UNHCR COVID-19 Preparedness and Response

Highlights

- Latin America continues to be the new epicenter of the epidemic with a rapid increase in cases. Reports suggest that COVID-19 has not yet peaked in a number of countries in the Americas.
- Although there have been no major outbreaks in refugee or internally displaced camps so far, the confirmed number of refugees and internally displaced persons affected by COVID-19 is slowly but steadily increasing in several regions. However, the total number of confirmed cases of persons of concern to UNHCR is still relatively low.
- UNHCR has embarked in new cash-based interventions in 40 countries and scaled up its existing cash assistance in 25 operations. Cash assistance helps to bridge the gap between the initial socio-economic impact of the pandemic and the time it takes to install national and international safety nets.
- UNHCR is active around the world to provide mental health and psychosocial support during COVID-19. In Bangladesh, UNHCR has trained 43 national psychologists by using inter-agency guidance. The psychologists subsequently trained over 500 community psychosocial volunteers, para counsellors and community health workers in the promotion of healthy coping and maintaining psychosocial wellbeing.
Global Overview
The COVID-19 pandemic and associated prevention and mitigation activities have major consequences for mental health and psychosocial wellbeing for refugees, internally displaced persons (IDPs) and other persons of concern. Many people are now less able to cope because of the multiple stressors generated by the pandemic. This particularly affects refugees and forcibly displaced people, as according to a study\(^1\) one in five people living in an area affected by conflict has a mental health condition. The change in socio-ecological environment has a profound effect as social support systems are overburdened, stress levels increase due to movement restrictions and crowded living conditions and income and livelihood opportunities are heavily impacted. Many, particularly women and children, face increased protection risks including intimate partner violence and sexual abuse and exploitation. People with pre-existing mental health conditions may experience a worsening of their condition and have difficulties in accessing appropriate care. In Tunisia, for instance, many refugees and asylums-seekers already have higher baseline levels of mental health problems especially those coming from Libya and the consequences of the pandemic are inducing or aggravating pre-existing mental health conditions.

UNHCR and partners have developed innovative field practices to continue providing essential mental health and psychosocial support (MHPSS) services to refugees, IDPs and other persons of concern. A compilation of these best practices can be found in UNHCR’s Emerging Practices on Mental Health and Psychosocial Support. By integrating MHPSS within its activities for health, protection (e.g. community-based protection, protection against sexual and gender-based violence, child protection) and education, UNHCR ensures that measures that support the mental health and psychosocial wellbeing of its persons of concern are also provided during the pandemic.

UNHCR Response
Progress to date and Impact
- UNHCR promotes the inclusion of people of concern in national and international health and socio-economic response plans.
- UNHCR advocates for compliance with various protection measures during the pandemic, including access to territory and rescue at sea and disembarkation.
- In countries where movement restrictions are being lifted, UNHCR operations have started to resume in-person assistance activities previously put on hold or conducted remotely.

Gaps and Challenges
- UNHCR is seeing growing political and security consequences of the pandemic worldwide. These are placing stresses on many societies. It is also exacerbating existing tensions when the impact of COVID is felt by communities already excluded from development gains and/or discriminated against.
- Due to border closures introduced during COVID-19, durable solutions such as resettlement and voluntary repatriation are severely limited.

\(^1\) https://www.thelancet.com/action/showPdf?pii=S0140-6736%2819%2930934-1
Global COVID-19 Emergency Response
15 June 2020

Regional Updates

**Middle East and North Africa (MENA)**
All countries in the region are affected by COVID-19 but the number of persons of concern to UNHCR who have tested positive for COVID-19 is still relatively low. In countries with particularly strict movement restrictions, access to livelihoods and basic services is proving challenging for displaced populations, further enhancing their exposure to negative coping mechanisms. There has also been an increase in evictions or threats of evictions reported in some countries due to limited financial means to afford rent, coupled with the compromised financial position of landlords.

Health response in the region remains challenging due to the system capacities, the financial means of refugees themselves, and other compounding factors. Countries which have witnessed years of conflict including Syria, Libya and Yemen face additional challenges due to fragile health systems, limited qualified health personnel, and damaged essential infrastructure. Across Yemen, UNHCR is adapting its regular interventions according to the COVID-19 context. With the threat of the COVID-19 pandemic, the UN is repeating its calls for international support to urgently contain its spread. UNHCR has expanded its 24/7 protection hotlines, and shifted to house-to-house distributions where possible. In addition, all service points and distribution sites have adopted COVID-19 prevention protocols, ensuring adequate physical distancing and sanitation. Moreover, UNHCR is providing training and equipment to community-based health workers, as well as medical and support personnel at UNHCR-supported health facilities.

Since the beginning of the COVID-19 outbreak in Iraq, UNHCR has distributed over 36,000 dignity kits for women and girls of reproductive age living in refugee and internally displaced camps. In addition, UNHCR is conducting some protection activities remotely, including protection monitoring, mental health and psychosocial support (MHPSS), case management and verification interviews. As a result of the recent re-opening of courts in certain areas, additional legal assistance activities have resumed.

**Asia and the Pacific**
The number of confirmed cases amongst UNHCR’s persons of concern in the region remains stable. There has been no considerable increase in the number of confirmed cases in refugee camps in Bangladesh, but it is unclear whether this is due to the slower spread of the virus or to a changed approach to testing. Previously, people with mild symptoms were tested directly, but now they must agree to stay in isolation or treatment centres until their results are released if they wish to be tested. UNHCR is advocating with the authorities to return to the previous testing system.

The Deputy Commissioner for Cox’s Bazar has declared the entire municipality as a "Red Zone" until 20 June to control the spread of COVID-19. Efforts are underway to clarify the scope of the restrictions and how they will apply to humanitarian activities. UNHCR is also facing access constraints in Afghanistan and Myanmar due to lockdown measures resulting in challenges of carrying out regular as well as COVID-19 activities.

UNHCR has continued to reinforce health and water and sanitation systems and services in the main refugee and internally displaced hosting areas in the region. Together with partners, UNHCR is establishing an extension of...
the UN Clinic in Cox’s Bazar. This facility will include five beds (including one ICU), one triage facility for examinations, as well as oxygen and ventilation capacities. In Afghanistan, UNHCR provides family tents and refugee housing units in three provinces for screening, accommodation for medical personnel, and as registration areas for returnees from Iran. A total of 339 hand washing stations have been set up by UNHCR’s partners across eight provinces and hygiene promotion activities continued for 75,000 people residing in internally displaced sites in Herat Province.

**West and Central Africa**

Since the first case of COVID-19 was declared in Nigeria at the end of February, the pandemic has progressed steadily throughout the region, killing nearly 1,200 people. The number of cases continues to rise, with a 22 percent increase in newly confirmed COVID-19 cases since last week to a total of about 60,000 cases. However, the number of confirmed cases among persons of concern to UNHCR is still very low.

The escalating violence in the Sahel, which has affected hundreds of civilians in recent weeks, has triggered further displacement and seriously impeded humanitarian activities. Attacks by armed groups and ensuing counter-security operations have led to more people fleeing their homes for security and put even more pressure on stretched host communities, already facing hardship. UNHCR has provided shelter assistance to over 25,000 families and aims to conclude the distribution of relief items to 16,500 families by the end June 2020. In addition, UNCHR is working with partners and the authorities in the region to assist populations in need, but increased insecurity and COVID-19 measures challenge UNHCR’s ability to reach all in need in the remote parts of Burkina Faso, Niger and Mali.

UNHCR continued to strengthen its risk communication and community engagement, and critical protection case management. Community leaders and key members of the communities continue to play an important role in awareness-raising and sensitization. In the past week, thirteen sensitization campaigns were conducted in internally displaced camps in Nigeria reaching 770 persons. Campaigns for cross-border populations on COVID-19 preventive and control measures and on peaceful co-existence were conducted, reaching around 230 persons in Nigeria. To better understand the impact of COVID-19 and measures put in place to contain its spread among persons of concern, UNHCR conducted a series of Focus Group Discussions in three regions, which also addressed the scepticism on the existence of the pandemic.

**East and Horn of Africa and the Great Lakes**

While there has been no large-scale outbreak amongst UNHCR’s persons of concern so far, 4.6 million refugees and 8.1 million internally displaced people and their host communities are at risk in the region. The need for preparedness remains urgent as local transmission is ongoing in all countries of the region. Measures by governments in the region to contain the spread of COVID-19 continue to evolve, and certain restrictions will remain in place during this month. But there has also been some easing of movement restrictions which have been noted in several countries in the region including Somalia where domestic flights were resumed on 3 June. In Uganda, the 19 May presidential directive easing the lockdown has, to a limited extent, restored economic and social life in some refugee settlements. Many shops and business centers
have reopened across the settlements, slowly reviving economic activity which had been stopped for the last two months. As some governments move towards reopening schools, UNHCR country operations are working on school re-opening plans. These will include increased WASH facilities in schools with further expansion of hand washing facilities and soap provision. Extra temporary learning spaces and recruitment of additional teachers on a temporary basis may be required to reduce class size and adhere to social distancing guidelines. Potential re-openings of schools that had been designated as isolation centers means a number of new isolation centers need to be established with the required WASH facilities. UNHCR has continued with its WASH prevention activities targeting all camp populations. Water supplies are continuously improved including through water trucking to mitigate shortages. For instance, in Gambella refugee camps, Ethiopia, UNHCR, in collaboration with UNICEF and Oxfam, is trucking an average of 540,000 litres of water per day. However, the provision of WASH services and systems remains challenging due to the scope of improvements needed in many contexts where existing health structures and WASH facilities were inadequate before the pandemic.

Southern Africa
The economic impacts of COVID-19 lockdowns and restrictions are felt by households across the region. The number of persons of concern seeking emergency assistance from UNHCR and partners is increasing, notably among individuals who had previously been self-sufficient and not reliant on assistance, and are now struggling to pay for food and the rent, or to cover the cost of utilities. UNHCR and partners are providing emergency cash assistance for the most vulnerable families, especially those who cannot access government assistance programmes. However, the demand for assistance far outweighs the available resources and more support is needed to ensure cash assistance continues to reach the most vulnerable to help them through and to recover from this challenging period.

Ongoing school closures, combined with the economic impacts of COVID-19 lockdowns and movement restrictions have led to increased protection risks for children, especially those who are not accessing distance learning, and those whose parents are unable to work. For instance, in the DRC, increased cases of economic exploitation of children in the construction industry have been reported amongst South Sudanese refugees. UNHCR and partners are monitoring the situation and seeking to increase awareness-raising about economic exploitation of children during COVID-19. UNHCR and partners have also set up hotlines where incidents can be reported.

Europe
With the pandemic and related measures impacting the labour market, persons of concern are facing a number of specific difficulties. The UNHCR counselling line in Turkey answered over 5,700 calls from 71 provinces. An increase of over 200 per cent was observed compared to last week’s total received calls. The main line of inquiry was resettlement (44 per cent) followed by financial assistance (30 per cent). To address the growing needs of financial assistance, UNHCR distributed one-off cash assistance cards for more than 7,000 families across the country last week, and an additional 2,500 households have been enlisted to receive cash assistance. In the Czech Republic, a partner organization specialized on integration provides online support and mentoring schemes, and has issued an information brochure for persons of concern on the current labour market situation,
their rights and opportunities, so as to limit the negative economic impact of the crisis and mitigate specific risks that make persons of concern vulnerable to abusive practices. UNHCR assisted with translation of the information material.

To ensure physical space in reception centres, some countries continue working on expanding reception capacities. In Albania, all residents of two facilities at the border were transferred to the National Reception Centre for Asylum-Seekers in Tirana, with the support of UNHCR and CARITAS. This transfer was the first since the pandemic started and had been requested by border police to increase accommodation capacity at the border in view of adequately anticipating higher numbers of arrivals. In the Netherlands, one centre has been designated as quarantine location for COVID-19 affected persons of concern from all over the country. Reception conditions remain dire where centres are overcrowded or underequipped. Many persons of concern in the region are still living in facilities with problematic hygienic circumstances. In these settings, UNHCR continues to advocate and offer support for improved conditions that enable residents to comply with health measures, for access for humanitarian actors to these facilities and for effective access to asylum procedures is ongoing.

**Americas**

As the WHO alerted last week, health systems in the Americas are struggling not only with COVID-19, but also with malaria, measles, dengue fever and other diseases. The continuous increase in COVID-19 cases in the region, particularly in Brazil, Mexico and Chile, on one hand, and the need to resume economic activities, on the other, has led several countries to progressively scale up activities, such as Costa Rica and Panama or tightening restrictions on internal mobility such as Argentina, Chile, Colombia and Peru. In the region, UNHCR is receiving increasing reports of sexual and gender-based violence (SGBV) against children and the elderly. It is feared that the economic crisis may be contributing to the risk of abandonment of children by parents unable to meet their basic needs. At the same time, people living with HIV face increased health risks and community discrimination.

Climate risks will aggravate the COVID-19-related challenges faced by UNHCR operations in the region. The tropical storm Amanda has caused devastating floods and landslides across the north of Central America, particularly in El Salvador where nearly 25,000 families were affected. Around 8,000 persons are currently in shelters, and seven communities of internally displaced or people at-risk have been impacted. However, the state response capacity is limited. Honduras will face an ‘extremely active’ hurricane season and has been classified as particularly vulnerable to climate change. As part of UNHCR’s support to national efforts in response to this emergency, UNHCR provided around 2,400 hygiene kits to municipalities in El Salvador to respond to both COVID-19 and the impact of the storm.

In Colombia, UNHCR supports the national health response to expand its capacity to respond to COVID-19 cases. As such, several refugee housing units have been set up and UNHCR has procured medical equipment for two municipal hospitals, which together host over 70,000 Venezuelan refugees and migrants. In addition, the operation is in the process of procuring critical biomedical equipment in coordination with the Pan American Health Organization and the local health authorities, including an oxygen plant, electrocardiographs and portable defibrillators.
Coordination and partnerships
The 12th global weekly NGO consultation focused on 'children and youth and the role of sport during the COVID-19 pandemic' featuring several speakers from UNHCR and partners. The consultation offered a platform for participants to discuss the situation for displaced and stateless children and youth including key protection challenges during COVID-19, such as family separation, psycho-social distress, exposure to increased abuse and violence at home and limited access to core protection services. To reduce psycho-social stress of children and youth during the pandemic, the role of sport and sports organizations was discussed including a presentation by the organisation 'Youth Sport Uganda' presenting a family-based sport model where parents served as coaches organizing simple games for children with respect to social distancing and community football coaches becoming WASH ambassadors for awareness-raising.

Refugee Sub-Window for Education Technology (EdTech) Responses to COVID-19

Over 1.5 billion learners around the globe are not able to attend school or university, including refugees. UNHCR is teaming up with the EdTech Hub, mEducation Alliance, Global Innovation Exchange and Education Cannot Wait to open a specific Refugee Sub-window to the EdTech call – in order to respond to the learning emergency caused by COVID-19 school closures. Selected applicants will be invited to a dedicated pitch day focused on refugees, allowing teams to compete for the opportunity to join the Humanitarian Education Accelerator’s Rapid Response COVID-19 Cohort.

Financial Information
On 7 May, the first revision to the COVID-19 Global Humanitarian Response Plan (GHRP) was launched, seeking USD 6.7 billion to support global humanitarian response through December 2020. UNHCR seeks USD 745 million for its response and preparedness to COVID-19 for refugee and internally displaced operations worldwide. While the initial appeal focused on preparedness and prevention, the revised appeal is increasingly focused on response activities to address the immediate public health, protection and humanitarian assistance needs of refugees, the internally displaced and host communities prompted by the spread of COVID-19. More detailed information on UNHCR requirements within the GHRP was shared in the 11 May revision to the UNHCR Coronavirus emergency appeal.
USD 745M

Requested for UNHCR’s COVID-19 response globally until the end of the year:

Unearmarked contributions to UNHCR’s 2020 programme:
- Sweden 76.4M
- Norway 41.4M
- Netherlands 36.1M
- Denmark 34.6M
- Private donors Spain 33.1M
- United Kingdom 31.7M
- Germany 25.9M
- Private donors Republic of Korea 17.3M
- Switzerland 16.4M

Contributed without restrictions on its use, unearmarked funding allows UNHCR critical flexibility in how best to reach refugees, the internally displaced, stateless persons and other populations of concern who are in the greatest need and at the greatest risk.

More information:

- Global Focus COVID-19 Situation page (including UNHCR’s Coronavirus emergency appeal and sitreps)
- UNHCR Covid-19 data portal (including global guidance, sitreps and links to other UNHCR COVID-19 related sites)

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Total contributed or pledged to the COVID-19 appeal:
USD 252M

Including:
- United States $64.0M
- Germany $38.6M
- European Union $33.5M
- United Kingdom $24.8M
- Japan $23.9M
- Denmark $14.6M
- United Nations $10.0M
- Foundation
  - CERF $6.9M
  - Private donors $6.7M
  - Canada $6.4M
  - Ireland $3.3M
  - Sweden $3.0M
  - Sony Corporation $2.9M
  - Finland $2.4M
  - Austria $1.8M
  - Education Cannot Wait $1.8M
  - Qatar Charity $1.5M
  - Norway $1.4M
  - USA for UNHCR $1.0M

Funding Gap 66%
Pledged and Recorded 34%
252 million
493 million
Specific country examples

**Costa Rica**
UNHCR in Costa Rica has delivered cash assistance to some 1,600 households of concern to meet essential needs, and is supporting businesses affected by COVID-19 with financial and technical assistance. As part of this effort, reactivation grants have been provided to 40 entrepreneurs, while virtual trainings are delivered remotely to increase the possibilities to find employment options for refugees and asylum seekers.

**Ecuador**
In Ecuador, UNHCR established 15 information and emergency hotlines – including a national chatbot - to share key messages on access to basic services, humanitarian assistance and mental health and psycho-social support messages.

**Chad**
In Western Chad, UNHCR, partners and teachers from the refugee and host communities conducted awareness-raising activities in the hosting areas surrounding the refugee camps. Over 1,000 refugees and members of the host community were reached in the past 6 days only.

**Democratic Republic of Congo**
Around 65,000 individuals have been screened for COVID-19 in the Democratic Republic of the Congo, in camps and settlements hosting refugees from the Central African Republic and from Burundi.

**Greece**
In Greece, the community psychosocial workforce (CPW), a team of fifteen refugees and asylum seekers, working as paraprofessionals supervised by mental health professionals of UNHCR’s partner EPAPSY, established a new psychosocial support helpline in Arabic, English, Farsi and Greek. The helpline offers psychosocial support, information about COVID-19, and referral to psychological or psychiatric specialists. The helpline is accessible to all refugees and asylum-seekers in Greece.

**Burkina Faso**
In Burkina Faso, UNHCR is partnering with Fondation Hirondelle (FH), a non-profit organisation specialized in journalism and the provision of information to populations faced with crisis. As part of this partnership, FH has been producing a short daily COVID-19-related news programme for internally displaced people and host populations, broadcasted through 37 partner radios across the country, including in local languages.

**Russia**
In Russia, provision of one-time cash assistance to the most vulnerable persons of concern in Moscow and 16 other regions has been ongoing since mid-April. In total, nearly 1,000 persons applied for cash assistance. Post-distribution monitoring and analysis are being conducted.

**Syria**
Despite the closure of some 130 community centres, nearly 3,000 outreach volunteers continue to be active in COVID-19 awareness raising campaigns in Syria. More than 335,000 individuals have been reached through risk communication and community engagement through WhatsApp groups, outreach volunteers and community-led initiatives.

**Pakistan**
The first cash distributions in Baluchistan commenced on 28 May. Post Offices were closed for several days during the Eid break, but the first group of refugee households started to receive the one-time cash assistance. The second group of 5,000 households commenced on 3 June and the third group of 13,000 households will follow.

**Japan**
In Japan, an NGO platform called Solidarity Network with Migrants Japan (SNMJ) established an "Emergency Support Fund for Migrants and Refugees" for those ineligible for the government’s

**Kenya**
In Kakuma, Kenya, 37 football players from local male and female football teams were enrolled in a tele-mentoring programme coordinated by the iamtheCODE initiative. The programme is designed to empower youth in their interest areas and is providing a forum to address the psycho-social well-being of the youth during the pandemic.

**Uganda**
In Uganda, as part of a joint cash assistance programme between UNHCR, WFP and the government to assist 42,694 refugee households in Kampala, UNHCR began disbursement of mobile money to around 2,500 households (around 7,000 individuals) to help them cover the cost of non-food items and rent for one month.

**Zimbabwe**
In preparation for schools opening in Zimbabwe, UNHCR and its WASH partner distributed handwashing stations (85L each) in Tongogara refugee camp to primary and secondary schools, as well as an early childhood development centre.