



The COVID-19 Challenge in Post-Soviet Breakaway Statelets

Crisis Group Europe Briefing N°89

Kyiv/Tbilisi/Moscow/Baku/Brussels, 7 May 2020

What's new? Isolated and scarred by war, six de facto statelets that claim independence from successor states to the Soviet Union are acutely vulnerable to the ravages of the COVID-19 pandemic.

Why does it matter? Immediate and long-term suffering will not only cost lives but could also harden divides between these entities and the states that claim them, posing further obstacles to eventual normalisation and peace.

What should be done? All parties and stakeholders should cooperate across front lines to ensure international humanitarian access, the only way to stave off suffering in the near and longer term.

I. Overview

While COVID-19 threatens people and economies around the world, it creates unique challenges for Abkhazia, South Ossetia, Nagorno-Karabakh, Transnistria and the portions of Ukraine's Donbas now controlled by Russian-backed separatists. All these entities declared independence from successor states of the Soviet Union; all are unrecognised by most states around the world; and all are deeply dependent on foreign patrons. Scarred by wars, some present and others long past, populations in these grey zones live in physical, economic and diplomatic isolation. But if closed crossing points and borders make it difficult for assistance to reach these areas, the virus appears to be spreading. To prevent humanitarian disaster, the de facto leaders of these statelets, their patron states, the countries from which they have sought to secede and the international community should cooperate in unprecedented ways to cease fighting where it continues and break the seclusion in which these people have come to exist. Doing so will enable aid, equipment and know-how to get through, at least for the duration of the health crisis.

To date, all six statelets have reported comparatively few COVID-19 infections, although these numbers probably reflect limited testing and tightly controlled information. While it remains to be seen whether, or for how long, the statelets dodge the brunt of the disease, to the extent that they do, it will not be the result of a disciplined response. They have been slow to take measures to prevent the virus' spread, despite the risks they face with ageing populations that are particularly vulnerable,

as well as outdated, often Soviet-era infrastructure and weak health systems. Their contested status complicates or blocks international aid. Moreover, traditional lifelines from foreign benefactors and diaspora communities are strained as many are contending with their own hardships.

Although the resulting suffering could harden the divide between these entities and the states that claim them, a coordinated and thoughtful response could have the opposite effect: help build bridges, save lives and mitigate longer-term dangers, laying the groundwork for engagement and greater understanding between warring parties that could one day help facilitate a more sustainable peace.

II. Donbas

The self-proclaimed People's Republics of Donetsk and Luhansk – in the midst of a war with Ukraine, unrecognised by any UN member state and dependent on Russia – had 272 confirmed cases of COVID-19, as of 4 May, and four deaths.¹ But with limited testing to date, the real numbers could be much higher. Hundreds of individuals not included in those statistics are under observation. Despite support voiced by both de facto and Ukrainian government authorities for UN Secretary-General António Guterres' ceasefire call, shooting and shelling continue along the line of contact, with thirteen Russian-backed fighters, four Ukrainian government troops and two civilians reported killed since his 23 March appeal.² Moreover, since 21 March, de facto authorities have denied entry to OSCE Special Monitoring Mission staff, whose role is to assess the situation in the conflict area.³

Prior to the war, the cities of Donetsk and Luhansk, capitals of the two regions, were well known in the area for the high quality of their medical services. But years of war and a dearth of funding have taken their toll, and any COVID-19 spread would stretch those depleted resources further. Even optimistic interlocutors in the de facto republics (hereafter, the statelets or “the de factos”) are concerned that they lack sufficient protective equipment for health care workers.⁴ Within the Donetsk statelet, shortages may be worst at the smaller hospitals of Anthracite, Debaltseve and Vuhlehirsk, which Pavlo Lysyansky, Ukraine's parliamentary human rights ombudsman for Donetsk and Luhansk oblasts, said lack even basic medicines.⁵ A Luhansk-based

¹ “По состоянию на 10:00 4 мая всего 128 зарегистрированных и подтвержденных случаев инфекции COVID-19 на территории Донецкой Народной Республики” [As of 10:00 AM 4 May there are 128 registered and confirmed cases of COVID-19 infection on the territory of the Donetsk People's Republic], official website of the de facto Health Ministry of the Donetsk People's Republic, 4 May 2020; “Медики зарегистрировали 144 случая заболевания COVID-19 – Минздрав” [Medical staff have registered 144 cases of COVID-19 illness – Health Ministry], Luganskiy Informatsionniy Tsentr, 4 May 2020.

² “У 2020 році на Донбасі загинули 45 військових: поіменний список” [45 troops have died in Donbas in 2020: list of names], 24 TV, 13 April 2020; Груз 200 [Cargo 200], online database; “On the increase of civilian casualties in the conflict zone of eastern Ukraine”, UN Ukraine, 11 April 2020.

³ See Daily and Spot Reports from the SMM Monitoring Mission in Ukraine, including Spot Report 9/2020.

⁴ Crisis Group telephone interviews, medical worker, April 2020; expert resident in area controlled by de facto regimes, April 2020.

⁵ Crisis Group telephone interview, April 2020.

researcher said contacts in the medical field complained that personal protective equipment was hard to find.⁶

That said, while some Ukrainian sources suggested that testing in the statelets was almost non-existent, medical workers in Donetsk said they had limited but functional testing facilities.⁷ Likewise, a Luhansk contact claimed that although the statelet lacked dedicated laboratory space, testing for coronavirus was possible.⁸

A large proportion of the local population could well be at high risk. Roughly 40 per cent of those living in the statelets are of pension age, many of them grappling with chronic illnesses and struggling to meet their medical and dietary needs on meagre fixed incomes.⁹ Insofar as general poor health correlates with worse outcomes for those infected with COVID-19 and the virus response will strain a health care infrastructure that is already heavily burdened and fragile, younger people are also in danger. Ukraine's overall rates of AIDS, drug-resistant tuberculosis and intravenous drug use are among the highest in Europe, with cases largely concentrated in the south-eastern regions of which the statelets are a part.¹⁰ Health workers say rates of HIV infection and progression to AIDS have increased since the war began, due in part to the de facto authorities' aversion to sex education and to harm reduction treatment for drug users.¹¹

Despite these concerns, de facto authorities were slow to adopt restrictive measures. As of early May, schools throughout the two statelets were closed, while cafes and restaurants throughout much of the territory remained open on a limited regimen.¹² Several cities are under strict quarantine, with residents needing permits to run errands. Those who have or are suspected of having pneumonia are told to self-isolate, as are all residents over the age of 65. In both entities, security personnel reportedly enforce self-isolation, but some complain that measures are overly lax.

Economic concerns are one reason for the relatively loose quarantine. Even prior to COVID-19, the coal mines and steel mills that were central to the region's economy had largely ceased production, and much of the working-age population had left for Russia, government-controlled Ukraine or EU states. Insofar as the entities' tax base now relies largely on small businesses, de facto authorities are extremely loath to close them.¹³ "Thank God, we've got food, but we are not implementing a lockdown like in Russia because our economy would collapse", a DNR source said. "We

⁶ Crisis Group telephone interview, dialogue practitioner, Centre for Humanitarian Dialogue, Kyiv, 10 April 2020.

⁷ Crisis Group telephone interviews, Pavlo Lysyansky, 10 April 2020; Vera Iastrebova, 10 April 2020; medical worker, 8 April 2020; medical worker, 9 April 2020.

⁸ Crisis Group telephone interview, dialogue practitioner, Centre for Humanitarian Dialogue, Kyiv, 10 April 2020.

⁹ "Ukraine 2020 Humanitarian Response Plan for the COVID-19 Pandemic", Reliefweb, March 2020.

¹⁰ See "HIV and AIDS in Ukraine", Avert, 1 October 2019; and "An inside look at Ukraine's terrifying TB outbreak", TB Online, 3 January 2018.

¹¹ Crisis Group correspondence, health worker, Donetsk oblast, November 2019.

¹² "Обращение главы ДНР Дениса Пушилина в связи с ситуацией с коронавирусом" [Address by DNR head Denis Pushilin regarding the coronavirus situation], official website of the Head of DNR, 27 March 2020.

¹³ Brian Milakovsky, "The Wartime Donbas Economy: Can It Be Saved?", Wilson Center, 9 March 2020.

have two-month reserves – if we implement quarantine, people will not have the means to live”.¹⁴

Among restrictive measures that have been imposed, those affecting movement in and out of government-controlled Ukraine may deal the heaviest economic blow. On 16 March, Kyiv mostly closed its side of the five crossings linking the de factos to government-held areas, which serviced roughly 550,000 people per month before the outbreak. The de factos reciprocated on 21 March.¹⁵ Kyiv shut its crossings fully the next day.¹⁶ This step immediately cut off an income source for residents who habitually cross the line to buy cheap yet higher-quality Ukrainian goods to sell at a profit at home. It also cut off many pensioners from their main source of income. Under current Ukrainian legislation, about half of the statelets’ elderly remain eligible for state pensions.¹⁷ As pension payments doled out by the de facto authorities courtesy of Russia are below what many frugal residents describe as subsistence levels, recipients need Ukrainian pensions to make ends meet.¹⁸ In the past, reduced access to Ukrainian pensions has correlated with more households unable to afford adequate and healthy food, medicine or both.¹⁹

The statelets also unilaterally closed their borders with Russia, despite their de facto leaders’ long-stated goal of uniting with it. On 27 March, the Donetsk People’s Republic barred non-residents from entry and began denying exit to Russia to anyone not permanently residing in that country, even to those holding a Russian passport (which many residents of the statelets do).²⁰ On 8 April, the Luhansk People’s Republic followed suit.²¹ Travel between the two statelets was stopped on 2-3 April. Both, in a likely effort to demonstrate their continuing long-term aspirations to integration with Russia, made exceptions for entry and exit of persons making day trips to Russia by bus to receive passports.²² But on 13 April, the de factos halted this program as well.²³

¹⁴ Crisis Group telephone interview, expert resident in DNR areas, 9 April 2020. A medical worker at the same location expressed similar sentiments. Crisis Group telephone interview, 8 April 2020.

¹⁵ “Ukraine 2020 Humanitarian Response Plan for the COVID-19 Pandemic”, Reliefweb, op. cit.

¹⁶ “За линией неизвестности. Что происходит во время пандемии в “Л/ДНР” и в оккупированном Крыму” [Beyond the line of the unknown: what’s happening in the LDNR and occupied Crimea during the pandemic], *Hromadske*, 26 March 2020.

¹⁷ See Nikolaus von Twickel, “The State of the Donbass: A Study of Eastern Ukraine’s Separatist-held Areas”, 3 DCFTAs, 1 March 2019, p. 27.

¹⁸ Crisis Group interviews, including pensioners from LNR-controlled areas, Sievierodonetsk, February 2020; residents of Donetsk city, Svyatohirsk, November 2019.

¹⁹ Ukraine Food Security and Livelihoods Cluster, Joint Food Security Assessment, September 2017.

²⁰ “Сотрудники миграционной службы МВД ДНР отвечают на вопросы граждан” [Members of the migration services of the DNR Interior Ministry answer citizens’ questions], video, YouTube, 7 April 2020; “Донецк и Луганск во время пандемии: живой блог” [Donetsk and Luhansk during the pandemic: live blog], Radio Svoboda, 10 April 2020.

²¹ “Указ Главы Луганской Народной Республики об упорядочении действия об указе Главы Луганской Народной Республики от 13.03.20 No УТ 160/20 ‘О введении режима повышенной готовности’” [Decree of the Head of the Luhansk People’s Republic on implementation of the order of the Luhansk People’s Republic from 13.03.20 No 160/20 “On implementation of enhanced preparation regime”], 13 March 2020.

²² See de facto decrees cited in footnotes 22 and 23.

²³ “Власти ДНР временно приостановили выезд граждан в РФ для получения российских паспортов” [DNR authorities temporarily prevent citizens from leaving to RF to receive passports],

Russia, thus far, has taken a restrained if not minimalist approach to aiding the *de factos*' response to the epidemic, stirring resentment among the residents. "There have been shouts and scandals", Lysyansky, the Ukrainian human rights ombudsman, said, citing what he said were numerous conversations with politically connected sources in his home region, now under Luhansk People's Republic control. "[The Luhansk *de facto* leaders] turned against Ukraine and risked their own health and freedom – and in return, Russia cannot even deliver masks". Although Russian officials and policy advisers insist that their country is sending ventilators, protective equipment and test kits, medical professionals in Donetsk acknowledged receiving the test kits alone.²⁴ As Moscow struggles with the epidemic within its own borders, that fight is, for now, its overwhelming priority; but, Russian policymakers claim, aid likely would increase if the situation in the *de factos* grew more dire.²⁵

Other outside actors have sent aid. The UN coordinated a humanitarian convoy carrying World Health Organisation (WHO) medical and hygiene supplies from a Czech NGO, People in Need, to Donetsk city.²⁶ The International Committee of the Red Cross (ICRC) later delivered medical supplies by foot, over the Stanytsia bridge, to Luhansk People's Republic territory as the latter lacks functioning road links with mainland Ukraine and is now also cut off from the Donetsk self-proclaimed republic.²⁷ Moreover, Ukrainian and *de facto* representatives are reportedly discussing opening a disused motor bridge near the front-line town of Shchastya to allow smoother aid shipments across into Luhansk People's Republic territory.²⁸

Moscow and the *de facto* authorities that it supports, along with Kyiv and international humanitarian organisations, should explore additional steps to tackle the financial stress caused by the pandemic. For example, the ICRC and OSCE have previously offered to deliver Ukrainian pension payments to residents of the *de factos*; in 2018, the ICRC reportedly had such a mechanism essentially ready, and would have enacted it, if not for Kyiv's resistance.²⁹ If Kyiv were to agree now, the *de factos* would in turn need to overcome their past reluctance to provide free and safe access to the ICRC.

DAN, 10 April 2020; Министерство Внутренних Дел Луганской Народной Республики, "Временно приостанавливается перевозка жителей ЛНР к пунктам получения паспортов Российской Федерации" [Transport of residents to centres for receipt of passports of the Russian Federation to be temporarily halted], 10 April 2020.

²⁴ Crisis Group telephone interviews, medical worker, 8 April 2020; expert residents in DNR-controlled area, 8 April 2020.

²⁵ Crisis Group telephone interviews, informal Kremlin adviser and Russian legislative aide, 8 April 2020. The informal adviser added that, once the situation in Russia was under control, it "won't be hard to apply the same methods to the unrecognised republics".

²⁶ Crisis Group telephone interview, humanitarian worker, 9 April 2020.

²⁷ Crisis Group email correspondence, humanitarian worker, 17 April 2020.

²⁸ Crisis Group telephone interviews, humanitarian workers, 9 April 2020.

²⁹ Crisis Group correspondence, international aid worker, October 2018.

III. Nagorno-Karabakh

Nagorno-Karabakh, a self-proclaimed entity on territory internationally recognised as part of Azerbaijan, but whose economy, society and polity are deeply tied to Armenia, had eight confirmed COVID-19 cases as of 4 May. Meanwhile, flareups between Armenian and Azerbaijani forces along the line of contact continue. Since mid-March, the OSCE Minsk Group, through which France, Russia, and the U.S. seek to mediate the conflict, has twice called on the sides to recommit to the ceasefire for the duration of the health crisis.³⁰ Since then, however, Yerevan and Stepanakert (the seat of the de facto entity) report that three Armenian soldiers and one teenage civilian have been injured by Azerbaijani forces.

Years of conflict have eroded Nagorno-Karabakh's medical infrastructure. While Armenia and some ethnic Armenian diaspora organisations have provided basic medical supplies, medical staff often lack know-how.³¹ The knowledge gap exists in part because Nagorno-Karabakh's unrecognised status precludes citizens from travelling abroad for training and professional conferences. The situation is particularly dire outside of Stepanakert, where even basic equipment and emergency vehicles are outdated and in short supply.³² Moreover, although Yerevan has provided COVID-19 test kits, the local laboratory is unable to assess the results, so samples must travel to Armenia.³³

Beyond sealing crossings into Armenia in late March, the region adopted few preventative measures and went ahead with its presidential and parliamentary elections on 31 March and a runoff on 14 April. Ignoring widespread calls from civil society activists and local doctors to postpone the polls, some candidates held large rallies in stadiums and town squares. Turnout was high, and only a few wore masks or gloves while standing in long, closely packed lines to vote.³⁴ Only after polling stations were closed on 14 April did real movement restrictions go into effect.³⁵ Late that month,

³⁰ "Press Statement by the Co-Chairs of the OSCE Minsk Group", OSCE, 19 March 2020; "Joint Statement by the Foreign Ministers of Armenia and Azerbaijan and the Co-Chairs of the OSCE Minsk Group", OSCE, 21 April 2020.

³¹ Crisis Group telephone interview, foreign diplomat, 6 April 2020. Also see "ARS delivers medical supplies to Artsakh for COVID-19 relief", *Asbarez*, 31 March 2020.

³² Crisis Group telephone interview and email correspondence, foreign diplomats, April 2020.

³³ Crisis Group telephone interviews, de facto official in Nagorno-Karabakh, foreign diplomat, 3 April 2020.

³⁴ Crisis Group telephone interviews, Stepanakert residents, March-April 2020. See videos of meetings of one of the candidates in late March. See also "Врачи Нагорного Карабаха призвали власти ввести ЧП из-за коронавируса" [Doctors of Nagorno-Karabakh called on authorities to introduce a state of emergency in face of coronavirus], *Kavkazsky Uzel*, 11 April 2020. More than 23,000 people living in the de facto Nagorno-Karabakh entity are over the age of 60, according to the local statistics department. See the more precise number at "ԱՐՅԱԽԻ ՀԱՆՐԱՊԵՏՈՒԹՅԱՆ ԲՆԱԿՉՈՒԹՅՈՒՆԸ" [Population of the Republic of Artsakh], official website of the National Statistical Service of the Republic of Artsakh, 2019, p. 12.

³⁵ "Արցախում տեղաշարժի ժամանակավոր սահմանափակումները տարածվում են Քաշաթաղի, Մարտակերտի և Շահումյանի շրջանների որոշ բնակավայրերի վրա" [Temporary restrictions on movement in Artsakh apply to some settlements in Kashatagh, Martakert and Shahumyan regions], *Artsakh Press*, 14 April 2020.

the local authorities established three checkpoints to restrict vehicular movement inside Nagorno-Karabakh.³⁶

As of now, the ICRC is the only international organisation providing support to the region. It is distributing cash grants to the elderly, tablets to local youth for on-line education, and masks, gloves, gowns and sanitisers to local hospitals, orphanages and detention centres, as well as the region's lone nursing home.³⁷ Working with local health care workers, it has begun a needs assessment for hospitals throughout the territory.³⁸ But "the ICRC is not the WHO", as a foreign diplomat put it. "It does not have the capacity to replace those who are specialists and know how to face a pandemic".³⁹ In addition, the ICRC's geographical reach is limited; it can operate only in the territory demarcated by the Soviet-era boundaries of the Nagorno-Karabakh Autonomous Oblast. It has no access to settlements in the adjacent territories, home to almost 17,000 people and where the region's first seven COVID-19 cases were identified.⁴⁰

Stepanakert is relying on continuing assistance from Yerevan, but it is keen to receive more international support.⁴¹ Armenia itself faces one of the worst infection rates among post-Soviet countries and already had to transform its largest concert hall into a COVID-19 ward.⁴² Because Nagorno-Karabakh is considered Azerbaijani territory under international law, international organisations require Baku's permission to operate there. Without Azerbaijan's sanction, no UN agency, including the WHO, has access to the entity. Nor can foreign donors offer funds absent, in the words of one diplomat, "a clear political signal from the [OSCE Minsk Group] co-chairs and the consent of Armenia and Azerbaijan".⁴³

³⁶ "В Мартакерте размещены четыре пропускных пункта" [Four crossing posts established in Martakert], *Armen Press*, 20 April 2020.

³⁷ Crisis Group telephone interview and email correspondence, foreign diplomats, April 2020; "ԿԻՄԿ-ն աջակցություն է տրամադրել Արցախում ապրող միայնակ 432 տարեցների" [The ICRC provided assistance to 432 elderly people living alone in Artsakh], *Artsakh Press*, 10 April 2020.

³⁸ Crisis Group telephone interview, foreign diplomat, 6 April 2020.

³⁹ Crisis Group telephone interview, foreign diplomat, 6 April 2020.

⁴⁰ Armenian settlements are situated in towns and villages previously populated by ethnic Azerbaijanis, who were forced to flee these areas during the 1992-1994 war in Nagorno-Karabakh. Most settlers are themselves displaced Armenians, having fled their homes in other Azerbaijani regions. The de facto authorities govern the settlements, which contribute significantly to the breakaway region's economy, mostly through booming agriculture. According to international law, the settlements are illegal, which prevents international humanitarian organisations from working in these areas. For more on settlements in the region, see Crisis Group Europe Report N°255, *Digging out of Deadlock in Nagorno-Karabakh*, 20 December 2019, pp. 4-11. For information about COVID-19 cases in the settlements in Lachin and Kelbajar districts, see Ani Paitjan, "First Case of Coronavirus Confirmed in Nagorno Karabakh", *Civilnet*, 7 April 2020; "Երեկ թեստավորված 9 քաղաքացիներից մեկի մոտ հաստատվել է կորոնավիրուսի վարակ" [One of nine tested positive for coronavirus yesterday], *Artsakh Press*, 12 April 2020.

⁴¹ Crisis Group telephone interviews and email correspondence, de facto officials in Nagorno-Karabakh, April 2020.

⁴² According to Yerevan, as of 4 May, Armenia, whose population numbers approximately three million, has had more than 2,500 confirmed COVID-19 cases and 39 deaths. Also see Ruzanna Stepanian and Narine Ghalechian, "More Armenian hospitals to treat coronavirus", RFERL Armenian, 2 April 2020.

⁴³ Crisis Group telephone interview, foreign diplomat, 7 April 2020.

That said, the co-chairs support the idea. Since the beginning of April, they have spoken frequently with officials in Yerevan and Baku about COVID-19 response plans for Nagorno-Karabakh. Russian Foreign Minister Sergei Lavrov telephoned his counterpart in Baku twice to discuss the issue.⁴⁴ This quiet diplomacy culminated in a 21 April online meeting among the co-chairs and the Armenian and Azerbaijani foreign ministers. The group released a statement affirming all parties' readiness to organise support for the entity "without regard to political boundaries" and with the hope that doing so "will bring a creative and constructive impetus to the peace process".⁴⁵ Although promising, this commitment has yet to turn into concrete action.

In the meantime, diplomats have developed several ideas focused on delivering aid. One option is to deliver it via Armenian authorities, though Baku would have to approve such an arrangement, and has yet to do so. The same would be true of anything done directly through the de facto authorities.⁴⁶ As an alternative, a diplomat offered to arrange a telephone connection between the WHO and Stepanakert to track the situation and potentially provide online training for health care workers.⁴⁷

Help will be needed, and not just in the short term. For the moment, the de facto leadership seems confident that it can fend off economic hardship. The region has a strong agricultural sector, and in early April, de facto authorities expanded their support programs to farmers.⁴⁸ But the future might not be so forgiving: Armenia provides almost half of the region's funding, meaning that privation there would quickly spill over.⁴⁹

IV. Transnistria

Transnistria, a territory internationally recognised as part of Moldova but that claims independence, with a de facto government based in Tiraspol, has the largest number of confirmed COVID-19 cases (531) among the statelets, with 23 fatalities as of 3 May.⁵⁰ Between 20-26 April, an average of fourteen new cases was being registered daily, down from twenty the week previous.⁵¹ The following week, 27 April-3 May,

⁴⁴ See press releases on Foreign Minister Sergey Lavrov's telephone conversations with Foreign Minister of Azerbaijan Elmar Mammadyarov, published on the official website of the Ministry of Foreign Affairs of the Russian Federation on 10 April and 13 April 2020.

⁴⁵ "Joint Statement by the Foreign Ministers of Armenia and Azerbaijan and the Co-Chairs of the OSCE Minsk Group", OSCE, 21 April 2020.

⁴⁶ Crisis Group telephone interview, foreign diplomat, 7 April 2020.

⁴⁷ Crisis Group telephone interview, foreign diplomat, 7 April 2020.

⁴⁸ "Արցախը գյուղմթերքների խնդիր չի ունենալու" [Artsakh will not have problems with agricultural products], official website of Ministry of Agriculture of the Republic of Artsakh, 9 April 2020.

⁴⁹ For more on Armenia's assistance to the de facto entity of Nagorno-Karabakh, see Crisis Group Report, *Digging out of Deadlock in Nagorno-Karabakh*, op. cit., pp. 35-36.

⁵⁰ "Ситуация с коронавирусом COVID-19 в Приднестровье" [Situation with the coronavirus COVID-19 in Transnistria], *Novosti Pridniestrovia*, 3 May 2020.

⁵¹ "В Приднестровье COVID-19 уже подтверждён у 390 человек" [In Transnistria the COVID-19 has been confirmed in 390 people], *Novosti Pridniestrovia*, 26 April 2020; "43 из 63 проб приднестровцев на COVID-19 оказались отрицательными" [43 of 63 Transnistrian samples on COVID-19 turned out to be negative], *Novosti Pridniestrovia*, 20 April 2020.

the average per day was seventeen.⁵² Unlike other breakaway regions, Transnistria has deep socio-economic ties with government-controlled Moldova and people and goods move fairly freely between the two. While Russian forces remain based in Transnistria, the region also enjoys tariff-free trade with the EU by virtue of Moldova's Association Agreement.

A more serious outbreak in Transnistria would be hard to manage. Its health care system is weak, with a limited number of qualified staff as well as outdated, typically Soviet-era infrastructure and equipment.⁵³ Like many of the other statelets, Transnistria's population is disproportionately elderly and thus at higher risk of contracting the illness.⁵⁴

Despite Tiraspol's close socio-economic ties with the Moldovan capital Chisinau, the day after declaring a state of emergency on 16 March, it unilaterally closed crossings and opened new checkpoints within Transnistria, imposing a fourteen-day quarantine upon locals returning from Moldova.⁵⁵ The measure has affected thousands who travel, often daily, to areas controlled by Chisinau. These include almost 100 medical professionals now unable to reach their jobs in neighbouring Moldovan villages.⁵⁶ Tiraspol promised to offer them local jobs, but how it might do so is unclear.⁵⁷ After they registered the first coronavirus case on 21 March, de facto authorities adopted stricter quarantine measures, completely shutting down public transport and shops, excluding only grocery stores.⁵⁸

Tiraspol and Chisinau are cooperating in some areas. Moldovan laboratories have been testing samples delivered from Transnistria for COVID-19. Still, Moldovan capacity is insufficient to meet Tiraspol's increasing need for tests. In response, Chisinau has trained seven specialists in the breakaway region. It also helped set up a testing laboratory there; on 21 April, Tiraspol reported that the facility was up and running, albeit only able to conduct some 60 tests per day.⁵⁹ Moreover, Moldova's health minister, Viorica Dumbraveanu, called on Transnistrian colleagues to transfer

⁵² “Количество заболевших коронавирусом в ПМП увеличилось на 10 человек” [The number of patients with coronavirus in PMR increased by 10 people], *Novosti Pridniestrovia*, 27 April 2020; “В Приднестровье 2 новых случая COVID-19” [Two new cases of COVID-19 in Transnistria], *Novosti Pridniestrovia*, 3 May 2020.

⁵³ Crisis Group email correspondence, former Transnistrian political representative in the settlement process, 9 April 2020. See also “Состояние отечественной медицины. Большое интервью с министром здравоохранения Алексеем Цурканом” [The state of domestic medicine: major interview with Minister of Health Alexei Tsurkan], *Novosti Pridniestrovia*, 21 June 2019.

⁵⁴ Vladimir Fomenko, “Extended Migration Profile of Transnistria”, International Organization for Migration, December 2017.

⁵⁵ Crisis Group telephone interview and email correspondence, foreign diplomat, April 2020.

⁵⁶ Crisis Group telephone interviews, former official in Moldova, foreign diplomat, April 2020.

⁵⁷ “Тирасполь игнорирует угрозу коронавируса”. Молдова созывает экстренное заседание в формате «5+2» [“Tiraspol ignores the threat of coronavirus”: Moldova is convening an emergency meeting in the “5 + 2” format”], *NewsMaker*, 10 April 2020.

⁵⁸ “Хроника коронавируса COVID-19 в Приднестровье” [Chronicle of the coronavirus COVID-19 in Transnistria], *Novosti Pridniestrovia*, 22 April 2020.

⁵⁹ *Ibid.*; Crisis Group email correspondence, former senior de facto Transnistrian diplomat, 9 April 2020. On the new facility's testing capacity, see “Chronicle of the coronavirus COVID-19 in Transnistria”, *op. cit.*

seriously ill patients to Moldovan medical facilities, although to date only a single patient from Transnistria reportedly has been hospitalised in Chisinau.⁶⁰

That said, relations soured as the crisis worsened. The parties have begun trading barbs. Moldovan authorities say they worry that Tiraspol will not share its testing data in order to hide the extent of the virus' spread, limiting the ability of Chisinau and international organisations to provide appropriate relief.⁶¹ Transnistrian de facto authorities, for their part, claim that Chisinau is delaying the provision of critical supplies and accuse it of using the crisis to push its reintegration agenda.⁶² De facto Foreign Minister Vitaly Ignatiev complained to Moscow that Chisinau was pressuring Tiraspol economically and politically.⁶³ Although Tiraspol-based media emphasise Russian aid provided directly to Transnistria, in reality all international aid to the statelet must come through Moldova. As a result, diplomats had no answer when Tiraspol called for the direct delivery of aid from other states, as well. As one put it, "For years, we delivered support to Transnistria through Chisinau. This has been a long-time practice, and we cannot change it overnight".⁶⁴

In turn, Chisinau blames any hindrance on restrictions put in place by Tiraspol, arguing that for its part it had simplified procedures to facilitate movement of goods, including medical supplies.⁶⁵ "We are seeing an extreme politicisation of even the smallest detail and decision", a Chisinau-based foreign diplomat said. "The most important thing now is to depoliticise medical issues".⁶⁶ Some support has indeed gotten through: of 15,000 test kits Russia provided to Moldova, five thousand were allocated to Transnistria.⁶⁷ France likewise has sent testing equipment and China a variety of medical supplies via Moldova intended for Tiraspol.⁶⁸

In other ways, too, tensions have flared. Moldova's top official dealing with Transnistria, Vice Prime Minister for Integration Cristina Lesnic, told reporters that the breakaway region had ignored her calls to bring WHO representatives together with doctors from both sides to combat COVID-19's spread.⁶⁹ She likewise said Tiraspol had not replied to her proposal to convene the Expert Working Group on Healthcare Issues, one of thirteen Working Groups set up as part of the Transnistrian settlement

⁶⁰ "Больных коронавирусом приднестровцев предлагают лечить в Кишиневе" [Transnistrians are offered to treat patients with coronavirus in Chisinau], *EADaily*, 2 April 2020; "Приднестровские медики ожидают результаты 22 биопроб" [Transnistrian doctors expect results of 22 biosamples], *Novosti Pridniestrovia*, 2 April 2020.

⁶¹ Crisis Group telephone interviews, former official in Moldova, foreign diplomat, April 2020.

⁶² "Пандемия цинизма или принуждение к «реинтеграции»" [Pandemic of cynicism or coercion to "reintegrate"], *Novosti Pridniestrovia*, 2 April 2020.

⁶³ "Приднестровье пожаловалось России на давление Кишинева" [Transnistria complains to Russia about Chisinau pressure], *EADaily*, 22 April 2020.

⁶⁴ Crisis Group telephone interview, foreign diplomat, 14 April 2020.

⁶⁵ Crisis Group telephone interview and email correspondence, foreign diplomats, April 2020.

⁶⁶ Crisis Group telephone interview, foreign diplomat, 14 April 2020.

⁶⁷ One foreign diplomat suggested that the de facto authorities were unable to use the Russian tests because of either lack of local expertise or invalid tests. Accordingly, all samples are sent to Chisinau. Crisis Group telephone interview, foreign diplomat, 14 April 2020.

⁶⁸ Crisis Group telephone interview and email correspondence, foreign diplomat, April 2020.

⁶⁹ "В Кишиневе не верят, что власти Приднестровья контролируют ситуацию с коронавирусом" [Chisinau does not believe that Transnistrian authorities control the situation with coronavirus], *Interfax-Ukraine*, 22 April 2020.

process. This group, which also brings international organisations to the table, last met on 6 March, with WHO participation. Lesnic appealed to the OSCE, which has also sought to facilitate a Working Group teleconference, thus far to no avail.

Lesnic has also urged a 5+2 format meeting, bringing together representatives from Moldova, Transnistria, the OSCE, the EU, Ukraine, Russia and the U.S. to discuss the spread of COVID-19 in Transnistria – a suggestion the de facto foreign minister rebuffed. Tiraspol also asked the WHO to send a mission to Transnistria to assess its COVID-19 response to date, saying Chisinau might otherwise mislead the agency.⁷⁰ At the time of writing, WHO and OSCE representatives planned to visit Transnistria in the first week of May.⁷¹

In the longer term, Transnistria's economy will be vulnerable to the effects of a lengthy shutdown. GDP is expected to fall by 16 per cent in 2020, according to the de facto government.⁷² Still, Transnistria's exports of electricity, metals and food products are at risk.⁷³ The last prospect may be particularly worrying given that drought had already shrunk the region's winter harvest by some 40 per cent.⁷⁴ The region also relies on remittances from residents working around the world, which are likely to shrink.⁷⁵

There are some potentially mitigating factors. Few residents are employed in the hardest-hit service sector; instead, many rely on pensions and public-sector jobs. Transnistria also retains the proceeds of Russian-supplied energy resources: Russia bills Moldova for natural gas provided to the statelet (Moldova does not pay these bills). Meanwhile, energy payments from end users go into Transnistria's coffers.⁷⁶ Combined, these factors may provide some cushion.

⁷⁰ The foreign minister, Ignatiev, said "there are no organisational prerequisites for [a 5+2 format] meeting" at this time, adding that Transnistria is ready to continue work in the 5+2 format after the COVID-19 situation improves. "«Запредельный цинизм», «примитивные спекуляции», «инъекции политической лжи» – МИД ПМР охарактеризовал заявления политпредставителя РМ" ["Outrageous cynicism", "primitive speculations", "injections of political lies" – the PMR MFA characterised the statements of the political representative of the RM], *Novosti Pridniestrovia*, 23 April 2020. PMR refers to Transnistria (Pridnestrovian Moldovan Republic) and RM refers to the Republic of Moldova.

⁷¹ Crisis Group email correspondence, foreign diplomat, 29 April 2020.

⁷² "В Приднестровье ждут падения ВВП на 16% в 2020 году из-за эпидемии и засухи" [Transnistria expects GDP to fall by 16 per cent in 2020 due to epidemic and drought], *Regnum*, 29 April 2020.

⁷³ *Ibid.*

⁷⁴ "Приднестровье потеряло 40% урожая" [Transnistria lost 40 per cent of harvest], TSV, 30 April 2020.

⁷⁵ Fomenko, "Extended Migration Profile of Transnistria", op. cit. Partial data can be found on the website of the Bank of the Transnistrian Republic. The March 2020 data does not show a drop compared to March 2019. Bank of the Transnistrian Republic, "Информация об основных странах-контрагентах по денежным переводам физических лиц посредством электронных систем без открытия банковского счёта (март 2020 г.)" [Information about electronic financial transfers with principal counterparty countries not involving the opening of a bank account], March 2020.

⁷⁶ Crisis Group telephone interview, head of Southern Region Research Sector, Center for Regional Studies, National Institute for Strategic Studies, Odessa, 15 March 2020. See also Hannah Lucinda Smith, "The cryptocurrency boom on the post-Soviet frontier", *Wired*, 29 October 2019; Brian Milakovsky, "Trade or Blockade? Economic Relations with Uncontrolled Territories in Moldova and Ukraine", Kennan Cable no. 48 (Wilson Center), March 2020.

Transnistrian and Moldovan officials ought to continue their direct medical cooperation, which has already borne fruit, while abstaining from political posturing that risks undermining cooperative response efforts. To ensure effective coordination, they should support regular meetings of the Expert Working Group on Healthcare Issues. Continuing dialogue and transparency can not only prevent further tension, but also save lives.

V. South Ossetia and Abkhazia

Georgia's breakaway regions of South Ossetia and Abkhazia, which were recognised by Russia after the 2008 Russia-Georgia war, have responded differently to the pandemic. Early in the crisis, several senior Georgian officials called on the WHO and other international organisations to provide support to people living in the two breakaways. Tbilisi said it would not block movement to and from the regions, with which it has not been engaged in open fighting since 2008.⁷⁷

In South Ossetia, where as of 6 May three cases have been reported so far, authorities prohibited movement from or to government-controlled Georgia in February 2020, arguing that this step was necessary to prevent the virus from spreading.⁷⁸ By contrast, Abkhazia, where three COVID-19 cases have been registered, has taken Tbilisi up on its promise to work together.⁷⁹ Although regular traffic has ceased across two crossing points between Georgia and this breakaway region, to date eleven people have been allowed to leave Abkhazia to visit Georgian hospitals. One of them later tested positive for COVID-19.⁸⁰

South Ossetia has been reluctant to work with the WHO and other international organisations. Because these organisations deal with the Georgian government, the de facto leadership sees collaboration with them as undermining their own demand for international recognition of the region's independent status. Abkhazia has taken a different approach, viewing its claims to independence as a separate matter from cooperation with international organisations. It has successfully worked with such groups in the past and mobilised foreign aid in recent months, as discussed below.

⁷⁷ Ana Dumbadze, "Georgian president thanks WHO for assisting population in Abkhazia", *Georgia Today*, 20 March 2020; "Georgia ready to treat residents of Abkhazia if coronavirus appears", *JAM News*, 29 March 2020.

⁷⁸ "Югоосетинские власти сообщили о первом подтверждённом случае коронавируса" [South Ossetian authorities informed about the first confirmed coronavirus case], RFERL Russian-language program Ekho Kavkaza, 6 May 2020; "Комментарий Министра иностранных дел Республики Южная Осетия Д. Медоева" [Comment by the Foreign Minister of the Republic of South Ossetia D. Medoyev], official website of the Ministry of Foreign Affairs of the Republic of South Ossetia, 2 April 2020.

⁷⁹ "В Абхазии подтверждён первый случай заражения COVID 19" [First COVID-19 case confirmed in Abkhazia], *Abkhazia-Inform*, 7 April 2020.

⁸⁰ "Woman transferred from Russian-occupied Abkhazia region tests positive for coronavirus", *Agenda.ge*, 31 March 2020; Crisis Group telephone interview, de facto official in Abkhazia, April 2020. This person is not included in the count of positive cases in Abkhazia provided above.

Of the self-proclaimed states reviewed here, South Ossetia arguably is at greatest risk. As elsewhere, a significant part of the population (17 per cent) is elderly.⁸¹ Hospitals are severely under-equipped. One of the few doctors in the region refused to work due to lack of basic protective gear at the hospital.⁸² Russia, which provides a majority of the region's needs, stopped most exports of medical supplies in early March.⁸³ A local official said disinfectant was in short supply, and de facto authorities have asked local clothing makers to sew masks and protective gowns for medics.⁸⁴ Moreover, many of the region's medical professionals have had no training for years, lacking even the know-how to operate 26 ventilators delivered from Russia.⁸⁵ "We don't dare to even go for blood tests with the local doctors", a resident said.⁸⁶

The Russian military base in the region swiftly imposed strict rules, including nighttime curfews, to protect personnel. Russian soldiers now don masks and gloves.⁸⁷ Elsewhere in South Ossetia, the response has been slow. De facto authorities allowed a youth wrestling tournament to go forward on 22-25 March.⁸⁸ On 25 March, the de facto president delivered a state address attended by hundreds of local officials.⁸⁹ Schools and universities remained open later than anywhere else in the South Caucasus.

The ICRC is the only international organisation operating in South Ossetia. It has provided supplies to the local jail and plans to deliver food to elderly residents, including in remote villages.⁹⁰ While the organisation says it is prepared to step up operations, it lacks medical staff on the ground to assess local health needs.⁹¹ When the WHO sought to send an assessment team to the region in mid-March, de facto authorities refused to admit the specialists unless they entered through Russia ra-

⁸¹ In 2019, the de facto authorities paid pensions to 4,540 people; see "Аза Тасоева о росте количества пенсионеров и бюджете Фонда на 2020 год" [Aza Tasoeva about growth in the numbers of pensioners and increase in the 2020 budget of the Fund], RES, 14 November 2019. Russia provides pensions to around 504 people; see "Численность получателей российских пенсий, проживающих за границей" [Numbers of recipients of the Russian pension living abroad], official website of the Pension Fund of the Russian Federation.

⁸² Crisis Group telephone interviews, residents of Tskhinvali in South Ossetia, April 2020. In addition, see this Instagram post with a photo of the letter from the doctor explaining why he refused to go to work.

⁸³ In early March Russia's government banned exports of all medical supplies to foreign countries, excepting specific foreign aid shipments purchases by individuals. See "Russian government restricts exports of face masks, other medical goods till June 1", TASS, 4 March 2020.

⁸⁴ Crisis Group telephone interview, de facto official in South Ossetia, 6 April 2020.

⁸⁵ Ventilators are not affected by the ban noted above. "Врач цхинвальской больницы рассказал, сколько на самом деле в Южной Осетии ИВЛ" [Doctor of Tskhinvali hospital told how many ventilators South Ossetia has], Sputnik-Ossetia, 3 April 2020.

⁸⁶ Crisis Group telephone interview, resident of Tskhinvali in South Ossetia, 4 April 2020.

⁸⁷ Crisis Group telephone interview, resident of Tskhinvali in South Ossetia, 4 April 2020.

⁸⁸ "В Южной Осетии стартовало первенство по вольной борьбе памяти братьев Тедеевых" [Wrestling championship in the name of Tedeev brothers started in South Ossetia], RES, 21 March 2020.

⁸⁹ "Послание президента РЮО Анатолия Бибилова" [Address by President of the Republic of South Ossetia Anatoly Bibilov], RES, 25 March 2020.

⁹⁰ Crisis Group telephone interview, foreign diplomat, April 2020. "Красный Крест оказал гуманитарную помощь заключенным в Южной Осетии" [Red Cross provided humanitarian aid to detainees in South Ossetia], Sputnik-Ossetia, 1 April 2020.

⁹¹ Crisis Group telephone interview, foreign diplomat, 6 April 2020.

ther than Georgia.⁹² Tskhinvali has since shut its border with Russia, but how WHO staff enter the breakaway region remains a sticking point. De facto authorities worry that cooperation with officials arriving from government-controlled Georgia would undermine their claim to independence.⁹³ For now, de facto officials say they can cover local salaries and pensions, but these depend almost entirely on support from Russia, which faces its own considerable domestic demands.⁹⁴

Given the scope of the crisis, the de facto authorities are taking a serious risk by issuing political demands and impeding active cooperation with the WHO and other UN agencies. If they cannot find an acceptable compromise on travel for WHO specialists, at a minimum they should communicate with them online or by telephone to provide the information necessary to support local efforts at preventing the spread of the virus and organising medical supply deliveries.

The situation in Abkhazia is better, although it still presents vulnerabilities. Like South Ossetia, Abkhazia suffers from weak infrastructure, lacks medical professionals and has an ageing population, with nearly 20 per cent of residents over 60 years of age.⁹⁵ Indeed, nearly 80 per cent of medical personnel are themselves at high risk, in their sixties or older.⁹⁶ “If they get sick, the region will lose all its doctors within days”, said a foreign diplomat who regularly travels to Abkhazia.⁹⁷

The de facto authorities were slow to impose social distancing. As in Nagorno-Karabakh, the COVID-19 crisis coincided with elections for a new de facto president and, here as well, there was little evidence of masks or other preventive measures at campaign rallies or on election day.⁹⁸ Not until the vote was over did local authorities introduce a state of emergency.⁹⁹ At that point, however, health care workers flanked by police began taking commuters’ temperature.¹⁰⁰ Most shops remained closed and police vehicles mounted with loudspeakers called on residents to stay home.¹⁰¹ Local officials said their greatest challenge was discouraging locals from holding large funerals.¹⁰² After almost a month of curfew, the de facto authorities started easing movement restrictions and allowed reopening of markets in major towns as of 20 April.¹⁰³

⁹² Crisis Group telephone interview, de facto official in South Ossetia, 6 April 2020.

⁹³ Crisis Group telephone interview and email exchange, de facto official in Tskhinvali and foreign diplomats, April 2020.

⁹⁴ Crisis Group Europe Report N°249, *Abkhazia and South Ossetia: Time to Talk Trade*, 24 May 2018, p. 23.

⁹⁵ See “Абхазия в цифрах за 2018 год” [Abkhazia in numbers in 2018], State Division of Statistics in the Republic of Abkhazia, 2018, p. 17. See also Thomas Hammarberg and Magdalena Grono, “Human Rights in Abkhazia Today”, Palme Center, July 2017, pp. 43-44.

⁹⁶ Crisis Group telephone interviews, foreign diplomats, local NGO representative, April 2020.

⁹⁷ Crisis Group telephone interview, foreign diplomat, 3 April 2020.

⁹⁸ Crisis Group interviews, Sukhumi resident and Abkhaz journalist, March-April 2020.

⁹⁹ “Acting President of the Republic of Abkhazia Valeriy Bganba signed a Decree to introduce a state of emergency in the Republic of Abkhazia to protect the lives and health of citizens and stop the spread of COVID-19 in the Republic of Abkhazia”, official website of the President of the Republic of Abkhazia, 27 March 2020.

¹⁰⁰ “Посты карантина” [Quarantine stations], Abaza TV, 1 April 2020.

¹⁰¹ Crisis Group interview, Sukhumi resident in Abkhazia, 2 April 2020.

¹⁰² Crisis Group telephone interview, de facto official in Abkhazia, 3 April 2020.

¹⁰³ “Исполняющий обязанности Президента подписал Распоряжение об изменении ограничительных мер по защите населения Республики Абхазия от коронавирусной инфекции”

Abkhazia's de facto authorities reached out for outside help in early March.¹⁰⁴ In response, the UN Development Programme (UNDP) delivered over 12,000 packages of basic medical supplies and sanitisers purchased with U.S. and EU financial support; Russia supplied some 500 COVID-19 test kits and sent soldiers to support disinfection of public places; and international NGOs with local offices in Abkhazia offered vehicles for emergency care and pulverisers to disinfect public transport.¹⁰⁵ Facilitated by the UNDP, WHO specialists carried out a needs assessment in Sukhumi.¹⁰⁶ Still, local authorities are nervous. "One doesn't look a gift horse in the mouth, but we really need much more help", a local official said.¹⁰⁷ Abkhazia was able to purchase additional basic medical supplies from Russia, thanks to diaspora fundraising efforts.¹⁰⁸

Even before the COVID-19 crisis, local officials reported that their coffers, which depend on Moscow for some 60 per cent of the budget, were nearly empty.¹⁰⁹ Trade and tourism are the other pillars of Abkhazia's economy and both are seriously threatened by the pandemic. As part of a bailout plan for local business, authorities are foregoing taxes and customs duties.¹¹⁰ "We need a credit or direct humanitarian support of some \$50-100 billion to survive the upcoming months", a local official said.¹¹¹ With Russia the only major power that recognises Abkhazia, international organisations or foreign banks need Georgia's permission to offer aid – something Tbilisi should consider to ease the economic pain.¹¹²

[Acting president signed a decree to change restrictive measures to protect the lives and health of citizens and stop the spread of COVID-19 in the Republic of Abkhazia], official website of the President of the Republic of Abkhazia, 17 April 2020.

¹⁰⁴ See "On the meeting with the representatives of the international non-governmental organizations", official website of the Ministry of Foreign Affairs of the Republic of Abkhazia, 3 March 2020.

¹⁰⁵ Crisis Group telephone interview, de facto official in Abkhazia, 3 April 2020. Also see "ПРРООН доставила в Абхазию груз защитного медицинского снаряжения и расходных материалов" [UNDP delivered to Abkhazia a cargo of medical supplies and other consumables], *Apsny Press*, 16 April 2020; "О встрече с представителями международных неправительственных организаций" [About meeting with representatives of the international non-governmental organisations], official website of the Ministry of Foreign Affairs of the Republic of Abkhazia, 3 April 2020; "Россия перебросит военных из Крыма в Абхазию для помощи в борьбе с коронавирусом" [Russia deploys Crimea-based troops to help fight coronavirus], *Interfax*, 17 April 2020.

¹⁰⁶ Crisis Group telephone interviews, de facto official in Abkhazia, foreign diplomat, 3 April 2020. See also "Daur Kove met with the representatives of the World Health Organization", official website of the Ministry of Foreign Affairs of the Republic of Abkhazia, 18 March 2020.

¹⁰⁷ Crisis Group telephone interview, de facto official in Abkhazia, 3 April 2020.

¹⁰⁸ Crisis Group telephone interview, de facto official in Abkhazia, 3 April 2020. Also see "Московская диаспора закупила первую партию медпомощи для Абхазии" [Moscow-based diaspora purchased first lot of medical assistance for Abkhazia], *Sputnik-Abkhazia*, 31 March 2020.

¹⁰⁹ Crisis Group telephone interviews, de facto officials in Abkhazia, March 2020. For more information about local budget expenditures, see Crisis Group Report, *Abkhazia and South Ossetia: Time to Talk Trade*, op. cit., p. 23.

¹¹⁰ "И.О. Президента подписал декрет" [Acting president signed a decree], official website of the President of the Republic of Abkhazia, 2 April 2020.

¹¹¹ Crisis Group phone interview, de facto official in Abkhazia, 3 April 2020.

¹¹² See Article 6 in Georgia's Law on Occupied Territories. In theory, this law allows for a limited amount of outside investment to jump-start economic activity in Abkhazia and South Ossetia. A company or bank can apply for a special licence for a specific time period to start operations in the breakaway region. In reality, few have tried. According to the public defender of Georgia, in 2008-

VI. De-isolation

The situation in the post-Soviet de facto statelets is potentially dire but far from hopeless. While underlying conflicts involving the statelets to date have proven intractable, they should not stand in the way of a collective response to COVID-19. Paradoxically, at a time when most people are being urged to self-isolate, the most important first step is to de-isolate these regions. Beyond ensuring full respect for ceasefires, local stakeholders ought to actively cooperate so that a broad range of humanitarian workers and supplies can get into the breakaway regions unrestricted. Effective measures will require eschewing any attempt to use humanitarian aid as a vehicle to achieve recognition, non-recognition, or political or diplomatic gains of any sort. Optimally, such unconditional cooperation today could build trust and thus lay the groundwork for more meaningful negotiations later. Regardless, the priority now should be to save lives.

Where physical access proves impossible, whether for political or logistical reasons, donor countries, the WHO and other international organisations should continue to explore technological solutions, including remote advisory connections, to establish virtual reach. Support for medical personnel and other health care providers, even if only virtual, could make the difference between life and death for many.

Access mechanisms may vary. In some cases, physical and virtual access could require working directly with de facto authorities. In others, where the ICRC is present, that organisation can facilitate support from others as well. It already declared Donbas and Nagorno-Karabakh priority areas for its COVID-19 response, and plans to increase funding and activities in both; it may want to do the same in South Ossetia.¹¹³ If the ICRC is to substantially expand activity and fill gaps where others lack access, it will need the funding to do so. States with an interest in mitigating the crisis in this region, as well as the European Commission, should consider stepping up their support.

Beyond these measures, local and international stakeholders have their work cut out for them.

In Ukraine, Kyiv and the ICRC need first and foremost to work with the de facto authorities in Donbas and with Moscow to get pension payments to statelet pensioners. This step will likely be controversial in Kyiv, and may spark protests there; Ukrainian authorities should seek to minimise backlash by providing clear and exhaustive explanations of the legal basis for the move, how it will be financed and what measures they will take to prevent payments from falling into the wrong hands. Extraordinary measures to provide pensions to vulnerable citizens should be acceptable to the vast majority of Ukrainians, provided they are explained well to the public.

To provide support to Nagorno-Karabakh, the OSCE Minsk Group co-chairs should build on recent contacts between the foreign ministers of Armenia and Azerbaijan,

2016 the Georgian government issued 28 permits for economic activity in the breakaway regions. Most were tied to the Enguri hydropower plant, the only existing Georgian-Abkhaz joint enterprise. "Analyses of the Law of Georgia 'on Occupied Territories' and Recommendations", Public Defender of Georgia, 9 February 2017, p. 29.

¹¹³ Crisis Group Skype interview, foreign diplomat, 6 April 2020.

with the aim of facilitating access by UN agencies, including the WHO, and opening the door to their humanitarian aid.

Moldova should continue to work with de facto authorities in Transnistria, including by using the subgroup on health care issues to coordinate and ensure communication and transparency. The group should meet by video teleconference as soon as possible, with OSCE moderation, to ensure that aid reaches the vulnerable.

South Ossetia's de facto authorities should facilitate efforts by others to help, physically or virtually. Most immediately, they should find a way to enable dispatch of a WHO assessment mission. For its part, Georgia should seek to engage with de facto leadership of Abkhazia to cooperate on ways to support economic recovery, including through trade across the line of separation.¹¹⁴ It might also consider continuing to support the flow of aid even once the immediate crisis passes, as Abkhazia's dependence on tourism bodes ill for a rapid recovery.

Years of conflict have left all these regions in rocky straits as they face the COVID-19 crisis. Broad, cooperative efforts could mitigate potential damage and save lives.

Kyiv/Tbilisi/Moscow/Baku/Brussels, 7 May 2020

¹¹⁴ For more about opportunities for trade development, see Crisis Group Report, *Abkhazia and South Ossetia: Time to Talk Trade*, op. cit.

Appendix A: About Crisis Group

The International Crisis Group (Crisis Group) is an independent, non-profit, non-governmental organisation, with some 120 staff members on five continents, working through field-based analysis and high-level advocacy to prevent and resolve deadly conflict.

Crisis Group's approach is grounded in field research. Teams of political analysts are located within or close by countries or regions at risk of outbreak, escalation or recurrence of violent conflict. Based on information and assessments from the field, it produces analytical reports containing practical recommendations targeted at key international, regional and national decision-takers. Crisis Group also publishes *CrisisWatch*, a monthly early-warning bulletin, providing a succinct regular update on the state of play in up to 80 situations of conflict or potential conflict around the world.

Crisis Group's reports are distributed widely by email and made available simultaneously on its website, www.crisisgroup.org. Crisis Group works closely with governments and those who influence them, including the media, to highlight its crisis analyses and to generate support for its policy prescriptions.

The Crisis Group Board of Trustees – which includes prominent figures from the fields of politics, diplomacy, business and the media – is directly involved in helping to bring the reports and recommendations to the attention of senior policymakers around the world. Crisis Group is co-chaired by President & CEO of the Fiore Group and Founder of the Radcliffe Foundation, Frank Giustra, as well as by former UN Deputy Secretary-General and Administrator of the United Nations Development Programme (UNDP), Lord (Mark) Malloch-Brown.

Crisis Group's President & CEO, Robert Malley, took up the post on 1 January 2018. Malley was formerly Crisis Group's Middle East and North Africa Program Director and most recently was a Special Assistant to former U.S. President Barack Obama as well as Senior Adviser to the President for the Counter-ISIL Campaign, and White House Coordinator for the Middle East, North Africa and the Gulf region. Previously, he served as President Bill Clinton's Special Assistant for Israeli-Palestinian Affairs.

Crisis Group's international headquarters is in Brussels, and the organisation has offices in seven other locations: Bogotá, Dakar, Istanbul, Nairobi, London, New York, and Washington, DC. It has presences in the following locations: Abuja, Addis Ababa, Bahrain, Baku, Bangkok, Beirut, Caracas, Gaza City, Guatemala City, Jerusalem, Johannesburg, Juba, Kabul, Kiev, Manila, Mexico City, Moscow, Seoul, Tbilisi, Toronto, Tripoli, Tunis, and Yangon.

Crisis Group receives financial support from a wide range of governments, foundations, and private sources. Currently Crisis Group holds relationships with the following governmental departments and agencies: Australian Department of Foreign Affairs and Trade, Austrian Development Agency, Danish Ministry of Foreign Affairs, Dutch Ministry of Foreign Affairs, European Union Emergency Trust Fund for Africa, European Union Instrument contributing to Stability and Peace, French Development Agency, French Ministry of Europe and Foreign Affairs, German Federal Foreign Office, Global Affairs Canada, Irish Aid, Iceland Ministry for Foreign Affairs, Japan International Cooperation Agency, Principality of Liechtenstein, Luxembourg Ministry of Foreign and European Affairs, New Zealand Ministry of Foreign Affairs and Trade, Norwegian Ministry of Foreign Affairs, Qatar Ministry of Foreign Affairs, Swedish Ministry of Foreign Affairs, the Swiss Federal Department of Foreign Affairs, the UK Department for International Development, and the United Arab Emirates Ministry of Foreign Affairs and International Cooperation.

Crisis Group also holds relationships with the following foundations: Carnegie Corporation of New York, Charles Koch Foundation, Henry Luce Foundation, John D. and Catherine T. MacArthur Foundation, Korea Foundation, Open Society Foundations, Ploughshares Fund, Robert Bosch Stiftung, Rockefeller Brothers Fund, UniKorea Foundation, and Wellspring Philanthropic Fund.

May 2020

Appendix B: Reports and Briefings on Europe and Central Asia since 2017

Special Reports and Briefings

Counter-terrorism Pitfalls: What the U.S. Fight against ISIS and al-Qaeda Should Avoid, Special Report N°3, 22 March 2017.

Council of Despair? The Fragmentation of UN Diplomacy, Special Briefing N°1, 30 April 2019.

Seven Opportunities for the UN in 2019-2020, Special Briefing N°2, 12 September 2019.

Seven Priorities for the New EU High Representative, Special Briefing N°3, 12 December 2019.

COVID-19 and Conflict: Seven Trends to Watch, Special Briefing N°4, 24 March 2020 (also available in French and Spanish).

Russia/North Caucasus

Patriotic Mobilisation in Russia, Europe Report N°251, 4 July 2018.

South Caucasus

Nagorno-Karabakh's Gathering War Clouds, Europe Report N°244, 1 June 2017.

Abkhazia and South Ossetia: Time to Talk Trade, Europe Report N°249, 24 May 2018 (also available in Russian).

Digging out of Deadlock in Nagorno-Karabakh, Europe Report N°255, 20 December 2019 (also available in Russian).

Ukraine

Can Peacekeepers Break the Deadlock in Ukraine?, Europe Report N°246, 15 December 2017.

Ukraine: Will the Centre Hold?, Europe Report N°247, 21 December 2017.

"Nobody Wants Us": The Alienated Civilians of Eastern Ukraine, Europe Report N°252, 1 October 2018 (also available in Ukrainian).

Rebels without a Cause: Russia's Proxies in Eastern Ukraine, Europe Report N°254, 16 July 2019 (also available in Ukrainian and Russian).

Peace in Ukraine I: A European War, Europe Report N°256, 28 April 2020.

Turkey

Managing Turkey's PKK Conflict: The Case of Nusaybin, Europe Report N°243, 2 May 2017 (also available in Turkish).

Turkey's Syrian Refugees: Defusing Metropolitan Tensions, Europe Report N°248, 29 January 2018 (also available in Turkish).

Turkey's Election Reinvigorates Debate over Kurdish Demands, Europe Briefing N°88, 13 June 2018.

Russia and Turkey in the Black Sea and the South Caucasus, Europe Report N°250, 28 June 2018.

Mitigating Risks for Syrian Refugee Youth in Turkey's Şanlıurfa, Europe Report N°253, 11 February 2019.

Turkey Wades into Libya's Troubled Waters, Europe Report N°257, 30 April 2020 (also available in Arabic).

Central Asia

Uzbekistan: The Hundred Days, Europe and Central Asia Report N°242, 15 March 2017.

Central Asia's Silk Road Rivalries, Europe and Central Asia Report N°245, 27 July 2017 (also available in Chinese and Russian).

The Rising Risks of Misrule in Tajikistan, Europe and Central Asia Briefing N°86, 9 October 2017 (also available in Russian).

Rivals for Authority in Tajikistan's Gorno-Badakhshan, Europe and Central Asia Briefing N°87, 14 March 2018 (also available in Russian).



International Crisis Group

Headquarters

Avenue Louise 235, 1050 Brussels, Belgium

Tel: +32 2 502 90 38. Fax: +32 2 502 50 38

brussels@crisisgroup.org

New York Office

newyork@crisisgroup.org

Washington Office

washington@crisisgroup.org

London Office

london@crisisgroup.org

Regional Offices and Field Representation

Crisis Group also operates out of over 25 locations in Africa, Asia, Europe, the Middle East and Latin America.

See www.crisisgroup.org for details

PREVENTING WAR. SHAPING PEACE.