Southern Africa
15 October 2020

Highlights

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

- 2.5 million people reached with COVID-19 risk prevention messaging
- 53,808 families received additional relief items as a result of COVID-19
- 4,709 additional handwashing facilities installed to help prevent COVID-19

Population Figures

9,522,639 people of concern to UNHCR in Southern Africa, including

- 766,099 refugees and 312,419 asylum-seekers
- 6,445,709 internally displaced persons (IDPs)
- 1,938,223 IDP returnees and 23,250 refugee returnees
- 36,485 other people of concern

(as of 14 October 2020)
Operational Context

As of 12 October 2020, there have been 796,080 reported confirmed cases of COVID-19 in the 16 countries covered by UNHCR’s Regional Bureau for Southern Africa. While case numbers continue to increase, the rate has slowed as compared to recent weeks, with a three per cent decrease in total active cases. Governments of some countries in the region continue to ease restrictions that were put in place to limit the spread of COVID-19, such as lifting lockdowns and movement restrictions opening of international borders, and reopening schools, shops, and other businesses. In most cases, basic prevention measures, such as mask wearing, screening and hand sanitizing in public spaces remain in place.

Throughout the pandemic, UNHCR and partners have committed to a ‘stay and deliver’ approach, continuing to provide critical protection services and assistance. Programmes have been adapted to observe social distancing and other COVID-19 mitigation measures, health protocols are in place at registration and distribution points, hotlines and community protection structures are utilized to report protection issues and assistance needs. UNHCR has focused heavily on risk communication and outreach efforts to spread information about COVID-19 prevention and services. Health systems strengthening has also been a priority, by equipping health centres and training health workers, and establishing isolation and quarantine centres to reduce the risk of transmission, particularly in camps. Additional handwashing facilities have been installed and additional soap has been distributed to promote good hygiene practices and reduce the risk of spreading COVID-19. UNHCR has also been providing cash assistance and core relief items (CRIs) to those worst impacted by lockdowns and other restrictions, while children and youth have been supported with virtual and distance learning to continue with their studies.

At the same time, UNHCR continues working closely with governments, the World Health Organization and other UN agencies and NGOs to promote and secure the inclusion of people of concern into preparedness and response measures for COVID-19. Given the serious impacts that COVID-19 regulations have had on livelihoods and economic opportunities, including for people of concern – refugees, asylum-seekers, internally displaced people (IDPs) and stateless peoples – in social safety nets and other social assistance programmes is particularly critical.

UNHCR Response

Health and WASH

UNHCR and partners continued efforts to strengthen health systems and services across the region to prevent and respond to COVID-19. In the Republic of the Congo (ROC), UNHCR provided technical support for a mass COVID-19 testing campaign, rolled out by the Ministry of Health. The campaign tested 149 people in Betou to identify cases and reduce the spread of the virus. In addition, UNHCR installed 5 refugee housing units (RHUs) in Impfondo, to serve as isolation centres for COVID-19 case management. A total of 30 RHUs have been installed across various zones of operation to support the health response. Meanwhile in the Democratic Republic of the Congo (DRC) UNHCR and partners screened 13,182 people with thermometers at 15 different points in four camps in Nord and Sud Ubangi Provinces, and 2,650 people in Haut-Uele Province. A total of 248,688 people have been screened through this initiative since the beginning of UNHCR’s COVID-19 response.

Support to water, sanitation and hygiene (WASH) systems remains a priority in Southern Africa, as a key element in the fight against the spread of COVID-19. In Zimbabwe, UNHCR’s WASH partner continues to ensure that Tongogara refugee camp has consistent water supply for both regular consumption and increased handwashing during the COVID-19 pandemic. UNHCR and partners have focused particularly on increasing water supply to
critical areas such as the clinic, quarantine and isolation centres. A total of 50 additional handwashing facilities have been installed since the beginning of the COVID-19 response. To reduce the possible spread of infection, communal water points were disinfected, while clean-up exercises are ongoing in the camp to ensure good environmental health and hygiene. UNHCR also continued to support the expansion of sanitation infrastructure in the camp, with 99 latrines under construction during the reporting period, and 68 completed. Meanwhile in Zambia, UNHCR focused on enhanced water supply to help in the prevention of COVID-19, beginning the rehabilitation of boreholes equipped with hand pumps in Mayukwayukwa refugee settlement. In Meheba refugee settlement, UNHCR’s partner conducted training for health and hygiene promoters in the settlement and host community in order to strengthen their engagement with the community, reaching. The activity is in support of the Community-Led Total Sanitation initiative, reaching 9,750 people.

Under the WASH response in ROC, UNHCR’s partner disinfected 56 offices and public services frequented by refugees and host populations. This activity was carried out to reduce the risk of the spread of COVID-19 and preserve the health of the population. In addition, 900 pieces of soap and 73 hand washing kits consisting of plastic bowls and kettles were distributed to refugees and asylum-seekers in Ipengbélé. UNHCR has provided 23,485 people with additional soap for handwashing during the COVID-19 response. Similarly, in the DRC, UNHCR and partners distributed 2,000 bars of soap to refugees across the country over the past two weeks, totalling 266,323 bars of soap that have been distributed to refugees, displaced people and host community since the beginning of the COVID-19 response. UNHCR also continues to monitor the use of water points and 153 handwashing stations set up across four camps in Nord and Sud Ubangi provinces to encourage regular handwashing by refugees. Across the country, UNHCR has installed 3,400 additional handwashing stations since the beginning of the COVID-19 response.

Protection, Communication and Community Engagement

7,062 people reached with COVID-19 risk communication since March 2020 in Angola

19,320 people reached in Zimbabwe with COVID-19 prevention messaging since March 2020

Risk communication and awareness-raising on COVID-19 continues across the region, reaching refugees, IDPs and host community through community-based protection groups and community mobilizers, information sessions, flyers and leaflets, reaching about 2.5 million people across the region. The region’s largest campaign continued in the DRC reaching nearly 1.6 million people since March 2020, not including those reached via radio messaging. In North Kivu Province, more than 4,130 people were reached with messages about COVID-19 by community-based protection groups. Eight radio messages were also broadcast. In South Kivu Province, door-to-door awareness raising campaigns took place as well as radio broadcasts in Swahili and Kirundi languages, reaching Burundian refugees as well as the host population. In addition to these radio spots, UNHCR and its partner distributed almost 30,000 leaflets on COVID-19 in camps, sites and reception structures in order to promote positive behaviour change in terms of hygiene practice and social distancing.

In Lóvua refugee settlement, Angola, 3,233 people, including 303 students have been reached with COVID-19 prevention messaging over the past two weeks, including through an initiative by refugee journalists who provide daily updates through the Lóvua refugee settlement community radio about COVID-19 data. 49 mental health awareness sessions related to COVID-19 were also carried out, reaching 619 people of concern. Since the beginning of the COVID-19 pandemic, UNHCR has reached 7,062 people, including in host communities, with messaging on COVID-19. Meanwhile in ROC, UNHCR’s partner continued community-based outreach and epidemiological surveillance activities on COVID-19 through door-to-door visits. The outreach teams visited 105 households in Bouemba, 225 households in Djambala, and 105 households in Gamboma, reaching both refugee and host community households. In Tongogara refugee camp, Zimbabwe, the health team and community health workers conducted COVID-19 awareness-raising campaigns in all 10 sections of the camp. The sessions aimed to reinforce adherence to COVID-19 prevention measures despite relaxation of lockdown measures. 3,974 people were reached. In addition, 9,406 people were reached through film screenings and other communication channels in schools, markets and food distribution sites. Overall, 19,320 people have been reached with COVID-19 risk communication and awareness-raising messages by UNHCR and partners in Zimbabwe.
**Assistance**

- **16,508 families reached with additional relief items for COVID-19 in the Democratic Republic of the Congo**
- **1,921 people received hand sanitizer in Eswatini since March 2020 to prevent the spread of COVID-19**

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. In the DRC, UNHCR and partners distributed core relief items (CRIs) to refugees from Central African Republic and their host communities to improve their living conditions at a time of dwindling resources and price hikes due to COVID-19 restrictions. This included soap, kitchen sets, mosquito nets and blankets to 400 refugee and 200 host community households living out of camp in Mobaye, Nord Ubangi Province. Overall, UNHCR and partners have distributed CRIs to 2,550 households in Nord Ubangi. Since the beginning of the COVID-19 response, UNHCR has provided additional relief items to 16,508 households.

In Malindza refugee reception centre, Eswatini, 388 people were provided with hand sanitizers, and five staff members were provided with disposable face masks. So far in the COVID-19 response, 1,921 people have received hand sanitizers from UNHCR and partners. Further, due to COVID-19, many families have lost their income and face challenges covering the cost of school fees for their children. Through its partner, UNHCR covered school fees for 119 children so that their studies are not disrupted. Meanwhile in Mayukwayukwa refugee settlement, Zambia, 50 people of concern and host community members received monetary support to engage in agricultural production. This comes after a month-long process of capacity building in business plan formulation and technical skills training. The initiative is expected to help the beneficiaries mitigate the impact of COVID-19 on their livelihoods.

**Refugees giving back: Somali refugees support host community during COVID-19**

The Somali business community in South Africa launched a care and compassion campaign as COVID-19 lockdown began, to help vulnerable people. They distributed masks, hand sanitiser and food parcels to residents of informal settlements in Pretoria and Johannesburg, then moved on to other parts of the country. As the pandemic continues to affect more and more people in the country, including those in refugee-hosting communities, the Somali initiative is making an important impact.

A Somali refugee business-owner hands an assistance package to a South African man during a distribution in Pretoria. ©UNHCR/ H. Caux
Challenges

UNHCR, partners and governments are still grappling with the challenge of securing adequate stocks of medicine, medical supplies and equipment for COVID-19 due to delays in delivery of international orders and lack of local providers. Slowness and sparse coverage of COVID-19 testing remains an ongoing concern, linked to shortages of test kits, limited laboratory capacity, and delays in results being shared. Gaps in testing not only has negative implications for the transmission chain, but also makes contact tracing difficult.

While UNHCR and partners have been working tirelessly to reach people of concern and host communities with scaled-up assistance and services during the COVID-19 pandemic, funding shortfalls across the region have had a notable impact on operations. For example, funding gaps have resulted in cuts to radio programming in UNHCR’s risk communication campaign in the DRC, hindered UNHCR’s ability to provide the necessary resources for home-based learning in Zambia, and halted UNHCR’s high-demand cash assistance programme in South Africa. Nearing the end of the year, additional funding is still required to sustain critical COVID-19 programming, maintain important protection and basic service delivery, and increase support to livelihoods and self-reliance programming for people of concern economically impacted by COVID-19.

Financial Requirements

On 7 May 2020, the UN launched a revised inter-agency Global Humanitarian Response Plan seeking USD 6.69 billion, which includes USD 745 million for UNHCR’s operations in affected countries through December 2020 and as reflected in UNHCR’s revised Coronavirus emergency appeal. As of 14 October, USD 465 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 14 October 2020, the region has received earmarked funding totalling USD 8 million, accounting for approximately 26 per cent of financial needs. The Regional Bureau for Southern Africa is grateful to donors who have made contributions to operations in the Southern Africa region for COVID-19 response, including the United States of America (USA), European Union, Unilever, Education Cannot Wait, UN Malawi SDG Acceleration Fund and private donors.

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<tr>
<th>MAJOR CONTRIBUTIONS TO UNHCR’S GLOBAL COVID-19 APPEAL</th>
<th>USD</th>
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<td>USA 186.3M</td>
<td>Germany 62.7M</td>
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UNHCR is also grateful to the donors that have provided unearmarked support to UNHCR’s global programme in 2020. 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.

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<tr>
<th>UNEARMARKED CONTRIBUTIONS TO UNHCR’S GLOBAL 2020 PROGRAMME</th>
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<td>Sweden 76.4M</td>
<td>Private donors Spain 59.9M</td>
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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