EHoA SITUATION OVERVIEW

The COVID-19 pandemic continues to impact on many more people in the East & Horn of Africa. Migrants, including Internally Displaced Persons (IDPs), are among some of the world’s most vulnerable communities likely to be affected by the disease. Migrant groups and communities are more likely to be exposed to the conditions and circumstances in which COVID-19 spreads, which includes living in poorer and makeshift conditions, or overcrowded settings. Migrant groups are also less likely to have access to medical care and hygiene, and access to COVID-19 preventative measures such as Personal Protective Equipment (PPE), and COVID-19 vaccines.

As a result of the pandemic, thousands of migrants are stranded across the East and Horn of Africa due to movement and mobility restrictions, including air, land and sea border closures, and quarantine rules. Many of these people are in need of food, water, medical assistance, transport, counselling and psycho-social support. Migrants also continue to experience involuntarily return to their countries of origin. Some migrants are experiencing detention and facing abuses in such facilities. Others are facing stigma and xenophobia, resulting from being blamed for the spread of the disease.

There have been 355,055 cases in Eastern Africa (encompassing the Horn of Africa, the island states of Madagascar, Mauritius and the Comoros), including 6,681 deaths, with 290,745 having recovered from COVID-19. New variants of the infection have emerged in Africa as the continent records a new peak in the number of people with COVID-19, since the start of the pandemic. A new distinct Kenya-specific COVID-19 variant different from those found in UK and South Africa was isolated by the Kenya Medical Research Institute (Kemri). An average of 25,223 cases were reported each day between the end of 2020 and 10 January 2021 across the continent, 39% higher than the July 2020 peak of 18,104 average daily cases. (Sources: African Centres for Disease Control and Prevention/World Health Organization).

IOM is supporting governments throughout the region to respond to COVID-19 in the areas of risk communication, disease surveillance, infection prevention and control, case management, ‘Points of Entry’ (PoEs), procurement and logistics, and in other areas. IOM is advocating for migrants, including IDPs to be included in all government responses to COVID-19, including the roll out of COVID-19 vaccines. IOM launched a regional appeal for the East and Horn of Africa for $71.6m in April 2020, to meet the many needs of these communities.


In August 2020 IOM launched an appeal to specifically respond to the needs of migrants on the ‘Eastern Route’ from the Horn of Africa to Yemen.


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Partnerships and Coordination

In Eritrea, where the Government of the State of Eritrea and its High-Level Task Force on COVID-19 and the Ministry of Health are coordinating the response to COVID-19, IOM continues to participate in UN coordination around the COVID-19 response through regular expanded United Nation Country Team and COVID-19 UN Technical Working Group meetings in support of the Government’s efforts. Eritrean nationals inside the country and abroad, along with national associations, organisations as well religious institutions and individuals are also continuing to contribute towards the fight against COVID-19. IOM Ethiopia is the designated lead agency supporting the Government of Ethiopia in the management of migrant returnees. IOM continues to lead in the provision of temporary accommodation at five Points of Entry (PoEs), where returnees receive direct assistance and await onward transportation home. In view of the reopening of schools (some of which were used as quarantine facilities during the holidays), such quarantine facilities for returnees have been closed and temporary accommodation established at PoEs. IOM Ethiopia also continued participating in cluster meetings at national, subnational, and zone levels. IOM Kenya coordinated with the Government of Kenya, in coordination with the Ministry of Health and partners including United Nations Children’s Fund (UNICEF), formally introduced the EU/IGAD funded COVID-19 project across the four counties of Garissa (Dadaab), Mandera, Wajir (Diff), and Marsabit (Moyale). The project aims to respond to the health and social economic impact of COVID-19. IOM South Sudan continued participating actively in various Ebola/COVID-19 fora, including the Strategic Advisory Group, the National Task Force, COVID-19 National Steering Committee meetings, Technical Working Groups, and State Task Forces. IOM also takes part in the Inter-Cluster Coordination Group (ICCG) with OCHA, other partners, and other stakeholders. In addition, IOM continued its participation in the Needs Analysis Working Group (NAWG), a key platform that provides decision-makers and responders with data and analysis on impact and needs to help priorities response based on identified needs. IOM also continued to actively participate in the WASH Cluster Emergency Preparedness and Response (EPnR) technical working group to coordinate the ongoing COVID-19 response in Juba. With support from the Central Emergency Response Fund, IOM’s four partners continued their activities in health and WASH initiatives to prevent the spread of COVID-19. International Rescue Committee, operating in Rubkona County, and Medair, operating in Juba County, conducts health and WASH activities. In Yei County, Torit, and Nimule, the Norwegian Refugee Council conducts WASH activities, while United Networks for Health conducts health activities in the same locations. IOM Uganda continued to actively participate in the pillar meetings including in the incident management team meetings, surveillance, the PoE working group, the UN Emergency coordination meetings and the COVID-19 national steering task force.
Risk Communication and Community Engagement (RCCE)

Over the last two weeks IOM Djibouti conducted sensitization activities on the risks and prevention measures against COVID-19 for 290 migrants in transit (272 men and 18 women) at the Migrant Response Centre (MRC) in Obock region. IOM Eritrea supports the Government of the State of Eritrea’s prevention strategy incorporating a comprehensive media campaign through TV, radio and mobile phones to sensitize the population on the various facets of the pandemic as well as individual and community measures of social distancing and sanitation. Technical support has also been provided for the review the RCCE plan of action. In this regard, TV and radio spots on social distancing and public gathering have been developed. IOM Ethiopia reached 19,082 individuals (8,562 M, 10, 520 F), ranging from migrant returnees, Internally Displaced People (IDPs) and host communities, with mass sensitization on COVID-19 pandemic prevention and protection through door to door, facility level health educations, community mobilization, public campaigns. All these efforts took place in Dire Dawa, Jijiga, Togo wuchale, Dewolle, East and West Hararghe, West Guji, Gedeo, Borena, East and West Wollega Zones. IOM Rwanda will partner with local NGO Prison Fellowship Rwanda to conduct awareness raising activities in Kigali during the current lockdown. Across nine health facilities supported by IOM Somalia, a total of 6,697 people received information on COVID-19 prevention. IOM South Sudan continued conducting COVID-19 sensitization and hygiene promotion activities to communities in Bentiu PoC and Malakal PoC, as well as outside the PoCs (in Juba, Jur River, Nimule and Wau), to curb the spread of COVID-19. Risk communication and awareness messages continued to be disseminated through a network of 273 Community Hygiene Promoters, working across the country and reaching 235,781 individuals (64,873men, 59,785 women, 49,307 boys, 61,816 girls, including 17,524 persons with specific needs over the last two weeks. IOM South Sudan also continued the dissemination of COVID-19 related radio messages, combined with gender equality and GBV mainstreaming on radio. As part of COVID-19 response plan, and in coordination with Action Against Hunger and Ministry of Health, IOM South Sudan distributed 275 WASH non-food item kits to 275 Juba-based targeted households, residing in the same compound as those with COVID-19 confirmed cases. IOM Uganda donated two electronic messaging boards to the Uganda Civil Aviation Authority. The boards are meant to carry multimedia messages about COVID-19 at Uganda’s Entebbe International Airport. The mission has continued to distribute information and communication materials with COVID-19-related messages to the PoEs including at the fishing sites of Kasensero and Mutukula PoEs, on the border with Tanzania.

Disease Surveillance

IOM Burundi IOM donated equipment including PPEs, telephones, bicycles and other equipment to 100 community health workers to support the response to the COVID-19 pandemic in Makamba and Muyinga provinces. The equipment will be used by the community health workers during the implementation of community event-based surveillance of epidemics, including COVID-19. In Eritrea, a central feature of the government’s prevention strategy is the quarantining of all persons entering the country through air, sea, and land routes, in addition to active tracing and quarantining of those diagnosed as positive for COVID-19. The Government of the State of Eritrea

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IOM Burundi has delivered office and health equipment to 6 PoEs (Gatumba, Vugizo, Transversal Ndava and Bujumbura, Magara and Rumonge ports) which were rehabilitated last year. The equipment will reinforce the cross-border surveillance of epidemics including COVID-19. IOM Ethiopia facilitated the screening of 7,851 returnees and host communities members for COVID-19 at IOM Mobile Health Nutrition Teams (MHNT) sites and government-supported health posts in Dire Dawa, East Hararghe, Gedeo, Borena, West Guji and East Wollega Zones as well as at two IOM IDP intervention sites in North Gondar. Five temporary accommodation and shelter facilities are active in Addis Ababa and at PoEs in the regions.

IOM South Sudan continued COVID-19 screening and provided IPC/WASH support at two POEs, namely Wau Airport and Nimule Ground Crossing. This included the supply of clean water through water trucking, rehabilitation and maintenance of sanitation facilities, construction and installation of handwashing facilities, and the supply of IPC materials, such as face masks, soap, and hand sanitizers. IOM South Sudan also conducted arrival and departure screening for COVID-19, reaching a total of 6,831 travellers at Nimule Ground Crossing (4,915) and Wau Airport (1,916).

National Laboratory Systems

IOM Ethiopia continued providing COVID-19 testing for UN staff and their dependents at the Migration Health Assessment Centre (MHAC) lab. Following the request by Government to assist with diagnostic and laboratory services, IOM Rwanda is proving support. An IOM doctor and nurse will support the Rwanda Biomedical Centre remotely with contact tracing in Kigali. IOM Uganda has handed over 7,800 test kits to the Uganda ministry of Health to support the fight against COVID-19 in response to a request from the Uganda National Health and Laboratory Services (UNHLS) due to an acute shortage of test-kits, with the country now having registered more than 38,085 COVID cases and 304 deaths. The latest intervention brought to 12,800, the number test kits from IOM to the Government of Uganda within a month. In December, IOM handed over 5,000 kits to the Uganda Virus Research Institute and the Central Public Health Laboratories. IOM Uganda participates in the National COVID 19 Laboratory subcommittee and is involved in providing technical input. IOM has continued to provide sample collection and COVID-19 testing for UN staff and dependents at the Migration Health Assessment Centre (MHAC) clinic.

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Infection Prevention and Control (IPC)

IOM Ethiopia continued providing staff and returnees with face masks and sanitizer at PoEs and different temporary accommodation facilities. IOM Rwanda completed the installation of 66 handwashing stations in three districts. IOM South Sudan maintained 658 handwashing devices. In the past two weeks, 45,054 individuals (12,165 girls, 11,714 boys, 10,813 women, 10,362 men) were reported to have washed their hands at these facilities, bringing the total number of people benefiting to 1,085,220 individuals (292,921 girls, 282,254 boys, 260,449 women, 249,596 men). In Juba, the upgrade of 5 borehole systems was ongoing. Three Water Management Committees were trained with 15 participants (9 women, 6 men). In Wau, four handwashing facilities were handed over to Water Management Committees.

Case Management and Continuity of Essential Services

IOM Ethiopia assisted 7,540 returnees and members of host communities received medical consultations in Dire Dawa, East Hararghe, Gedeo, Borena, West Guji and East Wollega Zones as well as at two IOM-managed IDP intervention sites in North Gondar. Posters with COVID-19 messages were distributed to IDP sites in West Wollega and umbrellas with COVID messaging were provided to women committee members of IDP sites.

Logistics, Procurement and Supply Management

IOM Rwanda is supporting the government with a car and the driver to assist with movement during the current lockdown. In January 2021, IOM Somalia donated medical equipment to De Martino Hospital to strengthen its capacity on COVID-19 treatment. In South Sudan, IOM Core Pipeline processed four approved pipeline requests to support two partners (Concern Worldwide and Community Aid for Relief and Development) in their WASH responses with integrated COVID-19 preparedness activities. Some 1,900 households (about 9,500 individuals) in host communities and 12,984 (about 64,919 individuals) in PoC sites were targeted. The items include multi-purpose soap, buckets with and without taps, handpump spares, household and bulk water treatment supplies for responses in Juba, Duk Padiet and; Malakal and Bentiu PoC sites. IOM continued its coordination with shelter non-food items and CCCM clusters prioritizing the distribution in PoC sites across South Sudan. During the reporting period, IOM Core Pipeline commenced with processing the release of reusable face masks following approval by the relevant cluster. IOM released about 4,000 pieces of reusable masks to St Stephen Catholic Chapel to support 2,000 individuals in Mangateen IDP Camp, Juba County. IOM Core Pipeline processed two approved and allocated PPE requests from WHO and Medicos Del Mundos, providing PPE supplies to healthcare and frontline workers working in Bor and Juba County.

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Protection
IOM Djibouti provided life-saving assistance (including water, food and medical first aid) to 511 returning migrants from Yemen (509 men and 2 women) through its mobile protection unit in the Obock region.

IOM Ethiopia reached 3,769 (1650 M, 2129 F) individuals with Gender-based Violence (GBV), GBV-mental health and psychosocial support mitigation, and also make referrals to specialized mental health services, while also focusing on child protection awareness. Psychosocial support, and follow up counselling through home-to-home visit, self-help group discussions, mass community mobilization, and public campaigns was also provided. All this took place in Dire Dawa, West Guji, Gedo, Borena, East Harerghe, East and West Wollega Zones. A total of 1136 (613 M, 523 F) accompanied and unaccompanied minor children, and adult migrant returnees received non-food items at PoEs and in different temporary accommodations. Some 234 (156 M, 88 F) accompanied and unaccompanied minor children, and adult migrant returnees received food and medical assistance at PoEs in different temporary accommodations. A total of 753 (425 M, 328 F) accompanied and unaccompanied minor children, and adult migrant returnees received onward transportation allowance assistance from PoEs to quarantine facilities, and from quarantine facilities to their places of origin. Twenty-one female migrant returnees were supported with family tracing and reunification. Protection against sexual exploitation and abuse (PSEA) awareness was conducted for 36 (13 F, 24 M) government and religious leaders in Dolo Ado, Somali region.

Displacement Tracking Matrix
IOM Burundi’s DTM team continued flow monitoring data collection for COVID-19 surveillance at the borders with the United Republic of Tanzania and the Democratic Republic of the Congo. IOM Djibouti’s DTM enumerators also continue to raise awareness on risks and prevention measures against COVID-19 for individuals tracked at flow monitoring points in the country’s five regions. In Somalia DTM continues to raise awareness among migrants crossing the border at seven flow monitoring points. In the reporting period, 4,770, people entering and exiting Somalia, were reached, out of whom, 1,936 (41%) not being aware about the pandemic. DTM enumerators in South Sudan carried out 947 interviews representing 2,803 individual movements. This was done at 12 of 32 flow monitoring points at the country’s borders, internal transit hubs and displacement sites. Data provides an insight into mobility trends, migration drivers and traveller profiles.

New Programmatic Approaches
IOM Burundi provided psychosocial support to 16 UN staff from 18 January 2021 and assisted them to manage the stress related to COVID-19. UN staff confined at home were provided with services via the telephone. From 1 January 2021, awareness messages were aired on four radio stations with the aim of raising awareness on the importance of psychosocial support for people affected by COVID-19. IOM Uganda is working on the integration of GBV in WASH at the PoEs, with funding from EU/IGAD. This includes the provision of mental health and psychosocial support for frontline health workers in the PoEs.
COVID-19 has disrupted migration journeys across many parts of the world, often leaving migrants stranded, unable to continue with their journeys or to return to their countries of origin.

In the East and Horn of Africa, many migrants caught up in such a situation have found assistance at any one of the seven Migration Response Centres (MRCs) supported by the EU-IOM Joint Initiative for Migrant Protection and Reintegration in the Horn of Africa, alongside other donors. In all, there are 11 MRCs in the East and Horn of Africa.

IOM, the International Organization for Migration (IOM) has published new guidelines for MRCs, allowing the centres to better serve migrants and surrounding communities. The official launch coincided with International Migrants Day on 18 December and the fourth anniversary of the EU-IOM Joint Initiative two days earlier.

MRCs are open centres located along the main migration routes in Somalia, Sudan, Ethiopia and Djibouti. They fill critical gaps in the service delivery and protection for migrants in vulnerable situations, in coordination with partners such as national and regional governments.
Migrants are assisted with shelter, food, personal hygiene products, footwear and clothing, in addition to health and psychosocial assistance, among other types of assistance.

In addition, migrants wishing to return to their communities of origin are supported with assisted voluntary return, which paves way for support in obtaining travel documentation where they may have been lost, as well as with travel arrangements and expenses. A recently opened MRC in Mogadishu also supports returning migrants to reintegrate into their communities.

With over 6,000 migrants as of October, fewer migrants were registered at MRCs in the region in 2020 than in the previous year due to the COVID-19 pandemic. At the same time, the centres extended their mobile outreach services to provide life-saving support to migrants in transit. This was in addition to providing minimum livelihood support for host communities, resulting in over 9,000 migrants and community members being assisted over the same period.

The newly-launched guidelines set standards for the delivery of service to migrants at the MRCs and cover the step by step processes of assistance, from intake and protection assessment through primary service provision and referrals. The guidelines are now being rolled out in the region and adapted to local contexts. Separate guidelines on COVID-19 preparedness and response at MRCs have also been developed.

“The guidelines are an important tool in strengthening the assistance delivery at the MRCs and ensure common standards across the region,” says Julia Hartlieb, Senior Regional Programme Coordinator of the EU-IOM Joint Initiative in the Horn of Africa. Based on IOM’s Determinants of Vulnerability Model, the guideline support the identification and protection of migrants vulnerable to violence, exploitation and abuse.

The guidelines were developed with financial support of the Migration Resource Allocation Committee - whose contributors include Belgium, Denmark, Ireland, the Netherlands, Norway, Portugal, The Philippines, Sweden, Switzerland, the United Kingdom, the United States of America.

Among other funders of the MRCs in the region is the Intergovernmental Authority on Development, the Norwegian Ministry of Foreign Affairs, the Norwegian Ministry of Justice and Public Security, the Italian Ministry of Foreign Affairs and International Cooperation, and the US Bureau of Population, Migration, Refugees, and Migration.

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POUNTS OF ENTRY & MOBILITY RESTRICTIONS

Travel Restrictions in the East and Horn of Africa Region

Status of international flights:
- Not Restrictive
- Partially Restrictive
- Totally Restrictive
- Disputed Areas

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: 21 January 2021

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/