



COVID-19 RESPONSE

IOM Regional Office for Middle East and North Africa

Situation Report 16 (29 October – 11 November 2020)



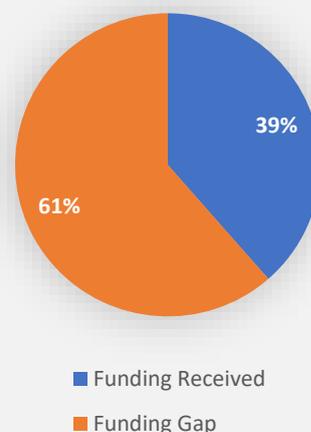
A displaced woman consulting with an IOM mobile medical clinic at a displacement site in Marib Governorate, Yemen ©IOM Yemen

Key Regional Updates

- As of 11 November 2020, a total of **2,319,798 COVID-19 cases** have been confirmed in the Middle East and North Africa (MENA) region, out of which **40,686 fatalities** have been reported.
- As the world continues to deal with the economic fallout of COVID-19, the substantial decrease in remittance flows from key migration hubs remains a critical concern. **Global remittance flows are projected to decline 14 per cent by 2021 compared to the pre-COVID-19 levels in 2019**, according to the latest figures from the World Bank. Remittances to the **MENA region are projected to fall by eight (8) per cent in 2020**. Regional decreases are likely to have global implications. For example, the amount of **remittances sent by migrants to the Philippines dropped by 22.4 per cent from the United Arab Emirates and 26.4 per cent from the Kingdom of Saudi Arabia** during the first eight (8) months of 2020 compared to the same period in the previous year.¹
- The IOM Yemen and IOM Ethiopia's Chief of Missions (CoMs) met with the Government of Ethiopia's (GoE) State Minister for the Ministry of Foreign Affairs (MoFA) in early October 2020 to **discuss the challenging conditions migrants face in Yemen and the provision of humanitarian assistance to Ethiopian nationals in the country**. Until return operations commence, preparatory work will continue in the background.
- IOM, together with the International Labour Organization (ILO), arranged the **first National Migration Working Group (NMWG) consultation with Jordanian non-governmental organizations** on 26 October 2020. The consultation, which constituted the **first step in extending the membership of the NMWG in Jordan to include non-governmental organizations**, is in line with the whole-of-society approach. The meeting, which was attended by several Jordanian NGO's and human rights organizations, included **discussions on challenges faced by the participating organizations, the difficulties created by the COVID-19 situation and its repercussions on migrants and the potential interventions by all**.

IOM's appeal for the MENA region
91,360,418 USD

Funding contributions to COVID-19 to date:
35,223,847 USD, including **5.03 million USD** reprogrammed funding.



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

¹World Bank's Migration and Development Brief

Stories from the Field

Acquiring skills in Algeria - Salem aims to launch a poultry breeding business back home

Algiers, Algeria - Since the outbreak of COVID-19 and related travel restrictions, many migrants in Algeria have requested IOM's assistance to voluntarily return to their countries of origin with international border closures.

Salam, a 31-year-old Burkinabé man, is one of the individuals who requested IOM's support to return to his country of origin. He left Burkina Faso in 2016 and travelled to Algeria through Niger, looking for new work opportunities. Following his arrival in Algeria, he started working in the constructions sector.

"I worked as a construction worker for eight (8) months, but I was not satisfied with my savings," Salem remarked, when talking about his experience.

Worried that he was not making enough money to support himself and his family back home, he started looking for a new job in a different field through the network that he had built while working in Algiers.

"A good friend of mine with whom I was working in a construction site put me in contact with a chicken farmer, and, although I had no experience in poultry farming, I told him that I am open to learning new skills," he explained. A few days later, Salem was offered the job.

Over time, he acquired the skills needed to succeed in poultry farming. He spent one year and a half in the countryside, near the capital Algiers, before moving to the north-eastern side of the country, where he worked in turkey breeding.

After nearly three years in Algeria, Salem was planning to return to Burkina Faso to be with his family and start his own business. However, due to COVID-19 mobility restrictions, he found himself unable to travel. When he learned about IOM's Assisted Voluntary Return and Reintegration (AVRR) programme, Salem contacted IOM and asked for support to return home.

In the past months, IOM has organized various in-person and online outreach campaigns to inform migrants across Algeria about the AVRR programme. Critically, IOM also uses these campaigns as an opportunity to sensitise communities to COVID-19 risks and prevention measures. From July to September 2020, over 43,000 people were reached with these critical messages through IOM Algeria's [Facebook page](#) alone.



Salem at Houari Boumediene Airport before boarding the flight back to Burkina Faso ©IOM/Bouguerche



Salem at Houari Boumediene Airport with luggage as he prepares to return home ©IOM/Bouguerche

To enable Salem to be reunited with his family, IOM assisted him to return home through a special voluntary return flight that took off from Houari Boumediene Airport on 30 September 2020. A total of 84 other migrants from Burkina Faso and Benin were aboard the same flight, which was organized thanks to the support of the Algerian authorities that exceptionally lifted the international travel restrictions in place since March 2020. The movement was funded by the European Union (EU).

In Burkina Faso, Salem is hoping to start his own poultry breeding business with IOM's assistance through the EU-IOM Joint Initiative for Migrant Protection and Reintegration (EU-IOM Joint Initiative).

"I think that poultry farming is a profitable sector, in which I would like to invest in my home country and perhaps offer employment opportunities to young people from my community," Salem said.

Under the EU-IOM Joint Initiative, returning migrants like Salem receive reintegration support to enable them to start new lives in their countries of origin. The reintegration assistance addresses returnees' economic, social and psychosocial needs and can include counselling or medical assistance, a reintegration grant to set up a small business, vocational training or job placement, and education for minors as well as follow-up monitoring.

"I am delighted to go back home with skills in hand. Migration taught me a lot," Salem concludes.

Supported by the EU Emergency Trust Fund for Africa, the EU-IOM Joint Initiative is the first comprehensive programme bringing together 26 African countries of the Sahel and Lake Chad region, the Horn of Africa, and North Africa, the EU and IOM around the shared goal of ensuring that migration is safer, more informed and better governed for both migrants and their communities.

In Algeria, the programme enables migrants who voluntarily decide to return to their countries of origin to do so in a safe and dignified way and offer reintegration support to Algerian returnees. Between July and September 2020, the programme assisted 283 West African migrants to return home from Algeria through three special voluntary return flights. The North Africa window of the programme started in June 2019. It covers Algeria, Egypt, Libya, Morocco and Tunisia.

The effects and impact of COVID-19 pandemic continue to be deeply felt in the MENA region. As of 11 November 2020, a total of 2,319,798 cases of COVID-19 have been confirmed, out of which, 40,686 cases have proven fatal. The MENA region's case fatality ratio (CFR) continues to be stable at 1.8 per cent, which is relatively low compared to the global CFR of 2.5 per cent. However, the region has registered an increase of 13.7 per cent in the number of COVID-19 cases and a 14 per cent increase in the number of COVID-19 associated fatalities. Countries affected by conflict continue to remain of critical concern in the region. An exponential rise in confirmed COVID-19 cases has been reported in Libya from 900 at the end of June 2020 to more than 70,800 cases as of 11 November 2020. Concurrently, Iraq reported the highest total number of COVID-19 cases in the region having surpassed 500,000 cases, while Yemen continues highest case fatality ratio regionally and globally. Jordan, Iraq, Lebanon, Tunisia, Libya, and Morocco constitute countries with the highest proportion of active cases of COVID-19 in the region, while Qatar, Egypt, and Bahrain have the lowest proportion of active cases of COVID-19 in the region.

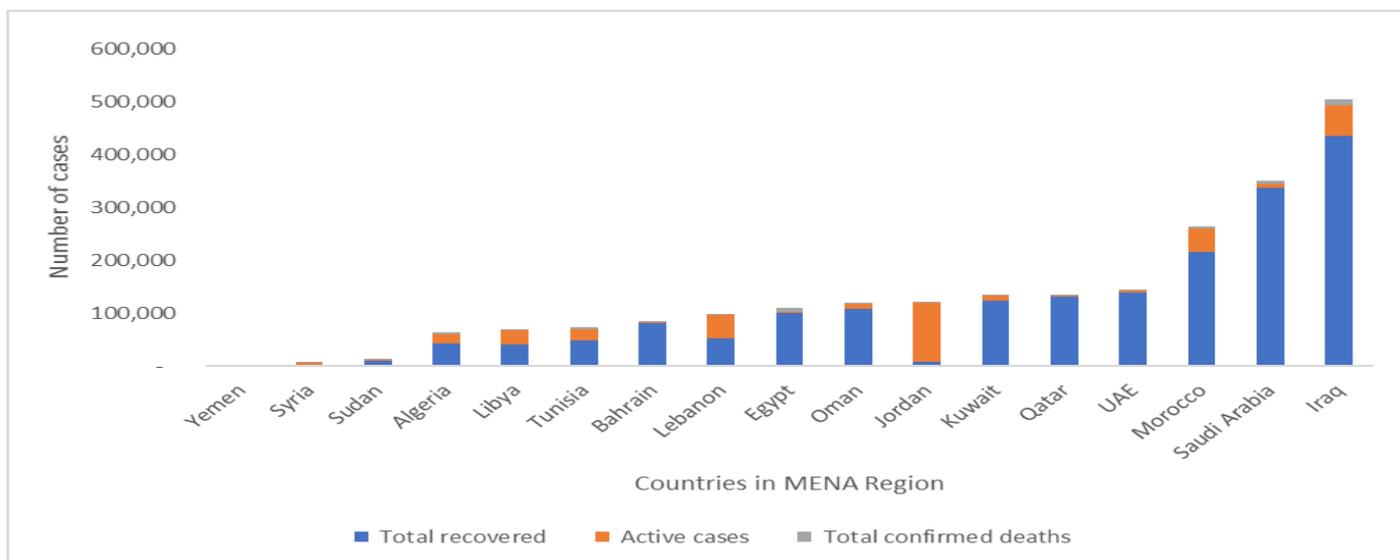


Figure 1: COVID-19 situation in MENA Countries as of 10 November 2020 ©WHO Situational Reports

The COVID-19 pandemic continues to significantly impact regional mobility in the form of various travel bans and mobility restrictions. Several changes were recorded in the operational status of international Points of Entry (PoEs) in the region during the reporting period. To date, according to IOM's Tracking Mobility Impact¹, around 59 per cent of monitored international airports are fully operational, ten (10) per cent are partially operational and 29 per cent are fully closed. Around 31 per cent of the 105 monitored land border crossing points remain fully closed and 32 per cent are partially operational while there are 30 land border crossing points that are now classified as fully operational. Out of 43 monitored blue border crossing points in the region, 23 of them are fully closed and 15 are partially operational, while only six (6) blue border crossing points are fully operational for passengers.²

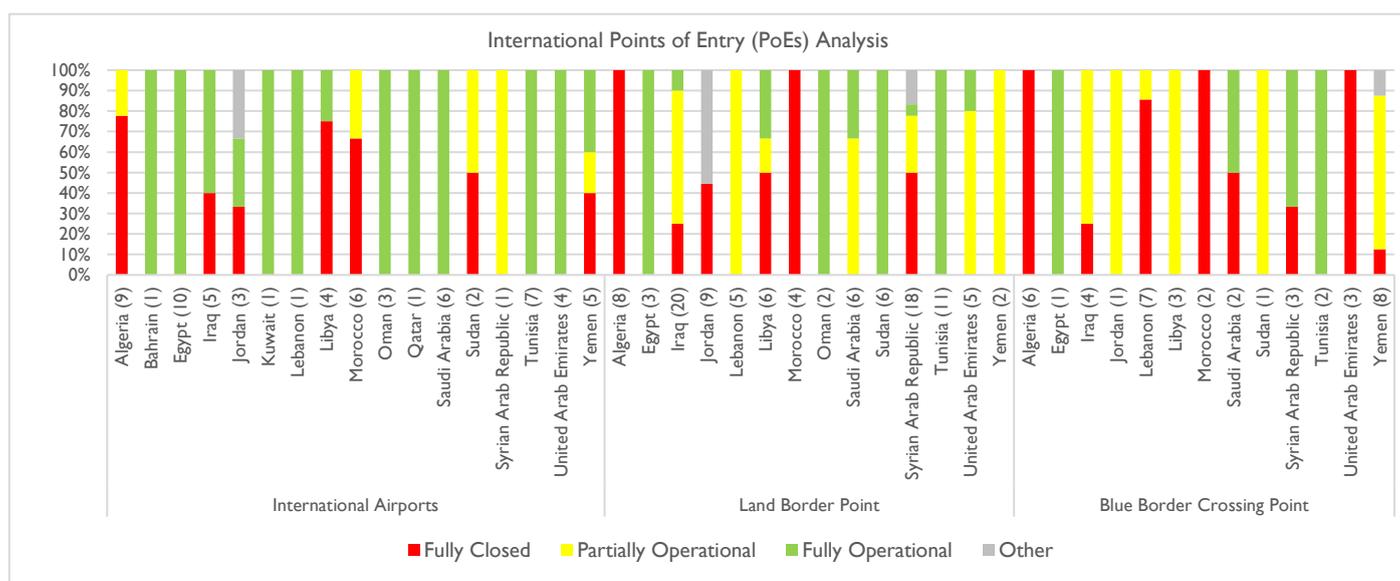


Figure 2: Operational Status of PoEs across the MENA Region ©IOM Tracking Mobility Impacts

¹ During the last week, IOM began monitoring 11 more Tunisian PoEs, including three (3) international airports, seven (7) land border crossing points and one (1) blue border crossing points. In total, IOM monitored 217 official locations across 17 countries in the MENA region. These locations include 105 land border crossings points, 69 airports, 43 blue border crossing points

² Unknown status category for PoEs include two (2) per cent for airports, eight (8) per cent for land borders and two (2) per cent for blue borders.

Response

COORDINATION AND PARTNERSHIPS

IOM in **Iraq** continues to coordinate closely with officials from the Erbil International Airport, Ministry of Health (MoH), World Health Organization (WHO), and other key partners to assess activities at Points of Entry (PoE). IOM also coordinated with partners to assess and support COVID-19 screening activities in supported medical clinics.

TRACKING MOBILITY IMPACTS

IOM in **Libya**, through its Displacement Tracking Matrix (DTM), continues to conduct key informant interviews on a rolling basis to assess the socio-economic impact of COVID-19 restrictions on vulnerable populations on move. DTM published the fourth (4) round of the Libya COVID-19 Mobility Tracking - Impact on Vulnerable Populations on the Move in Libya. The report continues to record negative socio-economic impacts related to various mobility restrictions and the resulting loss of livelihoods. The report indicates that in 90 per cent of assessed locations, migrants who rely on daily labour opportunities were negatively affected due to the COVID-19-related economic slowdown, whilst in 79 per cent of assessed locations, IDPs and host community members were also reported to be negatively affected by mobility restrictions and curfews. Unemployment remains one of the major risk factors affecting vulnerability of migrants in Libya. Compared to March-April 2020, 27 per cent of the migrants interviewed reported being unemployed, representing an (eight) 8 per cent increase in migrant unemployment.

RISK COMMUNICATION AND COMMUNITY ENGAGEMENT (RCCE)

In **Algeria**, IOM is combining in-person outreach and online social media activities via [Facebook](#) to develop and communicate information, education and communication (IEC) materials on COVID-19. Outreach activities are also being conducted to inform migrant population of the mobility restrictions adopted by the Government of Algeria. This aims to maximize migrants' awareness and compliance with active prevention measures.

In **Libya**, IOM's mental health and psycho-social support (MHPSS) and migrant resource and response mechanism (MRRM) outreach teams continued implementing a range of RCCE activities. This included the promotion of health protection measures, implementation of psycho-social



IOM completed the rehabilitation of Jabra Hospital's designated isolation centre to treat COVID-19 patients in Khartoum, Sudan ©IOM Sudan

awareness sessions to help individuals cope with increased stress during COVID-19, organization of art-based psycho-social activities, and the distribution of MHPSS flyers to 155 migrants, including 18 children from different nationalities. IOM's medical team also conducted 35 outreach campaigns and awareness raising sessions in Sabha, Ubari, Tripoli and Benghazi cities. A total of 2,553 migrants were able to improve their awareness and knowledge of COVID-19 precautionary measures and ways to manage suspected COVID-19 infections. In addition, IOM's MRRM team conducted seven (7) focus group discussions and awareness raising sessions on COVID-19 symptoms and precautionary measures for 291 migrants in Tripoli and Zwara cities, distributing COVID-19 health awareness flyers and posters in Arabic, English and French.

In **Iraq**, IOM launched RCCE activities in the catchment areas of targeted health facilities, led by six (6) newly trained RCCE field staff. IOM also started a field assessment of the complaint mechanisms available at the targeted health facilities. IOM organized approximately 108 awareness raising and sensitization activities on COVID-19, reaching more than 673 individuals across 26 camp and non-camp settings in Basra, Diyala, Dohuk, Kirkuk, Najaf and Ninewa governorates. To increase awareness of COVID-19, IOM distributed 200 coloring books, 143 game boards, and 200 card games with COVID-19-related messaging in Mosul and Ninewa governorates. IOM also distributed 150 card games, 100 game boards, 100 coloring books, 200 precaution leaflets, 200 shopping flyers with COVID-19-related messaging, along with 'how to use a mask' flyers. IOM also distributed 66 COVID-19 rollups to Erbil Airport and 44 rollups in Baghdad Airport to increase passenger awareness. Separately, IOM conducted hygiene promotion session in Hassan Sham Camp, Ninewa Governorate, to raise awareness about COVID-19 hygiene precautions. IOM also completed a training on Communication with Communities (CwC) and COVID-19 precautions in the field in Anbar Governorate for eleven (11) participants.

DISEASE SURVEILLANCE

IOM in **Libya**, in collaboration with the National Centre for Disease Control (NCDC), continued to implement syndromic and event-based health surveillance in, and around, points of entry (PoE). As of 01 November 2020, a total of 8,353 migrants have been surveyed.



An IOM doctor taking notes from a displaced woman on her medical condition during a mobile health visit ©IOM Yemen

IOM in **Iraq** recruited community-based health surveillance officers in Anbar, Erbil, Dohuk, Kirkuk, Ninewa, and Baghdad governorates. Community events-based surveillance (CEBS) training material was also been finalized.

POINTS OF ENTRY (POE)

In **Libya**, IOM supported NCDC staff at Ras Jdeer Point of Entry (PoE) by providing medical check-ups to all passengers returning to Libya. A total of 203 travellers were screened, while samples for PCR tests were collected. The travellers also benefitted from health awareness sessions.

IOM in **Iraq** conducted a Training of Trainers (ToT) on PoE activities for three (3) National Program Officers (NPOs) to increase their capacity to train border health officers in Erbil and Baghdad airports.

INFECTION PREVENTION CONTROL (IPC)

IOM in **Libya** fumigated, disinfected, and conducted a cleaning intervention at Abusliem, Triq al Sika and Zlieten detention centres (DCs), and Sabratha, Zwara, Alkhums and Misrata disembarkation points (DPs) as part of the ongoing campaign to combat the COVID-19 outbreak.

In **Iraq**, IOM conducted Infection Prevention and Control (IPC) trainings in Arabic for clinical and non-clinical staff at supported facilities in Baghdad. IOM also conducted additional IPC trainings across Erbil, Dohuk, Kirkuk, Ninewa, and Baghdad governorates. Screening and triage activities also continued within internally displaced persons (IDP) camp health clinics in five (5) camps across Ninawa, Erbil, Kirkuk, and Anbar governorates. Screening and triage activities were also implemented at more than 20 other health facilities in Anbar, Erbil, Dohuk, Kirkuk, Ninewa and Baghdad governorates prior to health consultations. More than 20,000 patients were screened during the reported period.

CAMP COORDINATION AND CAMP MANAGEMENT (CCCM)

In **Yemen**, IOM continued COVID-19 awareness raising efforts across 60 IOM-supported IDP hosting sites. IOM also rolled out community shielding approaches and IPC efforts at the sites, distributing IOM 33 shielding kits during the reporting period. The kits include masks, disinfecting material and hygiene items.

IOM in **Iraq** installed handwashing stations in Ninewa, Anbar, and Salah Al-Din governorates. IOM is also in process of producing posters highlighting the correct way to use the handwashing stations for both the foot operated pedal systems and the elbow operated pedal systems for persons with disabilities (PwDs).



IOM in Lebanon provided an in-kind donation to the isolation centre within the Lebanese Canadian Hospital in Beirut ©IOM Lebanon



IOM Egypt staff member distributes personal protective equipment (PPE) to Sudanese migrant children ©IOM Egypt

CASE MANAGEMENT AND CONTINUATION OF SERVICES

In **Yemen**, IOM is providing material and human resource support in 22 health facilities across Al Jawf, Aden, Sada'a, Al Baydah, Amanat Al Asimah, Lahj, Marib, Shabwah and Taizz governorates. This support aims to ensure migrants and conflict affected communities have sustained access to primary and secondary health services. All 22 health facilities have also received Personal Protective Equipment (PPE) supplies, with triage points have been established in 18 of the 22 facilities. Through eight (8) mobile health teams, IOM is also providing access to emergency health assistance in displacement sites and along migratory routes in Aden, Lahj and Marib governorates. During the reporting period, 8,972 people received access to health services.

IOM in **Libya** is supporting four (4) primary healthcare centres with medical assistance. A total of 411 IDPs and migrants were provided with primary health care medical consultations while five (5) were referred to hospitals. IOM is also supporting these centres with medicines, medical consumables and IEC materials on COVID-19.

In **Iraq**, IOM continues to support 23 outpatient health facilities and six (6) inpatient facilities in Anbar, Erbil, Dohuk, Kirkuk, Ninewa, and Baghdad governorates. Support included human resources, capacity building, supplies and equipment, and technical support.

IOM in **Egypt** provided 30 PCRs and 73 hygiene kits, which are part of health assessments and pre-embarkation medical checks and assistance carried out prior to resettlement to third countries. In total, 21 PCRs were provided to beneficiaries of IOM's Assisted Voluntary Return and Reintegration (AVRR) program, and nine (9) were provided for refugee resettlement beneficiaries. The 73 hygiene kits were provided for beneficiaries as they await resettlement.

PROTECTION

In **Lebanon**, IOM continued to support the voluntary return of migrant workers to countries of origin, including to Bangladesh, Sudan and Nigeria. IOM supported 48 Ethiopian migrants to return to Ethiopia voluntarily during the reporting period. The migrants were provided with accommodation for three days prior to departure, during which, they underwent PCR testing and pre-embarkation health checks. Medical escorts travelled with individuals with significant medical conditions.

IOM in **Sudan**, through its Migrant Resource and Response Centre (MRRC) in Khartoum, continues to undertake protection activities, such as phone-based medical and psycho-social support services (PSS) to mitigate the impact

of COVID-19 on vulnerable migrants. During the reporting period, the MRRC provided 273 new cases with medical counselling. The centre also distributed prescribed medication to nine (9) migrants from safe houses. Nine (9) residents at the Ethiopian safe house also received antibiotics, analgesia, medicine for hypertension, diabetes and multi-vitamins. Phone-based PSS was also provided to 15 migrants. Counsellors are now conducting activities from the MRRC Khartoum premises, thus phone-based PSS and counselling services have been decreasing. During the reporting period 1,055 migrants from Nigerian, Eritrean, Congolese, Ethiopian, Filipino and Somalian communities were supported with food bags. The total number of migrants supported with emergency food distribution through the MRRC has reached 3,109 migrants. Under the EU-IOM Joint Initiative, 90 returnees (38 female and 52 male) were also assisted with emergency food assistance.

IOM in **Jordan** reached more than 400 refugees residing outside camps through mobile medical clinics. Refugees received medical examinations, medication and treatment. During the outreach activities, IOM also distributed awareness raising materials on COVID-19 and risk mitigation measures.

In **Morocco**, IOM and its local partners distributed 346 hygiene kits and helped provide food to almost 416 vulnerable persons through meal portions (cold/warm food), basket foods, and cash and coupons distribution. Urgent shelter was also secured for 136 beneficiaries in different facilities such schools, furnished apartments and shelters run and/or rented by IOM's local civil society partners. IOM also provided psycho-social support to around 109 beneficiaries through phone call consultations and group therapy. In total, around 2,565 beneficiaries have been assisted in eight (8) regions across Morocco. Additionally, 225 unaccompanied and separated children have been covered with protection assistance. IOM continues to be an active member of the protection working group, "GTP" platforms in the regions of Tanger Tetoaun al-Hoceima, the Oriental and Casablanca-Settat. Through these platforms, IOM ensures that its partners coordinate activities with other NGO's and local authorities, avoiding duplication and enhancing complementarity of actions. This also enables IOM to identify other vulnerable persons and provide them with the necessary assistance.



IOM doctors and nurses providing medical assistance and medication to refugees in Jordan ©IOM Jordan

ADDRESSING SOCIO-ECONOMIC NEEDS

In **Jordan**, IOM successfully completed the distribution of vouchers to the most vulnerable migrants in Jordan by reaching a total of 1,705 migrants from different nationalities. The vouchers enabled migrants to purchase essential goods from the local stores enough for three (3) months. This project is funded by the Swiss Agency for Development and Cooperation (SDC).

In **Yemen**, IOM continues to improve access to capital, to diversify livelihoods and to improve community infrastructure in conflict affected communities. Cash for work activities in Hadramaut Governorate, including street rehabilitation and cleaning campaigns, supported 350 vulnerable displaced and host community households in October 2020. IOM also provided start up kits for 573 participants in vocational training in Marib and Hadramout governorates. Additionally, IOM distributed 201 waste containers to local authorities in the two governorates, as part of efforts to improve public waste collection systems.

In **Lebanon**, IOM provided 215 short-term employment opportunities to vulnerable Lebanese and Syrian families that lost their job due to the latest economic crisis and COVID-19 outbreak in north Lebanon and the Bekaa areas. The beneficiaries worked in cleaning, gardening, painting and other tasks that were identified in coordination with the municipality and under the supervision of IOM field teams.

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