Communicating with Communities during COVID, and what are they telling UNHCR?

April 2020

Across the Middle East and North Africa (MENA), the protection and poverty impact of COVID-19 on vulnerable people and those living in the economic margins of society has been devastating. Among them, refugees, asylum-seekers, IDPs, stateless persons and many others are unable to make ends meet. For instance, the majority of refugees and IDPs live below the poverty line in this region. Many of those who had previously coped without cash assistance are now increasingly desperate, entering further into debt and spiralling into poverty. They are facing difficult choices such as reducing meals, sharing overcrowded shelters and missing rental payments, leaving them at risk of eviction.

UNHCR and partners have continued to stay and deliver protection and assistance. Remote protection services, assistance and cash programming are proving to be essential tools. Cash programming is enabled by the innovative banking delivery systems already in place, supported by beneficiary authentication designed to prevent fraud, and by measures ensuring physical distancing and hygiene measures during distribution and payment.

Physical distancing and movement regulations have also had an impact on how UNHCR reaches out to refugees and other forcibly displaced persons, and vice versa. Two-way communication is crucial to address social isolation and distress, and to ensure programmes are responsive and tailored to the needs of diverse groups. Refugees, asylum seekers, IDPs and others need to be able to reach UNHCR, ask questions, and convey their priorities. This is in particular for those who often do not have a voice – people with specific needs and profiles, such as women and girls, members of the LGBTI community, people living with disabilities, persons with mental health and psychosocial distress, ethnic minorities, older people, unaccompanied children, people living with HIV and other chronic diseases, as well as stateless persons who may already be less visible by virtue of their legal status.

While face-to-face methods may be restricted, virtual and remote tools are being adapted and enhanced to allow UNHCR and partners to deliver protection services and information in multiple languages, and with them identify persons at risk, design services and engage the broader host community.
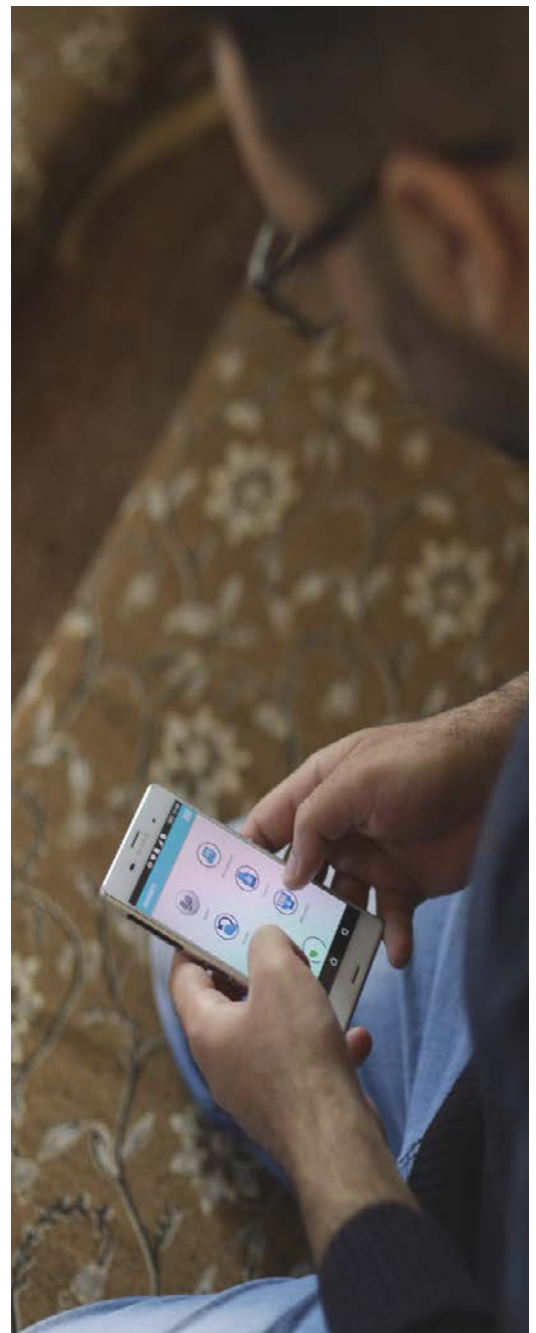
Refugees are using mobile devices and applications to stay in touch. Photo by UNHCR / Lilly Carlisle

Over 350,000 calls received by UNHCR and partner call centres across the region since mid-March lockdowns

Over 5 million SMS with protection, assistance and health and safety advice on COVID-19 sent out since mid-March

Over half [1] of refugee and IDP callers report their **sources of income** have been **lost**

Financial assistance to meet **daily needs** remains the highest ranking request to call-centres

[1] Turkey, Iraq (59%), Egypt (46%), Israel (85%), based on call centre and survey data, using a variety of methodologies. More refined socio-economic studies are underway.

What are Refugees and Others telling UNHCR?

The stories we are hearing from communities and individuals are harrowing.

Refugees, asylum-seekers, IDPs and other forcibly displaced report economic distress and lack of food, intimate partner violence, discrimination and desperation. Besides the dissemination of COVID-19 related information and the increased provision of hygiene products and healthcare, top prioritized information queries and service requests include financial assistance, resettlement to third countries and specialized services for individuals with specific needs.

People are losing their jobs and sources of income:

In **Turkey**, a protection survey with 1,500 refugees, in 20 provinces, revealed that over half of respondents had lost their jobs, and the majority of workplaces closed due to COVID-19. On average, within a household, one member lost his or her job and one member is currently still working. In **Iraq**, 59% of calls received by the Iraq Information Centre (IIC) were about loss of employment or livelihood opportunities due to COVID-19 movement restrictions. In **Egypt**, 46% of those surveyed expressed concern over having lost their source income, fearing evictions or being able to fund. Most — especially from sub-Saharan Africa — are daily wage labourers with little or no savings, and are particularly affected by movement restrictions. In Israel, in a survey with 900 Eritrean asylum-seekers, 85% informed us that they have lost their jobs.

Families are reducing meals, not paying rent, and living in fear of being evicted:

In **Lebanon**, protection monitoring [2] and call centres inform that refugees are reducing their food consumption and going into debt. In **Iraq**, surveys conducted among IDPs indicated an increased fear of eviction due to their inability to pay rent because of a loss of income: 40% of IDPs reported fear of eviction in March 2020, which is a staggering increase when compared to 5% in November 2019. In **Tunisia**, callers report not being able to pay rent, and that they face evictions by the landlords.

Financial support to meet daily needs is the priority for most:

Remote surveys and call centres consistently show that the majority of calls are enquiries into cash assistance, linked to COVID-19. (**Jordan**: 63% [3]; **Kuwait**: 62.16%). In **Lebanon**, food and cash assistance to cover rent and essential medicine are the most urgent needs expressed by respondents. Older refugees, and refugees with disabilities or a critical medical condition report an even greater need for food, soap and other hygiene items. In **Israel**, around 43% of the participants said that they do not have money to pay rent or buy food. In **Morocco**, 75% of the calls touched on food security and basic needs, requesting cash-based assistance.

[2] Protection monitoring in Lebanon covered 2,600 interviews over a one month period.
[3] Out of 150,000 calls received between 19th March and 13th April 2020

Domestic Violence:

In **Jordan** and **Lebanon**, there is anecdotal evidence of an increase in intimate partner violence against women and violence, abuse and neglect of boys and girls. The number of new survivors seeking help through hotlines remains low, however, possibly due to being isolated with the perpetrator.

Increased psychosocial distress and potential aggravation of symptoms for persons with pre-existing mental health conditions:

In **Jordan**, UNHCR partners report a significant rise in Mental Health and Psycho-Social (MHPSS) consultations, by over 50%. In **Lebanon**, an increase in suicidal behaviour has been reported among refugees. In **Israel**, 95% of survey participants reported feeling stressed by the pandemic as well as by its economic consequences, 65% reported to feel very frightened, and 70% of the participants reported that they are in need of mental health care.

UNHCR and partners are responding through ramping-up protection services and cash assistance. In parallel, we will continue to reach-out and amplify the voices of those in need, calling on the international community to expand its support to host countries, host communities and refugees, IDPs and other forcibly displaced during this unprecedented crisis.

New inter-agency rapid assessments and surveys are underway, and statistics and results will be updated

Reaching out

Prior to the COVID-19 crisis, UNHCR and partners have invested in innovative communication mechanisms, reaching millions of people across the MENA region.

Many protection and assistance services have been face-to-face, including home visits, focus group discussions, counselling and registration, through hundreds of community centres and community groups, and thousands of outreach volunteers.

Other services have been online or virtual, such as call centres, hotlines, social media, bulk SMS, dedicated

websites and automated services. Technological advances have increasingly enabled refugees and other forcibly displaced to take charge of their own information, including through online portals designed for and with them.

Through these face-to-face and virtual tools, UNHCR and partners are able to reach hundreds of thousands of people per month - even millions per month through SMS - and ensure they can access the information, support and guidance they need.

> **UNHCR's approach to community outreach is grounded on a Community-based protection (CBP) framework. This means that crisis-affected communities and the government, humanitarian and development partners who assist them, can jointly identify a community's most serious protection risks, explore their causes and effects, and jointly agree on how to prevent, mitigate and respond to them.**

Types of Outreach

Physical		Virtual
Targeted visits	Infolines / Hotlines	
Dedicated community members	Call centres	
Community spaces and centres	WhatsApp and SMS	
Community-based structures	Social Media platforms	
Community-led initiatives	Dedicated websites	

Prior to COVID-19, key virtual communication and coordination tools included:

Info-lines, hotlines or call centres provide up-to-date information on protection, services and assistance, receive feedback from people in need, enable self-referrals and provide legal advice on issues such as birth registration and legal residency, as well as information on what assistance and services are available and how to access them. In **Turkey**, the UNHCR Counselling Line enables refugees and asylum seekers to ask questions, seek counselling and report complaints in Arabic, Farsi, English, Turkish, French, Somali, Pashto, Kurdish, Urdu and Hind. In **Egypt**, helplines respond in seven languages, including English, Arabic, French, Oromo, Amharic, Tigrinya, and Somali) through the UNHCR in-house Infoline.

WhatsApp group and SMS have been used for rapid and low-cost two-way communication between humanitarian workers, refugees and IDPs. SMS is used to disseminate vital messages instantly in bulk. In **Lebanon and Jordan, over 9 million SMS and WhatsApp messages** were sent in 2019 on distributions, cash assistance and other crucial information either to entire refugee population or targeting specific profiles.

Facebook and other social media platforms are increasingly becoming central to how forcibly displaced people access and share information. Across the region, UNHCR works through social media platforms, and supports community groups to manage Facebook and WhatsApp groups.

In Lebanon and Jordan, over 9 million SMS and WhatsApp messages were sent in 2019 on distributions, cash assistance and other crucial information either to entire refugee population or targeting specific profiles.
Photo by UNHCR / Lilly Carlisle

Help.unhcr.org and dedicated UNHCR and partner websites provide information to refugees, IDPs and other forcibly displaced on their rights and the assistance available to them. These platforms can work as mobile phone Apps, used on-the-go.

Help.unhcr.org is now up and running in **Algeria, Egypt, Jordan, and Turkey**, providing up-to-date information on available services. In **Lebanon** since 2014, UNHCR has been managing the www.refugees-lebanon.org website, which received more than 300,000 unique users in 2019. In **Turkey** and several other countries, an on-line Services Advisor is a multi-language tool for refugees to search for and find details of services and assistance in their area.
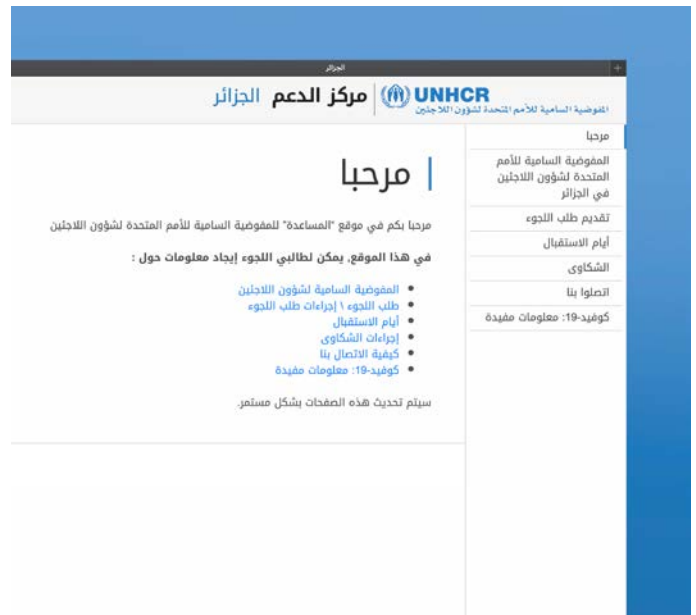
Help.unhcr.org page for Algeria, in Arabic

Communicating and Protecting during COVID-19

COVID-19 prevention and control measures have restricted the movements of both forcibly displaced and humanitarian workers, as well as communities at large. UNHCR has responded across the MENA region by building-on and ramping-up its established virtual systems, focusing on two main objectives:

1. Support prevention and response to COVID-19 in coordination with the Protection, Health, MHPSS, Shelter, Education, Wash and other sectors, through **Risk Communication and Community engagement (RCCE)**

2. Ensure **continuation of protection and assistance services, adapting operating modalities and prioritizing** people who are most at risk.[4]

Hotlines and call centres are being adapted and enhanced with updated information on where and how to access services during the COVID-19 pandemic. In **Jordan**, between mid-March and mid-April, the UNHCR Helpline received 206,000 calls. In **Lebanon**, UNHCR/WFP call centres and UNHCR hotlines have received over 80,000 calls over the same period. From **Mauritania, Morocco, Algeria, Tunisia, Libya, Egypt to Kuwait**, protection hotlines and call-in mechanisms have allowed tens of thousands of people to stay in touch with UNHCR, and access information and protection. In **Turkey**, the UNHCR, counselling lines answered 12,654 calls up to mid-April, without interruption, providing counselling on services, procedures, referrals and existing support mechanisms. In **Syria**, over 1,300 calls were received through active hotlines of 30 community and satellite centres in Damascus and Rural Damascus. In **Iraq**, UNHCR partners with the Iraq Information Centre (IIC). In March 2020, the IIC handled 7,442 calls from refugees, IDPs and returnees, where the top five reported needs by Sector were cash, food security, livelihoods, health and shelter.

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[4] Prioritizing older people, people with disabilities, women & girls with protection needs, LGBTI people, UASC, people living with HIV and other underlying medical conditions, persons with mental health and psychosocial distress and other individuals with specific needs, while carefully monitoring any protection issues relating to COVID-19 affecting stateless persons.

Mobile messaging applications enable bulk messaging. In **Algeria, Egypt, Morocco and Tunisia**, **bulk SMS** have been distributed on how to prevent infections both for oneself and for communities through personal hygiene measures, as well as identifying COVID-19 symptoms and where to access healthcare services. In **Tunisia**, more than 13,000 SMS were sent on protection and hygiene measures and on new working and service provision modalities. In **Syria**, UNHCR and partners reached 40,000 persons with an SMS awareness raising campaign; in **Lebanon**, nine sets of bulk SMS have been sent out to all persons known to UNHCR in the country since March. In **Jordan**, over two million SMS have been sent out, targeting the entire refugee population on different COVID19-related issues. In **Iraq**, over 355,000 bulk SMS have been sent to IDPs and refugees since March.

Working with and through communities has been key – both physical and on-line communities – to reinforce messages and provide and receive feed-back in a range of languages. **Jordan**'s network of Community Support Committees has been pivotal in reaching refugee communities through remote communication tools, as well as gathering information on needs, particularly in urban areas. In **Lebanon, Jordan, Israel, Iraq, Mauritania, Tunisia, Morocco, Algeria, Syria** and **Yemen** health awareness and sensitization campaigns on COVID-19 are being rolled out through health personnel, partners, community outreach volunteers and other community groups, often by telephone or WhatsApp, to promote community ownership of messages and involvement. In **Egypt**, refugee community groups have started to produce their own awareness materials including key messages on Psychological First Aid in their native languages. In **Mauritania**, in Mbera camp, community groups and refugee mobilizers are fully engaged in promoting health messages. In **Iraq**, UNHCR developed and shared COVID-related health and psychosocial materials in Arabic and Sorani Kurdish with Community Outreach Volunteers and related community members via WhatsApp networks and social media platforms. In parallel, capacity building and awareness-raising sessions on psychological first aid and positive coping strategies for key community members were delivered by staff expert on remote psychosocial interventions. In **Syria** over **2,500 ORVs and 250 health volunteers** have been active in COVID-19 awareness raising campaigns through posters, bulk messaging, targeted phone calls, and social media platforms.

Social media platforms have been essential to allow two-way interaction with large numbers of participants. **Facebook pages** are operational in multiple languages in **all countries**. The **Turkey** Facebook page, with **57,681 followers**, received queries and published COVID-19 related awareness posts and videos in Arabic and Farsi were shared on a daily basis. In **Tunisia**, the Facebook page **"We Hear You"** – run by partner CTR - allows for discussion real time and on COVID-19 related matters. In **Morocco**, video messages were published in several platforms, while key information is being shared on a daily basis in three languages.

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In **Egypt**, UNHCR maintains a WhatsApp group with over 100 diverse community leaders and youth volunteers. UNHCR staff have also joined 44 more refugee WhatsApp groups with over 7,000 members to continue direct messaging to the communities. In **Jordan**, WhatsApp trees reach over to 80,000 people and refugee led "bridges of communication team" that reach another 50,000. In **Lebanon**, 9,000 WhatsApp focal points (refugees and Lebanese) reach some 180,000 families; 19 WhatsApp trees specifically on COVID-19 have been sent, and messages are also posted on Facebook to reach a wider audience. In **Syria**, over 120,000 people were reached through over 860 partner WhatsApp groups. Similarly, in **Israel**, in addition to WhatsApp, the application 'Salaam' is used to inform about the latest COVID-19 news in Tigrinya, Hebrew, English and Arabic.

In **Turkey, Algeria, Egypt** and **Jordan**, help.unhcr.org has been updated to include COVID-19 related information, in Turkish, English, French, Arabic and Farsi, and a range of UNHCR's services, as well as a call-back function to respond to refugee and asylum seekers' questions. In **Lebanon**, dedicated COVID-19 information has been uploaded to www.refugees-lebanon.org. In March 2020 alone, the Lebanon website received more than 41,700 unique visitors and 233,700 page views.[5]

UNHCR has proactively reached out through remote protection monitoring - telephone surveys using representative sample surveys - to ensure a solid understanding of the challenges faced by forcibly displaced. New assessment tools have been developed and introduced in several operations, including a 24-7 assessment phone-line in **Egypt**; an online KOBO Toolbox to conduct Remote Vulnerability Assessments in **Tunisia**. In **Jordan**, UNHCR, UNICEF and WFP are conducting a Rapid Needs Assessment through randomized sample survey calls with 800 hundred Syrian and Jordanian families to assess the socio-economic and health impacts of COVID-19. In **Syria**, UNHCR and 19 partners conducted a survey through its partners in **all 13 governments** (As-Sweida, Hama, Damascus, Al-Hasakeh, Dara Homs, Aleppo, Quneitra, Tartous, Rural-Damascus, Latakia, Ar-Raqqa, and Deir-Ez-Zor) with the aim to assess jointly with partners the impact of forming and activating WhatsApp groups in the prevention and response to COVID-19.

Remote Protection services are increasingly being applied. Operations are addressing ways to ensure protection, including case processing and management, and assistance to the most vulnerable – including older people in assisted living, women who may be at increased risk of intimate partner violence, persons living with disabilities and children at risk, while also recognizing that stateless persons may be particularly vulnerable, persons with mental health and psychosocial distress. In **Jordan**, UNHCR's MHPSS partner, in collaboration with the Ministry of Health and the National Psychiatrists Society, has activated a hotline to receive and respond to mental health concerns by providing Psychological First Aid, psycho-education and counselling, through which over 120 cases were received and managed. At the same time, UNHCR enhanced mechanisms to ensure the integrity of the procedures and data protection safeguards.

In **Kuwait** and the **Kingdom of Saudi Arabia**, refugee status determination (RSD) interviews are being conducted remotely, while in **Jordan** and **Iraq**, remote RSD interviews are being piloted, followed by remote RSD assessments and reviews by UNHCR staff. In **Iraq**, over 18,846 individuals have had their registration data updated remotely via mobile phone; certificates have been issued to vulnerable cases who require proof of registration in order to access services or to prevent detention. In **Jordan, Lebanon, Syria, Iraq** and **Egypt**, referral pathways and standard operating procedures for child protection, sexual and gender-based violence, persons with specific needs, legal assistance and emergency and protection cash assistance have been reviewed to facilitate remote counselling for children and their caregivers to mitigate the risks associated with the COVID-19 pandemic. **Turkey**'s Service Advisor platform was updated with information on partner services and how these have been adapted to remote delivery. In **Iraq**, Alternative Care Guidance has been adapted to address the issue of separation due to quarantine or isolation measures. It is also recognized that is essential that no child will be left stateless as a result of the current situation due to disrupted birth registration procedures.

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[5] See also https://www.refugees-lebanon.org/en/section/31/corona; in particular the Guide of self-isolation for refugees living in overcrowded areas, hygiene promotion and social distancing etc in case you need to incorporate some visual elements into this document. Booklets, poster and a video were developed and shared with communities via website and social networks.

Refugees are using mobile devices and applications to stay in touch.
Photos by UNHCR / Lilly Carlisle

Donors

UNHCR is grateful to the donors who have contributed with unearmarked and earmarked funds as well as those who have contributed directly to the operations.

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