What happened, where and when?

According to several news agencies and based on Batken branch field reports, on September 14, at 7:00 am, in the Bulak-Bashi area of the Batken region, a border clash that happened between troops of Kyrgyzstan and of Tajikistan, that escalated into an International Armed Conflict, each accusing one another of using tanks, mortars, rocket artillery and assault drones to attack outpost.

As of 28 September 2022, 59 people were killed and 198 injured from Kyrgyz side, out of whom 172 are still in hospitals (68 in Batken hospitals and 104 in Bishkek and Osh city hospitals), while more than 30 people were killed from Tajik side. The number of evacuated people grew rapidly within two days. According to the Ministry of Emergency Situations (MoES) 136,770 people from the conflict areas were evacuated to other parts of Batken and Osh regions. Many local residents were evacuated in a chaotic manner and independently were using their own vehicles. The majority of the people have been hosted by private households in safe locations while some are residing in temporary shelters such as schools, government facilities and mosques etc. Families are dispersed among host families, with movement of people challenging to track. It is unclear whether humanitarian aid will reach these households. All residents of Maksat, Dostuk villages that border with Tajikistan have reportedly fled their houses and are trying to relocate to Bishkek. A part of displaced people in host families and temporary settlements is hard to define for now, as there is a tendency that people try to move closest to the affected areas of Batken in the hope to quickly return to their households when situation is stabilized since many have cattle and poultry to feed.

The border conflict continued for two days, where Kyrgyz and Tajik forces engaged in more than 12 places all along the border, after which the two sides agreed to a ceasefire on 16 September, which has been largely held up despite several alleged incidents of shelling with a severe escalation on 16 and 17 September. The situation on the Kyrgyz-Tajik state border continues to be tense. As the Ministry of Emergency Situations (MoES) informed by 26 September 92,521 citizens out of 136,770 evacuated or displaced people have returned to their houses, while the other part is unwilling to return as they are concerned of their security and are planning to settle in other regions of the country as the challenge of border demarcation and delimitation between Kyrgyzstan and Tajikistan is ongoing. Kyrgyzstan and Tajikistan share 984 km of border, 30% of which is still disputed and leads to tensions due to lack of access to water, roads and pastures and nearby settlements.

State of emergency was declared on 16 September 2022 in Batken, which is still in place as of 22 September 2022.

On 20 September President of the Kyrgyz Republic, Sadyr Japarov travelled to New York and delivered a speech at the 77th session of the UN General Assembly, where he made an emphasis on the border conflict and urged Tajikistan to settle the conflict.

On September 25, Protocol #42 on the settlement of the situation on the border was signed by the head of the
State Committee for National Security (SCNS) of Kyrgyzstan Kamchybek Tashiev and his Tajik counterpart Saimumin Yatimov. The main point of the document is the removal and conservation of eight border posts and outposts - four each from Kyrgyzstan and Tajikistan. According to the heads of the SCNS of two countries, the removal and conservation of border posts and outposts will relieve tension on the border, since it was in these areas that localized conflicts escalated into an armed clash of the parties. However, in Kyrgyzstan, this decision caused public discontent. Residents of the Batken attended public manifestation demanding to cancel the agreement and restore border posts and outposts, voicing the concern that Protocol #42 was drawn up in the interests of Tajikistan and in the long term opens the way for the expansion of the Vorukh enclave through a creeping seizure of the territory of Kyrgyzstan.

Scope and scale

The conflict has inflicted substantial losses and damages: 613 houses, 3 strategic objects, 9 administrative buildings, 15 social service buildings, 494 household outbuildings, 1 bridge and 26 vehicles. 15 high-voltage power lines were disconnected in Batken and Leilek districts left 32 settlements (9,609 houses) without electricity. 16 mobile operator towers and 35 power lines were damaged in Ak-Sai village. Although mobile operator companies such as Nurtelecom and Megacom provide free mobile communication in Batken regions, mobile communication is very weak.

According to data from the MOES, as of 18 September, 136,770 people were evacuated to different locations in Batken and Osh districts: 38,173 to Batken district (2,184 to temporary shelters and 35,989 in host families), 46,262 to Leilek district in Margun (948 to temporary shelters and 45,314 in host families), 1,871 to Suluktu town (839 to temporary shelters and 1,032 in host families), 22,319 to Kadamjai district (44 to temporary shelters and 21,908 in host families), Kyzyl-Kiya town 79 people, Osh city 300 people, Osh oblast 5,301 people. In general 76% are placed in host families, while 24% in temporary shelters, mainly in schools, lyceum, gymnasium, sport halls and hotel facilities (RCSK NDRT).

Starting with border clash on 14 September 2022, between the Kyrgyz and Tajik border troops in Batken province of Kyrgyzstan and Sughd province of Tajikistan and Vorukh enclave of Tajikistan, the armed conflicts quickly spread over to other locations throughout the border line, including Chon Alay district of Osh province.

In total, estimated of 137,000 people from the Kyrgyz communities and over 21,000 people from the Tajik communities were evacuated. In total, over 600,000 residents from Kyrgyz side and over 51,000 population were directly and indirectly impacted by these border conflicts across 12 districts on both sides.

<table>
<thead>
<tr>
<th>People</th>
<th>Kyrgyzstan&lt;sup&gt;1&lt;/sup&gt;</th>
</tr>
</thead>
<tbody>
<tr>
<td>Evacuated or displaced</td>
<td>&lt; 136,000</td>
</tr>
<tr>
<td>Injured</td>
<td>163</td>
</tr>
<tr>
<td>Dead</td>
<td>59</td>
</tr>
<tr>
<td>Infrastructure</td>
<td></td>
</tr>
<tr>
<td>Civilian houses, damaged</td>
<td>365</td>
</tr>
<tr>
<td>Household facilities, destroyed</td>
<td>168</td>
</tr>
<tr>
<td>Social infrastructure</td>
<td>168</td>
</tr>
<tr>
<td>Vehicles</td>
<td>10</td>
</tr>
<tr>
<td>Strategic objects</td>
<td>6</td>
</tr>
</tbody>
</table>

Major differences of the conflict of 2021 and 2022 is further provided to show difference in terms of scale of the conflict that provides a justification for taking a bit different approach this time and asking for more funding through DREF this time. One of the main reasons is the season, when the conflict takes place. That it why this time instead of using funds for mobile houses it was decided to focus on CVA as unconditional multi-purpose fund that

<sup>1</sup> [https://kg.akipress.org/news:1806169?from=mportal&place=last](https://kg.akipress.org/news:1806169?from=mportal&place=last)
can be used for rent purposes as well. Mobile houses don't properly suit to accommodate people during cold season, which already starts in November in Kyrgyzstan. Another difference is higher number of objects destroyed, as a result of which families have no place to return to, while destroyed schools and kindergartens demands to redistribute children to other closest educational institutions and will affect education process adversely.

**Comparative table of difference between border conflict of 2021 and 2022:**

<table>
<thead>
<tr>
<th></th>
<th>2021</th>
<th>2022</th>
</tr>
</thead>
<tbody>
<tr>
<td>Period of year</td>
<td>April (Spring)</td>
<td>September (Autumn)</td>
</tr>
<tr>
<td># of villages directly impacted</td>
<td>Kok-Tash village</td>
<td>Kairagach, Maksat, Arka, Ak-Sai, Kok-Tash, Dostuk, Kyzyl-Bel, Kara-Bak villages in Batken region, Karamyk village in Osh</td>
</tr>
<tr>
<td># of casualties</td>
<td>Around 50 people (including 3 military, 2 underaged people), 190 wounded.</td>
<td>59 dead, 163 wounded</td>
</tr>
<tr>
<td>scale of destruction</td>
<td>100 objects, including 78 houses, 2 schools, 1 medical point, 1 kindergarten, 1 military building, 3 border points, 10 petroleum centers, 8 shops and a number of cattle</td>
<td>613 houses, 9 administrative buildings, 15 social service buildings, 494 household outbuildings, 1 bridge, 26 vehicles</td>
</tr>
<tr>
<td># of evacuated people</td>
<td>33,388²</td>
<td>136,770</td>
</tr>
</tbody>
</table>

²https://kloop.kg/blog/2021/05/02/bolee-33-tysyach-kyrgyzstantsev-bylo-evakuirovano-iz-zony-konflikta-v-batkene/
## Previous operations

| Has a similar event affected the same area(s) in the last 3 years? | Yes |
| Did it affect the same population groups? | Yes |
| Did the National Society respond? | Yes |
| Did the National Society request funding from DREF for that event(s)? | Yes |
| If yes, please specify which operations | MDRKG013, 14 May 2021, OT-2021-000046-KGZ |
| If you have answered yes to all questions above, justify why the use of DREF for a recurrent event, or how this event should not be considered recurrent | This is an unexpected border conflict, that could not be predicted and thus is not considered to be recurrent. |

Specify how the lessons learnt from these previous operations are being used to mitigate similar challenges in the current operation

RCSK held a lesson learnt workshop at the end of the previous DREF operation on 28 - 29 June 2021 with the participation of in-country partners, including RCSK staff from HQ and branches, ICRC, German Red Cross, Turkish Red crescent and IFRC. The need of having a regional contingency plan has been raised, however during the meeting in Tashkent in July 2022 with participation of the NSs of Kyrgyzstan, Tajikistan, Uzbekistan, German Red Cross, ICRC and IFRC due to sensitivity of the issue.

The outcomes of the lessons learnt workshop were:

- Develop an action plan and follow-up recommendations provided;
- Reinforce Movement partners coordination;
- Enhance capacity of the NDRT;
- Develop the joint Movement Contingency Plan.

Main recommendations and their status:
- Development of SOPs and a joint Movement Contingency Plan: The need of having a contingency plan at the regional level has been identified as a priority, however due to sensitivity of the issue Regional Contingency Plan has not been developed;
- National Disaster Response Team (NDRT) and volunteers: Local community volunteers and members of primary organizations, who work in the conflict affected areas and whom are quickly mobilised were trained to support with activity implementation in places. Based on this recommendation that was fulfilled the RCSK could quickly mobilise and deploy its NDRT to Batken;
- Development of organigram: Organigram has been developed, with clear indication of titles, names and roles of the team members that are involved in response. The developed organigram was used in case of Batken border conflict.
- Framework agreements with local service providers: Local service providers have been identified in each region and agreements have been signed, which are updated on annual basis. As for financial service provider depending on the situation and procurement requirements framework agreements are to be signed. For the DREF depending on further development of the situation financial proposals to be collected from four banks that resumed their activities in Batken, which are: RSK Bank, Ayil Bank, Finca Bank and Keremet Bank and a framework agreement for financial services to be signed; or exceptional procurement to be done.
- Establishing the Emergency Operational Centers (EOC) in HQ and each branch: The HQ EOC has been established that has been used for the border conflict, while establishment of the EOCs in branches is in progress.
- Improving the system of collecting, analysing information and reporting on the activities of the RCSK: Permanent work is done on improvement of the system of collecting, analyzing information and sharing information with relevant stakeholders. Based on the previous LLW a Security Officer position has been created and a former staff from the Security Sector of Kyrgyzstan has been hired for the position. This person briefs the NDRT, as well as other NS staff and volunteers working in Batken on security issues and provides recommendation related to security.
RCSK, established in 1926, is the largest local humanitarian organization in the country and has its headquarters office in Bishkek and its regional branches in the country’s seven provinces, including in the affected Batken and Osh provinces. The RCSK has 46 branches, 273 staff members and 3,048 volunteers across Kyrgyzstan, including over 100 experienced and trained National Disaster Response Team (NDRT) members through ICRC and other RCRC partners long-term program support.

The RCSK Batken Branch has 16 staff and 207 volunteers, and Osh branch has 9 staff and volunteers. For this emergency, in addition to the Batken and Osh Branches’ staff and volunteers, RCSK deployed around 50 staff members and volunteers, including experienced NDRT members trained on CEA, CVA, IM from Osh, Jalal-Abad, Issyk-Kul, Chui, Talas and Naryn regions, and from its headquarters.

Since the emergence of the first reports on the conflict on 14 September 2022, the RCSK Batken Branch was actively involved in providing immediate assistance to evacuated people, providing food and essential non-food items (hygiene kits) to displaced people in Batken. The RCSK has experienced NDRT members and deployed over 50 NDRTs from Osh, Jalal-Abad, Talas, Naryn, Issyk-Kul, Chui regions of Kyrgyzstan and from RCSK headquarters to support the rapid needs assessments and response activities in the areas of relief distributions (food, basic household items), PSS, RFL and other areas. The RCSK mobilized hygiene kits and other essential basic household items from its prepositioned stocks in Osh, Jalal-Abad and Bishkek warehouses. RCSK continues coordination with key stakeholders (government and non-governmental organizations) at regional (Batken) and national levels (through Disaster Response Coordination Unit - DRCU). The RCSK has also launched a local fundraising campaign on 16 September and raised nearly CHF 30,000 as of 20 September 2022.

Initial assessment has been conducted from 14 September and onwards on a daily basis by local staff and volunteers of RCSK Batken Branch and reported to the RCSK HQ and partners. The second stage comprised mobilization of staff and volunteers from neighboring branches: Osh and Jalal-Abad. At the later stage staff and volunteers from northern branches and HQ were mobilized and deployed to reinforce response team, which conducted assessment of primary needs of affected population. The RCSK also relies on assessment of the MoES, where number of affected population and infrastructure destroyed is provided.

As summarized by the KIANA (Kyrgyzstan Interagency Needs Assessment) report issued by DRCU Secretariat on 20 September 2022 and the RCSK preliminary assessments, the following are the identified priority needs per sector:

**Shelter/settlements & basic household items**
- Essential non-food items including mattresses, blankets (for host families)
- Clothes (children, women)
- Kitchen sets (for host families)
- Fuel (though this issue being resolved with travel resuming between districts)

**Health**
- Emergency and trauma care
- Medicine / medical supplies and equipment
- Mental health and psychosocial support
- Challenges to accessing healthcare services (though this issue being resolved with roads
WASH
• Hygiene kits, hygiene items for children and women
• Uninterrupted access to clean drinking water
• Access to toilet and other WASH facilities
• Baby and adult diapers, dignity kits (women hygiene pads) and sanitizers

Education
• Access to learning (schools and kindergartens/early childhood development centers)

Protection (provided by Protection Sector)
• Priority access to the affected civilian population, including in the isolated villages
• Safety and security of the population remaining in/ returning to the villages along the border
• Safety and security of the evacuees in collective shelters (schools, kindergartens, mosques, cafes, etc.) or host families (there is a need for protection monitoring)
• Fair access of evacuees to adequate needs-based information (including hotline) and humanitarian aid including counselling, psycho-social and legal assistance, with a special focus on the needs of vulnerable groups, in particular, children, persons with disabilities, women-heads of the households, persons with medical needs
• Safe evacuation for vulnerable civilians requesting to relocate elsewhere, in particular from Leilek District, if roads are blocked
• Safe return of evacuees to their homes, once the wish to do so, with continued access to humanitarian and repair/reconstruction aid if/as needed
• Conservation and restitution of personal and property documentation, and legal claims for compensation for sustained material losses, injuries and deaths of relatives
• Individual protection assistance (cash and/or in-kind) for most vulnerable civilians who suffered most from the conflict based on individual assessment of needs and vulnerability
• Engagement of local community volunteers, community centers and initiatives in assistance work.

Among all these identified needs RCSK based on coordination meeting mapped sectors covered by different stakeholders. RCSK will cover the following:
- distribution of unconditional grants through CVA to returnees to support their shelter, livelihoods and other needs through the IFRC DREF;
- provision of PSS to affected population at community centers and host families (particularly for children with PSS kits and activities) with support of the ICRC;
- provision in coordination with respective authorities/agencies needed medical supplies (first aid materials, medicines and others) with support of the Partner NSs (PNS);
- provision of RFL services with support of the ICRC;
- provision of food, hygiene items and essential household items (blankets, mattresses, clothes for children and women) with support of the ICRC and PNSs;
- support partners in their ongoing emergency response activities, including MoES, MoH, hospitals and others to strengthen partnership and ensure proper coordination;
- replenishment of RCSK stocks and ready for use, as the situation is volatile with possible relaunching, further escalation or being protracted.

More detailed assessment and monitoring of the situation is also recommended in the KIANA report and the expected mission of inter-agency South REACT teams (with participation of 2 RCSK members) with assessments in Kadamjai and Batken during 21 - 23 September 2022 is foreseen to feed in with more updated findings and recommendations per sector in the coming weeks. Meanwhile, the RCSK has based its response operational
The RCSK started actively liaising and hosting coordination meetings with the Movement partners, including IFRC, ICRC, and in-country partner national societies – German Red Cross, Italian Red Cross, Swiss Red Cross and Turkish Red Crescent since the onset of the conflict.

Along with internal Movement coordination, the Disaster Response Coordination Unit (DRCU), which is co-lead by the MoES and UN, was immediately activated on 14 September, and external coordination with DRCU has been regularly conducted. RCSK’s situation reports and updates remained one of the main source of information for all DRCU members.

At field level RCSK branches collaborate with local authorities, as well as with local representatives of state agencies, such as MoES, Ministry of Health (MoH), Border Troops, Ministry of Interior (MoI) and others. Also, the RCSK coordinates its activities with other RCRC Movement Partners and external players to avoid duplication and whether possible to have synergy.

Continuous support for RCSK is needed to ensure awareness among government and other humanitarian partners about its Auxiliary Role in the humanitarian field and the Fundamental Principles, through coordination meetings and communications support.

Based on coordination meetings that occurred on daily basis on the first week, and once in every second day in the second week the following distribution was agreed. The RCSK plans to address the needs of 7,500 families, out of which 2,500 families’ needs to be covered through unconditional grants and 5,000 PSS activities and replenishment of warehouses, as immediately on the following day of the conflict the NS deployed its NDRT and distributed basic household items from its warehouses based in HQ and other neighboring provinces.

**IFRC:**
- DREF (CHF 500K) CVA integrated with PGI and CEA for 1,700 families and 200 individual first aid kits replenishment
- USAID (USD 100K) CVA integrated with PGI and CEA for 400 families

**German Red Cross:** (EUR 120K) for 1,500-2,000 hygiene kits replenishment for the NS warehouses

A part of funds from ECHO PPP to be used to address the needs of evacuees located on the norther provinces, who have no house to return to or unwilling to return due to security challenges. Needs of evacuees located in southern provinces are already addressed through other projects and actors.

**Turkish Red Crescent:** 60 hygiene kits replenishment for the NS warehouses

**Italian Red Cross:** replenishment of warehouses in terms of basic household items (EUR 20K) that will come in the next four years

**Swiss Red Cross:**
- (CHF 60K) for replenishment of the NS warehouses, as well as other needs. These funds can be used for any requests from the state partners or needs of impacted population, funds are quite flexible
- Immediate deployment of its representative in Kyrgyzstan for 14 days to the NS to support
with the activities related to the border conflict

ICRC:
- PSS activities with involvement of psychologists, home visits, activities with children
- possible contribution of mattresses
- (EUR 250K) first aid kits replenishment for the NS warehouses

External actors also expressed
UNICEF: 1,000 hygiene kits replenishment for the NS warehouses
UNHCR: 5,000 blankets in-kind

### Resource Mobilization

By 19 September, KGS 2.5 million (CHF 29,787) has been mobilized through national fund-raising campaign of RCSK, out of which KGS 1 million (CHF 11,915) was used to purchase needed priority items for the affected population. Along with this amount, the RCSK used stocks from its warehouses including household items (hygiene kits, diapers, napkins, mattresses, blankets, jerry cans) and food items. ICRC confirmed the replenishment of these stocks that are distributed from RCSK stocks and support with RFL services. Swiss Red Cross seconded one staff who is covering the operations coordinator role for ten days and provide CHF 60,000 for replenishment purposes. German Red Cross plans to support with replenishment of warehouses and support affected people for about EUR 120,000. Turkish Red Crescent plans to provide financial support to cover some of the hygiene kits needs and the operational needs of the RCSK including fuel costs.

### Activation of Contingency Plans

Contingency plans which were developed taking into consideration recommendations developed during the Lessons Learnt Workshop from DREF were activated. With the number of evacuated people increasing by the hour in the first days, the RCSK mobilized its resources to provide food, drinking water, psychological first aid, essential relief items, including personal protection equipment and hygiene kits at temporary community shelters in Batken district.

### National Society EOC

From the very beginning of the crisis EOC has been activated to provide regular communication within the RCSK, with Batken and Osh branches, as well as with partners.

### Shelter, Housing and Settlement

RCSK distributed mattresses, blankets, mattresses, beddings, mobile houses, kitchen sets and other household items since the early onset of conflict from its warehouses. RCSK has started the joint work with MoES in providing housing for the evacuated population starting from 14 September 2022.

### Livelihoods and Basic Needs

RCSK also distributed food to the evacuees.

### Health

RCSK continues to provide health supplies (medicaments, first aid supplies) medical hospitals and wounded people in Batken and Leilek districts.

RCSK’ MHPSS trained staff and volunteers continue to provide psychological first aid in Batken and Leilek districts, with a focus on vulnerable women, children, and disabled people. The RCSK is coordinating closely its MHPSS activities with Doctors Without Borders, Osh State University psychologists and other community organizations.

### Water, Sanitation and Hygiene

RCSK distributed wet towels, water canisters, hygiene kits. 1,963 Family Hygiene Kits were distributed through the RCSK and another 1,000 hygiene kits are being dispatched by RCSK from Bishkek to Osh (covering approximately 5,000 people). In addition, 1,455 packs of diapers were distributed through the NS, including 750 packs of prepositioned UNICEF

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emergency supplies. UNICEF country office is mobilizing funds to cover WASH and other needs of children and women.

Protection, Gender and Inclusion
There is lack of disaggregated data. The RCSK is currently collecting more data to integrate PGI standards and principles into response to better identify the needs and the risks.

Education
N/A

Migration
With RFL RCSK is jointly conducting activities with the ICRC.

Risk Reduction, Climate Adaptation and Recovery
N/A

Community Engagement and Accountability
CEA focal point was deployed within the NDRT to explore the community needs in general and engage community volunteers to provide support based on needs identified.

Environment Sustainability
N/A

Multi-purpose Cash
No distribution of CVA took place yet, but multi-purpose cash grants has been identified as the most efficient tool to meet the basic needs of evacuees under RCSK response.

Other
N/A

Movement Partners Actions Related To The Current Event

IFRC
IFRC is part of the movement coordination team in country since the onset of the conflict and working with the RCSK on identification of the needs and development of the DREF application. In addition to the DREF, IFRC is engaging with partners to bring additional resources for complementary activities under RCSK operational strategy.

PNS
Swiss Red Cross seconded one staff member to the RCSK for operations coordination for ten days. German Red Cross and Turkish Red Crescent are also part of the in-country Movement Coordination platform, and they already indicated their readiness to support the replenishment of RCSK stocks and a potential CVA response.

ICRC
ICRC is jointly working with RCSK on RFL, PSS, plans to support with replenishment of RCSK warehouses, apart of medicaments as injections and drugs, and considering technical support on security, emergency communication to RCSK.

Mapping of aid from the Movement partners and external partners:

<table>
<thead>
<tr>
<th></th>
<th>IFRC (in CHF)</th>
<th>ICRC</th>
<th>GRC</th>
<th>Turkish RC</th>
<th>Swiss RC</th>
<th>Italian RC</th>
<th>UN</th>
</tr>
</thead>
<tbody>
<tr>
<td>Shelter &amp; HH items</td>
<td>Yes (hygiene kits, mattresses)</td>
<td>Yes (hygiene kits)</td>
<td>Yes (hygiene kits)</td>
<td>Yes (miscellaneous basic household items)</td>
<td>Under discussion</td>
<td>Under discussion</td>
<td></td>
</tr>
</tbody>
</table>

4 DRCU Table for Humanitarian assistance as of 19 September
<table>
<thead>
<tr>
<th>Multi-purpose cash</th>
<th>Yes, CHF 472,760 + CHF 100,000</th>
</tr>
</thead>
<tbody>
<tr>
<td>Health</td>
<td>Yes, CHF 32,400</td>
</tr>
<tr>
<td></td>
<td>Yes (PSS during emergency phase &amp; early recovery)</td>
</tr>
<tr>
<td>PGI</td>
<td>Yes, 4,500</td>
</tr>
<tr>
<td>CEA</td>
<td>Yes, 23,000</td>
</tr>
</tbody>
</table>

**Other Actors Actions Related To The Current Event**

<table>
<thead>
<tr>
<th>Government has requested international assistance</th>
<th>No</th>
</tr>
</thead>
<tbody>
<tr>
<td>National authorities</td>
<td>The government allocated resources from its contingency reserves (food, basic household items, fuel, etc.) and established special accounts to raise funds locally. Local hot lines were set up in Batken province to register and address affected population's needs. The government's priority, however, remains the stabilization of the situation, and continuing negotiations to ensure safety and stability of the affected areas, and ensure accessibility. The government agencies (local administrations, MoES, others) continue to address immediate needs of the displaced population through distribution of solicited basic household items and food items from other regions and government reserves. Emergency shelter needs of possible returnees to fully destroyed villages in Batken province are being discussed and response strategy is being developed by the government, with plans to reconstruct houses until the end of the year. Standard coordination mechanisms are being set up in Batken province.</td>
</tr>
<tr>
<td>UN or other actors</td>
<td>The government requested activation of Disaster Response Coordination Unit (DRCU) on 16 September 2022, and the first meeting was held in the same day. Five key sectors (1) food security and logistics, 2) shelter &amp; basic household items, 3) WASH, 4) protection, 5) health) were also activated with regular coordination meetings taking place. South REACT for conducting assessments is activated, with two multi-sector interagency teams to conduct assessments during 21 - 23 September 2022. RCSK continues to share its reports through DRCU and continues to coordinate with other organizations through DRCU general and technical group meetings. DRCU activated 5 sectors: health, WASH, shelter, protection and food security / logistics. The activation of cash sectoral meetings is under consideration. The activation of cash sectoral meetings is under consideration. The UN and international organizations are planning to conduct a joint assessment (REACT) in Batken. The UN and international organizations are planning to conduct a joint assessment (REACT) in Batken and Kadamjai districts starting from 21 September.</td>
</tr>
</tbody>
</table>
On 18 September, UNICEF and WFP have dispatched humanitarian aid to the affected areas (hygiene parcels and food items) and Kadamjai districts in the next 2 days starting from 21 September.

Are there major coordination mechanisms in place? Yes, the government requested activation of Disaster Response Coordination Unit (DRCU) Council on 16 September 2022. Five key sectors (food security and logistics, shelter & basic household items, WASH, protection, health) were also activated with regular coordination meetings taking place.

South REACT for conducting assessments were activated, with two multi-sector interagency teams to conduct assessments during 21 - 23 September 2022.

RCSK continues to share its reports through DRCU and continues to coordinate with other organizations through DRCU general and technical group meetings.

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Needs (Gaps) Identified

**Shelter, Housing and Settlements**

**DAMAGE AND NEEDS ASSESSMENT:**

a) Shelter damage: Per KIANA/DRCU assessment, there is still a lack in demographic and disaggregated data to fully assess the shelter damage and needs of affected people. Below are the current available data from RCSK and latest KIANA/DRCU reports:

- Residential - 613
- Non-residential - 523

*Notes:

i) Non-residential infrastructure covers:
- Administrative buildings - 9
- Outbuildings (barn, warehouse, etc) - 494
- Social facilities (kindergarten, school, medical buildings etc) - 15
- Strategic objects (border checkpoint, power line, power plant, bridge etc) - 1

ii) 1 household (HH) – average 5 persons (2 parents, 3 children).

b) Existing shelter accommodation: Total population of Batken is 548,247 people as of 2020; estimated displacement due to the border conflict is 136,770 persons (25%) per 19 September KIANA/DRCU report. Of the displaced, about 3,721 people are in temporary shelters, mainly in schools, lyceum, gymnasium, sport halls, mosques and hotel facilities (https://akipress.com/news:680103:1,053_tons_of_humanitarian_aid_delivered_to_Batken_region/).

**PROPOSED PACKAGES OF ASSISTANCE:**

Option 1: Transitional shelter / reconstruction (multi-purpose cash grant)
Option 2: Rental assistance (multi-purpose cash grant)

*Notes:

i) RCSK's preferred modality of assistance is through unconditional multi-purpose cash grant. Cash can be used for core shelter or rental assistance.

ii) Rental assistance (one-room apartment or house) costs KGS 5,000 (CHF 60) per month.
iii) The average cost of a small house is around CHF 2,000 equipped with oven for winter. Currently there is a stockpile of 43 small houses in HQ warehouse and 80 in the warehouses of southern RCSK branches.

RISK ANALYSIS

Winter - Demand for temporary shelter or rental assistance can extend for the next 3 months and will include the start of winter. Winter in Batken region lasts for 3.3 months, from 25 November to 2 March, with an average daily temperature below 46°F or 8°C (reference). Winterization kits may be needed by beneficiaries living in shelters that are not winter-equipped.

Prolonged displacement - With the massive amount of evacuees and wider scale of infrastructure damages, the NS's priority strategy should focus on immediate and medium-term needs in shelter assistance (transitional shelter or rental assistance through multipurpose cash grant). The national government is considering camps and shelters as a last resort, and giving preference to individual housing such as yurts, restoring and building houses. The NS needs to target evacuees not willing to return to their places of origin, as these persons will have difficulty accessing shelter assistance. The development partners highlighted the expected massive movement of evacuees from affected areas to Chuy province, close to the capital city of Bishkek, and Osh city.

Recurring and exacerbated border conflicts - Recurring conflicts on the bordering territories result to exacerbated or repeated infrastructure damage and exacerbated poverty. This drives more people into temporary displacement as they need to seek alternative accommodation and leave the immediate area to seek safety. The number of displaced and infrastructure damage also increased in this current border conflict, so this trend can continue in subsequent conflicts. In 2021 there were over 40,000 displaced, while there is 136,770 in the current conflict; There were 78 damaged shelter in 2021, while there are 365 damaged shelter currently.

Humanitarian access - In 2021 many actors could implement activities directly in affected locations, while this time due to security reasons only state agencies, RCSK and few more actors are operating in the field. These facts highlight devastating situation of this time border conflict.

Health

Families were forced to leave their houses following the conflict and are forced to live in collective shelters or remain with host families (usually their relatives) in safer locations until the situation stabilizes. In comparison with the previous border conflict escalation in May 2021, the sheer number of people on the move has overwhelmed the government evaluation and sheltering capacities and most people (90%) stayed with their relatives. Also, the collective shelters organized in social structures were not adequately prepared to house such large number of people. Also, many people had to flee their places with a little warning and had no time to collect their essential items from their houses, including basic hygiene items.

As per DRCU report as of 20 September, the outstanding health needs are emergency and trauma care, challenges to accessing healthcare services, shortages of medicine, and medical supplies and equipment. There is a lack of information on the medical assistance provided for temporary shelters. The REACT assessment that will be done in the next 2 days will include rapid health assessment in Kadamjay and Batken districts.

The government reported 9 social structures have been damaged in the affected areas, including 1 medical facility. Over the last one week, the government dispatched 16 multi-specialty medical teams (more than 100 medical workers in total) to the affected areas from Bishkek and other regions to provide medical care to the
wounded and people in urgent of medical care. Additional medical teams are being formed now and will be sent to Batken. At the same, the government has been airlifting the patients (as of 19 September – 102 patients), who are in urgent need of specialized hospital care to Bishkek and Osh cities. 35 patients are receiving treatment in healthcare organizations in Batken region. The MOH dispatched additional batches of blood and blood products, medical supplies of insulin, glucometer, and medical consumables to the affected areas. The RCSK’ rapid market assessment in Batken has shown the network of pharmacies are functioning.

The majority of the displaced people are women and children. Based on the MoES and RCSK information of the confirmed number of 63,390 people staying in temporary settlements in Batken alone, only 224 are men, 35% are women and 65% are children. This gender disbalance is due to the high out-migration of men for labour migration. Also, as it happens in such situations, usually men would be the ones who leave behind to look after their houses and properties. Therefore, health support for the displaced populations should be focused more on provision of maternal and child health. Over this period, 66 pregnant women and women in labor were admitted to the health care organization of Batken region, who gave birth safely.

Also, compared with the previous conflict escalation, due to heightened security concerns, the other international organizations and civil society organizations have little access to the most affected areas to provide support.

RCSK continues to provide health supplies (medicaments, first aid supplies) in Batken and Leilek districts. The MSF has been providing medical care in the village of Ravat, Leilek district. The services are provided in a mobile clinic inside a school, in cooperation with MoH nurses (average of 100 OPD consultations per day). It plans assess the evacuees’ situation in and around Kadamjay as well as assess how MSF can support Kadamjay hospital. WHO is going to deliver Trauma and Emergency Surgery Kits and 2 cutting/coagulation electrosurgical units and provided MoH with the locally procured surgical kits. UNFPA engaged Association of crisis centers and their network of psychologists to serve the evacuees in Batken and Osh and support orientation sessions for service providers.

Mental health and psychosocial support were highlighted as one of the main health needs for the affected communities. This is the second time for people to experience such escalation of conflict and violence in the last two years and people are traumatized by the recent events. Some people chose not to return to the affected areas even if the situation stabilizes and decide to move to Bishkek and other locations outside of Batken. There are reports that around 1,000 of people are trying to fly out of Batken to Bishkek, but not all people are allowed to board (only older persons, people with disability, pregnant and lactating women with their children).

The mental health component is not fully integrated into the health services network and primary care system has little capacity to respond. Psychological support is usually provided by doctors and it is perceived only as a psychological consultation and mental health care. Team of 10 psychologists work in the south currently which is not sufficient to cover the needs of displaced people. On 17 September, psychologists from Bishkek State University arrived in Razzakov district in Batken and they will work with evacuees sheltered in collective shelters. On 17 September, the Association of Crisis Centers has disseminated information with contacts for psychologists ready to work with the Batken region’s residents. On 18 September, NGOs reported that available psychologists are overwhelmed with work and that there was an urgent need to identify psychologists ready to provide consultations online, in different languages.

The following constraints and gaps were identified by DRCU: (a) lack of sufficient number of qualified Kyrgyz speaking MHPSS service providers to cover the big flow of evacuees; (b) lack of coordinated and standardized MHPSS to avoid duplication and stick to ‘do no harm’ methodology by those who will provide MHPSS and (c) lack of data/reports on possible cases of GBV and referral pathways.

RCSK’ MHPSS trained staff and volunteers continue to provide psychological first aid in Batken and Leilek districts. The RCSK is coordinating closely it’s MHPSS activities with Doctors Without Borders, Osh State
University psychologists and other community organizations.

The ICRC in Bishkek offered a deployment of MHPSS specialists to the RCSK to augment this capacity and has indicated its willingness to support the NS in this area. The ICRC has been implementing a MHPSS programme in the southern regions, focusing on supporting the children and using the approach called “Helping the Helpers” to support the community leaders. It has a MHPSS specialist in its Tashkent Office to provide technical support to the NS in implementing MHPSS activities.

While the security situation is getting stabilize, it is not clear how long the affected communities will remain displaced in temporary shelters or with host families. As it is the case with temporary shelters, overcrowding contributes to a host of other health concerns, especially among the most vulnerable members. Information that is coming from health sectoral meetings emphasize the needs for medical care and MHPSS and response of agencies in these areas, but there is a little recognition of the need for community-based health education and hygiene promotion activities.

The MIC survey of 2018, the percentage of children aged 12-23 months who were not vaccinated against vaccine preventable childhood diseases (Crude coverage) in Batken was 0 and among children aged 24-35 months, 1.7%. Based on these figures, imminent risk of outbreaks of measles and other vaccine preventable diseases in the affected areas is comparatively low, however, if the people continue to stay longer in overcrowded shelters and homes and if the routine immunization services are not restarted soon, the risk will increase.

Not all people will have options to return to their houses (due to their houses damaged, or security concerns) and will be forced to stay in government organized camps, temporary houses, rented houses or stay with their relatives and friends. It is not clear at this stage if the people who are staying out of their residence areas will be able to access medical services free of charge. This is especially pertinent for people with pre-existing chronic conditions, who can't afford to pay high medical costs by private providers out of their pockets. It is also not clear if the displaced people will continue to maintain their vaccinations of their children according to their ages, as recommended by the national immunization schedule and any additional vaccination drives will be organized by the local health services in the coming weeks. The RCSK has been implementing a social mobilization project for routine vaccinations for children in the southern regions before this conflict and it has a pool of trained volunteers. Also, as a part of the USAID BHA supported project on COVID-19 vaccination, the NS has been promoting COVID-19 vaccination in Batken region.

Over the last couple of days, some of those displaced (on RCSK’s guestimate of 10% of all affected people) started to return to their places in areas where the government declared safe and where unexploded ordinances have been cleared. The risk of injuries from unexploded ordinances remains in the other areas. The NS has utilized their current stocks of first aid kits that were provided under various projects including the IFRC and trauma kits provided by the ICRC during this response and a need remains to replenish those stocks. The ICRC in the country indicated its willingness to support with replenishments of those stocks and it was agreed with the ICRC that the emphasis of the IFRC support in this area will be on replenishment of individual first kits.

Water, Sanitation and Hygiene Promotion

As mentioned under the health section, the people staying in shelters or with host families lack essential hygiene items. The RCSK identified that hygiene kits, dignity kits (women hygiene pads) and sanitizers, baby diapers and diapers for adults are needed in the affected areas.

To support the RCSK Batken and Osh Branches, the NS mobilized its NDRT members from other regional branches and its headquarters, and also mobilized hygiene kits and other essential relief items from its prepositioned stocks in Osh, Jalal-Abad and Bishkek warehouses.
1,963 Family Hygiene Kits were distributed through the RCSK and another 1,000 hygiene kits are being dispatched by RCSK from Bishkek to Osh (covering approximately 5,000 people). In addition, 1,455 packs of diapers were distributed through the NS, including 750 packs of prepositioned UNICEF emergency supplies. Information on availability of water and adequate sanitation facilities for affected population in temporary shelters and receiving families/communities is contradictory. In Batken and Leilek districts left 32 settlements (9,609 houses) were left without electricity due the damage to infrastructure, potentially, causing interruptions in water supply to these communities. It is expected that more information will be available from the ongoing assessment by REACT, RCSK and other organizations on the ground.

The ICRC offered its readiness to support the RCSK with a rapid deployment of WASH specialist and wathab unit. Swiss Red Cross offered its support in replenishing emergency WASH stocks of the National Society such as jerry cans, water containers, hygiene kits, and others

UNICEF country office is mobilizing funds to cover WASH and other needs of children and women. MSF distributed basic hygiene items to displaced people in Ravat, including diapers for infants. UNFPA is procuring dignity kits for 900 women of reproductive age.

Protection, Gender and Inclusion

Current KIANA/DRCU analysis points to a lack of available disaggregated data among the affected population. Nonetheless, the predominant share of evacuees are women, children, and older adults. Therefore, support to RCSK to collect sex and age disaggregated data and processing will be important to ensure that specific needs are met and no one is left out or behind.

RCSK Situation report #7 as of 17 September 2022 highlighted that of total 63,390 evacuees in Batken, 22,425 were female and 41,193 were children under 18. Many families, whose income stopped due to destruction of livelihoods, also fall under the vulnerable group. This increases the size of vulnerable group, who is in need.

PGI in DREF activities to be streamlined through all activities, with emphasis on women, children, disabled people and older people to ensure inclusion, prioritisation, protection and safeguarding in support services.

The Kyrgyz Republic fares poorly in terms of global development indicators, compared to other former Soviet Union countries in the region. In 2022, Kyrgyzstan ranked 118 out of 191 countries and territories on the United Nations Development Programme (UNDP) Human Development Index (HDI). 25,3% of population lives below the National Poverty Line.

Women in the Kyrgyz Republic are disproportionately affected by poverty and are worst hit by a reduction in employment opportunities, coupled with a widening gender wage gap. The capacity for women of childbearing age to take on formal employment is also undermined by the withdrawal of state-run systems of family and childcare support.

Given context of the crisis, the special focus will be given to women headed households due to the fact that they are most vulnerable among other marginalized groups of population who have negative coping mechanisms. RCSK will ensure prioritization of single women headed households in selection criteria together with other vulnerable groups like older people living alone, HIV and TB positive people. NS staff and volunteers that people who have difficulties to access humanitarian services, will receive aid in proper and dignified way via door-to-door delivery.
The school year starts in September in both countries. The conflict led to the temporary closure of over 50 schools and over 50 kindergartens in Batken and Leylek districts of Batken province. Access to learning (schools and kindergartens/early childhood development centers) is high.

This sector is expected to be covered by UN agencies such as UNICEF and UNHCR through friendly child spaces and temporary childcare centers and schools.

Needs analysis: 136,770 people are temporarily displaced. It is vital to understand the displacement situation (where people are moving to and where they intend to stay in the short to medium term) and the basic humanitarian needs of the following groups: (a) the displaced, (b) the host households/communities, and (c) households which are trapped/not yet evacuated.

Displacement assessment during early stages of emergency can provide information on possible durable solutions to their displacement: safe, voluntary and dignified return, relocation or local integration, in line with the Fundamental Principles. This requires effective coordination between RCSK, IFRC, DRCU and government authorities, especially on some sensitive land issues around the border. IFRC Europe Migration Coordinator to provide any technical assistance.

Population to be assisted: 1,700 families (8,500 people), who were forced to leave their homes due to escalating conflict in the area.

Risk analysis: Recurring conflict can lead to long-term displacement or repeated displacement. If displacement lasts till the winter season, the situation of access to basic services such as heating, and electricity could be further challenged during the winter season: (a) the displaced, (b) the host households/communities, and (c) households which are trapped/not yet evacuated.

Food and non-food items both for displaced persons and host households. Displaced persons require food and water, warm clothes, and hygiene kits for men and women. Host households require kitchen sets, fuel, mattresses and blankets. Food and non-food items both for displaced persons and host households. Displaced persons require food and water, warm clothes, and hygiene kits for men and women. Host households require kitchen sets, fuel, mattresses and blankets.

If displacement lasts till the winter season, the situation of access to basic services such as heating, and electricity could be further challenged during the winter season. It is necessary to assess further information on damaged key basic services, such as electricity, water and sanitation facilities, fuel supply, mobile networks, banking, official document issuance, and markets for the affected population.

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5 Displacement statistics taken from Kyrgyzstan DRCU Situation Analysis (KIANA) as of 18 September 2022.
Community Engagement and Accountability

In the current response, people who have been displaced by the conflict will have information needs, relating to their own safety and the response of the respective National Societies and other actors. It will also be imperative that the voices of affected people, particularly those who may be marginalised or hard to reach, are heard in planning the response and also through longer-term feedback mechanisms. People, particularly those who may be marginalised or hard to reach, are heard in planning the response and also through longer-term feedback mechanisms. In the current response, people who have been displaced by the conflict will have information needs, relating to their own safety and the response of the respective National Societies and other actors. It will also be imperative that the voices of affected people, particularly those who may be marginalised or hard to reach, are heard in planning the response and also through longer-term feedback mechanisms.

Environmental Sustainability

No environmental sustainability activities are envisioned under this DREF.

Shelter Cluster Coordination

Shelter Cluster Coordination services will cover all shelter assistance coming from all humanitarian organizations. This will be separate from RCSK's coordination of its own shelter assistance. The RCSK will duly coordinate with the DRCU's Shelter sub-group, given their co-lead role with IOM.

Overall objective of the operation

With 136,770 evacuated, 613 houses damaged or destroyed, and regional specific of winter season lasting from November to March, the DREF funding will enable the RCSK to reach out and support families and individuals with meeting immediate needs and overcome hardships following the border conflict.

The proposed DREF operation is designed to meet immediate basic needs through multi-purpose cash grants and health needs of approximately 1,700 families (or 8,500 people) from the most affected areas of Batken province and Chon Alay district of Osh province.

Response strategy rationale

With the assumption that the Kyrgyz Government will lead recovery and restoration efforts in coordination with development agencies in the country or through bi-lateral agreements, especially strategy and efforts to rebuild damaged and destroyed houses. It is the mandate of the national government to build and restore houses and infrastructure in the impacted area. Whilst guided by its auxiliary role, the RCSK and partners will support those the most impacted with immediate and temporary support, until the national government offers permanent housing and other type of support to these groups of local population.

The main focus of the RCSK's response under this DREF is to provide multi-purpose cash or voucher assistance (CVA) to the most vulnerable families affected by the conflict. All other interventions (CEA, community-based health and first aid support, hygiene promotion) will be following and integrated with CVA activities.

It is hardly possible to reach out to and support all impacted given large scale of areas and people impacted through the conflict. The RCSK and partners, in coordination with the MoES, MOH, and other central agencies and other development agencies, will prioritise support through DREF to reach out the most vulnerable and in remote
It is difficult to predict how the situation will evolve. However, based on the last escalation of the conflict in May 2021, most people who do not have their houses destroyed will choose to return to their houses, as they have their cattle and farms to take care of and could not stay away too long. According to informal data from the MoES, as of 21 September 2022, approximately 10% of displaced people are estimated to have returned to their original communities already and more influx of returnees is expected in the upcoming 2-3 weeks.

But those left without a shelter might either return to their communities and remain in temporary housing or tents (provided by governments or other agencies) in their land plots adjacent to their houses, or remain where they are, with host families. What is different from the last escalation, is that there are subsets of families who do not want to return to their homes anymore and are planning to relocate to other places in the country.

Based on these different scenarios, the RCSK has decided to target displaced families as they return to their communities, with a focus on the three vulnerable groups: Affected families with many children (3 or more children), single headed households and households with people with disabilities.

The reasons for targeting people as they return to their communities are as follows:
(a) operation-wise, it is going to be difficult for RCSK to target people scattered across many locations;
(b) as the people return, they would in a high need of cash. Cash assistance under this DREF will enable people to rebuild their houses (the information from the PDM from 2021 response has shown that 20% of the cash distributed was used for rebuilding their houses) as well as cover their basic needs immediately in their first one-month period.

The situation remains volatile and there is a lack of clarity when the displaced people will start returning to their houses. This is a protracted conflict, but there is a fear among the local population that this time, the escalation of the situation may drag on. In such scenario, if the situation protracts and people will continue to remain displaced, the RCSK will revise its operational strategy and its targeting under this DREF response and will provide the cash assistance to displaced people in temporary shelters or those staying with host families, following the same vulnerability criteria mentioned above and in coordination with external partners.

Since the start of the conflict on 14 September the RCSK and the Movement partners have been responding and supporting people who are currently in shelters and host families with food and non-food relief items, psychosocial support, and temporary sheltering as tents and mobile houses. For families who do not plan to return back to their border communities and plan relocate to other areas (Chuy and Osh provinces), a further assessment is planned by RCSK to identify such families, possible response, and collaboration with external partners, including IOM's Displacement Tracking Matrix tracking system.

**Targeting Strategy**

**Who will be targeted through this operation?**

The RCSK will target 1,700 families (or 8,500 people) from the most impacted communities of Batken region and Chon Alay district of Osh province through CVA tool with unconditioned grants in amount of CHF 200.

**Explain the selection criteria for the targeted population**

The National Society will be providing assistance, in collaboration and consultation with local administration, heads of villages, and other partners, to the most vulnerable families affected by the border conflict. Priorities will be given to the most vulnerable groups, apart families with chronically ill people due to the fact of proving it to be hard and the National Society lacks that capacity of working with that category of people:
- Multi-children families (3+ children)
- Single-headed households, with preference given to female ones
- Households with people with disabilities
- Households with pregnant and lactating women
Selection is not based on location, it is focused on demographic criteria, including socio-economic status. The above selection criteria are proposed, with the assumption that the vulnerability assessment will be prepared later for more targeted and individualised support, as well as for better coordination with other support providers.

CHF 200 will cover roughly 50% of the minimum expenditure basket, which according to the National Statistics Committee of Kyrgyzstan makes CHF 400. The left part is expected to be covered by the state, other stakeholders and from possible savings that the family has or partial support from other relatives.

<table>
<thead>
<tr>
<th>Household item/Services for 2 adults</th>
<th>Sum KGS</th>
<th>Sum CHF</th>
</tr>
</thead>
<tbody>
<tr>
<td>Household item/Services for 3 children</td>
<td>14,160</td>
<td>170</td>
</tr>
<tr>
<td>Total</td>
<td>32,973</td>
<td>397</td>
</tr>
</tbody>
</table>

Having discussed with affected people the NS Operations Team during the first week when the event happened conducted a rapid assessment, and made a calculation of expenses to be covered by CHF 200: a part of minimum consumption basket for a family (calculated at CHF 100), rent of a one room apartment in Batken (calculated at CHF 60) and basic warm clothes to be purchased as cold season is approaching (calculated at CHF 40). Calculations are made for one family that is comprised of five people: two parents and three children under 16. One-off cash will be provided per family identified according to the set criteria, in total covering 1,700 families or 8,500 people.

In Kyrgyzstan minimum subsistence level is KGS 7,080/CHF 84, minimum salary is KGS 18,940/CHF 225, minimum pension is KGS 1,500/CHF 17, that is why CHF 200 is significant amount of money in the country.

RCSK has an agreement with several local banks through previous CVA interventions. So RCSK will conduct a tender and get approval from IFRC before concluding a contract.

Identifies risks and mitigation activities and further support needed for CVA:

- Risk of inability to withdraw cash from ATM, (mitigation: selection of a bank, where cashier works, who can support.)
- CVA is done through bank card distribution to avoid robbery risks.
- PIN code forgotten/cards lost- RCSK has a hotline, where beneficiary can turn to, and there is a focal point in the bank, who can support with restoring PIN code/reissuing bank cards in limited timeframe.
- Misuse of unconditional funds provided- after purchase a monitoring is conducted. Selection criteria is followed, to ensure that the needy people are selected and who very likely will use funds properly.

### Total Targeted population

<table>
<thead>
<tr>
<th></th>
<th>Women:</th>
<th>Rural %</th>
<th>Urban %</th>
</tr>
</thead>
<tbody>
<tr>
<td>Girls (under 18):</td>
<td>50%</td>
<td>10%</td>
<td>30%</td>
</tr>
<tr>
<td>Men:</td>
<td>50%</td>
<td>80%</td>
<td>20%</td>
</tr>
<tr>
<td>Boys (under 18):</td>
<td>10%</td>
<td>10%</td>
<td>3%</td>
</tr>
<tr>
<td>Total targeted population:</td>
<td>8,500</td>
<td>80%</td>
<td>20%</td>
</tr>
</tbody>
</table>

### Risk And Security Considerations

<p>| Please indicate about potential operational risk for this operations and mitigation actions |
|---------------------------------------------|-----------------------------------------------------|</p>
<table>
<thead>
<tr>
<th>Risks</th>
<th>Mitigation Measure</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
</tr>
</tbody>
</table>
The risk of situation being protracted and/or escalated in bordering territories.

Overall security is under responsibility of Ministry of Internal Affairs of Kyrgyzstan. Currently joint Kyrgyz-Tajik police regularly patrols taking place in border line roads. RCSK will be closely monitoring security situation for appropriate and timewise response.

If the situation is protracted and/or escalated, IFRC will support the RCSK with triggering and applying to the Emergency Appeal (EA) to cope with the medium-term and larger scale effects of the possible worsening of the situation along the Kyrgyz-Tajik border line.

Additionally, the RCSK and the Movement partners will support the Kyrgyz Government with reaching out and seeking more international aid support.

Floods and mudflows risk season may also be burden, affecting people’s health, lives and property.

RCSK closely monitors weather forecasts, supports temporary shelters and settlements with basic draining and floor elevation systems against stagnating water and in urgent case will activate the organization’s “no-regret early action” protocols based on IFRC early warning systems guidelines in order to take effective measures.

Broken social cohesion and growing distrust may spur hate speech, hate crimes, including violence.

RCSK will work to build public trust in the sustainability of ceasefire and other confidence building agreements by monitoring and evenly distributing immediate response support.

Please indicate any security and safety concerns for this operation

The security of the RCSK staff and volunteers is of high importance. The RCSK team in the field will monitor the security updates before visiting communities. ICRC is offering support on security issues according to Seville 2.0.

COVID-19 is another concern. The RCSK staff and volunteers will maintain protective measures (masks, sanitisers etc) and physical distance when delivering direct assistance to people. Personal protective equipment will be be used by both assistance providers and affected people. This is particularly true when working around older people in the temporary collective shelters.

Planned Intervention

<table>
<thead>
<tr>
<th>Indicator</th>
<th>Multi-purpose Cash</th>
<th>Budget</th>
<th>Targeted persons</th>
<th>1,700 families or 8,500 people</th>
</tr>
</thead>
<tbody>
<tr>
<td># of people supported with multi-purpose cash grants</td>
<td>1,700 families or 8,500 people. Each family in average is comprised of five people.</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>% of surveyed households who report that the cash received was sufficient to cover their needs for the intended purposes and period</td>
<td>70%</td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>
DREF funds will support families with meeting housing/shelter, medication, livelihoods, and other needs through multi-purpose cash grants. Multi-purpose cash activities will be accompanied with CEA and PGI.

Banks and ATMs started functioning, therefore no shortage of liquidity. Cash transfer services are accessible for population through banks and postal service points.

The priority actions include:
- activate RCSK CVA SOP to initiate rapid feasibility report containing FSP, identifying needs and defining targets;
- conduct trainings on CVA quick refresher, CVA IM data collection and protection; CEA, PGI and MHPSS in emergencies suing CVA as a tool, monitoring in CVA;
- get CVA surge support from IFRC;
- develop selection criteria and vulnerability assessment (RCSK is initially considering demographic criteria);
- payments to be conducted to 2,000 families through the bank cards; RCSK has the agreement with their financial service provider (to be reviewed through the IFRC procurement team)
- support families with covering their basic needs including shelter, reconstruction materials for repairment of damaged houses, clothes, medication, food items, other basic household needs
- one-off cash payment in amount of CHF 200 per family calculated based on minimum expenditure basket in the country is planned;
- ensure that information on feedback channels among beneficiaries is shared, where any information on abuse, MHPSS needs and fraud can be informed;
- take into account lessons learnt from 2021 DREF post-distribution monitoring, as well as from the recent post-distribution monitoring conducted with support of the Turkish red Crescent, Swiss red Cross;
- ensure that risks are taken into account and mitigation measures are addressed;
- ensure that all activities related to multi-purpose cash are accompanied with CEA and PGI components;
- existing hotlines of the NS will be used to gather feedbacks from beneficiaries, as well as suggestion boxes will be available in places (mainly banks), where bank cards will be available. CVA, CEA and PGI will be operated together to ensure effective, safe, equitable implementation that will ensure that targeted people would be able to ask questions, share their feedback, express their concern, share opinions and access information related to cash programme. Information will be shared in a local language and ensure that it is clear for potential beneficiaries. Special attention will be paid to marginalised and hard to reach people, including people with disabilities;
- Based on continuous needs assessment conducted by the RCSK NDRT, multi-purpose cash being unconditional will be used for people's diverse needs, including shelter, reconstruction materials, education, health, livelihoods and others.

The cost per beneficiary is CHF 58.5, the support costs are 11% of the total budget. The trigger for the request is the 17th September, since which the NS has already been responding.

This DREF will contribute to RCSK overall response strategy to meet urgent needs of 1,700 families (8,500 individuals) – with provision of unconditional multipurpose cash grants.

This will become 1.3% of total caseload – out of 136,770 people affected

The harmonized transfer amount – 16 600 KGS (200 CHF) will cover roughly 50% of the minimum expenditure basket that according to the National Statistics Committee of Kyrgyzstan makes around CHF 400 covering only essential needs in household items for family
of five (two adults and three kids). This includes food, household items and costs for basic services as communication, utilities, transportation and health. The proposed amount of CHF 200 by the National Society's Operations Team covers a part of these expenses, while the left part is expected to be covered by the state, other stakeholders and from possible savings that the family has or partial support from other relatives.

In 2021 cash transfer under the DREF for the border conflict made CHF 160. This time the amount to be provided is a bit higher, which is CHF 200, because of sharp rise if prices and high inflation on all items, including food items. Ukrainian crisis also had an impact on the country, because Kyrgyzstan is an import-dependent country on food and fuel lubricates, mainly from Russia.

CHF 200 is still a big amount of money in Kyrgyzstan, where minimum subsistence level is KGS 7,080/CHF 84, minimum salary is KGS 18,940/CHF 225, minimum pension is KGS 1,500/CHF 17. This amount would be enough to sustain one family for one month. Also, based on the needs assessment conducted by the Operations Team of the NS another option for the calculation of CHF 200 is: to cover a part of minimum consumption basket for a family (calculated at CHF 100), rent of a one room apartment in Batken (calculated at CHF 60) and few basic warm clothes for children to be purchased as a cold season is approaching (calculated at CHF 40). For sure holding a cash will provide a feeling of protection and security for the impacted population.

<table>
<thead>
<tr>
<th>Indicator</th>
<th>Health</th>
<th>Budget</th>
<th>CHF 32,000</th>
</tr>
</thead>
<tbody>
<tr>
<td>Targeted persons</td>
<td>CHF 8,500 people (1,700 families)</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Target</td>
<td>The target groups will be the same as those targeted under CVA– initially identified demographic criteria (families with many children, single headed households, families with disabled family members).</td>
<td></td>
<td></td>
</tr>
<tr>
<td># of people reached with health promotion and PFA messages</td>
<td>8,500 people</td>
<td></td>
<td></td>
</tr>
<tr>
<td># of first aid kits purchased for replenishment</td>
<td>200</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

Priority Actions:

RCSK will focus on providing community-based health education and hygiene promotion activities to the affected population, with a focus on maternal and child health. The volunteers will encourage people to get vaccinated against COVID-19 and parents of children under six to get their children vaccinated, according to their age as per the immunization schedule of the Kyrgyz Republic. Psychological first aid is an integral part of community-based health activities and will be offered where needed, in close coordination with the ICRC and other actors on the ground. The costs of the PSFA will be covered by the ICRC. These activities will be done not as a stand-alone intervention but integrated into community mobilization by volunteers when they visit temporary settlements and affected households for CVA distribution.
Replenishment of stocks of first aid kits (individual kits) by affected branches.

<table>
<thead>
<tr>
<th>Water, Sanitation And Hygiene</th>
<th>Budget</th>
<th>CHF 0</th>
</tr>
</thead>
<tbody>
<tr>
<td>Targeted persons</td>
<td>8,500 people (1,700 families)</td>
<td></td>
</tr>
</tbody>
</table>

**Indicator**

Target The target groups will be the same as those targeted under all CVA and health promotion activities through the initially defined demographic criteria including: families with many children, single headed households, families with disabled family members.

**Priority Actions:**

Hygiene promotion for displaced people living in temporary shelters, host families and returnees.

These activities will be done not as a stand-alone intervention but integrated into community mobilization by volunteers when they visit temporary settlements and affected households for CVA distribution.

<table>
<thead>
<tr>
<th>Protection, Gender And Inclusion</th>
<th>Budget</th>
<th>CHF 4,500</th>
</tr>
</thead>
<tbody>
<tr>
<td>Targeted persons</td>
<td>100</td>
<td></td>
</tr>
</tbody>
</table>

**Indicator**

**Target**

- # of trained staff and volunteers engaging with affected population
- Streamline PGI standards across sector of interventions
- Coordinate with CEA focal points to include PGI lens in the design of feedback mechanisms and information dissemination
- Identify safe and quality referral pathways to guarantee that people's needs are addressed timely

|                     | Yes | Yes | Yes | Yes |
RCSK will be rotating the teams in the field who are composed of RCSK staff and volunteers. As it is crucial that everyone is treated fairly and with dignity, and ensure that everyone has equal access to opportunities, everyone’s voice is heard and everyone is safe from harm, the teams will be supported with induction sessions to guarantee that PGI basic standards are in place and harm is not caused while providing services to the affected people. During each rotation, RCSK CEA / PGI focal point from HQ will be conducting sessions (refreshers) for teams that will be combined with safer access sessions including PGI and CEA components. IFRC ROE PGI focal point will provide technical support to the RCSK PGI focal point and team to prevent further harm, reduce exposure to protection risks and strengthen the wellbeing of the affected population, and ensures that IFRC minimum standards for protection, gender and inclusion in emergencies are followed.

### Migration

<table>
<thead>
<tr>
<th>Indicator</th>
<th>Budget</th>
<th>CHF 0</th>
</tr>
</thead>
<tbody>
<tr>
<td>Targeted persons</td>
<td>Enter number.</td>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Indicator</th>
<th>Target</th>
</tr>
</thead>
<tbody>
<tr>
<td># of households assessed on their durable solutions to their displacement (return/relocate/integrate)</td>
<td>120</td>
</tr>
<tr>
<td># of households covered by RFL services</td>
<td>50</td>
</tr>
</tbody>
</table>

### Community Engagement and Accountability

<table>
<thead>
<tr>
<th>Indicator</th>
<th>Budget</th>
<th>CHF 18,000</th>
</tr>
</thead>
<tbody>
<tr>
<td>Targeted persons</td>
<td>1,000</td>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Indicator</th>
<th>Target</th>
</tr>
</thead>
<tbody>
<tr>
<td># and type of methods established to collect feedback and complaints from the community</td>
<td>3</td>
</tr>
</tbody>
</table>
# of questions included in the needs assessment on how best to engage communities

4

% of staff and volunteers working on the operation who have been briefed on CEA target

70%

Priority Actions:

Integrate CEA across the response so staff and volunteers have the knowledge and capacity to engage communities effectively by providing CEA in emergencies briefings;

Ensure the response is based on understanding of community needs, priorities and socio-cultural context, including preferred ways to receive information, participate and provide feedback and complaints, by integrating CEA into ongoing assessments;

Keep the community informed about operation plans, activities, progress, distribution process, selection criteria, their rights and entitlements;

Advertise the NS's hotline in distribution kits and strategically placed posters and banners;

Collect and respond to feedback and use it to guide the response. cultural context, including preferred ways to receive information, participate and provide feedback and complaints, by integrating CEA into ongoing assessments;

Keep the community informed about operation plans, activities, progress, distribution process, selection criteria, their rights and entitlements;

Advertise the NS's hotline in distribution kits and strategically placed posters and banners;

Collect and respond to feedback and use it to guide the response.

<table>
<thead>
<tr>
<th>Secretariat Services</th>
<th>Budget</th>
<th>CHF 15,000</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>Targeted persons</td>
<td>-</td>
</tr>
</tbody>
</table>

**Indicator**

Number of IFRC staff / surge deployment

2

**Priority Actions:**

IFRC will activate IM support to the RCSK with information collection and management.

IFRC will support PMER of the DREF implementation on the ground and feed in relevant expertise and standards where and when possible.

Monitoring and technical support (CVA, PGI, CEA/IM) from IFRC. IFRC is also planning the short term deployment of the Information Management (IM) support to assist the RCSK in
secondary data collection and analysis, developing maps and dashboards. IM support to the operation will include Geographic Information Systems (GIS) and mapping support to situational analysis; structure collection and analysis of secondary data to build descriptive analysis and covering reporting needs; and development of visual products and dashboard to support decision-making and reporting purposes.

In the early stage of the operation and to cover immediate data and information needs, an IM expert from the Regional Office for Europe will deploy to support the National Society including one field mission of an IM expert from the regional office at the initial stage, remote support during the DREF operation and 2nd in-country support through the deployment during the midterm of the DREF to support:

- Secondary data review and analysis with use of the IFRC analysis framework and the Data Entry and Exploration platform (DEEP).
- Development of base maps and thematic maps.
- Development of thematic dashboards to cover RCSK response activities.

Financial charges and FX loses are also included.

<table>
<thead>
<tr>
<th>National Society Strengthening</th>
<th>Budget</th>
<th>CHF 31,560</th>
</tr>
</thead>
<tbody>
<tr>
<td>Targeted persons</td>
<td></td>
<td>Enter number.</td>
</tr>
<tr>
<td>80</td>
<td></td>
<td>80</td>
</tr>
</tbody>
</table>

**Indicator**

<table>
<thead>
<tr>
<th># of NDRT members and RCSK key staff involved</th>
<th>Target</th>
</tr>
</thead>
<tbody>
<tr>
<td>80</td>
<td></td>
</tr>
</tbody>
</table>

| # of participants of the LLW | 40 |

**Enter indicator title.**

**Enter number.**

**Priority Actions:**

- Lessons learnt workshop to be conducted at the end of the DREF
- RCSK Finance Officer based in HQ

---

**About Support Services**

How many volunteers and staff involved in the response? Briefly describe their role.

As of 20 September 2022, the number of mobilized employees and volunteers has reached 71, using 6 cars and 6 trucks. Part of the team is located in Batken, the rest is spread in Leilek, Batken and Kadamjai districts. The staff and volunteers continue distributing food and non-food essential food items from the early days of the conflict.

Will surge personnel be deployed? Please provide the role profile needed.

IFRC plans to activate Information Management (IM) from the IFRC Regional Office for Europe.
If there is procurement, will it be done by National Society or IFRC?

IFRC expects the RCSK to lead procurement of items as per their and national procurement regulations. IFRC will ensure that the Federation’s procurement standards and procedures are duly adhered to.

How will this operation be monitored?

Monitoring and evaluation will be an integral part of the operation and will be carried out involving the assisted people and other stakeholders utilizing participatory approaches throughout the operation's timeframe. Regular internal operation updates (biweekly or monthly) will be developed by the implementing team of the RCSK Batken Branch, feeding to the RCSK headquarters and further distributed to key stakeholders as necessary.

Monthly financial and operation progress reports will inform of the key operation's achievements and planned activities for the next period. The reports will reflect the numbers of beneficiaries disaggregated by gender, age and disabilities if possible. Additionally, meetings with key stakeholders, performance reporting, field visits to follow progress on implementation of activities will be done on a regular basis. Furthermore, a beneficiary satisfaction survey will be done in line with the IFRC standards to find out about their satisfaction towards the services received by them from this DREF-supported operation. In addition, the RCSK will hold a lesson learnt workshop at the end of the operation to evaluate key achievements and challenges in order to improve the NS response operations in the future.

Please briefly explain the National Societies communication strategy for this operation.

The RCSK has experienced communications specialists at its headquarters in Bishkek, which has been sharing information on the crisis, its impact and actions undertaken and planned by the National Society and other stakeholders through various media outlets, including social media. The RCSK will continue to update population and stakeholders on the operation progress. Stories and photographs that depict the situation and response as well as challenges will continue to be shared both locally and internationally on different platforms, including through local mass media, social media, the RCSK and IFRC social media accounts among others. The operation’s communications strategy will focus on targeted people, their needs and challenges, as well as on preparation and risk reduction measures that can help earthquake prone communities to prepare for future disasters.

Contact Information

For further information, specifically related to this operation please contact:

**National Society Operational Coordination:**
- Guldar Kasymova, RCSK head of the DM department, g.kasymova@redcrescent.kg, +996 312 300 190

**IFRC focal point for the emergency:**
- Seval Guzelkilinc, Head of CCD for Central Asia, seval.guzelkilinc@ifrc.org

**IFRC Project Manager:**
- Nurlan Jumaliev, Programme Manager CCD for Central Asia, Nurlan.jumaliev@ifrc.org

**IFRC Regional Office for Europe:**
- Andreas von Weissenberg, Regional Head of Health, Disaster, Climate, Crisis, andreas.veisennberg@ifrc.org
- Agnes Rajacic, Senior DM officer, agnes.rajacic@ifrc.org
- Corrie Butler, Communications Manager, Corrie.Butler@ifrc.org
- For Logistics and Supply Chain: Stefano Biagiotti, Head of GHS&SCM STEFANO.BIAGIOTTI@ifrc.org

**In IFRC Geneva**
- Eszter Matyeka, Senior Officer, DREF, Eszter.Matyeka@ifrc.org
## Operating Budget

<table>
<thead>
<tr>
<th>Planned Operations</th>
<th>Amount</th>
</tr>
</thead>
<tbody>
<tr>
<td>Shelter and Basic Household Items</td>
<td>0</td>
</tr>
<tr>
<td>Livelihoods</td>
<td>0</td>
</tr>
<tr>
<td>Multi-purpose Cash</td>
<td>386,382</td>
</tr>
<tr>
<td>Health</td>
<td>34,080</td>
</tr>
<tr>
<td>Water, Sanitation &amp; Hygiene</td>
<td>0</td>
</tr>
<tr>
<td>Protection, Gender and Inclusion</td>
<td>4,793</td>
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<tr>
<td>Education</td>
<td>0</td>
</tr>
<tr>
<td>Migration</td>
<td>0</td>
</tr>
<tr>
<td>Risk Reduction, Climate Adaptation and Recovery</td>
<td>0</td>
</tr>
<tr>
<td>Community Engagement and Accountability</td>
<td>19,170</td>
</tr>
<tr>
<td>Environmental Sustainability</td>
<td>0</td>
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</table>

<table>
<thead>
<tr>
<th>Enabling Approaches</th>
<th>Amount</th>
</tr>
</thead>
<tbody>
<tr>
<td>Coordination and Partnerships</td>
<td>15,975</td>
</tr>
<tr>
<td>Secretariat Services</td>
<td>0</td>
</tr>
<tr>
<td>National Society Strengthening</td>
<td>36,806</td>
</tr>
</tbody>
</table>

**TOTAL BUDGET** 497,206

*all amounts in Swiss Francs (CHF)*