

## East and Horn of Africa, and the Great Lakes Region

6-19 August 2020

 **4.6** MILLION  
 REFUGEES & ASYLUM-SEEKERS

 **8.1** MILLION  
 INTERNALLY DISPLACED PERSONS

 **33,528**  
 REFUGEE RETURNEES IN 2020

**92,373** CONFIRMED  
 COVID-19  
 CASES IN HOSTING COUNTRIES

### Operational Context

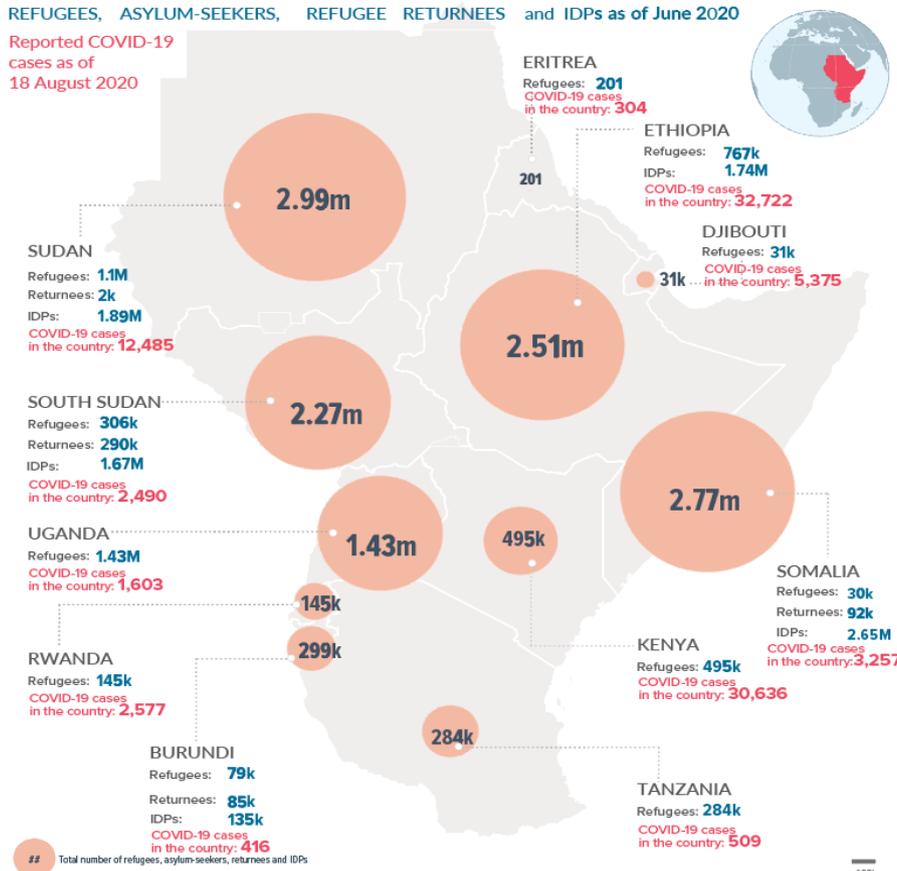
The COVID-19 situation in the East and Horn of Africa, and the Great Lakes (EHAGL) region has entered its sixth month since the first cases were reported in March 2020. As the situation continues to evolve, the region is still relatively less impacted than the rest of the continent. As of 18 August, there were 92,373 confirmed COVID-19 cases in the 11 countries overseen by the EHAGL Bureau. Of the reported figures this past week, the EHAGL region reported an increase from 7% to 8% of the total COVID-19 cases in Africa, as well as an increase from 17% to 18% of the total tests reported on the continent. Since the first confirmed COVID-19 related death on 21 March, there are now some reported 2,110 deaths in the region (equivalent to 8% of the death cases on the continent) of which 82% are in three countries – Ethiopia, Kenya and Sudan.

While so far there has been no large-scale outbreak in the approximately 100 refugee camps and settlements in the region, 4.6 million refugees and their host communities are at risk, as are some 8.1 million IDPs. The need for preparedness remains urgent as cases are still rising in all countries of the region and a number of locations still lack adequate quarantine, testing and isolation/treatment facilities.

Governments have put in place various measures to contain the spread of the virus and are periodically announcing changes to movement and other restrictions, and gradually lifting preventive measures initially adopted. On 6 August, the Federal Government of **Somalia** lifted the international flight restrictions to and from Kismayo, the main city in Jubaland, which it had imposed in August 2019 following the disputed re-election of the current president of Jubaland and the ensuing political stalemate between the Federal Government and Jubaland. The lifting of this restriction will facilitate the arrival of essential supplies to fight against the COVID-19 pandemic.

REFUGEES, ASYLUM-SEEKERS, REFUGEE RETURNEES and IDPs as of June 2020

Reported COVID-19 cases as of 18 August 2020



### Key Measures Taken

- Supporting national authorities in ensuring that prevention, preparedness and response are ongoing in all locations.
- Ensuring basic assistance and minimum standards during quarantine for new asylum seekers and refugees who have travelled internally within host countries.
- Procurement and distribution of PPE, health and sanitation equipment and supplies.

\*COVID-19 Case information: WHO, John Hopkins University, Ministries of Health, Governments. Note: COVID-1 cases refer to total cases reported in the countries of asylum. IDP figures source: IOM, OCHA and UNHCR.

## UNHCR Response

### Protection

UNHCR continues to assess the impact of border closures and travel restrictions on access to asylum. Movements continue through unofficial border crossing points where screening and provision of information is not in place. Across the region, UNHCR has appealed for special measures to be put in place, to allow for asylum-seekers to be screened, quarantined and admitted, and for UNHCR to be granted access to areas where new refugees are arriving. On 30 June, UNHCR launched a global online Platform on the protection impact of temporary measures in response to the COVID-19 pandemic, including access to territory and national asylum systems.

Whereas initially many essential protection services were suspended, registration activities and refugee status determination have largely resumed either remotely or with other COVID-19 protective measures in place. Resettlement processing is ongoing with departures starting again in several countries.

Most recently in **Rwanda**, between 11-17 August, 27 Congolese refugee families of 56 individuals departed for resettlement to the United States of America. These are the first resettlement departures from Rwanda since 17 March after a temporary hold on travel following the COVID-19 outbreak. More refugees are expected to depart in the coming weeks. UNHCR is also advocating with resettlement countries to restart departures of refugees in the Emergency Transit Mechanism (ETM) who had been evacuated from Libya in last 2019 and early 2020.

In **Kenya**, the country-wide lifting of movement restrictions has impacted COVID-19 surveillance, and protection of high-risk groups in the Dadaab camps. Cross-border movements have continued with new arrivals often using unofficial entry points, increasing potential transfer of the virus. There are reports of sporadic movement across the Somali-Kenyan border, with individuals making their way to the Dadaab camps. UNHCR is working with the authorities to monitor the situation. The lack of surveillance and quarantine facilities at the border with Somalia is affecting the COVID-19 transmission mitigation measures in Dadaab where reported cases have seen an increase in the past few weeks. In response, the operation has scaled up RCCE activities focusing its sensitization efforts on encouraging community-based surveillance, uptake of routine services and continued care for those with chronic conditions.

With the rise of reported cases in refugee camps in the region and several deaths, operations are continuously reviewing their response mechanisms. In **Uganda**, for example, while in most settlements and in the urban areas, child protection actors have been operational with full staffing in place, due to current increase in COVID-19 cases and the death of two refugees, some locations have reduced staffing requiring a review of outreach procedures, identification, remote case management and community-based engagement. The adjustments have highlighted the need for service providers to have a contingency plan in place for any potential eventual changes in access to at-risk refugee children and other persons of concern to UNHCR.

Voluntary repatriation of **Burundian** refugees from **Tanzania** has continued with 1,270 Burundians returning between 4-18 August. Additional health screening measures and protocols have been put in place and UNHCR and partners continue to expand the reception capacity at transit centers in Burundi while reinforcing COVID-19 prevention measures including testing upon arrival.

Strengthening and seeking innovative approaches to **Risk Communication & Community Engagement** and disseminating information to persons of concern.

Continuing to strengthen and empower community-based structures to address **sexual and gender-based violence and child protection.**

Continue to adapt and strengthen provision of **Mental Health and Psychosocial Support** to persons of concern through various means.

## Education

**Some 1.1 million refugee students have been out of school since the start of the COVID-19 pandemic. While a number of initiatives have been implemented including putting classes online, broadcasting over radio and distributing printed study packs, reaching scale with distance learning programmes has proven challenging. As schools reopen in the region, UNHCR and partners are faced with the need to mitigate risks by increasing WASH facilities and ensuring additional learning spaces.**

Most schools continue to remain closed across the region. **Tanzania** reopened schools in two phases in June and has been observing lower attendance rates compared with pre-COVID. In **Burundi**, where schools have remained open throughout the COVID-19 period, the semester has ended, and students are now on official breaks. In countries where schools are closed, efforts remain underway to announce school reopening dates, develop the necessary guidelines, and prepare schools to re-open, including through targeted back-to-school campaigns. **Djibouti, Rwanda, Somalia, South Sudan** and **Sudan** are set to reopen schools in September. In **Sudan**, UNHCR is currently working on organizing a safe return to school with the Ministry of Education, who is itself working on establishing protocols, which will likely include some children physically attending school while others attending remotely from home. UNHCR is collecting data from all field location to establish what support will be needed to make these arrangements feasible for learning during the ongoing COVID-19 situation.

**Kenya**, which had previously planned to reopen schools on 1 September, moved the school reopening date to January 2021 due to the escalating COVID-19 cases in the country. **Ethiopia, Eritrea** and **Uganda** have not yet set dates for school reopening.

UNHCR continues to support distance learning initiatives across the region. In Kakuma, **Kenya**, live radio lessons for pre-primary, primary and secondary school students are currently provided. Eight teachers support the broadcasting of lessons by presenting live radio sessions. Kakuma has also trained 100 female teachers on peer mentorship. Each of the teachers has been tasked to map out 10-25 adolescent girls who live within their areas of residence and provide mentorship to them and encourage them to connect to radio lessons. This is in a bid to ensure protection of girls from abuse during this school closure.

## Health

**Major health challenges include the immediate availability of equipment necessary to detect, test and treat complicated cases, medical and PPE supplies and adequate quarantine facilities, as well as the feasibility of practicing physical distancing at the community level.**

*The geographical locations of refugee and IDP locations and their proximity to borders pose challenges for the COVID-19 response. The movement of refugees, new arrivals and pendular movements complicate required testing. The limitation of some national responses has been observed, including excessive centralization and lack of testing in remote areas.*

In **Burundi**, various challenges have been observed in terms of COVID-19 prevention measures and infrastructure. The Nyabitare transit centre, currently used for Burundian returnees from Tanzania, does not have adequate COVID-19 prevention infrastructure with quarantine centers especially lacking. Until now, no COVID-19 positive cases have been reported among the returnees transiting through this center, however, preparedness for such an eventuality is critical.

Testing and treatment for refugees also continue to be a challenge in the region. In **Ethiopia**, the most impacted country, there is no testing capacity in the Afar and Melkadida refugee-hosting areas, requiring tests to be sent to Addis Ababa, which delays the results. In **Kenya**, the turnaround time for relaying laboratory results remains long, as there is no testing capacity in the refugee camps. The operation has initiated the procurement of GeneXpert machines and testing cartridges to enable testing for COVID-19 in the refugee camps and the host communities. However, there are severe shortages of test kits and machines globally and the arrival date of the equipment is unknown. In **Rwanda**, the construction of the COVID-19 treatment center in Nyamagabe District was completed. The center will be used to treat cases that will be identified in Kigeme and Mugombwa refugee camps as well as hosting community. The establishment of additional treatment centers will continue first in Mahama camp, and then in the remaining camp in the country.

## Water, Sanitation and Hygiene (WASH)

**Emphasis remains on blanket prevention activities in camps and working with the health sector to assess and prepare for WASH needs and infection prevention control in identified health structures to isolate and treat COVID-19 patients.**

*WASH prevention activities targeting all camp populations, such as increased water supply, provision of soap for handwashing and public awareness activities are progressing throughout the region. The replenishment of hygiene material requires longer term planning and additional funding as the timeline of the pandemic continues to extend.*

In **Sudan**, a soap distribution was conducted in Al Kafasha and Jouri camp (White Nile State) to 15,000 South Sudanese refugees from 26 July to 11 August through the Catholic Agency for Overseas Development (CAFOD) and Sub-Saharan International Development Organization (SIDO). In Elghaba IDP area (West Darfur), NFI kits were distributed to 400 IDPs together with the Sudanese Red Crescent Society (SRCS). In Shagarab camp (East Sudan), 61 refugees received plastic sheets from SRCS.

In **Tanzania**, a COVID-19 WASH assessment was conducted in all refugee camps to assesses COVID-19 preparedness and practices at schools. The assessment covered 29 schools and Child-Friendly Spaces in Nyarugusu, 22 in Nduta and 8 in Mtendeli. The assessment revealed a need for age-friendly Information Education Communication (IEC) materials and additional latrines and hand washing points. It was also noted that practicing social distancing is currently challenging as the student numbers are high and classroom space limited. The installation and monitoring of handwashing stations continues across all camps. Currently, there is a cumulative total of 2,554 handwashing points across the three refugee camps, including tippy taps with 5L jerry cans, and various sizes of buckets/tanks with taps at strategic locations. To ensure that the families continue with the recommended handwashing practices, distribution and monitoring of soap usage at washing stations continues. During the reporting period, a total of 678,938 kgs of soap bars were distributed.



*Nyawech is a 17-year-old South Sudanese refugee and member of the adolescent girls' club in Nguenyiel Camp, Gambella Region. She is seen here demonstrating handwashing steps to prevent infection through handwashing. UNHCR Ethiopia.*

## Inter-agency Coordination

Operations are working closely with UN Country Teams, Resident Coordinators and the World Health Organization on crisis management, personnel and business continuity arrangements, program criticality, preparedness, and response planning. Existing refugee response coordination structures continue to function, through virtual communication where relevant.

At the regional level UNHCR is engaged with the Regional Humanitarian Partners Team (RHPT) to map the impact on humanitarian operations and coordinate on advocacy messaging, as well as with many sectoral groups including health, nutrition, education, and child protection which have been developing context specific inter-agency guidance on programming during the COVID-19 pandemic.

A recent RHPT meeting took place on 5 August where highlights of the humanitarian funding flows, including IASC commitments to unlock funding to NGOs and proposals for a harmonized approach to funding flexibility were discussed. Interventions were also made on the situations in South Sudan and Sudan, World Humanitarian Day and the COVID-19 response.

## Funding needs

The second revision of the [Global Humanitarian Response Plan](#) was launched on 16 July with overall funding requirements rising to \$10.3 billion, with the inclusion of additional country response plans and other increased needs.. UNHCR's revised requirements of US\$745 million reflected in the revised May [Global Humanitarian Response Plan](#) (launched on 7 May seeking US\$6.7 billion) remain unchanged.

UNHCR's [Revised Emergency Appeal](#) detailing the country and sectoral breakdown of UNHCR's global budget requirements was launched on 11 May. Within the revised appeal, \$126 million has been requested for ten countries in the East and Horn and Great Lakes Region.

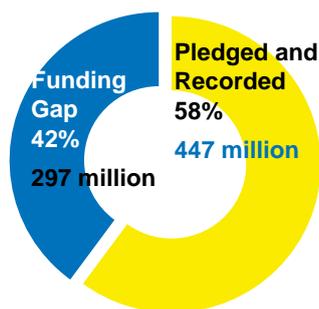
The initial [Global Humanitarian Response Plan](#) was launched on 25 March seeking US\$2.01 billion, and which included US\$255 million for initial, prioritized requirements in UNHCR's operations in affected countries.

**USD 745 million requested by UNHCR in the revised inter-agency Global Humanitarian Response Plan**

**USD 126 million requested for 10 countries in the East and Horn of Africa and Great Lakes region**

## Funding

USD 745M requested for UNHCR's COVID-19 response globally:



### Total contributed or pledged to the COVID-19 appeal

**USD 447M** including:

United States \$186M | Germany \$61M | EU \$44M | UK \$25M | Japan \$23.9M | African Development Bank \$18M | Denmark \$14.6M | UN Foundation \$10M | CERF \$6.9M | Canada \$6.4M | Education Cannot Wait \$3.6M | Qatar Charity \$3.5M | Spain \$3.4M | France \$3.4M | Ireland \$3.3M | Sweden \$3M | Sony Corporation \$3M | Austria \$2.5M | Finland \$2.3M | Unilever (UK) \$2M | Latter-day Saints Charities | UNO-Fluechtlingshilfe \$1.7M | Private donors UK \$1.7M | Norway \$1.4M | USA for UNHCR \$1M

### Unearmarked contributions to UNHCR's regular global programmes:

Sweden 76.4M | Norway 41.4M | Private donors Spain 39.8M | Netherlands 36.1M | Denmark 34.6M | United Kingdom 31.7M | Germany 25.9M | Private donors Republic of Korea 20.5M | Switzerland 16.4M | France 14M | Private donors Japan 11.7M

## Links:

### UNHCR COVID-19 Platform: [Temporary Measures and Impact on Protection](#)

Click [here](#) to access a [live dashboard](#) providing information on COVID-19 cases in the region, as well as travel restrictions and movement and border controls put in place by Governments.

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