

Regional COVID-19 Crisis Management Group

Humanitarian Settings and Vulnerable Populations Working Group

Health of Internally Displaced Persons, Refugees, Migrants, Returnees and COVID-19

Situation Report #6|13 May 2020

Situation Overview

As of 12 May 2020, there are an estimated 274 027 reported cases (6.7% of the global burden) in all countries of the Eastern Mediterranean Region (EMR)¹, with an estimated 9138 deaths (3.2% of the global burden).

Burden of COVID-19 among Refugees and Migrants

- As of 8 May, UNHCR reported 4 COVID-19 cases in Iraq (1), Lebanon (2), and Yemen (1).
- As of 11 May 2020, there were 63 positive cases of COVID-19 among Palestinian Refugees registered with UNWRA: Jordan (4), Lebanon (7), West Bank (34), Gaza (18) This is an increase of three new case since last week from Gaza.
- The Ministry of Health of Saudi Arabia (media), on 13 May 2020, reported 674 Nepalis have been infected with COVID-19 and one has died.
- As of 7 May 2020, over 25% of those tested for COVID-19 in Qatar in the past week have been found to be infected; the vast majority migrant workers (media).

Regional Response Actions

Under the newly established Issue Based Coalition on Migration in the Middle East and North Africa region, the first meeting of the Task Force on COVID-19 and Migration/Mobility was co-convened by World Health Organization, International Organization for Migration, United Nations Economic and Social Commission for Western Asia and International Labour Organization on 11 May 2020. The Taskforce aims to enhance coordination, response interventions and sharing of good practices and challenges among the UN to support country-level operations.

International Organization for Migration (IOM)

IOM has developed a global mobility database to map and gather data on the locations, status, and different restrictions at Points of Entries and internal transit points, globally. As of 30 April 2020, IOM has assessed 4 437 such transit points in 173 countries, territories, and areas. The restrictive measures observed across these locations include restrictions on entry and exit, changes in visa and document requirements, medical requirements, restrictions on nationalities, and other measures limiting mobility, https://migration.iom.int/system/tdf/reports/PoE_analysis_05.05.20_v5.pdf?file=1&type=node&id=8518.

IOM continues to support national capacity to implement infection prevention and control measures as well as provide life-saving support to vulnerable communities affected by widespread transmission of COVID-19. In particular, IOM focuses on countries and regions suffering from vulnerable health systems and with high prevalence of malaria, HIV/AIDS, measles and tuberculosis, as well as other preventable infectious and non-communicable diseases.

UN Refugee Agency (UNHCR)

There are four reported COVID-19 cases among persons of concern in the region (Lebanon, Iraq and Yemen). UNHCR is monitoring the situation and supporting national response plans to contain any further

¹ The Eastern Mediterranean Region of the World Health Organizations include 22 countries including Afghanistan, Bahrain, Djibouti, Egypt, Iran, Iraq, Jordan, Kuwait, Lebanon, Libya, Morocco, Occupied Palestinian territory, Oman, Pakistan, Qatar, Saudi Arabia, Somalia, Sudan, Syria, Tunisia, United Arab Emirates, Yemen..

spread. Where possible, UNHCR is ensuring that isolation and quarantine protocols are followed to prevent the spread in refugee camps, internally displaced persons (IDP) sites and in communities hosting displaced populations.

World Health Organization (WHO)

In a press release, WHO and IOM called on national authorities and the people of Yemen to continue their longstanding charitable acceptance of, and support to, vulnerable communities, including migrants, <http://www.emro.who.int/yem/yemen-news/who-iom-raise-concern-over-covid-19-discrimination-against-migrants-in-yemen.html?format=html>

Country Response Actions

Afghanistan

During the past week, IOM's Mobile Health Teams (MHTs) served 5483 patients with basic health services and screened 10 904 undocumented Afghans in IOM transit centres. Three IOM MHTs are operating in Herat at an internally displaced (IDP) camp at Sharak Sabz and in Kandahar at the Zhari IDP site. These teams have trained over 250 community health workers on COVID-19 awareness, prevention, detection and referrals, and more trainings are planned for other provinces.

Egypt

UNFPA continues to offer the essential package of services for refugees, addressing gender-based violence, as well as supporting the women and girls' safe space (WGSS) in Cairo.

Jordan

UNWRA has launched the new eMed Portal, the medicines delivery service platform, within the e-Health system, which is available to all beneficiaries through: <https://ehealth.unrwa.org/emed/>. Over the last 4 days around 5000 users accessed the portal, of whom 690 users registered and entered their information.

UNFPA Jordan supports COVID-19 interventions for refugees through static clinics, WGSS and youth centers in both refugee camps (Zaatari and Azraq) as well as in host communities. Since the announcement of curfew on 29 March, only the maternity clinic in Zaatari remained open providing safe delivery and family planning services in Zaatari camp and similarly clinics in Azraq camp. Starting from 27 April, clinics and WGSS started to reopen gradually. During the closure coordination continued to take place along with remote counselling and services through hotlines services for gender-based violence (GBV) and youth.

Iraq

One Syrian refugee was diagnosed with COVID-19 as he returned to his camp from his job site in Irbil where he was residing during the week. Testing was conducted upon his return and the person was then placed in isolation, contact tracing was also conducted with no positive results.

Médecins Sans Frontières (MSF) is establishing a transit COVID-19 room in Laylan IDP camp in Kirkuk governorate, equipped with necessary materials and in Yahyawa IDP camp (Kirkuk governorate). UNHCR donated a prefabricated structure to be used for the same purpose and IOM is in the process of preparing it to be suitable for use.

Iran

Refugees in Iran receive all COVID-19 health services free of charge at primary healthcare facilities, where more than 12 000 non-Iranians have been screened, 100 people received medication, 400 were referred to hospital, and 3 were temporarily isolated. UNHCR has provided personal protective equipment (PPE) and hygienic items for primary healthcare facilities and refugees in the settlements.

Lebanon

On 6 May, UNRWA, in partnership with MSF announced the opening of a medical isolation centre in the UNRWA Siblin Training Centre (STC) near Saida, Lebanon. The STC isolation centre has a capacity approximately 100 beds and is ready to receive people showing symptoms of COVID-19 who require isolation, as well as people who have tested positive for the virus, that are asymptomatic or exhibit mild-moderate symptoms and cannot self-isolation their homes due to overcrowding, among other reasons. The transformation of STC is compliant with WHO and the Ministry of Public Health of Lebanon's guidelines. MSF provided medical expertise and guidance by modification of the site's layout, as well as logistics in order to ensure that the centre met the requirements for use as a fully functioning isolation site. MSF also provided comprehensive training to UNRWA staff on infection prevention and control measures. The Centre's trained UNRWA staff will provide necessary logistical support, including all laundry, food and cleaning, while MSF will support the management of the facility with the permanent presence of its medical staff on site, in order to ensure the proper monitoring of patients and timely referral of complex cases.

Libya

IOM has published preliminary findings of a food security assessment conducted between 1 - 23 April 2020. *The recently released Libya Migrant Emergency Food Security Assessment*, <https://migration.iom.int/reports/libya-%E2%80%94-migrant-emergency-food-security-assessment-preliminary-findings-may-2020>, in coordination with World Food Programme (WFP), highlights how measures implemented to curb the spread of COVID-19 have resulted in a rise in food prices and scarcity of some types of food, negatively impacting the food security, safety, and wellbeing of migrants, refugees, and IDPs.

IOM Libya delivered sets of PPEs to the headquarters of the Directorate for Combatting Illegal Migration for distribution to migrants in all active detention centres. At the same time, intensive fumigation and disinfection campaigns in detention centres and at disembarkation points have continued. Assessment visits and a COVID-19 awareness campaign were performed at Misrata Airport and Ras Jder border crossing point to prepare for the potential opening of facilities for passenger traffic.

Palestine

West Bank: People are requested to wear masks in public places, and at UNRWA health centres, patients with respiratory symptoms will be given masks. About 75% of the confirmed COVID-19 cases were detected among workers returning from inside the Green Line and their contacts.

Pakistan

UNHCR focused its support for the refugees and migrants toward COVID-19 in three main areas: prevention and response; water and sanitation; and risk communication. The Commissionerate of Afghan Refugees (SAFRON - Ministry of States and Frontier Regions) and UNHCR's non-governmental organization's (NGOs) partners advocated for COVID-19 infection prevention and control, including self-hygiene and physical distancing in refugee camps. UNHCR distributed to vulnerable families, individual soaps and sanitary cloths as a package through partner NGOs and with the help of 88 volunteers from the refuge villages successfully completed distribution of 6444 packages of sanitary packages to refugee women (who have delivered within 3 to 6 months) and to adolescents with disabilities, in the 10 refugee villages in Balochistan, 432 in Khyber Pakhtunkhwa, and one in Punjab. UNHCR Partners have so far displayed awareness posters (1030) and banners (438) on COVID-19 prevention in the refugee villages in Balochistan to create awareness among the refugee communities about COVID-19 preventive measures. The distribution of soap and sanitary pads was continued by partners such as the International Catholic Migration Commission and health education session in health facilities and communities continued using physical distancing measures.

Somalia

UNHCR warned that conditions (heavy flooding and swarms of desert locusts) were ripe for widespread transmission of COVID-19 in overcrowded settlements where most of the country's 2.6 million IDPs live.

IOM screened over 960 people crossing the Somali-Ethiopia border at Doolow for COVID-19 symptoms and 385 households in Afmadaow District were provided with hygiene supplies and handwashing points were installed in Kismayo and Baidoa. Additionally, 33 hygiene promoters have been recruited in Jubaland and South West State, and awareness messages on COVID-19 prevention have been broadcast on radio in Baidoa.

Sudan

UNFPS in West Darfur distributed 600 dignity kits for vulnerable women and girls in Tandaliti in El Genina locality at the border with Chad through the Child Friendly Association. The distribution was combined with sensitization on COVID-19 prevention. An additional, 2000 dignity kits were distributed during community sensitization on COVID19 for vulnerable women and girls in El Geneina town and IDPs gathering sites. In White Nile, 100 dignity kits were distributed as part of the GBV response to COVID-19 targeting women at-risk and 205 clean delivery kits were distributed to women in the Kosti refugee camps.

All 11 South Sudanese refugee clinics provided weekly Early Warning, Alert and Response System (EWARS) reports with 100% reporting timeliness. These include two camps in East Darfur, nine camp clinics in White Nile State, four clinics that are operated by the Ministry of Health, four clinics operated South Sudan Red Cross and one was operated by MSF-Spain. WHO provided technical support in terms of guideline to health partners to establish isolations rooms in all supported health facilities and is technically supporting UNHCR to establish four isolation centers in four localities including Al Nimir, Kario, Elfirdeus and Abujabra refugee camps. The State Ministry of Health in East Darfur reported zero cases of COVID-19 in two South Sudanese refugee camps (Kario and Nimir).

Syria

UNFPA continues to work to ensure that pregnant women with suspected, probable, or confirmed COVID-19, including IDP women and girls who may need to be in isolation, have access to woman-centered, dignified and skilled care. Reproductive health mobile teams and clinics supported by UNFPA in all Syrian governorates are working to ensure pregnant women, women in labor and lactating women, including those who are quarantined, have access to timely and safe reproductive health services.

In Deir Azzour, two mobile clinics have been recently operated by a UNFPA implementing partner, Sham for Health, to reach Abu Kamal district in the eastern rural area with an integrated package of reproductive health services. Furthermore, an online three-phased training was organized by WHO and UNFPA to train case managers, psychosocial support counselors, social workers, and health workers on how to first protect themselves from COVID-19 and to continue the programme delivery under this crisis, taking into consideration the importance of stress management measures. GBV awareness raising activities were also conducted in Damascus and Aleppo.

Tunisia

UNFPA continues to support Medecins du Monde for the provision of medical services including sexual and reproductive health and the provision of dignity kits to migrants.

IOM advocated for the inclusion of migrants in the pandemic strategy, which resulted in the suspension of irregular residence penalties, the inclusion of migrants in health care, and the inclusion of migrants in food and financial aid.

Yemen

The first COVID-19 related death was in Yemen's north- Sanaa, a 29-year-old Somali migrant. The migrant had underlying medical conditions and contact tracing was conducted by the rapid response team found no positive results; however, all contacts remain in quarantine.

WHO is supporting the Ministry of Public Health by strengthening the Central Public Health Labs, establish isolation units for severe cases along with infection prevention and control trainings. In addition, WHO in coordination with UNICEF and WFP (logistics) are working to maintain the medical supply line. WHO and UNICEF are working together under pillar 2 (Risk communication and community engagement) to provide COVID-19 awareness campaigns through electronic and print media.

Way Forward

- Leverage the Taskforce on COVID-19 and Mobility/Migration under the United Nations Inter-Agency Issue-Based Coalition.
- Ensuring that Universal Health Coverage (UHC) is utilized during the outbreak response for COVID-19 among all partners.
- Ensure continuity of care for non-COVID-19 essential health services in camps and camp-like settings.
- Recommend to all countries to support the duty of care to all refugees and migrants in their country and avoid any type of drastic action such as deportation.
- Provide guidance to country offices on desegregated COVID-19 data where possible to identify reported cases among IDPs, refugees, migrants and returnees.
- Provide collective and timely information to our respective organizations on the situation of IDPs, refugees, migrants and returnees.
- Support Country Offices to develop guidance notes/briefs for their respective governments on COVID-19 as a whole-of government and whole-of-society approach toward IDPs, refugees, migrants and returnees.
- Ensure all UN strategic and policy level documents incorporate IDPs, refugees, migrants and returnees, using a whole of government and society approach.
- Promote the inclusion of refugees and migrants in all country level policies and strategies in line with the Sustainable Development Goals.

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Disclaimer:

The aim of this situation report is to provide an overview of what partners working in the COVID-19 response for IDPs, refugees, migrants and returnees are doing in order to aid in better planning, coordination and response.

The information in this document is gathered from online sources as well as partners' reports and is for internally use only.