

# **Southern Africa**

6 August 2020

## **Highlights**

Since the beginning of UNHCR's COVID-19 response in Southern Africa



**1,885** health workers trained on COVID-19 prevention and response



**4,363** additional hand washing facilities established



**329,345** households received soap for handwashing to prevent COVID-19



A refugee makes soap to help fight COVID-19 in Inke refugee camp, Democratic Republic of the Congo. ©UNHCR/ Claris Neh Mokom Achu

# **Population Figures**

**9,487,326** people of concern to UNHCR in Southern Africa, including



769,160 refugees and 312,157 asylum-seekers



6,212,334 internally displaced persons (IDPs)



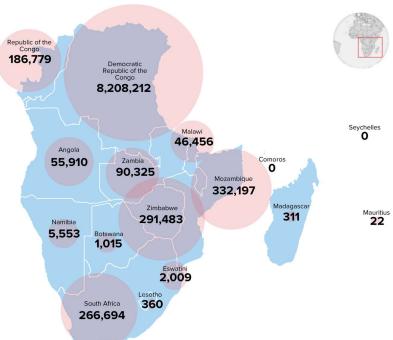
2,134,349 IDP returnees and 23,248 refugee returnees



36,078 other people of concern

(as of 5 August 2020)

## People of Concern to UNHCR in Southern Africa





## **Operational Context**

As of 4 August 2020, there are a reported 566,991 confirmed cases of COVID-19 in the 16 countries covered by UNHCR's Regional Bureau for Southern Africa. This represents a 30 per cent increase in cases over a two-week period. 92 per cent of all reported cases in the region are in South Africa, which is now 5th highest in the world in terms of COVID-19 cases.

Governments across the region continue to take precautionary measures to limit the spread of the virus, though many of the stricter measures, such as lockdowns, movement restrictions, and closure of borders, schools and shops, have been gradually eased in recent weeks. However, as case numbers have started to rise sharply in some countries, restrictions are being re-introduced in an effort to curb the upward trend.

UNHCR is working with governments, World Health Organization and other UN agencies and NGOs to secure the inclusion of people of concern - refugees, internally displaced persons (IDPs) and stateless people - and host communities in preparedness and response measures for COVID-19.

UNHCR and partners have committed to a 'stay and deliver' approach, continuing to provide critical services and assistance while adopting social distancing and other COVID-19 mitigation measures. This includes implementation of strict health protocols at distribution points, the use of hotlines to report protection issues and assistance needs, and support to virtual and distance learning and capacity building. UNHCR has also been expanding its outreach efforts in the region with the support of partners and community volunteers to spread the message among persons of concern and their host communities about COVID-19 prevention and services.

## **UNHCR** Response

### **Health and WASH**



**3,356** additional handwashing facilities established since March 2020 in the **Democratic Republic of the Congo** 



**485** health workers trained on COVID-19 prevention and response in **Zambia** since March 2020

UNHCR and partners continued health activities across the region to prevent and respond to COVID-19. This includes training for health workers and community volunteers, such as in **Zambia** where 185 individuals were trained in community health mobilization for COVID-19. Facilitated by the Ministry of Health in collaboration with UNHCR, training sessions were held in Mayukwayukwa refugee settlement for 65 health workers, as well as 60 community volunteers and 60 community leaders. Since the beginning of the COVID-19 response, UNHCR has supported training on COVID-19 for 485 health workers in Zambia.

In **Zimbabwe**, UNHCR has stepped up the health response in Tongogara refugee camp by increasing the frequency of doctor visits from Chipinge District Hospital to the Tongogara clinic, now taking place on a weekly basis. This is particularly critical during the COVID-19 pandemic to ensure that more refugees and asylum-seekers receive timely health services, and is also important because referrals to the district, provincial and central hospitals are limited to emergency and critical cases. UNHCR's partner also installed two hand washing stations at the entrance of an isolation centre and a quarantine centre in Tongogara refugee camp as a preventive measure against COVID-19. Since the beginning of the COVID-19 response UNHCR has supported and equipped four health centres, one isolation centre and one quarantine centre in Zimbabwe.

UNHCR also continued to step up hygiene promotion across the region with a focus on distributing soap for hand washing as well as providing hand sanitizers in communal spaces. For example, at the Malindza Refugee Reception Centre in **Eswatini**, all households living in the centre – 411 individuals, or 122 households – received 500ml bottles of hand sanitizers to ensure regular disinfecting to reduce the possible spread of COVID-19 in the communal space.



In the **Democratic Republic of the Congo (DRC)**, UNHCR has been providing soap to refugees, IDPs and host community members, complemented by distribution of hand washing stations in key locations. This includes South Kivu Province, where UNHCR distributed soap to Burundian refugees in Lusenda camp and Mulongwe site, along with 100 hand washing stations donated to medical centres located near Lusenda camp and Mulongwe settlement. In Tanganyika Province, UNHCR distributed 25 handwashing stations and soap to local authorities, while in Kasai Province, UNHCR distributed four handwashing stations and soap at Kalemba Mulumba Health Centre and the Saint Martin de Porres Kawele Health Centre. UNHCR and its partner continued distributing bars of soap to 9,351 IDPs staying in the Bembeyi, Sesele, Nyamazazi, Bahwere and Mbala sites in Ituri Province, and donated 1,500 soap bars to local authorities in areas around displacement sites under UNHCR coordination, who will distribute them amongst the population. Also in Ituri Province, UNHCR distributed 80 hand washing stations in the three displacement sites located in Bunia. Since the beginning of the COVID-19 response in the DRC, UNHCR has provided soap to 102,579 individuals, and installed or donated 3,356 hand washing stations in refugee and IDP-hosting areas across the country.

## **Protection, Communication and Community Engagement**



**15,219** people reached with COVID-19 risk communication since March 2020 in **Zimbabwe** 



**4,624** people reached with SGBV messaging linked to COVID-19 in **Republic of the Congo** since March 2020

Risk communication, awareness-raising and engaging communities in preventing COVID-19 continues to feature in the response across the region, reaching refugees, IDPs and host community members though community-based protection groups and community mobilizers, information sessions, flyers and leaflets, and radio show spots. Over the past two weeks in the **Republic of the Congo (RoC)**, 22,775 people were reached in Gamboma, Betou and Brazzaville, including 6,784 people in host communities, with COVID-19 related messaging. This includes an awareness-raising session in Betou on reducing prevalence of Sexual and Gender-Based Violence (SGBV) in the context of COVID-19 that reached 60 people, as well as awareness campaigns via focus group discussions and community volunteers in Betou, Enyellé, Impfondo and Dongou that reached 8,665 people, including 1,663 from the host community. Since the beginning of the response, UNHCR and partners have reached 88,312 people with messaging on COVID-19 in RoC, and reached an additional 4,624 with specific messaging on SGBV prevention linked to COVID-19.

Risk communication targeting children and youth has been a focus in **Zambia**, where 918 COVID-19 child-friendly prevention posters were distributed in Meheba refugee settlement in Kalumbila district to 12 schools, clinics, and other public places. 200 additional posters were donated by UNHCR to the Kalumbila District Education Board to reach children in the host community as well. So far in Zambia, UNHCR and partners have reached 74,448 people with COVID-19 messaging through various channels, with an additional 21,522 people reached with specific messaging on SGBV risks related to the COVID-19 situation.

In Tongogara refugee camp, **Zimbabwe**, UNHCR, partners and the Ministry of Health strengthened COVID-19 awareness among 300 youth and persons with disabilities through structured small group discussions. In addition, the occasion of firewood distribution in the camp presented an opportunity for COVID-19 outreach, with 610 refugee and asylum-seeker heads of households reached with COVID-19 messages including on signs and symptoms, prevention measures and response measures. UNHCR and partners have reached 15,219 people so far in Zimbabwe with COVID-19 related massaging.

In **Botswana**, UNHCR is mobilizing influential members of the community to help spread the word throughout the refugee community about COVID-19 prevention, including the health regulations they must follow in their host country. UNHCR's partner has engaged both community and religious leaders to educate them on the subject, and also to equip them to share this information with their communities. Approximately 1,114 refugees have so far been reached through both community outreach such as this, as well as door-to-door awareness-raising in Botswana.



### **Education and Livelihoods**



**500** children and youths supported with distance and home-based learning in **Malawi** since March 2020



**26,250** cloth masks produced through a cash-for-work livelihoods programme in **Zambia** 

Livelihoods support and cash assistance is more important than ever given the economic impacts of COVID-19 lockdowns and restrictions in countries in the region. UNHCR has been working to link COVID-19 activities with livelihood opportunities for refugees, asylum-seekers and host communities, as well as working to include refugees and asylum-seekers into livelihood and cash assistance opportunities offered by partners and Government.

For example, in **RoC**, a recently-launched a cash-for-work project for refugees and asylum-seekers has so far produced 17,250 cloth face masks in Betou, and approximately 9,000 in Bouemba. Beginning 3 August, these masks will be distributed to people with specific needs, including refugees and asylum-seekers in Betou and Impfondo.

Meanwhile in **Malawi**, the first and second cohorts of the Digital Inclusion Program are continuing their training online during the COVID-19 pandemic. 15 students have been supported with laptops and mobile WIFI, and are provided with monthly data bundles. Some of the students have already started earning money through online jobs, which has enhanced their livelihood and improved their quality of life, particularly amidst the economic hardships of the COVID-19 pandemic.

Also in Malawi, students in the DAFI programme (Albert Einstein German Academic Refugee Programme) continued to receive their stipends to support online tuition provided by their respective universities, to ensure their studies continue in spite of COVID-19 restrictions. Since the beginning of the COVID-19 response more than 500 students at all levels have been supported with distance and home-based learning in Malawi.

# Challenges

UNHCR, partners and Governments face challenges in terms of pre-positioning medicine, medical supplies and equipment for COVID-19 – including test kits and personal protective equipment – due in part to delays in the delivery of international orders. Slowness and sparse coverage of COVID-19 testing is also a concern, due to shortages of test kits, limited laboratory capacity, and delays in results being shared. This is particularly worrying in camp settings, as well as in low-income areas where people live in close quarters.

Further, months of COVID-19 restrictions have had severe economic impacts on vulnerable populations, including refugees, asylum-seekers and IDPs. Lost income as a result of limitations on movement and economic activity has meant that the number of people requesting assistance from UNHCR has increased significantly, notably among those who had previously been self-sufficient, as they now struggle to put food on the table, pay rent, or cover the cost of utilities.

At the same time, reports of rising xenophobia and stigmatization of refugees has been noted in the region, impacting on the physical safety of POCs as well as social cohesion and peaceful coexistence with local communities. This is not limited to health stigmatization, but also linked to the increasing economic pressures in refugee-hosting areas amidst the impacts of COVID-19 restrictions.



## Financial Requirements

On 7 May 2020, the UN launched a revised inter-agency Global Humanitarian Response Plan seeking US\$ 6.69 billion, which includes US\$ 745 million for UNHCR's operations in affected countries through December 2020 and as reflected in UNHCR's revised Coronavirus emergency appeal. As of 3 August, US\$ 451 million has been pledged and recorded towards UNHCR's appeal.

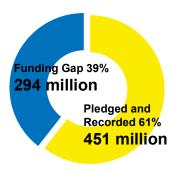
In Southern Africa, US\$ 31.2 million is needed under the revised Coronavirus emergency appeal. As of 3 August 2020, the region has received earmarked funding totalling nearly US\$7.1 million, accounting for approximately 23% of financial needs. The Regional Bureau for Southern Africa is grateful to donors who have earmarked contributions to operations in the Southern Africa region for COVID-19 response, including the United States of America (USA), UN Malawi SDG Acceleration Fund and private donors.

# GLOBAL CONTRIBUTIONS AND PLEDGES TO THE UNHCR COVID-19 APPEAL | US\$

USA 186M | Germany 62.7M | EU 44.6M | UK 31.5M | Japan 23.9M | African Development Bank 18.3M | Denmark 14.6M | United Nations Foundation 10M | Private donors 8.7M | CERF 6.9M | Canada 6.4M | Qatar Charity 3.5M | Spain 3.4M | France 3.4M | Ireland 3.3M | Sweden 3M | Sony Corporation 2.9M | Austria 2.5M | Finland 2.4M | Unilever 2M | Education Cannot Wait 1.8M | UNO-Flüchtlingshilfe 1.7M | Norway 1.4M | USA for UNHCR 1M

UNHCR is also grateful to the donors that have provided unearmarked support. 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.

Global Financial Requirements: UNHCR Coronavirus Emergency Appeal



#### **UNEARMARKED CONTRIBUTIONS | US\$**

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 | France 14M | Private donors Japan 11.7M

#### **CONTACTS**

- Joan Allison, Head, External Engagement, Regional Bureau for Southern Africa, allison@unhcr.org
- Miranda Gaanderse, Reporting Officer, Regional Bureau for Southern Africa, gaanders@unhcr.org