WIGRATION COVID-19 DISEASE RESPONSE SITUATION REPORT 36 [26 JANUARY - 22 FEBRUARY 2021

113,467,303 Confirmed cases in over 200 countries, territories or areas¹

2,520,550 Deaths from COVID-19

104,490 Travel related measures have been issued by 277 countries, territories or areas

\$339 M Received by IOM for its Global Strategic Preparedness and Response Plan for Coronavirus 2019²

			\$	Received: 339 M	Gap: \$279 M (Requested: \$619 M)
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New funds: \$269 M; Reprogrammed funds: \$70 M.



IOM staff delivers PPE in Al Geneina, Sudan. © IOM 2020

SITUATION OVERVIEW

COVID-19 continues to spread rapidly across the globe. As of 1 March, and since the outbreak began in December 2019, close to 113.5 million confirmed cases have been reported worldwide, with over 2.5 million reported deaths. Confirmed cases have been reported in more than 200 countries, territories, or areas. As of 23 February, the number of new global cases reported weekly has dropped for the sixth consecutive week, and the number of new deaths has also dropped for the third consecutive week. Only south-east Asia and the eastern Mediterranean regions are reporting slight increases in the numbers. Since December 2020, vaccination campaigns against COVID-19 have begun in over 100 countries.³

Between 26 January and 22 February 2021, a total of 227 countries, territories, or areas have issued 104,490 travel-related measures indicating a decrease of eight per cent from 114,490 reported on 25 January 2021. Of these, 75,619 were reported as conditions for authorized entry such as medical requirements while 29,731 were reported as entry restrictions such as airport closures and passenger bans. In the reporting period, there was an increase of three per cent in the entry restrictions and

a decrease of 12 per cent in conditions for authorized entry. In terms of conditions for authorized entry, there was a decrease of 13 per cent in medical requirements such as medical certificates and eight per cent decrease in new visa requirements for entry. There was an increase of 40 per cent in entry restrictions on nationals of specific countries, territories, or areas and a 17 per cent increase in visa restrictions such as invalidations and suspensions. In parallel to existing travel restrictions, a total of 189 countries, territories, or areas have issued 795 exceptions enabling mobility despite travel restrictions. As of 22 February 2021, 10 countries, territories, or areas issued 23 new exceptions whilst four countries, territories, or areas removed eight exceptions.

The dramatic impact of these measures on mobile and displaced populations around the world continues, with considerable variation based on the policy and epidemiological contexts in their sending, transit, and receiving areas. As new COVID-19 variants spread, entry and testing regulations and measures are evolving rapidly, and mobile populations often lack timely, accurate information about these changes. In addition, as countries ramp up their vaccination campaigns,

¹Source: WHO COVID-19 Situation Dashboard: <u>https://covid19.who.int/</u>.

²Funding received excludes the <u>USD 25 million CERF contribution</u> which is towards NGOs rather than IOM's appeal. See <u>Global Crisis Response Platform</u> for more information.

³Our World in Data, "Coronavirus (COVID-19) Vaccinations": <u>https://ourworldindata.org/covid-vaccinations#country-by-country-data-on-covid-19-vaccinations</u>

barriers often remain to the inclusion of migrants, refugees, asylum seekers, and internally displaced persons (IDPs) in these schemes. To address these and other questions, IOM missions around the world are working with governments and partners to ensure that migrants, whether in regular or irregular situations, as well as returnees and forcibly displaced persons, are included in all aspects of COVID-19 preparedness, response, and recovery efforts.

SNAPSHOT OF IOM RESPONSE

Coordination and Partnerships

IOM is engaged in ensuring strong and efficient coordination among relevant actors at the community, national, regional and global levels to support the global pandemic response, particularly in coordinating cross-border efforts.

- IOM Eritrea, in partnership and coordination with the UN Country Team, is advocating for the establishment of quarantine facilities at airports and land transport hubs as part of preparations for the end of the current COVID-19 induced lockdown.
- IOM Egypt, in collaboration with IOM's Regional Office in Cairo and IOM's Africa Capacity Building Center (ACBC), conducted health, border, and mobility management capacity-building activities for 90 national and international participants. The discussions focused on dialogue and the exchange of experiences on COVID-19 response from a migration and/or mobility perspective, including sessions on international and IOM-specific frameworks, communicable disease comparison, gender and COVID-19, migrants' vulnerabilities, and national response plans.
- IOM Thailand is working closely with the Royal Thai Government to share up-to-date, reliable, and translated information with migrants, who have been disproportionally affected by a new wave of COVID-19 infections. During live national COVID-19 briefings, the Ministry of Foreign Affairs has referred to IOM Thailand's online migrant information hub, <u>MitrThai.com</u>, the new IOM supported <u>Quizrr app</u>, and infographics on eliminating stigma and discrimination against migrant workers.
- In collaboration with the Ministry of Public Health, Costa Rica Social Security, and the School of Public Health, IOM Costa Rica developed and coordinated a national health and mental health strategy, which included a focus on the socioeconomic and health situation of the migrant population in Costa Rica during the pandemic.

Tracking Mobility Impacts

As movement across borders continues to be affected, IOM's capacity to provide data and analysis on population mobility dynamics remains crucial for a more targeted and evidence-based response.

In an effort to provide an overview of the impact of COVID-19 on human mobility at the global, regional and country levels, IOM is monitoring, analysing, and reporting on international travel restrictions being implemented around the world and is conducting Mobility Restriction

Mapping for points and locations impacted by local restrictions on mobility. IOM has developed a global mobility database to map and gather data on the locations, status, and different restrictions in place at **PoEs** and key locations of internal mobility. As of 11 February 2021, IOM has assessed 4,307 PoEs (including 1,098 airports, 2,495 land border crossing points, and 714 blue border crossing points) in 182 countries, territories, and areas. The measures observed across these locations included restrictions on entry and exit, changes in visa and document requirements, medical requirements, restrictions on nationalities, medical certificate requirements, and other measures limiting mobility. These restrictions impact populations including regular travellers, nationals, stranded migrants, and other populations such as tourists.

The IOM COVID-19 Impact on Points of Entry Bi-Weekly Analysis can be accessed <u>here</u>. The 17 February 2021 Bi-Weekly Analysis sheds light on the key findings of the Immigration and Border Management (IBM) assessment conducted at 306 PoEs, including 198 ground crossings, 66 airports, and 42 ports, during the period of December 2020 to January 2021. The assessment focused on the engagement of immigration and border authorities in the COVID-19 preparedness and response at the PoEs.

IOM tracks and monitors in-country and cross border flows in order to understand population mobility trends within and between certain areas, which in turns helps to inform public health preparedness and response strategies.

- In Chad, from July to December 2020, DTM conducted 3,817 individual surveys across eight flow monitoring points (FMPs) to better understand COVID-19's impacts on migration flows across Chad and gain more insight into travellers' knowledge of the virus and its symptoms, the protective measures taken during travel, and the challenges faced since the beginning of the pandemic.
- IOM has released its 11th report analysing COVID-19's impact on migration along the Eastern Corridor. The report provides a snapshot of mobility restrictions and current migration trends along the Eastern Corridor migration route, in addition to analysing movement restrictions' impact in Djibouti, Ethiopia, Somalia, and Yemen. Moreover, it provides information on the main protection concerns for migrants, assistance provided, and COVID-19 risk mitigation measures. Key findings include: 4,585 migrant movements were tracked entering Djibouti in January 2021, a 40 per cent increase compared with December 2020. 409 migrants on their way to the Arabian Peninsula were stranded in Djibouti and

had gathered in 13 spontaneous sites located along the migration route. Returns of Ethiopian nationals from the Kingdom of Saudi Arabia to Addis Ababa continued in January 2021, with 2,199 Ethiopians returning compared with 613 returns in December 2020, which represents an almost four-fold increase. Overall, 2,500 migrant arrivals to Yemen from the Horn of Africa were recorded in January 2021, a 23 per cent increase from December but a decrease of 82 per cent as compared to January 2020.

- In Ethiopia, a total of 14,984 movements were observed across IOM's five FMPs in December 2020, representing a 34 per cent increase in daily average movements in comparison to November 2020 (360). The average daily movements tracked in December is also 29 per cent higher than movements tracked in February 2020 (376), which was prior to the emergence of the first confirmed COVID-19 case in Ethiopia. It should be noted that data collection at Humera FMP in Tigray region could not take place due to conflict.
- In Kenya, IOM conducts flow monitoring (FM) activities at the border with Tanzania. A total of 4,943 were observed during the month of December 2020. This rate represents a 25 per cent decrease in daily average movement in comparison with November 2020. Most individuals surveyed claimed their movements were motivated by family (32 per cent) or economic related (29 per cent) reasons. 92 per cent of those in transit were aware of the COVID-19 protection measures and signs.
- In Malawi, IOM conducts FM activities at Malawi's borders with Tanzania and Mozambique. Between 16 November and 12 December 2020, IOM collected data at 17 FMPs tracking mobile populations, establish their vulnerabilities, needs, services gaps sharing this data with stakeholders to support designing their interventions in response to COVID-19.
- In Nigeria, between October and December 2020, IOM observed an average of 1,336 individuals at FMPs daily. This rate represents an increase of 8 per cent in comparison to the 1,242 average individuals observed daily between July and September 2020. Regardless of the stricter travel restrictions due to COVID-19 and greater difficulties crossing the Nigerian border, travellers find alternate routes to by-pass immigration officials.
- In South Sudan, DTM has been implementing flow monitoring and remote assessments at PoEs to inform the wider response by generating and analysing information on mobility, a strategic priority set out by the National COVID-19 Response Plan for the Points of Entry pillar. A report covering the period February – December 2020 has been released and makes use of flow monitoring data to analyse COVID-19 travel restrictions' short- and medium-term impact on cross-border mobility.

IOM is also tracking and monitoring the impact that COVID-19 is having on IDPs and migrants.

- In Mauritania, between 13 and 16 December 2020, IOM and the National Statistics Office carried out a pilot study among a sample of 155 migrants residing in the municipalities of El Mina and Sebkha in Nouakchott in preparation for a more in-depth assessment on the migrant population in the city, their profiles, needs, and living conditions. Findings include the socio-demographic characteristics of the migrants surveyed, their migratory journey, means of subsistence, access to health services and assistance, housing, living conditions, organization and relations with the host community, their intentions to return, and the socio-economic impact of COVID-19.
- In Nigeria, IOM released findings from Round 2 of its COVID-19 Situation Analysis, which is based on an assessment of knowledge, practice, and impact of the pandemic on IDPs in conflict-affected communities in the geopolitical zones of North West and North Central in Nigeria. The assessment was carried out between 19 November and 6 December 2020, and findings include awareness of COVID-19 among IDPs, means of getting information on the virus, level of awareness, exposure to communication on the risks associated with COVID-19, the means of obtaining information about the risks, mitigation measures taken, health centres' preparedness in managing confirmed cases, potential threats of COVID-related evictions, any disruption of services due to COVID-19, and access to infection and control facilities. In addition, findings from Round 4 of the COVID-19 Situation analysis for North-Eastern Nigeria has been published covering the period 9 to 21 November 2020.
- In Thailand, on 7 and 8 January 2021, IOM conducted a rapid needs assessment to better understand the situation and vulnerabilities of migrants affected by the recent COVID-19 outbreak in Machachai subdistrict of Mueang Samut Sakhon district, Samut Sakhon. Findings include indicative information on migrants' food, hygiene, and medical assistance needs.

The COVID-19 Mobility Impact Portal acts as a central repository and dissemination channel for flow monitoring, mobility tracking, border management, movement and other reports, maps, and outputs produced at the country, regional, and global levels in relation to COVID-19. The portal includes interactive analytical tools to support a more in-depth analysis of COVID-19's impact on human mobility

Risk Communication and Community Engagement (RCCE)

IOM is working with RCCE counterparts at the global, regional, national and community levels to develop RCCE strategies that ensure that mobility is properly considered in public health messaging, and

that migrants and mobile communities have access to timely, context-specific, and correct information.

- IOM Ethiopia reached 38,842 individuals, including IDPs and migrant returnees, with COVID-19 prevention messaging through door-to-door campaigns, community mobilization, and health education at health facilities in Dire Dawa, East Hararghe, Jigjiga, Gedeo, Borena, West Guji and East Wollega Zones, as well in two IDPs sites in North Gondar. IOM also distributed 2,504 comic books with COVID-19 related information in Borena and West Guji IDP sites and provided four public address systems in East Wollega to support community sensitization campaigns.
- IOM South Sudan has reached nearly eight million people with COVID-19 messages since the pandemic's outbreak. IOM also conducted a survey on the COVID-19 prevention measures in Juba. Of the 19,785 individuals observed at handwashing facilities, 56 per cent washed their hands while 29 per cent wore facemasks. The survey was conducted in 28 out of the 36 public places where IOM is conducting COVID-19 prevention related activities. A similar exercise was conducted in Nimule, where of the 2,762 people surveyed in three public places, 59 per cent washed their hands.
- IOM Libya medical team conducted 178 outreach campaigns and awareness raising sessions for 5,999 migrants on COVID-19 prevention measures in Sabha, Ubari, Tripoli, and Benghazi.

Disease Surveillance

Migration and mobility are increasingly recognized as determinants of health and risk exposure; IOM plays a key role in linking an understanding of population mobility with disease surveillance.

 IOM Burundi is introducing community-event based surveillance (CEBS) in Ruyigi province to help in early detection of outbreaks such as COVID-19, and trained 50 community health workers for this. The Office also supports 200 community health workers currently implementing CEBS, with a focus on COVID-19 within cross-border communities. Each trainee was provided with a bicycle, a mobile phone, personal protective equipment (PPE), and information, education, and communication materials to facilitate their work.

Points of Entry (POEs)

IOM is a strategic partner to support Member States in strengthening core capacities for public health measures at points of entry, through mobilizing its broad range of expertise in migration management and emergency operations.

 In Tanzania, IOM collaborated with the Ministry of Health, Community Development, Gender, Elders, and Children to facilitate mentorship and onsite trainings to 66 border and port health officers from 12 formal PoEs in Kigoma and Kagera regions. They were trained on integrated disease surveillance and response, contact identification and tracing, isolation techniques, and use of medical equipment to treat and respond to public health events including COVID-19 and Ebola virus disease.

- IOM Libya supported the NCDC staff at Misurata International Airport, and Ras Jedir and Wazin PoEs by providing medical screenings to all passengers returning to the country. A total of 67,767 travellers were screened through temperature checks and general health assessments.
- IOM Moldova donated over 403,500 PPE items, UVC germicidal lamps for air sterilization, automatic dispensers, nebulizers for room disinfection, disinfectant mats, medical equipment, 500 rapid COVID-19 tests, and over eight tons of disinfectant and liquid soap to the General Inspectorate of Border Police and National Administration of Penitentiaries.
- IOM Belize donated PPE and cleaning supplies to 25 immigration officers at the International Airport, the only PoE officially open in the country.
- IOM Haiti supported the Ministry of Public Health to implement the national COVID-19 protocol at 10 PoEs. This support included rehabilitation activities for basic infrastructure and operational and human capacity strengthening.
- IOM Trinidad and Tobago conducted a PoE assessment to enhance the Airports Authority of Trinidad and Tobago's response to the COVID-19 pandemic. Areas identified for IOM support included identified standard operation procedures and training for staff on newly introduced COVID-19 measures had implemented by the Airports Authority. IOM also handed over equipment and supplies to the authorities. The event was widely covered on local television stations and print media.
- IOM Costa Rica continued implementing the Traceability System for Migrant Workers, a seasonal migration monitoring system that also helps monitor COVID-19 cases. This system supports the regularization of migrants in Costa Rica, strengthening migration management in the context of COVID-19.
- IOM South Sudan continued COVID-19 screening at Nimule Ground Crossing, reaching a total of 10,384 travellers. In addition, IOM provided a supply of clean water through water trucking, rehabilitation and maintenance of sanitation facilities, construction and installation of handwashing facilities, and supply of IPC materials, such as face masks, soap, and hand sanitizers.

National Laboratory Systems

National diagnostics capacity for COVID-19 remains a core component of any public health strategy. With its global network of laboratories, IOM continues to support the enhancement of national capacity for detection of COVID-19.

- IOM Ethiopia provided COVID-19 testing for UN staff and their dependents at the Migration Health Assessment Centre (MHAC) lab, conducting some 179 tests during the reporting period.
- IOM Uganda is also providing COVID-19 testing for UN staff and their dependents as part of the First Line of Defense program.
- IOM Rwanda is providing COVID-19 testing to refugees due for resettlement.

Infection Prevention and Control (IPC)

The provision of safe water, sanitation and hygiene (WASH) is an essential part of prevention efforts during infectious disease outbreaks, including COVID-19. Combined with improved access to WASH services, IOM continues to support national capacity to implement infection prevention and control measures as these are an effective way to prevent or limit the transmission of the disease.

- IOM Rwanda donated 50,000 reusable facemasks for distribution to refugees across the country.
- In South Sudan, IOM maintained 652 handwashing devices and the upgrade of three boreholes in Juba is ongoing.
- IOM Libya conducted thorough cleaning interventions in three detention centres and three disembarkation points, Tripoli Naval Base/Abu Sitta (Al Bahrya), Tajoura Port, and Tripoli Com Port/Mena Al Tijari as part of a campaign to combat COVID-19 and other diseases such as scabies. In addition, IOM Libya handed over Al-Hani, Hay Alkarama Altayouri, Al-Tayouri and Qasir Masoud water wells to the General Water and Wastewater management Company in Sabha.
- IOM Egypt supported the Government of Egypt's efforts to enhance COVID-19 preparedness and response through the provision of 1,200 PPEs and first aid assistance material for 700 beneficiaries.

Case Management and Continuity of Essential Services

IOM continues to provide life-saving support to vulnerable communities affected by widespread transmission of COVID-19 in order to reduce morbidity and mortality rates. In particular, IOM focuses on countries and regions suffering from vulnerable health systems and with high prevalence of malaria, HIV/AIDS, measles and tuberculosis, as well as other preventable infectious and non-communicable diseases.

- In Afghanistan, 42,080 patients were served by IOM's seven mobile health teams, including 15,4332 outpatient consultations, health education sessions for 42,080 persons, and psychosocial counselling sessions for 5,684 patients.
- Humanitarian workers, including UN staff and their dependents in Burundi, received COVID-19 health-related assistance at IOM Burundi's health centre.

 IOM Ethiopia provided medical consultations to 10,499 returnees and members of host communities in Dire Dawa, East Hararghe, Gedeo, Borena, West Guji, and East Wollega Zones, as well as at two IOM-managed IDP sites in North Gondar, during the reporting period.

Camp Coordination and Camp Management

As co-lead of the global CCCM cluster, IOM works to support regional, national and local authorities to develop contingency and response plans, and to ensure the continuation of services in existing displacement sites at risk.

- IOM Honduras delivered donations of humanitarian assistance to mitigate COVID risks in migrant assistance centers in Tegucigalpa, Omoa, and San Pedro Sula. The materials included face masks and PPE items, as well as food kits for returning migrants.
- As beneficiaries face challenges such as floods and freezing temperatures, the cross-border programme in northwest Syria is integrating COVID-19 mitigation measures throughout its response. IOM is conducting disinfection activities in reception centres and planned camps, providing clean water to informal camps via water trucking, and including sanitation supplies with cash distributions.

Protection

The current COVID-19 emergency is exacerbating all preexisting vulnerabilities and risks of violence and discrimination, which can intersect with other factors such as gender, age and disability, but also nationality, status or ethnic origin. IOM is committed to ensuring the protection of migrants, displaced persons and other vulnerable populations remains at the center of its COVID-19 response.

- IOM Afghanistan's protection team carried out case management assessments for 269 new households with persons with special needs, including at-risk children, women, and elderly persons, people with serious medical conditions, and persons with disabilities. An additional 1,408 persons with specific needs were identified among returnee migrants at border points. IOM also conducted COVID-19 protection monitoring surveys in 286 households in collaboration with the Afghanistan Protection Cluster and disseminated WHO information and RCCE messaging on COVID-19 awareness and prevention.
- In Haiti, more than 420 people were provided with gender-based violence (GBV), mental health and psychosocial support (MHPSS) awareness related to COVID-19 through IOM's hotline.
- IOM Costa Rica provided migration orientation workshops and free migration-related legal assistance to 260 Venezuelans, as well as psychosocial for more than 50 vulnerable migrants affected by the pandemic.
- IOM Guatemala provided lodging and food for unaccompanied minors waiting for the results of their

COVID tests prior to returning to their countries of origin.

Addressing Socio-Economic Impacts of the Crisis

Recognizing the importance of including migrants and other mobile population groups in UN development responses, IOM is actively engaging with various partners from governments, the private sector, civil society, communities and individuals to re-establish means of socioeconomic support to prevent human suffering during the crisis, and provide for a durable recovery in the post-crisis environment.

 In Bangladesh, the Ministry of Expatriates' Welfare and Overseas Employment, with the support of IOM, launched a digital platform, Returning Migrants Management of Information Systems (ReMiMIS), to collect, analyze, and store data of returning migrants to Bangladesh. The comprehensive ReMiMIS system will contribute to better migration data management and development of targeted reintegration support programs. In addition, stakeholders will have access to information on returning migrants' skills profiles and potentially contribute to skills transfers to communities and sectors in demand. More information can be found here.

In Mexico, IOM has delivered nearly 1,000 electronic wallets as a part of the COVID-19 Expanded Support Initiative to assist vulnerable migrants who recently lost their jobs or received considerable pay cuts in the wake of the pandemic. More than 2,100 people have also benefited from bi-weekly cash transfers to cover key basic needs.

OPERATIONAL UPDATES

Operational Challenges

 IOM's immigration and visa processing programmes have reduced activities, in adherence with health and local government directives. As of 25 February, 22 per cent of centers are operating and assisting migrants at regular capacity, with 65 per cent having reduced operations and 12 per cent having temporarily closed.

New Programmatic Approaches

 IOM continues to facilitate movement operations and provide transportation assistance, despite the challenges imposed by COVID-19. Between 21 March and 31 December 2020, 73,588 persons received IOM assistance to facilitate their movement, namely for repatriation, assisted voluntary return and resettlement. This includes the arrangement of 134 charter flights for 10,958 individuals to allow for movements to continue despite the limitations imposed by COVID-19. Since 18 June, resettlement movements continue to increase, with a total of 39,811 persons having embarked on an international flight to begin life anew.

Information Sharing and Communications

- IOM's COVID-19 Analytical Snapshots summarize the latest research, information and analysis covering migration- and mobility-related impacts of COVID-19 from around the world. New topics include "large-scale migration," "gender dimensions (update)," "human trafficking (update)," "regularization," "migrant health impacts," "impacts on corrupt practices," and "technology to support analysis and responses (update)." Snapshots 1-50 are now available in <u>Chinese</u>, <u>Spanish</u>, <u>French</u>, <u>Arabic</u>, and <u>Russian</u>.
- Coordinated by IOM's PoE Working Group, IOM released a <u>new information sheet</u> highlighting IOM's key accomplishments and statistics related to its work on PoEs in 2020. The Point of Entry is a fastgrowing area in IOM's global programming and a key intervention space within the mobility continuum due to the importance of a comprehensive immigration, border management, and health response to promote safe cross-border mobility.



IOM provides PPE and cleaning supplies to Philip Goldson International Airport in Belize. \circledast IOM 2021



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