Putting People First
UNHCR’s Accountability to Affected People and COVID-19

With restrictions on movements and access to refugees, asylum-seekers, IDPs and stateless persons across the globe, UNHCR operations in the field are leveraging new technology and through their community-based protection approach expanding partnerships with community leaders, influencers and volunteers to ensure continued participation, inclusion, communication, feedback and response.

UNHCR’s Accountability to Affected People (AAP)
People at the Centre of UNHCR’s response to the COVID-19 pandemic

AAP has never been more important than in the context of the COVID-19 pandemic. A wealth of evidence points to the importance of systematic, meaningful community engagement in the communication of risks, prevention, services and treatment during outbreaks.

Furthermore, physical distancing has required UNHCR to draw on its adaptive capabilities, leverage diverse channels and modalities of communication and rapidly scaling up emerging practices to ensure staff, partners and communities can continue to deliver during this exceptionally challenging time.

Across the globe, UNHCR and partners are leveraging new technology and expanding on partnerships with persons of concerns and host communities – through leaders, influencers, volunteers and community-based organizations. Below are just a few of many examples of how UNHCR is keeping people first in its response to COVID-19.

Assessing the Changing Needs: MENA
In Amman, UNHCR has worked closely at the inter-agency level with UNICEF and WFP to develop a survey to assess the changing needs of the community in Jordan in light of COVID-19. Results will help inform the response.
Participation and Inclusion

Women, men, girls and boys of diverse backgrounds are able to engage meaningfully and are consulted on protection, assistance and solutions.

In Colombia, UNHCR offices are holding virtual focus group discussions with affected communities, where UNHCR can hear the concerns and priorities of persons of concern. Refugees in Niger have been producing soap. UNHCR has supported members of displaced and host communities in Southern Africa, refugee women in Ukraine and refugees in Brazil, with training and materials to produce face masks. This is increasing access to face masks within the community and supporting income generating activities.

UNHCR has reached out to all refugees known to have a medical background in Lebanon and more than 450 confirmed their interest to contribute as Community Health Volunteers with COVID-19 awareness.

In Bangladesh, community volunteers share back information to UNHCR on critical sectoral activities and the protection needs of the community.

IDPs in Central and Western Ukraine are actively involved in the COVID response, including by coordinating with local authorities, volunteering to help distribute groceries and conducting psychosocial support classes.

In the Democratic Republic of Congo (DRC) and Mozambique, community protection focal points and committees have been provided with mobile phones and credit to undertake protection monitoring in IDP communities.

In the Central African Republic, returnee community leaders worked with different actors to develop a radio communication strategy.

In several operations around the world, LGBTI focal points maintain regular contact with LGBTI persons of concern, providing daily updates on the impact of COVID-19.

In France, a network of refugee volunteers is working with UNHCR and NGOs to share information and promote virtual activities for persons of concern to maintain social ties.

Elected leaders in Palorinya refugee settlement in Uganda are engaging with youth taskforces, children and teachers to conduct awareness-raising campaigns on COVID-19.

Refugee-led community groups in Egypt have started producing their own awareness materials about COVID-19, including messages on psychological first aid. The materials are produced in the relevant community languages.

In Nigeria, UNHCR is working closely with Government entities and community volunteers to ensure that messages about COVID-19 are contextualized and accessible. The community is active in providing input and feedback on the relevance of the messages.

UNHCR in Malaysia is working closely with refugee women-led initiatives to expand the availability of psychosocial support and to reinforce community focal point systems.

IN BRIEF

The Global Refugee-led Network (GRN) facilitated a discussion with more than 100 refugee-led organisations (RLOs) to discuss the direct and indirect impact of COVID-19 on refugees, and to exchange examples of RLO contributions.

Members of the Global Youth Advisory Council (GYAC) are working with local organizations to distribute food to vulnerable populations and make masks in Colombia, Cameroon, Pakistan, Germany, Kenya, Australia and Mexico.
Communication and Transparency

Women, men, girls and boys of diverse backgrounds have access to timely, accurate and relevant information.

A multilingual information portal has been established in Italy, where persons of concern have access to information on COVID-19 in 15 different languages, as well as health advisories, regulations and movement restrictions, administrative procedures and services.

In Central America and Mexico, the UNHCR-led Facebook page, Confía el Jaguar has developed social cards that are providing updated information on COVID-19 to refugees and migrants.

UNHCR supports a refugee-managed Facebook group in Lebanon, where rumours, scams and fake news are flagged. The operation also communicates directly with over 9,000 refugees through a sophisticated Whatsapp tree.

Community health workers in Tanzania raise awareness in camps through public address systems and megaphones.

The operation in Zambia partnered with local musicians to produce COVID-19 prevention radio and social media messages for the host and refugee communities, while the refugee community in Malawi are using a community radio station to disseminate information.

In Cote d’Ivoire, Whatsapp, text messages and radio stations have been used to disseminate information on COVID-19 to persons of concern and host communities in local languages.

In Ecuador, the operation partnered with the Latin American Network of Organizations of Persons with Disabilities (RIADIS) who provided materials for persons with disability to raise awareness on COVID-19.

Risk mitigation and hygiene videos featuring persons of concern that were developed in Italy, Austria and Sweden have been well received by persons of concern.

The Turkey UNHCR Facebook page, with over 57,000 followers, receives and responds to questions and posts COVID-19 awareness videos in Arabic and Farsi.

In the Bidi Bidi settlement in Uganda, motorcycle taxis (Boda Bodas) drive around with loud-speakers playing pre-recorded messages about COVID-19 in relevant languages.

In Mauritania, Morocco, Algeria, Tunisia, Libya, Egypt, Jordan, Lebanon, Iraq and Kuwait, protection hotlines and call-in mechanisms have allowed hundreds of thousands of people to stay in touch with UNHCR, and access information and protection. In Jordan, the call centre received over 200,000 calls in just one month.

UNHCR has worked with Solidarity Now to develop podcasts in five different languages for persons of concern in Greece.

In DRC, UNHCR is contributing to raising awareness about COVID-19 through seven local radio stations in relevant, local languages.

Refugee youth have been active in developing and disseminating prevention messages to children and youth in Austria, Zimbabwe and Morocco.

Reaching audiences in the East and Horn of Africa as well as Somali and Eritrean diaspora, Telling the Real Story has worked with refugee youth, including artists, and diaspora community leaders to develop myth busting messaging on COVID-19.

In West and Central Africa, UNHCR, together with IOM, launched an interactive platform of community engagement tools for frontline workers and affected communities. The platform has easily adaptable tools in over 30 languages and involves local influencers.
Feedback and Response

All women, men, girls and boys of diverse backgrounds will have access to feedback and response systems, including for confidential and sensitive complaints, such as instances of sexual exploitation and abuse (SEA).

In the Americas, after receiving feedback and information on false rumours circulating, offices in Panama, Colombia and Ecuador adapted their messages to dispel these rumours, disseminating their messages through a wide range of communication channels.

Uganda has an inter-agency hotline and email account to enable persons of concern different channels for feedback and complaints.

In West and Central Africa, UNHCR operations have been using tablets, smart phones and outreach volunteers for distance monitoring, receiving information from and sharing information with persons of concern. They have also mobilized street artists, performers and other social influencers to implement two-way communication strategies.

In Cameroon, remote GBV service provision was established through a 24/7 hotline and an existing network of 110 community focal points and trained social workers. Also allowing for persons of concern to report sexual exploitation and abuse.

In Guatemala, persons of concern send written, audio, and video feedback to UNHCR, providing insight on the impact of COVID-19 on their lives.

In Angola, community mental health and psychosocial support agents in Lovua settlement have consulted groups of refugees about their knowledge, perceptions and behaviours concerning COVID-19. The feedback received will help identify risks and practices, and will help design interventions and campaigns.

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Hotlines in Turkey and Egypt have maintained services in all relevant languages to ensure persons of concern continue to have access to a complaint mechanism in their own language.

Community volunteers in Tanzania have been trained on providing information but also collecting feedback from the community to share through WhatsApp to UNHCR and partners.

In Malta, UNHCR and partners have set up new helplines in response to COVID-19, which are supported by interpreters covering various languages and can receive calls, voice messages, SMS and WhatsApp messages.

In Lebanon, UNHCR has been able to collect and analyse feedback from persons of concern from phone calls, emails, Facebook, outreach volunteers and protection monitoring to understand the needs and priorities of persons of concern and adapt the response.

Organizational Learning and Adaptation

Across the globe, UNHCR operations are adapting programmes and strategies in response to the evolving situation of the COVID-19 pandemic. They are encouraged, as much as possible, to adapt in line with input from persons of concern and to document lessons learnt from continuous engagement with communities of concern.

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