In 2010, a string of emergencies caused by natural disasters and epidemics affected thousands of children and women in Tajikistan, the poorest country in Central Asia. Imposing mountainous terrain and geographical isolation make assisting the most vulnerable children even more difficult. An earthquake in Vanj District in January and flooding in Kulob District in April knocked out schools, medical centres, and water and sanitation facilities, restricting women’s and children’s access to essential services, and weakening the health and nutritional status of close to 10,000 people. The first known outbreak of polio in the country since 1997 struck 458 people, nearly 90 per cent of them under age 15, and severely taxed the capacity of national response systems. The outbreak was contained, but not before it spread to several neighbouring countries. The global economic crisis, high food prices, political tension with Uzbekistan and deteriorating internal security, particularly in the Rasht Valley, have compounded the acute distress and humanitarian need of ordinary people in Tajikistan.

In addition to the polio outbreak and the earthquake, unusually heavy precipitation in April triggered widespread floods, landslides and mudflows in Kulob District. A flash flood in Kulob and surrounding areas in May destroyed houses and the belongings of 4,500 people, and killed at least 40. An estimated 16,000 people were affected by the disaster in rural areas around Kulob.

To make significant strides in stabilizing the welfare of women and children in disaster-prone areas of Tajikistan, UNICEF is requesting US$5,540,000 for 2011. Immediate and full funding can help children and women in Tajikistan find a foothold of health and stability. UNICEF plans to meet humanitarian needs in Tajikistan in 2011 consist of disaster prevention, disaster preparedness and humanitarian response to past and future emergencies. A major effort is required to build on the 2010 polio immunization rounds to prevent further outbreaks. UNICEF’s work on disaster risk reduction through education will help children, schools and communities be better prepared to cope with disasters. In all sectors, UNICEF will position supplies to ensure a swift response to meet the needs of the most vulnerable children. In 2011, UNICEF will continue to work closely with other UN agencies and others in the Rapid Emergency Assessment and Coordination Team (REACT), which coordinates international humanitarian assistance in Tajikistan, by leading the WASH cluster and co-leading the education cluster with Save the Children.

CRITICAL ISSUES FOR CHILDREN AND WOMEN

The 2010 polio outbreak in Tajikistan highlighted that despite officially high immunization rates, there is a considerable risk in the number of susceptible children – one reason for the explosive outbreak. Moreover, the Government of Tajikistan requires continued support to ramp up immunization coverage.

The State of the World’s Children 2011 estimates that the country’s infant mortality rate is 52 per thousand live births, while the under-5 mortality rate is 61 per thousand. According to official estimates, in Tajikistan, 36 per cent of deaths of children under 5 occur during the neonatal period. Consequently, maternal and child health care is a top priority, especially in emergency situations.

The 2009 nutrition survey revealed positive trends in nutrition indicators, but rates of severe acute malnutrition and chronic malnutrition are still relatively high among children under age 5. Key factors contributing to the high prevalence of undernutrition are inappropriate feeding practices, early introduction of complementary feeding and a low exclusive breastfeeding rate (23.8 per cent). In addition, more than 47 per cent of households live below the poverty line. Poor nutritional status and poverty limit children’s resilience in emergency situations.
Emergencies destroying such social infrastructure as schools, medical centres and water and sanitation facilities limit children’s access to essential services. Disaster preparedness must receive priority attention alongside rapid rehabilitation of services and psychosocial support for children when disasters occur. Attention to children with disabilities and children in institutions, who are particularly vulnerable in emergency situations, can ensure their needs are met when crises occur.

**KEY ACHIEVEMENTS IN 2010**

In 2010, UNICEF estimated that US$6,200,000 was needed for its humanitarian activities in Tajikistan. As of October 2010, a total of US$200,000 – only 3 per cent of the goal – had been received. In 2010, UNICEF’s humanitarian work in Tajikistan was dominated by the response to the significant polio outbreak, which took on a regional character and required regional coordination. In close collaboration with the World Health Organization and the Government of Tajikistan, a rapid and comprehensive polio campaign was launched, which has successfully contained the spread of the virus. Administrative and independent monitoring data shows that 99 per cent of children younger than 15 years old were reached.

In addition, UNICEF responded successfully to the two significant natural disasters in 2010 by ensuring continued access to services for children; by rehabilitating schools, health facilities and water systems; and by providing nutritional support and also psychosocial assistance to affected children. Two thousand people (about 45 per cent of the affected population) in the flood-affected Kulob District of Khatlon region benefited from an emergency hygiene campaign that included distribution of chlorine tablets and dissemination of basic hygiene messages regarding the prevention of waterborne diseases. About 300 households (2,100 people) received water containers, hygiene kits, soap and water purification tablets.

In Kulob as well as the earthquake-affected Vanj region, about 22 winter school tents were provided to affected schools. In the absence of emergency funding, UNICEF mobilized its regular resources in order to be able to provide additional winterized tents, food items, blankets, hygiene and emergency health kits in coordination with REACT.

In collaboration with the department of Psychology and Sociology of the Tajik State University, about 750 children and 560 adults were reached with psychosocial support following the earthquake in Vanj.
HUMANITARIAN ACTION: BUILDING RESILIENCE

In collaboration with the European Commission, UNICEF Tajikistan is working to strengthen disaster risk reduction in the education sector. The aim is to mainstream disaster risk reduction into national education policies and strategies and integrate it into the school curriculum. Starting in 2008, UNICEF, together with the ministry of education and the Committee of Emergency Situations, has been piloting a school-based disaster risk reduction model in selected schools in disaster-prone areas. The model effectively facilitates capacity building of schools in disaster risk reduction through training for teachers and relevant local officials, emergency preparedness activities, community mobilization and provision of emergency preparedness and response-related supplies. The model aims to enhance knowledge and skills regarding disaster risk reduction among teachers and students, with the explicit aim of reaching out to and strengthening ties with the wider community through the students. These initiatives will contribute not only to strengthening school-level disaster risk reduction and preparedness, but will also boost the resilience of children and their communities when disaster strikes. Lessons learned and best practices from the initiatives will be used for upstream policy and system work for longer-term development.

PLANNED HUMANITARIAN ACTION FOR 2011

HEALTH (US$3,200,000)

In 2011, the overall goal of UNICEF in the health sector will be the prevention of disease outbreaks and the improved access to quality health care for vulnerable women and children.

- To prevent another disease outbreak, UNICEF will supply oral polio vaccine and social mobilization interventions to ensure a 99 per cent coverage rate against polio among 2.7 million children 0–15 years old. The organization will also supply 5.5 million diphtheria vaccines to cover 4.6 million people 7–39 years old.

- To improve access and quality of primary health-care services for the most vulnerable children, 600 primary health-care centres in emergency-affected areas will receive refresher training and a supply of health kits. Primary health-care centres that are unable to cope with the increased number of emergency patients will be targeted to receive the training and supplies.

- 10 maternity hospitals will have improved access and quality of basic neonatal care services through the provision of life-saving and critical relief supplies, including the distribution to each hospital of at least 2 baby warmers, 20 blankets and 1 set of essential medicines.

- Disaster-affected maternal health centres will benefit from the provision of safe water and sanitation to ensure safe delivery and neonatal survival.

NUTRITION (US$600,000)

In 2011, UNICEF will support the Government of Tajikistan and partners in the development of an appropriate plan of action and a sustainable programme to respond to the current nutritional status of children. Special areas of focus will include promotion of exclusive breastfeeding, appropriate complementary feeding and management of undernutrition.

- The nutritional status of 100,000 children and 50,000 mothers will benefit from the promotion of infant and young child feeding and therapeutic and supplementary feeding programmes with the World Food Programme and NGO partners.

- 20,000 undernourished children and mothers at risk will be provided with micronutrient supplements, including high-energy biscuits and vitamin and mineral complexes.

- 2,000 children with severe acute malnutrition will benefit from the distribution of therapeutic food, including F-75 therapeutic milk and ReSoMal, an oral rehydration solution.

- 500,000 children under age 5 across the country will benefit from a deworming campaign.

WATER, SANITATION AND HYGIENE (WASH) (US$1,000,000)

As WASH cluster lead, UNICEF will help to maintain a steady supply of safe water and improved sanitary conditions for the women and children most at risk and for disaster-affected communities to ensure basic minimum WASH requirements. The emergency-affected population in rural areas (with special attention to hospitals, schools and mass care facilities) will benefit from improved WASH
to prevent infectious disease outbreaks. Ten emergency-affected schools and/or hospitals will receive assistance.

• Up to 30,000 households affected by natural or human-made emergencies will benefit from the distribution of 100,000 20-litre water containers, 270 packs of water purification tablets (50 each), 300,000 hygiene kits and 600,000 bars of soap.

• 300,000 people will be reached with organized communication campaigns for hygiene promotion that emphasize messages regarding the prevention of waterborne disease outbreaks.

• 30,000 households in emergency-affected areas will be ensured the minimum required amount of safe water (15 litres per person).

CHILD PROTECTION (US$300,000)

In 2011, UNICEF will address the protection needs of children that might arise from major earthquakes, flooding or a possible winter emergency.

• UNICEF will ensure that in case of extreme weather conditions, 10,000 children in residential-care institutions and boarding schools will have access to basic care and services, including health care, food, clothes and heating.

• Psychosocial support will be provided for an estimated 10,000 children through established child-friendly spaces in resettlement areas and communities in case of flooding, earthquake or any such emergency situation resulting in displacement. Special focus will be given to younger children as well as adolescents who might not be covered by the education sector.

• Identification, tracing and reintegration will be provided to 300 children who might be separated from their families due to the effects of emergencies. The children will be placed in family-based care settings until their families are located.

• The existing psychosocial support providers will be mapped and strengthened as part of the preparation process, as per identified needs.

EDUCATION (US$400,000)

To ensure children’s access to schooling in potential emergency situations, as well as an increased level of preparedness, UNICEF, as education cluster lead with Save the Children, plans to implement the following interventions:

• UNICEF will enhance capacity in emergency stocks through the procurement of 350 additional sets of emergency supplies (non-food and WASH items), targeting 350 households and a total of 2,500 people, 1,500 of which are children.

• Depending on need, at least one temporary learning centre for children in emergency-affected areas will be established or repaired. Some 1,500 schoolchildren will be provided with School-in-a-Box kits that contain essential school supplies for learning.

• Together with the health and nutrition sector partners, 7,000 children will benefit from UNICEF-supported early childhood development activities in emergencies.

CLUSTER COORDINATION (US$40,000)

To enable an effective and efficient coordinated response to improve the prospects of people affected by emergencies, all cluster coordination costs (national and sub-national) need to be adequately funded. These costs include a team for coordination and information management, along with administrative and operational support, to undertake a number of key actions and outputs. These include coordinating the collective response to maximize synergy and minimize duplication of efforts; identifying priority needs of affected communities based on experience and the results of rapid impact assessments; and developing a common strategic operational framework and response strategy that meets priority needs. In addition, UNICEF as cluster lead expects to put in place an effective monitoring mechanism that tracks progress and identifies gaps in the type of services being provided and in their geographical scope, and also articulates impact and outcomes through periodic progress reports. Information will be disseminated in a timely way and used in decision-making and planning.


5. REACT was established in 2001 to promote the sharing of information, logistics and resources between partners active in disaster management and humanitarian action. The team is composed of relevant representatives of the Government of Tajikistan, donors, the UN, other international organizations, and local and international NGOs.


10. Ibid., p. 36.


13. Total number of beneficiaries may not equal the sum of beneficiaries per sector, due to overlap in services provided to individuals.