277,508 CONFIRMED CASES

4,176 CONFIRMED DEATHS

219,083 TOTAL RECOVERED

ERITREA
RECOVERED: 623
DEATHS: 1

DJIBOUTI
RECOVERED: 5,711
DEATHS: 61

ETHIOPIA
RECOVERED: 109,846
DEATHS: 1,912

SOMALIA
RECOVERED: 3,605
DEATHS: 127

SOUTH SUDAN
RECOVERED: 3,118
DEATHS: 63

KENYA
RECOVERED: 77,521
DEATHS: 1,664

UGANDA
RECOVERED: 11,450
DEATHS: 250

SOUTH SUDAN
RECOVERED: 3,118
DEATHS: 63

BURUNDI
RECOVERED: 687
DEATHS: 2

KENYA
RECOVERED: 77,521
DEATHS: 1,664

UGANDA
RECOVERED: 11,450
DEATHS: 250

BURUNDI
RECOVERED: 687
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SOMALIA
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DISCLAIMER: The maps in this report are for illustrative purposes only. Representations and the use of boundaries and geographical names on these maps may include errors and do not imply judgment of the legal status of a territory, nor official recognition or acceptance of these boundaries by IOM.

Migrant movements observed (DTM, October 2020) (55% reduction compared to October 2019)

181,823

Migrant arrivals in Yemen from the Horn (DTM, October 2020) (92% reduction compared to October 2019)

1,038

IDPs (October 2020 – DTM, OCHA)

6.3M
The number of people infected with COVID-19 in East & Horn of Africa continues to rise, as 2020 draws to a close. Migrants, including Internally Displaced Persons (IDPs), are more likely to be exposed to the conditions and circumstances in which COVID-19 spreads, which includes living in poorer and makeshift conditions, overcrowded settings and a lack of access to medical care and hygiene. Migrants are also less likely to have access to COVID-19 ‘preventatives’, such as Personal Protective Equipment (PPE).

Thousands of migrants continue to be stranded across the East and Horn of Africa due to COVID-19 movement and mobility restrictions, including quarantine rules. Many are in need of food, water, medical assistance and transport. Migrants continue to experience involuntarily return to their countries of origin by some governments. Migrants are experiencing detention and abuse in some countries, and facing stigma and xenophobia, resulting from being blamed for the spread of the disease.

As of December 29, the number of positive COVID-19 cases in the region stands at 277,508. 714 new cases have been reported with most new cases reported in Uganda (308 daily increase 0.9%) followed by Ethiopia (281 daily increase 0.2%), Kenya (69 daily increase 0.1%) and Rwanda (51 daily increase 0.6%). Ethiopia remains the country with the highest number of confirmed cases in the region at 123,145 (44.4% of total case), followed by Kenya 95,992 (34.6%), followed by Uganda 34,281 (12.4%).

IOM is working with governments across the region to respond to the impact of COVID-19 in the areas of protection, risk communication, disease surveillance, infection prevention and control, case management, ‘Points of Entry’ (PoEs), Camp Coordination and Management, procurement and logistics, among others. IOM is advocating for all migrants, including IDPs, to be included in all government responses to combat COVID-19, and access to the development and roll out of vaccines for the disease.

A regional financial appeal to assist migrant groups in the East and Horn of Africa was launched in April for $71.6M. So far, 72% of the required funds have been raised.


In August, IOM launched an appeal to specifically respond to the needs of the worst affected stranded migrants and others on the ‘Eastern Route’ between the Horn of Africa and Yemen, impacted by COVID-19.

IOM Country Response

Partnerships and Coordination

IOM Ethiopia is working in partnership with the Government of Ethiopia in the management of 14 quarantine facilities for migrants who have returned to the country as a result of COVID-19. IOM continues to support 10 temporary places of shelter in Addis Ababa and at Points of Entry (PoEs), where returnees receive direct assistance and transportation home to their communities of origin. IOM South Sudan is continuing to work in partnership with the authorities on the Strategic Advisory Group, the National Task Force, the COVID-19 National Steering Committee meetings, Technical Working Groups, and State Task Forces. With the support of the UN Central Emergency Response Fund, IOM is also working with four partners including the International Rescue Committee, Medair, the Norwegian Refugee Council, and the United Networks for Health in Water, Sanitation and Hygiene (WASH) activities, aimed at curtailing the spread of COVID-19. The International Rescue Committee, operating in Rubkona County, and Medair, operating in Juba County, conducts health and water, sanitation and hygiene (WASH) activities. In Yei County, Torit, and Nimule, the Norwegian Refugee Council conducts WASH activities. The United Networks for Health conducts health activities in the same locations with the support of IOM.

Risk Communication and Community Engagement (RCCE)

IOM Ethiopia has reached over 35,700 individuals with COVID-19 prevention messaging in Dire Dawa, Jigiiga, Togo wuchale, Dewolle, East and West Hararghe, West Guji, Gedeo, Borena, East and West Wollega zones during the reporting period. IOM Somalia has reached over 7,500 people with COVID information at IOM-supported health facilities in Afgooye, Hudur, Dhobley, Bardere, Kismayo, Baidoa, Doolow, Hargeisa and Sanag. IOM South Sudan continues to conduct COVID-19 sensitization and hygiene promotion activities for communities in Bentiu Protection of Civilians (PoC) sites and Malakal PoC, as well as outside the PoCs in Juba, Jur River, and Wau, as well as PoEs in Abyei, Renk and Nimule. Risk communication and awareness messages on COVID-19 continues to be disseminated through a network of 254 community hygiene promoters working across the country and reaching an estimated 226,400 individuals. IOM continues with the dissemination of COVID-19 related radio messages, combined with protection, gender equality and GBV mainstreaming with City FM radio, with its 19th radio broadcast focusing on the educating listeners about COVID-19 as well as the role of women in COVID-19 prevention. IOM has also conducted a survey on the COVID-19 prevention measures in Abyei Administrative area and Nimule. Of the more than 5,400 individuals observed at handwashing facilities in both places, 38 percent in Abyei wore facemasks while just 9 percent did so in Nimule. IOM also conducted COVID-19 prevention measures at Points of Entry (PoEs) in Renk and Nimule. Of the 85,000 people surveyed, 78 percent wore facemasks. Over 3,700 people in Bentiu were reached with COVID-19 related mental health and psychosocial support messages.

IOM is also working with four partners including the International Rescue Committee, Medair, the Norwegian Refugee Council, and the United Networks for Health in Water, Sanitation and Hygiene (WASH) activities, aimed at curtailing the spread of COVID-19.
IOM is also supporting the testing of humanitarian personnel including UN staff as part of efforts to support the government's surveillance activities, in Uganda, Burundi, and Rwanda.

**National Laboratory Systems**

As part of the UN's First Line of Defense, IOM is providing COVID testing of UN staff in Ethiopia, Kenya, Uganda, Burundi and Rwanda. IOM Ethiopia has conducted over 150 COVID-19 tests for humanitarian workers and UN staff at the Migrant Health Assessment Centre in the Ethiopian capital, Addis Ababa. IOM is also supporting 5 quarantine facilities in Addis Ababa, Jijiga, and Moyale with COVID-19 testing. IOM Kenya has established COVID-19 testing laboratories for thousands of truck drivers at main border crossings, facilitating the free flow of trade and the movement of essential goods which had been impacted by COVID-19 movement restriction. IOM is also supporting the testing of humanitarian personnel including UN staff as part of efforts to support the government's surveillance activities, in Uganda, Burundi, and Rwanda.

**Disease Surveillance**

IOM Burundi is collaborating with the national Ministry of Public Health and the Fight against AIDS to implement community-based surveillance of epidemics, with a focus on COVID-19 in Muyinga province. The project is being discussed with 24 local health authorities, and participants included community health workers, heads of health facilities and health districts. IOM also trained 100 community health workers to conduct community-based COVID-19 disease surveillance. The trainees will help to survey diseases of epidemic potential, including COVID-19, Ebola Virus Disease, measles and malaria. Between 1 April and 22 December, IOM Ethiopia has received and assisted over 43,412 migrant returnees to the country as part of disease surveillance efforts. During the reporting period over 627 new returnees were registered and assisted. IOM Rwanda donated 250 hygiene kits and 750 litres of handwashing soap to UNHCR, the UN Refugee Agency, for refugees housed at the Emergency Transit Mechanism Centre in Gashora.

**Points of Entry**

IOM Ethiopia screened 1,830 returnees and local community members for COVID-19 at IOM mobile health team sites and government supported health posts in Dire Dawa, East Hararge, Gedeo, West Guji, East and West Wollega Zones during the reporting period. IOM Somalia supported the national authorities with the screening of nearly 14,000 people at PoEs as in Hudur, Kismayo, Baidoa, Dollow and Dhobley. IOM South Sudan conducted arrival and departure screening for COVID-19 at five PoEs, reaching a total of 14,396 travellers at Juba International Airport, Nimule Ground Crossing, Wau Airport, Amiet (Abyei), and in Wunthou (Renk). IOM continued to support two health facilities nearest to the PoEs in Nimule and Renk with medical supplies, incentives, provision of training for health facility staff and risk communications. Over 500 individuals from the host communities were provided with health care services at the outpatient clinic in Nimule Hospital, bringing the total number of patients seen to 10,145 since 18 October 2020.
Infection Prevention and Control

During the reporting period, IOM Ethiopia reached 354 IDPs, IDP committees, temporary accommodation/shelter facility staff, migrant returnees and community representatives with masks and sanitizer in Dire Dawa, Gambella and Moyale. IOM in collaboration with Dire Dawa University trained 104 health workers on home based COVID-19 case management. IOM Somalia reached 78 people in Bossaso with hygiene kits while 8,792 were reached with hygiene promotion activities in Bossaso, Baidoa, Luuq, Belethawa, Bardere and Doloow. A total of 19 hygiene promoters and 56 community hygiene workers are currently active in Bossaso, Baidoa, Luuq, Belethawa, Bardere and Doloow. IOM South Sudan continues to maintain 656 handwashing stations throughout the country. All of the 18 handwashing facilities built by IOM in Juba remain fully operational. In total, over the last week 44,254 individuals reportedly used the handwashing facilities, bringing the total number of people benefitting from the facilities to 908,404. During the reporting period, more than 86,000 people in Juba benefited from 89 operational handwashing stations built by IOM. More than 1,400,000 people have benefited from these facilities since the beginning of COVID-19. IOM handed over a motorized borehole to Suk Libia community in Juba. The upgrading of five other boreholes is ongoing in six locations. Over 4,800 people in Nimule benefited from three operational handwashing stations during the reporting period. Nearly 59,000 people have benefited from these facilities since they were built.

Case Management and Continuity of Essential Services

Over 1,800 migrant returnees and host community members were provided with medical assistance by IOM Ethiopia. In Somalia, 32 Health Workers from Banadir Hospital in Mogadishu completed the training package on basic psychosocial support skills for COVID-19 responders, which includes supportive communication skills, psychological first aid, and addressing social stigma and self-care.

Logistics, Procurement and Supply Management

IOM South Sudan provided water tanks to aid in the provision of safe water to flood affected internally displaced families in Mangala. IOM South Sudan also allocated six PPE requests from three organisations for COVID-19 preparedness activities in Juba, Wau, Mundri East and West and Raja counties. The items include medical gloves, protective coveralls, thermometers, body bags and hand sanitisers.

Protection

IOM Burundi conducted awareness-raising sessions on COVID-19 and protection in Gisuru and Kinyinya communes, in Ruyigi Province for 50 people. IOM also distributed Information, Education, and Communication (IEC) materials including pamphlets on COVID-19. IOM Ethiopia reached over 3,500 people in Dire Dawa, West Guji, Gedeo, Borena, East Hararge and East and West Wollega zones with gender-based violence (GBV) related mental health and psychosocial support risk mitigation as well as mental health aspects of COVID-19 and child protection awareness sessions. They were also provided with psychosocial support and follow up counselling through home-to-home visit, self-help group discussion, mass community mobilization and public campaigns. IOM also provided non-food items such as blankets, bedsheets, dignity
kits to 688 unaccompanied minor children and adult migrant returnees at different PoEs and places providing temporary accommodation. Some 767 accompanied and unaccompanied minor children and adult migrant returnees in Semera, Jijiga and Moyale received food, medical, and onward transportation allowance assistance from IOM while 49 unaccompanied minor children returnees in Addis Ababa were reunited with their families.

Camp Coordination and Camp Management

In collaboration with the Disaster Risk Reduction and Management Office, IOM Ethiopia continued supporting Woreda and IDPs camp coordination meetings on COVID-19 preparedness and response agendas in East and West Hararghe, Borena, Gedeo, East and West Guji, and East and West Wollega.

Displacement Tracking Matrix

IOM Burundi’s Displacement Tracking Matrix (DTM) continued with COVID-19 surveillance, flow monitoring and data collection at both the United Republic of Tanzania and Democratic Republic of Congo borders. IOM Somalia continued to raise awareness of COVID-19 among migrants crossing the border at seven flow monitoring points (FMPs). During the reporting period, 4,308 people, entering and exiting Somalia, were reached. COVID-19 information was shared with 1,959 individuals who stated they were not aware of the COVID-19 situation. IOM South Sudan enumerators carried out 1,720 interviews representing 4,417 individual movements at flow monitoring points. The data from enumerator interviews provides an insight into mobility trends, migration drivers and traveller profiles to inform COVID-19 programming by humanitarian, development partners and the government.
POINTS OF ENTRY & MOBILITY RESTRICTIONS

[Map of Travel Restrictions in the East and Horn of Africa Region]

Status of international flights*
- Not Restrictive
- Partially Restrictive
- Totally Restrictive

Status of other border points
- Sea Border Point
- Land Border Point
- Closed for entry and exit
- Partial closure
- Open for entry and exit
- Unknown

Source:
International Air Transport Association (IATA)
Displacement Tracking Matrix (DTM)

Date: 24 December 2020

Disclaimer: These maps are for illustration purposes only. Names and boundaries do not imply official endorsement or acceptance by IOM.

*Details of the travel restriction can be found on IATA website: https://www.iata.org/