









UNICEF, UNFPA and UNODC JOINT PROGRAMME

'INVESTING IN A RESILIENT FUTURE OF KARAKALPAKSTAN BY IMPROVING HEALTH, NUTRITION, WATER, SANITATION, HYGIENE AND WELL-BEING OF ADOLESCENTS AND BY HARNESSING THE TALENTS OF YOUTH DURING AND AFTER COVID-19'

MPTF office generic final programme narrative report Reporting period: 1 January 2021 – 31 December 2022









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MPTF OFFICE GENERIC FINAL PROGRAMME NARRATIVE REPORT

Reporting period: 1 January 2021– 31 December 2022



This Joint Programme is funded by the UN Multi-Partner Human Security Trust Fund for the Aral Sea region in Uzbekistan, which is generously supported by the Government of Uzbekistan, Norway, Finland, the Republic of Korea, the European Union, Alwaleed Philanthropies, and Federal Republic of Germany.











MPTF OFFICE GENERIC FINAL PROGRAMME¹ **NARRATIVE REPORT** REPORTING PERIOD: 1 JANUARY 2021 – 31 DECEMBER 2022

Programme Title & Project Number	Country, Locality(s), Priority Area(s) / Strategic Results ²						
Programme Title: Investing in a re- silient future of Karakalpakstan by improving health, nutrition, water, sanitation, hygiene and wellbeing of adolescents and by harnessing the talents of youth during and after COVID-19 Programme Number (<i>if applicable</i>) MPTF Office Project Reference Number ³ : 00125228	 Country/Region: Uzbekistan/Karakalpakstan Priority area/ strategic results: UN Sustainable Development Cooperation Framework (UNSDCF) (2021-2025): Outcome 1. By 2025 all people and groups in Uzbekistan, especially the most vulnerable, demand and benefit from enhanced accountable, transparent, inclusive and gender responsive governance systems and rule of law institutions for a life free from discrimination and violence. Outcome 3. By 2025, youth, women and vulnerable groups benefit from improved access to livelihoods, decent work and expanded opportunities generated by inclusive and equitable economic growth. Outcome 4. By 2025, the most vulnerable benefit from enhanced access to gender-sensitive quality health, education and social services. Outcome 5. By 2025, the most at-risk regions and communities of Uzbekistan are more resilient to climate change and disasters, and benefit from increasingly sustainable and gender-sensitive efficient management of natural resources and infrastructure, robust climate action, inclusive environmental governance and protection. 							
Participating Organizations	Implementing Par	tners						
Organizations that have received direct funding from the MPTF Office under this programme: UNICEF, UNFPA, UNODC	 The Ministry of Health of the Republic of Uzbekistan and Karakalpakstan The Ministry of Preschool and School Education of the Republic of Uzbekistan and Karakalpakstan The International Innovation Center for the Aral Sea Basin under the President of the Republic of Uzbekistan 							
Programme/Project Cost (US \$)		Programme Duration						
Total approved budget as per project document: MPTF /JP Contribution ⁴: by agency • UNICEF • UNFPA • UNODC:	\$ 3,700,273 \$ 3,498,784 \$ 3,098,027 \$ 200,251 \$ 200,507	Overall Duration Start Date ⁵ Original End Date ⁶ Actual End Date ⁷ Have agency(ies) operationally closed the Programme in its(their) system? Expected Financial Closure date ⁸	24 months 21/12/2020 31/12/2022 31/12/2022 Yes No □ ■ December 2023					
Agency Contribution UNICEF in kind contribution UNFPA in kind contribution Government Contribution Other Contributions (donors) TOTAL:	\$ 201,489 \$ 7,360 \$ 0 \$ 0 \$ 3,700,273	Programme Final Assessment Evaluation Completed Yes No Date: 28.02.2023 Evaluation Report Attached Yes No Date: 28.02.2023						
Report Submitted By Name: Munir Mammadzade Email address: mmammadzade@unic		resentative Participating Organiza	tion (Lead): UNICEF					

¹ The term "programme" is used for programmes, joint programmes and projects.

[®] Financial Closure requires the return of unspent balances and submission of the Certified Final Financial Statement and Report.

² Strategic Results, as formulated in the Strategic UN Planning Framework (e.g. UNDAF) or project document.

³ The MPTF Office Project Reference Number is the same number as the one on the Notification message. It is also referred to as the "Project ID" on the project's factsheet page on the MPTF Office GATEWAY (*https://mptf.undp.org/*)

⁴ The MPTF/JP Contribution is the amount transferred to the Participating UN Organizations – see MPTF Office GATEWAY.

⁵ The start date is the date of the first transfer of funds from the MPTF Office as the Administrative Agent. Transfer date is available on the MPTF Office GATEWAY.

⁶ As per approval of the original project document by the relevant decision-making body/Steering Committee.

⁷ If there has been an extension, then the revised, approved end date should be reflected here. If no extension has been approved, then the current end date is the same as the original end date. The end date is the same as the operational closure date, which is when all activities for which a Participating Organization is responsible under an approved MPTF / JP have been completed. As per the MoU, agencies are to notify the MPTF Office when a programme completes its operational activities. Please see MPTF Office Closure Guidelines.

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LIST OF ACRONYMS ____

BLS	Basic life skills
GoU	Government of Uzbekistan
HCF	Health Care Facilities
HIV	Human Immunodeficiency Virus
HLS	Healthy Lifestyle
IICAS	International Innovation Center for the Aral Sea under the President of Uzbekistan
IoGT	Internet of Good Things
IPC	Infection Prevention and Control
M&E	Monitoring and Evaluation
MCH	Maternal and Child Health
MHH	Menstrual Health and Hygiene
МоН	Ministry of Health
MPSE	Ministry of Preschool and School Education
MPHSTF	Multi-Partner Human Security Trust Fund for the Aral Sea Region in Uzbekistan
OB/GYN	Obstetrics and Gynaecology
PD	Presidential Decree
PHC	Primary Health Care
PUNO	Participating United Nations Organizations
RoK	Republic of Karakalpakstan
RoU	Republic of Uzbekistan
SDGs	Sustainable Development Goals
STI	Sexually Transmitted Infections
SWASH	School Water, Sanitation and Hygiene
TMA	Tashkent Medical Academy
ТОТ	Training of Trainers
UNDAF	United Nations Development Assistance Framework
UNSDCF	United Nations Sustainable Development Cooperation Framework
UNFPA	United Nations Population Fund
UNICEF	United Nations Children's Fund
UNODC	United Nations Office on Drugs and Crime
WASH	Water, Sanitation and Hygiene
WHO	World Health Organization

EXECUTIVE SUMMARY

This final report summarizes the key achievements of the Joint Programme 'Investing in a resilient future of Karakalpakstan by improving health, nutrition, water, sanitation, hygiene and wellbeing of adolescents and by harnessing the talents of youth during and after COVID-19', covering the 24 months of programme implementation. With a focus on the target districts of Muynak, Kungrad and Bozatau, the Joint Programme has sought to achieve the interrelated objectives of strengthening the health and nutrition of adolescents, improving access to and quality of health care facilities, and empowering young people to be productive citizens and positive agents of change in both their communities and the broader region. The Programme has assisted the most vulnerable children, adolescents and young people of the three targeted districts.

This Programme has been implemented by joining the efforts and comparative advantages of UNICEF, UNFPA and UNODC. Key national partners include the Ministry of Health, the Ministry of Preschool and School Education, the International Innovation Center for the Aral Sea under the President of Uzbekistan, and the Agency for Innovative Development under the Ministry of Digital Technologies of the Republic of Uzbekistan and Karakalpakstan. This final report details the positive impacts achieved and challenges faced during the Programme's implementation, best practices applied, and key lessons learned. Some of the project's major accomplishments include the following:





Over **700 teachers** (100 per cent of target) and **27,535 school-aged children** (13,943 boys and 13,592 girls – 100 per cent of target) benefiting from a healthy and enabling education environment at **15 schools**. They have received **access to WASH services**, helping them to apply healthy hygiene, Menstrual Health and Hygiene (MHH) and sanitation practices, and thereby reducing water-borne and intestinal infections.

131,000 adolescent girls aged 10-17 in all districts of the Republic of Karakalpakstan received iron and folic acid supplementation (100 per cent coverage), which prevents anaemia amongst adolescent girls. Two rounds of a deworming campaign were organized covering 40,000 school children in five districts of the Republic of Karakalpakstan, which reduced the incidence rate of intestinal helminthiases among children from 12.6 per cent to 1.7 per cent.





1,076 teachers (265 men and 811 women), 832 parents (155 men and 677 women), 1,652 school children (654 boys and 998 girls) and 123 community volunteers (62 men and 61 women) enhanced their capacity on health topics, including WASH, MHH, nutrition, reproductive health, healthy lifestyles, HIV and STI prevention. In particular the 'Family UNited' programme worked with 1,660 families to enhance their basic life and family skills.

124 school psychologists in all districts of Karakalpakstan have increased their capacities and obtained customized teaching and learning materials, as needed to equip adolescents with socioemotional skills so they can be more resilient and effectively manage adverse life circumstances and events.



30,000 active users have been reached with local content on health topics developed for school children through the '**IoGT'** (**Internet of Good Things**) **platform**. The website was launched on 28 September 2022.



178 young people aged 15 to 24 years old (85 boys and 93 girls) have been **equipped with social and entrepreneurship skills** through the social innovation and social entrepreneurship programme UPSHIFT. 33 youth-led projects have received mentoring and seed funding, and six youth-led projects have already been successfully launched and have started bringing income to their founders.

10,000 healthcare workers and **130,000 people** have received **access to improved WASH services**, which have enhanced the overall health

service delivery conditions in 20 health care facilities. By improving

WASH services at these facilities, and enhancing health care waste

management at three district hospitals, alongside establishing







telecommunication and telemedicine services, the Programme raised the population's satisfaction with health care services from 41 per cent to 70 per cent. Likewise, the referral rate to health care facilities increased to 20 per cent. 659 health care workers (621 women) have improved their capacity on WASH in Health Care Facilities and Infection Prevention and Control topics. 1,589 healthcare professionals enhanced their

on WASH in Health Care Facilities and Infection Prevention and Control topics. 1,589 healthcare professionals enhanced their knowledge of child health and home visiting topics, through nine distance learning courses. The Knowledge Hub has been launched for the online education of health professionals.

All **28 health care facilities have telecommunication equipment, binocular microscopes and laboratory supplies**. Three types of telemedicine equipment have been delivered and installed at two republican and three district hospitals, which has created opportunities for local health professionals to conduct teleconsultations with specialists at regional medical centres. The Joint Programme reached key milestones. UNICEF completed the construction of WASH infrastructure at 15 schools and 20 health care facilities, and developed WASH Sustainability Plans at 20 health care facilities. The Joint Programme provided deworming medication to 40,000 children aged 7-14, and micronutrient supplementation to 131,000 adolescent girls aged 10-17. The IoGT platform was launched, providing access to evidence-based knowledge resources on health and social topics for over 30,000 users. UNFPA trained 9,843 teachers and 123 volunteers on teaching on the topics of healthy lifestyles, reproductive health and related matters - all information was disseminated to 14,287 adolescents. Likewise, UNFPA developed and translated knowledge materials and programmes on peer education, making these available to schoolteachers, students and parents.

I. PURPOSE

The Government of Uzbekistan (GoU) has been improving adolescent/youth health in regions affected by environmental concerns, including Karakalpakstan, by addressing the population's immediate social and health security issues.

The overall goal of the Joint Programme (JP) is to address the immediate needs of vulnerable populations, including adolescents, in terms of providing safe and clean schools and health care facilities, meeting other health and nutrition needs, and strengthening human capital and youth resilience through expanding opportunities for social innovation skills development, in three districts (Muynak, Kungrad and Bozatau). The implementing United Nations agencies are taking a gender-transformative, disability inclusive, integrated and complementary approach, intended to cover multiple health and social security dimensions of adolescents and youth in target districts, including with a focus on the needs of adolescent girls.

The Programme interventions contribute to the United Nations Sustainable Development Cooperation Framework (UNSDCF) (2021-2025) Outcome 3, and to the SDGs 1 (End Poverty), 3 (Good Health and Wellbeing), 4 (Quality Education), and 6 (Clean Water and Sanitation). This has been achieved through enhancing the capacity of health care and education professionals, and equipping health facilities with medical and telemedicine equipment, conducting micro-nutrient supplementation programs, and improving WASH facilities at schools and health care facilities.

The expected outcomes of this Joint Programme include safe and clean schools and health facilities, improved accessibility and quality of health care systems in rural areas (through introducing telecommunication and telemedicine), greater adoption of gender-sensitive and inclusive healthy lifestyles, enhanced socio-emotional skills, and better human security of the Aral Sea region, with a particular emphasis on adolescents and youth. These outcomes align with the Multi-Partner Human Security Trust Fund for the Aral Sea Region in Uzbekistan (MPHSTF) Results Framework Outcome 4: Overall health of the local population is improved, and healthy lifestyle is promoted.

II. ASSESSMENT OF PROGRAMME RESULTS

i) NARRATIVE REPORTING ON RESULTS

OUTCOME 1. By 2022 adolescents (boys and girls) in three districts of the Republic of Karakalpakstan, especially the most vulnerable have improved health and nutrition status

Over 130,000 children and adolescents have benefited from improved health and nutrition. Specifically, the JP constructed WASH facilities at 15 selected schools of three target districts (100 per cent of the target). Additional-

ly, the JP reached 131,000 adolescent girls in all districts of the Republic of Karakalpakstan (100 per cent coverage) with iron and folic acid supplementation. The Programme reduced the incidence rate of intestinal helminthiases among children from 12.6 per cent to 1.7 per cent, through two rounds of a deworming campaign which covered 40,000 school children in five districts of the Republic of Karakalpak-Moreover, over 1,076 schoolteachstan. ers (265 men and 811 women), 832 parents (155 men and 677 women) and 1,652 school children (654 boys and 998 girls) from all 82 schools (3.1 per cent) in the three target districts have improved knowledge on health topics, including WASH, nutrition, healthy lifestyle, reproductive health, HIV and STI, and 'Family UNited' programme topics.



Sanitation facilities, School # 7, Kungrad district



Hand washing facilities, School # 3, Muynak district

OUTPUT 1.1. The Ministry of Public Education, and local school management teams are supported to establish sustainable access to water, sanitation, and hygiene services (WASH)

The programme improved WASH services benefiting over 700 school staff and 27,535 school children (13,943 boys and 13,592 girls) in 15 schools of three target districts, considering climate-resilient, gender and age sensitive, disability inclusive, accessible and innovative WASH/MHH solutions. These solutions include the use of solar panels as alternative energy sources, the use of reverse-osmosis systems to purify underground water, safe hygiene rooms in sanitation facilities to meet the MHH needs of adolescent girls, and the creation of water reservoirs in rural areas with limited water supply. In addition, hygiene items including toilet paper, sanitary pads and cleaning items have been delivered to all 15 schools.

To address challenges related to access to running water, indoor toilets and sewage systems at schools, UNICEF introduced the water, sanitation and hygiene (WASH) programme at 15 public schools in the Bozatau, Muynak and Kungrad districts. Jointly with district representatives of the Ministry of Preschool and Secondary Education of the Republic of Karakalpakstan, the programme team assessed the current situation of WASH facilities in 82 schools of three target districts, and selected the 15 most vulnerable schools requiring immediate action in terms of construction and reconstruction works. With the intention of fostering an integrated area-based approach, all PUNOs have made their interventions at those selected schools.

OUTPUT 1.2. Local healthcare workers have enhanced capacity and resources for universal deworming treatment and micronutrient supplement of school children in three districts

The average incidence of intestinal helminthiases has decreased from 12.6 per cent to 1.7 per cent, due to the positive effect of UNICEF's support in organizing two rounds of a deworming campaign. Specifically, a final assessment of the prevalence of helminthiasis and micro-



Soil-Transmitted Helminthiasis assessment

nutrient deficiencies was conducted among 2,191 school children (including 1,130 boys and 1,061 girls from grades 1-4), at 15 selected schools of the three target districts (100 per cent coverage of the targeted age group). More incidences were observed in the Kungrad district (1.9 per cent compared to 15.6 per cent of the baseline study), while fewer were observed in the districts of Muynak (1.5 per cent compared to 11.5 per cent of the baseline study) and Bozatau (1.5 per cent compared to 5.5 per cent of the baseline study). Of 38 infected cases, 17 cases (44.7 per cent) were diagnosed as enterobiasis, and 21 cases (55.3 per cent) were hymenolepiasis. Based on assessment outcomes, health care workers from target districts have been instructed to undertake mass deworming among children of grades 1-4, and the diagnosis and treatment of contacts at home.

UNICEF delivered five million doses of iron and folic acid tablets and 80,000 doses of albendazole tablets to the MoH of Karakalpakstan, for further distribution among target beneficiaries, namely children and adolescent girls. UNICEF covered 39,370 school children between the ages of 7 and 14 in the 5 selected districts with two deworming campaigns. Specifically, a core team of 48 trainers from five districts, including Muynak, Kungrad, Bozatau, Karaozek and Takhtakopir, have improved their capacities to implement mass deworming campaigns. The core team further disseminated their knowledge to 441 health care workers, 136 school deputy directors, 131 school nurses, and PHC visiting nurses in those five districts through two rounds (achieving 100 per cent coverage), all being staff directly engaged in the deworming process.

The Programme reached 131,000 adolescent girls aged 10 to 17 years (100 per cent of the target) in the Republic of Karakalpakstan. Through the iron and folic acid supplementation programme conducted in May 2022, a core team of 72 health care workers from Nukus City and 16 districts improved their capacities regarding the supplementation programme and proper nutrition topics. Additional field trainings reached 226 health care workers (100 per cent of the target) in the Kungrad, Muynak and Bozatau districts. The pro-



Supplementation campaign in Kungrad district, PHC Ornek

gramme developed and distributed 400 training manuals, 202,000 leaflets and 400 posters in Karakalpak and Uzbek languages.

OUTPUT 1.3. Adolescent in

Karakalpakstan can access information on evidence-based health education information and practices in Karakalpak, Uzbek, and Russian languages from online web portal, social media and mobile app

1,652 adolescents from 82 schools in three target districts (3.1 per cent) have accessed information on evidence-informed health education and practices. Specifically, UNICEF jointly with the Regional Center on Advanced Training for Teachers of the Republic of Karakalpakstan developed training modules for teachers and parents in the Karakalpak language on WASH, Soil-Transmitted Helminthiasis (STH) infections, and Anaemia Prevention. A core team of trainers further trained 1,076 teachers and 832 parents. All educational materials were uploaded to IoGT, and made available to teachers and adolescents. UNICEF launched the Internet of Good Things (IoGT) on 28 September 2022, which has since then reached 30,000 active users. IoGT is a set of resources promoting better and healthier living. It is a UNICEF-led initiative undertaken in over 60 countries and territories worldwide, helping bridge the digital divide and build knowledgeable societies. IoGT provides access to lifesaving and life-enhancing information, and has been made free to access in Uzbekistan by UCELL - at https://uz.goodinternet. org/uz/sections/sorovnomadan-oting/. To use the Internet of Good Things in Uzbekistan for free, one must have a UCELL SIM card.

Through information provided via the IoGT, young people, parents and caregivers, medical providers, teachers and communities can build skills, access emergency information, and be empowered to make more informed decisions regarding health, ending violence, HIV/AIDS prevention, safe internet skills, positive parenting, environmental protection, and many other matters. The resources they can access through the IoGT include videos, FAQs and COVID-19 information.



WASH trainings for teachers and parents in Muynak district

The IoGT web content is comprised of 2,250 pages of information, more than 500 articles divided into 16 categories, and 25 videos, all containing lifesaving, evidence-based information.

The Ministry of Health, the Ministry of Interior (MoI), the Ministry of Preschool and School Education, and the Association of Medical Students of the Youth Agency of Uzbekistan, have developed a joint road map. The Inter-Agency Task Force has developed gender-sensitive and age-appropriate content and video materials in local languages, following the IoGT promotion plan.

To sustain and support teachers in conducting sessions for school children, the Republican Center of Advanced Training for Teachers under the Ministry of Preschool and School

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A resource webpage template for teachers on reproductive health, family planning, healthy lifestyle, and HIV and STI prevention

Education of the Republic of Karakalpakstan has developed a special online platform that will provide gender-sensitive information and video materials for teachers and youth leaders about reproductive health, HLS and HIV/ STI prevention. A digital forum, allowing for the submission of messages and raising questions, is included in the platform. Ob&Gyn experts, and specialists from the Reproductive Health Center and the Dermatological Center, are engaged in responding to these questions.

OUTPUT 1.4. Ministry of Public Education in Karakalpakstan has enhanced capacity to deliver family skills training programme

1,660 families from 61 schools of the target districts have improved their skills in normalising and managing stress related to family and school problems, such as teenagers having difficulty with homework, conflicts with peers, lack of money, or disagreements between family members. They have also been sup-



"Family UNited" Training for facilitators



UNODC/MPSE RoK national round table

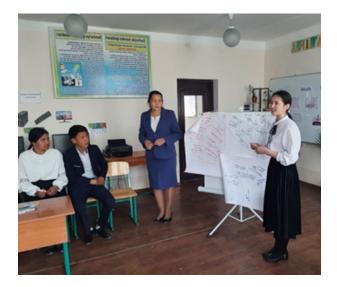
ported in improving their mental health, making positive and healthy adjustments to peers, and improving their communication and family relationships.

UNODC trained 92 facilitators (psychologists and teachers) through the family skills training programme 'Family UNited' in Nukus (Republic of Karakalpakstan), for further scaling up its implementation in three pilot districts of the Republic of Karakalpakstan (Kungrad, Muynak and Bozatau).

The results of piloting the 'Family UNited' training programme in three pilot districts of the Republic of Karakalpakstan were presented at a national round table. National counterparts and partners discussed possible ways to ensure the program's sustainability in the region. Possible mechanisms for scaling up and ensuring the sustainability of the programme's implementation in the Republic of Karakalpakstan were agreed upon. **OUTPUT 1.5**. Secondary school staff (biology teachers, Adolescent Union leaders, etc.) and adolescents have increased capacity to develop and deliver life/transferrable, health and soft skills programmes

One hundred schoolteachers have improved their knowledge and skills in teaching topics on reproductive health, HLS, HIV and STI prevention, through three 5-day trainings organized by UNFPA. Over 700 teachers, parents and students improved their knowledge on reproductive health issues through cascade trainings conducted by trained teachers. To support the cascade trainings, trainers from the Center of Advanced Training for teachers conducted more than 25 monitoring visits to the pilot districts.

More than 9,025 teachers attended sessions on reproductive health, family planning, HIV/ STI prevention, and healthy lifestyle, as part of the mandatory advanced training courses, and 3,229 teachers attended 129 workshops organized by the center on the same topics.





Information session run by trained teacher for school children

Information session run by volunteer in makhalla

14,287 adolescents (8,167 girls) learned about these topics from youth leaders during peerto-peer sessions conducted at three selected districts. 123 volunteers, including youth leaders and school psychologists, have improved their knowledge and skills on how to share information on reproductive health, healthy lifestyles, prevention of HIV and STIs, family planning and other matters.

UNFPA supported development of a series of methodological and informative brochures in three languages for teachers, students and parents. The brochures are approved to be part of 'extra-curricular hour' topics supported by UNFPA. Video materials and guidelines were uploaded to tablets, and these were distributed among trained volunteers for conducting gender-sensitive information sessions for peers in schools. **OUTPUT 1.6.** Adolescents/youth, with the focus on the most in need, are equipped with socio-emotional skills to manage life in a healthy and productive manner

In partnership with the 'Tashkhis' Republican Center, UNICEF customized the 21st Century (socio-emotional) Skills programme and adapted it for integration into school curriculum. The programme was piloted in 15 schools of the target district and 307 school children were equipped with socio-emotional skills. The pilot assessment demonstrated very good results and interest in the programme, both from school psychologists and from adolescents. Psychologists reported on improved discipline in classes, better relations among the peers, and greater interest in classes with psychologists. Adolescents reported on improved relations with family members and peers. As a result, an additional 104 psychologists from all districts of Karakalpakstan (out of a total 124) were trained to deliver the BLS programme. The decree on integration of the Life Skills programme into school curricula is awaiting approval by the Minister of Preschool and School Education of the Republic of Uzbekistan.

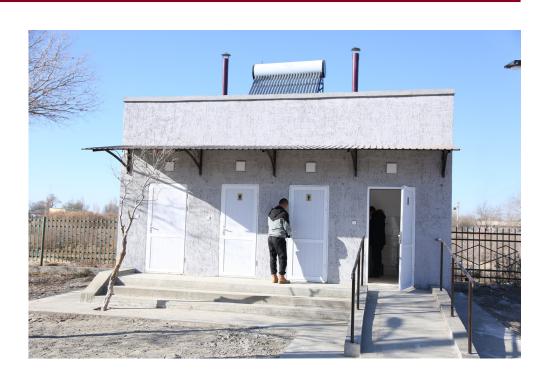
OUTCOME 2. By 2022, the population in three districts of RoK, especially the most vulnerable, has improved access to quality health care service

10,000 health care workers and 130,000 members of the population (100 per cent of the target) have access to improved WASH services through better WASH infrastructure installed at 20 health care facilities, while health care waste management facilities have been established at three district hospitals. The Programme improved the population's satisfaction with health care services from 41 per cent to 70 per cent, while the rate of referral to health care facilities increased from 100,000 to 120,000 people.

OUTPUT 2.1. Health care facilities have improved water supply, sanitation, hygiene materials and appropriate waste segregation

Before the Joint Programme's interventions, health care facilities in the three target districts lacked regular water supplies, sanitation and hygiene facilities inside buildings. Through the WASH programme, UNICEF improved access to a steady water supply within the selected health care facilities, benefiting 130,000 people. The improved water access was complemented by sanitation and hygiene supplies.

Jointly with representatives of District Medical Associations, the programme team studied the situation of health care facilities (HCFs) regarding access to WASH facilities, and selected 20 facilities for WASH facility construction and reconstruction works. The Programme conducted a baseline assessment of WASH facilities in all 28 health care facilities of the three target districts. Assessment findings found that 2 out of 3 HCFs have limited water, sanitation and health care waste services. while 3 out of 3 HCFs have limited environmental cleaning and management services at the district level. At the Primary Health Clinics (PHC) level, more than 75 per cent of HCFs have limited sanitation, health care waste processing and hand hygiene services. All HCFs (100 per cent) have limited environmental cleaning and management services.



Sanitation facility at PHC Suwenli, Kungrad districtt

The Programme improved WASH services for 130,000 people at 20 health care facilities through climate-resilient, gender-targeted, disability inclusive, accessible and innovative solutions. These solutions include using solar panels as alternative energy sources, using reverse-osmosis systems to purify underground water, and creating water reservoirs in rural areas with limited water supply, as well as establishing safe hygiene rooms to meet the MHH needs of women. In addition, hygiene items including toilet paper, sanitary pads and cleaning items were delivered to all 20 health care facilities. Moreover three district hospitals were equipped with health care waste management facilities.

The Joint Programme enhanced the capacity of 244 district and primary health care workers (232 women) on Infection Prevention and Control, covering internal infection control mechanisms, prevention of nosocomial infections, management of epidemiological situations with acute intestinal infections including water-borne infections, diarrhoea, typhoid fever and shigellosis, and impacts of the COVID-19 pandemic. Practical sessions were also provided on properly wearing personal protective equipment, measuring body temperature, and disinfecting premises.

The Programme enhanced the capacity of 415 health care workers (389 women) from the 3 target districts. All 3 district hospitals and 25 PHCs developed WASH Sustainability Plans. UNICEF conducted supportive supervision visits to four primary health care facilities in each district, to follow up on implementing the WASH Sustainability Plan and addressing issues related to the operationalisation of WASH FIT tools in health care facility settings.

OUTPUT 2.2. Established telemedicine and distance learning system between primary, secondary and tertiary level facilities

Thirty sets of distance learning equipment for district and rural HCFs have been delivered. In addition, three types of telemedicine equipment have been delivered and installed for two republican and three district-level hospitals in Karakalpakstan. As a result, district and pri-



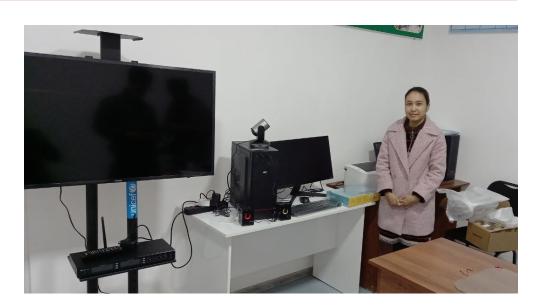
Healthcare waste management facility at the Kungrad District Medical Association



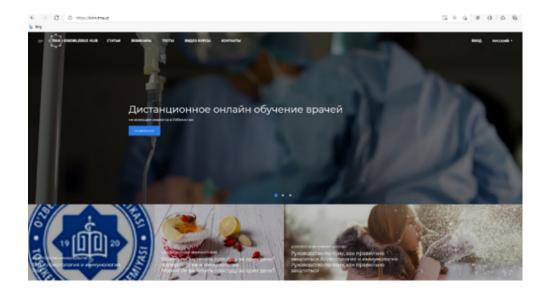
IPC training for HCWs from Muynak district

mary health care facilities have conducted teleconsultations with specialists from regional medical centers, and organized distance learning courses.

UNICEF developed a knowledge hub (bilim. tma.uz), which will serve as a one-stop digital platform for communication, information sharing, and a repository for training materials and resources on health topics for the country's health care workers. A web-based platform (bilim.tma.uz) was developed, and UNICEF agreed with the Tashkent Medical Academy to host and maintain the platform in the future. A team of faculty members and students developed online courses, wrote articles, and enhanced online courses with graphics and visual aids. All courses have been translated into Uzbek, Russian and Karakalpak languages, to ensure equitable access for all the country's health care workers.



Telecommunication equipment in PHC Ali Awil, Muynak district



Knowledge hub platform

In addition, 1,589 healthcare professionals participated in nine online courses on child health, nutrition, primary health care services, and home visiting.

OUTPUT 2.3. PHC facilities in three districts have improved WASH and infection control

130,000 people have access to improved diagnosis and treatment of intestinal infections. Specifically, UNICEF has provided 28 PHC and 3 District Laboratories of the Republican Center of Sanitary and Epidemiological Welfare with binocular microscopes for STH diagnostics. Additionally, laboratory consumables and reagents have been procured and delivered to all laboratories of the 28 health care facilities followed by capacity building events on laboratory diagnostics of helminthiasis.



Training on 'Laboratory Diagnostics of STH' OUTCOME 3. By 2022 the Government and the Youth Union in Karakalpakstan support, empower and engage young people, including the most vulnerable, as productive citizens and positive agents of change in their communities and the region

The Programme has supported 178 school children and youth by improving their basic life skills and empowering their potential as agents of positive change in their communities, by organizing capacity building interventions and boot camps to equip them with social and entrepreneurship skills, and by funding social start-up projects.

Output 3.1. Equipping young people, especially the most vulnerable and marginalized, with social innovation and life skills, as well as social and entrepreneurship support

In The Programme developed 50 methodological guidelines for teachers in three languages, along with eight booklets and ten brochures for parents and children on reproductive health, healthy lifestyles, family planning and HIV/STI prevention, in three languages. Six videos on HIV/STI prevention for children and youth were developed in two languages, and posted on UNFPA websites and media channels. To sustain the project work's results, materials on reproductive health, healthy lifestyles and family planning (including early pregnancy and contraception), were presented to the MPSE for inclusion in school curricula and textbooks.

Over 2021-2022, UNICEF supported the International Innovation Center for the Aral Sea (II-CAS) in conducting six bootcamps on the social innovation and social entrepreneurship programme UPSHIFT (locally called 'Imkon-Lab') for young people from the three target districts. The team managed to engage young people with disabilities, youth not in education, employment or training (NEET), and other vulnerable groups. In total 178 young people aged 15-25 years (93 girls and 85 boys), were equipped with social and entrepreneurship skills. Thirty-three youth-led projects were



Leaflet for school students on healthy nutrition



Team BJJ with their highly nutritious feed for poultry

supported through mentoring and seed-funding. Six youth-led projects were successfully incubated and started bringing income to their founders, including the following:

- Recycling glass bottles into decorative tiles and souvenirs;
- Producing highly-nutritious feed for poultry;
- Teaching children with visual impairments to read and write in Braille;
- Making souvenirs from plastic bottles;
- Producing silage for cattle;
- Water-saving installation.

Two other projects – a hybrid water pump and the production of pavement tiles from plastic bottles – received additional funding for acceleration from the Start-Up programme, of \$3,000 and \$2,000, respectively. Two teams participated in the global 'Generation Unlimited' youth innovation challenge, and one team – producing highly-nutritious feed for poultry – was chosen within the top 30 of 71 teams from over 30 countries around the world. Additionally, two UPSHIFT teams were invited to present their projects at the Youth Climate Forum in Tashkent, and three teams took part in InnoWeek in August 2022.

ii) INDICATOR BASED PERFORMANCE ASSESSMENT

Using the **Programme Results Framework from the Project Document / AWPs** – provide details of the achievement of indicators at both the output and outcome level in the table below. Where it has not been possible to collect data on indicators, clear explanations should be given explaining why.

Expected Results	Indicator Description	Baseline		Target		Achieved Indicator	Reasons for Variance from Planned Target	Source of
(outcomes & outputs)		Value	Year	2021	2022	Targets	(if any)	Verification
Outcome 1. By 2022 adolescents (boys and girls) in three districts of the Republic of Karakalpakstan, espe- cially the most vulner- able, have improved health and nutrition status	Number of girls aged 10-17 provided with iron and folic acid sup- plements	0	2020	10,000	10,000	131,000		Project Report/ Semi- annually
	Number of schools providing evidence- based health and nutri- tion education as part of their curricula	0	2020	40	82	82		Project Report/ Semi- annually
OUTPUT 1.1. The Ministry of Public Education, and local school	Number of secondary schools with improved WASH facilities	0	2020	5	15	15	The costs of con- struction increased, and the programme budget was revised to reflect these changes in costs, which has been sub- sequently approved	Project Report/ Semi- annually
management teams, are supported to estab- lish sustainable access to water, sanitation, and hygiene services	Number of schools with toilets that ensure pri- vacy and safety, meet- ing the needs of wom- en and girls	0	2020	5	15	15		
(WASH)	Number of WASH inno- vations implemented	0	2020	1	2	2	in the Project Board meeting minutes.	

Expected Results	Indicator Description	Baseline		Та	rget	Achieved Indicator	Reasons for Variance from Planned Target	Source of
(outcomes & outputs)		Value	Year	2021	2022	Targets	(if any)	Verification
OUTPUT 1.1	Number of investments in local infrastructure, with support of the MPHSTF – US\$ million	TBD after UNDP/ UNESCO Pro- ject Report submission for 2020	2020	\$0.30 (US\$ 300,000)	\$0.48 (US\$ 480,000)	\$0.689		
OUTPUT 1.2. Local healthcare workers have enhanced capac- ity and resources for universal deworming treatment and micro- nutrient supplement of school children in three districts	Percentage of school children who are STH infected	12.6 per cent (baseline is based on JP assessment in Dec 2021)	Dec 2021	12.6 per cent (baseline study, Dec 2021)	7 per cent (de- worming on STH by half)	1.7 per cent (final study, Nov 2022)		MoH stats/ Annually up- dated report on STH lab diagnostics
	Number of children de- wormed	0	2020	26,000	26,000	40,000	Deworming tablets were procured as per the planned budget and were sufficient to cover 40,000 school chil- dren from five dis- tricts. Thus, an addi- tional two districts were included.	Project Report/ Semi- annually
	Number of health and education workers trained to provide anae- mia prevention, adoles- cent nutrition support and counselling ser- vices	0	2020	100	300	2,534 (1,076 teachers, 832 parents, 626 HCWs)	The programme trained 300 core trainers, who further disseminated know- ledge through cascade trainings in their schools.	Project Report/ Semi- annually

Expected Results	Indicator Description	Baselir	ne	Tar	get	Achieved Indicator	Reasons for Variance from Planned Target (if any)	Source of Verification
(outcomes & outputs)	indicator Description	Value	Year	2021	2022	Targets		
OUTPUT 1.3. Adoles- cents in Karakalpak- stan can access infor- mation on evidence- based health education information and prac- tices in Karakalpak, Uzbek, and Russian languages, from an online web portal, social media and mobile app	Number of videos on health-related topics in Karakalpak, Uzbek and Russian languages for children and adoles- cents	0	2020	5	10	12		Project Report/ Semi- annually
	Number of health-re- lated questions from the public answered by health experts, with re- sponses posted online	0	2020	150	200	200		Project Report/ Semi- annually
	Availability of an online web-adapted teach- er's manual on healthy lifestyles in Karakalpak language	0	2020	1	1	1		URL/A Semi- annually
	Number of teachers and community activ- ists trained in SWASH, micronutrient supple- mentation, and de- worming counselling	0	2020	200	400	1,908 (1,076 teachers, 832 parents)	The programme trained 400 core trainers, who fur- ther disseminated knowledge through cascade trainings at their schools.	Training Report/ Semi- annually
	Sustainability plan adopted by local authorities	0	2020	1	1	1		Project Report/ Semi- annually

Expected Results	Indiactor Description	Baseline		Та	rget	Achieved Indicator	Reasons for Variance from Planned Target	Source of
(outcomes & outputs)	Indicator Description	Value	Year	2021	2022	Targets	(if any)	Verification
OUTPUT 1.4. The Ministry of Pub- lic Education in Kar- akalpakstan has an enhanced capacity to deliver family-skills training programme	Number of family mem- bers (adolescents and parents) covered by family-skills training programme	0	2020	60	1,500	1,660		Training Reports / Annually
	Number of trained facil- itators	0	2020	30	70	92		Training Report/ Semi- annually
OUTPUT 1.5. Secon- dary school staff (biology teachers, Adolescent Union lead- ers etc.) and adoles- cents have increased capacity to develop and deliver life/transfer- rable, health and soft skills programmes	Number of school- teachers and adoles- cent leaders trained to use a peer-to-peer methodology	0	2020	60	120	818		Training Report / Annually
	Number of peer educa- tors trained	15	2020	80	160	123 (62 male and 61 female)	With four trainings planned, it was not possible to bring together 160 volun-	Training Report/ Semi- annually
	Number of adolescents reached by peer educa- tors over two years	0	2020	5,000	10,000	14,287 (8,167 girls) of grades 6-11	teers to ensure quality training.	Project Report/ Semi- annually

Expected Results	Indicator Description	Baselir	າຍ	Tar	get	Achieved Indicator	Reasons for Variance from Planned Target	Source of
(outcomes & outputs)		Value	Year	2021	2022	Targets	(if any)	Verification
OUTPUT 1.6. Adoles- cents/youth, with the focus on the most in need, are equipped with socio-emotional skills to manage life in a healthy and productive manner	Number of adolescent girls and boys, aged 15 to 24 years, having completed the socio-emotional skills development programme	0	2020	100 (at least 50 per cent girls and young women)	300 (at least 50 per cent girls and young women)	307 ado- lescents aged 15- 18 (122 boys and 185 girls)	To ensure higher coverage and pro- gramme sustainabil- ity, a decision was made to work in schools with school psychologists. As such, the target audience was limited to children aged 15-18.	Field mon- itoring vis- its/ partner reports; Reports of the school psycholo- gists, ob- servation by the UNICEF national consultant
	Number of youth work- ers and psychologists trained to equip young people with socio-emo- tional skills	0	2020	20	30	119		Training reports/ Semi-annu- ally / ToT re- port of the UNICEF na- tional con- sultant
OUTCOME 2. By 2022, the population in three districts of RoK, espe- cially the most vulner- able, has improved ac- cess to quality health care service	Percentage of the population satisfied with WASH conditions in target health care facilities	0	2020	Satisfac- tion survey conduct- ed in Nov 2021 iden- tified a 41 per cent baseline	41 per cent	70 per cent		Assessment Report/ Semi- annually

Expected Results	Indiantan Deparintian	Baselii	าย	Tar	get	Achieved	Reasons for Variance from Planned Target	Source of
(outcomes & outputs)	Indicator Description	Value	Year	2021	2022	Indicator Targets	(if any)	Verification
OUTCOME 2	Percentage increase of inpatient visits to primary health care facilities	0	2020	100,000 visits in 2020 (ad- ministra- tive data provided by district health care authori- ties)	100,000 visits (ad- ministra- tive data provided by district health care au- thorities)	120,000 visits (ad- ministra- tive data provided by dis- trict health care au- thorities)		Assessment and Project Reports/ Semi-annu- ally
care facilities have improved water supply, sanitation, hygiene materials and appropriate waste segregation in local struct of the million waste segregation.	Number of investments in local health infra- structure with support of the MPHSTF - million US\$	0.25	2020 Project report by UNICEF/ UNFPA on the first- round project	\$0.25 (US\$ 250,000)	\$0.50 (US\$ 500,000)	\$0.897	The costs of con- struction increased, and the programme budget was revised to reflect the chang- es in costs, which has been subse- quently approved by the MPHSTF Steer- ing Committee in the amendment of the Project Docu- ment.	Project Report/ Semi- annually
	Number of medical institutions with im- proved WASH services	0	2020	10	20	20		
	Number of medical in- stitutions with toilets en- suring privacy and safe- ty meeting the needs of women and girls	0	2020	10	20	20		

Expected Results	Indicator Description	Baseline		Таг	Target		Reasons for Variance from Planned Target	Source of
(outcomes & outputs)	mulcator Description	Value	Year	2021	2022	Indicator Targets	(if any)	Verification
OUTPUT 2.1. Health care facilities have im- proved water supply, sanitation, hygiene ma- terials and appropriate waste segregation	Number of standards and policies for WASH in health care facili- ties developed and re- viewed, and having spe- cific gender markers	0	2020	2	3	3		Project Report/ Semi- annually
	Number of health care providers trained on WASH, IPC and WASH FIT (disaggregated by sex and residence)	0	2020	400	650	659		Training Report/ Semi- annually
	Number of WASH inno- vations implemented	0	2020	2	2	2		Project Report/ Semi- annually
	Number of supportive supervision visits con- ducted to train health care providers	0	2020	At least 1	At least 2	2		Field visit Reports/ Semi- annually
OUTPUT 2.2. Estab- lished telemedicine and distance learning sys- tem between primary, secondary and tertiary level facilities	Number of medical in- stitutions with function- ing telecommunication equipment	0	2020	10	35	35		Project Report/ Semi- annually

Expected Results		Baselir	าย	Та	rget	Achieved Indicator	Reasons for Variance from Planned Target (if any)	Source of
(outcomes & outputs)	Indicator Description	Value	Year	2021	2022	Targets		Verification
OUTPUT 2.2. Estab- lished telemedicine and distance learning sys- tem between primary,	Regulatory framework for telemedicine is de- veloped and approved	No	2020	Yes	Yes	Yes		Project Report/ Semi- annually
secondary and tertiary level facilities	Number of developed distance learning courses	0	2020	2	6	8		Training Re- port/ Semi- annually
	Number of health care professionals educated and re-trained through distance learning (dis- aggregated by gender and place of residence)	0	2020	200	1,300	1,589	Distance learning course covered both doctors and nurs- es, and is in line with the budget.	Training Report/ Semi- annually
OUTPUT 2.3. PHC facilities in three districts have improved WASH and infection control	Number of health care providers trained on STH and infection con- trol	0	2020	100	200	337	Two rounds of cam- paigning covered more health care workers through cascade trainings.	Training Report/ Semi-annu- ally
	Number of updated clinical STH manage- ment standards at the PHC level	0	2020	1	1	1		Project Report/ Semi-annu- ally

Expected Results (outcomes & outputs)	Indicator Description	Baseline		Target		Achieved	Reasons for Variance from Planned Target	Source of
		Value	Year	2021	2022	Indicator Targets	(if any)	Verification
OUTPUT 2.3. PHC facilities in three districts have improved WASH and infection control	Number of investments in local health infra- structure with support of the MPHSTF, in US\$	250,000	2020 Project report by UNICEF/ UNFPA	60,000	81,000	203,744	Microscopes and supplies for STH treatment procured and delivered.	Project Report/ Semi- annually
	Number of clinics equipped with STH equipment and testing systems	0	2020	20	20	31	Three District San- itary Epidemiology Service Centers and 28 HCFs equipped.	Project Report/ Semi- annually
OUTCOME 3. By 2022, the Government and the Youth Union in Kar- akalpakstan support, empower and engage young people, includ- ing the most vulner- able, as productive citizens and positive agents of change in their communities and the region	Number of young people who participate in or lead civic engage- ment initiatives (disaggregated by gender and age)	28	2020	200	400	301 (147 boys, 154 girls)	With four trainings planned, it was not possible to bring together 160 vol- unteers to ensure a quality training for UNFPA component.	Field monitoring, reporting by partners/ Annually
OUTPUT 3.1. Equipping young people, especial- ly the most vulnerable and marginalised, with social innovation and life skills, as well as so- cial and entrepreneur- ship support	Number of young peo- ple who completed the skills development pro- gramme (disaggregat- ed by gender and age)	28	2020	60	120	178 young people aged 15- 25 (85 boys and 93 girls)		Partner re- ports and field moni- toring visits

Expected Results (outcomes & outputs)	Indicator Description	Baseline		Target		Achieved Indicator	Reasons for Variance	Source of
		Value	Year	2021	2022	Targets	from Planned Target (if any)	Verification
OUTPUT 3.1. Equipping young people, especial- ly the most vulnerable and marginalised, with social innovation and life skills, as well as so- cial and entrepreneur- ship support	Number of projects ini- tiated by participants of the programme, includ- ing social business and social initiatives (SCO)	5	2020	20	40	33	Six rounds of UPSHIFT have been conducted instead of the planned eight. Thus 30 initiatives (5 projects x 6 rounds) were sup- ported, and three additional, very promising ones, were supported.	Field mon- itoring, re- porting by partners at every cycle
	Number of projects evolved into sustaina- ble social business or social initiatives	0	2020	1	4	5		Monitoring, reporting by partners at every cycle

iii) UN JP FINAL ASSESSMENT, BEST PRACTICES AND LESSONS LEARNED

The UN JP Final Assessment

The Programme conducted a Final Assessment of the UN Joint Programme over December 2022 – February 2023. As per the assessment findings, the Programme's interventions were aligned with the policies and strategies of the Government of Uzbekistan on addressing the Aral Sea crises, including the Government Strategy on Five Priority Directions of Development of the Republic of Uzbekistan for 2017-2021, the State Programme on Development of the Aral Sea Region for 2017-2021, Law no. ZRU-406 of 14 September 2016 on State Adolescent Policy, and the recently-adopted Comprehensive Development Programme for Karakalpakstan for 2020-2023.

The UN JP was effective in improving WASH facilities at 15 schools and 20 health care facilities in the Bozatau, Muynak and Kungrad districts, through introduction of the water, sanitation and hygiene (WASH) programme through which privacy and safety were provided to better meet the needs of women and girls. Construction works considered climate-resilient, gender and age sensitive, inclusive, accessible and innovative solutions. The UN JP disseminated knowledge on healthy lifestyles and positive parenting in three districts of Karakalpakstan, to prevent substance abuse, support the development of life skills needed to prevent anti-social and risky behaviour, and improve family outcomes and mental health during and after COVID-19 through introducing the 'Family UNited' family skills training programme. The delivery of distance learning equipment for district and rural HCFs, and the delivery and instalment of three types of telemedicine equipment for 2 national and 3 district level hospitals, resulted in district and primary health care facilities being able to conduct teleconsultations with specialists from regional medical centers and organize distance learning courses. The IICAS conducted two bootcamps of the social innovation and social entrepreneurship programme UPSHIFT, which enabled the creation of 56 youth-led projects, including social business and social initiatives, supported through mentoring and seed-funding.

The assessment also recorded the following challenges faced during implementation: delays in recruiting JP staff has resulted in shifting the realisation of programme activities; the COVID-19 pandemic and restrictions to conducting public activities, field visits and assessments delayed the workplan's implementation and the achievement of target indicators, also causing delays in the supply and delivery of supplements and medical equipment.

The assessment emphasized the following impact: As per MOH Uzbekistan's statistical data, the prevalence of diseases of the blood and blood-forming organs and certain disorders involving the immune mechanism among children (aged 0-14 years old) in Karakalpakstan, decreased by an average 440 cases per 100,000 members of the population in 2020 and 2021. On the other hand, among adolescents aged 15 to 17 years old, this indicator was high on average at 747 per 100,000 population members for the same period. The UN JP's deworming treatment significantly contributed to decreasing the prevalence of STH among school children. The results of lab tests conducted after treatment with albendazole among children aged 7 to 14 years old in 2022 showed that the prevalence of STH decreased 83.3 per cent for the three pilot districts. Particularly, the prevalence of STH among school children in the Bozatau, Kungrad and Muynak districts decreased by 83.3 per cent, 85.3 per cent and 50.0 per cent, respectively. In general the data shows that the prevalence of STH decreased from 12.6 per cent (as a baseline) to 1.7 per cent.

Challenges:

Due to the limited capacity of qualified WASH construction project design companies in the region, the Programme could contract only two bidders for project design and estimation works for 35 WASH facilities. This delayed the launch of tendering processes for construction works. To mitigate the challenge, the Programme is adapting bidding for construction companies by dividing this into eight segments for 35 project sites in the three districts, which has helped with finding and selecting more companies. In addition, JP staff have been able to disseminate bidding announcements more widely, and organize meetings with construction companies to explain policies and procedures for submitting bids.

Best practices:

An integrated approach has been applied in selecting target schools and regional implementing partners to enhance local capacity from different angles of gender-sensitive health and education promotion. At the same time, PUNOs are organizing periodic joint planning meetings to avoid duplicating efforts, and to complement each-other's programmatic interventions. Also, UNICEF is undertaking constant communications with UNDP-led joint programmes in planning social infrastructure projects, in order to not duplicate efforts regarding improving schools and health care facilities.

- Information and knowledge products on reproductive health, family planning, healthy lifestyle, and prevention of HIV and STIs, prepared for teachers and school students within the framework of this project, have been accepted enthusiastically by regional management and beneficiaries. As a result, additional learning hours on relevant topics have been included in the mandatory course by the Republican Center of Advanced Training for Teachers of the Republic of Karakalpakstan. More than 2,400 teachers have learned about issues of reproductive health, family planning, healthy lifestyles, and HIV/STI prevention, while also gaining the skills needed to talk with school students about these matters.
- These project activities align with government priorities for the education sector, as identified during a meeting with the 'Tashkhis' Republican Center of Career-Guidance and Pedagogical-Psychological Diagnostics. A joint work plan has been implemented to encourage the use of developed methodologies and gender-sensitive, age-appropriate information materials by teachers and psychologists at a national level.
- UNICEF is working to systematically engage all key stakeholders, including government partners and local non-governmental organizations (NGOs). UNICEF has signed an MoU with the 'Zamin Foundation' NGO to cooperate on updating WASH standards at schools. Another MoU has been signed with the Ministry of Innovative Development to ensure their support in accelerating more promising projects incubated within the framework of the UP-SHIFT programme. Karakalpakstan has joined the international 'Generation Unlimited' Youth Innovation Challenge, so that Uzbekistan's youth can compete with peers from around the globe and receive

additional funds from the UNICEF Innovation Fund.

 Trained volunteers demonstrated significant potential in reaching community populations, and are very popular among school adolescents. The work of volunteers has motivated several school children to bring creativeness to information activities, and to actively participate.

Lessons learned:

- The UPSHIFT programme brings a high return on investment - with enhanced skills and access to \$1,000 packages of seed funding, young people become more confident, extend their networks, start earning income and can mobilise additional resources. However, UNICEF needs to support young people further through legal consultations on registering their businesses as individual entrepreneurs.
- Social gender norms remain barriers to girls' self-realisation. It was observed that even successful girl-led projects stop functioning after their founders get married. The Programme must be complemented with more robust communication campaigns with the goal of social behaviour change.
- Social innovation projects developed by girls remain in traditional gender-specific fields, such as in teaching, cooking and sewing. Additional efforts are required to equip girls with technical and digital skills, and to encourage girls-led tech-based solutions.
- The Programme formulated Terms of Reference and bidding documents in seven lots for 35 project sites (15 schools and 20 health care facilities), to attract more bidding project design and construction

companies, and avoid possible delays in WASH construction works.

- Trained teachers were inspired by the new knowledge and skills they gained through participating in training, and they engaged other teachers in their schools in information sessions on reproductive health, and taught them how to conduct these courses.
- Volunteers demonstrated a remarkable commitment towards informing children and the population about reproductive health issues, HIV/STI prevention, family planning, and prevention of gender violence and stigma.

iv) SPECIFIC STORIES

Water is the Source of Life

Vast area, fresh air. Yes, I live in a beautiful village with people, close to me. Autumn is especially beautiful here. At the sight of trees changing their foliage, you will fall in love with my village.

I study in the 11th grade of the secondary school No. 12, located on the territory of the 'Madeli' Village Council of Citizens of the Muynak district. Our school was built in 1975 and currently has 180 students. I like the subject of Karakalpak language and literature. In the future, I want to master the profession of a teacher, like my favourite teacher Gulimkhan apa Zhaksylykova.

Previously students often fell ill, with the reason for this being poor-quality drinking water. It was very dirty, unusable water, which created difficult conditions for people. It turns out that the water we drank every day was unhealthy and caused many diseases. There were no other sources of water.

To date, a water supply network has been built and we can use clean water. The people suffered a lot, but thanks to the project of the Multi-Partner Trust Fund for Human Security for the Aral Sea region, a new water supply network was installed and we got access to clean drinking water, which is the key to our life. Apart from the water supply, handwashing and sanitation facilities have also been constructed. We are now excited to apply hand hygiene, menstrual health and hygiene practices. During our classes we also receive information about hand hygiene, sanitation, menstrual health and hygiene, nutrition and reproductive health topics.

Water is a source of energy, but water is also considered the source of life for all living things. This is a source that needs to be protected.

Water is life. Everyone needs it. We must use water rationally to maintain a healthy lifestyle.

Currently school attendance has improved, now that students rarely get sick. I rush to



class every day. Seeing the eyes of my classmates burning with happiness, I am overwhelmed with emotions.

If you live a healthy lifestyle, you will never get sick.

Muslim BAZARBAYEVA,

Student of the 11th grade of comprehensive school No. 12 of the Muynak district.



School No 12, Muynak district

Training for Volunteers: Zulfiya's Story

A conference room is brimming with cheerful, overlapping conversations - young teachers from across Karakalpakstan are eager to answer questions set by UNFPA trainer Damira. They look curiously at the whiteboards filled with prompts and colourful sticky notes, jumping at any opportunity to participate. Damira gently quietens the participants, and begins a lecture on leadership attributes. Around 25 participants are gathered at this hotel conference room, on a chilly Saturday morning in Nukus, to participate in a training organized by UNFPA Uzbekistan.

"I think that amazing leaders from all over the region are present at this training," says Zulfiya Turabaeva, a 29-year-old English teacher at School No.2 of the Kungrad district. Upon reflecting on the second day of the leadership training for youth, she proudly states that "through exchanging thoughts and ideas in this room, I will be able to improve my leadership abilities and teach my students about volunteering." Zulfiya was one of the 25 teachers taking part in the leadership training for secondary school staff and adolescents, that aims to develop their soft skills and consequently help them have a positive impact on their communities and schools back home. She reflects on her time volunteering during the COVID-19 pandemic when call centres were opened in her town - "With an honest conscience, when you work hard and volunteer, the person on the receiving end of your kindness is in turn able to achieve what they want. That way, people in society learn to do good things for each other."

The training consists of four and five-day courses for peer educators, designed to not only develop their personal skills but also teach them means for leading a successful information session for students and community members, on topics including healthy lifestyle, public speaking, project development and management. This training has been developed based on peer-to-peer methodology, in order to deliver the most effective results, and throughout this training all participants expressed unanimous agreement on its effectiveness.



Zulfiya was thrilled with the opportunity to participate in this training. "I have always been interested in volunteering, and in the future it is my goal to start new projects just like this one," she noted with a wide smile. "I have actually created a volunteer profile on the international UN Volunteer website, since we do not have many opportunities here." On the first day of the training she had many questions for Damira - "I was worried about how I alone could deliver all this crucial information about volunteering back in my village, because it is all so new, and I am very young." However, as the training went on, Zulfiya not only got more motivated, but also gained more confidence in her knowledge and abilities.

"Now I am thinking, I should have these types of leadership trainings at my school too – if the children knew the things I know, that would be wonderful."

All participants leaving the training were ecstatic about the chance to go back to their towns and schools in their various regions of Karakalpakstan, and to exemplify competent leadership and volunteering practices for their colleagues and students.

III. PROGRAMMATIC REVISIONS

The Programme made the following budget adjustments in the Project Document through conducting the Project Board meeting. UNICEF mobilised additional resources in the amount of US\$ 150,000, for procuring medical waste management equipment for hospitals in the three target districts. The Programme's total budget increased from US\$ 3,550,273 (MPHSTF allocation - US\$ 3,498,784; UNICEF contribution - US\$ 51,489) to US\$ 3,700,273 (MPHSTF allocation - US\$ 3,498,784; UNICEF contribution - US\$ 201,489). Due to significant increases in prices for construction materials, fuel and lubricants, and for essential WASH and medical waste management equipment, the budget category under construction works increased up to US\$ 112,330, by allocating secured funds from other categories. As per the request of MoH Karakalpakstan it was agreed to cover all 131,000 adolescent girls of 10-17 years old of the Republic of Karakalpakstan (compared to the initial 10,000 from 3 districts), through the iron and folic acid supplementation campaign. It was also agreed to include the Karaozek and Takhtakopir districts, alongside the three target districts, in the deworming campaign for school children aged

7 to 14 years to cover 40,000 children (compared to the initial target of 26,000). As for the 'Social Skills Programme', its total budget increased from US\$ 65,300 to US\$ 78,500 with the aim of integrating the Programme into the school curriculum starting from the 2022-2023 academic year, which required additional trainings for school psychologists. The increased portion was covered by funds secured from the UPSHIFT programme. The adjustments in budget categories under the UNICEF component did not affect the overall planned budget. The target for the indicator on the number of schools covered by health education sessions in the Results Matrix has decreased from 108 to 82, based on the actual number of schools in the three target districts.

Under UNFPA's interventions, the total cost for Activity 1.5.3 increased from **US\$ 33,500** to **US\$ 41,560**. The increased amount of **US\$ 8,060** has been covered from secured funds under another budget category, not affecting the overall UNFPA budget.

All the targets indicated in the Results Framework have been achieved, and some targets have been overachieved.











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UN Multi-Partner Human Security Trust Fund for the Aral Sea Region in Uzbekistan





