



# THE IDP-INITIATIVE

## QUARTERLY UPDATE

### JUNE 2020

This Update provides an overview of **UNHCR's rapid emergency preparedness and unfolding response to mitigate the impact of the COVID-19 pandemic on internally displaced persons.** Demonstrated through the example of several country operations, broad themes covered in the Update include – Empowerment imbued from cash assistance; Localization and engagement with national authorities; Advantages of community engagement and the Centrality of protection.

# AT A GLANCE



**45.7 million** internally displaced people worldwide in 2019\*

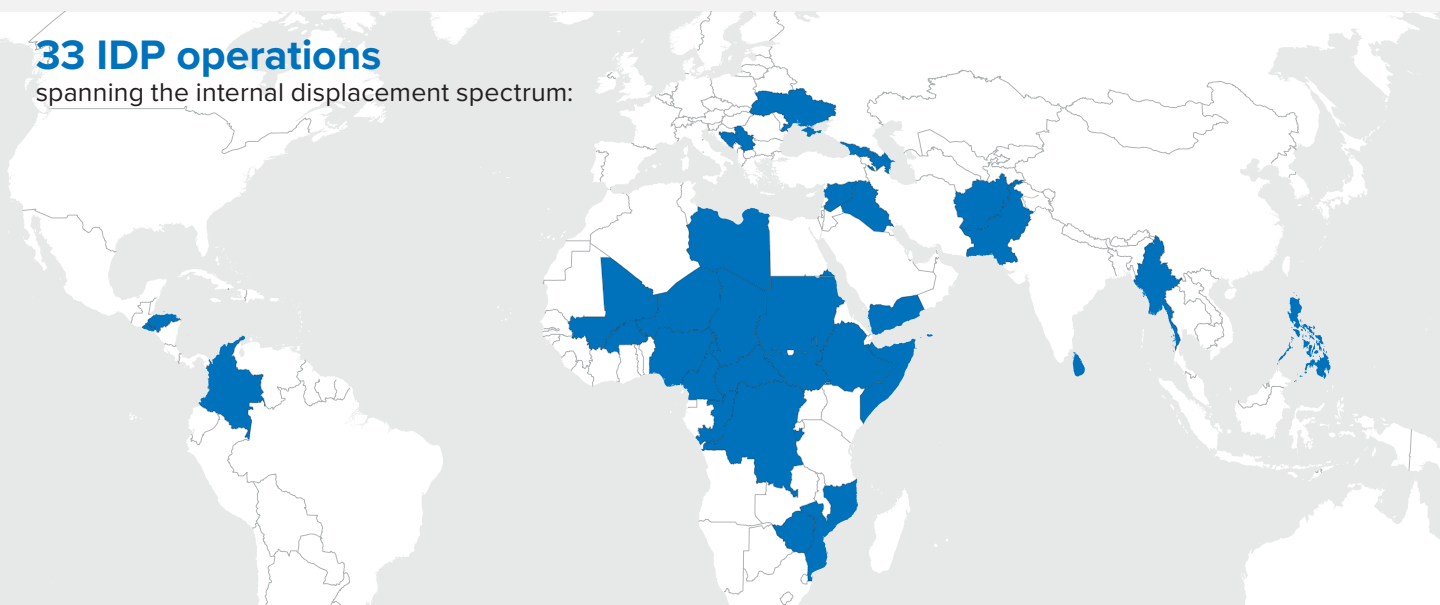


**57% of the world's displaced** remain within the border of their own country\*

\* Source: Internal Displacement Monitoring Centre.

## 33 IDP operations

spanning the internal displacement spectrum:



## 8 keystones

 to assess progress on our IDP engagement:

 Centrality of protection	 Emergency preparedness	 Integrated programming & area-based approaches	 Supporting localization & national capacities
 Coordination leadership	 Operational response	 Support to solutions	 Data, information management & analysis

## 5 cross-cutting enablers

 ensuring a comprehensive IDP response:

 Partnerships	 Communications and Advocacy	 Risk Analysis
 Workforce Management	 Resource Mobilization	

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This is the first in a series of Quarterly Updates concerning UNHCR's Step-Up on Internal Displacement, as demonstrated by the [Initiative on Internal Displacement \(IDP-I\) 2020-2021](#).

In setting his Strategic Directions 2017-2021, the High Commissioner committed UNHCR to be more decisive, predictable and effective in situations of internal displacement. The updated [Policy on UNHCR Engagement in Situations of Internal Displacement](#), issued in September 2019, provides revised guidance on our role in Preparedness, Operational delivery, Coordination leadership and the search for Solutions – in cooperation with States and within the inter-agency framework.

While UNHCR is engaged in internal displacement in over thirty country operations, the IDP-I demonstrates this Step-Up through thematic, strategic and operational dimensions in nine target operations – **Afghanistan, Burkina Faso, Colombia, Democratic Republic of the Congo, Ethiopia, Iraq, South Sudan, Sudan and Ukraine.**

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## Certain themes are apparent:

**First**, UNHCR's decentralization in 2019 through the establishment of seven Regional Bureaux encompassing the globe has greatly advantaged our IDP preparedness and response to the unfolding pandemic. Having an expanded field and regional footprint has improved efficiency and positioning of resources, both human and financial, closer to the point of delivery. This has been appreciated by Governments and led to swifter response.

**Second**, synergies within our cluster leadership have been critical. Within the Inter-Agency Standing Committee, UNHCR leads the Global Protection Cluster and co-leads the Global Shelter Cluster and the Global Camp Coordination and Camp Management Cluster (CCCM), together with IFRC and IOM, respectively. Our cluster efforts during the pandemic have focused on speedy, consistent and predictable leadership, ensuring protection as central to inter-agency efforts, and for Shelter and CCCM resources to reach the most vulnerable.

**Third**, it is more important than ever to inter-twine our Coordination leadership with operational engagement. Robust delivery brings us closer to the people, builds credibility with cluster partners, especially small local organizations, and strengthens our relationship with the authorities. Response to critical assistance needs builds trust with communities, essential for addressing sensitive protection issues.

**Fourth**, investments in solutions must underpin all our efforts. Solutions can be achieved where local communities are resilient, and greater resilience can be achieved via investments in national capacity, including by international financial institutions. Solutions-orientation is central to our approach, most notably through the inclusion of IDPs in national services and pandemic-related safety nets established by states.

**Finally**, our engagement occurs within a framework of supporting the Guiding Principles on Internal Displacement through laws, policies and practices which protect the rights of IDPs, as well as collaborative action to prevent, address and resolve situations of internal displacement. Our co-leadership with OCHA of the GP20 Plan of Action and our work with regional organizations, governments, national human rights institutions, NGOs and civil society are key to these efforts.

It is timely that the political discourse on IDP solutions has converged with the formulation of the State-led High-Level Panel on Internal Displacement. Its presence as the impact of the pandemic unfolds provides hope for needed attention to IDPs and the additional risks they face.



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# Specific risks faced by internally displaced people in the context of COVID-19

Internally displaced people may face risks which are specific to their displacement in the context of COVID-19. These risks may leave IDPs newly vulnerable or exacerbate existing vulnerabilities:

- Poverty does not allow internally displaced people the option of social distancing. Many must exit their homes to look for labour opportunities, regardless of the risk.
- As IDPs are frequently located in crowded conditions in camps, camp-like settings or urban slums, this may accelerate virus spread, in particular in locations where water and sanitation services are not adequate.
- Challenges may be faced in accessing national health systems, including due to the lack of documentation, lack of availability of services, and possible discrimination.
- Inadequate access of IDPs to sustainable levels of nutrition may be in part due to their displacement and could be compounded by limited livelihood opportunities and insufficient humanitarian aid. Reduced nutrition status results in a weakened immune system and greater susceptibility to the virus.
- Loss of livelihoods, including daily labour opportunities, may leave IDPs who were previously able to meet their own needs newly vulnerable to exploitation and abuse.
- Flight due to continuing conflict and persecution may be further hindered due to pandemic-related movement restrictions. This may also affect the ability of displaced persons from voluntarily returning and reintegrating in locations of origin.
- COVID-19 related State messaging requires specific tailored approaches to ensure applicability and potential implementation in recognition of internal displacement realities.
- Unless efforts are undertaken, tensions between host and displacement communities may arise due to the worsening local economic conditions, existing xenophobia, and a new competition over resources.
- Outbreaks of other infectious diseases, in particular cholera and measles, are occurring near internally displaced persons locations also affected by COVID-19. Health systems have not been able to adequately respond to the multiplicity of crises.
- Older persons may be more susceptible to COVID-19 due to underlying health conditions. More than ever, older persons need access to information which is specific to their needs, and relevant for their individual situation.
- Internally displaced women and girls are likely to experience distinct challenges and risks associated with the COVID-19 pandemic, and as such the outbreak may exacerbate already existing risks of Sexual and Gender-Based Violence. Confinement risks increase intimate partner violence, while worsened socio-economic situation will create increased risk of exploitation. In parallel, access to regular GBV services is likely to become challenging for survivors.
- The mental health of many internally displaced persons is at risk of deterioration, and group psychosocial support activities have largely ended due to restrictions on gatherings.



**Burkina Faso: making protective masks in Dori.** Abdoulaye, master dressmaker and member of the host community in Dori, Burkina Faso, brought his expertise to help make protective masks that will allow IDPs and refugees to protect themselves from COVID-19.

## Burkina Faso – the fastest growing IDP situation

UNHCR has appealed for US\$186 million for the displacement crisis in Central Sahel. The appeal aims at the provision of lifesaving protection and assistance to refugees, IDPs, returnees and host communities throughout the Central Sahel region.

By mid-2020, violence within Burkina Faso has uprooted 921,400 people – an increase of 290% in one year. UNHCR collaborates with Government-led efforts to respond to the displacement, further compounded by complexities posed by the pandemic.

UNHCR is operationally present across the nine Burkina Faso regions which host the majority of the internally displaced - Centre Nord, Sahel, Nord, Est, Boucle du Mouhoun, Cascades, Centre, Haut Bassins and Plateau Central, in addition to interventions wherever necessary.

Direct operational support has been provided by UNHCR to regional health authorities to strengthen their prevention and response capacity. Activities have included in-kind support for the purchase of medicine, medical equipment and supplies, as well as provision of hand-washing stations and housing units to allow for isolation and quarantine.

**In fulfilment of its inter-agency accountabilities, UNHCR leads both the Protection and the Shelter Clusters in Burkina Faso and provides support to the Government on the management of camps and camp-like settings while moving forward with the formalization of the CCCM Working group.**

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Efforts are also underway to relocate IDP sites that are in flood-prone areas as well as to decongest crowded IDP sites and/or host families' homes.

The Protection Cluster continues to enhance its country-wide engagement and support to the Humanitarian Country Team (HCT) for protection mainstreaming, guidance on protection principles and their consideration regarding the humanitarian response. As regards the latter, the Protection Cluster has, in cooperation with agencies, developed a protection strategy for the HCT, which was adopted on 25 June. UNHCR facilitates the Housing, Land and Property Rights Area of Responsibility since March 2020.

UNHCR continues to support the government entity in charge of IDP response coordination, CONASUR, for IDP enrolment and profiling. With the rapid and complex increase in internal displacement figures, at least 2 social workers per commune in 7 regions have been identified for continuous IDP enrolment and necessary updates. IDP enrolment and profiling is key to the humanitarian response planning in Burkina Faso.

Further systematization of a remote protection monitoring system has been facilitated, through community-based networks and by phone, not the least due to security-related issues but also due to pandemic-related movement restrictions.

**UNHCR Burkina Faso has developed a Sexual and Gender Based Violence project featuring mobile case management teams with psychosocial, medical, material and legal components. The project has begun in the Centre Nord regions with planned extensions in July and August to the Nord, Sahel, Hauts Bassins, Est and Plateau Central regions.**

Strengthening community awareness for the prevention of COVID-19, UNHCR has partnered with *Fondation Hirondelle* (FH) to produce a short daily COVID-19 news program for IDPs and host populations, broadcast through 37 partner radios across the country, including in local languages

(namely *Fulfudé* and *Moré*). 160,000 pandemic related posters have also been distributed, alongside continued follow-up through questionnaires to assess on-going information needs and gaps. Additionally, more than 500 members of the community-based protection committees trained on COVID-19 prevention measures, are sensitizing their communities in 6 regions.

The Shelter Cluster has engaged in an inclusive consultation with its partners to develop and validate the response strategy for Shelter and core relief items (CRIs) in March. In order to ensure neutrality and impartiality and in accordance with the recommendations of the IASC, a strategic Advisory Group was created in April and mandated to infuse the Cluster with clear strategic orientations. The Shelter Cluster has facilitated strong operational implementation with more focal points to strengthen the shelter network across Burkina Faso. This also includes close guidance for the practical adaptation of shelter delivery and distribution of non-food items during the pandemic.

**The Cluster partners provided emergency shelters to 18,290 households and provided CRIs impacting 35,406 households. UNHCR has supported 10,000 households with shelter materials between March and June 2020 and 21,300 additional plastic sheets will be distributed by the end of the month to help repair damaged homes due to the heavy rains and strong winds prevalent in the rainy season, as well as assist in the decongestion of crowded IDP sites.**

UNHCR, in close collaboration with partners, is expediting Area-based Approaches – providing assistance and access to services to all affected and co-located displaced communities as well as to the communities hosting them. The methodologies also help mitigate the risk of inter-communal tension and are aimed at enhancing peaceful coexistence, including through specifically targeted projects.

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# Expanding IDP empowerment through cash assistance

Most internally displaced people move to locations with access to markets and services, often in the proximity of local communities. Cash assistance empowers the most vulnerable, enabling them to choose how to meet their own needs, while also contributing to the local economy.

With the challenges posed in the initial period of the pandemic, UNHCR rapidly stepped-up its cash assistance to facilitate protection, assistance and services to the most vulnerable. This has enabled IDPs to address a variety of individualized needs including access to healthcare, shelter, water, food and others. Access to cash is a vital and efficient lifeline, which contributes to a range of outcomes, including empowerment and resilience as well as furthering financial inclusion through access to bank accounts or mobile money, reducing negative coping mechanisms and meeting specific protection outcomes. With a focus on inclusion in the national response, UNHCR complements and/or aligns its cash assistance, whenever possible, with the existing social safety nets.

**In line with the UN Principals Common Cash Statement, UNHCR cash distribution during the pandemic includes some thirteen IDP country operations, disbursing more than 14 million USD in cash to vulnerable IDPs between March-June 2020. This distribution has simultaneously linked and aligned the larger IDP community with local and national social protection systems wherever possible. In 2019, UNHCR delivered almost USD 100 million to meet the needs of IDPs.**

In **Ukraine**, UNHCR targeted its cash assistance to respond to specific vulnerabilities of internally displaced persons from the Donetsk and Luhansk oblasts. This included the distribution of cash to those stranded at the entry-exit checkpoints in Eastern Ukraine following the suspension of movement across the line of contact from 22 March.

Cash was provided to persons unable to re-cross the line, including to allow for a safe place to stay while awaiting return authorization. Many beneficiaries were older persons with heightened vulnerabilities and needs in the absence of their small pension.

In **Iraq**, UNHCR supports IDP families' access to basic hygiene items through cash assistance. The disbursement initiated in April, is in response to the pandemic and has facilitated over 40,000 IDPs to access assistance through their e-wallets. A target of over 80,000 IDP families largely residing in 37 UNHCR managed camps is further planned.

In **Afghanistan**, UNHCR is building on a prior successful "cash for shelter" intervention, where vulnerable households had received cash to construct two-room shelters in 2019 and early 2020. Since March 2020, this programme has concentrated in return and reintegration areas, where UNHCR is also implementing an Area-Based Approach providing services to IDPs, refugee returnees and vulnerable members of the host community.

In the **Democratic Republic of the Congo**, cooperation with a local telephone network provider allowed for cash to be distributed by mobile money transfers, a good practice given the imperative of physical distancing and the aim to increase financial inclusion and financial literacy. To make this option possible, mobile phones and SIM cards were rapidly distributed to 6,000 vulnerable families, facilitating their access to much needed funds. As most persons already had a telephone in hand, this method proved to be a light approach which also expedited post-distribution monitoring. Establishing this contact network has further improved two-way



communication between UNHCR and the IDP community for further engagement as we move along with contact restrictions.

Adopting a similar approach, UNHCR also initiated a “cash for shelter” project to benefit 5,000 vulnerable persons in South Kivu and Tanganyika provinces. IDPs were thereby enabled to buy shelter materials – critical in response to the recent flooding in South Kivu which posed health risks in addition to the pandemic.

In line with the 2019 IDP Policy, UNHCR is also implementing its IDP “enrolment” for the necessary collection of information, including biometrics at household or individual levels, for the purpose of delivering and monitoring services and assistance, including cash assistance.

## DRC: Mobile money helps IDPs prepare for COVID-19

An internally displaced Congolese woman receives a mobile phone and SIM card at a distribution site in Beni, North Kivu, in DRC’s North Kivu province. She fled her village and found safety in Beni with her three children. She is currently pregnant with her fourth child.

UNHCR is distributing money by mobile phone to 6,000 vulnerable families uprooted by conflict and already facing a deadly Ebola outbreak. Provision of mobile phones and SIM cards to displaced families allows them to receive electronic payments. They can choose to prioritize needs that might range from food, to clothing, health care and shelter.



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**DRC: Mobile money helps IDPs prepare for COVID-19.** Internally displaced Congolese woman, receives a mobile phone and SIM card at a distribution site in Beni, North Kivu.



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# DRC – tri-cluster synergies enhance protection impact

In Democratic Republic of the Congo, UNHCR leads the Protection Cluster and co-leads the Cash Based Assistance and Camp Coordination and Camp Management Working Groups. UNHCR further assumed leadership of the Shelter Cluster in the first quarter of 2020.

Given the new structure, efforts are ongoing to ensure that UNHCR's tri-cluster leadership is strategically aligned and appropriate synergies are enabled. In the first quarter, the Protection Cluster assisted the development of vulnerability criteria to facilitate shelter selection including indications of locations most in need, eventually resulting in the construction of 32,971 shelters for internally displaced people by 12 different stakeholders.

Similarly, mutual exchange with the cash distribution working group has helped to further inform protection coordination activities, including advocacy and interventions with national authorities. The pandemic has posed challenges to cash assistance, with social distancing imperatives complicating efforts to identify vulnerable persons in need. The necessity of information synergies among the cash working group, protection and shelter partners for vulnerability and needs identification, cannot be underscored enough.

The Protection Cluster's determined efforts for the protection of the affected civilian populations, and to facilitate the sustainable return and reintegration of displaced populations through the coordination of protection actors, adds immeasurable value to its continued advocacy with national authorities and other stakeholders.

As a part of the response to COVID-19, the Protection Cluster and CCCM Working Group jointly advocated for additional land close to current displacement sites in Ituri and North Kivu provinces, as well as for the successful inclusion of IDPs in the national COVID-19 response plan.

**Working with local authorities and other stakeholders, the Protection Cluster supported the establishment of procedures for individual health response.**

**The work of the Protection Cluster also contributed to tri-cluster and inter-agency synergies through guidance on the principle of “do no harm” and on the prevention and remote management of sexual and gender-based violence.**

UNHCR's tri-cluster leadership in DRC has provided for a wider monitoring of the protection risks posed by the pandemic-related restrictions of movement, such as increased food insecurity due to the isolation of areas like Kasai, social tensions or rights violations, including SGBV among many others.

The achievement of strategic tri-cluster synergies and their management are also underway at UNHCR Headquarters, as well as strengthened efforts to unlock synergies across IDP operations.

UNHCR has extended its Level 3 emergency declaration for North Kivu, South Kivu and Ituri provinces through August 2020. This extension was enabled given the new large-scale internal displacement in 2020, and to further strengthen ongoing emergency support and adequately prepare transitional measures for the post emergency phase.

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# Supporting IDP communities in Colombia's COVID-19 response

Since 6 March 2020, when the first person with COVID-19 was identified in Colombia, large numbers have tested positive and many have died from the virus, resulting in the declaration of a health emergency on 17 March and a preventive nationwide quarantine. Essential staff of UN organizations and humanitarian partners directly involved in the COVID-19 response have been authorized to provide essential services throughout the quarantine.

While Bogotá has been the city most adversely affected by the pandemic, with the highest number of infections and deaths, several small municipalities in rural areas have also registered high rates of infection. This in turn has resulted in a disproportionately higher number of Afro-Colombian and indigenous communities being affected by the pandemic.

The current IDP situation in Colombia can be largely characterized as protracted because large numbers of people displaced by more than 50 years of internal conflict have yet to achieve a durable solution. Since the signing of the 2016 Peace Agreement between the FARC-EP and the Government of Colombia, 400,000 people have been newly displaced by ongoing conflict and violence. In 2020, including during the nationwide COVID-19 quarantine, conflict and violence uprooted a total of 13,429 people in 43 so-called “large-group displacements”.

UNHCR Colombia has rapidly adapted its already existing response for IDPs, as well as refugees, asylum seekers and other persons of its concern, to the specific risks arising with the pandemic. We have focused our IDP response on actions aimed at supporting national health institutions and enabling IDPs to access basic humanitarian assistance, including hygiene kits to minimize the risk of infection. IDPs have also benefited from activities carried out to reinforce capacities in refugee-hosting areas, where both population groups are present.

Already entrenched Localization and consistent national support methodologies by UNHCR Colombia have supported the government and

IDP communities to address protection issues, also amplified due to the pandemic. Stepped-up advocacy with national and local authorities, and with institutions in charge of assistance to IDPs, remain key UNHCR actions to promote access to humanitarian assistance for persons recently displaced and those in protracted displacement in informal urban settlements. The National Protection Cluster has contributed to the consolidated COVID-19 Intersectoral Plan for Colombia and advocated to include the financial needs of the Protection sector to cover assistance needs to IDPs and people in risk of displacement, not only in rural areas but also in informal settlements in urban areas.

Through the National Protection Cluster and evidence-based advocacy, UNHCR is facilitating visibility of the situation of pandemic-affected communities. Protection monitoring is enhanced in regions most affected by forced displacement, confinement, forced recruitment, SGBV, APMs and UXO, through Thematic Protection Groups in the departments of Chocó, Norte de Santander, Nariño and Buenaventura. The identified risks have been presented to national institutions i.e the Ombudsperson's Office, the Office of the Inspector General (*Procuraduría*), the Victims Unit as well as to the HCT and the Protection Cluster. The National Protection Cluster is strengthening monitoring (by phone and virtual tools), as well as capacity for Operational response, including jointly with the MIRE consortium (Intersectoral Emergency Response).



**Colombia:** Faustino is a Colombian-Venezuelan who returned to Chocó to restart his life in 2016. He and his wife Ugenia, who is internally displaced, are staying safe and overcoming the difficulties of the COVID-19 quarantine with UNHCR's cash-based assistance.

In coordination with Colombia's Victim Unit, UNHCR is supporting nine communities to advance on solutions, including through community strengthening activities and support to social infrastructures as well as facilitating access to livelihoods. UNHCR also works directly with local authorities and communities for the legalization of informal settlements: In 2020, 16 informal settlements are being prioritized and will benefit a mixed population of IDPs, host communities, Venezuela refugees and Colombian returnees. These solutions-oriented interventions continue despite the pandemic and alongside

advances in case documentation and technical studies required for legalization. In the area of peacebuilding, UNHCR has been supporting the transitional justice mechanisms created under the Peace Agreement, with the Special Peace Jurisdiction and the Truth Commission. With the former, UNHCR aims to strengthen the investigation of the crime of causing forced displacement, guaranteeing that IDPs can seek justice and reparation. Despite the COVID-19 emergency, UNHCR continues to support these institutions, given their long-term impact on the victims.

## Communication as a cross-cutting enabler

Amidst the pandemic, dissemination of messages of solidarity and empathy has grown in importance and UNHCR has been working on several public information initiatives: UNHCR is boosting the #WeShakeHands (#NosDamosLaMano in Spanish) challenge in social media, through the song *Humano* by the music group ChocQuibTown, to encourage the public and UNHCR staff to send a message of solidarity to people that have had to flee in search of protection and well-being.

UNHCR has also engaged with national Goodwill Ambassadors in the framework of the Somos Panas Colombia anti-xenophobia campaign. As example, the Goodwill Ambassadors have highlighted the work of *Casa Diversa*, a Medellín-based NGO that provides important support to IDPs and refugees who face risks as a result of their LGBTI identity. This project aims to bring a message of solidarity and hospitality for all.

As part of the stepped-up Communication with Communities, UNHCR disseminates information on pandemic prevention, (including for people living with HIV) through helplines, flyers with orientation routes for women and girls suffering from SGBV and a complaints mechanism to receive feedback.



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# Camp Coordination and Camp Management in the context of COVID-19

In displacement settings, “Camp Coordination and Camp Management” – CCCM, refers to activities that facilitate equitable access to assistance, protection and services for persons living in displacement sites, camps or urban neighbourhoods. UNHCR co-leads the Global CCCM Cluster with the International Organization for Migration. UNHCR currently leads nine CCCM Clusters and supports an additional six national level working groups.

Our work in CCCM benefits greatly from the invaluable partnerships that enrich the CCCM Cluster, both at global and local levels. Members include not only operational agencies, but also benefit from the support of academic and private sector partners. In the race to prepare for the pandemic, CCCM has been a vital humanitarian mechanism to facilitate protection and assistance for internally displaced populations.

## Iraq

In Iraq, camp managers and local partners based in camps have been trained in COVID-19 presentation and social distancing. Isolation areas have been identified in each of the 35 camps managed by UNHCR and quarantine spaces for new arrivals have also been established. Regular requirements including the replacement of tents and management of key infrastructures also continue.

## Ethiopia

In Ethiopia, UNHCR is stepping up its leadership in partnership with the Health, Wash and Shelter Clusters. Support is being provided to the National Disaster Risk Management Commission (NDRMC) to increase the availability of water supply and handwashing stations. Efforts are also underway to decongest sites that have been identified at high-risk of COVID-19 transmission. UNHCR also continues to directly implement risk communication and community sensitization activities in key collective sites in the Somali, Oromia and Benishangul-Gumuz regions.

## Sudan

Sudan’s more than 1.8 million internally displaced persons reside in Darfur, the Kordofans, and the Blue Nile Region, often in difficult conditions, including having faced secondary and tertiary displacements over the years of conflict. In May 2020, UNHCR assumed co-leadership of the COVID-19 Coordination task force with IOM. Built around the CCCM approach, this task force aims to ensure multi-sectoral coordination in the IDP camps in Darfur, the Kordofans and Blue Nile for COVID-19 preparedness and response. Under the auspices of the UN Country Team, the Taskforce is vigorously working to ensure that IDPs receive the required support to mitigate the effect of the pandemic within their communities. Risk Communication and Community Engagement are specific priorities in this context.

## Democratic Republic of the Congo

In Democratic Republic of the Congo, UNHCR manages 16 IDP sites in Ituri, a step-up from 12 at the end of 2019. As a part of CCCM efforts, IDPs are informed about COVID-19 prevention and response through banners, posters and awareness-raising sessions using radios in partnership with local authorities. In April, the CCCM working group led by UNHCR successfully advocated to obtain seven additional hectares of land around the new displacement site of Kigonze in Bunia (Ituri Province), as well as land in the Kibirizi and Birambizo areas of North Kivu, to build shelters, relocate families from other overcrowded sites and improve social distancing.

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# 300% increase in IDP programming in Sudan

With an increase of 300% in programming compared to 2019, UNHCR Sudan is recalibrating its strategy for greater protection and solutions engagement with IDPs. This necessarily includes increased operational delivery alongside strengthening Coordination leadership accountabilities, in Protection, Shelter and Camp Coordination and Camp Management (CCCM).

In line with the UN-coordinated response, UNHCR has enhanced its Operational response to COVID-19 through partnerships with local NGOs in Darfur, South Kordofan and Blue Nile State, which have been critical in boosting operational response efforts at a time where mobility is challenging. For instance, UNHCR's local NGO partner, in coordination with Humanitarian Aid Committee (government body which oversees humanitarian response), distributed NFI kits to 2,900 IDPs and IDP returnees in May and plans to reach additional families as soon as safe delivery is possible.

In addition to stepping up to co-lead the newly formed COVID-19 Camp Coordination Taskforce, UNHCR as the Protection Cluster lead is strengthening its protection monitoring and analysis – particularly in response to the drawdown of UNAMID which, with travel restrictions due to COVID-19, led UNHCR to pivot towards remote protection monitoring, utilizing its already established community-based protection networks. UNHCR also continues to enhance its Communication with Communities (CwC) in addition to facilitating community access to protection hotlines and monitoring visits to distribution points to ensure physical distancing and handwashing points are in place.

As a member of the Risk Communication & Community Engagement (RCCE) Pillar of the HCT's COVID-19 response, UNHCR is facilitating awareness raising and distribution of banners, posters and leaflets at IDP and IDP returnee areas in North Darfur, in cooperation with the State Ministry of Health, WHO and NGO partners,

together with community volunteers and Women's Protection Networks. A protection monitoring analysis in late May revealed that IDPs and IDP returnees in East Darfur were afraid of informing others about symptoms in fear of corona-specific discrimination and stigmatization. Cross-fertilization across UNHCR's IDP operations in pandemic prevention and response approaches and information products, including from Iraq, has also supported agile and rapid response to emerging protection needs and threats in Sudan.

Despite the pandemic, UNHCR Sudan is committed to an IDP step-up centred on protection, peacebuilding, and solutions for IDPs and returnees. In addition to increasing community support through quick impact projects, shelter and cash for work approaches, UNHCR is facilitating protection and assistance of vulnerable households.

Peacebuilding activities, particularly with the youth, and strengthened overall protection monitoring and analysis – that not only helps inform operational delivery but also ensures that protection is placed at the centre of the larger inter-agency humanitarian response – are further being undertaken.



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**Iraq: clean water reaches IDPs in the Salamiyah 1 camp, Nineveh.** Access to water is essential for applying hygiene rules recommended in the fight against COVID-19.

## Long-standing IDP engagement in Iraq

As of May 2020, there were 1.4 million IDPs in Iraq across 62 IDP camps. IDPs are also based in urban, peri-urban and rural areas, alongside 4.7 million returnees. Given its global stance, UNHCR has stayed and delivered in Iraq, despite the challenges linked to the pandemic. The need for physical distancing and restrictions on movement have affected IDPs and humanitarian workers alike, requiring the revision of procedures and adoption of innovative methods to keep contact, and to keep delivering.

Measures undertaken to continue support to IDPs in Iraq include the reinforcement of health and WASH system and services, distribution of soap and access to water. Direct support is provided to Iraqi authorities with infection prevention and health-care response, including through the provision of medical equipment and supplies.

**Distribution of shelter materials and core relief items, as well as the provision of guidance and fact-based information on prevention measures, remain mainstays to UNHCR operations in Iraq.**

Expanding cash assistance to mitigate the negative socio-economic impact of COVID-19 has been a priority, as well as enhancing remote monitoring interventions to facilitate respect for the rights of internally displaced people. As an integral member of the UN/Country Team (UNCT), UNHCR continues to contribute protection knowledge and expertise to the humanitarian system supporting the Humanitarian/Resident Coordinator and the UNCT in developing pandemic response strategies. This includes providing advice on the development of the post COVID-19 recovery plan and the provision of protection advice to the COVID-19 response cell.



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# Enhancing localization and national capacities

Thorough management of an internal displacement situation is often predicated on the resilience of the host community. There is today an increasing recognition of the development challenges posed by large-scale displacement, and of the need for shared and inclusive growth from which all can benefit, in line with the 2030 Agenda for Sustainable Development.

UNHCR seeks to support Governments' primary responsibility in providing protection and assistance to IDPs including through the provision of technical assistance and capacity building for the development of national frameworks on internal displacement. For instance, in both **Ethiopia**, and **South Sudan**, UNHCR works with the government towards the adoption and implementation of national IDP laws domesticating the African Union's Kampala Convention.

Where possible, UNHCR seeks to promote greater engagement by development partners in settings of internal displacement. This approach enables IDP inclusion in national services, social safety nets, and local and national development plans.

As part of UNHCR tradition, including from its longstanding refugee work, support of and partnership with national and local authorities and organizations is an essential component of its IDP engagement. Concerted efforts in this manner facilitate meaningful local possibilities for operational delivery, coordination and monitoring in relation to IDP protection and solutions.

**Activities to support Localization and build national capacities are more important than ever in the context of the pandemic. As a standard action in all operations, UNHCR seeks to understand barriers faced by IDPs in accessing national services, in particular health. We are advocating for IDP inclusion and, where necessary, support the capacity of authorities to do so.**

**UNHCR is working closely with the Health Cluster and is distributing personal protective equipment (PPE) such as masks, soap and essential medicine to health facilities, while supporting the construction and rehabilitation of water points and medical infrastructure.**

As examples, in **Colombia** UNHCR has provided authorities with housing units and tents to establish isolation areas in IDP sites and field hospitals across the country. In the **Democratic Republic of the Congo**, UNHCR and partners built and equipped nine sanitary checkpoints and two isolation sites in Kasai, while rehabilitating sections of the local Kananga hospital for COVID-19 screening and treatment.

In **Iraq**, UNHCR is providing PPEs and medical equipment support to public health facilities delivering services to IDP camps, sites and urban areas. Building on strong partnerships with the national and governorate health authorities, UNHCR ensured that IDPs were included in the Iraqi COVID-19 preparedness and response plan. UNHCR has similarly been involved in consultations with local authorities in **South Sudan**, supporting the Ministry of Health for the drafting of the country's COVID-19 preparedness and response plan and advocating for a critical assessment to establish the pandemic's impact. This has been possible largely due to the participation of UNHCR in the National COVID-19 Steering Committee and its sub-groups – which include several key stakeholders – both at the country and field level. Efforts to support local authorities also include the creation of livelihood

opportunities by UNHCR in Malakal, where IDPs have been trained to produce face masks for the use of frontline workers and the different communities.

In **Burkina Faso**, local authorities were provided with substantial and much needed support through the purchase of over \$1 million worth of medicines, PPEs including masks, housing units, handwashing stations and water tanks, among others. Emphasis was placed on rehabilitating and adding water points across displacement sites as well as building additional classes, latrines and administrative blocs in four schools in the Sahel. Through an Area-Based Approach, these projects will not only strengthen local infrastructures but will also contribute to peaceful coexistence

between communities in a severely water-scarce area. A similar approach was adopted in **Ethiopia**, where health posts were rehabilitated and core relief items were distributed across multiple sites for the benefit of IDPs, refugees and host communities.

**In parallel, UNHCR continues to advocate with development stakeholders for priority inclusion of internal displacement situations in their pandemic response. We seek as well to facilitate a greater focus on “collective outcomes” in the design of humanitarian response activities and the humanitarian-development nexus. More information on these aspects will be provided in future IDP Updates.**

## High-Level Panel on Internal Displacement: Urging a pandemic lens

As part of its broader submission to the UN Secretary General’s High-Level Panel on Internal Displacement, UNHCR additionally provided COVID-19 specific recommendations. The full text of the UNHCR Submission is available on the [Panel website](#).

Given the pandemic-related complexities in addition to those already faced by internally displaced populations, UNHCR suggested the consideration of four imperatives that underlie the main risks for IDPs, especially those displaced due to conflict and persecution. These include:

- Amplification of the SG’s appeal for a global ceasefire, as conflict is a root cause of internal displacement and a ceasefire will potentially prevent further displacement and offer solutions for some internally displaced people;
- IDP inclusion in national programs and social safety nets responding to the socio-economic impact devastating already impoverished IDP households;
- Urge states and development partners to ensure that IDPs are included in state-led initiatives benefiting from international financial support;
- Advocate against forced return to insecure places of origin, as this cannot be undermined on the basis of exceptional measures within the response to the pandemic.

Visit our **Global Focus** portal for more information on funding needs: [reporting.unhcr.org/financial](https://reporting.unhcr.org/financial)

More information on the IDP-Initiative can be obtained through the Office of the Principal Advisor on Internal Displacement.

