany Nookat village in Osh region immediately felt the consequences of the pandemic. When the pandemic started, he lost his job in Russia, where he worked since November 2019, and had to return to Kyrgyzstan. The savings he made in Russia were enough to sustain decent living for several months for his family, consisting of his mother with disability, his wife, and four children. Islombek's family was among the 1,000 familied who received help during the peak of the pandemic. Each family were provided with the hygiene kits to help them safeguard their health during the lockdown.

When the kit containing shampoo, toothpaste, soap, washing powder and other hygiene products was brought to his family by UNICEF, Islombek shared his gratitude and expressed a hope for the pandemic to be over soon so he can return to Russia and support his family.

Key challenges encountered and lessons learnt during the implementation

- Working with formal and informal community-based organizations (CBO) has proven to be an
 effective way to reach local communities with key messages on Covid-19 in local language. Those
 CBO are already well networked with their communities using different communication/social media
 platform (WhatsApp, etc.). Therefore, there was no need to create alternative media platforms;
- Too centralized (Shtab) approach of response to emergency led by the Government proved its low efficiency as id almost failed to reach local municipalities and communities on the ground;
- While providing immediate WASH support to communities, it would be also important to work with local government authorities and community-based organizations and build their capacity to better prepare for the next crisis;
- The spread of COVID-19 in the regions and high infection rate among the staff of Ayil Okmotus
 caused delays in transferring of subsidies to service providers, and the running of information
 campaigns by municipalities for the citizens;
- Political crisis in October lead to increasing tensions between certain groups of citizens and local authorities (council deputies and heads / employees of AOs) in several municipalities. This delayed support to service providers and WASH related communication campaign with the citizens;
- Due to political situation, six service providers in municipalities experienced an even sharper decrease in tariff collection but managed to continue to provide services (fully owing to the COVID-19 prevention support provided);
- Per instruction of the Ministry of Finance the regional offices of the Treasury have temporarily suspended all transactions except the so-called protected budget items (salaries and social fund contributions). This caused another delay in transferring the support to key service providers;
- The elevated epidemiological situation and unstable political situation in the country led to interruptions in construction work at the facilities and delayed delivery of supplies and materials to the targeted areas and raised the need to work at the very local level as much as possible.

Women frontline workers during COVID-19 pandemic

Meerim Toktorova, 36, employee of Municipal Enterprise on Waste Management "Ak-Suu Tazalyk- Techservice MTS" in Issyk-Kul, continued to collect waste from all the villages in their municipality during the quarantine.

"During the pandemic the already hard work got even harder. Since all citizens were on the lockdown due to quarantine measures, we noticed an increase in the amount of the household waste. We had to stay extra hours to collect all the waste from villages, local hospitals and other municipal institutions," she recalls.

Meerim says she and many of her colleagues worked for three months without pay because people were affected by the crisis economically and could not pay for the waste removal service. "And we were not able to get humanitarian aid because officially we had our jobs," says Meerim. Nevertheless, she continued her duties confident that their efforts would help to stop the spread of the virus.

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The assessment of the situation revealed that the service providers struggled to survive due to a sudden loss of regular financing through the fee payments by the service users. As a COVID crisis response and a preparation for the very likely 2nd wave of the pandemic, the SDC PSI project (implemented by HELVETAS and DPI) facilitated small-scale economic recovery measures for the service providers since they together with local authorities were at the frontlines providing their continuous support to the population. Toktorova Meerim was supported directly by provision of the personal protective equipment to continue perform her duties as well as raise awareness citizens in the communities on importance of regular payments and safe hygiene practices. Indirectly, her employer the municipal enterprise "Techservise MTS" was supported financially to continue their operation during the critical months of the summer and financially support the own employees.

Overall, around 5,000 \$ was allocated to the municipality and the service provider "Ak Suu Techservis MTS" for regular operating, purchase of personal protective equipment for the employees and information dissemination and consultations on safe hygiene practices and local communal services. As a result, 1,200 households with 4,488 citizens of Teplekluchenka municipality in Ak Suu district have been provided with uninterrupted waste removal and disinfection services during the COVID-19 pandemic crisis.

EARLY RECOVERY SECTOR

Lead agency: UNDP and ACTED





Sector Members and Partners:



ACTED, ADB, EU, FAO, Germany, Helvetas, IOM, Japan, KOICA, Kyrgyzstan Red Crescent, Palladium, UNDP, Switzerland, UNESCO, UNICEF, USAID, WFP

State Implementation Partners: Ministry of Labour and Social Development, Ministry of Economy, The Central Election Commission of the Kyrgyz Republic, Ministry of Foreign Affairs, State Registration Service, Ministry of Emergency Situations

Objective and the summary of the sector response

Early Recovery Sector Response Plan aims to generate self-sustaining, nationally owned resilient recovery to shocks by catalyzing sustainable development opportunities. Basic services, economic activities, livelihoods,

and governance systems have been disrupted by the current COVID-19 crisis, placing stress on security, the rule of law, social cohesion, and the environment. Informed by needs assessments, which includes a socioeconomic analysis and sex and gender-disaggregated data, the early recovery efforts aim to safeguard the progress that has been made towards the achievement of its sustainable development goals (SDGs) and to inject early efforts to mitigate vulnerable people falling back into poverty due to loss of livelihood. The response focused on four areas: 1. Access to basic services; 2. Restoration of economic activities and livelihoods; 3. Security, rule of law, and social cohesion; and 4. Supporting migrants and displaced people impacted by the crisis.

Expected outcomes

- · Improved access to services;
- · Restored economic activities and livelihoods;
- Improved security, Rule of law and social cohesion;
- · Safe and stable return of migrants, Improved resilience of migrants and displaced population.

- Several key assessments were conducted to guide the Government's decision-making process through suggested policy options. These included:
 - COVID-19 in the Kyrgyz Republic: Socioeconomic and Vulnerability Impact Assessment and Policy Response;
 - Assessment in the textile sector (Current situation in Textile and clothing sector);
 - Assessment in the agriculture and tourism sectors (Tourism in Kyrgyzstan: Early Recovery Summer 2020);
 - Youth needs assessment (Report on the results of a survey on the impact of COVID-19 on youth in Kyrgyzstan);
 - Migrant and remittances (Influence of the COVID-19 Pandemic on the Position of Migrants and Remittances in Central Asia);
 - Rapid Household food security and vulnerability study (Household food security & exposure to shocks in view of the COVID-19 crisis);
 - A rapid needs assessment on MSME (Micro, Small & Medium Enterprises) (Early Impact assessment of the COVID-19 pandemic on MSMES in Kyrgyzstan);
- Finance development assessment, market opportunity assessment, investing opportunities for the development of the green economy are being conducted in line with COVID-19 response.
 Consultations between the sector agencies and government are continuing and sector mapping is regularly updated;
- MSMEs were supported with free legal aid through 10 established free legal aid centers in the Kyrgyz Republic;
- · Financial support to service providers for solid waste management in in Bishkek and Osh;
- 32 hospitals and 10 mobile health units were supported with capacity building activities on health waste management;

- Central Election Commission (CEC) and 2,500 polling stations were supported with equipment, PPEs and trainings for the safe election;
- 1,000 households were supported with humanitarian Cash Transfers;
- Partnership with the State ICT Agency and High Technology Park lead to innovation competition
 to address the negative effect of COVID-19. A total of 71 ideas were submitted and 2 ideas will be
 supported (1. Involving hearing-impaired children to digital learning systems 2. Telemedicine ondemand service for online-appointments with experienced doctor);
- Policy briefs on the Informal sector, social protection, food security, and access to basic services
 were provided to decision-makers with data and strategic recommendations to stimulate discussions
 on the country level to strengthen early recovery efforts;
- Online mechanisms for job fairs, business forums, and other networking events have been strengthened to establish business links and provide job opportunities for young men and women leaders considering the COVID-19 pandemic;
- Grants for local youth development plans in 10 target communities have been provided with an aim
 to increasing youth incomes, agribusiness, social cohesion and mobilization, response measures
 against the spread of COVID-19;
- Local communities in the areas of Batken region were supported for sustainable agriculture, further
 development of existing small and medium enterprises, promotion of «innovative services and
 technologies» contribute to job creation, the socio-economic integration of the poorest groups of
 the population, and improvement of their living standards;
- Advance Passenger Information Systems (APIS) to monitor passengers arriving to Kyrgyzstan has been implemented with State National Security Committee and the data is processed and stored at the Anti-Terrorist Center of the State Committee for National Security;
- 25,000 masks and 3 sets of video conference tools were provided to the Ministry of The Emergency Situation to COVID-19 response;
- 150 youth supported by 9 trainings to improve their life skills to overcome COVID-19 crisis (Upgrade Yourself Course);
- Kyrgyz youth initiative group financially supported to develop a project to ensure people with visual impairment to access to web resources;
- Early Warning and Early Response system has been further strengthened based on existing
 monitoring practices built in the state and rural institutions including existing monitoring and public
 reception centers at the most COVID-19 affected border areas as well as multi-ethnic urban and
 peri-urban areas;
- 150 small grants have been disbursed targeting 1,200 people living at the most COVID-19 affected areas, border areas as well as multi-ethnic urban and peri-urban areas aimed to building social cohesion.

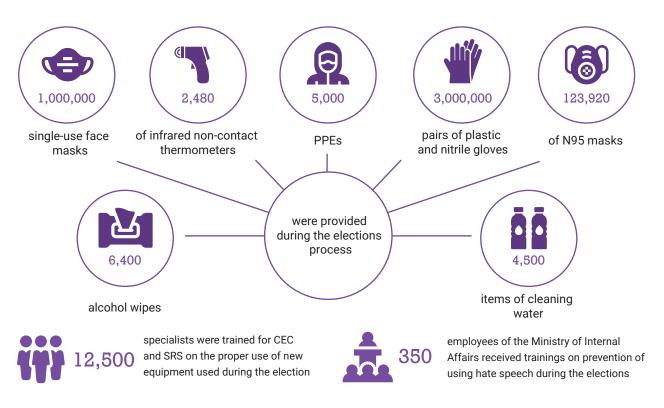
Emergency cash transferred to 1,000



32 designated hospitals and



10 mobile units are being supported for health waste management



964

people, including 588 women, and 23 persons with disabilities received on-line free legal consultations during May-October 2020 in Kyrgyz and Russian languages on civil rights, family law, labour, housing, social protection, criminal and administrative law, domestic violence, tax law, emergency and/or state of emergency issues and others.

Arman Alibayev, Director of Prime Clinic observed the unprecedented workload of the doctors during the peak time of COVID-19 as the number of patients increased. Furthermore, the capacity of the clinic has been sharply decreased because most doctors were infected with COVID-19 as well. Despite the clinic has been running the website providing online medical services to some extent, the situation became worse as there were very few specialists to help people.

As UNDP announced a call for innovation to overcome challenges imposed by a coronavirus, he decided to take this opportunity and enable doctors to do their work in a safer way. As he planned, the new mobile application PrimeDoc would enable doctors to provide distant consultations unless direct contact is necessary:

"During the pandemic and quarantine, we really need to reduce the risk of transmission. Thanks to telemedicine, patients will receive high-quality medical advice. Also, patients feel more comfortable being in a familiar, home environment. During the pandemic, the number of patients rapidly increased, and therefore, it became necessary to use all medical resources. We can use our resources more efficiently. At the same time, thanks to telemedicine, it is possible to protect both yourselves and others", Arman Alibayev, Director of Prime Clinic.

Another digital solution targeted at empowerment of deaf children and children with hearing impairment as in Kyrgyzstan, there are two specialized pre-school institutions and two specialized schools for children with hearing disabilities. Notable that old textbooks and materials published in the 90s still in use in these entities leaving a big gap of during the online teaching mode.

"Currently, specialists do not have a lot of experience in using new information technologies to create digital materials, but they have a lot of experience working with children who have hearing disorders and have already developed their proven teaching methods over the years (development of hearing, speech production, taking into account the psychological characteristics of children and the possibility of their perception). We plan to develop digital flashcards accompanied by a dactyl on three priority topics: my family, the world around me, and basic arithmetic. Flashcards will be designed as mobile apps and will be published in the play market", says Rena Sultangazieva, Director of NGO "Technoland" which works with people with disabilities.

As part of her initiative, several mobile applications were developed to teach the children on alphabet and topics such as "My Family", "Arithmetic" and "My World". It also covers several mini-games that allow learning new words in an easy and affordable way. All applications have been developed under the guidance of preschool and school specialists to teach children with hearing impairment.

These initiatives were supported by UNDP Innovation Challenge launched to minimize the consequences of COVID-19 in the country through digital solutions. The overall goal of the initiative was to address the social and economic consequences of the coronavirus pandemic by supporting private sector.

Key challenges encountered and lessons learnt during the implementation

- Self-employment and micro-enterprises are most negatively impacted by the economic fall-out from the pandemic. These sectors are the garment or textile sector, tourism, hotels and restaurants, trade and consumer services, and construction, which together account for approximately 40% of GDP and 42% of all employment;
- The challenge in the recovery stage will be to combine social protection support (cash transfers) to
 individuals affected, with support in job search, re-skilling, access to public work programmes, and
 other active labour market programmes (ALMPs), in line with information on reprofiling of demand
 derived from monitoring different market segments;
- Elections triggered expressions of discontent and dissatisfaction with the current social-economic situation and management of the Covid19 pandemic and deepened the polarization of the society;
- Young innovators responded to the pandemic through projects with social impact. The governments
 and the private sector are partnering with young people to launch initiatives that leverage young
 people's efforts to support their communities. Through voluntary initiatives, many young people have
 also supported vulnerable members of their community, for example in the distribution of groceries
 and medicines;
- Quarantine measures in 2020 have shown a reduction in carbon dioxide emissions from radical individual actions. State borders were closed, and people were forced to reduce their transport movements and change their consumption patterns;
- During the pandemic, many types of additional medical and hazardous wastes were generated, including infected masks, gloves, and other personal protective equipment (PPEs). There is still

- a lack of adequate waste management systems in small cities and villages. Need to consider the importance of safe handling, transportation, and final disposal of medical waste as they can cause unforeseen "knock-on" effects;
- Due to the rise in coal price, people will burn non-conventional fuel tires, garment waste. The air
 pollution particles may be acting as vehicles for viral transmission. Need to stop agricultural field
 burning after harvesting;
- The COVID-19 crisis has accelerated the digitalization of many businesses and services, including teleworking and video conferencing systems in and out of the workplace, access to healthcare, education, and essential goods and services;
- The emergency coordination mechanism of the government needs to be reviewed and revised ensuring the inclusion of biological hazards in the National emergency response strategy with other risks;
- Strengthening community resilience through crisis prevention, volunteerism, reduction, inclusive social dialogue, advocacy, and participation is essential to prepare for the next crisis;
- During the drastic increase of COVID-19 cases in the country, several natural hazards including floods and the cold wave took place causing damages and losses in infrastructure and agriculture.
 It is required to support local self-governments and organizations at the frontline of response with technical and financial supports;
- Ensuring the continued or improved functioning of small pro-ducers, informal workers, migrants, returnees, and MSMEs across sec-tors is essential. This effort will incentivize measures that can support the transition to a resource-efficient green and circular economy, founded on sustainable consumption and production patterns and anchored in sustainable value chains;
- Given the significant numbers of migrants who have already returned or are planning to return to
 the country, particular attention will be given to supporting migrant-receiving communities, especially
 those prone to conflict, and characterized by high levels of unemployment and poverty.

CRISIS COMMUNICATIONS

In March 2020, following the first registration of COVID-19 case in Kyrgyzstan, the Government approached DRCU members to support the Government's media services to deliver massive communication campaign across the Country. In response to this request the DRCU deployed the team of social media specialist, graphic designer, and videographer to work at the Republican's Schtab's for 3 months. This support helped to ensure regularity, intensity, and accessibility of COVID-19-related information through the Government's channels such as daily life live briefings and a dedicated Telegram channel. From May to December 2020 DCRU Crisis Communications Group lead by UNICEF invested into the accessibility of the public information to people with disabilities - news blocs on Ala Too 24 and El TR have been accompanied with sign language interpreters to deliver country updates to people with hearing impairment.

DRCU assisted the Ministry of Health and the Republican Center for Health Promotion and Mass Communication to produce 15 videos, 15 thousand posters in three languages (Kyrgyz, Russian, and Uzbek)

and 4 thousand posters in Tajik and Chinese languages for ground entry points with respectful countries. Additional 3 thousand posters were disseminated with the support of the Red Crescent Society. Continuous advice and recommendations on strategic COVID-19 communication have been provided to the Ministry of Health and the Office of the Government This included the analysis of the effectiveness of Government's communication strategy leading to elaboration of the joint communication strategy that outlined key messages to different target groups and actionable information protocols. DCRU Crisis Communications Group facilitated the establishment of the cross-sectorial multi-stakeholder coordination and information sharing platform through which the Government was able to manage the multiple sources of the COVID-10 public health communication interventions. This platform aims at supporting an exchange of information on all activities around COVID-19 prevention within the government and external stakeholders; foment regular, open and two-way dialogue between government and other public and private stakeholders working in health communication, including media, civil society and business associations; and leverage concerted and joint efforts and resources.

On 10 September 2020, the Prime Minister of the Kyrgyz Republic officially announced the launch of National Information Campaign #SAKTA (Protect), supported by UN Agencies (UNICEF, UNDP, WHO, UNFPA, FAO, WFP) and international development partners (World Bank, Aga Khan Foundation, Red Crescent Society).

- A unified brand book for the #SAKTA campaign Public safety visuals posted (starting August 2020): Bishkek: 120 bus stops, 11 billboards; 7 oblasts: 97 banners, 65 bus stops;
- 3 videos were developed and widely distributed, including through main TV channels, with key
 messages in Russian and Kyrgyz, and were placed at the Government's online platforms, Bishkek's
 outdoor LED screens, and indoor screens at all State Registration Service's facilities across the
 country;
- A weekly TV program with participation of the doctors from different regions, published on the social media platforms «Word to the Doctor» with retransmission on TV channels: EITR, KTRK, Pyramida, Channel 5, 7 regional TV channels;
- #SAKTA digital content was delivered through social networks, social media influencers and 300
 UNICEF volunteers reaching out almost 1 million people across the Country;
- Weekly press, Erkin too, Kyrgyz tuusu, Slovo Kyrgyzstan, and in regional newspapers, used #SAKTA content in their publication;
- A large-scale study of the population of Kyrgyzstan on the perception of coronavirus, information awareness, trust in sources of information and other issues has been finalized with the results to be ready in December, 2020;
- A chat bot has been developed and adapted for the website of the Ministry of Health to answer the most common questions about the coronavirus for the population.

