



Three-year-old Amira receives her polio vaccine in one of the polyclinics of Dushanbe, Tajikistan, where UNICEF supported the procurement and delivery of vaccine.

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for every child

Humanitarian Action for Children

Europe and Central Asia Region

HIGHLIGHTS¹

- Multiple risks, including earthquakes, floods, conflict and displacement, pose a risk to the well-being of vulnerable populations in Europe and Central Asia, particularly children. In 2021, a rise in devastating floods and landslides, escalation of “frozen conflicts” and increased transits of migrants and refugees intensified humanitarian needs. These continue to be compounded by the COVID-19 pandemic, which is taking a heavy toll on lives and livelihoods, with 21.4 million cases and 410,000 deaths recorded to date.² Throughout the region, the impact of the pandemic has negatively affected the overall growth and development of children and this remains ongoing.
- UNICEF Europe and Central Asia Regional Office (ECARO) will continue to invest in enhancing emergency preparedness, response and disaster risk reduction capacities of governments and partners to facilitate effective, child-sensitive and gender-responsive humanitarian action and risk mitigation efforts. UNICEF will maintain a focus on providing targeted, multi-sectoral humanitarian response to address and alleviate the direct impacts of COVID-19 on vulnerable children and families.
- UNICEF is requesting US\$64.6 million to address the needs of the region's children and their families, including US\$58.6 million for COVID-19 response in 21 countries³ and US\$6 million to strengthen emergency preparedness and disaster risk reduction capacities.

IN NEED⁴



2 million children in need of immunization services⁵



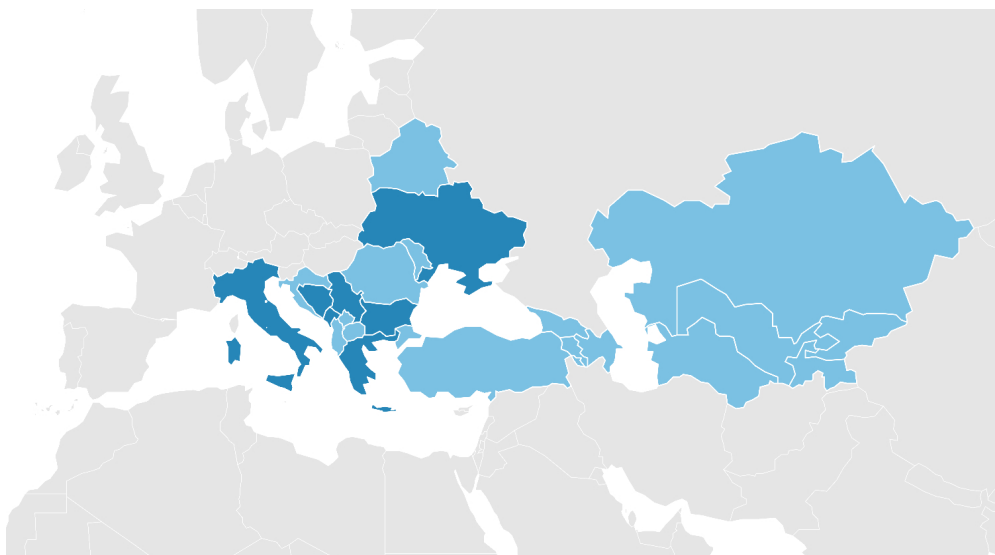
24.1 million children out of learning⁶



19.8 million children are living in poor households⁷



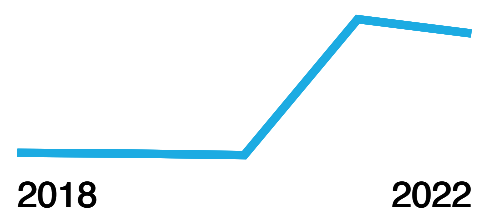
3.7 million people are prone to high earthquake risk⁸



This map does not reflect a position by UNICEF on the legal status of any country or territory or the delimitation of any frontiers. The countries in light blue are embedded in this regional appeal. The countries in dark blue have corresponding standalone appeals or are covered under crisis appeals.

FUNDING REQUIREMENTS

US\$ 64.6 million



HUMANITARIAN SITUATION

Children and families living across Europe and Central Asia are exposed to multiple hazards like earthquakes, floods and landslides. Between 2019 and 2021, 524,000 people were affected by earthquakes in Albania, Croatia, Turkey and Tajikistan.¹⁰ In 2021, floods affected over 20,000 people¹¹; droughts threatened the subsistence of 965,000 people in Central Asia, and Mediterranean wildfires destroyed the livelihoods of over 148,000 people.¹² Associated impacts of such events are likely to be exacerbated by climate change and rapid urbanization, becoming more frequent and intense in years ahead. Political instability, civil unrest and displacement pose enduring risks for families. Clashes on the border between Kyrgyzstan and Tajikistan adversely impacted children and women, displacing around 68,000 people.¹³ Over 2,000 children returned to Europe and Central Asia¹⁴ from situations of armed conflict,¹⁵ facing multiple challenges recovering from their experiences and reintegrating into their communities. Humanitarian crises in neighbouring countries continue, with Turkey hosting over 4 million refugees and asylum-seekers (1.7 million children)¹⁶ and the deteriorating situation in Afghanistan potentially triggering large inflows of refugees into Central Asia and beyond. Europe remains an active transit route for migrants and refugees, with some countries¹⁷ seeing increasing arrivals in 2021. With health systems already overstretched by COVID-19, the threat of other disease outbreaks cannot be ignored. In 2020, over 2.5 million children were unable to receive routine vaccines, five countries⁹ suspended planned supplementary/catch up immunization activities and over 95 per cent of countries reported a decline in routine immunization coverage of 3 to 27 per cent,¹⁸ leading to increased risk of vaccine-preventable disease outbreaks like the recent cases of vaccine-derived polio in Tajikistan and Ukraine. Despite country commitments on disaster risk management, vulnerable children and women remain at risk, limiting opportunities for survival, growth and development.

HUMANITARIAN STRATEGY

In 2022, UNICEF will continue working with country offices, governments and partners to enhance emergency preparedness and response capacities and measures, provide technical assistance and enhance systems for inclusive, child-sensitive humanitarian action. Guided by the Core Commitments of Children in Humanitarian Action, focus will be on scaling up national preparedness for sudden-onset emergencies, including natural disasters, conflict, displacements and refugee influx and delivering life-saving interventions in health, nutrition, education, water sanitation and hygiene (WASH), child protection and social protection. UNICEF will work with authorities and communities to prepare for reintegration of children returning from Iraq, Syria and other armed conflicts and enhance capacities on disaster risk reduction (DRR), climate change adaptation and risk-informed programming. In Central Asia, UNICEF will sustain partnership with the International Federation of Red Cross and Red Crescent Societies (IFRC), further building capacities of government and front-line actors through pre-positioning supplies; improving capacities in shock-responsive social protection, accountability to affected populations, WASH and gender in emergencies, and promoting school safety and youth engagement. Inter-agency collaboration on preparedness and resilience will continue through co-facilitation of the regional Capacity for Disaster Reduction Initiative (CADRI). Strengthening staff skills on risk monitoring, preparedness planning and humanitarian action, and roll-out of global procedures will remain a priority focus, per the humanitarian review. Regional surge mechanisms, supply procurement support and an early action emergency fund will be maintained to enable immediate response to humanitarian situations. Emphasis will continue on integrating gender-based violence (GBV) risk mitigation,¹⁹ addressing needs of adolescents, women, girls and children with disabilities in humanitarian settings and knowledge management on humanitarian action. Interventions will connect resilience and humanitarian efforts within ECARO's broader flagship and result areas,²⁰ ensuring resilience of communities, systems and services to future shocks.

STORY FROM THE FIELD



Following devastating earthquakes that hit Central Croatia on 28 and 29 December 2020, affecting 70,000 people (13,750 children), UNICEF Croatia rapidly delivered 13.5 tons of emergency supplies (30,000 hygiene packages and 2,400 tarpaulins for emergency shelter) to 24 institutions, including schools, kindergartens, general hospitals and health centres in Petrinja, Glina, Sisak and other affected areas. UNICEF also deployed mobile teams to provide psychological support to the most vulnerable children and their families and notebook computers to social welfare centres in Glina and Petrinja, ensuring continuation of critical services.

[Read more about this story here](#)

"I play football, games and walk around the yard. I'm fine here in the container. I'm warm and safe", says nine-year-old Gabriel.

COVID-19 REGIONAL RESPONSE

Albania, Armenia, Azerbaijan, Belarus, Bosnia and Herzegovina, Bulgaria, Croatia, Georgia, Kazakhstan, Kosovo²¹, Kyrgyzstan, Montenegro, North Macedonia, Republic of Moldova, Romania, Serbia, Tajikistan, Turkey²², Turkmenistan, Ukraine²³ and Uzbekistan²⁴.

HUMANITARIAN SITUATION (COVID-19)

Due to relaxation of containment measures, increased population mobility and new variants, countries continue to experience acute waves of COVID-19, requiring urgent support. By October 2021, 24.2 million cases and 454,276 deaths were registered in the region.²⁵ Despite resumption of social services, the impact of COVID-19 on children and families persists, particularly among the most vulnerable.²⁶ Health systems remain overstretched, resulting in disruption of essential services, with neonatal and under-five deaths increasing by 5.6 per cent and 4.2 per cent respectively across 16 countries.²⁷ Socioeconomic impacts, uneven growth and inflation continue to increase economic inequities, restricting families' capacities to deal with income fluctuations, affecting child nutrition, increasing school dropout and exacerbating child protection and GBV risk, particularly in poor households. While face-to-face or blended learning has mostly resumed, children without access to digital technology continue to be adversely affected.²⁸ For children who rely on school for safety and other services, continued risk of closure have wide-ranging implications. Enforced confinement of families during the pandemic severely impacted women's safety at home, with a surge in domestic violence registered regionwide.²⁹ Access to WASH remains limited, especially in Central Asia and the Caucasus,³⁰ and ensuring continuity of infection prevention and WASH services to maintain safe schools and health facilities remains a priority. These gaps in key sectors require immediate actions to mitigate long-term effects of COVID-19 on children and their families.

HUMANITARIAN STRATEGY (COVID-19)

Given the evolving context, arising situations of concern and continued and emerging humanitarian COVID-19 needs, UNICEF will sustain efforts with national authorities, World Health Organization (WHO) and other United Nations agencies, civil society organizations and communities to control the spread of COVID-19 and mitigate the impact on children. A key focus will be assuring continued access to basic services, informed by robust gender analysis. This will include supporting health and nutrition services, through enhancing capacities, providing critical equipment and supplies; improving infection prevention control through training, delivery of personal protective equipment; scaling up WASH services and supplies to ensure safe operation of schools and health facilities; supporting access to education and early learning through teacher trainings, providing supplies for digital or blended learning; supporting child protection and psychosocial support services including for GBV and risk mitigation across all sectors; promoting shock-responsive social protection and cash support to economically vulnerable families and facilitating risk communication and behavior change activities. Support will target the most vulnerable and marginalized families. UNICEF will continue to lead/co-lead or support sector specific task forces or working groups.³¹

Progress against the latest programme targets is available in the humanitarian situation reports: <https://www.unicef.org/appeals/eca/situation-reports>

This appeal is aligned with the revised Core Commitments for Children in Humanitarian Action, which are based on global standards and norms for humanitarian action.

2022 PROGRAMME TARGETS^{32,33}



Nutrition

- **887,000** primary caregivers of children aged 0 to 23 months receiving infant and young child feeding counselling
- **362,000** children and women benefiting from micronutrient deficiency and anemia preventive interventions (including multiple micronutrient powders and/or iron supplementation)³⁴



Health

- **610,000** children aged 6 to 59 months vaccinated against measles³⁵
- **343,600** children and women accessing primary health care in UNICEF-supported facilities
- **10,618** health care facility staff and community health workers trained in infection prevention and control
- **40,239** caregivers and frontline professionals (healthcare, social workers, teachers) provided with Personal Protective Equipment (PPE)³⁶



Water, sanitation and hygiene

- **273,800** children use safe and appropriate WASH facilities and hygiene services in learning facilities and safe spaces³⁷



Child protection, GBViE and PSEA

- **869,200** children and parents/caregivers accessing mental health and psychosocial support³⁸
- **58,000** women, girls and boys accessing gender-based violence risk mitigation, prevention and/or response interventions³⁹
- **672,000** people who have access to a safe and accessible channel to report sexual exploitation and abuse by aid workers
- **27,350** children who received child protection services (includes unaccompanied/separated children and children affected by violence and abuse receive individual case management/alternative care arrangement)



Education

- **4,963,205** children accessing formal or non-formal education, including early learning
- **43,155** schools implementing safe school protocols (infection prevention and control)
- **62,900** teachers trained in delivering digital, distance, and blended learning⁴⁰
- **186,500** parents/caregivers of children under 5 years receiving ECD counseling and/or parenting support⁴¹



Social protection⁴²

- **462,000** households reached with cash transfers through an existing government system where UNICEF provided technical assistance and/or funding



Cross-sectoral (HCT, C4D, RCCE and AAP)

- **23,780,000** people reached through messaging on prevention and access to services⁴³
- **11,699,800** people engaged in risk communication and community engagement actions⁴⁴

Programme targets are provisional and subject to change upon COVID-19 situation in the region.

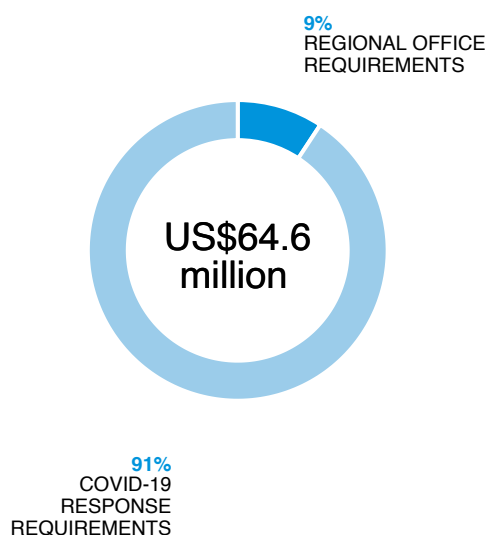
FUNDING REQUIREMENTS IN 2022

In 2022, UNICEF is appealing for US\$64.6 million to address the humanitarian needs of children and their families in Europe and Central Asia. This includes US\$58.6 million for COVID-19 response, and US\$6 million for DRR and emergency preparedness. The COVID-19 funding ask has decreased compared to 2021, as activities for mitigating the longer-term impacts of COVID-19 are integrated within regular programming. The funding ask for nutrition has increased compared to 2021, to address the significant needs of children and mothers hit by the socioeconomic impacts of COVID-19 in Central Asia.

Funding will be instrumental in enabling UNICEF and partners to respond to multiple ongoing and emerging humanitarian situations and reduce the impacts of emergencies on vulnerable children and families. This will be done by improving preparedness and disaster management capacities at local, national and regional levels, promoting risk-informed programming, strengthening partnerships and firming up linkages between humanitarian and development programmes. This will also enable leveraging early action mechanisms for emerging needs in countries not included in stand-alone or inter-agency humanitarian response appeals.

Funding for COVID-19 will enable UNICEF to scale up humanitarian response actions to help prevent the spread and mitigate the impacts of the COVID-19 pandemic. This will include ensuring access and continuity of essential health and nutrition, and provision of micronutrient supplements to children and mothers in Central Asia; provision of WASH and GBV services; supporting continuity of learning and addressing mental health and psychosocial support for children, girls and women. Funding will support expansion of social protection schemes focusing on technical support to government, benefiting children from the poorest and most vulnerable households affected by COVID-19.⁴⁵

Flexible contributions will continue to enable UNICEF and partners to take prompt response actions to fulfill the rights of children and families affected by ongoing and emerging humanitarian crises in the region.



Sector	2022 requirements (US\$)
Regional office requirements	6,000,000
Emergency response	3,740,000
Regional office technical capacity	650,000
Emergency preparedness and disaster risk reduction	1,610,000
COVID-19 response requirements	58,631,680
Nutrition	4,150,880 ⁴⁶
Health	11,751,800 ⁴⁷
Water, sanitation and hygiene	9,791,000
Child protection, GBViE and PSEA	7,250,000 ⁴⁸
Education	8,409,000
Social protection	7,339,000 ⁴⁹
Cross-sectoral (HCT, C4D, RCCE and AAP)	9,940,000
Total	64,631,680

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ENDNOTES

1. UNICEF's public health and socioeconomic COVID-19 response, including programme targets and funding requirements, is integrated into the standalone country, multi-country and regional Humanitarian Action for Children appeals. All interventions related to accelerating equitable access to COVID-19 tests, treatments and vaccines fall under the Access to COVID-19 Tools Accelerator (ACT-A) global appeal.
2. World Health Organization (WHO) data as of 31 October 2021.
3. Albania, Armenia, Belarus, Bosnia and Herzegovina, Georgia, Kazakhstan, Kyrgyzstan, Kosovo, Moldova, Montenegro, North Macedonia, Tajikistan, Turkey, Serbia, Ukraine, Uzbekistan.
4. The in-need figures reflect the pressing needs of the major sectors that UNICEF supports for all countries in the region.
5. WHO/UNICEF estimates, 2020.
6. Pre-COVID-19 data - children out-of-school and in-school but not achieving minimum proficiency based on out-of-school data and the most recent UNESCO Institute for Statistics and Programme for International Student Assessment data on minimum proficiency.
7. According to UNICEF-Save the Children analysis, a baseline of 13.7 million children living in poor households prior to the crisis, and an additional 6.1 million children fell into poverty after the COVID-19 pandemic.
8. Estimation based on country-specific inter-agency contingency plans for earthquakes, 2017-2019, Regional Inter-Agency Standing Committee Contingency Plan for Earthquake for Central Asia and South Caucasus, 2016; Global Facility for Disaster Reduction and -Recovery, Disaster Risk Profile for Turkmenistan, 2015; and country multiple indicator cluster surveys for 2018 and 2019.
9. Kazakhstan, Kyrgyzstan, Tajikistan, Ukraine and Uzbekistan where, due to measles outbreak response, catch-up campaigns were suspended.
10. EM-DAT data for earthquakes Tajikistan (2021, 6 magnitude), Turkey (2020, 6.8 magnitude), Croatia (2020, 5.5 magnitude) and Albania (2019, 6.4 magnitude).
11. EM-DAT data for floods in Albania, Bulgaria, Serbia, Kosovo, Romania and Turkey, and mudslides in Tajikistan.
12. EM-DAT and IFRC data for Kazakhstan, Kyrgyzstan, Turkmenistan and Uzbekistan. https://www.ifrc.org/sites/default/files/2021-09/RCCC%20IFRC%20Climate%20disasters%20COVID-20210910_V2.pdf.
13. In Kyrgyzstan, 61,087 people were affected, while in Tajikistan the total number affected during the acute phase of the crisis stood at around 6,500 people.
14. Kazakhstan, Tajikistan, Uzbekistan and Kyrgyzstan alone have received more than 1,300 returnees from Syria and Iraq.
15. This includes conflict-affected countries (Syria, Iraq and Afghanistan).
16. The United Nations High Commissioner for Refugees (UNHCR).
17. Including the number of refugee and migrants arrivals from Albania, Croatia, Kosovo, North Macedonia, Romania, as of July 2021.
18. WHO/UNICEF estimates <https://immunizationdata.who.int/index.html>
19. UNICEF CCC, Gender Equality and Empowerment of Girls and Women, Commitment 1.
20. In ECARO, UNICEF works to ensure every child and adolescent, especially the most vulnerable, has a fair chance to be healthy, educated, protected, connected and included. In addition to humanitarian action, UNICEF supports governments to scale up and roll out strengthened health, education and social protection programmes nationally, to support countries' development efforts in these flagship areas. In line with UNICEF's CCCs, humanitarian actions are designed and implemented to build and strengthen national and local capacities to reduce needs, vulnerabilities of and risks to affected populations.
21. All references to Kosovo should be understood to be in relation to United Nations Security Council resolution 1244 (1999).
22. This appeal includes COVID-19 needs for Turkey. The COVID-19 needs for refugee and migrants and the host community in Turkey have been reflected in the Regional Refugee and Resilience Plan and the related Syrian refugee crisis appeal.
23. Ukraine has a stand-alone Humanitarian Action for Children appeal that covers humanitarian action related to the conflict in eastern Ukraine, as well as COVID-19 needs in eastern Ukraine, in line with the Humanitarian Response Plan. However, as there are COVID-19 needs outside of eastern Ukraine, these needs in the rest of the country are covered and reflected here in this regional appeal.
24. The COVID-19 resource requirements for Greece and Italy are reflected in UNICEF's 2022 Humanitarian Action for Children appeal for the refugee and migrant crisis in Europe.
25. WHO, COVID-19 Dashboard data from 1 January 2020 to 31 October 2021. <<https://covid19.who.int>>.
26. Those particularly at risk in the region are vulnerable and marginalized children including those living in remote, rural and underserved areas; children with disabilities; children from poor households; children from minority ethnic and linguistic communities (e.g. Roma); children living in alternative care and/or institutions; and migrant children.
27. Albania, Armenia, Belarus, Bosnia and Herzegovina, Georgia, Kazakhstan, Kyrgyzstan, Kosovo, Moldova; Montenegro, North Macedonia, Tajikistan, Turkey, Serbia, Ukraine, Uzbekistan.
28. During the peak of school closures, 1 in 3 learners were not reached by digital/broadcast remote learning. <https://data.unicef.org/resources/remote-learning-reachability-factsheet/>.
29. <https://www.unicef.org/eca/media/15776/file>.
30. For example, in Uzbekistan, only 57 per cent health care facilities reported having access to basic water services and only 26 per cent reported having basic sanitation services.
31. This includes Education, WASH, Nutrition, Child Protection, Health, Communication for Development, Gender Based Violence, Accountability to Affected Population, Social Protection.
32. UNICEF is committed to needs-based targeting, which means covering the unmet needs of children; and will serve as the provider of last resort where it has cluster coordination responsibilities.
33. This section reflects the consolidated targets of the countries included in the regional appeal only.
34. New indicator added for 2022 to address significant need of intervention to improve the nutrition status of children and mothers affected by socioeconomic impacts of COVID-19 in Central Asia.
35. Target has increased compared to last year as countries are catching up/promoting immunization campaigns.
36. Target has dropped as Government is leading this and only few countries in the region require PPE support from UNICEF.
37. Targets for 2022 were determined based on the 2021 experience focusing on a needs based approach. New/additional interventions proposed for 2022 related to WASH infrastructure (e.g. installation/maintenance of hand-washing facilities) can be costly, hence reduction of targets is not proportionally translated into reduction of required funds.
38. Target reduced in 2022 as countries are focusing on needs-based targeting, focusing on the most vulnerable and at risk children and families.
39. Target decreased compared to 2021 as GVB risk mitigation interventions are integrated within sectoral interventions.
40. Target dropped in 2022 as almost all schools in the region are operating face-to-face learning.
41. Decreased target as interventions are integrated in regular programmes.
42. Target has increased from 2021 as countries are scaling up social protection programme with technical support to governments.
43. People engaged either with face-to-face approach or through social media platforms.
44. Increase in targets as it includes risk communication and dissemination services through social media and several regional innovations like Healthy Buddy, Bebbo applications.
45. Despite the increase in target in 2022, funding ask for social protection programme has decreased as UNICEF's support focus on policy advocacy and technical support to scale up the cash assistance through existing social protection schemes.
46. Funding requirement for nutrition increased in 2022 to address significant need of nutrition intervention to improve nutrition status of children and mothers affected by socioeconomic impacts of COVID-19 in Central Asia.
47. Funding requirement for health has decreased in 2021, as most of the health interventions are integrated in regular programme.
48. The funding requirement has decreased as interventions focusing on longer-term impacts of COVID-19 are integrated in regular programme. This includes \$1.6 million for GBVIE and \$600,000 for PSEA activity.
49. Funding ask has decreased as UNICEF's support includes policy advocacy and technical support.