



COVID-19 RESPONSE

IOM Regional Office for Middle East and North Africa
Situation Report 10 (07-19 August 2020)



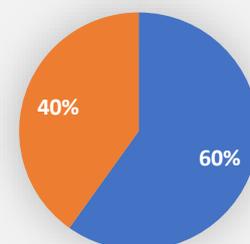
A health worker in PPE in an IOM constructed isolation centre in Marib Governorate, Yemen ©IOM Yemen

Key Regional Updates

- As of 18th August 2020, a total of **1,083,922 COVID-19 cases** have been confirmed, with **20,178 deaths** reported in the region.
- **The COVID-19 caseload in Iraq continues to rise exponentially** to an alarming and worrying level. Iraq is currently the most active country in MENA region, averaging **3,831 cases** per day in the last seven days. The upsurge is partially attributed to the limited response capacity and challenges in enforcing public health measures, such as **social distancing** and **use of masks**. If not urgently addressed, the situation is likely to become unmanageable, and compound an already fragile situation across the country.
- IOM, ESCWA and the League of Arab States, in coordination with United Nations (UN) agencies, conducted the **second online session of the Capacity Building Workshop of the Regional Review Process for the Global Compact for Safe, Orderly and Regular Migration (GCM) on 13 August 2020**. The workshop aims to raise the awareness and build the capacity of Arab States' designated focal points on migration on the GCM principles and objectives, implementation, follow-up and review.
- **In efforts to urgently raise funds to response to the emergency in Lebanon, IOM launched [its appeal](#) on 14 August 2020** following the devastating Beirut Port explosion. The USD 10.37 million appeal **targets more than 43,000 people, including 24,600 vulnerable migrants, 16,500 members of the Lebanese host community and 2,000 Syrian refugees**. Funding will allow IOM to respond to their most immediate needs for the remainder of 2020, including: health, food distribution, employment opportunities, shelter, mental health and psychosocial support, and protection for migrants at risk of exploitation.

IOM's appeal for the MENA region
72,898,000 USD

Funding contributions to COVID-19 to date:
over 43.6 Million USD, including **2.2 million USD** reprogrammed funding.



■ Funding Received
■ Funding Gap

All IOM National Response Plans related to COVID-19 can also be found at [IOM's Crisis Response Site](#)

Stories from the Field

Stranded in Algeria amid the COVID-19 Crisis, Mariam* Wishes to Build a New Life Back Home

Algeria – To contain the spread of the COVID-19, many governments, including the Government of Algeria, have imposed several restrictions, including border closures. These lockdowns have impacted the hopes of many migrants to return home.

During this time, IOM has been coordinating with host governments and governments in countries of origin to open humanitarian corridors to allow for the voluntary return of stranded migrants.

Thanks to an agreement between Algerian and Malian authorities to temporarily lift travel restrictions, IOM has facilitated the safe and voluntary return of stranded migrants in mid-July from Algiers to Bamako. To date, eighty-four Malians were able to return safely home.

Mariam is one of them. Mariam, a 26-year-old Malian woman, travelled to Algeria in 2015 to start a bachelor's degree in computer science, thanks to a scholarship she received from the Malian Government. The award came at the right time for her since she was having some family issues after getting married to a man from a different ethnic group.

"I travelled to Algeria alone and pregnant, and my husband joined me after a few months," she says. In Algeria, Mariam started her studies and had two children while her husband worked on construction sites.



IOM staff interviewing Mariam before her departure ©IOM Algeria / F.Giordani

As a single mother of two children, she asked an Algerian family that she knew for support. They took care of her kids while she was in school. "The family accommodated and supported me. Thanks to them, I managed to finish my studies and to complete my university degree," she said.

Following her graduation, Mariam searched for a job to stay in Algeria, but she could not find one. She then decided to return to Mali, but her plans were interrupted by the unprecedented global health crisis of COVID-19. Travel and movement restrictions were adopted in Algeria and she had to wait for restrictions to be lifted to return home.

A few weeks into lockdown, Mariam started to struggle to pay for basic needs and afford rent. Moreover, she feared for her and her children's health during the COVID-19 pandemic. Having already been registered with IOM, she



Mariam and other returnees receiving travel instructions at Houari Boumediene Airport ©IOM Algeria/ F.Giordani

contacted the Algiers office and asked for support. Subsequently, she was offered accommodation and food assistance at IOM run transit facilities (DARV), a government structure that accommodates migrants waiting to return to their country of origin.

During her two months stay, the family benefitted from psycho-social support sessions and the distribution of non-food items (NFIs), including hygiene kits. "Before being taken care of by IOM, I felt lonely and isolated. I was alone with my children and I was afraid that they would get infected or something bad would happen to them," says Mariam.

Mariam and her two children returned home on 14 July 2020. Upon her arrival in Mali, with the group of returnees, she underwent 14-days of mandatory quarantine in a government-managed facility.

She is also receiving reintegration assistance provided by IOM with support from the European Union through the EU-IOM Joint Initiative for Migrant Protection and Reintegration.

Reintegration assistance can include counselling or medical assistance for returnees, a reintegration grant to set up a small business, vocational training or job placement, and education for minors, as well as follow-up monitoring. In addition to her degree in computer science, she also obtained a bachelor's degree in business management. She hopes these two degrees will give her a better chance of finding a job soon enough in Mali.

"Through my stay here [in Algeria], I learned to be autonomous and free, I learned what are my rights and what are my duties, I learned that a woman can accomplish a lot on their own. I also learned to have my own thoughts and opinions, and it is completely normal if they are different or they are opposed to those who surround me," Mariam concluded.

This assistance was made possible thanks to the EU-IOM Joint Initiative for Migrant Protection and Reintegration through the European Union Emergency Trust Fund for Africa. The hygiene kits distributed to migrants in Algeria were provided under the African Regional Migration Program and funding from the Bureau of Population, Refugees, and Migration (PRM) of the U.S. Department of State.

**Name was changed to protect her identity.*

The impact of the COVID-19 pandemic continues to be felt in the MENA region. As of 18 August 2020, a total of **1,083,922** cases have been confirmed, out of which, **20,178** have proven fatal. The case fatality ratio for the region stands at **1.9 per cent**, which is relatively low compared to the global CFR of **3.5 per cent**. The region accounts for **4.9 per cent** of global burden of COVID-19 cases and **2.8 per cent** of global COVID-19 mortalities. Apart from increasing cases of COVID-19 in Iraq, Saudi Arabia, Morocco and Lebanon, most countries are reporting a decline in the number of new cases. This regional decline is predominantly attributed to changes in testing strategies, with most countries now conducting targeted testing focused on more severe cases. This, however, should not be interpreted as a decline in disease transmission. In many **crisis affected countries**, such as Yemen, Syria and Libya, **limited testing capacity, and low reporting rates may be** impacting the number of COVID-19 positive cases reported.

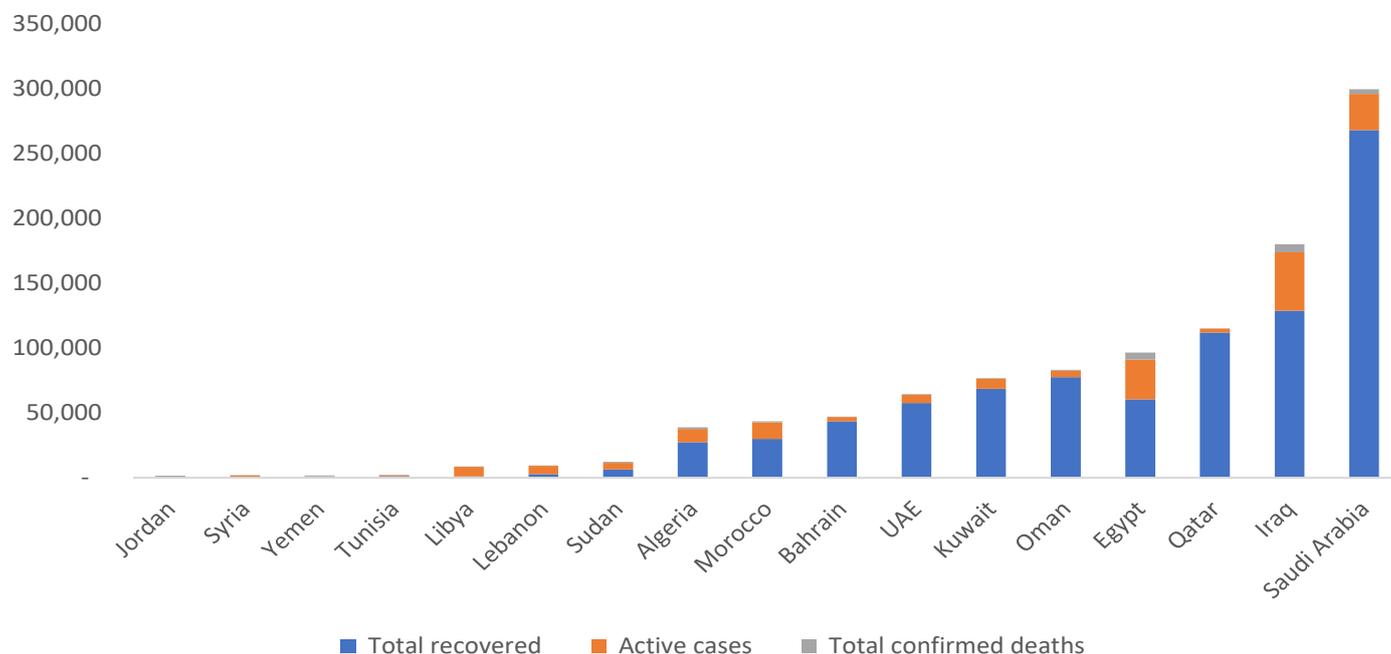


Figure 1: Situation of COVID-19 in MENA Region as of 18 August 2020 Data source: WHO Situational Reports

The COVID-19 pandemic continues to significantly impact regional mobility in the form of various travel disruptions and mobility restrictions. A **slight reopening process** has been recorded in the operations status of **international airports** in the region during the reporting period. However, this trend was not recorded for land and blue border crossing points during the same period. To date, according to IOM's Tracking Mobility Impact, around **42 per cent of monitored international airports are fully closed**, 23 per cent are partially operational and **32 per cent are now fully operational**. Fewer than **half of the 98 land border crossing points, 48 per cent, remain fully closed** and 38 per cent are only partially operational while there are eight (8) land border crossing points classified as fully operational as of 30 July 2020. Out of 42 **monitored blue border crossing points** in the region, **twenty-four (24) of them are fully closed** and fourteen (14) are partially operational, while only three (3) blue border crossing points are fully operational for passengers.

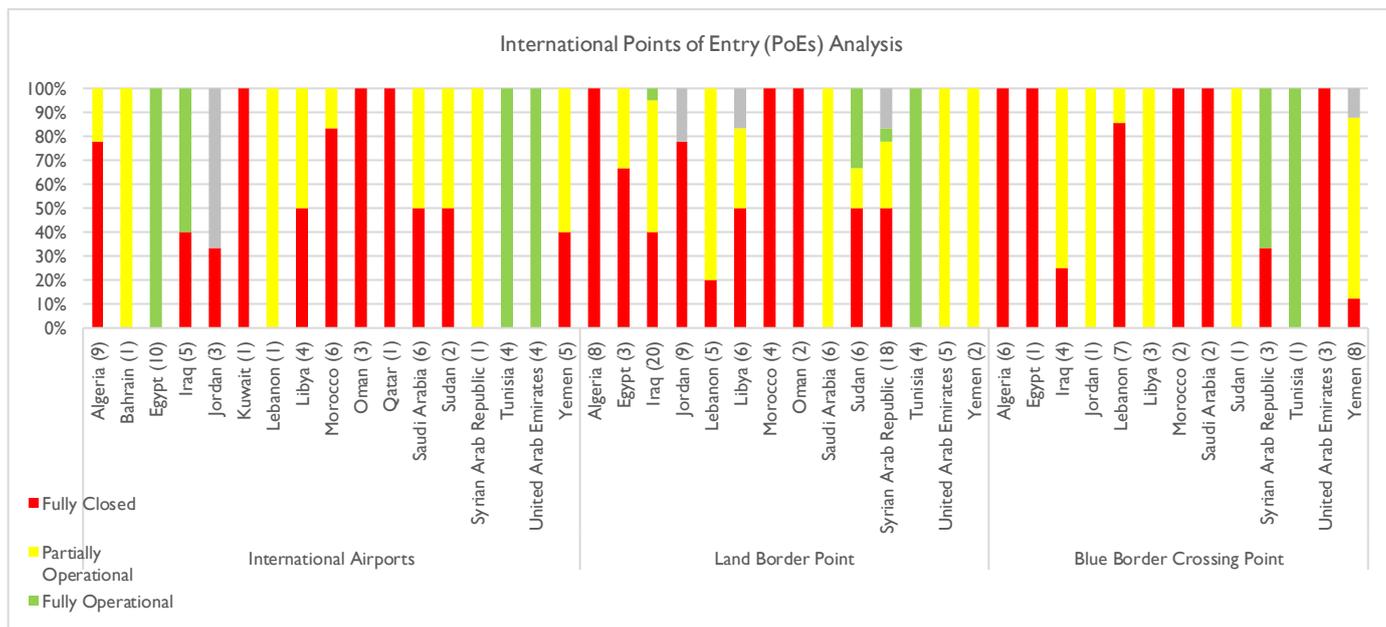


Figure 2: Overview of international PoE mobility restrictions as of 19 August 2020 Source: IOM Tracking Mobility Impacts – PoE Analysis

Response

COORDINATION AND PARTNERSHIPS

In **Egypt**, IOM participated in a roundtable event to discuss the risks that migrant athletes face in becoming Victims of Trafficking (VoT) during COVID-19 and beyond. The event was organized by Mission 89 and the School of Oriental and African Studies (SOAS), University of London. The roundtable aimed to improve understanding of the circumstances and issues faced by migrant athletes in relation to trafficking due to the current COVID-19 pandemic. Through the discussion, participants assessed the role that local and international organizations play in mitigating issues associated with trafficking and the current pandemic.

IOM in **Kuwait** continues to liaise with foreign embassies to support the issuance of travel documents for stranded migrants who do not have diplomatic representation in Kuwait.

TRACKING MOBILITY IMPACTS

IOM in **Sudan** collected data on Points of Entry (PoEs) and timelines for mobility restrictions. PoEs along land borders have also been updated to reflect repatriations. More information on mobility restrictions, as of 06 August 2020 can found through this [link](#).

IOM in **Yemen**, through its Displacement Tracking Matrix (DTM), recorded 1,163 displacements, bringing the total number of households internally displaced in 2020 to 17,877. To date, more than 10,000 people have moved due to fears of contracting COVID-19, as well as the impact of the outbreak on services and the worsening economic crisis. However, the number of people that cited COVID-19 fears as a reason for displacement reduced in July 2020 to 318 people compared to 3,581 people in June 2020.

RISK COMMUNICATION AND COMMUNITY ENGAGEMENT (RCCE)

In **Libya**, IOM's Mental Health and Psycho-Social Support (MHPSS) Team provided awareness raising sessions on COVID-19 and ways to cope with associated stress to 17 male migrants from Niger and Sudan.

IOM in **Iraq** implemented a range of RCCE activities during the reporting period, including the organization of 60 awareness sessions and activities on COVID-19, reaching more than 835 individuals in camp and non-camp settings.



Distribution of household water storage tanks in Al Dar Al Jadede IDP site in Taizz ©IOM Yemen



The EU-IOM Joint Initiative providing PPE to the Ethiopian Community Safe House in Khartoum ©IOM Sudan

IOM also designed and circulated Information, Education and Communication (IEC) materials on Eid Al-Adha and COVID-19 precautions and conducted online training on MHPSS for civil society organizations (CSOs) and volunteer networks. Six (6) community consultations also took place in Hassan Sham Camp to pilot and test COVID-19 game-based materials. Furthermore, the mission designed an animation on how to use masks and arranged for a community consultation to test the animation in a camp setting. COVID-19 awareness posters and flyers were also distributed through Non-Food Items (NFIs) and Camp Coordination Camp Management (CCCM) teams. Additionally, the mission conducted a phone-based assessment covering camps, to identify information gaps on COVID-19 and communication channels that can be utilized.

DISEASE SURVEILLANCE

In **Yemen**, IOM shared 20 disease surveillance reports with the Ministry of Public Health and Population, feeding into community level COVID-19 surveillance and the electronic disease early warning system.

POINTS OF ENTRY (POE)

In **Jordan**, IOM helped the Ministry of Health (MoH) develop costings for identified needs in all PoEs. IOM also provided transportation and logistic support to the MoH team at Al Omary PoE by helping to move samples collected from truck drivers and kits located at the borders.

In **Sudan**, IOM conducted a technical assessment of the arrival and departure terminals and the isolation unit at Khartoum International Airport (KIA). IOM is supporting the KIA isolation unit renovation to provide a minimum of eight hand washing stations, hand sanitizer dispensers, electrical works for the air conditioner system and existing electrical supply and air purification measures. IOM also concluded a five-day needs assessment at the Port Sudan Airport and Port Sawakin in Red Sea State. Both locations received Personal Protective Equipment (PPE) items and training sessions, while it was noted that both locations were also in need of WASH facilities, disinfection gates, and air conditioners.

NATIONAL LABORATORY SYSTEMS

In **Yemen**, IOM commenced activities to improve national-level capacities to conduct COVID-19 testing. This aims to contribute towards addressing widespread testing and surveillance gaps. Using GeneXpert technology in Aden and Marib, IOM aims to provide testing kits and trainings for laboratory staff in Aden and establish a new laboratory in Marib, where there is currently no testing capacity. Trainings for laboratory staff on the safe use of GeneXpert systems for COVID-19 testing is ongoing in Aden. In the meantime, IOM deployed 500 tests to support frontline workers in Aden, with the procurement of 10,000 tests ongoing for Marib.

INFECTION PREVENTION CONTROL (IPC)

In **Libya**, IOM's Medical Team, in coordination with the National Centre for Disease Control (NCDC), conducted three batches of two-days training sessions for health workers on COVID-19 case management and IPC. The sessions were supported by the UK Department for International Development (DFID) and reached a total of 56 health workers. IOM's Water, Sanitation and Hygiene (WASH) Team also performed a thorough fumigation, disinfection, and cleaning intervention at three (3) disembarkation points (DPs) and four (4) detention centres (DCs), during which, NFIs and Hygiene Kits (HKs) were distributed to 555 migrants within the DCs.

In **Yemen**, IOM is conducting water trucking activities in 112 sites in Al Hudaydah and Taizz governorates, ensuring that 6,540 people have daily access to clean and safe water.

IOM in **Syria** finalized procurement of 700,000+ USD worth of PPE in support of IOM implementing partner staff, monitoring staff, and project locations across the North West of Syria.



IOM in Sudan providing milk formula to lactating mothers staying at the Community Safe House in Khartoum ©IOM Sudan

LOGISTICS, PROCUREMENT AND SUPPLY MANAGEMENT

IOM in Syria provided 700 meters squared of warehouse space in North West Syria, in support of an OCHA-led distribution of PPE for partners in North West Syria.

CAMP COORDINATION AND CAMP MANAGEMENT (CCCM)

In **Iraq**, IOM is continuing awareness campaigns and hygiene promotion activities at informal sites and camps settings.



IOM distributes medical equipment to the Mongi Slim Hospital ©IOM Tunisia

In **Yemen**, IOM surveyed 13,028 households across 28 Internally Displaced Persons (IDP) hosting sites in Marib to identify persons at high risk of COVID-19 and inform COVID-19 preparedness and response activities. IOM is also engaging IDP communities on mask making. To date, 90 women are being supported through trainings, materials and cash grants to create 31,500 masks for IDPs. IOM is launching community shielding activities, starting in Marib, where it leads the CCCM sub-national cluster, that will provide displaced families with 800 IPC kits.

CASE MANAGEMENT AND CONTINUATION OF SERVICES

In **Tunisia**, IOM donated medical equipment to Mongi Slim Hospital in Tunis. This donation aims to ensure access to appropriate sexual and reproductive health services, that will enable beneficiaries to go through pregnancy and childbirth safely. This donation marks the end of the phase two of the regional project "Promoting the health and protection of vulnerable migrants transiting through Morocco, Tunisia, Egypt, Libya, Yemen and Sudan", funded by the Republic of Finland. During the second phase of this project, IOM provided medical and humanitarian assistance 3,000 beneficiaries as well as providing technical support and materials to government and non-government partners in Tunisia.

IOM in **Libya**, through its support to four primary health care centres, conducted medical consultations for 487 IDPs. IOM also supported these centres with medicine, medical consumables and IEC materials on COVID-19.

PROTECTION

IOM in **Egypt** distributed 917 food boxes and care packages in Cairo and Alexandria to vulnerable migrants from the Guinea, Philippines, South Sudan, Ethiopia, Liberia, Sudan, Somalia and Burkina Faso. Identification of the beneficiaries was completed with the support of embassies and communities. In addition, to support returnees in Egypt, the EU-IOM Joint Initiative for Migrant Protection and Reintegration distributed food and hygiene boxes in Fayoum. In total, 18 boxes were delivered to nine families.

In **Morocco**, IOM and its partners continue supporting vulnerable groups through food baskets, hygienic kits, emergency accommodation, cash, and coupon distributions. IOM is also providing psycho-social support alongside direct assistance to help beneficiaries manage stress.

In **Iraq**, IOM's Protection and Mental Health and Psycho-Social Support (MHPSS) teams continued to provide case

management to VoT and individual services to critical and urgent cases. This includes people with known suicide risk, people experiencing the psychological consequences of domestic violence, and people with severe or chronic pre-existing mental health disorders. To better understand needs, IOM is implementing an MHPSS survey in target areas. The Protection Teams in Dohuk and Sinjar have continued remote protection monitoring activities in Sardashti informal site and Sharya Camp. The fourth round of the National Protection Cluster (NPC) led protection Monitoring is ongoing. IOM also continued to provide cash assistance to vulnerable migrants in Iraq who lost their incomes due to the COVID-19 pandemic. Finally, IOM, with the support of its Disability Inclusion Specialist, is strengthening its approach to mainstreaming disability inclusion. Social Cohesion and MHPSS projects have begun collecting disability-disaggregated data and guidance notes on disability inclusion topics have been developed.

IOM in **Kuwait** continues to provide food and shelter



IOM Mobile Medical doctor provides emergency health assistance to an ill Ethiopian migrant stranded in Lahj, Yemen ©IOM Yemen

assistance to thirteen VoTs who have been stranded in Oman and unable to return to their countries of origin due to COVID-19 restrictions.

ADDRESSING SOCIO-ECONOMIC NEEDS

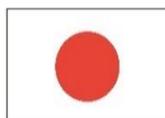
In **Yemen**, IOM and partners, organized a cash for work cleaning campaign in Aden Governorate, that aims to provide 2,000 migrants with temporary livelihood opportunities. Close to 3,000 migrants and 40 IDPs in Aden, Marib and Sana'a received aid items and food through IOM migrant response points, mobile teams and community response activities. At the same time, IOM continues to raise visibility over the situation of migrants in Yemen, and the need to find return solutions for stranded migrants.

IOM in **Egypt** participated in a workshop organized by the General Trade Union for Building and Wood Workers (GTUBWW) concerning migrant worker protection guidelines for employers and business during COVID-19. In the event, IOM presented on the Montreal Recommendations on Recruitment as well as IOM co-developed Guidance for Employers and Business to Enhance Migrant Worker Protection during the current health crisis. The workshop gathered occupational safety and health experts, as well as representative from the GTUBWW, CSOs and international organizations.

IOM in **Algeria** provided cash-based assistance to 20 migrants and in-kind assistance, including food baskets and dignity kits, to two (2) migrants. Migrants in need are also supported continuously through counselling services.

IOM in **Iraq** has been supporting local businesses that can help address COVID-19 issues through the Enterprise Development Fund (EDF). Milestone verification and monitoring was conducted, with the instalment of funds made to selected businesses. Investment Committee visits are also ongoing to select more businesses for further support.

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