

UNHCR COVID-19 Preparedness and Response

Highlights

- After the deadly and devastating blast in Beirut on 4 August, [UNHCR rushes to support the government-led response](#). The list of more than 200 fatalities also includes at least [34 reported refugee victims so far](#). The massive explosion adds to the already severe economic crisis that had pushed many Lebanese and refugees deeper into poverty, further aggravated by the COVID-19 pandemic.
- In a [press release](#), UNHCR has called upon states to urgently release refugees and asylum-seekers who are being unlawful and arbitrarily held in detention, asking that states act in accordance with international law and that amidst the COVID-19 pandemic, vulnerable refugees are not placed at heightened and unnecessary risk.
- Since the beginning of UNHCR's COVID-19 response in Southern Africa, almost 1,900 health workers have been trained on COVID-19 prevention and response, nearly 4,400 additional hand washing facilities have been established and over 329,300 households received soap for handwashing to prevent COVID-19.



South Sudan. Youth from internally displaced and host communities have renovated the external walls of the UNHCR office to reach out to people with hearing impairments.

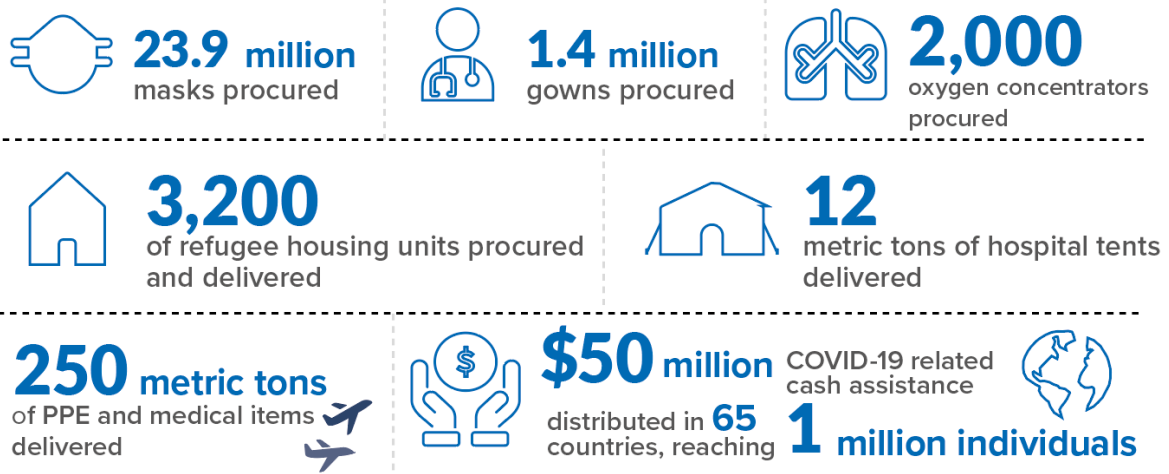
Global Overview

The COVID-19 pandemic has created challenges for forcibly displaced persons and the humanitarian organizations working to support them. With restrictions on movement and limited access to refugees, asylum-seekers, internally displaced people (IDPs) and stateless persons across the globe, UNHCR is supporting displaced communities to take the lead in the prevention of, and the response to, the existing and emerging protection needs of women, men, girls and boys of diverse backgrounds. In Uganda, a community engagement strategy for the COVID-19 crisis has been finalized, setting out the roles that refugee communities can play in delivery of critical services and how they can be empowered to undertake these roles, in light of the sometimes limited physical presence of UNHCR and partner workforce at the frontline.

UNHCR also continues awareness raising and protection activities through remote arrangements and enhanced communication with persons of concern. UNHCR's South Sudan operation has utilised a number of creative means to share public health information and combat misinformation. In collaboration with the government of South Sudan and local partners, information in relation to COVID-19 has been distributed in inclusive forms, such as pictorial materials suitable for children, illiterate persons, and people with communication challenges. In collaboration with Jamjang FM radio station and INTERNEWS, a variety of communication challenges (talk shows, drama, jingles, and [songs](#)) have been adapted with health messages, complementing the multifaceted approach.

In Botswana, UNHCR's partner has engaged both community and religious leaders to educate them about COVID-19 prevention, and also to equip them to share this information with their communities. Approximately 1,100 refugees have so far been reached through both community outreach such as this, as well as door-to-door awareness-raising. In Tongogara refugee camp, Zimbabwe, UNHCR, partners and the Ministry of Health strengthened COVID-19 awareness among 300 youth and persons with disabilities through structured small group discussions. In addition, the occasion of firewood distribution in the camp presented an opportunity for COVID-19 outreach.

Among the key items procured or delivered by UNHCR



UNHCR Response

Progress to date and Impact

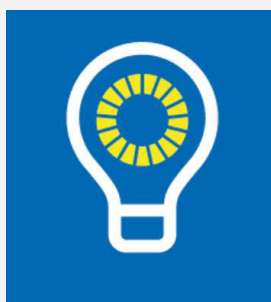
- In Jordan, also thanks to the advocacy of UNHCR, health access costs will be lowered for non-Syrian refugees, representing a significant gain, particularly at a time when equitable access to health services for refugees is of the utmost importance. In addition, the Jordanian Ministry of Interior announced that Asylum-Seeker and Refugee Certificates issued by UNHCR to refugees in Jordan will be considered valid until the end of 2020, regardless of the date of expiry.
- UNHCR operations continue to focus on targeted shelter interventions to decongest the most overcrowded sites while distributing core relief items to allow for the implementation of the most basic prevention measures.
- In the Central African Republic, an estimated 373,00 refugees, internally displaced people and hosts have been reached through sensitization campaigns on COVID-19 since the beginning of the pandemic. In Afghanistan, UNHCR has reached some 1,464,000 people with its COVID-19 awareness raising activities. In Syria, more than 467,000 individuals have been reached through risk communication and community engagement including more than 135,000 Syrians as well as refugees reached through community outreach volunteers.

Gaps and Challenges

- The pandemic continues unabated with over 19.7 million cases and over 728,000 deaths reported by the World Health Organization as of 11 August 2020.
- Due to strict movement restrictions, access to livelihood and basic services is proving challenging for displaced persons, further raising their exposure to negative coping mechanisms.
- As of 5 August, 79 countries had their borders completely closed, which had an impact on access to the territory. At the same time, 13 countries have no COVID-19 related restrictions and 78 countries impose restrictions, but with exceptions for asylum-seekers. National asylum systems are fully (57) or partially (53) operational in 110 countries.

Innovative Practices

AI-based computer simulation to combat COVID-19 in Bangladesh



UNHCR's Bangladesh operation and the Innovation Service, alongside WHO Bangladesh, are currently supporting the UN Global Pulse's research on COVID-19, to use Artificial Intelligence (AI) to build a computer simulation that 'mimics' the interactions of UNHCR's persons of concern in the Kutupalong refugee camps in Cox's Bazar. Using innovative methodologies such as agent-based modelling and human-centered design, the project aims to better understand transmission points and the effects of operational health measures (e.g. use of masks, WASH-related initiatives, mobility reduction).

Regional Updates

Middle East and North Africa (MENA)

After the deadly blast that devastated large parts of Beirut, Lebanon on 4 August, an already overstretched health sector is grappling with the response to treat thousands of injured civilians. Lebanon has been going through a major economic crisis along with a rise in COVID-19 infections, with this latest event overwhelming the country further. The explosion in the port area of Beirut has destroyed at least 17 containers of medicine, medical equipment and personal protective equipment that would have been used for the COVID-19 response. With significant dependency on wheat imports for food supplies, the destruction of large quantities of wheat and flour is prompting fears of further food insecurity.

As the host to the largest refugee population per capita in the world, the COVID-19 crisis in Lebanon has fuelled socio-economic vulnerabilities among Lebanese and refugees, pushing families further into poverty. UNHCR outreach volunteers, dedicated hotlines and the UNHCR-WFP call centre indicate that persons of concern are consequently facing numerous protection risks including exploitation and abuse, mental health issues, raids/evictions, children at risk of worst forms of child labour or of dropping out of school, and unaffordability of health care and medication. Self-harm has been reported. In response, UNHCR has raised the cash transfer value as well as the number of beneficiaries from 34,500 families to 51,400 families.

In Yemen, phone call requests from refugees and asylum-seekers for financial assistance have increased by 30 per cent in the north, compared to weeks prior. Many single refugee males requested livelihood support, while families reported lack of income opportunities

and threats of eviction as the main challenges. Out of the 5,500 refugees and asylum-seeking families who are receiving cash assistance, 4,000 families were selected due to COVID-19 related vulnerabilities. Meanwhile, UNHCR is supporting the public health response through provision of medical equipment that included three ventilators and three anaesthetic machines to a hospital in Sanaa' where refugees and impoverished Yemeni patients are referred for secondary and tertiary care. UNHCR also continues to support the construction of a large intensive care unit in the north.

Asia and the Pacific

In Asia a trend of voluntary returns can be observed due to the increasingly difficult situation caused by COVID-19. In the Philippines, persons of concern to UNHCR continue to raise the lack of support systems and available options to survive in the country, entering a fourth month of movement restrictions. Some have reportedly begun to explore options for onward movement or voluntary return to their countries of origin. In India, UNHCR has seen increasing numbers of Afghan asylum seekers and refugees wishing to return to their countries of origin during this period, the highest all year. The main reasons cited were the inability to cope financially in India and the need to support ailing family members in their home country. Following a stocktaking exercise on psychosocial support interventions, the need to immediately strengthen individual, family and community psycho-social support was highlighted across all locations.

Across the region, UNHCR's cash assistance programmes remain a vital lifeline for persons of concern who have in many cases been left with no source of income due to COVID-19. For

example, UNHCR Pakistan continues to implement its emergency cash programme in target districts and has so far provided emergency cash assistance to more than 22,000 refugee families. Overall, the programme aims to assist 70,000 refugee families.

West and Central Africa

Since the beginning of the rainy season, heavy rainfalls and floods have hit several hosting areas, especially in the Sahel and Nigeria. This represents an additional challenge to the implementation of preventive measures against COVID-19. In Burkina Faso, the rainy season brought heavy rainfalls further reducing access to displaced populations many of whom are living in flood-prone areas making it harder for them to enforce basic preventive measures against COVID-19. UNHCR is currently working with the authorities to identify safer sites to relocate those most at risk of floods and is stepping up shelter interventions and non-food-items distributions to rebuild damaged houses and community buildings while decongesting the most overcrowded and flood-prone sites.

In Cameroon, the security situation continues to deteriorate in the Far North, hindering UNHCR's response. On 2 August, an attack on a site hosting 800 internally displaced people near the village of Nguetchewe caused the death of 18 people. This attack follows a significant rise in violent incidents in Cameroon's Far-North Region in July, including looting and kidnapping by Boko Haram and other armed groups active in the region. In the Central African Republic, the insecurity and the political instability related to the upcoming presidential and parliamentary elections is of concern and hinders UNHCR's COVID-19 response, in a country where health and WASH facilities are extremely rare.

As some countries in the region are relaxing their restrictions on movement, UNHCR is starting to reinstate in-person activities while stepping up the dissemination of tools and guidance to help operations mitigate the risk of contamination during these community engagements. As local economies are progressively reopening, UNHCR operations are enhancing their livelihoods activities to help refugees and internally displaced people to strengthen their self-reliance. In July, UNHCR supported the authorities in their efforts to ensure a smooth return to school across the region by contributing to sensitization and capacity-building activities for teachers and students on safety measures against COVID-19.

East and Horn of Africa and the Great Lakes

The COVID-19 situation in the East and Horn of Africa, and the Great Lakes region (EHAGL) has entered its six month since the first cases were reported in March 2020. As the situation continues to evolve, the region is still relatively less impacted than the rest of the continent. As of 5 August, there were over 70,250 confirmed COVID-19 cases in the 11 countries overseen by the EHAGL Bureau. While so far there has been no large-scale outbreak in the approximately 100 refugee camps and settlements in the region, 4.6 million refugees and their host communities are at risk, as are some 8.1 million internally displaced people. The need for preparedness remains urgent as cases are still rising in all countries of the region and a number of locations still lack adequate quarantine, testing and isolation/treatment facilities.

In Burundi, UNHCR conducted several border monitoring missions which found that despite the border closures, some Burundian refugees had returned spontaneously from Rwanda,

citing the inability to undertake livelihood activities with the COVID-19 movement restrictions. In Sudan, an inter-agency mission with the government and several humanitarian organizations identified that significant numbers of refugees are entering the country from South Sudan through nearby villages along unofficial border crossings. To minimize the risk of COVID-19 infection in refugee camps, the mission recommended that a quarantine center be established at the existing border reception point and measures put in place to require a certificate confirming completion of quarantine before admission to the camps. UNHCR will work with the Commissioner for Refugees to establish this center.

Southern Africa

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

As COVID-19 restrictions have had severe economic impacts on vulnerable populations, including refugees, asylum-seekers and internally displaced people and the number of people requesting assistance from UNHCR has increased significantly, UNHCR has been working to link COVID-19 activities with livelihood opportunities for refugees, asylum-seekers and host communities, as well as working to include persons of concern into livelihood and cash assistance opportunities offered by partners and the government. In Malawi, for example, UNHCR is conducting a

Digital Inclusion Program through online training during the COVID-19 pandemic. Students have been supported with laptops and mobile WIFI, and are provided with monthly data bundles. Some of the students have already started earning money through online jobs, which has enhanced their livelihood and improved their quality of life, particularly amidst the economic hardships of the COVID-19 pandemic. Also, in Malawi, students in the DAFI programme (Albert Einstein German Academic Refugee Programme) continued to receive their stipends to support online tuition provided by their respective universities, to ensure their studies continue in spite of COVID-19 restrictions. Since the beginning of the COVID-19 response more than 500 students at all levels have been supported with distance and home-based learning in Malawi.

Europe

As border restrictions are being lifted as well as travel bans, access to territory and international protection continues to improve in parallel of exemptions to entry restrictions for asylum-seekers, therefore population movements resume. However, countries experiencing COVID-19 spikes, have systematized mandatory testing and quarantine measures for new arrivals, although practices regarding the timing of COVID-19 testing vary from a country to another. This is particularly the case for new arrivals by sea. In Sicily, Italy, for example, new arrivals undergo serological testing either on board the vessel or at disembarkation, prior to entering quarantine, individuals who test positive are placed in isolation and also undergo swab testing while in Spain, new irregular arrivals in Melilla are held in quarantine for 14 days even if the test results are negative. Discriminatory movement restrictions for asylum-seekers and migrants are being reported in some countries in Europe, resulting in aggravated protection issues –

including violence and gender-based violence in substandard reception settings for persons of concern. UNHCR closely monitors the situation and continues advocating for equal treatment for asylum-seekers, refugees and migrants, compared to the rest of the population.

In some locations, current arrangements continue to be challenging, for example in Lampedusa, which remains largely overcrowded with a total of 1,000 persons accommodated in the island's hotspot (against a capacity of 200). In light of the situation, UNHCR increased its workforce presence to continue monitoring disembarkations and providing support as required. As of 3 August, UNHCR Greece has provided accommodation and protection services to almost 1,600 asylum-seekers vulnerable to COVID-19 complications. These individuals have been transferred out of island Reception and Identifications Centres (RICs) into apartments of the Emergency Support to Integration and Accommodation (ESTIA) programme on the mainland and hotels on the islands. Although the population in the RICs has dropped to 25,700, the sites remain overcrowded and unhygienic conditions prevail, with an actual capacity of just 5,400.

Americas

The Americas continue to be the epicentre of the pandemic, with 55 per cent of the cases reported globally (16.8 million as of 31 July). The Peruvian Ministry of Health reported that more than 25 per cent of Lima's population, about 2.7 million people, have been infected. Chile, with over 353,000 cases, had the highest cumulative incidence rate (16.6 individuals affected per 1,000 people) followed by Panama (15 cases per 1,000 people).

In light of the death of a transgender asylum seeker in Guatemala, UNHCR issued a [press release](#) highlighting the increased risks and protection needs for the LGBTI¹ community. UNHCR is alarmed that the risks of violence are heightened as a result of the COVID-19 pandemic. Of the 160 people assisted by UNHCR's partner, COMCAVIS Trans since the beginning of the pandemic, 79 persons had been forced to flee persecution and threats by gangs. In the north of Central America transgender people are often subjected to brutal harassment and violence, especially by criminal gangs. According to a 2019 report by COMCAVIS Trans, the majority of LGBTI people – particularly transgender women – are often initially forcibly displaced within their own country, escaping gang threats, murder attempts, and physical and sexual violence. In addition to increased sexual and gender-based violence that has been documented during the strict lockdowns across the region, LGBTI people in Central America have also had limited access to support.

In collaboration with partners in Honduras, Guatemala and El Salvador, UNHCR has continued its regular community-based protection initiatives despite the difficulties imposed by the pandemic, in an effort to create the conditions for effective protection for those forcibly displaced both in countries of origin and of asylum. In Ecuador, for example, UNHCR has established a helpline for LGBTI persons and in Central America, UNHCR has also increased its assistance programmes to provide cash support to LGBTI people in vulnerable conditions.

¹ LGBTI is an abbreviation for 'lesbian, gay, bisexual, transgender, and intersex'.

Coordination and partnerships

The 19th virtual global NGO consultation provided a platform for 50 participants to discuss the effects of COVID-19 on mental health, COVID-19 mental health and psychosocial support (MHPSS) coordination, adaptation of MHPSS programming and best practices in the field. Participants concluded that the availability and continuation of MHPSS services for refugees and those displaced must be ensured and that MHPSS should be included in the national responses to COVID-19.

UNHCR's Regional Bureau in the East and Horn of Africa and the Great Lakes co-led with the Africa Council of Religious Leaders the development of an 'Inter-agency Tip Sheet on Self-Care, Engagement and Supportive Communication for Social Mobilizers' as part of the inter-agency working group on risk communication and community engagement for COVID-19. The document provides practical tips to social mobilizers on how to take care of themselves and engage community members through supportive communication.

Protecting Forcibly Displaced Children during the COVID-19 Pandemic



Children face three dangers during the COVID-19 pandemic: 1) infection with the virus; 2) the immediate impacts of measures to stop transmission of the virus (school closures for example); and 3) the long-term impact of the resulting economic crisis on social and economic development with regard to the Sustainable Development Goals.

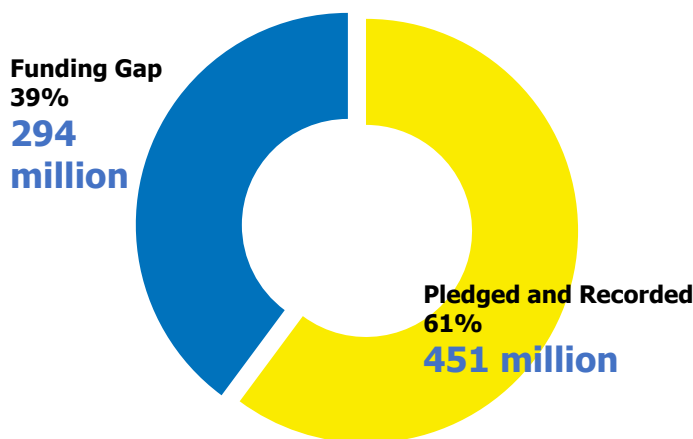
This brief provides a snapshot of child protection interventions by UNHCR and its partners during the pandemic, covering community engagement, case management, alternative care and capacity building.

Financial Information

On 17 July, the second revision to the COVID-19 Global Humanitarian Response Plan was launched, seeking USD 10.3 billion to support global humanitarian response through December 2020. UNHCR seeks USD 745 million for all refugee and IDP operations worldwide. While the initial appeal focused on preparedness and prevention, the revised appeals are increasingly focused on response activities to address the immediate public health, protection and humanitarian assistance needs of refugees, the internally displaced and host communities prompted by the spread of COVID-19. More detailed information on UNHCR requirements within the GHRP was shared in the [11 May revision to the UNHCR Coronavirus emergency appeal](#).

USD 745M

Requested for UNHCR's COVID-19 response globally until the end of the year:



Unearmarked contributions to UNHCR's 2020 programme:

Sweden 76.4M | Norway 41.4M | Netherlands 36.1M | Denmark 34.6M | Private donors Spain 33.1M | United Kingdom 31.7M | Germany 25.9M | Private donors Republic of Korea 17.3M | Switzerland 16.4M | France 14M | Private donors Japan 11.7M

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.

Total contributed or pledged to the COVID-19 appeal:

USD 451M

Including:

United States	\$186.3M
Germany	\$62.7M
European Union	\$44.6M
United Kingdom	\$31.5M
Japan	\$23.9M
African Development Bank	\$18.3M
Denmark	\$14.6M
United Nations Foundation	\$10.0M
Private donors	\$8.8M
CERF	\$6.9M
Canada	\$6.4M
Qatar Charity	\$3.5M
Spain	\$3.4M
France	\$3.4M
Ireland	\$3.3M
Sweden	\$3.0M
Sony Corporation	\$2.9M
Austria	\$2.5M
Finland	\$2.4M
Unilever	\$2.1M
Education Cannot Wait	\$1.8M
UNO-Flüchtlingshilfe	\$1.7M
Norway	\$1.4M
USA for UNHCR	\$1.0M

More information:

[Global Humanitarian Response Plan COVID-19](#)
(launched 17 July 2020)



[Global Focus COVID-19 Situation page](#)
(including UNHCR's Coronavirus emergency appeal and sitreps)



[UNHCR Covid-19 data portal](#) (including global guidance, sitreps and links to other UNHCR COVID-19 related sites)



Contact:

Lea Moser, moserl@unhcr.org

Specific country examples

Mexico

Since the start of the pandemic, UNHCR teams in Mexico have assisted remotely with local integration and protection guidance to 5,450 asylum-seekers and refugees. Out of those contacted, the teams have identified almost 900 unemployed refugees and asylum-seekers, to whom UNHCR has provided, directly or through partners, counselling and cash support to cover their basic needs.

Portugal

In Portugal, with the gradual re-opening of borders, preparations for the resettlement of refugees have resumed, with a first group of 19 persons expected to arrive from Turkey on 19 August, and another group of 25 individuals the following day. In the meantime, Portuguese authorities have been actively seeking for new reception possibilities across the country, with some success.

Chad

In Chad, UNHCR supported the government's COVID-19 response through the training of additional medical personnel. So far, 96 out of 176 health personnel were trained on epidemiological surveillance and COVID-19 cases management and 25 out of 75 laboratory technicians were trained in COVID-19 patient screening.

Central African Republic

Since the beginning of the pandemic, a total of 400 mobile phones have been distributed in the Central African Republic to enable protection monitoring through community and protection committees in internally displaced sites. This remote monitoring covers over 100,000 internally displaced people so far.

Zambia

Risk communication targeting children and youth has been a focus in Zambia, where over 900 COVID-19 child-friendly prevention posters were distributed in Kalumbila district to 12 schools, clinics, and other public places. 200 additional posters were donated by UNHCR to the Kalumbila District Education Board to reach children in the host community as well.

Belarus

In Belarus, UNHCR in partnership with three Belarusian mobile operators reached close to 8,000 persons of concern, through SMS, sharing information and contact numbers to be contacted in case any COVID-19 related assistance needed, as well as any other assistance or information in relation to international protection.

Syrian Arab Republic

In the Syrian Arab Republic, as part of infrastructure and shelter activities, UNHCR has supported 30 collective shelters with renovation and rehabilitation and 200 emergency shelters have been distributed for the COVID-19 response. To help communities socially distance, more than 900 shelter kits have been distributed since the start of the COVID-19 crisis.

Libya

During the last five months, UNHCR and partners have distributed 9,000 hygiene kits to detainees in detention centres in Libya as part of the COVID-19 response and have continued distribution of non-food item kits and carried out over 180 protection monitoring visits since the start of 2020. Advocacy for the release of refugees and asylum-seekers from detention is ongoing, noting the additional risks to individuals posed by COVID-19.

Pakistan

UNHCR Pakistan is working with other UN Agencies in a joint program to engage young people in the COVID response. Several refugee youth are participating with Pakistani youth in training sessions that are aimed at fostering a better understanding of infection prevention and their responsibility within the wider community. It is expected that youth will be fully engaged as educators and agents of change in their communities, thereby assisting with psychosocial support for the people who might have lost their confidence due to change on their livelihood/ economic support structures because of COVID-19.

Rwanda

In Rwanda, UNHCR started the installation of refugee housing units (RHUs) to act as a COVID-19 treatment center in Nyamagabe District. The center has 43 RHUs installed with WASH facilities, an intensive care unit area and four hospital tents.

Tanzania

In Tanzania, almost 389,000 masks have been produced and distributed to refugees and asylum seekers in the camps since 31 May 2020. The mask production was done through livelihood programs by refugees and coordinated and distributed by partners.

Zimbabwe

Since the beginning of the COVID-19 response, UNHCR has supported and equipped four health centres, one isolation centre and one quarantine centre in Zimbabwe.

Peru

In Peru, over 860 activities on psychosocial support and empowerment to mitigate Sexual Gender-Based Violence (SGBV) and case referrals have been carried out through UNHCR and partners. For instance, in Cuzco and Lima, some 60 teenagers participated in SGBV prevention strategy sessions conducted by UNHCR's partner Plan International.

India

In India, UNHCR partnered with UNICEF to expand their partnership with the Ministry of Youth and Sports under the YuWaah platform – a platform focusing on youth in COVID times to promote volunteerism among India's youth.