

United Nations in Bosnia and Herzegovina

COVID-19 Socio-Economic Response and Recovery Offer

20 July 2020

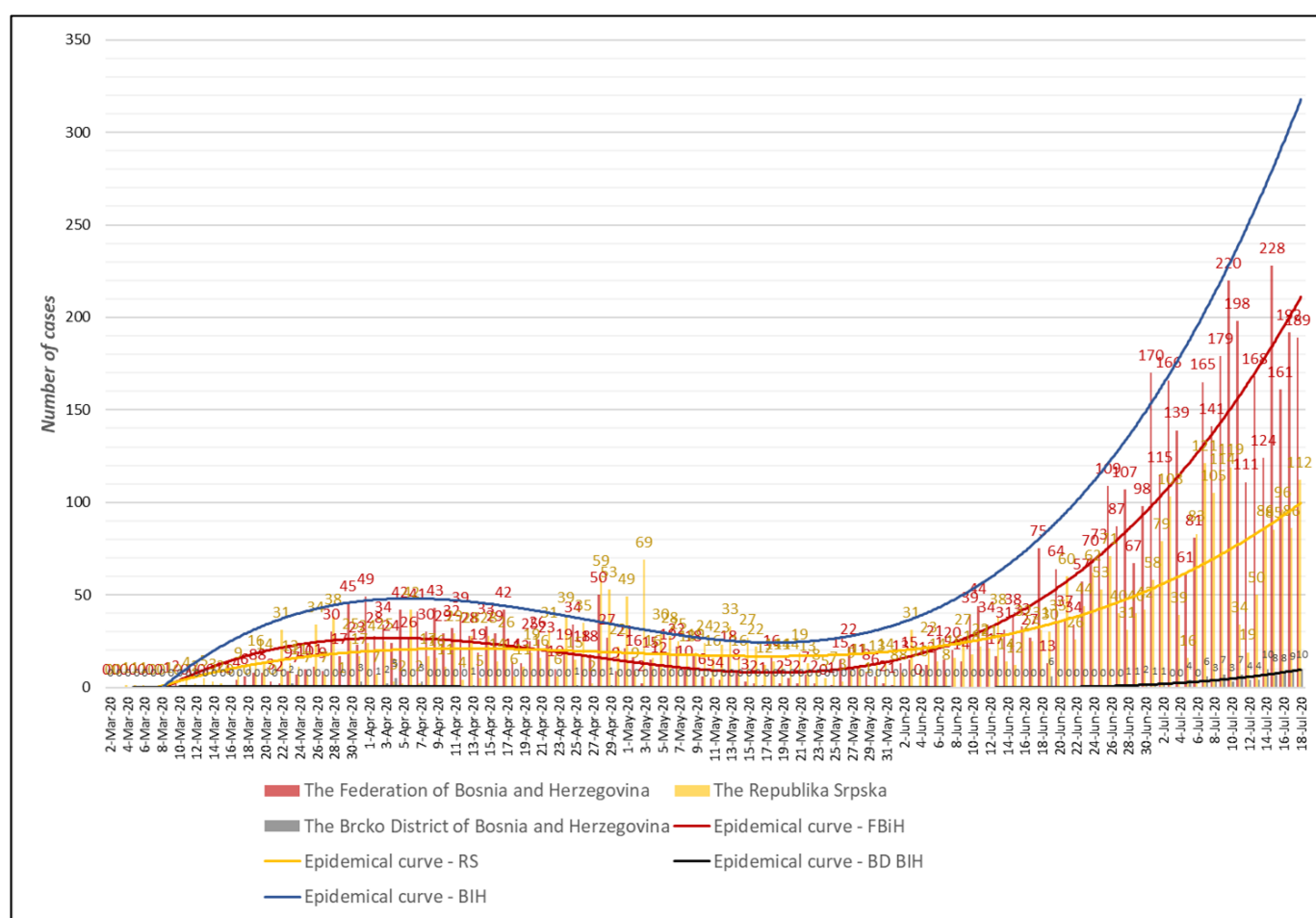
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Introduction

As the world faces an unprecedented public health and socio-economic crisis, the COVID-19 response and recovery must preserve gains across all SDGs, ensure that the needs of people are met and their rights upheld, with particular focus on those who are most vulnerable and at risk of being left behind. To support Member States with the response and recovery, the United Nations development system has switched to emergency mode across the world. The United Nations is providing urgent socio-economic support to countries and societies in the face of COVID-19, not only to save lives and restore livelihoods, but also support with building back better, greener and fairer. Whilst the socio-economic impacts of the pandemic are unprecedented in today's world, they present a once in a generation opportunity to focus on recovery and restoration where people, societies and economies emerge stronger, more inclusive, fairer, sustainable and greener. Meanwhile, addressing the public health needs while flattening the pandemic's curve in Bosnia and Herzegovina (BiH) remains paramount.

Distribution of COVID-19 confirmed cases and epidemical curves in Bosnia and Herzegovina, 19 July 2020



(Credit: WHO Country Office in Bosnia and Herzegovina; Sources: IPH FBiH, IPH RS, FMOH, MoCA)

This socio-economic package of support recognizes that the response must accelerate decarbonization, protect natural capital, build resilient cities, ensure decent jobs and promote social equality, inclusion, and the realization of human rights for all people. BiH is blessed with abundant natural resources and cultural heritage, untapped beauty and a strong tourism base. To not only safeguard these natural resources but capitalize on the recovery phase to harness the potential economic benefits they present for BiH, it is essential for the recovery to have a green focus with sustainable development at its core. The synergies between a strong economy and environmental protection are critical; the promotion of a 'green route' out of the crisis could be the most economically effective steps taken in BiH delivering dividends for decades into the future. It will therefore be important to invest in sustainable initiatives to build back better, with a strong focus on creating 'green jobs', environmental protection, climate mitigation and adaptation.

BiH has significant potential to **build back greener** through smart regulation and financing in support of this important change. BiH is losing approximately 20 percent of GDP to complications of air pollution. Encouraging a shift from fossil fuels (both in

industrial and domestic use), changing the energy mix, investing in the refurbishment of existing large hydroelectric plants, reduction of energy losses and an increase of investments in energy efficiency, among others, will contribute to this necessary change.

Small and Medium Sized Enterprises (SME) hold great potential for fast job creation, especially where focused on secondary or tertiary value-added processing. Green niche focused production is a highly profitable market which BiH is uniquely placed to tap into given its largely unexploited and unpolluted natural resource base, skilled work force and close proximity to some of the largest and wealthiest global markets. Ensuring access to financing will be essential for maintaining and supporting jobs and SMEs throughout the recovery period. **SMEs as a main driver of the economy** in BiH have weaknesses and vulnerabilities that need to be comprehensively addressed to help them recover well, reduce their losses, and increase their resilience to future shocks. The COVID-19 crisis has unveiled two important opportunities – a greater reliance on the domestic market and the possibility of BiH to secure a greater share of the EU market, as previously established European value chains have gaps because of the crisis. Linked to this is the need to find a balance between the need for decent jobs with higher wages with reforming tax and contributions to ease the burden on employers.

Although the full impact of the crisis on the societies and economies is not yet known, the COVID-19 crisis has revealed strengths as well as gaps in the existing social services. The crisis has underlined the importance of proactive investment to build resilient and inclusive social protection, health and education systems that can respond quickly and effectively to shocks when they emerge, addressing the needs of vulnerable populations, including the elderly and youth, amongst others. It has also highlighted the centrality of the role of women in the response and recovery efforts, on the front line as first responders and their potential for small and medium enterprise entrepreneurs.

The above-mentioned elements together with key policy recommendations are an integral part of the **present report**, that **sets out at this stage the United Nations' offer for an immediate development response to COVID-19 in BiH**. The report is based on the global guidelines issued by the United Nations Secretariat and is informed by the [UN Secretary-General's Report](#) on responding to the socio-economic impacts of COVID-19. In addition, it is informed by analyses and policy decisions related to COVID-19 of the International Financial Institutions in BiH. It complements the health priorities outlined in the initial draft WHO-led Strategic Preparedness and Response Plan for BiH, issued on 27 March 2020.

This offer outlines the **on-going and planned socio-economic response and recovery measures to be implemented by the United Nations Country Team in BiH jointly with its partners within the next 12 to 18 months**. The measures outlined in this offer are organized around the following four pillars, that correspond to **four priority areas of the socio-economic response and recovery**, and which are connected by a strong environmental sustainability and gender equality imperative: 1) Health; 2) Protecting people; 3) Economic recovery; 4) Social Cohesion and Community Resilience.

Whilst this is currently a UN Country Team offer of support, it can be extended to other bilateral, multilateral and government authorities as appropriate. Such a broader collaborative approach has been taken forward in other countries and territories, and the UN in BiH stands ready to take a similar inclusive and broad-based approach as appropriate for the authorities in BiH and partners.

It is important to note that the offer does not capture all aspects flagged by the various socio-economic assessments that the UN is conducting in BiH. Similarly, the UN in BiH is also currently working with authorities and partners to develop a set of new interventions that are broader than the range of activities indicated below and which go beyond the vulnerabilities listed so far. At the end of this report are the **Concept Notes of new joint initiatives** that are being developed by the UN agencies, funds and programmes in BiH, which will be finalized in the next few weeks.





Throughout the COVID-19 response, the guiding reference of the UN support offer will remain the 2030 Agenda and its central promise to 'leave no one behind'. As the COVID-19 is exposing structural fragilities and exacerbating preexisting inequalities, the most pervasive of which is gender inequality, a strong focus of the response must be placed on the vulnerabilities created or deepened by the pandemic, including gender inequalities. To enable the much-needed in-depth analysis to support BiH with the stated ambition of EU accession and achieve the Sustainable Development Goals (SDGs) during the 2020-2030 decade of action, strengthening the provision of accurate, reliable and verified data is of outmost importance. To assist decision-makers access the best available information needed for initiatives planning, the UN system in BiH will engage with stakeholders in collecting data and developing a set of rapid assessments, including in-person surveys. Follow-up assessments will be developed during the recovery phase to get representative data, appropriately disaggregated by sex, age groups and sub-national levels.

Most of the measures outlined in the report are connected to the BiH UN Development Assistance Framework (UNDAF) 2014-2020, with many of the 2020 deliverables being reprogrammed due to the impact of COVID-19, in agreement with BiH authorities and UN donors. The upcoming new joint initiatives will similarly be aligned to and consistent with the next UN planning document: the UN Sustainable Development Cooperation Framework for BiH for the period 2021-2025.

In terms of funding, the socio-economic response set out in this document is financed from multiple sources. **The above-mentioned funds are managed by UN agencies and are provided by bilateral and multi-lateral donors.** In addition to COVID-19 specific funds, a proportion of the UN budget is being re-programmed by the UNCT for COVID-19 response. Further, there are additional **funds committed** for activities that are not specifically COVID-19 related but which are impacted by the COVID-19 pandemic and are included in the pillar totals. Given the scale and scope of the socio-economic impact of COVID-19, additional resources nevertheless will be required. **The list of new joint initiatives included at the end of this report will require funding.**

Targeted support to refugees, migrants, internally displaced persons, returnees, asylum seekers and persons under subsidiary protection are included in the below four pillars.

UN current budgets for the socio-economic response and recovery

Pillars		Funds specifically allocated and funds re-programmed for the COVID-19 response	Funds for programmatic activities indirectly contributing to the COVID-19 response	Total funds currently allocated, directly and indirectly, for COVID-19 response
1	 HEALTH FIRST Protecting health services and systems during the crisis	15,930,467	135,541	16,066,008
2	 PROTECTING PEOPLE Social protection and basic services	4,145,333	478,439	4,584,772
3	 ECONOMIC RECOVERY Protecting jobs, micro, small and medium-sized enterprises, and the most vulnerable productive actors	4,609,063	5,001,389	9,610,452
4	 SOCIAL COHESION AND COMMUNITY RESILIENCE	3,093,518	3,927,270	7,020,788
Totals (USD)		27,739,381	9,542,639	37,448,020

Macro-economic conditions and multilateral collaboration

Macroeconomic conditions in BiH have deteriorated rapidly as a result of the COVID-19 crisis, but with introduced policies by the authorities and external support, macro-economic stability does not appear to be under threat. It is important to note that the forecasts on GDP growth, fiscal deficits, public debt and other parameters of macro-economic stability are all subject to an unusually high degree of uncertainty, given that the COVID-19 is a crisis without precedent. More negative scenarios are possible, while chances for a more favorable outcome cannot be ruled out completely. Among other, scenarios depend on the length of the COVID-19 pandemic and the need for and scale of containment measures, including changes in human behavior, the extent of supply disruptions, the magnitude and effectiveness of the government programs necessary to stabilize the economy while the key external risk is the slow growth in the EU and other key trade partners, such as CEFTA countries.

The GDP in 2020 is projected to decline by eight percent (a 7.5 percentage point reduction relative to pre-COVID-19 estimates)¹, as a result of pronounced decline in exports and remittances and reduced domestic demand and supply. These GDP growth projections are by the IMF (April 2020), also endorsed by the host governments in the Letter of Intent with the IMF on Rapid Financing Instrument (RFI) in April 2020. Likewise, the Vienna Institute for International Economic Studies in its forecast report (May 6th, 2020)² estimates that the economic downturn caused by the COVID-19 in BiH will be five percent. The World Bank estimates that the annual GDP in 2020 in BiH will contract by 3.2 percent in a baseline scenario, while in the downside scenario with a longer pandemic and a need for COVID-19 related containment extending into the third quarter of 2020, the GDP is expected to contract by 4.2 percent³.

The authorities' budgetary policy pre-COVID-19 crisis has generated fiscal space in BiH, but the COVID-19 crisis is causing significant fiscal pressure for 2020. **The 2020 fiscal position of BiH is projected to move from a surplus of around two percent of GDP in 2019 to an estimated deficit of 4.5 percent of GDP in 2020⁴** as a result of higher health, social, and economic-support spending as well as revenue shortfalls, related to COVID-19 (these are projections by the IMF, also supported by host government(s) endorsement of the Letter of Intent with the IMF on RFI). The World Bank estimates⁵ that the fiscal deficit in 2020 in BiH will be 3.7 percent in a baseline scenario while in the downside scenario (longer duration of COVID-19 pandemic and the need for COVID-19 related containment measures extending into the third quarter of 2020) the fiscal deficit is projected at 5.7 percent.

In 2020, the (external) fiscal financing gap is expected to be mainly financed by the IMF, EU and the World Bank. Bosnia and Herzegovina authorities have been approved for financial assistance of about EURO 330 million under the IMF Rapid Financing Instrument (RFI) as part of the COVID-19 response to help fill a share of the projected 2020 external financing gap while helping catalyze further donor support. On 15 May 2020, the European Parliament endorsed EURO 3 billion in macro-financial assistance to help EU partners fight the COVID-19 pandemic; as part of this assistance package, BiH was approved for EU macro-financial assistance in the amount of EURO 250 million. This assistance is an exceptional financial instrument of untied and undesignated balance-of-payments support, addressing the immediate external financing needs in tandem with a disbursing arrangement with the International Monetary Fund (IMF), in the context of the COVID-19 crisis. On April 2, 2020, the World Bank approved a loan in the amount of EURO 33.1 million to BiH for an emergency COVID-19 project under the COVID-19 strategic preparedness and response program. The WB program objective is to prevent, detect and respond to the threat posed by COVID-19 and strengthen national systems for public health preparedness.

In response to COVID-19, the authorities of the Federation of Bosnia and Herzegovina (FBiH) and Republika Srpska (RS) have revised their 2020 budgets. There is some cause for concern in the budget rebalancing, since significant diversion of funds has been made away from the planned gender responsive and social protection allocations. By end April 2020, both Houses of the Parliament of FBiH have adopted the revised FBiH Budget for 2020 in the amount of BAM 5.509 billion, an increase of 11.2 percent to the original 2020 FBiH Budget. According to the FBiH government, this budget revision is undertaken to create conditions for the implementation of the FBiH Law on Mitigation of Negative Economic Consequences Caused by Coronavirus⁶. On 14 May 2020, the RS Government adopted the Proposal of the Rebalance of the Budget for 2020 in an urgent procedure, in which the 2020 RS Budget was increased by BAM 188 million and amounts to BAM 3.613 billion⁷. According to the RS

¹ IMF RFI BiH, 2020

² Vienna Institute for International Economic Studies – wiiw, <https://wiiw.ac.at/wiiw-further-cuts-its-forecast-for-economic-growth-in-eastern-europe-to-below-2009-level-and-sees-weaker-recovery-n-442.html>

³ World Bank,

⁴ IMF RFI BiH, 2020

⁵ World Bank, 2020

⁶ FBiH Government

⁷ [RS Government decision, May 14th, 2020](#)

Government, the change in the structure and amount of budget funds is in a response to the COVID-19 crisis, with increased financing related to protection of human life and health and financing of economic stabilization measures.

While the expanded fiscal envelope of governments and the announced fiscal policy response can help mitigate the economic and social impact of the COVID-19 crisis, it is paramount that the support of the authorities is transparent, effectively targeted, fiscally sustainable and time-bound.

As an economic consequence of COVID-19 crisis, BiH current account deficit is projected to widen to 7.5 percent of GDP in 2020⁸, as weakness in Europe – BiH's largest export market—negatively impacts BiH exporters and also due to estimated reduction in remittances to BiH.

Furthermore, most migrant workers from BiH live in countries that have also been heavily affected by the COVID 19 virus - the United States, Switzerland, Germany, Austria, the United Kingdom, France, and Italy – and often work in sectors that were forced to shut down due to the COVID-19 crisis, such as construction, restaurants and cafes. Many are also working in the informal or grey economy or depend on seasonal jobs in the agriculture and tourism industry, including in neighboring Croatia. The COVID-19 crisis has thus negatively affected the income and jobs' stability of many BiH citizens working abroad, with a knockdown effect on remittances and investments to BiH. According to the World Bank's estimates, remittances sent by migrants to their home countries are expected to decrease globally by 20 percent, where Europe and Central Asia will have the largest drop of 27.5 percent⁹. The BiH authorities anticipate that remittances could decline by over 10 percent¹⁰. The World Bank also warns that transaction costs and foreign-exchange-related fees may increase, further reducing the benefit of remittances for receiving households¹¹.

Public debt is estimated to temporarily increase to 38 percent by end-2020¹², reflecting a sharp recession and large increase in public health-related and other government spending due to COVID-19. The World Bank estimates¹³ that the public debt in 2020 in BiH will reach 37.4 percent in a baseline scenario, while in the downside scenario the public debt is projected at 40.1 percent. **According to the updated IMF Debt Sustainable Analysis (DSA), BiH public debt remains sustainable even after the impact of the COVID-19 crisis.** IMF's scenarios suggest that debt is sustainable under most adverse scenarios, except for a scenario based on a constant primary deficit at 2020 level. Over the medium-term, the public debt is expected to return to a declining path with prudent fiscal policies and rebound growth. IFIs and bilateral donors are providing external financing through project-related loans, while domestic debt is expected to be financed by banks.

Before COVID-19 crisis, the financial sector in BiH was assessed to be adequately capitalized and highly liquid on average. **Given financial stability and liquidity and capital buffers pre-COVID 19, at present the financial sector appears to be able to sustain the (immediate) economic effects of COVID-19 pandemic.** The IMF policy recommendations call for enhanced monitoring by regulators to identify sources of systemic risks and adopt well-targeted mitigating measures. As a mitigating policy response to COVID-19 economic consequences, a six-month framework for moratoria on loan repayments on a case-by-case basis has been introduced by the FBiH and RS Banking Agencies, and these two entity banking regulators are also considering other measures to provide relief for stressed (due to COVID-19 context) but ultimately solvent borrowers. In addition, as a response to COVID-19 context, the entity banking agencies have instructed banks not to pay dividends or bonuses and to use their liquidity and capital buffers.

Response strategy, policy options

A three-step approach is essential for the socio-economic response to the COVID-19 crisis. First, a rapid assessment of the potential impact of the crisis is needed in order to quantify the spending necessary to contain it. Second, an assessment of the fiscal space available for increasing spending, as it will in large part determine the government's capacity for action. Third, an analysis of policy priorities and available policy measures considering both financing and implementation constraints faced by governments is equally required.

In support to priorities above, the UN will provide:

- **Advice on social expenditure monitoring and mapping of budgets** for social development priorities to assist governments in rebalancing public expenditures.

⁸ IMF projections in RFI, 2020

⁹ <https://www.worldbank.org/en/news/press-release/2020/04/22/world-bank-predicts-sharpest-decline-of-remittances-in-recent-history>

¹⁰ LOI signed by BiH governments in the IMF RFI, 2020

¹¹ <https://blogs.worldbank.org/psd/remittances-times-coronavirus-keep-them-flowing>

¹² IMF RFI BiH, 2020

¹³ World Bank, Analytical note on the economic impact of covid-19 and policy recommendations, April 17, 2020

- **Stepped-up technical support to improve the evidence base for policy making, including in the emergency response.** This includes strengthening statistics and data analytics, including gender data; multisectoral policy analysis; leave no one behind (LNOB) policies; gender analysis; SDG financing; institutional development and public administration and service delivery; and multi-stakeholder engagement and partnerships.
- **Conduct of impact assessments at the household level, and context-specific socio-economic impact analyses of the crisis.** The UN will provide recommendations to governments on aspects of the emergency stimulus packages that would contribute to economic transformation and greater sustainability as countries move into the recovery phase. The UN will continue to use its convening power to facilitate dialogue between authorities, IFIs, development partners, private sector and other stakeholders with the view to adopting common positions and responses to COVID 19 socio-economic impacts.
- **Recovering better:** this pandemic underscores the important role of public policies in dealing with crisis. Recovering better will require creating the fiscal space to address the SDG agenda, investing in health, social protection and reducing socio-economic gender divide, sustainable infrastructure and crisis preparedness, while directing the economic recovery along a significantly more sustainable and carbon-neutral trajectory and closing the digital divide. In recovering better, multilateral and regional collaboration will be critical on issues including data, differential needs and impact assessment; technology innovation and transfer, closing the digital divide, sustainable finance, debt management, and crisis preparedness.

The four pillars of the response

Pillar 1: HEALTH FIRST - Protecting health services and systems during the crisis

Likely impact and vulnerabilities due to COVID-19

The immediate public health response to COVID-19 in BiH highlighted difficulties in repurposing medical facilities and mobilizing health professionals within and across facilities. There continues to be a delay in the availability of specific vaccines. There is a limited supply of antiviral drugs and personal protective supplies. This has contributed to the further exhaustion of existing COVID-19 response capacities, both human and material. The main current challenge is to control the COVID-19 outbreak and prevent reoccurrence, while at the same time easing the effective, but restrictive, outbreak control measures. In addition, COVID-19 impacted negatively on local procurement and supply chain management in the health sector.

The COVID-19 health crisis has placed an exceptional burden on the public health systems and health services delivery in general. This is especially true for the **continuity of non-COVID-19 services**. During the COVID-19 immediate response, emergency health operations were retained while non-emergency procedures were postponed. Reintroduction of close-contact non-emergency procedures will require maximal occupational safety and infection prevention and control measures in place (the “new normal” in service delivery). **Dual-track health system management** is needed to reinstate those regular health services that may have been crowded out during the COVID-19 outbreak peak, while at the same time continuing to provide the full range of services needed to prevent, diagnose, isolate and treat COVID-19 patients in BiH.

The focus on COVID-19 has placed a huge strain on available surveillance capacities. There is a risk of not paying sufficient attention to other diseases and conditions in the population. For example, there is a risk for potential outbreaks of vaccine-preventable diseases due to interrupted or reduced immunization services during the COVID-19 crisis and the lack of clear plans to re-establish these services.

In addition, the COVID-19 outbreak in BiH has increased the vulnerability of certain population groups, especially in terms of access to essential health services and psychosocial support. Those living in substandard conditions were also under government-imposed COVID-19-related restrictions on movement. This included people with disabilities, chronic illnesses, those with psychological conditions that may have been exacerbated by the restrictions and isolation, the elderly and families with children. The access of children to life-saving health services, mental health, nutrition and immunization has been impacted by the COVID-19 pandemic. Further, due to COVID-19, there has been an interruption of essential health services, especially sexual and reproductive health, mother and child-care, immunization and common non-communicable and chronic diseases management. The crisis in mental health due to COVID-19 restrictions, uncertainty and misinformation campaigns have also been well documented globally.

Due to coordination between public health authorities and humanitarian actors, access to health care services by refugees, asylum seekers and migrants continued, even if partial and dependent on donor funding. However, if the public health system were put under greater strain, there would be a risk that refugees, asylum seekers and migrants would be the first to be excluded from services or discriminated against. Social distancing is very difficult for asylum-seekers, refugees and migrants in overcrowded reception centers. Even with precautionary measures in place, it is likely that the first COVID-19 case in a center would spread rapidly and could risk overwhelming agencies.

Debt is a critical systemic weakness across BiH's health systems, including overdue unpaid liabilities (“arrears”) to suppliers. The World Bank estimated that arrears in the FBiH were approximately US\$128 million in 2015, and in RS over US\$608 million¹⁴. COVID-19 places an already fragile health sector under considerable additional strain and has the potential to threaten the fiscal sustainability of the healthcare sector saddled with sizeable arrears. It is therefore important that the COVID-19 response and recovery address not only the immediate impact of the pandemic, but also strengthen BiH's health systems in the longer term.

Reflecting the complexity of the arrangements in BiH, below is matrix illustrating the health system in FBiH, RS and Brcko District.

Entity/District	Federation of BiH	Republika Srpska	Brcko District
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¹⁴ World Bank, Project appraisal document for a Bosnia and Herzegovina emergency Covid-19, project report no: PAD 3856.

Ministry of Health (MoH)	1 MoH FBiH, 10 MoHs Cantons	1 MoHSW RS	1 DoHOS BD BIH
Health Insurance Funds	1 Solidarity Fund FBiH 10 HIFs Cantons	1 HIF RS	1 HIF BD BIH
Public Health Institutes	1 PHI FBiH 10 PHIs Cantons	1 PHI RS	1 Sub-department for public health BD BIH
Quality & Accreditation Agency	1 agency (AKAZ FBiH)	1 agency (ASKVA RS)	Upon formal agreement, services provided by either of the entities' agencies
Hospitals	18	10	1
Special Hospitals	2	3	
Institutes		6	
Primary health care facilities – Dom Zdravljas	79	55	1

Public health preparedness and response strategy

The initial draft WHO-led BiH COVID-19 Strategic Preparedness and Response Plan, issued on 27 March 2020, outlined public health measures in support of health authorities in BiH to prepare for and respond to COVID-19. The table below shows support provided by UN agencies under this public health preparedness and response plan, which is organized along 9 pillars. The initial costing of the first 8 pillars of the Plan was some \$14 million.

Agency/Project	Pillars	Content
WHO	1. Country-level coordination, planning and monitoring	Multisectoral, Incident Management Team, risk assessment
WHO, UNICEF, UNFPA	2. Risk communication and community engagement	RCCE plan, behaviour assessment, local messages, hotline, communication networks
WHO, UNFPA	3. Surveillance, rapid responses teams and case investigation	Case definition, investigation protocol, active case finding, surveillance system, RRT
WHO	4. Points of Entry	PoE Health emergency plan, isolation facilities to manage ill travelers, COVID communication
WHO, IAEA	5. National Laboratories	Molecular (PCR) testing and access to reagents, specimen management and referral
WHO, UNICEF	6. Infection Prevention and Control	IPC management in health facilities, triage system and isolation rooms, trained staff, PPE
WHO	7. Case Management	Intensive Care Unit capacity, self-care of patients with mild COVID-19 symptoms
WHO, UNDP	8. Operational support and Logistics	Disease Commodity Package, COVID-19 patient kit, supply chain management system
WHO, UNICEF, UNFPA	9. Maintaining essential health services during an outbreak	List of essential services, re-purposed care and human resources, continuity of care

Importantly, the measures outlined in the 9th pillar, “Maintaining essential health services during an outbreak”, follow a two-phase strategy. The first phase includes targeted actions to allow health systems to **maintain essential lifesaving health services** even as they surge to meet the spike in demand for acute care. The second phase entails a complementary effort targeting **health systems recovery, preparedness and strengthening**, with a focus on primary health care and universal health coverage and preparing for future waves of COVID-19.

The UN projects outlined in the Response Offer build capacity for **dual-track health system management**, supporting a range of services to prevent, diagnose, isolate and treat COVID-19 Patients, as well as addressing increased demand of services crowded out during the COVID-19 outbreak. In addition to the procurement of COVID-19 test kits, Personal Protection Equipment and medical equipment, projects include risk communication and community engagement, support for mental health and the management of COVID-19-related hazardous medical waste, among others.

In accordance with the principle of “leave no one behind”, COVID-19 response efforts should be inclusive of all persons in BiH, irrespective of their status – including non-citizens. The continuity of health care services needs to include refugees, asylum seekers, migrants, persons under subsidiary protection and persons at risk of statelessness, especially in Una-Sana Canton, Sarajevo, Tuzla and Herzegovina-Neretva Cantons. Increased information dissemination is needed for internally displaced persons and returnees, through civil society organizations, local communities and local media on possible and available health treatment modalities, specific for each canton/district/entity, including information on the scope of health care services and outreach medical services. Continued advocacy for the harmonization of health care and insurance legislation is needed.

Current Programme Response

Project, Agency	How the on-going intervention responds to COVID-19, budget, duration
WHO	Re-enforcement of public health and emergency preparedness and response as well as managing the COVID-19 transition phase. Dual-track health system management ensuring full range of services to prevent, diagnose, isolate and treat COVID-19 Patients, as well as, addressing increased demand of services crowded out during the COVID-19 outbreak Budget: 795,000 USD; duration May – December 2020
Immediate response measures (UNICEF)	Immediate response measures, including risk communication and community engagement: (300,000 USD), WASH and Infection, Prevention and Control (300,000 USD), Mental health (70,000 USD)
Environmentally Sound Management of Persistent Organic Pollutants (POPs) in industrial and hazardous waste sectors (UNDP)	Management of COVID-19 related hazardous medical waste. The intervention aims to support effective response to the mismanagement of medical waste in BiH during and immediately after the 2020 COVID-19 outbreak. The intervention will target leverage points in the entire “life cycle” of waste categories, from: a) addressing the main sources : by households (and individuals) and medical care facilities, further to b) its collection and disposal by waste management public utilities and other waste management operators; and ultimately c) improving the overall capacities for coordination in the medical waste management system. Budget: 650,000 USD; Duration: June - December 2020.
IOM, UNHCR, UNICEF, UNFPA, DRC and partners	Infection prevention and control measures in all refugee and migrant accommodation facilities and outreach to monitor and assist refugees and migrants squatting or in private accommodation. Coordination with public health authorities and the Danish Refugee Council to ensure refugees, asylum seekers and migrants continue to have access to health services, including testing for COVID-19. (N.B. Budget information is listed in Pillar Four: Social Cohesion and Community Resilience, under the activity “Special measures to support the response to refugee and migrant situation in BiH – Phase III”)
Addressing COVID-19 challenges within the Migrant and Refugee Response in the Western Balkans (IOM)	The project is a joint IOM-UNHCR regional initiative covering the Western Balkans. Its aim is to address the gaps and additional needs in migration and asylum management brought by the Covid-19 pandemic and public health measures taken by authorities to keep the spread of the virus under control. Within this project, IOM partner the Danish Refugee Council (DRC) will procure PPE and other medical consumables and equipment to prevent and manage the spread of COVID-19 among refugees and migrants in reception centres.

	Additionally, DRC will build the capacities of the public health system to ensure greater preparedness and resilience. IOM Budget: EUR 350,000 Duration: April 2020 – June 2021.
Reducing Drugs Dependency, (UNDP)	Support to opioid substitution therapy (OST) centers: provision of Personal Protection Equipment for the personnel of OST Centers in Canton Sarajevo, Zenica-Doboj Canton and Herzegovina-Neretva Canton. Budget: 12,000 USD; Duration: April 2020
European Union Support to COVID-19 Response in Bosnia and Herzegovina (UNDP)	Immediate healthcare support to COVID response. Medical procurement of COVID-19 test kits, Personal Protection Equipment and medical equipment. Budget: EUR 7 million; Duration: March – July 2020
Emergency Response to the COVID-19 Crisis in Bosnia and Herzegovina (UNDP)	Support in medical procurement to authorities in Bosnia and Herzegovina Budget: 4,300,000 USD; Duration: March 2020 - March 2021.
Emergency Response to the COVID-19 Crisis in Bosnia and Herzegovina (UNODC)	Preparedness and response, support to Border Police of BiH and Indirect Taxation Authority inter-agency units at land-border and Sarajevo Integrational Airport. Personal Protection Equipment. Budget: 7,000 USD. Duration: April/May 2020.
Emergency Response to the COVID-19 Crisis in Bosnia and Herzegovina (IAEA)	Support procurement of RT-PCR (real-time polymerase chain reaction) equipment, consumables, primers and probes for the rapid detection and control of the COVID-19 and related training. Budget: EUR 270,000; Duration: March – August 2020
Community-based protection and protection-sensitive accommodation of asylum-seekers in USC (UNHCR)	In partnership with DRC. Distribution of information and messaging on COVID. Facilitated communication between Community Representatives and CCCM, as well as other service providers. Developed and launched health awareness initiatives within community members. Facilitation of the production of protective masks in the TC Sewing Workshop. Support to persons of concern in the center with translation and cultural mediation services in the medical units. Budget: 68,286 USD; Duration: Mid-March – December 2020
Provision of free legal aid to refugees, asylum-seekers, IDPs, returnees and relevant legal analyses (UNHCR)	In partnership with VP BiH. Advocacy for transferring people out of illegal settlements to centres and investing in alternative models of accommodation with proper sanitation and health services Budget: 27,965 USD; Duration: Mid-March – December 2020
Provision of miscellaneous services to recognized refugees and asylum-seekers (UNHCR)	In partnership with BHWI. Provision of open SOS lines for online counselling and crisis interventions. Training for appropriate responses in epidemiologic situations by an epidemiologist, member of the Crisis HQ team of FBiH for COVID-19. Specialized individual and family counselling on prevention of and resolution of conflicts in the family/community aimed at decreasing violence. Procurement of a limited amount of masks and gloves for Persons of Concerns (PoCs) in order for them to participate safely in activities. Budget: 39,290 USD; Duration: Mid-March – 31 July 2020
Direct Assistance (UNHCR)	One-month supply of gloves and masks for the staff working directly with persons of concern to UNHCR. Budget: 5,500 USD; Duration: May 2020
UNHCR	In cooperation with the implementing partner, foster the communication with communities: Peer educators with the assistance of cultural mediators / interpreters provide 32 community information sessions / thematic trainings through the Peer to Peer system for 700 PoCs and establishing a hotline/ call center for answering PoC's queried on COVID-19 and other issues. Budget: 13,000 USD; Duration: July 2020-June 2021
UNESCO Direct Assistance (UNESCO)	Procurement and delivery of container for triage and emergency care of patients for the General Hospital in Sarajevo. Budget 5,800 BAM. Duration: March 2020

Support to Public Health Institutes with COVID-19 data collection (UNFPA)	Provided IT equipment for COVID-19 data collection and analysis Budget: 7,700 USD; Duration: April 2020
Continued provision of SRH and GBV services to vulnerable population (UNFPA)	Continued provision of SRH and GBV services to vulnerable population Budget: 100,000 USD; Duration: June – December 2020
Support COVID-19 prevention and management measures at points of entry (POE) (IOM)	Support strengthening of capacity and protection at Points of Entry to BiH: 1) Procurement of PPE for border officials working at POE 2) Development of Standard Operating Procedures (SOPs) for frontline border officials at POE, based on SOPs already developed by IOM in Asia 3) Online training of border officials working at POE on the SOPs and procedures for use/dispose of PPE Budget: EUR 150,000 Duration: April 2020 – June 2021

Below are some concrete **policy recommendations** identified by the BiH UN Country Team system for health care, with the focus on what is important and actionable for COVID-19-related socio-economic response and recovery during the next 12-18 months:

- Take integrated action on risk factors in all sectors and strengthen the health system for improved prevention and control of both communicable and noncommunicable diseases, particularly by continuous promotion of safety measures and standards, while gradually introducing active living and mobility, observing healthy consumption etc. Promote an active role of NGOs at the local level as an important partner for the health system and government in general, especially when Health Reform is focused on population needs.
- Respond to health sector challenges by speeding up the reform, particularly stopping accumulation of liabilities, finding a model for settling of existing liabilities, and finding new models for the health care system financing. Ensure that available resources are used in a more efficient manner, adjusting the organization and operations in order to establish a financially sustainable health system, which will improve the health of the population and provide better productivity.
- Improve information management with the health care sector with other sectors as the whole of government approach, with improved communication with the public, involving also civil society organizations when/where possible.
- Improve digital dimensions of health services (for better data management, analytics on the pandemic, modernization of the service provision, telehealth).
- Improve cross-sectoral cooperation, to enable Ministries of health to roll-out guidelines for safe operations of schools, kindergartens, businesses, public offices, etc. Improve digital dimensions of health services (for better data management, analytics on the pandemic, modernization of the service provision, telehealth).
- Ensure that essential health services are available to all, especially vulnerable groups (including asylum seekers, refugees and migrants).
- Strengthen psychosocial support for health workers, as well as for the general population.
- Improve occupational and safety health of health workers.
- Improve supply chain and procurement processes.

Pillar 2: PROTECTING PEOPLE - Social protection and basic services

Likely impact and vulnerabilities due to COVID-19

The pre COVID-19 poverty rate in BiH was 16 percent, with poverty being more pronounced in rural areas (19 percent) than in urban areas (12 percent)¹⁵. Measures to contain the **COVID-19** outbreak and the resultant economic downturn will affect the poor and socially vulnerable most and may push many more into poverty.

Over the past months due to the unprecedented COVID-19 crisis, **thousands of people in BiH lost their jobs. Household incomes have been lost or reduced**, including reduced remittances from abroad, which is impacting people's income, particularly the less well off. It is expected that the remittances will continue to be reduced due to limited opportunities to work abroad seasonally and/or due to the slowdown in the EU countries and other remittance-source countries. This will negatively affect household incomes even after the immediate COVID/19 crisis has passed.

It is estimated that there has been a net loss of 21,941¹⁶ full-time registered jobs in FBiH, while the RS authorities estimate that 2,403 workers have lost their jobs, of which 1,100 were employed on contract RS¹⁷, while there were 867 new jobs created by end April 2020. A large share of the working population in BiH (almost one in three¹⁸) is employed in the informal sector of the economy, with no pension or health insurance. COVID-19 related measures and business closures affect (disproportionally) those who work in the informal economy, the majority of whom are believed to be women, whose are not fully captured in the official statistics. There is a risk that these trends for both formal and informal jobs may continue even after COVID-19 containment measures are lifted. There could be future layoffs resulting from the contraction in demand in key markets serviced by BiH firms. The current crisis revealed the limitation of the existing social protection systems. The contributory social security systems serve mainly full-time regular employees in the formal employment sector who are still the majority in the labour market. A growing number of workers in other types of employment are kept mostly outside its scope. In particular, the following groups of workers were among the most hardly hit by the crisis but were not adequately covered by the existing contributory social security schemes: Women and men (gender responsiveness analysis across all groups); Self-employed workers, including those in the gig economy; Workers in the informal economy; Repatriated migrant workers; and Other vulnerable and excluded groups.

Since poverty is strongly associated with unemployment and given the expected slowdown in all sectors of the BiH economy due to COVID-19 crisis, the loss of jobs and earnings will continue to affect poverty rates. The negative impact of the COVID-19 pandemic will vary across income groups due to differences in their demographic and socio-economic characteristics. The more vulnerable groups include rural households, women, youth and children, the elderly and Roma population. The impact is compounded on populations experiencing multiple vulnerabilities and has significant gender dimension.

Many children in BiH **live in poverty, and the consequences of COVID-19 response measures risk plunging them further into hardship**. These children groups are anticipated to be most negatively affected by the COVID-19 pandemic:

- *Roma children*, with restrictive measures/lockdown protection risks likely to exacerbate and access to support services even further reduced;
- *Children with disabilities*, at heightened risk of family separation and subsequent placement into institutional care;
- *Children living in dysfunctional families*, increased restrictive measures/lockdowns likely to exacerbate poor parenting and exposure to different forms of violence and abuse; support services less likely to be available;
- *Children living in poverty, or at risk of poverty*, whose families will be affected by crisis and limitations of the current social protection systems to provide adequate cash support in the short and long term;
- Children with immunocompromised or immunosuppressed systems who need the continuous healthcare services, including nutrition;
- Children from one of the following categories (migrants, refugees, asylum seekers, under subsidiary protection, vulnerable IDPs and returnees, at risk of statelessness) and in particular a subcategory of unaccompanied or separated children (UASC).

¹⁵ BiH Household Budget Survey (HBS) 2015, more recent data not available, http://www.bhas.ba/ankete/TB_HBS%202015_SR.pdf

¹⁶ Based on the FBiH Tax Authority reports, period refers to end February, 2020 through end April, 2020

¹⁷ RS Government PM interview, <https://www.bl-portal.com/rs-i-fbih/mjere-vlade-rs-su-dale-rezultate-i-nema-masovnih-otpustanja-radnika/>

¹⁸ World Bank, The Economic and Social Impact of COVID-19 WESTERN BALKANS REGULAR ECONOMIC REPORT No.17 | Spring 2020, THE COUNTRY NOTE, <http://documents.worldbank.org/curated/en/457181588085856454/pdf/The-Economic-and-Social-Impact-of-COVID-19-The-Country-Notes.pdf> and WB WESTERN BALKANS REGULAR ECONOMIC REPORT NO.17 REVIEWING THE STATE AND VULNERABILITIES OF THE WESTERN BALKAN ECONOMIES AS THEY FACE COVID-19, Heat Map

In addition to the above groups of children, the following children are also identified as likely to be affected by the COVID-19 pandemic: children in all forms of institutional care; children in pre- and post-trial detention; and younger children of professionals on duty for COVID-19 who are left without daily care.

Social protection systems in BiH – both contributory and non-contributory systems – suffer from low levels of coverage and spending, and unequal access to benefits for the poor and socially excluded populations. It has long been recognized that fundamental problems with the social protection systems in Bosnia and Herzegovina stem from the fact that they have failed to mobilize necessary public resources and allocate them efficiently or to develop coherent social protection policies and programmes between entities and district as well as between cantons. The pre-COVID 19 targeted social assistance programs in BiH have low coverage, with only a small share of the population (16.8 percent) covered by non-contributory social assistance programs. The coverage of the poorest quintile remains low compared to countries of similar per capita income levels. In addition, only 1.9 percent of the total population and 6.2 percent of the poorest benefit from the means-tested permanent and/or one-off social assistance – very low coverage compared with that of other countries in the Europe and Central Asia region.

Fiscal pressures on social protection budgets pose significant risk to protection of the most vulnerable population. The COVID-19 crisis has already affected some of pre-approved budget allocations (20 million BAM allocated for the implementation of the Law on Support to Families with Children in FBiH) as well as other budget funds allocated to support social protection and inclusion of the most vulnerable (people with disabilities, etc.) With protracted fiscal consolidation and slow recovery, fragmented and poorly resourced social protection systems in BiH face significant limitations to protect rising numbers of vulnerable population. Although the full impact of the crisis on the societies and economies is not yet known, the COVID-19 crisis has revealed both strengths and gaps in the existing social protection systems. The crisis has underlined the importance of proactive investment to build a comprehensive and resilient social protection system that can respond quickly and effectively to shocks when they emerge. At the same time, it is important to maintain and expand the fiscal space and delivery capacity of social protection systems during the crisis and in the recovery phase.

As part of the COVID-19 emergency response package, host governments focus is on maintaining and (if/with sufficient fiscal space) expanding cash transfers to those who are in most need and might be at risk of falling into poverty as a result of the COVID-19 pandemic. The RS Government is planning to expand coverage of the targeted permanent social assistance program and provide expanded access to social services. Authorities in the FBiH are planning to expand social benefits for vulnerable groups that are at most risk of being affected by the economic impact of the COVID-19 pandemic¹⁹. The FBiH Government plans to expand coverage of its social assistance programs, providing cash and in-kind assistance to those who are beneficiaries of permanent social assistance, people with disabilities (PWDs) and elderly people, and youth who reside in institutions and are in need of permanent care. The World Bank will support the governments' efforts to meet the immediate short-term increased fiscal needs (under the approved World Bank EURO 33.1 million loan), however, needs are much larger²⁰. It is paramount that the government support is transparent, effectively targeted, fiscally sustainable and time-bound.

As a result of reduced household incomes due to COVID-19, there are challenges with **limited availability of and access to nutritious food choices at household level**. Coupled with increased demands on parents due to COVID-19 related lockdowns, caregivers could feel overwhelmed with childcare and feeding responsibilities, including breastfeeding. The COVID-19 pandemic has also social impacts as a result of social isolation, during which experiences of mental illnesses have increased. In terms of child protection, there are three main potential secondary impacts: **neglect and lack of parental care; mental health and psychosocial distress; and increased exposure to all forms of violence and abuse**.

In response to COVID-19 crisis, government authorities in BiH closed all universities, schools and preschools in BiH from mid-March 2020 to date. It is estimated that **over 500,000 children of preschool, primary, secondary and tertiary school age are affected**. BiH's education administrative units are faced with the challenge to ensure the continuum of learning for all children and to enable quality online education. Besides the significant impact of disrupted learning on all children, **children from vulnerable groups are under additional risk to be left out**, with increased risk of dropping out and widening the existing equity gaps. According to the recent assessments, there are more than **9,700 children without access to the needed ICT devices to participate in the online classes**. Online education, organized ad hoc, without prior strategic planning and preparation could produce significant knowledge gaps to students at all education levels. Another important impact of these arrangements has been the significant increase of the burden of care on women. In addition, the economic impact of the COVID-19 crisis may impose economic restraints in the future and could undermine financial investments in the school system. Potential budget

¹⁹ Information based from the World Bank, Project appraisal document for a Bosnia and Herzegovina emergency Covid-19, project report no: PAD 3856.

²⁰ Information based from the World Bank, Project appraisal document for a Bosnia and Herzegovina emergency Covid-19, project report no: PAD 3856.

pressures on teacher salaries and allowances could be demotivating and potentially lead to massive strikes and countrywide interruption of school process.

COVID-19 containment measures and economic consequences of COVID-19 have raised the risk of **violence against women**. Available information indicates significant rise in cases of domestic violence. Based on this indication and the scarcity of official data on violence against women, a rapid assessment with the BIH Safe Houses was carried out. Information provided by CSOs running safe houses has shown that during the COVID-19 crisis, women and girls are placed at a heightened risk of violence, including domestic violence and that there has been a rise in cases of violence against women, a rise in calls to SOS helplines and requests for remote psychosocial support. Access to shelters, and other specialized services (legal and psychosocial counselling) has been restricted. Provision of multi-sectoral support to survivors of domestic violence has been severely reduced or stopped in some occasions, as first responders (police, health, justice, centers for social work) have either completely focused on enforcing lockdown measures (police), stopped processing cases (justice) or reduced availability of services (health, centers for social work). Lack of public transportation has additionally rendered these services inaccessible. Some groups of population that previously had difficulty in accessing services have been particularly affected by the COVID-19 crisis, including Roma women and girls, persons with disabilities, women living in rural areas, elderly women, women victims of war, women migrants and displaced women (refugees, asylum-seekers, IDPs...).

Due to the COVID-19 imposed restrictions of movement, **persons under international protection, asylum seekers and migrants** face administrative, financial, legal and language barriers to accessing basic services, primarily health care and shelter. These restrictions also affect wellbeing of persons in confinement, frequently causing anxiety, insomnia, increased tensions, aggression and SGBV. Reduced or suspended access to asylum process directly affects persons with the intention to seek asylum and those in the process of obtaining the status as it prevents them from timely acquiring the legal status and accessing services addressing the basic needs.

Access to formal education for persons/children seeking international protection is hindered due to delayed asylum procedures and non-issuance of asylum-seekers cards, due to COVID-19. Also, informal learning opportunities in reception centers are affected by strict hygienic and social distancing measures that reduce the capacities and put additional strain on teachers. The IDP children in CCs, as well as returnee children from economically vulnerable families have no access to online education due to lack of computers, smartphones, internet connection and even electricity.

Numbers of reported SGBV incidents, as well as of other types of security incidents have increased; timely provision of adequate response and protection to victims is further complicated due to the restriction of movement and other COVID-19 related measures. IDPs still accommodated in collective centers have no adequate living conditions to apply increased hygiene and social distancing requirements. Some of them lack financial means to sustain themselves during the lockdown and secure food. Lack of harmonized legislation regulating social protection throughout the country provide unequal level of support to the socially vulnerable persons including IDPs and returnees, not based on developed social security minimum and the actual needs.

Current Programme Response

Project, Agency	How the on-going intervention responds to COVID-19, budget, duration
Social protection programme (UNICEF)	<ul style="list-style-type: none"> • Technical assistance to governments at relevant levels (cantons, entity) to conduct Social Protection Rapid Assessments of COVID-19 pandemic impact and propose and implement immediate response measures 100,000 USD, 3-6 months duration • Support selected municipalities in design of social protection and inclusion services to mitigate the effects of the crisis on the most vulnerable families with children – Budget 40,000 USD, 6 months duration • Engage with IFIs, donors, and government on the importance of protecting social spending; - continuous, ongoing • Widely disseminate advocacy messages on the role of social protection in effective responses to COVID-19; - continuous, ongoing
Child protection programme (UNICEF)	<ul style="list-style-type: none"> • Train health, education, child protection and MHPSS staff on COVID-19-related child protection risks – 40,000 USD • Strengthen referral/coordination mechanisms between health and social welfare - 20,000 USD • Support case management systems to (i) identify and address vulnerabilities, (ii) deliver integrated and coordinated services and conduct regular follow-up; and (iii) address pre-existing protection concerns and those aggravated by COVID-19 -15,000 USD

	<ul style="list-style-type: none"> Identify children at higher protection risks and establish support and monitoring mechanisms – 100,000 USD Support outreach and non-intrusive emotional support in the community by providing, when necessary, psychological first aid and referral – 30,000 USD Provide community-based mental health and psychosocial support to children and their families -250,000 USD Identify and prepare for creative and online measures to deliver child protection services: social platforms, TV/radio channels, etc.- 25,000 USD Promote the safety, self-care and psychosocial wellbeing of the frontline workers. Provide supervision to staff in all institutional care facilities (children's homes, detention facilities, reception centres) – 40, 000 USD
Education programme (UNICEF)	<ul style="list-style-type: none"> Completed rapid assessment of education sector to map the interventions and gaps as well as immediate needs Coordination and communication to strengthen the education sector response and ensure continuum of learning - 20,000 USD Support Ministries of Education and other education actors in the production of pre-primary and primary education lessons to be broadcast on media (radio/tv) and other distance learning platforms with special consideration for vulnerable groups (Roma, CWD etc.) - 75,000USD Provide teaching and learning materials to families to enable them to support home study in short term school closures - 50, 000 USD
Nutrition programme (UNICEF)	<ul style="list-style-type: none"> Support the dissemination and implementation of appropriate breastfeeding recommendations in the COVID-19 context - 5,000 USD Support Mother and baby corners for refugees and migrants in TRCs, providing counseling and support on nutrition, breastfeeding and hygiene promotion - 50,000 USD
Support to refugees and other persons of concern and Annex VII processes in BiH (UNHCR)	In partnership with the Ministry for Human Rights and Refugees (MHRR). Supporting MHRR's staff in charge of security, and hygiene in RCC Salakovac (13 persons). Budget: 78,000 USD. Duration: Mid-March – December 2020.
Facilitating a strengthened asylum system (UNHCR)	In partnership with the Ministry of Security (MoS). Support MoS' staff in charge of security, hygiene and sanitation in AC Delijas (12 persons), team of experts in charge of registration and refugee status determination (RSD), 8 persons. Budget: 110,000 USD. Duration: Mid-March – December 2020.
Community-based protection and protection-sensitive accommodation of asylum-seekers in USC (UNHCR)	In partnership with DRC. Community Based Protection Team in the reception centers in Una Sana Canton, ensuring identification and referral of vulnerable PoCs to health services, legal services, case management services (specifically for SGBV). Addressing and advocating for PoCs' key protection concerns with relevant agencies in order to minimize negative impacts of COVID-19. Budget: 68,286 USD; Duration: Mid-March 2020 – December 2020.
Provision of free legal aid to refugees, asylum-seekers, IDPs, returnees and relevant legal analyses (UNHCR)	In partnership with VP BiH. Provision of free legal aid and a series of online coordination events. The VP BiH International Protection Forum launched in order to reach person of concern in the centers and in other locations without access to standard assistance channels. Budget: 139,821 USD; Duration: Mid-March – December 2020
Provision of miscellaneous services to recognized refugees and asylum-seekers (UNHCR)	In partnership with BHWI. Psychosocial support in the reception centers and urban areas with remote assistance available 24/7 through SOS lines for online counselling and crisis interventions (psychologists, social workers and translators). Occupational activities in reception centres Salakovac, Delijas and Usivak. Online Bosnian language classes for beneficiaries in private accommodation, online tutoring for children in private accommodation (individual customized plans for online classes) as well as for children in IC Salakovac who attend adapted school curriculum. Distribution of food parcels and non-food items for selected protection cases. Guardianship and individual assistance for unaccompanied and separated children. Budget: 82,332 USD; Duration: March – July 2020

Direct Assistance (UNHCR)	Distribution of 20 computers and the access to internet, enabling 300 asylum-seekers and recognized refugees residing in centers and private accommodation to have access to online education, information and entertainment. Budget: 5,500 USD; Duration: June 2020
UNHCR	In cooperation with BHWI, provide 60 most vulnerable UASC from USC with protection sensitive accommodation and all other child protection sensitive services in MFS Emmaus Budget: 202,000 USD; Duration: September-December 2020
UNHCR	In cooperation with BHWI, provide 10 families with intention to seek asylum in BiH with adequate basic services during the COVID-19 emergency situation including expedited procedures for entering the asylum process. Budget: 143,000 USD; Duration: August 2020-June 2021
UNHCR	In cooperation with BHWI, provide 60 PoCs granted refugee status or subsidiary protection and extremely vulnerable asylum-seekers staying in private accommodation with monthly humanitarian assistance. Budget: 370,000 USD; Duration: August 2020-June 2021
UNHCR	Establish UNHCR field presence in Tuzla in order to support PoCs and national authority structures. Budget: 115,000 USD; Duration: June 2020-June 2021
UNHCR	In cooperation with the implementing partner, foster the communication with communities: Peer educators with the assistance of cultural mediators / interpreters provide 32 community information sessions / thematic trainings through the Peer to Peer system for 700 PoCs and establishing a hotline/ call center for answering PoC's queried on COVID-19 and other issues. Budget: 17,000 USD; Duration: July 2020-June 2021
UNCT Joint Programme on CRSV - 'Seeking care, support and justice for survivors of conflict-related sexual violence' (UNFPA, IOM)	IOM will ensure CRSV survivors continue to have information on and access to the application procedure for the status of civilian victim of war/victim of war torture. Budget: GBP 24,700 Duration: April 2020 – June 2021. UNFPA Assessment of COVID-19 impacts onto GBV/CRSV survivors and related services (medical, psychosocial, legal). Budget: 4,000 USD, duration May-June 2020
Support to youth (UNFPA)	Survey on opinions and experiences on the impact of COVID-19 on their lives, with a specific focus on sexual and reproductive health, community relations and migration. Budget: 6,000 USD, duration May-June 2020. Youth communications through online Barometer: Weekly webisodes where young people address issues of concern to them including mental health support needs; youth videos on protection from Covid-19. Budget: 5,000 USD, March – December 2020
Eliminating violence against women (UN Women)	1. Technical support to Gender Center RS and Gender Center FBiH to multi-sectoral teams at the local/cantonal level to establish, enhance and monitor the quality of implementation of multi-sectoral response to domestic violence at the local level Budget: 150,000.00 USD Duration: (May 2020 – March 2021) 2. Support to CSOs on enhancing and monitoring quality of specialized and multi-sectoral services at local level, including the provision of services to survivors of sexual violence Budget 160,000.00 USD Duration: (May 2020 – March 2021) 3. Small grants for basic immediate needs of safe houses for domestic violence survivors Budget: 35,000 USD Duration: May – June 2020 4. Emergency Personal Protective Equipment (PPE) packages for staff and beneficiaries of shelters; Budget: 6,000 USD Duration: March – May 2020 5. Support to the standardization and enhancement of police response to domestic violence and violence against women; Budget: 175,000.00 USD Duration: May 2020 – March 2021 6. Support to CSO initiatives engaging men, women and young people in selected communities in prevention of VAW and DV Budget: 85,000.00 USD Duration: May 2020 – March 2021

	<p>7. Support to the implementation of Safe cities and Safe public spaces initiative to enhance response to sexual harassment at the local level in BiH Budget: 80,000 USD Duration: May 2020 – March 2021</p> <p>8. Support to continued capacity building support to media professionals on gender-sensitive reporting on cases of VAWG. Budget: 50,000.00 USD Duration: June 2020 – March 2021</p>
Regional program on ending violence against women (UN Women)	<p>1. Provision of technical assistance to CSOs to advocate for review and amendment of legislation, by-laws and policies referring to equal access to quality specialized services at the BiH Entity Levels. Budget: USD 65,000.00 Duration: June 2020 – July 2021</p> <p>2. Influence behaviour change of police officers through a Communication Campaign for Behavioural Impact and reverse the trend of inadequate response to cases of domestic violence in Tuzla Canton Budget: USD 80,000.00 Duration: May 2020 – July 2021</p> <p>3. Strengthening demand and supply of services for protection from domestic violence at the local level, by supporting CSOs (Safe network) in building capacities and representing marginalized communities in building trust between women and local service providers. Budget: USD 130,000.00 Duration: May 2020 – July 2021</p>
Economic Governance for Growth (UNDP)	Procurement of equipment for the Faculty of Mechanical Engineering at the University of Sarajevo, including four new 3D printers, filaments and raw material for production of protective medical equipment, as well as a machine for testing the mechanical properties of materials. Budget: 54,065 USD; Duration: May 2020
Strengthening the Role of Local Communities/ Mjesne Zajednice (UNDP)	<p>Real time community voicing through Rapid Response Assessment will be finalized in less than a month and immediate needs will be identified in 24 local governments in BiH, including 136 Mjesne Zajednice, 70 CSOs and 24 community hubs. In addition to most vulnerable population groups the project will work with local governments, MZs, CSOs.</p> <p>Budget: 350,000 USD; Duration: May-November 2020.</p>
Green Economic Development Project (UNDP)	Purchase of seventeen 3D printers, three 3D scanners, five laptops, CNC mill, table drill, grinder, circular saw, and various supply material for 3D printing for production of various equipment for the prevention of the spread of the COVID-19 virus, for the Faculty of Mechanical Engineering in Sarajevo, Zenica, and Tuzla and Faculty of Natural Sciences and Mathematics in Banja Luka. Budget: 199,325 USD; Duration: April-May 2020.
Regional Programme on Local Democracy in the Western Balkans (UNDP)	Support to vulnerable groups in essential personal protection equipment and spring seeds. The funds that will remain will be used to ensure essential kits to vulnerable. Budget: 50,000 USD; Duration: June-December 2020.
Support Member States in the implementation of SDG 4 (UNESCO)	<p>1. Socio-Economic Impact Assessment of Covid-19 to Education Sector, gathering the up-to-date information, in cooperation with line ministries and statistical institutions.</p> <p>- Survey on addressing the covid-19 pandemic for technical and vocational education and training (TVET) providers, policy makers and social partners, in cooperation with ILO and WBG.</p> <p>- Rapid needs assessment which specifies the main issues, gaps and the needed priority actions of the 12 education administrative units in BiH (follow up), together with UNICEF. Budget: 10,000 USD. Duration: April-June 2020.</p> <p>2. Provide policy recommendations to ministries of education on safe transition process of school opening: translation and distribution of guidelines for Safe Re-opening of Schools, in cooperation with UNICEF and WBG, as well as webinar, to inform decision-makers on school reopening, support preparations and guide the implementation process, as part of overall public health and education planning processes. Budget: 800 USD. Duration: April-June 2020</p> <p>Ensure equal access of all students to online learning through provision of equipment:</p> <ul style="list-style-type: none"> • Donation of ICT equipment to primary school students: 152 pieces Lenovo tablets for elementary and secondary schools in Canton Sarajevo, West Herzegovina Canton, Canton 10 and District Brcko in order to assist in ensuring continuity of school process

	<p>as well as equal learning opportunities for all students. Budget: 20,398 EUR. Duration: March-April 2020</p> <ul style="list-style-type: none"> • Donation of mobile connections: support to mobile online teaching platform through providing of 3,908 mobile connections for primary and secondary students in cooperation with the Ministry of Education and Culture Government of Republika Srpska. Budget: 18,561 EUR. Duration: March-April 2020 <p>Capacity-building for teachers in order to enhance media and information literacy of primary/secondary teachers. In cooperation with the Faculty of Political Sciences in Sarajevo, launching of a pilot workshop for pre-school, primary and secondary teachers from Sarajevo Canton aimed at enhancing their Media and Information literacy. Budget: 3,589 EUR. Duration: May-June 2020.</p> <p>Improvement of quality of information management platforms in education: Assisting education authorities in strengthening the digital education system in BiH, through the UNESCO Global Education Coalition by providing ICT tools and skills for teachers (for pedagogy) and ICT tools and skills for administration and tracking (EMIS, TMIS, statistical systems), Budget: in preparation, Duration: TBD</p> <p>TVET re-skilling or up-skilling: Enhancing TVET capacities in BiH in order to compensate for the misalignment between TVET training and labour market needs, Budget: in preparation, Duration: TBD</p>
Assessment of social protection responses to COVID-19 (ILO)	Contribute to the policy development for building a comprehensive and shock-resilient social protection system, conducting a comparative analysis of the factors linked to success, failures and lessons learned. Budget: 25,000 USD, Duration: May-July 2020
Rapid Social Protection Calculator for COVID-19 (ILO)	Rapid Social Protection Calculator for COVID 19 was developed by ILO and shared with local authorities in charge of social protection policies in BiH. The tool supports policy makers to make rapid adjustments to social protection systems in response to the COVID-19 crisis. Budget: 30,000 USD, Duration: May 2020
Support to vulnerable groups (older persons, persons with disabilities and women in shelters) during the pandemic (UNFPA)	<p>Distribution of food and hygiene parcels to vulnerable population</p> <p>Budget: 18,700 USD; Duration: May 2020</p>
Gender Responsive Budgeting (UN Women)	<p>An analysis of the rebalance of FBiH Budget was undertaken, with specific focus on sectors which have gender responsive programmes. The key output was a technical note with recommendations, shared with Members of Parliament and international organisations.</p> <p>In preparation: Analysis of rebalance of Canton Sarajevo Budget, RS Budget and BiH Institutions Budget. These analyses aim at providing evidence-based inputs for policy making. Budget: 2,500 USD, Timeline: April – May 2020. Funded by Sweden.</p>

Below are some concrete **policy recommendations** identified by the BiH UN Country Team system for social protection and basic services, with the focus on what is important and actionable for COVID-19-related socio-economic response and recovery during the next 12-18 months:

- Based on the assessment of the social protection responses to COVID-19, provide policy recommendations to establish a comprehensive and shock-responsive social protection system which protects people's health and lives and mitigates adverse economic consequences during the crisis and in the recovery period.
- The government, employers' and workers' organizations will be equipped to implement gender-responsive workplace actions against the risk of COVID-19 to ensure safe return to work.
- Provide policy recommendations to ministries of education with additional policy guidelines for safe transition of school opening process (in line with already provided Guidelines for Safe Re-opening of Schools), and in regard to planning of program activities from a view point of finances (budget restrictions, economic recession, and slowdown of economic growth can potentially hamper the effective implementation of educational activities, unable financial investments in education, etc.).

- Put in place mechanisms for monitoring and evaluation of online learning and strengthening of online safety and security.
- Introduce provisions in current policies for enhanced ICT/digital solutions in education.
- Strengthen and reformulate TIVET education strategy to improve employability.
- Modernise the TVET delivery and increase its resilience to COVID-19 related shocks and lockdowns through improved E-TVET
- Improving skills needs anticipation and matching after the crisis.
- Strengthened mechanisms for service provision to vulnerable groups of people, including attention to cooperation between different services and inclusion of vulnerable people and ability to ensure continuity of services in conditions of lock-down in both urban and rural areas (alternative options to ensure continuity of service). Review, improve and expand access to social services for all who need them. Review and clarify roles of CSOs as service providers, financing arrangements to ensure continuity of services. Support to service providers to use digital technologies for provision of services, coordination, consultations, capacity building of service providers.
- Monitor social spending, efficiency of social assistance measures, develop recommendations for improved allocations, with a view towards inclusiveness (leaving no one behind and gender perspective). Considering introducing/adoption of social protection floor.
- In view of the “leave no one behind” principle, support undertaking SDG-informed reviews of public spending in priority areas in order to assess the efficiency, effectiveness, equity and adequacy of past spending. These reviews will contribute to enhancing capacities of sectoral ministries to optimize and strategically re-channel public resources in selected priority areas, identified as development priorities in the SDG Framework in BiH (e.g. within the sectors of education, employment, health). Such efforts will help pave the way not only for the effective implementation of the SDGs financing framework but will also create the necessary pre-conditions for accelerated development in these sectors.
- Consider measures to support and motivate poor/vulnerable households to transition to clean heating solutions, as part of cash payments/social benefits support. Pollution from residential areas is a significant share of overall air pollution and clean heating proves to be economically more expensive for poorer households.
- Mechanisms to be adapted by SFA and MoS to ensure continuation of registration and asylum procedures, as the first step towards the systemic access to basic services. Legislation and line institutions need to recognize specific vulnerabilities among displaced persons, persons under international protection and asylum seekers and ensure access to social services (health, education, social protection).
- CCCM coordination mechanisms need to be further enhanced to respond to the new situation and guarantee protection standards in reception centres.
- Need to further strengthen with the focus on standardization and financial and technical sustainability, and expanding the geographic coverage of services for victims and survivors of violence. Improved coordination is needed among service providers at local level (police, health, social protection, justice), as well as within the relevant coordination mechanisms on the cantonal and entity levels. Civil society organizations that provide specialized services to survivors of violence against women (safe houses, SOS helpline, psychosocial support, legal aid) have had increased requests for support, but restricted capacities to respond, without official guidance and support from civil protection authorities and line ministries. Some first responders (police, health care, justice) have been heavily engaged in state of emergency with reportedly limited capacity to respond to the cases of violence.
- Continue support to gender institutions mechanisms to enhance multi-sectoral response from an institutional point of view including recovery from COVID-19.
- Promote voluntarism and intergenerational support. Strategies on ageing were developed in both entities in recent years. The one in RS has been adopted while the one in the FBiH has been drafted but not adopted due to blockades of the entity government and parliament. Both strategies envisage opening of Healthy Ageing Centres across the country that would provide direct support to their members. The network of Healthy Ageing would serve as foundation for provision of voluntary services, largely through intergenerational support. Good practices could be expanded in local communities, with special focus on nursing homes for older persons across the country as they were left isolated with little support provided beyond regular institutional care while staff of those nursing homes have limited knowledge of how to deal with COVID-19 and how to protect nursing home’s residents.

Pillar 3: ECONOMIC RECOVERY - Protecting jobs, micro, small and medium-sized enterprises, and the most vulnerable productive actors

Likely impact and vulnerabilities due to COVID-19

The COVID-19 pandemic poses the most serious threat to the BiH economy since the global financial crisis of 2008, affecting the economic activity through both the demand and supply channels. The effects of COVID-19 on BiH's small and open economy (foreign trade is 81.3 percent of GDP²¹) will affect almost every sector of the BiH economy, though some sectors will be hit exceptionally hard.

On the demand side, the COVID-19 containment measures that were introduced and an acute contraction in tourism and connected service sectors have cut deeply into private consumption, which is the driver of the BiH economy and has experienced sharp declines. Tourism receipts have fallen significantly, with host government(s) estimating that hotels are currently operating at 10 percent capacity²². According to BiH government reports, up to 850,000 overnight stays of tourists in BiH in March, April and May were cancelled because of the COVID-19 pandemic.

On the supply side, COVID-19 prevention measures, such as business closures, have significantly disrupted the production of tradable and non-tradable goods. Disruption in supply chains, but also a lower demand from the EU and key CEFTA trade partners are causing declines in both manufacturing and exports of goods. As an example, after COVID-19 outbreak occurred in Italy, several sectors of the BiH economy, such as the textile industry, shoe manufacturing industry, leather, wood and metal industry have been hit with production halved or even completely discontinued, given that Italy is the main source of raw materials but also a key export market. A protracted recession caused by COVID-19 in the EU and key CEFTA trading partners could have an even more severe impact on export-oriented sectors and firms, and consequently on medium-term growth prospects.

COVID-19 associated supply and demand shocks, including direct containment measures, but also erosion of confidence and heightened uncertainty over policy response, have "pushed" many businesses to reduce the number of their employees in order to withstand the impacts of COVID-19, it is estimated that there has been a net loss of 21,941²³ full-time registered jobs in FBiH, while the RS authorities estimate that 2,403 workers have lost their jobs, of which 1,100 were employed on contract, while some 867 new jobs were created by the end of April 2020²⁴. One possible explanation for the difference in the number of formal job losses in the two entities is the different timing of the entity authorities' fiscal measures mitigating negative economic consequences caused by COVID-19. There have also been anecdotal and press reports that fiscal measures introduced by the authorities focused on mitigating COVID-19 negative economic impacts and preserving jobs have in some cases resulted in an increased number of illegal layoffs by employers and violations of labor rights and other associated human rights.

Firms in BiH are affected differently depending on the sector, size and their position in the production network, as different firms face varying degree of supply and demand shocks and have uneven capacity to cushion them, and government policy responses should take this into account. While some BiH companies are adapting and finding ways to repurpose their production in response to the COVID-19 (examples includes switching to production of disinfectants, masks and protective overalls, leveraging technology, know-how and 3D printing for domestically produced PPE and respirators), some firms have less options. Smaller enterprises are impacted more severely than larger firms due to their limited internal resources to cushion either/both the supply shock and the decline in demand but also since access to finance is more restrictive for them. Given that the BiH economy is dominated by SMEs, this is an important policy consideration. As 98 percent of micro businesses are women-owned and are among the most severely impacted, the significant gender dimension needs to be considered.

Sectors oriented to the domestic market or connected to online services are less likely to be directly affected by COVID-19 due to fewer disruptions; these include agriculture, information and communication (ICT), and health and social services. On the other hand, sectors based on in-person services, such as tourism and hospitality, and labor-intensive industries will be hurt most severely, due to (i) the nature of their production work requiring being "present" (large supply shock), and (ii) the potential large decline in demand for in-person services and large demand shock²⁵. The cultural, creative and heritage sectors

²¹ World Bank, 2020

²² Host government estimated, stated in LOI on RFI with IMF, 2020

²³ Based on the FBiH Tax Authority reports, period refers to end February, 2020 through end April, 2020

²⁴ RS Government PM interview, <https://www.bl-portal.com/rs-i-fbih/mjere-vlade-rs-su-dale-rezultate-i-nema-masovnih-otpustanja-radnika/>

²⁵ World Bank, 2020

are such examples and have been severely hit, as a result of COVID-19 government measures on prohibition of public gathering, cancellation of events, closure of institutions.

While the majority of public cultural institutions did not have to lay off staff yet, they are facing loss of revenue from no ticket sales, closure of shops, cafés and other services. On the other hand, private cultural and creative industries and the independent arts sector are heavily impacted. This sector consists of a large number of diverse activities, and it is certain that not all of them are equally affected by the pandemic or at least not to the same extent. Among the most affected areas are those that rest on live performance and depend heavily on tourism which activities are affected by prohibition of gatherings, limited travel opportunities, inability to plan business, and stagnation of the cultural tourism industry. The most critical factor for the survival of the heritage sector is the loss of revenue caused by the forced closure of cultural institutions, museums and historic sites. The fact that no visitors from abroad will be able to travel to touristic areas for a longer period of time also has a multiplier effect on negative economic impact. Finally, this sector has also been significantly affected during the budget rebalancing of the governments in response to COVID-19 crisis. For example, in the recent rebalancing of the FBiH budget, the planned transfer for the development of tourism sites in the FBiH of BAM 2.5 million has been completely zeroed out; similarly, funds allocated for cinema were reduced by BAM 2.34 million, and transfer for culture of significance to the FBiH was reduced by BAM 50,000 ²⁶.

Given the risk that post immediate COVID-19 crisis the market and business environment remains challenging for BiH firms, resulting in risk of continued layoffs, it is critical that the authorities' policy responses safeguard private sector jobs to have a base from which to accelerate job creation in the medium term for those who are jobless or have lost their jobs due to COVID-19. Given limited fiscal space, it is critical that authorities' policy and program support is transparent, well targeted to ensure they benefit those firms most in need, is timely in implementation (addressing the risk of policy uncertainty), time bound and fiscally sustainable.

COVID-19 crisis created not only unemployment increase but also a risk of deteriorating working conditions. Jobs to be maintained or newly created have to be based on decent work. Also, lockdown and various restrictions of movement due to COVID-19 pandemic affected the working modalities of people. Many people are still working from home and there is no boundary between work and home nowadays. In this respect, preventive measures of violence and harassment in the world of work also needs to be applied to home-based working in the context of COVID-19. Work-related violence and harassment may happen at home caused not only by the employers, colleagues and business clients but also by the family members. Particular attention is required concerning psychological care to the victims of work-related violence and harassment and increase of reporting lines to cope with new working modalities during COVID-10 crisis.

Existing gender inequalities are likely to deepen in COVID-19 context as past pandemics have shown to have disproportionate and lasting effects on women's work and livelihoods. Part-time and temporary workers, the majority of whom are also women, are expected to suffer dramatic job losses due to COVID-19 impacts – and lack access to job preservation schemes and unemployment benefits. Overall, women have fewer resources that provide fallback options. Without a deliberately gendered response, the COVID-19 crisis risks rolling back gains in women's financial inclusion and access to social protection, constraining women's ability to support themselves and their families. Women-owned businesses are more reliant on self-financing thus increasing their risk of closure during extended periods of significantly reduced or no revenue.

The COVID-19 pandemic effects on any society are very complex and still unclear, but it can be expected that, directly or indirectly, they will have an impact on protected areas worldwide and within the country as well. Among those, most directly affected will be the protected areas which rely on tourism for their financial viability. We are uncertain if and how this may affect nature conservation activities in the country and what challenges may arouse in this regard. It could easily happen that the direct effects of the pandemic, as well as those of the public measures significantly impair or contribute nature protection in general.

Current Programme Response

Project, Agency	How the on-going intervention responds to COVID-19, budget, duration
Competencies and Innovation EU4Business (GIZ, UNDP, ILO)	GIZ, UNDP and ILO have prepared a set of measures, tailored to respond to the immediate impact of the COVID-19. A support scheme will be launched on 15 May, aimed towards the market integrators and small-scale farmers to reestablish the

²⁶ Source <https://depo.ba/clanak/201292/rebalans-budzeta-pred-ocima-javnosti-vlada-fbih-odlucila-da-unisti-turizam-i-kreativnu-industriju-kako-bi-oporavila-privredu>

	commercial linkages, stabilize the supply networks and reopen existing access to market. Budget: 972, 873 USD (900,000 Eur); Duration: May-December 2020.
EU Support to Agriculture Competitiveness and Rural Development in Bosnia and Herzegovina – EU4AGRI (UNDP)	Redesign existing support measures to provide focused recovery interventions for primary agricultural production and processing of agri-food products. Existing support measures will be adjusted to respond to current needs of agri-food operators as a result of Covid-19 pandemic. In particular the support measures will be used to build more resilient sector in terms of workplace and workers safety, investments in product safety, handling and packaging, digitalization, access to market (short value chains, from farm to fork etc.). Budget: 2,161,940 USD, (2, 000,000 EUR); Duration: July-December 2020.
Via Dinarica (UNDP)	The COVID-19 disease prevention measures will be incorporated into the maintenance and marking of Via Dinarica Trails. Promotion activities will be adjusted as response to COVID-19 situation. Grant schemes for diversification of tourism offer and establishment of Via Dinarica value chains. Grant beneficiaries (hosts and other tourism service providers) will receive the advisory services related to COVID 19 prevention measures and protection to earn trust among the tourists. Budget: 379,000 USD; June 2020 - May 2022.
Economic Governance for Growth (EGG), (UNDP)	Assistance to Sarajevo Canton Government in preparation of the Law on Negative Economic Consequences Mitigation and Savings. The assistance is complementary to the basic activity of the project aimed at rationalizing public expenditures. Savings have a special significance for the preservation of jobs and new employment. Budget: 16,275 USD; Duration: May - December 2020.
Mainstreaming the concept on Migration and Development into relevant policies, plans and actions in Bosnia and Herzegovina (D4D), UNDP&IOM	On the diaspora web portal developed under the D4D project, MHRR has opened one section related to COVID 19, and invited all diaspora organizations and individuals to share their experiences and ideas, projects and proposals related to COVID-19 issues. In Tuzla and Kljuc diaspora sponsored measures for local economic recovery. Budget: 119,350.00 USD; Duration: June 2020 - December 2020.
Integrated Local Development Project (ILDLP), UNDP	Some small-scale interventions planned with local government (5 projects) and cantons (2) will be directed to socio-economic recovery, depending on governments decision. Directing the next cycle of the RS Financing Mechanism for Local Development to socio-economic recovery, is also an option, if partners accept. Budget: 150,000 USD; Duration: June 2020 - February 2021
SDG Roll-Out, UNDP	Support to companies' part of the SDG Accelerator for SMEs to adjust their business models and preserve jobs. Through direct support and expert advice, SDG Roll-Out provide advice and liaison to 5 companies to adjust original business models to respond to the crisis (production of PPE, food production, etc.); Budget: 82,000 USD; Duration: June - December 2020.
Municipal Economic and Environmental Governance – MEG, UNDP	Redesign existing Letters of Agreement to free up earmarked funding of partner Local Governments and use those funds to mitigate impact of Covid-19 on local economy. Reduce participation of Local Governments participation in joint small-scale projects to 50-50%, thus enabling them to channel these surplus financial resources in responding to Covid-19 adverse effects on local economy. Budget: 250,000 USD; Duration: June - December 2020.
Economic Pulse of BiH (UNDP Accelerator Lab)	First national survey of 14.000 businesses with 1.000+ response completed. Site development in the process. Real-time, up to date exploration of the business's current situation, their plans and expectations as a data source for designing economic recovery measure. Budget: 10,000 USD; Duration: April 2020.
Solidarity “pay now, use later” deals for micro and small enterprises (UNDP Accelerator Lab)	Following a survey of ~1000 customers to check desirability of the service, finalizing a business model to use coupon portal CityDeal as a platform for small and micro businesses to raise capital, by allowing customers to make socially responsible purchasing in advance. Micro and small businesses learn new skills on digital commerce and digital customers relationship management. Saving jobs, especially in the service industries. Build capacities of micro and small businesses for digital business and

	platform economy. Introducing new business model focused on social responsibility. Budget: 10,000; Duration: May 2020.
Green Economic Development Project (GED), (UNDP)	Implementation of energy efficiency measures in public buildings and public lightning systems and renewable energy measures will have direct positive impact on economy through mobilization of local labor market, for works on the construction as well as in the area of material production. It is expected that ca 350 green jobs (350 individuals on a full-time basis for one year) gets created through this activity. Budget: 4,000,000 USD; Duration: April - February 2021.
UNDP Rapid Response Facility, (UNDP)	This project funds the economic impact assessment, vertical and horizontal coordination, rapid economic impact assessment and launch of a real-time economic "pulse" meter platform. Additional elements: development of workforce and workplace safety protocols; Support to the private sector to expand and/or repurpose capacities for production of protective equipment and other priority goods; Support selected businesses to transition to e-business/e-commerce, digital economy and sustainable business models. Budget: 160,000 USD; Duration: June – December 2020.
Integration of culture policies and measures at all levels of government (UNESCO)	This project funds the Socio-economic impact assessment: documenting the response to and impact of coronavirus pandemic from the culture perspective to inform further action and better support policy advice provided to government to overcome the crisis from economic point of view. The focus is on public cultural intuitions and creative industries (enterprises and entrepreneurs). Budget: 10,000 USD. Duration: March-June 2020
Survey on COVID-19 impact on the diaspora (IOM)	Survey on COVID-19 impact on the diaspora and their contribution to BiH development Budget: USD 4500 Duration: May-June 2020
Free Legal Aid and Advocacy for Refugees, Asylum-Seekers, IDPs Returnees" (UNHCR)	In partnership with VP BiH. Legal aid to challenge the legality of layoffs and prevent the violation of human rights. Additional assistance for persons of concern to obtain unemployment benefits and register with the Employment Agency. Budget: 67,114 USD. Duration: Mid-March – December 2020
Gender Responsive Budgeting, UN Women	Measures included support to 200 women agri-business owners and 2 association of women from Sarajevo-Romanija region; one-time financial support to 40 women entrepreneurs in RS. Budget: 26,000 USD, May – June 2020 (Funded by Sweden)
Women's Economic Empowerment (UN Women)	Assessment of the impact of COVID-19 on the socio-economic situation of women at local level, aimed towards identify the non-health risks for women at local level with focus on the most excluded related to the outbreak of Covid-19. Budget: 2,500 USD, May – July 2020) (Funded by Sweden) Research on resilience of women-owned business to crisis, aimed at identifying key challenges of micro women-owned businesses, weaknesses and recommendations. Budget: 50,000 USD, June – September 2020 (Funded by Sweden) Rapid Gender Assessment of COVID-19 in Bosnia and Herzegovina to assess the impact of coronavirus pandemic on main challenges faced by women and men; includes two data collection cycles in May and July 2020, with 1400 respondents in each cycle. Budget: 25,000 USD, April – August 2020. (Funded by Sweden)
IT Girls Initiative (UNICEF, UNDP, UN Women)	Scaled up results to increase the outreach of ongoing activities to improve digital, leadership, advocacy and entrepreneurship skills of young people to support coping with the consequences of COVID-19 pandemic and witnessing the transformation of educational and business activities. Notably, the presence of IT Girls Initiative is increased in RS. It is estimated that minimum 350 girls and young women benefit from the new set of proposed activities. At least 10,000 young women will benefit from free webinars through #ITGirlsGoOnline, 200 girls and 30 teachers from 10 elementary schools will benefit from high-digital skills training and 5 IT companies will be supported to revise their workplace standards in line with Women's Empowerment Principles. Budget of 349,890 USD. Duration: August 2020 - December 2021,

New Regional Project on Gender Responsive Budgeting (UN Women)	The Project will among its first priorities address the institutional response to crisis and work on development of guidance and checklists on how to ensure a gender-responsive response in an emergency. In 3.5 years, in BiH the Project will deliver 700,000 USD through work with Ministries of finance, audit offices, parliaments and local governance to systematically integrate gender equality at all stages of national and local policymaking and budgeting processes. Duration: June 2020 until December 2023, in Albania, Bosnia and Herzegovina, Kosovo and Serbia. (Funded by Sweden)
Rapid Country Assessment of the Employment and Labour Market Impact of the Crisis with policy recommendations (ILO-EBRD)	In the Western Balkans, the ILO Office for Central and Eastern Europe and the Gender and Economic Inclusion Team of the EBRD have created a joint regional Task Force to contributes to framing policy dialogues, negotiations, and decision-making around the responses that Western Balkan economies could offer to the short- and medium-term impacts of the COVID-19 crisis in the World of Work. The knowledge products generated by the Task Force should serve Governments and the social partners in the Western Balkans in generating and assessing alternative policy responses. Budget: 50,000 USD, Duration: April-May 2020
Enterprise Survey (ILO-EBRD)	The survey aims to support relevant stakeholders and assess the needs of enterprises resulting from the COVID-19 crisis. The survey can be iterated several times during the reactivation and recovery phases as the organizations were provided with a software that allows them to generate automatically the analytics. This would enable to capture the voice of the private sector as the situation evolves and changes. Budget: 50,000 USD, Duration: first iteration (April-May 2020); without limit of time.
Guidelines on Conducting Covid-19 impact assessment Surveys (ILO)	ILO provided employers'/business organizations with the user guidance to assess impact of Covid-19 on enterprises and their need for assistance. Budget: TBD, Duration April 2020
Employment Strategy 2020-2027 of the Federation of BiH (ILO)	Provision of technical assistance to the Ministry of Labour and Social Policy of the FBiH in developing the Employment Strategy 2020-2027 that will amongst other include short- and medium-term measures to address the impact of the COVID-19 crisis, as well as policy innovations that may mitigate the disruption generated by similar shocks in the future. Budget 20,000 USD, Duration – April - September 2020
Tools on COVID-19 impact on the collection of labour market statistics (ILO)	Statistical Agencies were provided with the ILO Guidance for labour statistics data collection: Essential labour force survey content and treatment of special groups on how to apply the latest international standards to maintain a core set of labour force statistics for monitoring in a context of government lockdowns and widespread uncertainty. In particular, it highlights the range of topics to prioritize and provides guidance on the treatment of special cases becoming more prevalent, such as job absences of uncertain duration, business closures, and overall reduced job search activity. Budget: TBD; Duration April 2020
Prevention of violence and harassment in the world of work by promoting ratification of ILO Convention No.190 (Violence and Harassment)	New international labour standards covering violence and harassment in the world of work were adopted in June 2020 (ILO Convention No.190 and Recommendation No.206). Together with a set of measures to be recommended, this is to promote ratification of C190 by Bosnia and Herzegovina. ILO support includes the review of pre-ratification study to C190 and roundtable to share and validate the results: Budget: USD 15,000, Duration: April – March 2021.
Survey on the COVID-10 impact on protected areas in the country (UNEP)	Within the current project of the United Nations Environment Programme (UNEP) focused on improving the management of protected areas in the country, a set of questions has been prepared with an aim of better understanding the impact of the COVID-19 pandemic at the protected areas in the country, enabling an insight in the current situation and respective estimates in this regard for the foreseeable future. On the other hand, potential develop of new and adaptation of existing policies that the governments undertake as part of their response to COVID-19 related challenges, provides an opportunity for UNEP to support protected areas and respective ministries in these processes.
Container Control Programme CCP)	Within the joint Action promoting rule of law and good governance through targeted border control measures at land ports and airports, Container Control Programme (CCP) included a module on gender equality and gender mainstreaming to better address

(UNODC)	issues of understanding the interrelationship between gender, security threats and crime is vital to the overall effectiveness of any response. Also, to in particular address gender perspective in COVID-19 emergency and increase awareness of gendered dimensions of any activity, which requires analysis, information and consultations with both women and men. Budget: TBD. Duration: June-July 2020.
Impact Assessment in Agriculture and Rural Development sector (FAO)	Assessment aims to analyse current situation in agriculture sector as well as provide recommendation for recovery. Team works with all relevant institutions, companies, organizations in sector as well as farmers individually. Budget: USD 108,360; Duration June-December 2020.
Environmental governance, sustainable environmental policies and environmental monitoring in support of the 2030 Agenda (UNECE)	Assessment and policy packages on the critical aspects and priority needs in the country's environmental governance, policies and monitoring with integration of covid19 perspective Budget 50,000 USD
Strengthening sustainable inland transport by making it safer, cleaner, more efficient and more affordable, for both freight transport and personal mobility (UNECE)	strengthen the transport-related SDG knowledge of Bosnia and Herzegovina Government officials and national experts through organisation of capacity -buildings event addressing also connectivity challenges as in impact of covid19 Budget 10,000 USD

Below are some concrete **policy recommendations** identified by the BiH UN Country Team system for economic recovery, with the focus on what is important and actionable for COVID-19-related socio-economic response and recovery during the next 12-18 months:

- Re-doubling efforts to create green, sustainable jobs, ensuring decent work, equal treatment with respect to rights and benefits among workers with different contractual arrangements and employment status.
 - Focus on sectors critical to building back a strong economy: energy transition, buildings and construction, food systems, waste, and mobility, enabling the market to establish the next generation of sustainable and productive infrastructure.
 - Meet the demand with stimulus packages that include measures promoting renewable energy, smart buildings and cities, green and public transport, smart specialization, sustainable food and agriculture systems, and lifestyle choices. Introduce policy support schemes to stimulate use of emerging technologies in the economy, especially in the manufacturing sector.
 - Introduce economic incentives to spur forces towards circular economy and emission control, modifying behaviours and fostering separate collection and treatment of waste to stimulate its reuse and recycling, and also in energy production.
 - Include tourism as a priority in future recovery efforts and support sector resilience.
 - Use financial guarantees to reduce investors' exposure to risks and to attract private capital to these markets.
 - Speed up adoption and provide support to implementation of legislation and corresponding programs and measures related to incentives for small businesses and improvement of entrepreneurial infrastructure.
 - Enable entrepreneurial ecosystem and access to finance for start-ups and high growth companies through the new legislative, fiscal and policy support for fostering start-up establishment and enabling ecosystem development. Focus is on start-up protection, start-and-scale programmes, awareness raising about opportunities for women in tech, access to venture capital etc.
 - Accelerate digital / electronic / cyber initiatives, especially related to legislative and regulatory frameworks (fully implement legislation on digital signature) which enable digital economy.
 - Align private sector activities and investments with the Agenda 2030 by inciting investors and businesses of all sizes to embed the SDGs into their decision making and practices and supporting governments to establish enabling policy and regulatory environments while facilitating multi-stakeholder partnerships.
 - Support strengthening of digital skills in the private sector.

- Establish monitoring, reporting and verification (MRV) system linking economic and environmental activities.
- Work with social work offices and labor departments to put in place upskilling initiatives for the unemployed as part of the recovering better initiatives.
- Improve labour legislation to adapt or introduce work arrangements regulations (e.g. on telework, short time work , work sharing, remote work) in line with international labour standards and in consultation with the employers' and workers 'organizations, so as to provide a quick, flexible and rights based response to emergency and force majeure situations, including Covid-19 pandemic. Support the establishment and work of regional science and technology hubs in Bosnia and Herzegovina as a mechanism to digitalize the economy, provide support to companies transition towards digital economy, as well as enable connection between research and development, innovation and the economy.
- Applying STED *Skills for Trade and Economic Diversification – an ILO methodology working at sector / industry level) to support the development of competitive sectors and smart specialization.
- Use the “Activate” and “TREE” packages to facilitate the activation of young people and avoid the risk of a 'lockdown generation'.
- Monitoring the impact and design response to increase economic stability and resilience for female-headed households through business coping strategies and strengthening access to mobile-based financial assistance for women-led small and medium-sized enterprises (SMEs).
- Introduce policy guidelines for improving the status of gig economy and informal economy workers in the country.
- Strengthen the role of labour inspectorates in monitoring workplaces, preventing abuses and undeclared work in the aftermath of the crisis.
- Ensure that measures to support employment and businesses are accessible to foreign workers and to returning BiH emigrants.
- Facilitate tripartite negotiations around sector-specific guidelines to facilitate the return to work in specific high-contact sectors and prevent a resurgence of the crisis and provide access to business continuity approaches (including through on-line training)
- Support the employment service to introduce innovative employment programmes and apply innovations to the service delivery model in order to respond to the Covid-19 specific challenges
- Provide policy guidelines for reopening institutions, with the special focus on museums and for World Heritage properties.
- Provide policy recommendations for decision makers on addressing the impact of the crisis to culture sector with special focus on shift in business model, new opportunities for production and dissemination of the cultural content, financing adjustments.
- Developing standard guidelines and tools and supporting institutional capacities and practices for gender responsive policy making and budgeting for COVID-19 response, including support to the development of checklists, indicators, and methods to monitor and track expenditure on gender equality.
- Support to economic activation of long term unemployed, with clear gender perspective, through re-training and access to employment
- Support to rural women, their associations and cooperatives with the special attention to continued access to markets.
- Prevent violence and harassment in the world of work including the period of home-based work.
- Engaging private companies into design and co-implementation of actions supporting social entrepreneurship.
- Consider bilateral agreements to protect seasonal workers.
- Monitor potential increases in the cost of sending/receiving remittances and ensure remittance service providers are treated as essential services.

Pillar 4: SOCIAL COHESION AND COMMUNITY RESILIENCE

Likely impact and vulnerabilities due to COVID-19

COVID-19 crisis has challenged community resilience and social cohesion, proving again that community participation and equitable service delivery are key to effective crisis mitigation and recovery. Communities are bearing the brunt of the socio-economic impact of **COVID19**. They also hold the key to flattening the COVID-19 disease curve, respond to the pandemic and ensure longer-term recovery. In this regard, communities will need investment. At the same time, just when the social capital — networks of relationships among people who live and work in a particular society, enabling that society to function effectively — is at a premium, the pandemic places considerable strains on social cohesion, exacerbating existing vulnerabilities, magnifying divisions and creating new ones. The urgent response to the COVID-19 crisis also needs to ensure that processes of constructive and inclusive social dialogue and democratic engagement are strengthened and not sidelined; and that gains made in terms of gender equality are not rolled back.

The limited capacities of local governments to adequately prepare for, and respond to, disasters are now being additionally stretched in response to the **COVID-19 crisis**. While the **COVID-19** impact at the community and household levels are yet to be fully assessed, it is already evident that, similar to natural hazards, **the COVID 19 crisis is testing the resilience of all sectors and areas of economy and development** – from public health, social protection and governance systems, education as well as overall local governance functioning, financing and service provision. Both direct health impacts and indirect impacts of economic and social disruption are likely to affect poor and vulnerable population and less-developed communities more heavily. Similar to natural disaster scenarios such as the devastating May 2014 floods in BiH, self-organizing community practices and mutually supportive interactions with other/neighboring communities will be critical in helping mitigate the COVID-19 crisis and maximizing results for a faster-paced recovery effort. In the COVID-19 crisis, people across BiH have showed a great sense of solidarity cooperation and mutual care. People across BiH must continue to seek ways of providing support to each other, including through volunteers that are helping elderly and other vulnerable groups maintain lifeline services which compensate for the limited response capacities at other/higher levels.

Inclusive, broad-based social dialogue; mutual understanding, trust and empathy; common priorities and messaging; and overall efforts to prevent hate speech, stigmatization, discrimination and the rhetoric of division and fear are critical elements of an effective COVID-19 crisis response and recovery. Vulnerable groups with preexisting structural barriers, age and gender inequalities, social stigma and overall poor socio-economic conditions, such as: children, youth and adolescents, women, elderly, people with disabilities, caregivers, migrants, refugees, asylum-seekers, persons under subsidiary protection and at risk of statelessness, vulnerable IDPs and minority returnees, informal sector workers as well as Roma and other marginalized groups will face disproportionate **impacts of COVID-19** and will require increased support during response and longer-term recovery. The potential negative impacts of COVID-19 prevention, treatment, actions but also mitigation measures need to be considered in decision-making so that vulnerable groups are not doubly affected both by the hazard and the response. It is therefore important to base the socio-economic response to COVID-19 on assessment outcomes deriving from broad-based, constructive social dialogues and engagement, with a strong gender dimension, of needs and impacts.

As a consequence of COVID-19 restrictions, many CSOs are forced to put planned activities on hold or are struggling to shift their work online; this may shrink space for, and pose challenges to, the timeliness and effectiveness of critical efforts and initiatives in the short, medium and long term. Critically it may also negatively impact the crucial role of civic activism. There is also a risk that due to fiscal pressure, authorities may cut down financial support to CSOs. On the other hand, CSOs may very well be looked upon to fill gaps left by authorities around the provision of essential services; convey timely information about the virus and protect marginalized groups. CSOs are partnering with businesses/private sector and public authorities to support local communities strapped for economic relief and forging new coalitions to hold the governments to account. CSOs which are dominant providers of specialized services for women experiencing or at risk of experiencing violence against women are severely affected – increased demand for their services creates additional pressure on their functioning which is already burdened by the lack of systemic standardization and sustainable financing.

Previous outbreaks such as Ebola and HIV have demonstrated the heightened risk of stigma and discrimination. Stigma can also occur after a person has been released from COVID-19 quarantine or treatment. The stigma associated with COVID-19 builds on existing societal norms resulting in the victimization of specific groups or communities. Stigmatization and discrimination of persons under international protection, asylum-seekers and migrants is present in host communities and may be intensified due to increased collective tension due to COVID-19 crisis and negative economic consequences. The COVID-19 crisis and its negative economic consequences might further enhance discrimination of minority returnees in all aspects of community life. Due to the lockdown, children of recognized refugees and asylum-seekers are prevented from integrating into society through their school and after-school activities.

The unregulated and chaotic landscape of digital media presents constant opportunities for spreading misinformation, disinformation, misleading or agenda-based news and analysis and even hate speech. Like the pandemic itself, disinformation,

misinformation and hate speech are contagious and harmful and during the COVID-19 response and recovery period, this issue can become a matter of life or death. Youth, other groups and wider segments of citizens are exposed to an increasing number of online media sources that use social media content to distort information, thus generating (dis)information and click-bait ecosystems. This risk is heightened in the COVID-19 crisis context when time spent in social isolation increases as does exposure to, or reliance on, digital platforms. On the other hand, lack of access to technology and digital divide leaves economically vulnerable persons isolated in the COVID-19 crisis, this particularly affects children and elderly.

With local elections scheduled to take place at the end of 2020, there is a risk that some elected officials, public figures and media organizations may employ divisive rhetoric based on fear and mistrust as well as the COVID-19 crisis for various agendas at the expense of communities aiming to rebuild resilience, mutual understanding and respect; and efforts to strengthen social cohesion.

The gender dynamic of the COVID-19 impact on community and social cohesion must be considered to respond effectively to the crisis. Women must have a chance to lead and participate equally with men. Before the outbreak, the UN had expressed concern that *violence against women in politics and elections* had been increasing, along with hate speech and an overall backlash against women's rights. New forms of intimidation, sexual harassment and hate speech have emerged and spread through online and social media. Those who are *most at risk face the greatest inequalities and barriers to accessing their rights*, and consequences of imposed measures on highly marginalized groups are not being properly assessed and addressed.

The UN system can support societies in strengthening or building up social cohesion during and after the pandemic, by working with key national stakeholders, from all walks of life, to facilitate efforts around the aforementioned areas of focus. The UN's work in this field is informed by its experience in supporting just and peaceful societies, as reflected in SDG 16. This includes mitigating an array of risks and broader challenges to democratic governance, the rule of law and corruption as the epidemic continues to unfold. The UN is a critical player in promoting community resilience, providing a rights-based response to development; promoting cultural diversity and intercultural dialogue; and supporting strategic investments in empowered communities alongside a wide variety of stakeholders. In tandem, well-informed and educated citizens are a crucial element of an inclusive, more mutually respectful and proactive and collaborative society. Taken together, this will contribute to strengthening social cohesion within and between communities in a post-COVID-19 BiH.

Current Programme Response

Project, Agency	How the on-going intervention responds to COVID-19, budget, duration
Social Cohesion and Rule of Law and BHRI Programmes (IOM)	In communities vulnerable to violent extremism, IOM supports volunteer groups and grassroots initiatives to distribute essential items, seedlings and medicines to elderly and other vulnerable groups and to produce over 2,000 face shields. IOM ensured psychosocial support services, community information via radio, audio-books and other on-line learning material. Budget: USD 150,000, Duration: TBD
Dialogue for the Future project "Fostering dialogue and social cohesion in and between Bosnia and Herzegovina, Montenegro and Serbia" (UNESCO, UNDP and UNICEF)	Following activities are partially adapted to on-line delivery: DFF capacity building programme for youth, UNICEF's work on youth capacity development through UPSHIFT methodology programme, UNESCO's capacity building activities targeting youth, teachers/trainers and journalists and media editors. UNICEF collaboration with the Faculty of Political Sciences on supporting Canton Sarajevo schools added new and adapted educational tool and materials for schools to promote medial literacy and intercultural understanding in digital age. The UN's Peacebuilding Fund is working with the UN in BiH to determine if certain aspects of DFF's BiH-specific architecture on the ground can be repurposed to address other emerging COVID-19 related challenges. The small grants facility beneficiaries are encouraged to adapt activities to COVID (Budget: 240,000 USD; June 2020 - March 2021).
Meaningful Activism, Knowledgeable Engagement and Responsible Solutions (MAKERS project) (UNDP)	Planned activities strengthen social cohesion in selected communities. Through local dialogue meetings, trainings and workshops, mostly with youth, the project contributes to community resilience related to COVID19. Budget: 20,000 USD; Duration: June-December 2020
EU Gender Equality Facility in BiH (UN Women)	The Facility strengthens effective implementation of domestic and international legal frameworks on gender equality and women's rights, mainstreams gender into EU integration and planning processes and strengthens institutional mechanisms for gender equality in line with the EU standards. Partners will put in place pandemic risk mitigation

	and monitoring actions. The Facility starts in Q3 2020. Budget 550,000 EUR; Duration 2 years
Community Engagement of Youth (UNICEF)	UNICEF supports digitalisation of PODIUM materials and creation of online learning platform, to enable youth to advocate for their needs and rights within their own communities. PODIUM is an informal education programme for youth, covering skills building, building networks, establishing relation with duty bearers, implementation of advocacy campaign, building financial and management skills under continued mentorship. PODIUM can later be used as a resource for online education in high schools. Budget: 160,500 USD Duration: Apr 2020 - Dec 2021
National digital ideathon (UNDP)	CovIDEJA 2020, the very first digital ideathon in Bosnia and Herzegovina, was launched on 10 April 2020 for 14 days, inviting ideas from the public on how to overcome the negative effects that the COVID-19 crisis has on a wide range of aspects in daily lives and work. The six winning ideas provide solutions to health, environment and economy problems.
Women in Elections, (UNDP&UN Women)	Support to local initiatives of women leaders responding to the pandemic's emergencies in their communities, enhancing social cohesion and reaffirming women leadership and credibility. Online networks and social media communities are serving as good platforms. Work with media and women in media will help shift some media focus on women leaders contributing to response and recovery. Budget: 160,000 USD; Duration: May-November 2020.
Countering Illicit Arms Trafficking Project and Halting Arms Law-Breaking Trade Project (CIAT and HALT projects) (UNDP)	Both projects have included additional modules into existing trainings for law enforcement to address respond to COVID-19. These modules include crisis management, coordination with other government institutions, etc. Budget: 30,000 USD; Duration: June - December 2020.
Halting Arms Law-Breaking Trade Project HALT projects) (UNODC)	Project HALT – UNODC component, is in the process of development of additional modules to be inbuilt into the existing trainings for law enforcement to address respond to COVID-19 emergency. Budget: TBD. Duration: June – December 2020.
Regional Programme for South Eastern Europe, Container Control Programme (CCP), Airport Communication Project (AIRCOP) (UNODC)	<p>Within the joint Action promoting rule of law and good governance through targeted border control measures at land ports and airports. CCP and AIRCOP both provided free access to the UNODC goLEARN platform for customs and border police officers, enabling access to 30+ e-learning basic and advanced training modules addressing urgent needs to respond to COVID-19 emergency. The training modules include topics related to risk management, interdiction and profiling at land, sea and airports, human rights, gender awareness, anti-corruption and other modules related to building capacities to seize and disrupt illicit trade, including COVID-19 related goods and products. Budget: 40,000 USD. Duration: March – August 2020.</p> <p>Container Control Programme (CCP) supports Border Police of BiH and Indirect Taxation Authority inter-agency units with the Online Mentoring focusing on profiling and interdiction of COVID-19 contraband, falsified medicines and prevention of other criminal activities in cargo shipments. As well, planned training events for inter-agency units at land-borders and airports have been reprogrammed to online training. Budget: 35,000 USD. Duration: April-July 2020.</p>
Joint UN Swiss DRR Programme (UNDP, UNICEF, UNFPA UNESCO, FAO)	The Programme helps 10 high-risk local communities in BiH to prepare for and adapt to disaster risks and shocks across various development sectors. Mindful of results achieved so far (established cross-sectoral local DRR Platforms, initiated coordinated disaster risk analysis and DRR capacity building across sectors) the 10 target communities may be champions of disaster resilience measures (including promoting the integration of biological hazards and pandemic risk into local DRR analysis, plans and strategies) that can be horizontally scaled-up in other communities in BiH. Budget: 4,9 mil USD (SDC and UN); Duration: 2019-2022.
Special measures to support the response to refugee and migrant situation in BiH –	The project supports the management of refugee and migrant reception centres and the provision of basic services, as well as access to protection and education, to refugees, asylum seekers and migrants stranded in BiH. COVID-19 has affected all refugee and migrant emergency response operations, which had to be adapted to prevent the spread

Phase III (IOM in partnership with UNHCR, UNICEF, UNFPA)	of the virus among refugees and migrants and address the challenges arisen as a consequence of public health prevention measures. Measures taken include: increase of refugee and migrant accommodation centres' capacity by over 3,000 beds to host refugees and migrants still sleeping rough (including the opening of an additional emergency tent camp), expansion of quarantine areas for new arrivals, set-up and expansion of isolation areas for individuals with symptoms, increase of WASH services and implementation of disinfection and physical distancing measures in all centres, increased delivery of food and NFIs, increased risk communication among Persons of Concern, provision of PPE, and other mitigation measures to avoid the spread of COVID-19 and ensure continuation of all core services. The UN is managing three Women and Girls' Centres, as a safe space for women to connect, receive social support, and access multi-sectorial GBV response services (psychosocial, legal, medical). With rising increase in unaccompanied and separated children and young men, the UN has established three Young Boys and Men centres, to undertake basic informal education in line with Boys on the Move methodology and to serve as referral centres to other service providers for vulnerable PoCs, including from LGBTQI population group. Budget: 3.4 million USD; Duration: April – September 2020.
Addressing COVID-19 challenges within the Migrant and Refugee Response in the Western Balkans (IOM)	The project is a joint IOM-UNHCR regional initiative covering the Western Balkans. Its aim is to address the gaps and additional needs in migration and asylum management brought by the Covid-19 pandemic and public health measures taken by authorities to keep the spread of the virus under control. IOM activities include further adaptation works in temporary reception centres to ensure social distancing and proper quarantine and isolation areas, increased WASH services, separate dining areas for persons in isolation, risk communication and community engagement. IOM budget: EUR 556,364 Duration: April 2020 – June 2021
USAID support to the establishment of Lipa Emergency Tent Camp (IOM)	The BHRI project has reallocated some funding to support urgent interventions to prepare the new Emergency Tent Camp Lipa to accommodate migrants and refugees who were sleeping outside official accommodation facilities and in the streets, and following the declaration of the State of Emergency due to COVID-19 pandemic were moved to Lipa. Budget: USD 490,000 Duration: April-July 2020
Community-based protection and protection-sensitive accommodation of asylum-seekers in USC (UNHCR)	In partnership with DRC. Maintaining and facilitating Community Structures – Community Representation, giving a voice to the affected communities. Empowering persons of concern to participate in activities even during confinement, strengthening positive coping mechanisms and providing psychosocial support to the community. Budget: 41,720 USD; Duration: Mid-March 2020 – December 2020
Provision of free legal aid to refugees, asylum-seekers, IDPs, returnees and relevant legal analyses (UNHCR)	In partnership with Vasa Prava. Building trust between BiH authorities and persons of concern, including through strong communication and focusing on reaching vulnerable communities with relevant information. Budget: 39,150 USD; Duration: Mid-March 2020 – December 2020
Provision of miscellaneous services to recognized refugees and asylum-seekers (UNHCR)	In partnership with BHWI. Creating and strengthening ties between persons of concern in reception centres with other communities and the host community through occupational activities. Enhancing resilience of persons of concern through provision of strong, individually tailored psychosocial support and motivation techniques, enabling asylum-seekers and refugees to better cope with challenges during their displacement life phase, and in particular with the present situation linked to COVID-19. Budget: 25,257 USD; Duration: Mid-March 2020 – 31 July 2020
UNHCR	In cooperation with the implementing partner, foster the communication with communities: Peer educators with the assistance of cultural mediators / interpreters provide 32 community information sessions / thematic trainings through the Peer to Peer system for 700 PoCs and establishing a hotline/ call center for answering PoC's queried on COVID-19 and other issues. Budget: 13,000 USD; Duration: July 2020-June 2021
Countering Illicit Arms Trafficking Project and Halting Arms Law-Breaking Trade	Supporting law enforcement by including new components into existing activities such as crisis management and coordination. Both projects have included additional modules into existing trainings for law enforcement to address respond to COVID-19. These modules

Project (CIAT and HALT projects) (UNDP)	include crisis management, coordination with other government institutions, etc. Budget: 30,000 USD; Duration: June - December 2020.
UNCT JP on CRSV - 'Seeking care, support and justice for survivors of conflict-related sexual violence' (UNFPA, IOM)	CRSV youth engagement programs have been moved to an e-learning platform for youth peacebuilding initiatives, tackling the accumulated legacy of war-related pain and trauma Partnerships in advocacy and communication with faith-based organizations and religious communities have also been moved online. This was followed by the establishment of Youth Barometer – an online talk show run by youth, for youth, exploring the impacts of COVID19 on youth. Concurrently, partnerships with civil society organizations on provision of care and support to survivors of violence have moved online, with partners in FBiH and RS establishing online counselling, self-help groups to mitigate lack of access to services during the lockdown. Finally, project provided direct support to survivors of violence that were adversely and heavily impacted by the economic downturn. (Budget 100,000 USD, July 2020 – June 2021).
Fighting against Illicit trafficking of cultural property (UNESCO)	Besides originally agreed objectives of the programme, during ongoing inception phase, the new training modules are to be developed addressing Covid-19 pandemic cases and the concrete impact to the illicit trafficking of cultural properties. Expected budget to address Covid-19 project to be implemented in the period June 2020- Dec 2021, is estimated at 100.000 USD
Social media 4 Peace (UNESCO)	One of the project objectives is enhancement digital technologies use to enhance peacebuilding efforts and disaster risks reduction, with the particular focus on Covid-19 impact. The overall project budget is 1.0 M Euro, to be implanted in 36 months as of September 2020, but particular budget for this activity is approximately 150.000 Euro.
Implementation of the Strategic action Programme (SAP) of the Dinaric Karst aquifer system: Improving Groundwater governance and sustainability of Ecosystem (GEF project) (UNESCO)	The Project Objective is to catalyze effective multi-country cooperation for the sustainable management of the Dinaric Karst Aquifer System and its ecological resources by strengthening national and regional groundwater governance frameworks and institutional capacity. Overall project budget is 5.8 M USD and apportion for Covid-19 in the case of BiH might be 30.000 USD.
Enhancing trust in Media in SEE and Turkey – Component of BiH (UNESCO)	Enhancing Media Information Literacy with the aim of increasing use of media and raising awareness on necessity to ensure adequate elaboration and dissemination of correct information. Budget for BiH: 50,000 USD

Below are some concrete **policy recommendations** identified by the BiH UN Country Team system for social cohesion and community resilience, with the focus on what is important and actionable for COVID-19-related socio-economic response and recovery during the next 12-18 months:

- Strengthen capacity for multi-hazard disaster risk assessment and preparedness – methodologies and tools need to be put in place across sectors. Gender equality perspective needs to be included. Establish strong vertical and horizontal cooperation for disaster management that includes mandatory information sharing supported with IT tools.
- Assess ways for greater CSO engagement in crisis - Collaboration between CSOs, women's organizations and government stakeholders in COVID-19 response and recovery is weak and CSOs are put on margins of COVID-19 response. Expertise of CSOs working on the ground has potential to be of great importance to assessing impacts of the crisis on local population.
- Use Dialogue for the Future-established local [dialogue] platforms (including virtually) to advance constructive dialogue and cooperation within and between local communities; to identify common critical socio-economic and health priorities that will strengthen community resilience; to strengthen confidence building and mutual trust; and to fight hate speech and xenophobia.
- Support sustained dialogue between the CSOs and local service providers and decision makers with the aim of increasing accountability of, and trust in, the local institutions; focus on women facing multiple discrimination.
- Develop a comprehensive youth strategy to address outmigration.
- Enhancement of women leadership and improve participation of women in decision-making processes in BiH through networking at different levels. Support to culture change in media on importance of gender equality.

- Strengthening social dialogue at the local level to improve social cohesion and to ensure participatory approach in socio-economic recovery of the local communities.

Below are some concrete **policy recommendations** identified by the BiH UN Country Team system for efficient, effective and transparent public sector governance, with the focus on what is important and actionable for COVID-19-related socio-economic response and recovery during the next 12-18 months:

- Develop an Information Society Strategy for Bosnia and Herzegovina that sets the policy agenda and enabling environment for digitalization and greening of the economy and flourishing of innovative networks and innovative services.
- Support accelerated digitalization and e-governance, with focus on key e-services for citizens (development of *Government-to-Citizens – G2C services*). Improve the business environment by reducing the administrative burden and implementing integrated service delivery for the businesses (development of *Government-to-Businesses – G2B services*). Adopt necessary changes to legislation (general administrative procedure legislation, administrative tax laws, e-signature and e-document laws, relevant bylaws) to allow such electronic service delivery. Develop digital skills in the public sector.
- Improve the overall system for strategic development and budget planning, ensuring coherence across administrative levels and supporting operationalization of the Agenda 2030 and the SDG Framework in BiH. This would allow for more transparent, efficient, effective, and performance-based development and sectoral policy planning, implementation, monitoring, and budgeting (including measures relevant to Covid-19 recovery as well as those required under wider structural reforms stemming from the EU accession processes).
- Strengthen government capacities for procurement, asset management as well as revenue and spending control to open space for efficient collection of new and existing revenues and generate savings (particularly within recurring expenditures and inefficient grants), thus allowing redirecting funds for urgent policy priorities and services.
- Digitalization of governments' planning, policy making and budgeting processes (by using and expanding existing platforms) and providing opportunities for citizens and private sector to be informed and participate in these processes.
- Work with the governments towards creation of territorial/regional development hubs for local self-governments that gravitate to specific socio-economic clusters (e.g. through regional development agencies or similar).
- Work with governments to consider/introduce systems of shared local government services for smaller and/or rural municipalities that gravitate to bigger one, which has the potential to provide services to others local governments based on shared costs (or by upper government level subsidized costs for underdevelopment LGs), e.g. shared GIS or IT infrastructure, shared staff/facilities for social, economic, inspection or other services). Support governments in considering/introducing other mechanisms for service delivery (e.g. public-private-partnerships, outsourcing).
- Strengthen justice system to adopt to digital technologies and open justice in order to be capable to respond more rapidly and effectively to the challenges posed by COVID-19 or similar crisis. Support HJPC to develop regulatory framework removing barriers to innovation and technologies that can revolutionize the way in which justice is delivered. Assist administrative courts to develop functional digital solutions accommodating expected steep increase of business disputes related to bankruptcy and insolvency. Assist law enforcement, prosecutors' offices and courts to respond to expected increase of domestic violence, cybercrime and other cases. Establish digital platforms to ensure open, inclusive, fair and accountable justice system that works closely with health and economy sectors, that make people their partners and inspire trust in the institutions.
- Strengthen country's response to public corruption by introducing coordinated approach and by developing coordination and communication capacities among all government actors including administrative, law enforcement and justice sectors. Assist national partners to raise awareness regarding corruption, establish on-line platforms for transparent and accountable reporting on ongoing and completed public procurement processes allowing all interested parties to have equal opportunity and equal access to information.

Annexes



ANNEX 1 - CONCEPT NOTE: New Joint Initiative – Health

MITIGATING THE IMPACT OF THE COVID-19 PANDEMIC: CONTINUITY AND COVERAGE OF ESSENTIAL HEALTH SERVICES FOR ALL PEOPLE IN BOSNIA AND HERZEGOVINA

1. Key vulnerabilities related to COVID-19 pandemic and outbreak in BiH – Health

On March 11, 2020 the World Health Organization declared COVID-19 a global pandemic. A state of emergency was declared in Bosnia and Herzegovina (BiH) by both entity governments on 16 March 2020²⁷ and at the state level – on 17 March 2020²⁸. Since the beginning of COVID-19 outbreak, which started in BiH with first officially notified case on 5 March 2020, the public health authorities, health systems and health service providers have been challenged to increase their capacities to identify, test, isolate and treat COVID-19 patients, and trace and quarantine their contacts, while concurrently trying to suppress transmission of the virus in the society by enforcing a set of strict personal protection, movement restriction and social distancing measures. During the first three months of outbreak in BiH, these measures proved effective in controlling transmission of the virus, while allowing health systems and institutions to reorganise service provision and increase human and material capacities to cope with COVID-19 in BiH. After gradual relaxation of the measures in May 2020, BiH has witnessed, like many other countries in the Region, a resurgence of COVID-19 in June.

Overwhelming health systems with COVID-19 specific services risks failures and disruptions in provision of other health services deemed essential for maintaining and improving overall health and wellbeing of people across their life-course. If people are unable to access and receive health services they need, both direct mortality from an outbreak and indirect mortality from preventable and treatable conditions may significantly increase.²⁹ During initial outbreak, health systems and institutions in BiH have struggled to provide COVID-19 specific services to all people in BiH, including migrants and asylum seekers, and managed to maintain full capacities for provision of all emergency life-saving services. Other services, such as elective surgery procedures were postponed, and many other essential health services temporarily discontinued, or maintained only at the primary healthcare level, with local and cantonal/regional variations observed. This conforms well with the global experience: according to WHO global rapid assessment survey for noncommunicable diseases (NCD) during COVID-19 pandemic, over three-fourths of 160 countries surveyed reported that NCD services were either partially or totally disrupted, with ≥50% countries reporting disruptions in services as essential as diabetes and hypertension management.³⁰ The pandemic is also disrupting access to routine immunisation services worldwide. Even prior to COVID-19, recorded immunisation coverage rates in BiH were in decline and well below required targets.³¹ With temporary interruptions observed in some locations, and without restoring and maintaining routine immunisation services throughout the country, there is a significant risk for reoccurrence of outbreaks of potentially fatal but preventable diseases in BiH. Overall, disruptions and discontinuations of essential health services, especially in a context of highly decentralised health service provision in BiH, have a potential to further exacerbate health vulnerabilities of people in BiH, especially amongst the already identified vulnerable groups of population.

²⁷ Sources: Government of Republika Srpska, Government of the Federation of Bosnia and Herzegovina.

²⁸ Source: Decision of the Council of Ministers of Bosnia and Herzegovina.

²⁹ WHO – Maintaining essential health services: operational guidance for the COVID-19 context, June 2020 (<https://www.who.int/publications/i/item/10665-332240>).

³⁰ WHO – Rapid assessment survey of service delivery for NCDs during the COVID-19 pandemic, May 2020 (<https://www.who.int/publications/m/item/rapid-assessment-of-service-delivery-for-ncds-during-the-covid-19-pandemic>)

³¹ UNICEF BiH – in 2018, the lowest coverage with the first dose of MMR vaccine in the Federation of Bosnia and Herzegovina was 56.9 % in Zenica-Doboj Canton, while the lowest coverage recorded in the Republika Srpska was 60.2 % in Bijeljina.

Ensuring availability and accessibility of both COVID-19 specific and essential health services is only one dimension of service continuity. In order to actively seek for health services they need and adhere to public health advice, the people in BiH need to develop trust in the capacity of health systems to safely meet their needs for services and to control infection risk in health facilities and institutions at all levels of care.³² COVID-19 pandemic has also been accompanied by a massive ‘infodemic’, or an over-abundance of information – some accurate and some not – which makes it hard for people to find trustworthy sources and reliable guidance when they need it. To rebuild population trust in health authorities and health systems, and in continuous provision of safe and effective COVID-19 specific and prioritised essential health services, further strengthening and integration of disease surveillance systems and national capacities for continuous risk assessment, together with regular, evidence-based and responsive risk communication with communities and people, remain paramount in BiH.

Therefore, COVID-19 pandemic confronted health authorities in BiH with a unique set of challenges in ensuring the continuity of essential health services for population, while at the same time safeguarding health service providers and users from the risks of acquiring infection. This Joint UN concept note proposes to improve provision of public health and healthcare services in the following areas to increase resilience of the health systems and also to contribute to inevitable and imminent health sector reforms in BiH:

- i. Access and coverage
- ii. Delivery modalities
- iii. Needs-based approach and equity implications
- iv. Overall quality, safety and effectiveness of health service provision.

³² UNICEF BiH - U-report, April 2020. 65% of the survey respondents stated that they did not know where they could find psychosocial support, and 41% of respondents stated that they do not believe that anyone can help them.

2. UN BiH response strategy

The **focus** of the response strategy is to improve public sector health services, strengthening the health systems which can prevent, mitigate impacts and respond quickly to health emergencies, particularly when addressing the needs of the vulnerable population ensuring the principle of leaving no one behind. Additionally, these interventions aim at improving access and coverage of essential health services to ensure required resilience of health systems and the overall improvement of population health. The strategic response and proposed interventions have direct linkage with UN BiH's Co-operation Framework and will help achieve 2030 agenda on Sustainable Development Goals.

The response strategy envisages the following **outcome**: *Increased capacities of health systems to provide continuity, safety, quality and effectiveness of essential health services, prioritised and dynamically calibrated with COVID-19 specific health services and informed by ongoing COVID-19 surveillance and risk assessment and communication, for all people in BiH.*

To achieve this outcome, the **Theory of Change** (ToC) hypothesises that **IF**:

- Capacities of health authorities are improved for crisis response, surveillance and risk communication, and capacities for provision of safe, effective and quality health services are enhanced at all levels of healthcare;
- COVID-19 specific health services are continuously provided to all infected people in BiH;
- The continuity of essential health services is restored for all people using these services in BiH;
- Health professionals at all levels of healthcare have enhanced capacities for delivering safe, quality and effective essential health services in the pandemic context;

...**AND** health authorities demonstrate clear commitment to improve access, coverage and quality of prioritised essential health services, **THEN** health systems will be able to provide continuity and quality of essential health services for all people across the life-course in BiH, including the most vulnerable.

These interventions envisage **strategic partnerships** with the relevant health authorities and designated agencies at state, entity, District Brcko and cantonal levels, targeted health institutions which are providing essential health services at all (primary, secondary, tertiary) levels of healthcare, private sector providers, community volunteers, and implementing partnerships with civil society organisations. UN BiH's comparative advantage for the proposed ToC includes long-term experience in health sector reforms, well-developed partnerships with health authorities, technical expertise and relevant experience in delivering complex coordination mechanisms, and experience in evidence-based programming and innovation.

The **geographical scope** of intervention is BiH with the following **key beneficiaries**:

- **The whole population in BiH** using essential health services, including COVID-19 specific health services;
- **25,000 healthcare professionals** providing health services at primary, secondary and tertiary level of care;
- **14 health authorities** in BiH.

The **proposed period** of intervention is 18 months.

The response strategy is built around **3 outputs**:

Output 1: Health and public health authorities have increased capacities for surveillance of health risks, with a focus on COVID-19, and are becoming increasingly competent in multi-channel and responsive information management and risk communication.

Output 2: Health authorities and professionals have enhanced capacities for provision of COVID-19 specific health services, which comply with accumulating evidence and best practice in service organisation, safety, quality and clinical effectiveness.

Output 3: Capacity for safe delivery and continuity of essential health services is ensured for all people in BiH; in case of increased infection risks, discontinuities in essential health services are localised and temporary until the risks are controlled.

3. Results framework

This intervention contributes to:

Sustainable Development Goal 3:

Target 3.8.- Achieve universal health coverage, including financial risk protection, access to good-quality essential healthcare services, medicines, and vaccines for all. Target 3.d.- Strengthen capacity for early warning, risk reduction and management of health risks. Target 3.7.- Ensure universal access to sexual and reproductive healthcare services. Target 3.1.- Reduce maternal mortality. Target 3.2.- End preventable neonatal and child deaths. Target 3.3.- Reduce occurrence of communicable diseases of public health importance for the country; Target 3.4.- Reduce mortality from non-communicable disease and promote mental health; Target 3.5.- Strengthen prevention and treatment of substance misuse. Target 3.a.- Strengthen implementation of framework convention on tobacco control.

National priorities:

BiH Economic Reform Programme (ERP) for 2019-2021 (relevant chapter on Social Protection and Inclusion)

Joint Socio-Economic Reforms for the Period 2019-2022 (relevant chapter on Comprehensive Reform and Improved Quality of the Health Care System)

Relevant health policies/strategies at the Federation of BiH, Republika Srpska, and Brcko District BiH level, and cantonal levels in the Federation of BiH

Strategy for the advancement of rights and status of persons with disabilities in the Federation of BiH 2016-2021

Strategy for Improving the Social Position of Persons with Disabilities in Republika Srpska for the period 2017-2026

UNSDCF Outcome 3:

By 2025, people have access to better quality and inclusive health and social protection systems

Key results	Progress indicators	Baseline	Target	Means of Verification	Activities
Outcome					
Increased capacities of health systems to provide continuity, safety, quality and effectiveness of essential health services, prioritised and dynamically calibrated with COVID-19 specific health services and informed by ongoing COVID-19 surveillance and risk assessment and communication, for all people in BiH.	Number of health service plans formulated by health government authorities that include measures to provide continued prioritised essential health services a) Entities and Brcko District level b) Cantonal level (the Federation of BiH)	0 0	a) 2 (at least 67%) b) 6 (at least 60%)	Official gazettes and websites of health government authorities	N/A

Key results	Progress indicators	Baseline	Target	Means of Verification	Activities
Outputs					
Output 1: Health and public health authorities have increased capacities for surveillance and management of COVID-19 associated risks and are becoming increasingly competent in multi-channel and responsive information management and risk communication	Number of public health authorities that received UN support for strengthening and integrating COVID-19 surveillance into communicable disease surveillance systems Number of public health authorities that received UN support in information management and risk communication (disaggregated by type of support)	0 TBD	TBD TBD	Public health authorities' official reports, websites, helplines, publications, survey results, training reports, delivery notes	1.1. Assist health authorities in development and updating of COVID-19 risk assessment and risk management strategies and plans (WHO) 1.2. Strengthen public health capacities for early detection, investigation and prompt COVID-19 response at community level and in high vulnerability settings (WHO) 1.3. Support public health authorities in strengthening, activating and integrating COVID-19 surveillance with other surveillance systems, in particular those for seasonal influenza and similar respiratory diseases/syndromes (WHO) 1.4. Support development of capacities for consistent implementation of recommended preventive measures/IPC in workplaces, front-line border officers, long-term care health institutions, educational institutions and other congregate settings (UNICEF, UNODC, WHO) 1.5. Facilitate development and distribution of risk communication materials in culturally appropriate and empathetic format and platforms for health institutions and professionals, media and communities/citizens, including the most vulnerable with limited access to information (UNFPA, UNICEF, WHO) 1.6. Assist public health authorities in continuous monitoring of community perceptions, knowledge, attitudes and practices and tailoring key messages/feedback accordingly (UNICEF, WHO) 1.7. Assist health and public health authorities in mobilizing community and volunteer support for enhancing surveillance and communication capacities (e.g. contact tracing, manning helplines etc.), where needed and feasible (UNICEF, WHO) 1.8. Assist health authorities and institutions in developing and maintaining information platforms for local availability and

Key results	Progress indicators	Baseline	Target	Means of Verification	Activities
					accessibility of prioritized essential health services in COVID-19 outbreak context (UNFPA, UNICEF, WHO)
Output 2: Health authorities and professionals have enhanced capacities for provision of COVID-19 specific health services, which comply with accumulating evidence and best practice in service organisation, safety, quality and clinical effectiveness.	Number of people accessing/covered with COVID-19 specific health services (disaggregated by sex, age group and at-risk populations, where feasible) Number of health facilities that received UN support to maintain COVID-19 specific health services (disaggregated by healthcare level and type of support)	TBD TBD	TBD TBD	Public health authorities' official reports, websites, ongoing statistics on services' access/utilisation Delivery notes Training reports	2.1. Support health authorities and national lab networks in harmonizing approaches and expanding and quality-assuring capacities for COVID-19-related case identification and testing (UNDP, WHO) 2.2. Support health authorities in ensuring adequate PPE supplies and infection prevention and control (IPC) surge capacities to secure full implementation of IPC measures in all healthcare facilities providing COVID-19 specific services (UNDP, WHO) 2.3. Support health authorities and COVID-19 designated health institutions/service providers with guidelines and protocols and assist with organisation of regular peer-to-peer refresher trainings in COVID-19 case management (WHO) 2.4. Support health authorities and service providers in effective organization and management of screening/triage services at first point-of-contact/primary health care level and in standardizing referrals/patient care pathways across the levels of care in local settings (WHO) 2.5. Assist health authorities and institutions in developing and implementing institutional plans for relocating human and material resources needed for care of COVID-19 patients cohorted in non-hospital settings, should the need arise (WHO) 2.6. Develop, apply and regularly update institutional protocols and procedures for treatment and care of hospitalized COVID-19 patients (WHO) 2.7. Provide support to government authorities and service providers in managing supply chains for pharmaceutical and non-pharmaceutical needs for COVID-19 designated health facilities (UNDP, UNODC, WHO)

Key results	Progress indicators	Baseline	Target	Means of Verification	Activities
Output 3: Capacity for safe delivery and continuity of essential health services is ensured for all people in BiH; in case of increased infection risks, discontinuities in essential health services are localised and temporary until the risks are controlled.	<p>Number of people accessing/covered with prioritized essential health services (disaggregated by sex, age group and at-risk populations, where feasible)</p> <p>a) Mother-and-child programmes b) Immunisation programmes c) Sexual and reproductive health programmes d) Nutrition, non-communicable diseases and mental health programmes</p> <p>Number of health facilities that received UN support to maintain prioritized essential health services (disaggregated by healthcare level and type of support)</p> <p>a) Mother-and-child programmes b) Immunisation programmes c) Sexual and reproductive health programmes d) Nutrition, non-communicable diseases and mental health programmes</p>	<p>TBD (2019 levels)</p> <p>TBD</p>	<p>TBD (≥2019 levels)</p> <p>TBD</p>	<p>Public health authorities' official reports (Annual Health Status of the Population and Health Care Reports), websites, ongoing statistics on services' access/utilization</p> <p>Delivery notes Training reports</p>	<p>3.1. Support health authorities in nominating essential health services focal points and in generating specific lists of prioritized essential health services which require continuous provision and address particular needs of vulnerable groups of population (WHO)</p> <p>3.2. Support health authorities in ensuring adequate PPE supplies and infection prevention and control (IPC) surge capacities to secure full implementation of IPC measures in all healthcare facilities providing prioritized essential health services (UNDP, UNICEF, WHO)</p> <p>3.3. Support health authorities and healthcare providers in maintaining capacities and optimizing service delivery settings and platforms to ensure continuity of and coverage with essential mother-and-child services (UNFPA, UNICEF)</p> <p>3.4. Support health authorities and healthcare providers in maintaining capacities and optimizing service delivery settings and platforms to ensure continuity of and coverage with immunisation services (UNICEF, WHO)</p> <p>3.5. Support health authorities and healthcare providers in maintaining capacities and optimizing service delivery settings and platforms to ensure continuity of and coverage with essential sexual and reproductive services (UNFPA)</p> <p>3.6. Support health authorities and healthcare providers in maintaining capacities and optimizing service delivery settings and platforms to ensure continuity of and coverage with essential nutrition, non-communicable diseases and mental health services (UNFPA, UNICEF, WHO)</p> <p>3.7. Provide support to health authorities and service providers in managing supply chains for pharmaceutical and non-pharmaceutical needs for providers of prioritized essential health services (UNDP, WHO)</p>

4. Management and coordination arrangements

In the context of life-course stages and needs-based approach, this proposal seeks to create a continuum of essential health services provided by health systems to all citizens in BiH, including COVID-19 specific services. This implies maintaining synergies, smooth collaboration and sensible interface management between entities participating in this proposal and the creation of common standards and joint recommendations. At the same time, this provides opportunities for generating synergies and optimising the use of funds and time through joint coordination.

The coordination arrangements include:

- Joint project management: one project leader and designated agency staff for each component, guaranteeing day-to day coordination and regular interagency project monitoring meetings,
- Joint programme design, review and evaluation of all UN agencies involved.

Implementing UN BiH agencies: WHO, UNFPA, UNICEF, UNDP, UNODC.

5. Indicative budget (USD)

Key results (Outputs)	Activities	Indicative budget (USD) - UNDP	Indicative budget (USD) - UNFPA	Indicative budget (USD) - UNICEF	Indicative budget (USD) - UNODC	Indicative budget (USD) - WHO	Indicative budget (USD) - TOTAL
Output 1: Health and public health authorities have increased capacities for surveillance and management of COVID-19 associated risks and are becoming increasingly competent in multi-channel and responsive information management and risk communication	1.1. Assist health authorities in development and updating of COVID-19 risk assessment and risk management strategies and plans (WHO)	-	-	-	-	50,000	50,000
	1.2. Strengthen public health capacities for early detection, investigation and prompt COVID-19 response at community level and in high vulnerability settings (WHO)	-	-	-	-	40,000	40,000
	1.3. Support public health authorities in strengthening, activating and integrating COVID-19 surveillance with other surveillance systems, in particular those for seasonal influenza and similar respiratory diseases/syndromes (WHO)	-	-	-	-	50,000	50,000
	1.4. Support development of capacities for consistent implementation of recommended preventive measures/IPC in workplaces, front-line border officers, long-term care health institutions, educational institutions and other congregate settings (UNICEF, UNODC, WHO)	-	-	50,000 (to be distributed across 1.4-1.8 lines)	65,000	30,000	145,000

Key results (Outputs)	Activities	Indicative budget (USD) - UNDP	Indicative budget (USD) - UNFPA	Indicative budget (USD) - UNICEF	Indicative budget (USD) - UNODC	Indicative budget (USD) - WHO	Indicative budget (USD) - TOTAL
	1.5. Facilitate development and distribution of risk communication materials in culturally appropriate and empathetic format and platforms for health institutions and professionals, media and communities/citizens, including the most vulnerable with limited access to information (UNFPA, UNICEF, WHO)	-	5,000		-	90,000	95,000
	1.6. Assist public health authorities in continuous monitoring of community perceptions, knowledge, attitudes and practices and tailoring key messages/feedback accordingly (UNICEF, WHO)	-	-		-	50,000	50,000
	1.7. Assist health and public health authorities in mobilizing community and volunteer support for enhancing surveillance and communication capacities (e.g. contact tracing, manning helplines etc.), where needed and feasible (UNICEF, WHO)	-	-		-	90,000	90,000
	1.8. Assist health authorities and institutions in developing and maintaining information platforms for local availability and accessibility of prioritized essential health services in COVID-19 outbreak context (UNFPA, UNICEF, WHO)	-	45,000		-	60,000	105,000
Subtotal Output 1		-	50,000	50,000	65,000	460,000	625,000
Output 2: Health authorities and professionals have enhanced capacities for provision of COVID-19 specific health services, which comply with accumulating evidence and best practice in service organisation, safety, quality and clinical effectiveness.	2.1. Support health authorities and national lab networks in harmonizing approaches and expanding and quality-assuring capacities for COVID-19-related case identification and testing (UNDP, WHO)	1,200,000	-	-	-	80,000	1,280,000
	2.2. Support health authorities in ensuring adequate PPE supplies and infection prevention and control (IPC)	1,200,000	-	-	-	50,000	1,250,000

Key results (Outputs)	Activities	Indicative budget (USD) - UNDP	Indicative budget (USD) - UNFPA	Indicative budget (USD) - UNICEF	Indicative budget (USD) - UNODC	Indicative budget (USD) - WHO	Indicative budget (USD) - TOTAL
	surge capacities to secure full implementation of IPC measures in all healthcare facilities providing COVID-19 specific services (UNDP, WHO)						
	2.3. Support health authorities and COVID-19 designated health institutions/service providers with guidelines and protocols and assist with organisation of regular peer-to-peer refresher trainings in COVID-19 case management (WHO)	-	-	-	-	60,000	60,000
	2.4. Support health authorities and service providers in effective organization and management of screening/triage services at first point-of-contact/primary health care level and in standardizing referrals/patient care pathways across the levels of care in local settings (WHO)	-	-	-	-	20,000	20,000
	2.5. Assist health authorities and institutions in developing and implementing institutional plans for relocating human and material resources needed for care of COVID-19 patients cohorted in non-hospital settings, should the need arise (WHO)	-	-	-	-	10,000	10,000
	2.6. Develop, apply and regularly update institutional protocols and procedures for treatment and care of hospitalized COVID-19 patients (WHO)	-	-	-	-	30,000	30,000
	2.7. Provide support to government authorities and service providers in managing supply chains for pharmaceutical and non-pharmaceutical needs for COVID-19 designated health facilities (UNDP, UNODC, WHO)	80,000	-	-	100,000	50,000	230,000
Subtotal Output 2		2,480,000	-	-	100,000	300,000	2,880,000
Output 3: Capacity for safe delivery and continuity of essential health services is ensured for all people in BiH in COVID-19 outbreak context; in case	3.1. Support health authorities in nominating essential health services focal points and in generating specific lists of prioritized essential health services which require continuous provision and address particular needs of vulnerable groups of population (WHO)	-	-	-	-	30,000	30,000
	3.2. Support health authorities in ensuring adequate PPE supplies and	1,100,000	-	100,000	-	50,000	1,250,000

Key results (Outputs)	Activities	Indicative budget (USD) - UNDP	Indicative budget (USD) - UNFPA	Indicative budget (USD) - UNICEF	Indicative budget (USD) - UNODC	Indicative budget (USD) - WHO	Indicative budget (USD) - TOTAL
of increased infection risk, discontinuities in essential health services are localised and temporary until the risks are controlled.	infection prevention and control (IPC) surge capacities to secure full implementation of IPC measures in all healthcare facilities providing prioritized essential health services (UNDP, UNICEF, WHO)						
	3.3. Support health authorities and healthcare providers in maintaining capacities and optimizing service delivery settings and platforms to ensure continuity of and coverage with essential mother-and-child services (UNFPA, UNICEF)	-	40,000	150,000	-	-	190,000
	3.4. Support health authorities and healthcare providers in maintaining capacities and optimizing service delivery settings and platforms to ensure continuity of and coverage with immunisation services (UNICEF, WHO)	-	-	250,000	-	30,000	280,000
	3.5 Support health authorities and healthcare providers in maintaining capacities and optimizing service delivery settings and platforms to ensure continuity of and coverage with essential sexual and reproductive services (UNFPA)	-	50,000	-	-	-	50,000
	3.6. Support health authorities and healthcare providers in maintaining capacities and optimizing service delivery settings and platforms to ensure continuity of and coverage with essential nutrition, non-communicable diseases and mental health services (UNFPA, UNICEF, WHO)	-	160,000	100,000	-	150,000	410,000
	3.7. Provide support to health authorities and service providers in managing supply chains for pharmaceutical and non-pharmaceutical needs for providers of prioritized essential health services (UNDP, WHO)	40,000	-	-	-	120,000	160,000
Subtotal Output 3		1,140,000	250,000	600,000	-	380,000	2,370,000
TOTAL (USD)		3,620,000	300,000	650,000	165,000	1,140,000	5,875,000



ANNEX 2 - CONCEPT NOTE: New Joint Initiative – Education

MITIGATING THE IMPACT OF THE COVID-19 PANDEMIC: CONTINUITY AND QUALITY OF LEARNING FOR ALL CHILDREN AND YOUTH IN BOSNIA AND HERZEGOVINA

20 July 2020

1. Key vulnerabilities related to COVID-19 pandemic and outbreak in BiH – Education

On March 11, 2020 the World Health Organization declared COVID-19 a global pandemic. A state of emergency was declared in Bosnia and Herzegovina (BiH) by both entity governments on 16 March 2020³³ and at the state level – on 17 March 2020³⁴. From mid-March 2020, 500,000 children and youth in BiH were affected by country-wide preschool, school and university closures due to the COVID-19 pandemic³⁵. Alongside with other countries from the Region, BiH has responded to the disruption in learning by introducing various remote and online teaching modalities. Despite the prompt action, learning loss, caused by COVID-19 was unavoidable and considerable, disproportionately affecting the most vulnerable children and youth³⁶ across the country. In addition, quality of remote learning varied and there is a lack of standards in the development and delivery of e-learning. As in BiH education is decentralised, there is a diversity of approaches to e-learning and there is not one e-learning platform. Different education authorities have implemented different monitoring mechanisms and evaluations of e-learning that are yet to be conducted. Most of the units did not develop guidelines for e-learning and the teachers did not receive adequate training in this area. In addition, educators and family members experienced challenges due to lack of appropriate skills to teach children and youth remotely and family members and caregivers required support to help children and youths continue education at home.

Access to e-learning presented an additional challenge. The BiH education authorities estimated that the lack of continuum of learning affected over 9,700 children in primary and secondary schools who did not have access to ICT³⁷. However, according to UNICEF's [U-report](#), 45% of youth experienced challenges with access to learning, due to the need of having to share devices within the household, or not having appropriate space and environment for learning. Vulnerable groups of children and youth, such as Roma, children and youth living in poverty, and children and youths on the move were more at risk for disrupted continuum of learning. Even if they had ICT equipment, children and youths with disabilities faced access challenges due to the lack of assistive technology and their needs for intensive teacher support.

Further, the continuum of learning was disrupted for children enrolled in preschools in most administrative units, while in some units e-learning was not organized for children in lower primary grades³⁸.

Over 75% of secondary school students³⁹ in BiH are enrolled in Technical Vocational Education and Training (TVET) and have experienced the lack of access to practical classes during the pandemic. Despite efforts to continue delivering some training via video tutorials and written resources, TVET delivery, exams and certification were seriously affected.

³³ Sources: Government of Republika Srpska, Government of the Federation of Bosnia and Herzegovina.

³⁴ Source: Decision of the Council of Ministers of Bosnia and Herzegovina.

³⁵ Based on bhas.gov.ba education statistics

³⁶ The Economic and Social Impact of COVID-19- Education, World Bank Group, Spring 2020

³⁷ Rapid Needs Assessment- Education, UNICEF BiH, March 2020

³⁸ Ibid.

³⁹ http://bhas.gov.ba/data/Publikacije/Saopštenja/2020/EDU_04_2019_Y2_0_BS.pdf

Such a standstill of education poses a risk of permanent drop out of children and youths from education and training and losing the opportunity to complete their studies and look for gainful employment. This will result in further increase of already very high share of youths neither in employment, nor in education or training (NEETS), which amounted to 21% in 2019⁴⁰.



The COVID-19 pandemic revealed specific structural problems of the education systems in BiH:

- Inadequacy of ICT resources to support e-learning and blended learning, particularly for vulnerable children and youth
- A lack of online and e-learning platforms/ networks that would allow all education institutions to quickly switch delivery mode for teaching, examination and certification and non-availability of diverse delivery channels
- A lack of standardised e-learning and blended learning curricula with modern instructional design and quality multimedia materials. This includes also contingencies and strategies to compensate for the loss of practical training
- Inadequate teacher and instructor training for implementing and facilitating e-learning and blended learning and the creation of learning contents
- A lack of capacities of education government authorities to conduct quality assurance.

The COVID-19 pandemic confronted education authorities in BiH with a unique set of challenges in ensuring the continuity and quality of learning. This Joint UN concept note proposes to modernise education and learning in BiH for the following areas to increase resilience of the education systems and to further contribute to the education sector reforms:

- v. Access
- vi. Delivery modality
- vii. Didactic approach and
- viii. An overall quality of education

⁴⁰ ILO STAT Bosnia and Herzegovina Country profile: <https://ilostat ilo.org/data/country-profiles/> and https://www ilo.org/shinyapps/bulkexplorer11/?lang=en&segment=indicator&id=EIP_NEET_SEX_RT_A

2. UN BiH response strategy

The **focus** of the response strategy is to improve public sector education, strengthening the system which can prevent, mitigate impacts and respond quickly to emergencies, particularly when addressing the needs of the vulnerable population ensuring the principle of leaving no one behind. Additionally, these interventions aim to improve the blended learning⁴¹ approaches to ensure required resilience of education systems and the overall improvement of the quality of learning. The strategic response and proposed interventions have direct linkage with UN BiH's Co-operation Framework and will help achieve 2030 agenda on Sustainable Development Goals.

The response strategy envisages the following **outcome**: Increased capacities of education systems to provide continuity and quality of e-learning and blended learning for all children and youths in BiH.

To achieve this outcome, the **Theory of Change** (ToC) hypothesises that **IF**:

- Capacities of education authorities are improved for crisis response, implementation of safe schools' operations and risk communication, and to implement quality inclusive e-learning and blended learning approaches;
- The continuity of learning is ensured for all vulnerable children and youths;
- Teachers/Educators have enhanced capacities for delivering quality e-teaching and blended teaching;

...AND education authorities demonstrate clear commitment to improve access and quality of e-learning and blended learning, **THEN** education systems will be able to provide continuity and quality of e-learning and blended learning for all children and youths in BiH, including the most vulnerable.

These interventions envisage **strategic partnerships** with the relevant education authorities and designated agencies at state, entity, District Brcko and cantonal levels, targeted preschools, primary and secondary schools and universities, private sectors, community volunteers, and implementing partnerships with civil society organizations. UN BiH's comparative advantage for the proposed ToC includes long-term experience in education sector reforms, well-developed partnerships with education authorities, technical expertise and relevant experience in delivering complex coordination mechanisms, and experience in evidence-based programming and innovation.

The **geographical scope** of intervention is BiH with the following **key beneficiaries**:

- **500,000 children and youths** enrolled in preschool, primary, secondary, TVET and higher education;
- **38,000** preschool, primary, and secondary school **teachers**;
- **14 education authorities** in BiH.

The **proposed period** of intervention is 18 months.

The response strategy is built around **5 outputs**:

Output 1: Education authorities have strengthened capacities for crisis response and implementation of safe schools' operations and risk communication;

⁴¹ Learning in which students learn via electronic and online media as well as traditional face-to-face teaching.

Output 2: Continuity of learning in BiH is ensured for all vulnerable children and youths;

Output 3: Education authorities are supported to implement quality inclusive e-learning and blended learning approaches;

Output 4: Teachers have enhanced capacities for delivering quality e-learning and blended learning;

Output 5: TVET authorities have enhanced capacities for delivering quality TVET e-learning and blended learning, including enhanced capacities for TVET teachers and instructors.

3.Results framework

This intervention contributes to:

Sustainable Development Goals 4 and 8:

Target 4.1.- Ensure that all girls and boys complete free, equitable and quality primary and secondary education leading to relevant and effective learning outcomes. Target 4.2.- Ensure that all girls and boys have access to quality early childhood development, care and pre-primary education so that they are ready for primary education. Target 4.4.- Substantially increase the number of youth and adults who have relevant skills for employment, decent jobs, and entrepreneurship- Target 4.5.- Eliminate gender disparities in education and ensure equal access to all levels of education and vocational training for the vulnerable, including persons with disabilities, indigenous peoples and children in vulnerable situations. Target 4.6.- Ensure that all youth and substantial proportion of adults, both men and women, achieve literacy and numeracy. Target 8.6.- Substantially reduce the proportion of youth not in employment, education or training.

National priorities:

BiH Economic Reform Programme (ERP) for 2019-2021 (relevant chapter on Education and Skills)

Platform for Development of Early Childhood Care and Education in Bosnia and Herzegovina for the period 2017-2022

Strategy for the advancement of rights and status of persons with disabilities in the Federation of BiH 2016-2021

Strategy for Improving the Social Position of Persons with Disabilities in Republika Srpska for the period 2017-2026

Relevant education strategies on entity and cantonal levels

UNSDCF Outcome 2:

By 2025, people benefit from more inclusive and higher quality educational programmes focused on 21st century skills for enhanced employability and well-being

Key results	Progress indicators	Baseline	Target	Means of Verification	Activities
Outcome					
Increased capacities of education systems to provide continuity and quality of e-learning and blended learning for all children and youth in BiH	Percentage of education government authorities with integrated e-learning and blended learning in their action plans	0	At least 50% of education government authorities	Official gazettes and websites of education government authorities	N/A
Outputs					

Key results	Progress indicators	Baseline	Target	Means of Verification	Activities
Output 1: Education government authorities have strengthened capacities for crisis response and implementation of safe schools' operations and risk communication	Percentage of education government authorities having contingency plans and risk assessments developed Number of people reached with critical WASH supplies (including hygiene items) and services, disaggregated by sex, age group and at-risk population	0 0	At least 50% of education government authorities 15,000 children and adults	Official gazettes and websites of education government authorities Monitoring Framework for the UN framework for the immediate Socio-Economic Response to COVID-19	1. Support education government authorities to develop and disseminate 'back to school' and 'back to preschool' guidelines (UNICEF/UNESCO) 2. Assist education government authorities in development of risk assessments, contingency, and response plans for remote learning (UNICEF/UNESCO) 3. Support schools and preschools in "opening up better" by provision of hygiene material and information resources (UNICEF)
Output 2: Continuity of learning in BiH is ensured for all vulnerable children and youth	Number of children supported with distance/ home-based learning, disaggregated by sex	TBC	TBC	Monitoring Framework for the UN framework for the immediate Socio-Economic Response to COVID-19	1. Support schools and preschools by provision of ICT resources for children without ICT access in case of/ disruption of regular school process due to emergency crises (UNICEF/UNESCO) 2. Equip schools and preschools with assistive technology for children with disabilities (UNICEF) 3. Produce developmental content for preschool children to be broadcasted on media and other available distance learning platforms (UNICEF)
Output 3: Education government authorities are supported to implement quality inclusive e-learning and blended learning approaches	Standards/guidelines for quality inclusive blended learning developed (Y-N) Assessment on quality of e-learning delivery completed (Y-N)	N/A N/A	Standards/guidelines for quality inclusive blended learning developed	Official gazettes and websites of education government authorities Official governments' reports /Official websites	1. Engage volunteers in supporting of digitalization of e-learning materials (UNV) 2. Assist education government authorities in conducting assessment on quality of e-learning delivery at education level (UNESCO and UNICEF)

Key results	Progress indicators	Baseline	Target	Means of Verification	Activities
	Number of education government authorities utilizing EMIS and TMIS Number of community volunteers supporting digitalization of e-learning materials	TBC 0	Assessment on quality of e-learning delivery completed TBC 30	of education government authorities Official governments' reports Volunteering reports	3. Support education government authorities in digitization of education process to increase both efficiency and system resilience to future shocks (UNESCO/UNV) 4. Assist education government authorities in improving quality of information management platforms in education (e.g. EMIS, TMIS) (UNESCO) 5. Support education government authorities in development of standards and guidelines for quality inclusive blended learning (UNICEF)
Output 4: Teachers have enhanced capacities for delivering quality e-learning and blended learning	Number of teachers trained	0	TBC	Training reports	1. Support education government authorities in mapping the professional development needs of teachers for e-learning and blended learning (UNICEF/UNESCO) 2. Pilot <i>Digital Learning and Media and Information Literacy as precondition for (online) teaching</i> workshop for primary and secondary teachers in Sarajevo Canton (UNESCO) 3. Provide training programmes to improve capacities of teachers for quality inclusive blended learning in line with European Key Competences Framework (UNICEF/UNESCO) 4. Implement training programmes for the usage of Assistive Education Technology tools to meet learning needs of students of all abilities (UNICEF)

Key results	Progress indicators	Baseline	Target	Means of Verification	Activities
Output 5: TVET authorities have enhanced capacities for delivering quality TVET e-learning and blended learning, including enhanced capacities for TVET teachers and instructors	Standards/guidelines for quality inclusive blended learning developed (Y-N)	0	2	Official reports, gazettes and websites or other communication tools of education government authorities	1. Facilitate provision of equipment for TVET schools for disadvantaged TVET students (ILO)
	Number of officials / experts with responsibilities for curriculum development and E-learning platform development / maintenance trained	TBC	TBC	Training reports	2. Support education government authorities in development of standards and technical capacities for developing of e-learning platforms for TVET schools (ILO /UNESCO/UNV)
	Number of key TVET occupations with e-learning curricula and multi-media e-learning materials	TBC	TBC		3. Implement professional development programmes for TVET providers for creating, facilitating and implementing e-learning / blended learning in TVET (including training of relevant staff, development of training materials and support institutionalizing of e-TVET professional development) (ILO)
	Number of TVET providers, teachers and instructors trained.	TBC	TBC		4. Establish collaboration with the business community to compensate for the misalignment between TVET training and labour market needs (ILO and UNV)
					5. Develop and pilot e-learning curricula and multi-media e-learning materials for 2 key occupations in each entity (ILO)

4. Management and coordination arrangements

In the context of a life-cycle approach, this proposal seeks to create a continuum of learning from early childhood to higher education. This implies maintaining synergies, smooth collaboration and sensible interface management between entities participating in this proposal and the creation of common standards and joint recommendations. At the same time, this provides opportunities for generating synergies and optimising the use of funds and time through joint coordination.

The coordination arrangements include:

- Joint project management: one project leader and designated agency staff for each component, guaranteeing day-to day coordination and regular interagency project monitoring meetings,
- Joint programme design, review and evaluation of all UN agencies involved.

Implementing UN BiH agencies: UNICEF, UNESCO, ILO, UNV.

5. Indicative budget (USD)

Key results (Outputs)	Activities	Indicative budget (USD) - ILO	Indicative budget (USD) - UNV	Indicative budget (USD) - UNESCO	Indicative budget (USD) - UNICEF	Indicative budget (USD) - TOTAL
Output 1: Education government authorities have strengthened capacities for crisis response and implementation of safe schools' operations and risk communication	1.1. Support education government authorities to develop and disseminate 'back to school' and 'back to preschool' guidelines (UNICEF/UNESCO)	-	-	40,000	40,000	80,000
	1.2. Assist education government authorities in development of risk assessments, contingency, and response plans for remote learning (UNICEF/UNESCO)	-	-	40,000	40,000	80,000
	1.3. Support schools and preschools in "opening up better" by provision of hygiene material and information resources (UNICEF)	-	-	-	150,000	150,000
Subtotal Output 1		-	-	80,000.00	230,000.00	310,000.00
Output 2: Continuity of learning in BiH is ensured for all vulnerable children and youth	2.1. Support schools and preschools by provision of ICT resources for children without ICT access in case of/ disruption of regular school process due to emergency crises (UNICEF/UNESCO)	-	-	250,000	150,000	400,000
	2.2. Equip schools and preschools with assistive	-	-	-	140,000	140,000

Key results (Outputs)	Activities	Indicative budget (USD) - ILO	Indicative budget (USD) - UNV	Indicative budget (USD) - UNESCO	Indicative budget (USD) - UNICEF	Indicative budget (USD) - TOTAL
	technology for children with disabilities (UNICEF)					
	2.3. Produce developmental content for preschool children to be broadcasted on media and other available distance learning platforms (UNICEF)	-	-	-	150,000	150,000
Subtotal Output 2		-	-	250,000.00	440,000.00	690,000.00
Output 3: Education government authorities are supported to implement quality inclusive e-learning and blended learning approaches	3.1. Engage volunteers in supporting of digitalization of e-learning materials (UNV)	-	58,900	-	-	58,900
	3.2. Assist education government authorities in conducting assessment on quality of e-learning delivery at education level (UNESCO and UNICEF)	-	-	30,000	-	30,000
	3.3. Support education government authorities in digitization of education process to increase both efficiency and system resilience to future shocks (UNESCO/UNV)	-	38,900	120,000	50,000	208,900
	3.4. Assist education government authorities in improving quality of information management platforms in education (e.g. EMIS, TMIS) (UNESCO)	-	-	120,000	-	120,000
	3.5. Support education government authorities in development of standards and guidelines for quality inclusive blended learning (UNICEF)	-	-	-	40,000	40,000
Subtotal Output 3		-	97,800	270,000	90,000	457,800
Output 4: Teachers have enhanced capacities for delivering quality e-learning and blended learning	4.1. Support education government authorities in mapping the professional development needs of teachers for e-learning and blended learning (UNICEF/UNESCO)	-	-	20,000	20,000	40,000
	4.2. Pilot <i>Digital Learning and Media and Information Literacy as precondition for (online) teaching</i> workshop for primary and secondary teachers in Sarajevo Canton (UNESCO)	-	-	30,000		30,000

Key results (Outputs)	Activities	Indicative budget (USD) - ILO	Indicative budget (USD) - UNV	Indicative budget (USD) - UNESCO	Indicative budget (USD) - UNICEF	Indicative budget (USD) - TOTAL
	4.3. Provide training programmes to improve capacities of teachers for quality inclusive blended learning in line with European Key Competences Framework (UNICEF/UNESCO)	-	-	70,000	50,000	120,000
	4.4. Implement training programmes for the usage of Assistive Education Technology tools to meet learning needs of students of all abilities (UNICEF)	-	-	-	10,000	10,000
Subtotal Output 4		-	-	120,000	80,000	200,000
Output 5: TVET authorities have enhanced capacities for delivering quality TVET e-learning and blended learning, including enhanced capacities for TVET teachers and instructors	5.1. Facilitate provision of equipment for TVET schools for disadvantaged TVET students (ILO)	30,000		-	-	30,000
	5.2. Support education government authorities in development of standards and technical capacities for developing of e-learning platforms for TVET schools (ILO/UNESCO/UNV)	34,000	50,000	35,000	-	119,000
	5.3. Implement professional development programmes for TVET providers for creating, facilitating and implementing e-learning / blended learning in TVET (including training of relevant staff, development of training materials and support institutionalizing of e-TVET professional development) (ILO)	55,000	-	-	-	55,000
	5.4. Establish collaboration with the business community to compensate for the misalignment between TVET training and labour market needs (ILO/UNV)	35,000	67,050	-	-	102,050
	5.5. Develop and pilot e-learning curricula and multi-media e-learning materials for 2 key occupations in each entity (ILO)	80,000	-	-	-	80,000
Subtotal Output 5		234,000	117,050	35,000		386,050
TOTAL (USD)		234,000	214,850	755,000	840,000	2,043,850



ANNEX 3 - CONCEPT NOTE: New Joint Initiative – Social Cohesion and Community Resilience

MITIGATING THE IMPACT OF THE COVID-19 PANDEMIC: RESPONDING TO BiH'S COVID-19 RELATED SOCIAL COHESION AND COMMUNITY RESILIENCE CHALLENGES

1. Key vulnerabilities related to COVID-19 pandemic and outbreak in BiH – Social Cohesion and Community Resilience

On March 11, 2020 the World Health Organization declared COVID-19 a global pandemic. A state of emergency was declared in Bosnia and Herzegovina (BiH) by both entity governments on 16 March 2020⁴² and at the state level – on 17 March 2020⁴³.

Given BiH's post-conflict context and unresolved drivers of division and instability, it is essential that priority be given to strengthening social cohesion and community resilience during the fight against COVID-19. The multiple layers of fragility and instability impacting the country demand that trust- and confidence-building efforts do not let up. For without this, more effective governance; a healthier relationship between institutions and all community residents; as well as a genuine, durable peace based on common aspirations may easily fall short. These are critical areas in need of long-term attention; and they underpin the UN's prevention agenda, sustaining peace and SDGs-related work. While this requires strong country leadership, it also needs to be woven in to BiH's society at the local level in a manner that bolsters constructive and on-going partnerships.⁴⁴ Thus, funding should not be reprioritized away from peacebuilding now. It is imperative that a conflict-sensitive perspective inform all efforts within the COVID-19 response-to-recovery trajectory.

In sum, the pandemic is exacerbating fragilities and vulnerabilities; magnifying divisions and creating new ones within and between communities. Marginalized and vulnerable groups and individuals will be disproportionately impacted by the pandemic – both in terms of direct health and psycho-social ramifications and indirect socio-economic hardships. The imposition of COVID-19-related restriction may even catalyze many communities to “close inward”. Women, especially those belonging to vulnerable and marginalized groups will face new forms of intimidation and sexual harassment and an increase in domestic violence – all having emerged in the wake of the pandemic. In tandem, they will continue to suffer inequalities, barriers to accessing their rights as well as disproportionate socio-economic hardships (given they make up a lion's share of the work force in sectors highly affected by the pandemic). The stigmatization and discrimination of migrants, refugees, asylum-seekers, persons under subsidiary protection and at risk of statelessness – which is already present in host communities – may be intensified during the COVID-19 recovery period and will further strain community cohesion and resilience. These groups will face even greater administrative, financial, legal and language barriers; and accessing basic services will become more challenging too.

During the arc of the pandemic, the role and power of media (traditional and social) in shaping societal resilience toward, and responses to, COVID-19 are coming to the fore. On the one hand, social media is being used to increase civic mobilization and to enable increased access to information, empowering citizens to be more prominently engaged in critical issues. On the other hand, the unregulated and chaotic landscape of digital media is also being used by certain groups to spread misinformation, disinformation, misleading or agenda-based news and analysis; to polarize and manipulate society; to exacerbate

⁴² Sources: Government of Republika Srpska, Government of the Federation of Bosnia and Herzegovina.

⁴³ Source: Decision of the Council of Ministers of Bosnia and Herzegovina.

⁴⁴ International Peace Institute: Sustaining Peace: What Does It Mean in Practice?

https://www.ipinst.org/wp-content/uploads/2017/04/1704_Sustaining-Peace-final.pdf

intolerance and to fuel stigma, hate and segregation. In some fragile political contexts this creates new and genuine threats to community coherence and, more broadly, to overall stability and peace. This will remain a significant challenge during the COVID-19 context when time spent in social isolation increases as will exposure to, or reliance on, digital platforms. In tandem, the lack of access to technology will leave economically vulnerable persons as well as some elderly and children further isolated in the COVID-19 environment.

With local elections scheduled to take place in the fall or early winter of 2020, there is a risk that some elected officials, public figures, media organizations and/or other actors may employ divisive rhetoric based on fear and mistrust as well as the COVID-19 crisis for pursuing various agendas at the expense of communities aiming to rebuild themselves and strengthen overall social cohesion and resilience along with others. This dynamic may have a particularly harmful effect on (re)building mutual understanding and respect and other related efforts to bolster inter and intra community participation and cooperation.

Authorities have undertaken measures to address the COVID-19-related socio-economic vulnerabilities under extremely challenging conditions. This means, however, that the provision of essential services is stressed; timely and coherent work and responses between key sectors will be affected. It is absolutely vital that a common understanding of the overall country situation and the potential consequences to within and between communities is quickly established in BiH. In order to avoid the risk of unequal/lopsided policy response(s), it will be necessary to ensure that all efforts are mobilized toward a sustained, inclusive, balanced, gender-responsive and job-rich pandemic recovery. Common platforms will be needed for authorities, citizens and employers' and workers' organizations (i.e. social partners) to design, monitor and implement innovative policy measures aimed at strengthening the resilience of communities as well as overall social cohesion throughout the country. In this regard, the full potential of social dialogues and platforms as an effective means for identifying specific, but broad-based local priorities challenges, needs, and policy responses for a sustainable and inclusive recovery has not yet been fully realized.

2. UN BiH response strategy

As noted above, the COVID-19 response-to-recovery efforts and process – which is unfolding in a politically fluid and unstable environment – should include addressing some key drivers of division and instability that communities have been grappling with for an extended time and which continue to deeply impact the fabric of society across the country. In this regard, one pillar of the proposed interventions would seek to (i) strengthen community cohesion and resilience through constructive media practices.

The COVID-19 recovery period also represents a unique opportunity for the country to build back better. Thus, a second pillar would aim to bolster the collective empowerment and citizens' ownership over the recovery process at the local level; and to crystalize the voices and views of key community groups – especially youth, women, vulnerable groups, private sector leaders – on the post-COVID-19 future they wish to live in. In this regard, the proposed activities would help strengthen opportunities for constructive dialogue and revitalize strategic bonds at local levels to ensure a more equitable recovery that bolsters stability and mutual understanding.

The response strategy aims for the following **outcome**: *Collaboration within and between communities and among citizens are strengthened to counter impact of harmful, inaccurate, manipulative media messaging; and broad-based, inclusive socio-economic dialogue processes are increased to help sustain peace and bolster community resilience in the COVID-19 context.*

The **geographical scope** of intervention is BiH.

The **proposed period** of intervention is 15 July 2020 - 31 December 2021.

The response strategy is built around **2 outputs**:

Output 1: Local community capacities strengthened to jointly combat media content that spreads mis/disinformation, hate speech, xenophobia, stigma and to actively collaborate on generating fact-based and constructive/positive content.

Output 2: Local Dialogue Platforms aim to increase cooperation and effectiveness of institutions/authorities, social partners and private sector (employers and business organizations) via designing, monitoring and implementing innovative actions and policy measures that ensure more cohesive and resilient communities.

Output 1: LOCAL COMMUNITY CAPACITIES STRENGTHENED TO JOINTLY COMBAT MEDIA CONTENT THAT SPREADS MIS/DISINFORMATION, HATE SPEECH, XENOPHOBIA, STIGMA AND TO ACTIVELY COLLABORATE ON GENERATING FACT-BASED AND CONSTRUCTIVE CONTENT

- **Utilize established UN DFF local dialogue platforms across BiH's municipalities** to help combat mis/disinformation, hate speech, xenophobia, etc and allow youth in various communities work together to generate, proliferate and give focus to constructive, fact-based media stories and messages rather than divisive ones. *Build this with local communities and authorities.*
- **Promote importance of intercultural dialogue and cultural diversity in creatively addressing COVID-19 related challenges and beyond – by raising awareness on Media and Information Literacy among youth in BiH;** The rapidly changing information, communication, media and education environments have created new opportunities for, and challenges to, communities and societies, in particular at times of crisis. Children and youth often have very limited, or no, opportunities to

acquire critical skills and competences needed for navigating and building a successful life in the digital age; they are often not prepared to seek free access to information through independent and various media or information intermediaries. Furthermore, to foster cultural pluralism by integrating the promotion of cultural diversity and intercultural dialogue in national policies and governance structures. Interventions in this area must also be tempered with the reality that existing forms of segregation and prejudice must be dealt with through broadening horizons at all level, with a particular focus on providing young children with increased opportunities for intercultural learning and interaction. *Build this with educational institutions (schools and universities).*

- **Build partnership with social media platforms** (i.e. Facebook, Twitter); augmenting their pool of community specialists for BiH. Flagging, vetting and promptly removing any hate-based contents and mis-/disinformation posted online that exacerbates prejudice and promotes fear, mistrust and hate-speech. Broaden this partnership to **include national fact-checking organizations** to bolster the capacities of communities themselves to combat negative rhetoric, disinformation, xenophobia and hate speech. Post-facto fact-checking has little to no impact on citizens and residents. During and beyond the COVID-19 response-to-recovery phase, timing and visibility is vital. *Build this content with MoHRR, Ombudspersons; consider partnering with CIN and Istinomjer)*

Output 2: LOCAL DIALOGUE PLATFORMS/MECHANISMS AIM TO INCREASE COOPERATION AND EFFECTIVENESS OF INSTITUTIONS/AUTHORITIES, SOCIAL PARTNERS AND PRIVATE SECTOR VIA DESIGNING, MONITORING AND IMPLEMENTING INNOVATIVE ACTIONS AND POLICY MEASURES THAT ENSURE MORE COHESIVE AND RESILIENT COMMUNITIES

- **Promote and support social dialogue through already-established UN DFF local dialogue platforms** to (i) identify common cross- and inter-community socio-economic priorities and concerns; (ii) allow community groups and authorities to adopt transparent and effective methods of communication on COVID-19 and related socio-economic policy responses; (iii) allow women advocates and authorities to work on bridging gaps created by intersecting inequalities (social, economic, political); (iv) allow local authorities, employer and business organizations, and workers' organizations to engage in broad-based dialogues around enhancing policy coordination and help motivate a wider range of regional actors to contribute to the COVID-19 pandemic-related recovery through territorial social pacts. *Build this with municipal authorities, private sector entrepreneurs, employers' and workers' organizations.*
- **Establish a network of Intergenerational Solidarity Centers (ISCs) across vulnerable communities** to source ideas, solutions, talents, and skills that address immediate challenges posed by COVID-19. ISCs should promote cultural diversity and intercultural dialogue, including volunteerism and philanthropy as critical pillars of sustained public services; through various initiatives, youth networking, activism, entrepreneurship and exchange programs that contribute to strengthening social cohesion within and between communities in BiH. Complement Intergenerational Solidarity Centers with DFF's local dialogue platforms in select municipalities for maximum impact. *Build this with local authorities.*
- **Support grass-roots actors and initiatives that promote solidarity and volunteerism skill-building, activism and cooperation of youth, women and marginalized groups – in tandem with private sector actors:** To offer a visible and tangible alternative to politics and policies of mistrust and discord. Feature local successes broadly, emphasizing their significance in terms of community actors –

especially youth, women, vulnerable members and private sector actors – “crossing the divides.” *Build this primarily with relevant CSOs, private sector entrepreneurs and include capacity building in critical thinking, leadership, public advocacy, combating divisive rhetoric and agendas.*

- **Further support BiH authorities and persons who had to flee their country of origin, and in need of international protection, to facilitate their access to asylum procedures (as prescribed by national asylum laws)** as a key step towards social cohesion in host communities. In tandem, ensure fair and effective asylum procedures and build trust between BiH authorities, local communities and persons of concern. *Build this with MoS, local authorities, local communities, and persons in need of international protection in BiH.*

3. Results framework

Key results	Progress indicators	Baseline	Target	Means of Verification	Activities
Outcome					
Collaboration within and between communities and among citizens are strengthened to counter impact of harmful, inaccurate, manipulative media messaging; and broad-based, inclusive socio-economic dialogue processes are increased to help sustain peace and bolster community resilience in the COVID-19 context.	<p>Outcome Indicator 1. Percentage of target groups report increased trust between members of community and their local representatives</p> <p>Outcome Indicator 2. Percentage of Local government partners introduce active policy measures in response to COVID-19.</p> <p>Outcome Indicator 3. Percentage of vulnerable populations report improved living conditions.</p>	Low overall level of trust between communities and their representatives.	50% of target locations report increased trust between members of community and their leaders 18 months after project initiation	Perception survey uReport	N/A
Outputs					
Output 1: Local community capacities strengthened to jointly combat media content that spreads mis/disinformation, hate speech, xenophobia, stigma and to actively collaborate on generating fact-based and constructive/positive content.	# Outreach engagement measurable across BiH visible through social media and online platforms Campaign in mainstream media and online media outlets Number of youth from targeted communities with increased Media and Information Literacy awareness, enabled to more effectively respond to challenges related to (dis/mis/mal) information dissemination during a health and similar crisis. Number of youth and adolescents	Negative media statements dominating BiH public space; Insufficient number of youth capacitated on Media and Information Literacy concept.; Limited number of youth trained in peacebuilding,	100,000 views on combined media platforms 300 youth across BiH built their skills in collaborative leadership and peacebuilding 50 educators.	Youth participant Database; Feedback forms Methodology	Support strengthening of local community capacities to jointly combat media content that spreads mis/disinformation, hate speech, xenophobia, stigma and to actively collaborate on generating fact-based and constructive/positive content. 1.1.1. identify youth influencers and engage in creation of media content 1.1.2 Facilitate the promotional campaign and assist mainstream media in distribution of content Empower children and youth with critical thinking through Media and Information Literacy (MIL) skills in formal and non-formal education

	<p>have their skills built in advocacy, collaborative leadership</p> <p>Number of educators trained</p>	<p>advocacy and collaborative leadership;</p> <p>Limited teacher capacities for quality inclusive online and blended learning and lack of assistive technology</p>			<p>1.1.3 Promoting awareness of the impact of media in child and youth development</p> <p>1.1.4. Empowering the child and the young adult to be able to make informed decisions and independently negotiate meanings intelligently with the media content</p> <p>1.1.5. Promoting positive value of cultural diversity and fostering intercultural dialogue among youth</p> <p>1.1.6. Encouraging information literacy in the digital age, and the mastering of information and communication technologies</p> <p>Strengthen capacities of youth and adolescents for collaborative leadership and peacebuilding.</p> <p>1.1.7. Implement global methodologies in targeted areas</p> <p>1.1.8. Establish cooperation among universities of Sarajevo and Banja Luka to deliver workshops on advocacy and media. Improve capacities of education sector for quality inclusive online and blended learning adapted to COVID-19 environment</p> <p>1.1.9. Mapping of assistive technology needs and resources</p> <p>1.1.10. Equipping education institutions with assistive technology</p> <p>1.1.11. Deliver trainings to selected educators.</p>
	<p>Number of public service access points that offer digital services and are permanently available to citizens.</p>	<p>Public services for youth and survivors of violence (medical, psychosocial) are not available online.</p>	<p>Medical, psychosocial care and support services available online.</p>	<p>Project reports;</p> <p>Reports from line ministries - entities' ministries of health/health care/labor/social policy</p>	<p>Expedite digital transformation of medical and psychosocial support services available to youth, including survivors of GBV/CRSV</p> <p>1.2.1 Digitalize and automate initial medical and psychosocial support screenings;</p> <p>1.2.2 Build digital referral mechanism for both citizens and service providers, expediting service delivery and reporting mechanisms in critical sectors (medical, psychosocial)</p>
	<p>Number of women reached through Generation Equality Campaign.</p> <p>Number of initiatives supported.</p>	-	<p>100,000 women reached</p>	-	<p>Outreach, capacity development and identified local initiatives on gender roles, advocacy and leadership delivered to local actors and women in BiH.</p> <p>1.3.1. Support local actors in the localization of global Generation Equality campaign to bridge divides – gender, age, other identities (social, economic, etc.)</p>

<p>Output 2:</p> <p>Local Dialogue Platforms/Mechanisms aiming to increase social cohesion and build more resilient communities., enhanced through direct engagement of local community actors, including the private sector.</p>	<p>Number of local mechanisms/platforms for dialogue established through online platforms (E-Local Dialogue Platforms)</p> <p>Number of youth from religious communities directly reached and engaged in inter-faith events</p> <p>Number of people engaged in communities in targeted localities through the UN Community Volunteers modality</p> <p>Number of young women having developed leadership skills through the mentoring programme</p>	<p>27 permanent dialogue spaces in the selected municipalities. Broad-spectrum issues such as sustainable development challenges and the legacy of the past are tackled separately by each generation (older and younger citizens)</p>	<p>10 e-local dialogue platforms established with identified plan of action re. COVID-19 response (regular dialogue established) 30,000 youth and older persons reached</p>	<p>Minutes from E-Dialogue Platforms Project reports; Reports from Inter-generational solidarity centers</p>	<p>Support Structured Dialogue with citizens in local communities on aspects of COVID-19 response including advocacy established.</p> <p>2.1.1. Establish ICT support to identified municipalities</p> <p>2.1.2. Prepare Plan of Action for LDPs on COVID-19 response</p> <p>2.1.3. Organize e-dialogues in selected communities with most affected sectors</p> <p>2.1.4. Present results to mayors and other government partners</p> <p>Youth from religious communities and faith-based organizations empowered and interlinked to alleviate the legacy of war-related pain and trauma</p> <p>2.1.5. Build a series of opportunities (grass-roots events) where youth from different religious communities and faith-based organizations can jointly engage in public discussion and joint cooperation that directly tackles the accumulated legacy of war-related pain and trauma</p> <p>2.1.6. Engage top leadership of religious communities in building and promoting inclusive narratives of the past that reflect on the shared legacy of pain and finds common grounds that heal the rift between ethnic groups</p> <p>2.1.7. Deploy 20 UN Community Volunteers with local government institutions with aim to equip them with meaningful community engagement experience, promoting cultural diversity and intercultural dialogue, contributing to increased trust between the community and local government. Enrol 6 young women into a 6-month mentoring programme with identified (vetted) women champions from public institutions, to increase leadership capacity and interest into political engagement of women and girls</p> <p>2.1.8. Organize municipality-level exchanges through UN Community Volunteers modality to encourage cultural tolerance, diversity, and exchange of ideas.</p> <p>2.1.9. Support promotion of local and grass roots community activism on crossing the divides and cooperation, through UN community volunteers modality, offering alternative to politics of distrust and division</p> <p>2.1.10. Implement innovative awareness raising campaigns and advocacy to promote initiatives responding to issues of shared concern through UN Community volunteers</p>
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	<p>Number of youth directly participating in innovative programs at local level that explicitly tackle the accumulated legacy of war-related pain and trauma</p> <p>Number of youth and older persons directly involved in implementing solutions to tackle pressing local community issues (development), including alleviation of the toxic legacy of the past (cohesion)</p>	<p>Youth leadership in BiH rarely tackles the legacy of pain and trauma associated with the war</p> <p>Broad-spectrum issues such as sustainable development challenges and the legacy of the past are tackled separately by each generation (older and younger citizens)</p>	50,000 youth reached	Project reports; Reports from religious communities and faith-based organizations	<p>Support Youth from divided communities to directly engage in building innovative solutions (utilizing arts and culture; media and IT; and activism and entrepreneurship) that deconstruct the toxic legacy of pain and trauma</p> <p>2.2.1. Organize an array of local events - utilizing arts and culture, media and IT, including activism and entrepreneurship that directly tackle the legacy of pain and trauma that was inter-generationally transferred to youth</p> <p>2.2.2. Co-finance youth projects by promoting and leveraging local philanthropic giving aimed at transforming the toxic legacy of war</p> <p>Improve capacities and skills of youth and older persons through a network of centers for Inter-generational Solidarity across BiH. / Build capacities within existing centers for healthy aging, transforming their reach and service delivery to promote solidarity, cooperation and interdependence among generations</p> <p>2.2.3. Develop innovative financing modalities for intergenerational solidarity, mobilizing local philanthropic giving and support and an important funding vehicle for intergenerational solidarity and support</p> <p>2.2.4 Implement public awareness campaigns that promote intergenerational solidarity as an important backbone for the achievement of sustainable development goals and for alleviation of the toxic legacy of the past</p>
	<p>Number of local activism interventions led by young women</p> <p>Number of women reached through trust-building workshops</p> <p>Number of recommendations for improving the status of women from marginalized groups produced supported by the program</p>	150 girls and women	300 girls and women 6 additional municipalities, 300 women and girls 5 recommendations at least 5 initiatives	Reports from workshops, and meetings, reports from initiatives implementers , reports from government committees/ bodies	<p>Support young women's leadership and activism in local communities</p> <p>2.3.1 Support to community focused young girls / women advocacy and leadership initiatives (Beehive methodology) 2.3.2.Trust-building workshops between persons from marginalized groups and local institutional service providers 2.3.3. Support to women's rights defenders, especially those coming from marginalized groups, for constructive dialogue and advocacy with government/decision-makers 2.3.4</p>

	<p>Number of UASCs from USC provided with protection-sensitive accommodation</p> <p>Number of PoCs in private accommodation receiving monthly humanitarian assistance</p>	N/A	<p>60 most vulnerable UASC from USC</p> <p>60 POCs granted international protection and extremely vulnerable asylum-seekers in private accommodation</p> <p>700 PoC participants in thematic trainings through the Peer to Peer system</p>	-	<p>Support to associations of women with disabilities to advocate for including their needs and priorities in policies at different levels.</p> <p>Provide Community-based protection for persons in need of international protection to promote social cohesion:</p> <p>2.4.1. Community-based protection and protection-sensitive accommodation of asylum-seekers in USC</p> <p>2.4.2. Provision of miscellaneous services to recognized refugees and asylum-seekers</p> <p>2.4.3. Provide 60 most vulnerable UASC from USC with protection sensitive accommodation and all other child protection sensitive services in MFS Emmaus.</p> <p>2.4.4. Provide 60 POCs granted refugee status or subsidiary protection and extremely vulnerable asylum-seekers staying in private accommodation with monthly humanitarian assistance.</p> <p>2.4.5. Communication with communities: Peer educators with the assistance of cultural mediators / interpreters provide 32 community information sessions / thematic trainings through the Peer to Peer system for 700 PoCs</p> <p>2.4.6. - Provision of free legal aid to refugees, asylum-seekers, IDPs, returnees and relevant legal analyses</p> <p>2.4.7. Provide 10 families with intention to seek asylum in BiH with adequate basic services during the COVID-19 emergency situation including expedited procedures for entering the asylum process.</p> <p>2.4.8.- Establish UNHCR field presence in Tuzla in order to support PoCs and national authority structures.</p> <p>Improve social dialogue at the local level and ensures a participatory approach in the socio-economic recovery of the local communities</p> <p>2.5.1. Technical assistance and support in the development of agile and effective institutional frameworks for socio-economic policy response within the BiH's municipalities to ensure the involvement of the social partners and other stakeholders.</p> <p>2.5.2. Coordinate of development of the common platform where</p>
	<p>Number of established local tripartite plus Economic and Social Councils/committees as platforms to broker, design, and implement territorial socio-economic pacts.</p> <p>Number of new and innovative policy</p>	There is no local tripartite plus Economic and Social Councils established.	20 local tripartite plus Economic and Social Councils/committees	Territorial pacts signed by the local authorities, employers' and workers'	

	<p>measures for socio-economic recovery that contribute to the more peaceful and resilient society and social cohesion.</p> <p>Number of communities receiving support to expand CSO Mental Health and Psycho-Social Support services</p> <p>Number of participatory initiatives completed</p>	n/a 105 initiatives	<p>At least 20 new and innovative policy measures developed by the local tripartite plus Economic and Social Councils/committees</p> <p>15 communities by the end of the project</p> <p>115 by the end of the project</p>	<p>organizations. Policy measures and reports on implementation</p> <p>Reports from participatory planning meetings, reports from initiative implementers, reports from committees</p>	<p>authorities and social partners get together to design, monitor and implement new and innovative policy measures.</p> <p>Support Mental Health and Psycho-social community resources</p> <p>2.6.1. Identify CSP MHPSS service providers in local communities</p> <p>2.6.2. Build capacities of CSP MHPSS service providers in local communities</p> <p>2.6.3. Direct support for activities of CSP MHPSS service providers</p> <p>Support participatory initiatives for COVID-19 recovery implemented in local communities, supporting BBB principles</p> <p>2.6.4. - set up committees in local communities - process, outreach, budget, etc.</p> <p>2.6.5. - organize meetings to develop and discuss initiatives, vote on proposals</p> <p>2.6.6. - support implementation of initiatives</p>
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4. Management and coordination arrangements

The overall **Joint Programme** management structure will be situated in the existing Dialogue for the Future II project to ensure coherence and complementarity of interventions with the lead of **UNESCO**. The overall strategic guidance, oversight and coordinated approach of the participating UN agencies will be ensured by the Resident Coordinator. In connection, and in accordance with the guidelines of joint project management, a Joint Project Board – at the HoA level – will be established to regularly oversee the progress of the UN activities in order to ensure the achievement of the desired results.

The coordination arrangements include:

- Joint project management: one project leader and designated agency staff for each component, guaranteeing day-to-day coordination and regular interagency project monitoring meetings;
- Joint programme design, review and evaluation of all UN agencies involved.

Implementing UN BiH agencies: UNESCO, UN Women, UNFPA, ILO, IOM, UNHCR.

5. Indicative budget (USD)

Key results (Outputs)	Activities	Indicative budget (USD) UNESCO	Indicative budget (USD) UN Women	Indicative budget (USD) UNFPA	Indicative budget (USD) ILO	Indicative budget (USD) IOM	Indicative budget (USD) UNHCR	Indicative budget (USD)- TOTAL
Output 1: Local community capacities strengthened to jointly combat media content that spreads mis/disinformatio n, hate speech, xenophobia, stigma and to actively collaborate on generating fact- based and constructive/posi tive content.	Support strengthening of local community capacities to jointly combat media content that spreads mis/disinformation, hate speech, xenophobia, stigma and to actively collaborate on generating fact-based and constructive/positive content. 1.1.1. identify youth influencers and engage in creation of media content 1.1.2 Facilitate the promotional campaign and assist mainstream media in distribution of content Empower children and youth with critical thinking through Media and Information Literacy (MIL) skills in formal and non-formal education 1.1.3 Promoting awareness of the impact of media in child and youth development 1.1.4. Empowering the child and the young adult to be able to make informed decisions and independently negotiate meanings intelligently with the media content 1.1.5. Promoting positive value of cultural diversity and fostering intercultural dialogue among youth 1.1.6. Encouraging information literacy in the digital age, and the mastering of information and communication technologies Strengthen capacities of youth and adolescents for collaborative leadership and peacebuilding. 1.1.7. Implement global methodologies in targeted areas 1.1.8. Establish cooperation among universities of Sarajevo and Banja Luka	850,000	-	-	-	-	-	850,000

Key results (Outputs)	Activities	Indicative budget (USD) UNESCO	Indicative budget (USD) UN Women	Indicative budget (USD) UNFPA	Indicative budget (USD) ILO	Indicative budget (USD) IOM	Indicative budget (USD) UNHCR	Indicative budget (USD)- TOTAL
	to deliver workshops on advocacy and media. Improve capacities of education sector for quality inclusive online and blended learning adapted to COVID-19 environment 1.1.9. Mapping of assistive technology needs and resources 1.1.10. Equipping education institutions with assistive technology 1.1.11. Deliver trainings to selected educators							
	Expedite digital transformation of medical and psychosocial support services available to youth, including survivors of GBV/CRSV 1.2.1 Digitalize and automate initial medical and psychosocial support screenings; 1.2.2 Build digital referral mechanism for both citizens and service providers, expediting service delivery and reporting mechanisms in critical sectors (medical, psychosocial)	-	-	50,000	-	-	-	50,000
	Outreach, capacity development and identified local initiatives on gender roles, advocacy and leadership delivered to local actors and women in BiH. 1.3.1. Support local actors in the localization of global Generation Equality campaign to bridge divides – gender, age, other identities (social, economic, etc.)	-	100,000	-	-	-	-	100,000
Subtotal Output 1		850,000	100,000	50,000	-	-	-	1,000,000
Output 2: Local Dialogue Platforms/Mechanisms aiming to increase social cohesion and build more resilient communities., enhanced through direct engagement of local community actors, including the private sector.	Support Structured Dialogue with citizens in local communities on aspects of COVID-19 response including advocacy established. 2.1.1. Establish ICT support to identified municipalities 2.1.2. Prepare Plan of Action for LDPs on COVID-19 response 2.1.3. Organize e-dialogues in selected communities with most affected sectors 2.1.4. Present results to mayors and other government partners Youth from religious communities and faith-based organizations empowered and interlinked to alleviate the legacy of war-related pain and trauma 2.1.5. Build a series of opportunities (grass-roots events) where youth from different religious communities and faith-based organizations can jointly engage in public discussion and joint cooperation that directly tackles the accumulated legacy of war-related pain and trauma 2.1.6. Engage top leadership of religious communities in building and promoting inclusive narratives of the past that reflect on the shared legacy of pain and finds common grounds that heal the rift between ethnic groups 2.1.7. Deploy 20 UN Community Volunteers with local government institutions with aim to equip them with meaningful community engagement experience, promoting cultural diversity and intercultural dialogue, contributing to increased trust between the community and local government. Enrol 6 young women into a 6-month mentoring	[UNESCO and UNFPA] 1,354,000	-	[UNESCO and UNFPA] 1,354,000	-	-	-	1,354,000

Key results (Outputs)	Activities	Indicative budget (USD)	Indicative budget (USD)	Indicative budget (USD)	Indicative budget (USD)	Indicative budget (USD)	Indicative budget (USD)	Indicative budget (USD)-
		UNESCO	UN Women	UNFPA	ILO	IOM	UNHCR	TOTAL
	programme with identified (vetted) women champions from public institutions, to increase leadership capacity and interest into political engagement of women and girls 2.1.8. Organize municipality-level exchanges through UN Community Volunteers modality to encourage cultural tolerance, diversity, and exchange of ideas. 2.1.9. Support promotion of local and grass roots community activism on crossing the divides and cooperation, through UN community volunteers modality, offering alternative to politics of distrust and division 2.1.10. Implement innovative awareness raising campaigns and advocacy to promote initiatives responding to issues of shared concern through UN Community volunteers							
	Support Youth from divided communities to directly engage in building innovative solutions (utilizing arts and culture; media and IT; and activism and entrepreneurship) that deconstruct the toxic legacy of pain and trauma 2.2.1. Organize an array of local events - utilizing arts and culture, media and IT, including activism and entrepreneurship that directly tackle the legacy of pain and trauma that was inter-generationally transferred to youth 2.2.2. Co-finance youth projects by promoting and leveraging local philanthropic giving aimed at transforming the toxic legacy of war Improve capacities and skills of youth and older persons through a network of centers for Inter-generational Solidarity across BiH. / Build capacities within existing centers for healthy aging, transforming their reach and service delivery to promote solidarity, cooperation and interdependence among generations 2.2.3. Develop innovative financing modalities for intergenerational solidarity, mobilizing local philanthropic giving and support and an important funding vehicle for intergenerational solidarity and support 2.2.4 Implement public awareness campaigns that promote intergenerational solidarity as an important backbone for the achievement of sustainable development goals and for alleviation of the toxic legacy of the past	-	-	210,000	-	-	-	210,000
	Support young women's leadership and activism in local communities 2.3.1 Support to community focused young girls / women advocacy and leadership initiatives (Beehive methodology) 2.3.2. Trust-building workshops between persons from marginalized groups and local institutional service providers 2.3.3. Support to women's rights defenders, especially those coming from marginalized groups, for constructive dialogue and advocacy with government/decision-makers	-	495,000	-	-	-	-	495,000

Key results (Outputs)	Activities	Indicative budget (USD)	Indicative budget (USD)	Indicative budget (USD)	Indicative budget (USD)	Indicative budget (USD)	Indicative budget (USD)	Indicative budget (USD)-
		UNESCO	UN Women	UNFPA	ILO	IOM	UNHCR	TOTAL
	2.3.4 Support to associations of women with disabilities to advocate for including their needs and priorities in policies at different levels.							
	<p>2.4. Provide Community-based protection for persons in need of international protection to promote social cohesion:</p> <p>2.4.1. - Community-based protection and protection-sensitive accommodation of asylum-seekers in USC</p> <p>2.4.2. - Provision of miscellaneous services to recognized refugees and asylum-seekers</p> <p>2.4.3. - Provide 60 most vulnerable UASC from USC with protection sensitive accommodation and all other child protection sensitive services in MFS Emmaus.</p> <p>2.4.4. - Provide 60 POCs granted refugee status or subsidiary protection and extremely vulnerable asylum-seekers staying in private accommodation with monthly humanitarian assistance.</p> <p>2.4.5. - Communication with communities: Peer educators with the assistance of cultural mediators / interpreters provide 32 community information sessions / thematic trainings through the Peer to Peer system for 700 PoCs</p> <p>2.4.6. - Provision of free legal aid to refugees, asylum-seekers, IDPs, returnees and relevant legal analyses</p> <p>2.4.7. - Provide 10 families with intention to seek asylum in BiH with adequate basic services during the COVID-19 emergency situation including expedited procedures for entering the asylum process.</p> <p>2.4.8.- Establish UNHCR field presence in Tuzla in order to support PoCs and national authority structures.</p>	-	-	-	-	-	245,000	245,000
	<p>Improve social dialogue at the local level and ensures a participatory approach in the socio-economic recovery of the local communities</p> <p>2.5.1. Technical assistance and support in the development of agile and effective institutional frameworks for socio-economic policy response within the BiH's municipalities to ensure the involvement of the social partners and other stakeholders.</p> <p>2.5.2. Coordinate of development of the common platform where authorities and social partners get together to design, monitor and implement new and innovative policy measures</p>	-	-	-	400,000	-	-	400,000
	<p>Support Mental Health and Psycho-social community resources</p> <p>2.6.1. Identify CSP MHPSS service providers in local communities</p> <p>2.6.2. Build capacities of CSP MHPSS service providers in local communities</p> <p>2.6.3. Direct support for activities of CSP MHPSS service providers</p>	-	-	-	-	230,000	-	230,000

Key results (Outputs)	Activities	Indicative budget (USD) UNESCO	Indicative budget (USD) UN Women	Indicative budget (USD) UNFPA	Indicative budget (USD) ILO	Indicative budget (USD) IOM	Indicative budget (USD) UNHCR	Indicative budget (USD)- TOTAL
	Support participatory initiatives for COVID-19 recovery implemented in local communities, supporting BBB principles 2.6.4. - set up committees in local communities - process, outreach, budget, etc. 2.6.5. - organize meetings to develop and discuss initiatives, vote on proposals 2.6.6. - support implementation of initiatives							
Subtotal Output 2		1,354,000 Jointly with UNFPA	495,000	210,000 + 1,354,000 Jointly with UNESCO	400,000	230,000	245,000	2,934,000
TOTAL (USD)								3,934,000



ANNEX 4 - CONCEPT NOTE: New Joint Initiative – Disaster Risk Reduction

MITIGATING THE IMPACT OF THE COVID-19 PANDEMIC: STRENGTHENING CAPACITIES FOR HEALTH-RELATED DISASTER RISK MANAGEMENT IN BOSNIA AND HERZEGOVINA

1. Key vulnerabilities related to COVID-19 pandemic and outbreak in BiH – Capacities for multisectoral Management of Health Disasters

On March 11, 2020 the World Health Organization declared COVID-19 a global pandemic. A state of emergency was declared in Bosnia and Herzegovina (BiH) by both entity governments on 16 March 2020⁴⁵ and at the state level – on 17 March 2020⁴⁶. The worst-case scenario for the spread of the virus was prevented with strict lockdown measures. Nevertheless, side effects of this approach on the economy are serious. 2020 growth is projected at -1.9 %, a significant revision from the pre-COVID-19 projection of 3.4 % for 2020.⁴⁷ According to the ILO nowcasting model, working hours in the Western Balkans declined by an estimated 11.6 per cent during quarter 2. Initial estimation showed that BiH stand to lose approximately 97,000 full-time equivalent jobs (assuming a 40-hour working week) during this quarter. 500,000 children of preschool, primary, and secondary school age are affected⁴⁸ with more than 9,700 children without access to the needed ICT to participate in online classes which seriously affects capacities of all institutions and professionals to ensure continuity and scale-up of existing services.

The COVID-19 crisis exacerbated and highlighted the underlining deficiencies of the public service delivery system, especially in healthcare⁴⁹, education and social welfare⁵⁰, and labor market institutions, causing mass-layoffs, exposure to various stresses, fears, and insecurities. The most vulnerable groups are children and youth, elderly, pregnant women, and victims of gender-based violence. Initial COVID-19 rapid assessments in BiH highlighted the weak links in crisis management in case of disasters that require multi-sectoral collaboration⁵¹. In situation where BiH is still learning that disasters and risk of disasters cannot be divided into sectors, multisectoral approach in managing disaster risks lagging effective and time-efficient coordination and information sharing systems among sectors including specific and in-place procedures, protocols and standards, as well as risk reduction measures addressing resilience building and recovery. This is especially related to health emergencies or pandemics together with evidence on the potential effect of COVID-19 infection. Along with this, general capacities of the civil protection, health, social protection and education sectors and others at local level were extremely stretched from the beginning of the disaster.

COVID-19 pandemic response proved once more that coordination and information management, even though identified through previous disasters as the weakest point, continue to be the main obstacle for effective management of disaster risks. To make things worse, several hazards may strike at once in a

⁴⁵ Sources: Government of Republika Srpska, Government of the Federation of Bosnia and Herzegovina.

⁴⁶ Source: Decision of the Council of Ministers of Bosnia and Herzegovina.

⁴⁷ The World Bank, April 2020.

⁴⁸ Based on bhas.gov.ba education statistics

⁴⁹ COVID-19 pandemics crisis further compromises and delays the provision of routine and essential health services, impacting children the most. Even where basic essential services are maintained, a collapse in a coordinated response between different sectors, i.e., health, police and justice and social services response, and social distancing will mean that sectors will be challenged to provide meaningful and relevant support to communities in need.

⁵⁰ i) inadequate eligibility criteria, targeting, efficiency, availability and volume of cash benefits, ii) limited access and coverage of social and child protection services; iii) limited capacities and human resources in social and child protection sector for scaling-up services in emergencies and extended coverage based on increased needs.

⁵¹ In Civil Protection structures, 1/3 of respondents have bad capacities for performing functions related to response to the pandemic. Also, deficiencies are seen in capacities in material and technical equipment and communication equipment but also in human capacities including skills and knowledge to deal with such emergencies.

series of cascading impacts, as was the case of fires in the south of the country coinciding with the COVID-19 crisis.

The COVID-19 pandemic confronted authorities at different levels in BiH with a unique set of challenges highlighting earlier deficiencies related to multisectoral approach in managing disasters. This Joint UN concept note proposes to improve multisectoral collaboration tackling capacities, strategic documents, and procedures of institutions at different levels with focus on vulnerable population introducing innovative solutions, services, and equipment to enhance institutional preparedness and readiness in responding to health disasters.

2. UN BiH response strategy

The **aim** of this initiative is to build on the momentum of the current response to the Covid-19 crisis and support governments at local, cantonal, entity and state levels to capture lessons learned from the response to this pandemic and build multisectoral capacities for better disaster preparedness and management, focusing on public health-related disasters. Implementation of this initiative will be closely linked to the Joint Swiss UN Programme "Reducing Disaster Risk in Bosnia and Herzegovina for Sustainable Development" currently implemented by UNDP, UNICEF, UNFPA, UNESCO and FAO, financed by the Government of Switzerland. The Programme supports vulnerable categories and 10 high-risk local communities in BiH to prepare and adapt to the risks of disasters in different sectors of development, thus building strong local ownership and leadership of disaster risk management.

The response strategy envisages the following **outcome**: *Authorities are better prepared to provide inclusive and multisectoral management and response to health disasters in BiH.*

To achieve this outcome, the **Theory of Change** (ToC) hypothesises that **IF**:

- Capacities of institutions and personnel in civil protection, health, social welfare, education, and agriculture sectors are improved for multisectoral collaboration in managing health-related disasters **AND**
- Continuity of services for all vulnerable groups (children and youth, elderly, pregnant women, and victims of gender-based violence) is ensured.

...AND authorities demonstrate clear commitment to improve strategic documents and procedures mitigating impact through multisectoral approach, **THEN** all relevant authorities provide inclusive and multisectoral crisis management and response to health disasters in BiH.

This intervention envisages strategic partnerships with relevant authorities and designated agencies at state, entity, District Brcko and local levels, targeting ministries and stakeholders from civil protection, social and child protection, agriculture, health, and education sector. UN represents a partner capable to gather all stakeholders to work together on strengthening health-related disaster management capacities.

The **geographical scope** of intervention is BiH with the following **key beneficiaries**:

- At least 14 relevant ministries at State, entity, and Brcko District level.
- More than 400,000 people in 10 local communities.
- More than 120 professionals in 10 local DRR platforms.

The **proposed period** of intervention is 18 months.

The response strategy is built around **2 outputs**:

Output 1: Supported multisectoral health-related disaster risk management.

Output 2: Strengthened capacities of local governments in responding to health disasters and mitigating impact through multisectoral approach (10 local governments).

3. Results framework

This initiative is linked with the Agenda 2030 and country priorities. The 2030 Agenda for Sustainable Development recognizes the urgent need to reduce the risk of disasters. The UN developed a Plan of Action on DRR for Resilience and facilitated several inter-governmental consultations that culminated in the Sendai Framework for DRR 2015-2030, the Sustainable Development Goals and World Humanitarian Summit outcomes. There are 25 targets related to disaster risk reduction in 10 of the 17 Sustainable Development Goals, firmly establishing the DRR at the centre of sustainable development, directly linked with governance, urbanization, management of natural resources and ecosystems, poverty and climate change. Conversely, all seven global targets of the Sendai Framework are critical for the achievement of the SDGs.

This Programme fully corresponds with all four priority actions of the Sendai Framework, which resonate with the DRR challenges in Bosnia and Herzegovina.

The Four Priorities for Action include: i) understanding disaster risk, strengthening disaster risk governance to manage disaster risk; ii) investing in disaster risk reduction for resilience; iii) enhancing disaster preparedness for effective response and iv) “build back better” in recovery, rehabilitation and reconstruction.

The Leave No One Behind agenda is a central promise of the 2030 Agenda for Sustainable Development, the SDGs and Sendai Framework and should also guide response measures to COVID-19.

Key results	Progress indicators	Baseline	Target	Means of Verification	Activities
Outcome					
Authorities are better prepared to provide inclusive and multisectoral management and response to health disasters in BiH	Number of citizens who benefit from improved health disaster institutional capacities and services	0	BiH population	Formal documents by partner Risk analysis from target localities Programme reports and evaluation report	N/A
Outputs					
Output 1: Supported multisectoral health-related disaster risk management	Number of ministries/institutions benefiting from improved coordination mechanisms, protocols and procedures following	0	At least 14 relevant ministries and institutions at State, entity, and Brcko District level	Programme documentation (e.g. assessments, protocols, guidelines, procedures, and reports)	1.1. Including health in the legal framework for country multisectoral emergency management (reinforce the legal framework and link between state, entities and canton level health authorities (WHO)) 1.2. Conducting country-wide feasibility assessment of Social Protection systems to expand cash in emergencies (UNICEF) 1.3. Developing protocols and Emergency Standard Operating Procedures for Social Protection institutions to maintain business continuity, ensure timely

Key results	Progress indicators	Baseline	Target	Means of Verification	Activities
	relevant international DRR frameworks and guidelines			Partner official decisions Postings and information in media and newspapers, photo, and video records	<p>coordination with other sectors and deliver services to children and families in pandemic emergencies (UNICEF)</p> <p>1.4. Developing protocols and Emergency Standard Operating Procedures for health institution to maintain continuity of essential package of health services (primary health and hospital services, hospital safety index, prevention and control of communicable diseases and immunization, mental health, mother and child health, reproductive health, nutrition and food safety, health service for displaced population) (WHO)</p> <p>1.5. Supporting education governments with education sector risk assessment, contingency and response plans, and strengthen monitoring mechanisms (UNICEF)</p> <p>1.6. Conducting detailed assessment of interinstitutional cooperation in health-related disasters and identification of gaps and recommendations (UNDP)</p> <p>1.7. Designing protocols for improved inter-institutional disaster management cooperation (UNDP)</p> <p>1.8. Conducting capacity development activities based on gaps and recommendations of the detailed assessment (UNDP)</p> <p>1.9. Improving crisis management skills in the health sector (WHO)</p> <p>1.10. Digitalizing services in response to the COVID-19 pandemic (UNFPA)</p> <p>1.11. Reduction of COVID-19 impact onto healthcare system by developing Instructions and SOP for health-care system response to COVID-19 including a practical tool for knowledge sharing and SOS helpline to provide psychosocial support to citizens and for medical professionals who are experiencing overwhelming stress (UNFPA)</p> <p>1.12. Capacity building of care givers in nursing homes for older persons in response to the COVID-19 pandemic (UNFPA)</p> <p>1.13. Developing guidelines on inclusion of gender perspective in the planning and delivery under disaster risk management (UN WOMEN)</p> <p>1.14. Piloting guidelines on inclusion of gender perspective in the planning and delivery under disaster risk management (UN WOMEN)</p> <p>1.15. Prepare and introduce guidelines to the National Food Safety Agency to set up national emergency response plan for food control; shared surveillance system that will contribute to strengthening the core capacities for IHR 2005 (prevention is a key part of resilience – this would cover all foods, including foods of animal origin) (FAO, WHO)</p>

Key results	Progress indicators	Baseline	Target	Means of Verification	Activities
					1.16. Developing Emergency Risk Communication Plans for all Hazards (including capacity building) (WHO) 1.17. Supporting the PoEs (points of entry) to have health emergency plans and their integration into country surveillance system for all hazards (WHO)
Output 2: Strengthened capacities of local governments in responding to health disasters and mitigating impact through multi-sectoral approach (10 local governments)	Number of Local Governance and DRR Platform professionals with improved capacities for health emergency preparedness and response	10 DRR Platforms established	At least 10 local governments (120 professionals from 10 local DRR platforms) At least 400,000 citizens	Formal documentation of local governments Local-level DRR Platforms meeting minutes Programme documentation and reports Postings and information in media and newspapers, photo, and video records	2.1. Expanding DRR Action Plans by CSWs to include and implement preparedness measures to pandemic emergencies addressing the needs of vulnerable population, especially children and families (UNICEF) 2.2. Supporting schools on crisis response and implementation of safe schools' operations and risk communication (UNICEF) 2.3. Supporting digitalization of child protection services provided by CSW in response to the COVID-19 pandemic (UNICEF) 2.4. Supporting the health systems to develop the local outbreak preparedness and response plans with focus on communicable diseases and help with the establishment of the more resilient health services i.e. through technological solutions (UNICEF) 2.5. Supporting the health system to develop the local all hazards preparedness and response plans and help with the establishment of emergency medical teams (WHO) 2.6. Strengthening planning, coordination, and fast actions in the response to health-related disasters (UNDP, WHO) 2.7. Supporting prevention, awareness raising and communication to hard-to reach areas and vulnerable groups (UNDP) 2.8. Development of SOPs and guidance on maintaining essential services and coordination for protection from gender-based violence, violence against women and domestic violence (UN WOMEN) 2.9. Supporting capacity building of the essential service providers (UN WOMEN) 2.10. Supporting a dialogue and collaborative organization of service delivery between the CSOs and the government (UN WOMEN) 2.11. Strengthening the relevant institutions to create opportunities to increase the involvement of local food supply chains in local/community markets. (FAO) 2.12. Strengthening emergency-ready school feeding programme to ensure resilience of the nutritional access of the children (FAO)

4. Management and coordination arrangements

In the context of a life-cycle approach, this proposal seeks to broaden the existing Joint Swiss UN Programme "Reducing Disaster Risk in Bosnia and Herzegovina for Sustainable Development" currently implemented by UNDP, UNICEF, UNFPA, UNESCO and FAO, financed by the Government of Switzerland. The UN is a partner capable to gather all relevant stakeholders (civil protection agencies at all levels, health institutions, relevant ministries, UN agencies such as WHO etc.) to work together on strengthening health related disaster risk management capacities.

The overall strategic guidance, oversight and coordinated approach of participating UN agencies will be ensured by the Resident Coordinator. Under the overall leadership of the Programme Steering Committee, the participating UN agencies will have the ultimate responsibilities for achievement of results of the UN activities conducted through the Programme.

The coordination arrangements include:

- Joint project management: one project leader and designated agency staff for each component, guaranteeing day-to day coordination and regular interagency project monitoring meetings,
- Joint programme design, review and evaluation of all UN agencies involved.

Implementing UN BiH agencies: UNDP, UNICEF, FAO, UNFPA, UN Women, WHO.

5. Indicative budget (USD)

Key results (Outputs)	Activities	Indicative budget (USD) UNDP	Indicative budget (USD) UNICEF	Indicative budget (USD) FAO	Indicative budget (USD) UNFPA	Indicative budget (USD) UN Women	Indicative budget (USD) WHO	Indicative budget (USD)-TOTAL
Output 1: Supported multisectoral health-related disaster risk management	1.1. Health included in the legal framework for country multisectoral emergency management (reinforce the legal framework and link between state, entities and canton level health authorities)	-	-	-	-	-	30,000	30,000
	1.2. Country-wide feasibility assessment of Social Protection systems to expand cash in emergencies	-	10,000	-	-	-	-	10,000
	1.3. Developing protocols and Emergency Standard Operating Procedures for Social Protection institutions to maintain business continuity, ensure timely coordination with other sectors and deliver services to children and families in pandemic emergencies	-	20,000	-	-	-	-	20,000
	1.4. Developing protocols and Emergency Standard Operating Procedures for health institution to maintain continuity of essential package of health services (primary health and hospital services, hospital safety index, prevention and control of communicable diseases and immunization, mental health, mother and child health, reproductive health, nutrition and food safety, health service for displaced population)	-	-	-	-	-	65,000	65,000
	1.5. Supporting education governments with education sector risk assessment, contingency and response plans, and strengthen monitoring mechanisms	-	30,000	-	-	-	-	30,000
	1.6. Detailed assessment of interinstitutional	220,000	-	-	-	-	-	220,000

Key results (Outputs)	Activities	Indicative budget (USD) UNDP	Indicative budget (USD) UNICEF	Indicative budget (USD) FAO	Indicative budget (USD) UNFPA	Indicative budget (USD) UN Women	Indicative budget (USD) WHO	Indicative budget (USD)- TOTAL
	cooperation in health-related disasters and identification of gaps and recommendations							
	1.7. Designing protocols for improved inter-institutional disaster management cooperation							
	1.8. Capacity building activities							
	1.9. Crisis management skills in the health sector	-	-	-	-	-	20,000	20,000
	1.10. Digitalization of services in response to the COVID-19 pandemic	-	-	-	30,000	-	-	30,000
	1.11. Reduction of COVID-19 impact onto healthcare system	-	-	-	40,000	-	-	40,000
	1.12. Capacity building of care givers in nursing homes for older persons in response to the COVID-19 pandemic	-	-	-	200,000	-	-	200,000
	1.13. Developing guidelines on inclusion of gender perspective in the planning and delivery under disaster risk management	-	-	-	-	40,000	-	40,000
	1.14. Piloting guidelines	-	-	-	-	75,000	-	75,000
	1.15. Prepare and introduce guidelines to the National Food Safety Agency to set up national emergency response plan for food control; shared surveillance system that will contribute to strengthening the core capacities for IHR 2005 (prevention is a key part of resilience – this would cover all foods, including foods of animal origin)	-	-	250,000	-	-	-	250,000
	1.16. Emergency Risk Communication Plans for all Hazards (including capacity building)	-	-	-	-	-	20,000	20,000
	1.17. Support the PoEs (points of entry) to have health emergency plans and their integration into	-	-	-	-	-	25,000	25,000

Key results (Outputs)	Activities	Indicative budget (USD) UNDP	Indicative budget (USD) UNICEF	Indicative budget (USD) FAO	Indicative budget (USD) UNFPA	Indicative budget (USD) UN Women	Indicative budget (USD) WHO	Indicative budget (USD)- TOTAL
	country surveillance system for all hazards							
Subtotal Output 1		220,000	60,000	250,000	270,000	115,000	160,000	1,075,000
Output 2: Strengthened capacities of local governments in responding to health disasters and mitigating impact through multi-sectoral approach (10 local governments)	2.1. Expanding DRR Action Plans by CSWs to include and implement preparedness measures to pandemic emergencies addressing the needs of vulnerable population, especially children and families	-	70,000	-	-	-	-	70,000
	2.2. Supporting schools on crisis response and implementation of safe schools' operations and risk communication	-	50,000	-	-	-	-	50,000
	2.3. Support digitalization of child protection services provided by CSW in response to the COVID-19 pandemic	-	80,000	-	-	-	-	80,000
	2.4. Supporting the health systems to develop the local outbreak preparedness and response plans with focus on communicable diseases and help with the establishment of the more resilient health services i.e. through technological solutions	-	100,000	-	-	-	-	100,000
	2.5. Supporting the health system to develop the local all hazards preparedness and response plans and help with the establishment of emergency medical teams	-	-	-	-	-	20,000	20,000
	2.6. Strengthening planning, coordination and fast actions in the response to health-related disasters	441,852	-	-	-	-	-	441,852
	2.7. Support prevention, awareness raising and communication to hard-to reach areas and vulnerable groups							
	2.8. Development of SOPs and guidance on maintaining essential	-	-	-	-	50,000	-	50,000

Key results (Outputs)	Activities	Indicative budget (USD) UNDP	Indicative budget (USD) UNICEF	Indicative budget (USD) FAO	Indicative budget (USD) UNFPA	Indicative budget (USD) UN Women	Indicative budget (USD) WHO	Indicative budget (USD)- TOTAL
	services and coordination for protection from gender-based violence, violence against women and domestic violence							
	2.9. Support to capacity building of the essential service providers	-	-	-	-	100,000	-	100,000
	2.10. Support to dialogue and collaborative organization of service delivery between the CSOs and the government	-	-	-	-	55,000	-	55,000
	2.11. Strengthening the relevant institutions to create opportunities to increase the involvement of local food supply chains in local/community markets	-	-	150,000	-	-	-	150,000
	2.12. Strengthened and emergency-ready school feeding programme to ensure resilience of the nutritional access of the children	-	-	100,000	-	-	-	100,000
Subtotal Output 2		441,852	300,000	250,000	-	205,000	20,000	1,216,852
Subtotal Output 1+2		661,852	360,000	500,000	270,000	320,000	180,000	2,291,852
UN Common Coordination Costs								82,000
General Management Support (8%)								189,908
TOTAL (USD)								2,563,760



ANNEX 5 - CONCEPT NOTE: New Joint Initiative – Local Recovery

MITIGATING THE IMPACT OF THE COVID-19 PANDEMIC: INTEGRATED LOCAL RECOVERY FROM COVID-19 IN BOSNIA AND HERZEGOVINA

1. Key vulnerabilities related to COVID-19 pandemic and outbreak in BiH at the local level

On March 11, 2020 the World Health Organization declared COVID-19 a global pandemic. A state of emergency was declared in Bosnia and Herzegovina (BiH) by both entity governments on 16 March 2020⁵² and at the state level – on 17 March 2020⁵³. Following the declaration of the state of emergency and the related introduction of containment measures, local governments have been on the forefront of COVID-19 response and recovery efforts, while experiencing profound effects on all aspects of life. Beyond the obvious health related effects, the COVID-19 pandemic affected local governments in several other ways, including severe economic and financial impact, disruption of service provision and social protection shocks.

COVID-19 associated supply and demand shocks have “pushed” many businesses to reduce the number of their employees.⁵⁴ Micro, small and medium enterprises (MSMEs), which dominate the BiH economy, have been impacted more severely than larger firms due to their limited internal resources to cushion either/both the supply shock and the decline in demand, and their more restrictive access to finance. Sectors based on in-person services, such as tourism, hospitality, cultural and creative industries, and labour-intensive industries have been most severely hurt. Importantly, 92% of women-owned businesses are located in services sector and the COVID-19 crisis risks constraining women’s ability to support themselves and their families.

Secondly, COVID 19 is exacerbating poverty, inequality and vulnerability at the local level, where the structure of the social protection systems in BiH leaves a significant number of families without protection from economic shocks. While existing social assistance programmes are providing a much-needed lifeline to very poor families, the benefit levels are often too low to provide enough support to families to cover essential expenses. Vulnerable groups with preexisting structural barriers, age and gender inequalities, social stigma and overall poor socio-economic conditions face disproportionate impacts of COVID-19 and will require increased support during response and longer-term recovery.⁵⁵

Thirdly, the crisis is resulting in increased expenditures and reduced revenues for local governments. Significant budget cuts further weaken their capacities for COVID-19 recovery, in addition to further limiting their abilities to provide basic services, ensure sufficient degree of social protection to citizens and finance much-needed infrastructure.

At the same time, being the government level closest to citizens, local governments are well positioned to and already do lead responses to some of the immediate effects and in doing so have a better understanding of needs and necessary measures and enable higher transparency and accountability. They are also better able to respond to local needs including in coordination with socio-economic stakeholders,

⁵² Sources: Government of Republika Srpska, Government of the Federation of Bosnia and Herzegovina.

⁵³ Source: Decision of the Council of Ministers of Bosnia and Herzegovina.

⁵⁴ It is estimated that there has been a net loss of 21,941 full-time registered jobs in FBiH, while the RS authorities estimate that 2,403 workers have lost their jobs.

⁵⁵ Children, youth and adolescents, women, elderly, people with disabilities, caregivers, migrants, refugees, asylum-seekers, persons under subsidiary protection and at risk of statelessness, vulnerable IDPs and minority returnees, informal sector workers as well as Roma and other marginalized groups.

while maintaining effective coordination with higher government levels, particularly in those areas where competencies are shared.

This Joint UN concept note proposes to support a number of local governments across the country in confronting with a unique set of challenges in recovering from the pandemic in a sustainable and inclusive manner, thus reinforcing acceleration towards Sustainable Development Goals (SDGs).

2. UN BiH response strategy

The **focus** of the response strategy is to support local governments across the country in their efforts to recover from the pandemic through employing measures aimed at mitigating impact and building resilience. As indicated in the UN BiH COVID-19 Socio-Economic Response and Recovery Offer, the **guiding reference is the Agenda 2030 and its central premise of leaving no one behind**. Guided by this premise and recognizing the structural fragilities in the country, the response strategy therefore places a strong focus on the need for addressing vulnerabilities and inequalities created or deepened by the COVID-19 pandemic, affecting disproportionately negatively particular population groups such as women, youth entering the labour market or in the lower skills category, low-skilled workers, beneficiaries/households recipients of social assistance benefits, persons with disabilities and asylum seekers that are already in vulnerable categories.

The **second principle** that guides the UN BiH response strategy is **building back better sustainable development approach**. This requires measures to support and accelerate recovery from the pandemic, while at the same time helping both local governments and business transit to green, resilient and sustainable business models. This also implies supporting local governments, communities and business in building systems to enable them to effectively and quickly respond to shocks as they emerge, addressing the needs of vulnerable populations and strengthening the role of women in response and recovery efforts.

With this in mind, the response strategy envisages a set of inter-related and mutually supportive measures that seek to:

- (i) improve overall local governments' capacities to plan their resources in line with their overall strategic development goals, while expanding fiscal space and optimizing their expenditures to cover budget gaps and accelerate recovery;
- (ii) strengthen existing and create new and innovative service delivery mechanisms to increase resilience and establish and maintain lifeline services, particularly among the most disadvantaged individuals (i.e. via digitalization of services, creation of support networks, volunteering schemes, etc.);
- (iii) strengthen the social protection systems at the local level to reduce detrimental impacts that the COVID-19 crisis has created on affected households;
- (iv) identify economic recovery measures to support: (i) job retention and creation in SMEs, while at the same time promoting green, resilient and sustainable business models; and (ii) recovery of local economic activity through modernization and digitalization of service industries, such as tourism, and cultural and creative industries, notably crafts.

The strategic response and proposed interventions have direct linkage with UN BiH's Cooperation Framework and will help achieve 2030 Agenda on Sustainable Development Goals. They build on successful practices of a number of ongoing projects implemented by UN agencies at the local level. These include:

- (i) The Integrated Local Development Project (ILDP), a joint project of the Government of Switzerland and UNDP that has contributed to harmonization and modernization of strategic planning at sub-national levels and creation of the institutional infrastructure for future SDGs implementation in the country;
- (ii) The EU-funded Local Integrated Development Project (LID) that has designed and successfully piloted a methodology for public expenditure optimization at the local level;
- (iii) The SDGs financing programme, a joint programme by UN agencies in BiH aiming to establish a wider eco system for future SDGs financing, along with piloting innovative financing approaches in a number of priority sectors (education, health, employment);
- (iv) Social Protection and Inclusion local model implementation in 34 % of BiH municipalities.
- (v) Regional IPA II Programme on Protection-Sensitive Migration Management System in the Western Balkan and Turkey (Phase II), whose activities include but are not limited to the implementation/development of national integration strategies and further tailoring integration plans at country level as well as supporting effective integration/naturalization of persons granted international protection through individualized approach;
- (vi) Provision of free legal aid to refugees, asylum-seekers, IDPs, returnees and relevant legal analysis, a UNHCR's project with Vasa Prava, focusing inter alia on the legal support to these categories of persons of concern in accessing their rights and enabling their successful integration (where applicable), as well as on legal analysis of the existing laws and practices.

The response strategy envisages the following **outcome**: *Increased capacities of local governments to address the COVID-19 recovery in a sustainable and inclusive manner and improved resilience of communities to deal with impacts of socio-economic shocks.*

To achieve this outcome, the **Theory of Change** (ToC) hypothesises that **IF**:

- fiscal space of local governments is expanded, their expenditures are optimized and capacities of local systemically budget and implement their priorities in line with their strategic priorities and recovery needs and strengthened, **AND IF**
- service delivery mechanism to establish and maintain basic services and increase resilience, particularly among the most vulnerable are in place and by using innovation, **AND IF**
- social protection systems are strengthened to reduce impact on affected population, **AND IF**
- sustainable and inclusive economic recovery measures are implemented to retain and create employment and transform towards green economy and digitalization,

THEN local governments will be able to recover better from the COVID-19 crisis, increase their resilience and accelerate their sustainable development in line with domesticated SDG targets.

These interventions envisage strategic partnerships with up to 30 local governments across the country as well as relevant ministries and institutions from the cantonal and entity levels. UN BiH's comparative advantage for the proposed ToC includes long-term experience in the area of local governance and local development, strategic planning and innovation, public finance management and community engagement as well as its existing partnerships with higher government levels and relevant socio-economic stakeholders.

The **geographical scope** of intervention is BiH with the following **key beneficiaries**:

- 30 local governments,
- Up to 30 MSMEs, at least 10 women owned business,
- 60 MSMEs employees,
- Minimum 2,000 the most vulnerable families with children,
- 50 asylum-seekers and refugees.

The **proposed period** of intervention is 18 months.

The response strategy is built around **3 outputs**:

Output 1: Municipalities optimized public finance management and deployed digital tools for enhanced service delivery;

Output 2: Social protection and social assistance programmes are expanded to reduce the impact of COVID-19 on the most vulnerable population, including asylum seekers and refugees;

Output 3: Opportunities for job retention and creation are available, with access to labour market facilitated for vulnerable categories, including asylum seekers.

3. Results framework

This intervention contributes to:

Sustainable Development Goals 5, 8, 16 and 17:

Target 5.5: Ensure women's full and effective participation and equal opportunities for leadership at all levels of decision-making in political, economic and public life | Target 5.a: Undertake reforms to give women equal rights to economic resources, as well as access to ownership and control over land and other forms of property, financial services, inheritance and natural resources, in accordance with national laws | Target 5.b: Enhance the use of enabling technology, in particular information and communications technology, to promote the empowerment of women | Target 5.c: Adopt and strengthen sound policies and enforceable legislation for the promotion of gender equality and the empowerment of all women and girls at all levels | Target 8.1: Sustain per capita economic growth in accordance with national circumstances and, in particular, at least 7 per cent gross domestic product growth per annum in the least developed countries | Target 8.2: Achieve higher levels of economic productivity through diversification, technological upgrading and innovation, including through a focus on high-value added and labour-intensive sectors | Target 8.3: Promote development-oriented policies that support productive activities, decent job creation, entrepreneurship, creativity and innovation, and encourage the formalization and growth of micro-, small- and medium-sized enterprises, including through access to financial services | Target 8.4: Improve progressively, through 2030, global resource efficiency in consumption and production and endeavour to decouple economic growth from environmental degradation, in accordance with the 10-year framework of programmes on sustainable consumption and production, with developed countries taking the lead | Target 8.5: By 2030, achieve full and productive employment and decent work for all women and men, including for young people and persons with disabilities, and equal pay for work of equal value | Target 8.6: By 2020, substantially reduce the proportion of youth not in employment, education or training | Target 8.8: Protect labour rights and promote safe and secure working environments for all workers, including migrant workers, in particular women migrants, and those in precarious employment | Target 8.9: By 2030, devise and implement policies to promote sustainable tourism that creates jobs and promotes local culture and products | Target 16.6: Develop effective, accountable and transparent institutions at all levels | Target 16.7: Ensure responsive, inclusive, participatory and representative decision-making at all levels |

National priorities:

BiH Economic Reform Programme (ERP) for 2019-2021
 Strategy for the advancement of rights and status of persons with disabilities in the Federation of BiH 2016-2021
 Strategy for Improving the Social Position of Persons with Disabilities in Republika Srpska for the period 2017-2026
 Sustainable Tourism Strategy for the UNESCO world heritage property "Old Bridge are of the Old City of Mostar"

Draft UNSDCF 2021-2025:

Outcome 1: By 2025, people benefit from resilient, inclusive and sustainable growth ensured by the convergence of economic development and management of environment and cultural resources
 Outcome 3: By 2025, people have access to better quality and inclusive health and social protection systems
 Outcome 4: By 2025, people contribute to, and benefit from more accountable and transparent governance systems that deliver quality public services, and ensure rule of law

Key results	Progress indicators	Baseline	Target	Means of Verification	Activities
Outcome					
Increased capacities of local governments to address the COVID-19 recovery in a sustainable and inclusive manner and improved resilience of communities to deal with impacts of socio-economic shocks.					
Outputs					
Output 1: Municipalities optimized public finance management and deployed digital tools for enhanced service delivery	1. # of municipalities with optimized public expenditure 2. # of municipalities supported 3. # of municipalities with new digital services 4. # of employment offices with at least 3 digitalized services	1. 18 (2019) 2. 0 (2020) 3. TBD (2020) 4. TBD (2020)	1. 30 (2022) 2. 30 (2022) 3. 30 (2022) 4. 30 (2022)	Programme reports, government reports, budget analyses, PES annual reports	1.18. Support municipalities to identify short and long-term solutions for gender-sensitive public expenditure optimization. 1.19. Support municipalities to implement private sector recovery measures. 1.20. Support to digitalization of municipal services. 1.21. Support to digitalization of local employment offices.
Output 2: Social protection and social assistance programmes are expanded to reduce the impact of COVID-19 on the most vulnerable population, including	1. # Number of families reached 2. # number of children with access to social care service, pre-school and early childhood development. 3. # of CSOs supported. 4. # of policy proposals developed 5. # of community volunteering schemes or networks supported or created 6. # of localities with introduced digital solutions to facilitate community volunteering	1. TBD - depending on the locations 2. TBD - depending on the locations 3. 2 (2020), TBD 4. TBD (2020) 5. TBD (2020) 6. TBD (2020)	1. Min 3,000 families with children (households) in 30 LGs 2. Min 2,000 children in 30 LGs 3. 20 (2022); 4. 5 (2022) 5. 15 (2022)	Municipal and cantonal reports; Cantonal budgets; Municipal budgets; CSWs annual reports; programme reports, CSO reports, electronic platform, UNV records,	2.13. Support expansion of social benefits (cash and services) for the most vulnerable and crisis affected families with children in target locations. 2.14. Support municipalities to design evidence-based social policy measures targeting the most vulnerable and crisis affected families with children, including through free access to pre-school education and early childhood development services. 2.15. Implement advocacy interventions to ensure social protection of victims of violence.

Key results	Progress indicators	Baseline	Target	Means of Verification	Activities
asylum seekers and refugees			6. 5 (2022)	Entity and Cantonal social protection Laws and By-laws	2.16. Support the existing or create of new community volunteering schemes or networks to improve community resilience.
Output 3: Opportunities for job retention and creation are available, with access to labour market facilitated for vulnerable categories, including asylum seekers	1. # of MSMEs supported to retain/create jobs and to implement sustainable business practices; 2. # of SMEs supported to ensure safe returns to work with adequate occupational safety and health standards; 3. # of asylum-seekers and refugees whose access to local labour market was facilitated; 4. # of SMEs that ensured safe returns to work with adequate safety and health standards; 5. # of youth having developed market skills and employment experience 6. # of SMEs identified and their staff capacitated for WEPs; 7. # of mentors engaged; 8. # of micro women-owned businesses with developed business resilience plans 9. # of municipalities with CCI industries mapped for the creation of online registers; 10. # of trained/upskilled CCIs professionals in 3 municipalities; 11. Existence of e-system for municipal collection of revenues (smart card pass) in City of Mostar; 12. # of municipalities with tourism recovery programmes	1. 0 (2020) 2. 0 (2020) 3. 0 (2020) 4. TBD (2020) 5. N/A (2020) 6. 0 (2020) 7. 0 (2020) 8. 0 (2020)	1. 50, of which 30% women-owned (2022) 2. 30 (2022) 3. 50 (2022) 4. 30 (2022) 5. 30 (2022) 6. 30 (2022) 7. 10 (2022) 8. 30 (2022) 9. 3 (2022) 10. 50 (2022) 11. Yes (2022) 12. 17 (2022)	SMEs business continuity plans and reports on implementation, signed agreements with companies, press materials, official ministries reports on allocated funds from the grants scheme; criteria bylaws; Existence of municipal e-system of revenue collection; Existence of online platform on CLT industries; Reports of implemented trainings for the use of digital techniques and skills, strategic documents, programme reports, annual reports from companies, data from local governments	3.1. Deploy economic recovery support measures with focus on the most vulnerable and affected populations (grant schemes). 3.2. Provide technical assistance to SMEs in selected sub-sectors to ensure safe returns to work with adequate occupational safety and health. 3.3. Create job opportunities for youth. 3.4. Provide technical assistance to SMEs to improve HR standards by introduction of Women's Empowerment Principles – WEPs. 3.5. Business resilience development training for women-owned micro and small businesses. 3.6. Strengthen the competitiveness of creative and cultural industries in order to promote smart, sustainable and inclusive economic growth while creating the image of local communities as destinations rich in cultural heritage and tradition.

4. Management and coordination arrangements

The overall programme implementation will be guided by **three distinct and important principles**: (i) full alignment with and utilization of the ongoing COVID-19 recovery efforts in BiH; (ii) reduction of transaction costs and duplication in a complex BiH governing system; and (iii) inclusive engagement of relevant government authorities.

Anchored in the [Guidance Note on Joint UN Programmes](#), the **Steering Committee** for this Programme will ensure systemwide coherence that supports BiH priorities and needs, applying tailored tools and approaches contextualized to ongoing development trends and reforms. The Steering Committee will consist of designated representatives of state, entity and Brčko District governments, the UN Resident Coordinator and heads of participating UN agencies. This will enable the programme to build upon the ongoing COVID-19 recovery actions in BiH and other related interventions of the UN agencies in respective territories, as well as the formulation of the new UNSDCF, utilizing the existing information and structures already established through UN partnership with the authorities in BiH. Such a composition of the Steering Committee will provide for cohesive, efficient and focused action that connects multi-domain efforts in an integrated manner.

The Steering Committee will facilitate collaboration between the participating UN agencies and governments in BiH for the Programme implementation and act as the main decision-making authority, responsible for the oversight of the overall implementation. The Committee will provide strategic guidance, as well as give final approval to selected strategic and operational issues. It will be responsible for reviewing annual work plans, implementation progress and annual reports, as well as for approving any substantial changes or deviations in the budget or activities. The Committee will meet semi-annually or as per ad hoc need, when necessary or raised by the Programme Coordinator. UNDP as a Convening Agency will serve as the secretariat to the Steering Committee, responsible for sending out invitation for meetings, preparing meeting agenda and materials, as well as meeting minutes.

The **UN Resident Coordinator** will ensure the overall strategic guidance, oversight and coordinated approach of the participating UN agencies, reinforced by the framework of the [UN development system repositioning](#).

UNDP will act as the **Convening Agency** of the Programme responsible for its strategic and programmatic facilitation and ensuring cohesive and coordinated approach of all participating agencies. The Convening Agency, in partnership with other UN agencies, will be responsible and accountable to the JP Steering Committee for facilitation of the achievement of agreed Programme results.

Each of the **participating UN agencies** will be substantively and financially accountable for the activities designated to it in the Programme with strong coordination and coherence in achieving results. The participating agencies will be individually responsible for: ensuring the timely implementation of the activities and delivery of the reports and other outputs identified in this programme document; contracting and supervising qualified local and international experts, financial administration, monitoring, reporting and procurement for the activities they are responsible for, and carrying out all the necessary tasks and responsibilities to assist the Steering Committee.

The **Programme Team** will be responsible for day-to-day implementation of the programme, ensuring interagency coordination. The Programme Team will consist of designated focal points by each participating UN agency.

The **Programme Coordinator** (by UNDP/Convening Agency) will be tasked to coordinate the Programme, including annual planning, implementation and reporting, in close cooperation with Programme Team members. The Programme Coordinator will report to the Steering Committee. S/he will also be responsible for consolidating inputs of participating UN agencies into narrative reports to the donor and will consult with the agencies on the financial plans and expenditures related to activities defined within the work plans.

Implementing UN BiH agencies: ILO, UNDP, UNESCO, UNHCR, UNICEF, UNV, UN Women.

5. Indicative budget (USD)

Key results (Outputs)	Activities	Indicative budget (USD) ILO	Indicative budget (USD) UNDP	Indicative budget (USD) UNESCO	Indicative budget (USD) UNHCR	Indicative budget (USD) UNICEF	Indicative budget (USD) UNV	Indicative budget (USD) UN Women	Indicative budget (USD)- TOTAL
Output 1: Municipalities optimized public finance management and deployed digital tools for enhanced service delivery	1.1. Support municipalities to identify short and long-term solutions for gender-sensitive public expenditure optimization	-	200,000	-	-	-	-	135,000	335,000
	1.2. Support municipalities to implement private sector recovery measures	-	850,000	-	-	-	-	65,000	915,000
	1.3. Support to digitalization of municipal services	-	350,000	-	-	-	-	-	350,000
	1.4. Support to digitalization of local employment offices	516,000	-	-	-	-	-	-	516,000
Subtotal Output 1		516,000	1,400,000					200,000	2,116,000
Output 2: Social protection and social assistance programmes are expanded to reduce the impact of COVID-19 on the most vulnerable population, including asylum seekers and refugees	2.1. Support expansion of social benefits (cash and services) for the most vulnerable and crisis affected families with children in target locations.	-	-	-	-	2,000,000	-	-	2,000,000
	2.2. Support municipalities to design evidence-based social policy measures targeting the most vulnerable and crisis affected families with children, including through free access to pre-school education and early childhood	-	-	-	-	300,000	-	-	300,000

Key results (Outputs)	Activities	Indicative budget (USD) ILO	Indicative budget (USD) UNDP	Indicative budget (USD) UNESCO	Indicative budget (USD) UNHCR	Indicative budget (USD) UNICEF	Indicative budget (USD) UNV	Indicative budget (USD) UN Women	Indicative budget (USD)- TOTAL
	development services								
	2.3. Implement advocacy interventions to ensure social protection of victims of violence	-	-	-	-	20,000	-	50,000	70,000
	2.4. Support the existing or create of new community volunteering schemes or networks to improve community resilience.	-	80,000	-	-	-	30,000	-	110,000
Subtotal Output 2			80,000			2,320,000	30,000	50,000	2,480,000
Output 3:	3.1. Deploy economic recovery support measures with focus on the most vulnerable and affected populations (grant schemes)	1,100,000	1,350,000	-	1,000,000	-	-	600,000	4,050,000
	3.2. Provide technical assistance to SMEs in selected sub-sectors to ensure safe returns to work with adequate occupational safety and health	647,500	-	-	-	-	-	-	647,500
	3.3. Create job opportunities for youth	-	-	-	-	-	280,000	-	280,000
	3.4. Provide technical assistance to SMEs to improve HR standards by introduction of Women's Empowerment Principles – WEPS	-	-	-	-	-	-	50,000	50,000
	3.5. Business resilience development	-	-	-	-	-	-	250,000	250,000

Key results (Outputs)	Activities	Indicative budget (USD) ILO	Indicative budget (USD) UNDP	Indicative budget (USD) UNESCO	Indicative budget (USD) UNHCR	Indicative budget (USD) UNICEF	Indicative budget (USD) UNV	Indicative budget (USD) UN Women	Indicative budget (USD)- TOTAL
	training for women-owned micro and small businesses								
	3.6. Strengthen the competitiveness of creative and cultural industries in order to promote smart, sustainable and inclusive economic growth while creating the image of local communities as destinations rich in cultural heritage and tradition	-	-	1,100,000	-	-	-	-	1,100,000
Subtotal Output 3		1,747,500	1,350,000	1,100,000	1,000,000		280,000	900,000	6,377,500
Subtotal OUTPUTS (1+2+3)		2,263,000	2,830,000	1,100,000	1,000,000	2,320,000	310,000	1,150,000	10,973,500
General Management Support (GMS) (8%)									877,880
Programme management and evaluation									150,000
TOTAL (USD)									12,001,380

ANNEX 6 - COVID-19 related assessments

PILLAR 1 – HEALTH FIRST	PILLAR 2 – PROTECTING PEOPLE	PILLAR 3 – ECONOMIC RECOVERY	PILLAR 4 – SOCIAL COHESION AND COMMUNITY RESILIENCE
Assessment Description: COVID-19, Youth and mental health UNICEF	Assessment Description: Social Impact Assessment UNDP and UNICEF Macro Social Protection impact assessment – Regional Western Balkans Assessment UNICEF Regional Social Protection/Child Protection Assessment – Zenica-Doboj Canton UNICEF Country-wide feasibility assessment of SP systems to expand cash in emergencies UNICEF Assessment of the social protection responses to COVID-19 ILO Capacities and needs of Centres for Social Welfare and the social workforce in the current context of COVID-19. (this is part of a broader assessment of the social service workforce for child protection in BiH) UNICEF Assessment of Youth and COVID-19 in BiH UNFPA COVID-19 impacts onto GBV/CRSV survivors UNFPA EDUCATION - Rapid needs assessment which specifies the main issues, gaps and the needed priority actions of the 12 education administrative units in BiH. UNICEF EDUCATION – Rapid needs Re-Assessment / Follow-up on Assessment from March 2020, with updated information on main issues, financial impact, gaps and the needed priority actions of the 12 education administrative units in BiH, at all education levels (from pre-school to high education) UNICEF EDUCATION – OECD Review on Evaluation and Assessment in Education in BiH UNICEF WBG jointly conduct survey at global level on addressing the covid-19 pandemic for technical and vocational education and training (TVET) providers, policy makers and social partners ILO-UNESCO Rapid Assessment of needs of shelters in BiH in light of COVID19 crisis (VAW) UN Women The Impact of COVID-19 Pandemic on specialist services for victims and survivors of violence in the Western Balkans and Turkey: A proposal for addressing the needs UN Women Regional	Assessment Description: Economic Pulse UNDP Rapid Economic Impact Assessment UNDP Socio-Economic Impact Assessment of Covid-19 to Cultural Sector UNESCO Examining the likely short- and medium-term effects on employment and the labour market. ILO/EBRD Rapid assessment of COVID-19 impact on BiH diaspora remittances, investments and movements IOM Economic impact assessment of COVID-19 in the agri-food sector FAO Regional Rapid Gender Assessment of COVID-19 in BiH UN Women Mapping the impact of COVID-19 on the socio-economic situation of women at local level UN Women Budgets analysis - budget changes in response to COVID-19 UN Women	Assessment Description: Real time community voicing through Rapid Response Assessment (RARE) UNDP Rapid assessment of COVID-19 impact on communities where IOM implements prevention of violent extremism (PVE) activities IOM Online and Desk Analysis of the Social Cards of Refugees, Persons under Subsidiary Protection and Asylum Seekers Accommodated Privately UNHCR Regional Rapid Needs Assessment with local communities (ReLOaD) UNDP Assessment of the impact of the COVID-19 pandemic on Civil Protection Structures in BiH UNDP

ANNEX 7 - Data and vulnerability dashboards

Table 1. Bosnia and Herzegovina: Selected Economic Indicators, 2017–25

	2017	2018	2019	2020	2021	2022	2023	2024	2025
			Est.			Proj.			
Nominal GDP (KM million)	31,376	33,408	34,682	32,856	34,441	35,879	37,530	39,306	41,292
Gross national saving (in percent of GDP)	16.1	17.2	17.8	12.0	14.5	14.9	15.1	15.7	15.6
Gross investment (in percent of GDP)	20.4	20.9	21.4	19.5	20.1	20.2	20.3	20.3	20.2
				(Percent change)					
Real GDP	3.1	3.6	2.7	-5.0	3.5	2.8	2.9	2.9	3.0
GDP Deflator	1.8	2.8	1.1	-0.3	1.3	1.3	1.7	1.8	2.0
CPI (period average)	0.8	1.4	0.7	-0.6	1.4	1.5	1.7	1.8	2.0
Money and credit (end of period)									
Broad money	10.5	9.0	5.9	1.5	2.4	4.2	4.6	4.7	5.1
Credit to the private sector	7.3	5.6	6.4	-5.3	8.2	5.0	5.5	5.7	6.1
				(in percent of GDP)					
Operations of the general government									
Revenue	42.6	43.0	43.1	40.8	43.0	43.0	43.1	43.0	43.0
Of which: grants	0.7	0.6	0.6	0.4	0.4	0.4	0.4	0.4	0.4
Expenditure	40.8	41.3	40.8	45.2	42.1	42.1	42.0	41.8	41.9
Of which: investment expenditure	3.8	3.9	4.2	3.2	3.8	3.9	4.0	4.0	4.0
Net lending	1.8	1.7	2.2	-4.4	1.0	0.9	1.1	1.2	1.0
Net lending, excluding interest payment	2.6	2.4	2.9	-3.6	1.8	1.7	1.8	1.8	1.8
Total public debt	39.2	34.3	32.8	38.0	35.3	33.4	29.7	27.3	25.7
Domestic public debt 1/2/	13.3	9.8	9.5	11.2	9.7	8.6	7.9	6.3	5.5
External public debt	26.0	24.5	23.4	26.8	25.6	24.8	21.8	21.1	20.2
				(in millions of euros)					
Balance of payments									
Exports of goods and services	6,550	7,203	7,215	6,182	6,489	6,783	7,057	7,296	7,639
Imports of goods and services	9,151	9,764	9,944	8,947	9,368	9,791	10,187	10,528	11,044
Current transfers, net	1,962	1,978	2,126	1,545	1,924	2,035	2,097	2,272	2,357
Current account balance	-697	-633	-632	-1,256	-977	-970	-1,000	-919	-986
(In percent of GDP)	-4.3	-3.7	-3.6	-7.5	-5.5	-5.3	-5.2	-4.6	-4.7
Foreign direct investment (+ = inflow)	329.7	428.3	480.3	295.6	338.9	385.7	428.5	458.5	480.0
(In percent of GDP)	2.1	2.5	2.7	1.8	1.9	2.1	2.2	2.3	2.3
Gross official reserves	5,411	5,956	6,455	6,353	6,294	6,376	6,504	6,805	7,114
(In months of imports)	6.6	7.2	8.7	8.1	7.7	7.5	7.4	7.4	7.4
(In percent of monetary base)	112.2	112.0	113.5	112.7	116.5	115.1	111.7	111.9	111.3
External debt, percent of GDP 3/	72.0	64.5	65.4	72.4	69.5	67.6	63.3	61.3	59.1
Unemployment rate	20.5	18.4	15.7	--	--	--	--	--	--
GDP per capita (in euros)	4,574	4,875	5,064	4,802	5,043	5,265	5,522	5,799	6,108

Sources: BiH authorities; and IMF staff estimates and projections.

1/ On average, half of the domestic debt stock is indexed to the Euro.

2/ The stock of domestic public debt does not include wage arrears, including court decisions cases, which have been broadly estimated in the range of KM 450-500 million. It also does not include health sector liabilities and those of public enterprises

3/ Includes inter-company loans in private external debt.

Source: IMF, April 2020

HUMAN DEVELOPMENT DASHBOARD 1: PREPAREDNESS OF COUNTRIES TO RESPOND TO COVID-19

Level of preparedness:
High Medium Low



Note: For each indicator in the table, countries are divided into five groups of roughly equal sizes. The intention is not to suggest thresholds or target values for the indicators, but to allow a crude assessment of a country performance relative to others. For example, a country that is in the top quintile group in an indicator performs better than 80 percent of countries in this indicator. Similarly, a country in the medium group performs better than 40 percent of countries but also worse than 40 percent of countries.

Data source: download at http://hdr.undp.org/sites/default/files/preparedness_vulnerability_dashboards_12.xlsx

Human Development Groups	Human Development			Health system				Connectivity	
	Human development index (HDI) (value), 2018	Inequality-adjusted HDI (IHDI) (value), 2018	Inequality in HDI (percent), 2018	Physicians (per 10,000 people), 2010-17	Nurses and midwives (per 10,000 people), 2010-18	Hospital beds (per 10,000 people), 2010-18	Current health expenditure (% of GDP), 2016	Mobile phone subscription (per 100 people), 2017-18	Fixed broadband subscriptions (per 100 people), 2017-18
Very high human development	0.892	0.796	10.8	30.4	81	55	12.0	127.8	30.5
High human development	0.750	0.615	17.9	16.5	30	32	5.7	113.6	18.8
Medium human development	0.634	0.507	20.0	7.3	17	9	3.9	91.9	2.4
Low human development	0.507	0.349	31.1	2.1	8	6	4.5	67.5	0.4
Developing countries	0.686	0.547	20.3	11.5	23	21	5.3	99.2	10.2
Arab States	0.703	0.531	24.5	11.1	21	15	4.9	100.3	7.4
East Asia and the Pacific	0.741	0.618	16.6	14.8	22	35	4.8	117.6	21.3
Europe and Central Asia	0.779	0.689	11.5	24.9	61	51	5.2	107.3	14.6
Latin America and the Caribbean	0.759	0.589	22.4	21.6	47	20	8.0	103.6	12.8
South Asia	0.642	0.520	19.0	7.8	17	8	4.1	87.7	2.2
Sub-Saharan Africa	0.541	0.376	30.5	2.1	10	8	5.3	76.9	0.4
Least developed countries	0.528	0.377	28.6	2.5	6	7	4.2	70.9	1.4
Small Island developing states	0.723	0.549	24.0	22.2	28	25	5.9	80.5	6.4
Organisation for Economic Co-operation and Development	0.895	0.790	11.7	28.9	80	50	12.6	119.3	31.6
World	0.731	0.596	18.6	14.9	34	28	9.8	104	14
Bosnia and Herzegovina	0.769	0.658	14.4	20	63	35	9.2	104.1	20.9

HUMAN DEVELOPMENT DASHBOARD 2: VULNERABILITY TO PANDEMICS

Level of vulnerability:
Low Medium High



Note: For each indicator in the table, countries are divided into five groups of roughly equal sizes. The intention is not to suggest thresholds or target values for the indicators, but to allow a crude assessment of a country performance relative to others. For example, a country that is in the top quintile group in an indicator performs better than 80 percent of countries in this indicator. Similarly, a country in the medium group performs better than 40 percent of countries but also worse than 40 percent of countries.

Data source: download at http://hdr.undp.org/sites/default/files/preparedness_vulnerability_dashboards_12.xlsx

			Population living below income poverty line		Immediate economic vulnerability					
Human Development Groups	Population in multidimensional poverty (%), 2007-18	Population vulnerable to multidimensional poverty (%), 2007-18	PPP \$1.90 a day (%), 2010-18	National poverty line (%), 2010-18	Working poor at PPP\$3.20 a day (% of total employment), 2018	Social protection and labour programs (% of population without any), 2006-2016	Remittances, inflows (% of GDP), 2018	Net official development assistance received (% of GNI), 2017	Inbound tourism expenditure (percent of GDP), 2016-18	
Very high human development	-	-	0.6	-	-	31.3	0.3	-	2.3	
High human development	4.5	12.5	2.1	10.4	8.5	39.3	1.0	0.1	1.5	
Medium human development	29.4	18.4	17.7	23.0	40	31.9	4.1	0.8	1.4	
Low human development	62.3	16.2	45.1	44.0	68.4	86.1	4.6	4.7	1.7	
Developing countries	23.1	15.3	12.6	19.3	25.9	43.2	1.51	0.3	1.8	
Arab States	15.7	9.4	4.7	23.0	14.9	52.8	2.70	1.7	3.6	
East Asia and the Pacific	5.6	14.9	1.5	5.1	10.1	41.7	0.62	0.0	1.4	
Europe and Central Asia	1.1	3.6	-	11.5	9.2	42.6	2.75	0.7	4.2	
Latin America and the Caribbean	7.5	7.7	3.8	-	6.8	42.7	1.59	0.1	1.6	
South Asia	31.0	18.8	17.4	22.9	43	25.1	3.39	0.4	1	
Sub-Saharan Africa	57.5	17.2	43.5	43.0	63.1	79.4	2.89	2.8	2	
Least developed countries	59.0	17.8	36.7	38.1	59.7	84.5	4.57	4.9	2.4	
Small Island Developing States	22.7	13.1	-	-	17.7	75.6	6.89	1.5	8.3	
Organisation for Economic Co-operation and Development	-	-	0.7	-	-	36	0.33	-	2.1	
World	-	-	10.5	19.1	25	42.5	0.74	0.3	1.9	
Bosnia and Herzegovina	75	2.2	4.1	0.1	16.9	0.2	49.7	10.71	2.4	5.5