Key Regional Updates

- As of 9 June, a total of 358,210 confirmed cases and 4,476 deaths associated with COVID-19 have been reported. The COVID-19 case load has increased by 43.9 per cent since 28 May 2020.

- No significant changes were recorded in the MENA region on the operations status of border crossing points during the last two weeks. To date, according to IOM’s Tracking Mobility Impact, around 68 per cent of monitored international airports are closed and 27 per cent are partially operational. Almost 60 per cent of monitored land border crossing points are closed with 35 per cent partially operational and only one classified as fully operational. A total of 61 per cent of the region’s monitored blue border crossing points are fully closed and 32 per cent are partially operational in the region, while two blue border crossing points are considered fully operational for passengers.

- Through the Regional RCCE Working Group led by the World Health Organization (WHO), IOM MENA Regional Office contributed to develop the RCCE guideline entitled “COVID-19: How Can Risk Communication and Community Engagement (RCCE) Include Marginalized and Vulnerable People in the Eastern Mediterranean Region”, which highlights particular vulnerabilities of sub-population groups such as migrants to COVID-19 and ways to include them in RCCE.

- IOM continues to provide mental health and psychosocial support (MHPSS) to vulnerable communities and migrant populations. This aims to help individuals cope with the psychological impacts of COVID-19 related to increased vulnerabilities and confinement.

- IOM continues to advocate for universal health coverage for displaced persons and migrants to be fully included in the national COVID-19 response regardless of their legal status, counter xenophobia and “infodemic” to discriminate and stigmatize displaced persons and migrants.

IOM’s appeal for the MENA region

$72,898,000 USD

Funding contributions to COVID-19 to date:

$9,800,000 USD, including USD 2.2 million reprogrammed funding

All IOM National Response Plans related to COVID-19 can also be found at IOM’s Crisis Response Site

 YOU CAN HELP DONATE NOW
The impacts of COVID-19 continue to spread across the MENA region with the highest number of new cases (9,829) recorded in a 24-hour period occurring during the reporting period. **Thirteen out of the seventeen countries in the MENA region have reported more than 1,000 cases,** with eleven countries reporting over 5,000 cases each. Cumulatively, the MENA region accounts for **4.9 per cent** of the global COVID-19 burden. **Community transmission** is reported in Algeria, Tunisia, Syria, Qatar, Sudan, with **clusters of cases** in Saudi Arabia, Egypt, Morocco, Kuwait, Bahrain, Oman, Iraq, Lebanon, Jordan, and Libya.

![Epi curve showing daily distribution of recorded COVID-19 cases and deaths in MENA region, 9 June 2020. Source: WHO](image)
IOM Provides Much Needed Support to Migrants in Libya with Food Distributions

Mobility restrictions across Libya to curb the spread of COVID-19 has reduced the income of tens of thousands of migrants reliant on casual daily labour. Deteriorating security conditions have compounded this, with the combination resulting in a sharp increase in food and basic commodity prices. This has deepened pre-existing vulnerabilities for many migrants across the country.

Talking to the difficulties faced, Mohammed, a 45-year-old from Bangladesh, said, “Working conditions were very good until this pandemic put everything on hold. Since then, my life has been tremendously changed as I had to stay home and stop working for the first two months.” Mohammed, who came to Libya in 2016 in search of a living wage installing ceramic tiles, is one of hundreds of migrants who received food rations from IOM Libya in the past month.

To better understand the situation, IOM in coordination with the World Food Program (WFP), conducted food security assessments in migrant communities. Concurrently, both agencies ramped up operation to deliver food items to vulnerable migrants in response to growing needs.

To date, over 1,000 migrants have been assisted on a weekly basis with Ready-To-Eat (RTE) food kits, with each kit designed to provide a month’s support. While the targeted recipients of RTE kits are migrants located along the main migration routes in the west, east and south of Libya, IOM has also designed special food basket assistance to reach approximately 12,400 migrants who are affected by COVID-19 restrictions in urban areas. Between mid-March and the end of May, more than 4,000 vulnerable migrants in Tripoli, Azzawiya and Misrata were reached with this assistance.

COVID-19 and its impacts alongside the ongoing conflict in Libya have amplified the feeling of longing for home among many migrants. “I do keep caring about my personal hygiene and washing hands to prevent getting this virus. If the war ends, I will stay in Libya to collect more money and then I will go back to Bangladesh, but if it does not stop then it is impossible to stay,” said Mohammed.

The downturn in economic activity because of COVID-19 has significantly affected the Libyan job market for migrants, who are often employed in the construction and agricultural sectors. Many have lost their source of income and are now on the verge of slipping into food insecurity if they do not receive critical food supplies.

Aisha, a 43-year-old from Mali, echoes the concerns that many other migrants have voiced during this period. “I have four children and my sister and mother live with me. Since the Coronavirus curfew and restrictions happened in Tripoli, I have been unable to get a job, and most families who I used to work for are now afraid of even letting me in their homes,” she said.

Ongoing mobility restrictions have made it almost impossible to know how many migrants, who were previously daily workers, are now dependent on aid for survival. However, even before COVID-19, IOM’s Displacement Tracking Matrix (DTM) revealed that many migrants could only afford to eat one meal a day.
Response

COORDINATION AND PARTNERSHIPS
In Kuwait, IOM continues to liaise with foreign embassies to secure travel documents for stranded migrants who lack diplomatic representation.

In Lebanon, IOM conducted a migrant needs and vulnerabilities assessment in coordination with WFP and UNICEF, to determine the risks faced by migrants due to COVID-19 and the ongoing financial crisis, alongside their primary needs. The findings will guide future programming. A total of 367 migrants have been assessed as of 31 May, with preliminary findings disseminated to the Humanitarian and UN Country Teams (UNCT). In close collaboration with ILO, IOM in Lebanon also chairs the consortium of humanitarian agencies responding to the emergency needs of vulnerable migrant populations living in Lebanon to harmonize responses, key advocacy messaging, and knowledge transfer. Furthermore, IOM continues to coordinate with the Inter-Agency Basic Assistance Working Groups on the reformulation of cash assistance for vulnerable populations due to the ongoing financial crises. IOM’s Mental Health and Psycho-Social Support (MHPSS) team is also coordinating with the MHPSS Task Force to actively engage in the national planning of MHPSS activities. The team continues to provide counsel, group discussions, awareness sessions and focused psycho-social support remotely to those in need.

IOM in Egypt is collaborating with WFP to provide humanitarian cash assistance to approximately 3,000 migrants. IOM Egypt has also enhanced the referral mechanisms from international and local Non-Governmental Organizations ((I)NGOs) for urgent financial and housing assistance.

TRACKING MOBILITY IMPACTS
At the regional level, between 29 May and 4 June, data was collected on 204 official locations across 17 countries in the region. These locations include: 97 land border crossings points, 66 airports, 41 blue border crossing points (including sea, river and lake ports). This work is based on the information collected by IOM Country offices in the region. For more information, please click on the following LINK.

In Libya, IOM’s Displacement Tracking Matrix conducted a Migrant Emergency Food Security Assessment in collaboration with WFP. The assessment was designed to provide information on the food security status of migrants and help identify the most vulnerable groups and the challenges they face, to determine how best to assist populations. The assessment found that 32 per cent of surveyed migrants had inadequate food consumption levels, with 56 per cent reporting that they compromised their food intake, in most cases to save money. A further 31 per cent had to resort to crisis or emergency livelihood coping strategies due to a lack of food or means to buy food. Highlighting the deep socio-economic impacts of COVID-19, 72 per cent of migrants who rely on casual daily labour for income stated that it had been difficult to find work in the past seven days prior to the survey being conducted (data collection occurred in April 2020). IOM Libya’s DTM also initiated a bi-weekly assessment component: COVID-19 Mobility Tracking #1. This aims to improve understanding of the impacts of COVID-19-related mobility restrictions on vulnerable populations. Initial findings indicate that 93 per cent of migrants who rely on casual daily labour were negatively impacted due to the economic slowdown.

RISK COMMUNICATION AND COMMUNITY ENGAGEMENT (RCCE)
IOM in Sudan, through the Migrant Resource and Response Centre (MRRC) in Khartoum, reached 1,235 migrants with COVID-19 awareness SMS messages. The MRRC is also implementing protection activities to mitigate the impact of COVID-19 on vulnerable migrants. In Geneina, West Darfur, IOM’s Rapid Response Fund (RRF), in partnership with its implementing partner, Concern Worldwide, conducted 20 awareness raising sessions for 2,700 internally displaced persons (IDPs) who were recently displaced on COVID-19. The team also distributed 1,347 COVID-19 prevention IEC materials.

In Yemen, IOM ran a social media campaign on Facebook to highlight the necessary steps to take during Eid to stay healthy. With more than 2.2 million Facebook users in Yemen, social media has proven a safe way to reach people given ongoing health concerns around gatherings. Through paid boosts, the eight context-specific graphics reached a more than 1.2 million Facebook users, with 33,666 direct engagements through comments, likes and sharing. In the run up to Eid, IOM also released a short information video highlighting key preventive measures people can take. The video was aired during one of the country’s most popular TV shows. The coverage reached approximately four million people each day, for a six-day period.

IOM in Egypt published a video on mental health and migration and one infographic on what to do in case of COVID-19 symptoms, reaching out to more than 3,000 viewers. IOM Egypt also organized an online community event with 20 members of the Filipino community. Presentations about COVID-19 precautionary measures and Infection and Prevention Control (IPC) were provided, followed by a question and answer session.

IOM in Iraq organized 90 awareness raising and sensitization sessions on COVID-19, reaching more than 888 individuals in camp and non-camp settings across Baghdad, Dohuk, Kirkuk, Najaf, Ninewa and Qadisiyyah.

A young girl plays a hygiene promotion card game inside her tent as part of an awareness-raising campaign on COVID-19 precautions in Hassan Sham IDP Camp, Ninewa Governorate. © IOM Iraq 2020
In support of Jordan’s National Response Plan to fight COVID-19, IOM delivered 115 new tablets to the Ministry of Health (MoH) as part of its continued collaboration. According to Dr. Sami Alsheikh, Head of Data Management Department at the Communicable Diseases Directorate at MoH, “The tablets will be used by the Surveillance Teams for data collection of those individuals who are under quarantine and patients in hospitals”. This will significantly improve the uploading of information to the MoH system and contribute to accurate and timely data collection in Jordan. The tablets were purchased with funding from IOM’s Migration Resource Allocation Committee (MIRAC).

In Lebanon, IOM mapped stranded migrants, including established communication channels to enable follow-up of cases and surveillance of mentioned populations.

In Egypt, IOM joined the UNCT’s country Preparedness and Response Plan Steering Committee efforts to facilitate and support essential health services in liaison with the Government of Egypt to screen for diseases and establish the national referral mechanisms. IOM Egypt received an official request from the UN to provide medical screening and testing services to UN family personnel and visitors as part of their COVID-19 prevention and management protocols. In Aden, training sessions are planned for 41 IOM health workers on COVID-19 case management, case definition, and infection prevention and control measures this week, which will bring the total number of health workers trained since April to 144 people. An additional 17 workshops on IPC measures are planned for the coming weeks. To ensure that affected communities have access to adequate WASH services, IOM has provided 738,600 litres of drinking water, and 585,200 litres of water for household use across nine sites in Taizz and 53 sites in Hudaydah.

IOM in Libya supported four primary health care centres with medicines, medical consumables, and IEC materials on COVID-19. IOM also procured 8,000 face masks plus 8,000 medical gloves to support the COVID response in Sabha. These were distributed to medical institutions in the area. Furthermore, IOM Libya trained 76 Ministry of Health frontline healthcare workers on IPC, case identification, case definition and management.

IOM in Morocco supported more than 20 government facilities of the Entraide Nationale (National Social Services) with food supplies, beds and hygiene and cleaning equipment to ensure adequate protection and access to services for all local populations at risk and migrants. IOM also continues to promote hygiene awareness during distributions to vulnerable groups and includes hygiene kits in the packages offered.

In Yemen, IOM’s COVID-19 treatment facility in Marib City is operational and providing support. Two isolation centres are also being established in two IDP hosting sites in Marib – one in Marib City and one in Marib Al Wadi District. Additional assessments of three health facilities are ongoing in Marib, to ascertain the possibility of providing further COVID-19 treatment capacity. As part of activities that help prepare and respond to COVID-19, IOM is scaling up health worker trainings on COVID-19 prevention and management protocols. In Aden, training activities are ongoing in Marib, to ascertain the possibility of providing further COVID-19 treatment capacity. As part of activities that help prepare and respond to COVID-19, IOM is scaling up health worker trainings on COVID-19 prevention and management protocols.

LOGISTICS PROCUREMENT AND SUPPLY MANAGEMENT
IOM in Egypt procured 19,655 Protective Personal Equipment (PPE) gowns as part of the UNCT procurement plan to support the Egyptian Ministry of Health and Population.

In Yemen, IOM site management and coordination activities are ongoing across 63 sites in Ibb, Taizz and Marib governorates. IPC measures are being applied in all IOM managed sites to ensure that site activities and distributions are carried out in line with COVID-19 prevention guidelines. CCCM teams are focusing on strengthening referral pathways within health and WASH partners, setting up handwashing stations in displacement sites, and scaling up community mobilization efforts within displaced communities on COVID-19 prevention. IOM is also engaging with partners to conduct awareness raising activities in 28 sites, household level surveys to identify persons who are at high risk, collect feedback from community representatives around the feasibility of prevention measures and barriers to referrals and response, and update service mapping and referral pathways.
In Syria, IOM’s CCCM team is working to establish a quarantine/screening facility. The facility will have a 15-bed capacity. IOM is supporting with procurement and non-medical aspects. As part of its WASH activities, water trucking also increased quantities to 40 litres per person, per day in 21 IDP sites, benefitting 40,000 IDPs.

**Case Management and Continuation of Services**

To ensure that children are protected against preventable communicable diseases through routine immunization, IOM in Jordan, in collaboration with UNICEF, began supporting the MoH mobile immunization teams to conduct outreach services among vulnerable populations. Targeted populations are mainly in hard to reach areas in Jordan. IOM has deployed two vehicles to support the mobile immunization teams for one month. The teams started activities in Zarqa and Jerash governorates.

IOM in Yemen provided 25,493 people with access to health services through 32 IOM-supported health facilities and nine mobile health teams operating across Abyan, Al Jawf, Aden, Al Baydah, Al Dhale’e, Amanat Al Asimah, Lahj, Marib, Sa’ada, Shabwah and Taizz governorates. This included critical primary health care, cholera treatment and MHPSS, as well as minor and major surgeries.

In Tunisia, IOM’s sub-office in Zarzis has ensured the provision of shelter and different types of assistance, including food vouchers, hygiene kits and medical and PSS support to 114 migrants in two IOM shelters.

**Protection**

In Sudan, IOM continues to implement protection activities through its MRRC in Khartoum, such as phone-based medical and PSS counselling to mitigate the impact of COVID-19 on vulnerable migrants. In addition, IOM is distributing medicine and PPEs to migrants across Khartoum State. Further support items are in the pipeline, including PPE and hygiene items for migrant children and youth who have been stranded at Islamic schools in Khartoum and Gedaref due to the containment measures currently in place. PPE items including hand sanitizers, masks, gloves and disinfectant sprays were distributed to 413 people.

In Iraq, IOM’s Protection and MHPSS teams continued to provide case management to victims of trafficking (VoT) and individual services to critical and urgent cases, including people with known suicide risk, people experiencing psychological consequences of domestic violence, and people with severe or chronic pre-existing mental health disorders. Assistance was delivered through field visits when possible, and otherwise by phone. IOM’s MHPSS team also organized a session to raise awareness on COVID-19 and psychological abuse that may take place during the lockdown. For example, in Kerbala, the MHPSS team delivered two sessions for 19 beneficiaries on effective coping mechanisms under quarantine/lockdown, and how to manage the stress that the pandemic may cause. Separately, nine people in Kerbala participated in a caregivers training, and eight took part in an awareness session to reduce stigma for persons infected with COVID-19. IOM’s protection team also delivered the first round of cash assistance to vulnerable migrants who have lost their incomes due to the COVID-19 pandemic. The distribution targeted the most vulnerable migrants who had no valid documentation and were at immediate risk of eviction or unable to meet their basic needs. IOM reached 13 migrant workers, with a further 36 due to receive assistance over the coming week through Switch (Mastercard) mobile cash transfers.

In Morocco, IOM and its partners have distributed 2,932 hygiene kits and helped provide food for 2,432 vulnerable persons through a mixture of food baskets, and cash and coupon distribution. Additionally, shelter has been secured for 1,103 beneficiaries. IOM has also provided PSS to 1,646 beneficiaries through phone calls consultations. Since the beginning of the COVID-19 pandemic, IOM has assisted 8,617 beneficiaries across eight regions in Morocco.

**Addressing Socio-Economic Needs**

IOM in Tunisia, in coordination with the Tunisian Union of Social Solidarity, provided 180 food baskets to vulnerable migrants through its sub-office in Zarsis. IOM also provided Iftar meals to the 34 migrants residing in the IOM migrant shelter in Zarsis. In Gabes, IOM distributed 465 vouchers to a total of 93 migrants that were deemed to be in very vulnerable situations. IOM’s sub-office in Sfax also ensured the distribution of 300 food vouchers to the Moroccan migrant community in Sfax. Additionally, IOM provided food vouchers for 70 migrants in the city of Bizerte.