

UNHCR Regional Bureau for Middle East and North Africa

COVID-19 Emergency Response Update #7

4 June 2020

Algeria, Bahrain, Egypt, Iraq, Israel, Jordan, Kuwait, Lebanon, Libya, Mauritania, Morocco, Oman, Qatar, Saudi Arabia, Syria, Tunisia, United Arab Emirates, Western Sahara, Yemen, and Turkey¹

Key Figures



20

out of 20 UNHCR countries / operations are reporting COVID-19 cases in the region



16 million

2020 planning figure for people of concern in the Middle East and North Africa



9

COVID-19 cases reported among persons of concern in MENA²

Regional Developments

Operational Context

UNHCR [MENA published its funding needs for the COVID-19 response](#) on 27 May, to ensure the most vulnerable in the Middle East and North Africa are protected from the impacts of the coronavirus and its spread is prevented. Reflecting the scale of the crisis, and in line with the Global Humanitarian Response Plan (GHRP) and the prioritized needs reflected in UNHCR's

Global COVID-19 appeal, UNHCR **MENA's comprehensive 2020 financial requirement for the COVID-19 preparedness and response amounts to USD 343 million.**³

So far, UNHCR MENA's COVID-19 response has received **USD 36.5 million** in contributions.

Main Lines of Response



Continuing, adapting and delivering

protection and assistance to the most vulnerable



Strengthening communication with communities



Prioritizing immediate interventions

to prevent infections and supporting access to services and materials



Advocating for the inclusion of refugees, IDPs

and other marginalized groups into national public health and other responses, and supporting national systems to deliver assistance



Empowering individuals and families to make

the best decisions for themselves, through cash-based assistance

¹ UNHCR Turkey reports to the UNHCR Europe Bureau, although operations in Turkey related to the Syria & Iraq Situations are included in the MENA update

² Iraq, Lebanon, Yemen, Israel and Mauritania

³ It includes the additional 2020 financial requirements published in the UNHCR Global COVID-19 Appeal and COVID-19 activities for which UNHCR MENA reprioritized from its regular 2020 budget (still not funded)

Highlights from the Field

Effective protection monitoring contributes to UNHCR's mandate to protect asylum-seekers, refugees and internally displaced persons. Across MENA, UNHCR has undertaken protection monitoring in the context of COVID-19 to ensure Operations are better informed about displaced persons' protection needs and how best to respond to them.

Iraq: The National Protection Cluster (NPC) in Iraq, led by UNHCR, has collected data through the Remote Protection Monitoring tool to measure the impact of the COVID-19 outbreak on IDP communities. Between the period of 26 April and 10 May 2020, nearly 1,500 key informants were interviewed in IDP camps, informal sites and in urban, peri-urban and rural areas. The data indicates that 72 per cent of respondents reported that existing protection concerns significantly increased since the beginning of the COVID-19 pandemic. The most common protection risks reported by respondents included psychological trauma, stress and anxiety, cited by 49 per cent of the overall community; 62 per cent of women and girls; 52 per cent of children; 52 per cent of persons with disabilities; and 59 per cent among older persons. Furthermore, 89 per cent of respondents reported loss of employment and/or livelihoods as the main impact of the crisis, followed by the lack of access to humanitarian services (58%); inability or difficulty in purchasing basic necessities (55%); lack of access to government services (52%); and inability and/or difficulty to pay rent (44%). The most commonly cited coping mechanisms reported include reducing/changing food consumption (75%); spending savings (70%); reduction in purchase of non-food items (68%); and going into debt (61%). Additional information can be found on the Iraq [NPC website](#).

Lebanon: Protection monitoring carried out between 27 April and 3 May 2020, indicated that 78 per cent of refugee households reported difficulties in buying food due to a lack of money, and 73 per cent reported having had to reduce their food consumption as a coping mechanism. These findings are corroborated by UNHCR [Lebanon's Monitoring of the Effects of the Economic Deterioration on Refugee Households](#) (MEED), which found that families are falling deeper into debt. Findings from May compared to March found that the share of households reporting to be in debt increased to almost all the population (97% from 91%) and the share of families incurring new debts in the past three months also increased (to 93% from 83%); the share of families reporting not to have any household member currently working increased drastically from 44 per cent to 70 per cent and half reported that at least one person in their family lost a job in the past three months.

In line with the easing of curfew restrictions across **Jordan**, UNHCR's partner IMC's Mental Health clinics have gradually resumed full face-to-face operations with only essential staff coverage. Meanwhile, the Mental Health Psychosocial Support (MHPSS) team has continued implementation of the 24/7 MHPSS support line, reaching over 260 refugees by phone and video. Further to these efforts, UNHCR partner Caritas has prepared over 5,000 non-communicable disease (NCD) prescriptions to be delivered through United Parcel Service (UPS) to urban refugee populations. UPS has to date distributed NCD medications to 4,300 refugee patients in Amman, Zarqa, Irbid and the south.



Jordan: Medical staff at UNHCR's partner Caritas prepare medicines for delivery to vulnerable refugees in Amman, Jordan. Photo by UNHCR / Mohammad Hawari

As part of continued efforts to engage with displaced communities about the risks of COVID-19 and how to prevent its spread, UNHCR in **Syria** has reached nearly 290,000 individuals through outreach volunteers and various communication channels, including organized WhatsApp groups, hotlines and mass communication campaigns. In addition, more than 200,000 individuals have been reached through shelter infrastructure activities, which have included rehabilitation and renovation of 30 collective shelters and provision of 200 emergency shelters to respond to COVID-19.

In **Turkey**, registration procedures were temporarily suspended due to COVID-19 measures, except for persons with specific needs. UNHCR coordinated with the Directorate General of Migration Management (DGMM) on persons with specific needs and referred cases for exceptional registration. Of the cases communicated to DGMM in this timeframe, a total of 42 cases were responded to positively by DGMM and the respective Provincial Directorates of Migration Management (PDMMs) were instructed to take registration applications.

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 staff at UNHCR-supported health facilities.

After the closure of schools to prevent the spread of COVID-19, **Israel** is implementing a gradual reopening and return to schools, kindergartens and daycentres. Schools and kindergartens have reported attendance of approximately 50 per cent and daycentres at around 70 per cent. There has been a slow return for children of refugees and asylum-seekers, due to transportation limitations, fears of a second wave of COVID-19 and given that some parents have lost their jobs and are staying at home with their children.

In **Algeria**, as a precautionary measure, the Sahrawis were maintaining confinement measures within the five Tindouf refugee camps, although as of 3 June, Sahrawis started allowing movement between the camps. In support of COVID-19 prevention measures, UNHCR delivered five water trucks to the Sahrawi refugee population on 20 May. While reception services and appointments in March were suspended for the urban refugee population, UNHCR is anticipating the

resumption of activities. Through appointment at UNHCR's Offices or through mobile teams, UNHCR is supporting refugees and asylum-seekers to renew their asylum certificates and refugee cards. This is a welcome relief for those displaced persons who need international protection, but do not have up-to-date documentation.

In **Egypt**, adapting to context, UNHCR is currently piloting remote interview modalities for certain profiles with the assistance of interpreters, given that Egypt's refugee and asylum-seeker population comes from a total of 58 countries of origin. UNHCR is planning to implement home-to-home phone interviews on a larger scale as of 7 June. Meanwhile, as of 1 June, the Immigration Department, under the Ministry of Interior, resumed the issuance of residence permits for persons registered with UNHCR. This has been received positively by refugees and asylum-seekers, who frequently raised the issue of expired permits and the associated protection risks as their main concerns.

As part of the Ramadan campaign in **Libya**, UNHCR completed the distribution of core relief items, including food baskets, hygiene kits, water purification tablets and jerry cans to over 4,700 refugees and asylum-seekers and 3,700 IDPs living in Tripoli, Misrata and Al-Zawiya. Since Ramadan has ended, all UNHCR services have resumed regular working hours (9:00 hrs until 16:30 hrs) at the Community Day Centre in Tripoli.



*Libya: UNHCR staff distribute food and aid packages for refugees affected by ongoing conflict and COVID-19 movement restrictions in the Libyan capital, Tripoli.
Photo by UNHCR / Mohamed Alalem*

In **Mauritania**, the number of confirmed COVID-19 cases is increasing, and now includes one urban refugee. The refugee is being treated within Mauritania's national health system, with UNHCR carrying out regular follow-up. Furthermore, the UN system in Mauritania has so far officially confirmed one case among its staff. Over 5,000 people, including persons identified through contact tracing, several partner staff and UN staff members are in full confinement. However, operations in Mbera camp and Bassikounou continue relatively unaffected. As part of UNHCR's cash for social protection programme, as of 26 May, 90 per cent of the targeted households (917 out of 1024) have received their cash assistance. UNHCR is reinforcing outreach to those who have not yet been able to withdraw their assistance, reasons of which include limited access to ATM points.

In **Morocco**, UNHCR signed a partnership agreement with the Moroccan National Council of Doctors, to help facilitate the access of refugees and asylum-seekers to healthcare, provided for in the 2014 National Strategy for Immigration and Asylum. This agreement will facilitate displaced persons' access to medicine, mental health support, as well as specialized care.

As of 1 June, face-to-face RSD interviews resumed in the south of **Tunisia**. UNHCR is working on reviewing and updating the list of asylum-seekers scheduled to have interviews. In Tunis, UNHCR is anticipating the resumption of similar activities, by conducting all necessary security and sanitary preparations.

Global Financial Requirements

UNHCR's [revised prioritized requirements to support the COVID-19 preparedness and response](#) in situation of forced displacement, including those for UNHCR MENA, has increased from USD 255 million to USD 745 million. **So far, a total of USD 246 million (33 per cent) has been contributed or pledged to the UNHCR Global Appeal out of USD 745 million required.**

MENA Financial Information

Earmarked contributions for the Coronavirus Emergency Situation in MENA amount to some USD 36.5 million, including:

[United States of America 22.6M](#) | [Japan 9M](#) | [CERF 2.4M](#) | [Qatar Charity 1.5M](#)

Special thanks to the major donors of softly earmarked contributions and pledges at the global level to the Coronavirus Emergency Situation:

[Germany 38M](#) | [United Kingdom 24.8M](#) | [Denmark 14.6M](#) | [United States of America 8M](#) | [Canada 6.4M](#) | [Ireland 3.3M](#) | [Sweden 3M](#) | [Sony Corporation 2.9M](#) | [Norway 1.4M](#) | [USA for UNHCR 1M](#)

Special thanks to the major donors of unearmarked contributions to UNHCR's 2020 programme:

[Sweden 76.4M](#) | [Norway 41.4M](#) | [Netherlands 36.1M](#) | [Denmark 34.6M](#) | [United Kingdom 31.7M](#) | [Private donors Spain 26.6M](#) | [Germany 25.9M](#) | [Switzerland 16.4M](#) | [Private donors Republic of Korea 13.9M](#)

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



Photo by UNHCR / Aiman Fuad



*A medical staff partner carries out testing in a UNHCR supported clinic in Aden.
Photo by UNHCR / YPN Media*

Resources:

- [UNHCR's Coronavirus Emergency Appeal \(Revision\)](#)
- [UNHCR MENA's comprehensive funding needs for the COVID-19 response](#)
- For MENA regional and country reports on COVID-19 response, please visit – [UNHCR Global Focus](#); [UNHCR Operational Portal \(Syria Regional Refugee Response\)](#); and [Regional Refugee and Resilience Plan website](#)
- Support UNHCR's COVID-19 preparedness and response plans: <https://giving.unhcr.org/en/coronavirus/>

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