The rates of COVID-19 cases in the Asia-Pacific region continue to vary by country, with the second waves of infections in several countries starting to stabilize. Daily case numbers in India, which are the highest in the region, have begun to plateau after several months of upward trends. Cases in Indonesia, Iran, Malaysia, Myanmar, Nepal and Papua New Guinea are increasing - for some countries after months of stability. Numbers of reported confirmed cases in Afghanistan, Australia, Bangladesh, Japan, Pakistan, Philippines, and Republic of Korea remained stable or decreased in recent weeks.

Countries in the region continue to maintain strict and wide-ranging international travel restrictions, limiting non-citizens from entering to prevent the spread of COVID-19. However, several countries are slowly starting to reopen airports and international travel. Japan, which currently has entry limitations for citizens of 159 countries, may start lifting restrictions in October. Viet Nam, which has seen a continued decrease in numbers of COVID-19 cases in recent weeks, has decided to resume some international commercial flights between Viet Nam and six destination countries.

In line with respective socioeconomic priorities, other countries are beginning to resume facilitation of both outbound and inbound migration. In Indonesia, the government has lifted a previously instated temporary ban on the placement of Indonesian migrant workers abroad, with placements to 12 destination countries now open together with additional predeparture health provisions. The reopening of formal placement channels will require efforts to inform prospective migrants on new procedures, health measures, and awareness on where and how to seek assistance once abroad. In Thailand, given the significant labour shortages on the agricultural, construction and fishing industries, the Royal Thai Government is planning for the safe return of approximately 100,000 migrant workers.

At the same time, multiple countries are preparing for potential “second waves” of COVID-19 infections. In Cox’s Bazar, Bangladesh, IOM’s Protection teams report that the Rohingya are voicing concerns that there may be an imminent second wave of infections. Teams also report that in the past few months there has been increasing incidence of family conflicts and family separation. Certain country offices in the region are also raising concerns about increased reports of human trafficking during the pandemic. In Cambodia, as the Government announced the plan to re-open schools, many quarantine facilities that were located in schools have been moved to hospitals or health centers. Migrants continue to return to their countries of origin due to loss of livelihoods abroad, expired visas, and a general desire to return home to be with their families, and IOM country offices are advocating that governments include migrants in their socioeconomic response plans and other COVID-19 response efforts.

CONTACTS

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COORDINATION AND PARTNERSHIPS

IOM Afghanistan participates in Emergency Response meetings convened by the Ministry of Refugees and Repatriations, Ministry of Public Health (MOPH) and other partners. The team also works with Herat, Nimroz, Kandahar and Nangarhar Provinces to flag concerns about COVID-19 transmission among returned undocumented Afghans from Iran. IOM, in coordination with the Health Cluster and national authorities, recruited 205 COVID-19 response staff (65 women, 140 men), including Rapid Response Teams, to enhance local MOPH capacities for COVID-19 response.

IOM Cambodia supported the Prey Veng Provincial Committee for Disaster Management to integrate the COVID-19 Preparedness and Response Plan into the Annual Emergency Preparedness and Response Plan, focused on Mekong flooding. The workshop was attended by 62 local officials (16 women). IOM Lao PDR is monitoring and sharing information about returnee migrant workers from neighboring countries. IOM and the Department of Immigration, Ministry of Public Security held a launch event for the project, “Responding to COVID-19 Cross Mobility Challenges of Point of Entry in Lao People’s Democratic Republic,” with government line ministries, UN agencies, and development partners.

IOM Nepal has been coordinating with the Ministry of Health and Population regarding a feasibility study to establish health desks at Points of Entry. IOM Sri Lanka is preparing to upgrade COVID-19 testing facilities at the main international airport in Colombo.

TRACKING MOBILITY IMPACTS

IOM’s Displacement Tracking Matrix (DTM) Programme in Afghanistan released updated data, including Baseline Mobility Assessments and Community-Based Needs Assessments from ten provinces, to inform programming. DTM teams did the assessments in more than 4,200 settlements, including 150 newly identified villages hosting IDPs and returnees, where data collection was combined with COVID-19 risk awareness and prevention training. IOM Lao PDR continues a Flow Monitoring Survey targeting bus routes at several interprovincial bus stations in Vientiane Capital, and has completed more than 110 interviews.

IOM Philippines started a new Returnee Survey with the Overseas Workers Welfare Administration (OWWA) and partner CSOs targeting returned migrants whose contact details were shared by OWWA. The survey, the first of its kind to use the QR code for registration, aims to reach at least 8,000 respondents to make it nationally representative. DTM teams will collect data about the experiences of returning Overseas Foreign Workers, their intentions post-return and access to services to inform UN and government interventions. The survey is being promoted via social media and through posters and flyers at airports and quarantine facilities.

SPOTLIGHT STORY

In mid-September, IOM offices in Timor-Leste, Thailand, and Viet Nam, together with IOM Geneva, organized a charter flight to return 11 Vietnamese migrants from Timor-Leste.

The migrants (8 men and 3 women) were rescued by Timor-Leste authorities after drifting at sea for days when their vessel developed problems and they eventually landed on the uninhabited Jaco Island.

The group had set off from Viet Nam in early March, arrived in Indonesia where they spent several months before proceeding by boat in early June to their intended destination – Australia. The rescued migrants and their families had borrowed money to finance their journeys, with each migrant having to pay a large, partial payment to “agents,” who were to arrange passage and jobs for them abroad.

Upon their return to Viet Nam, the migrants were placed into a mandatory 14-day quarantine, after which they will be assisted by IOM to return to their respective homes to be reunited with their families, as well as provided with cash grants to meet reintegration needs. The migrants’ return has been organized through the Voluntary Returns Support and Reintegration Assistance for Bali Process Member States Programme, implemented by IOM in coordination with the Bali Process Regional Support Office.
IOM RESPONSE

RISK COMMUNICATION AND COMMUNITY ENGAGEMENT (RCCE)

IOM Afghanistan continues to engage communities and mobilize community leaders to raise COVID-19 risk awareness, demonstrate effective infection prevention and control measures, and dispel misinformation and the stigma surrounding COVID-19. Field teams have reached over 20,733 community leaders in more than 4,200 settlements, covering 129 districts in 10 provinces.

Additionally, 2,664 undocumented Afghan returnees (individuals and households) across 11 provinces have been reached with tailored WHO COVID-19 prevention information disseminated to counter known rumors or misinformation using a one-to-one approach that seeks to transmit accurate, up-to-date information via family and friends to communities.

In Cox’s Bazar, Bangladesh, IOM’s community health workers completed 198,585 door-to-door visits and organized 5,469 courtyard meetings to understand the communities’ perception of COVID-19, promote relevant services, and strengthen community participation. IOM also printed a storybook, “My Hero is You” for children to raise awareness on COVID-19. 10,000 copies are available in Roheniya and 4,000 in Bangla (for the host community) and will be distributed as part of awareness-raising sessions.

IOM Lao PDR distributed more than 5,700 copies of IEC materials to returnee migrants in Bolikhamxay Province with information on employment, COVID-19 prevention, psychosocial support, reproductive health, and more. It also continued the bus campaign with seven different posters focused on basic COVID-19 precautionary measures, COVID-19 symptoms, physical distancing, definition of quarantine, safe migration channel, official COVID-19 news sources and no discrimination. The messages are reaching an estimated 2,500 people per day.

In Chuuk, IOM Micronesia participated in the ongoing Department of Education Monitoring and Post-Assessment of WASH Facilities in schools on Weno and Lagoon islands. IOM in Yap supported the RCCE Working Group in conducting a training on the Akvo Flow App with new volunteers before the survey is launched on September 26.

In Myanmar, IOM is combining RCCE for COVID-19 with TB/HIV activities in Myawaddy, Hpa-an and Hlaing Bwe Townships in Kayin State. IOM provides vehicles and loudspeakers for awareness activities in public places, such as markets, banks, and offices.

IOM Sri Lanka released a new children's handwashing video on social media. The video features a song sung in Sinhala with an animated depiction of how to wash your hands.

IOM Sri Lanka provided a safe migration community awareness session for community members in Kokkuvil, Jaffna District together with the Ministry of Health Public Health Inspector.

IOM Thailand produced a video animation in Khmer, Lao and Myanmar languages to provide migrant workers with information on COVID-19 symptoms, ways to stay safe during travel, and advice on how to seek up-to-date and reliable information about work permits and border restrictions. IOM also helped develop a new online information hub to provide important and up-to-date information on labour migration policies, laws and regulations, as well as available services for migrant workers, including skills training, legal counseling and grievance support mechanisms in Khmer, Lao and Myanmar languages.

IOM Viet Nam is using social media to disseminate safe migration messages, including latest health and immigration regulations, such as measures adopted by destination countries during COVID-19.

DISEASE SURVEILLANCE

The IOM Bangladesh-managed isolation and treatment centre in Leda, Cox’s Bazar and three temporary isolation facilities are collecting samples for laboratory testing of suspected and severe acute respiratory infection cases. These facilities are also serving as sentinel sites for sample collection from acute respiratory illness/influenza-like illness patients for better surveillance and case identification. In the last two weeks, 1,928 samples were collected and transported to the laboratory in Cox’s Bazar.

In Cox’s Bazar Camp 22, IOM staff met with the members of the Rapid Investigation and Response Team (RIRT) to discuss the challenges related to case management of COVID-19 positive cases. The RIRT was activated in Camp 23 to trace potential contacts of a child who tested positive, support the immediate family to reach the quarantine facilities and monitoring home quarantine of an additional nine family members.
IOM RESPONSE

POINTS OF ENTRY (POE)
IOM Micronesia staff in Pohnpei remotely trained 41 police, customs and border officials (35 men, 6 women) at the National and State-level in Chuuk to carry out their responsibilities at the POE in line with COVID-19 guidelines. The training included new information on safely handling non-compliant passengers. Of the participants surveyed, 84% agreed or strongly agreed that they felt more confident with their responsibilities after the training. IOM Yap also led a “walk-through” exercise on the development of the Yap State Port of Entry SOPs. IOM in Yap and Chuuk is working closely with Airport management in surveying and identifying areas where WASH stations and informational signage are needed.

IOM Nepal supported the Epidemiology and Division of the Ministry of Health and Population to conduct a feasibility study of five POEs (Nepalgunj, Gaurifatna, Gaddachauki, Krishna-nagar, and Belahia) in Province 5 and Sudurpaschim Province to establish a health desk prototype for border screening.

IOM Philippines provided transportation assistance to the Philippine Coast Guard to support COVID-19 testing operations at testing and quarantine facilities around Metro Manila. In partnership with the Vietnamese border guard, IOM Viet Nam completed a needs assessment at four POE to better understand the needs of border officials and travelers. Based on the findings, the mission is organizing a capacity building training for POE officials for COVID-19 response.

NATIONAL LABORATORY SYSTEMS
The IOM Myanmar Mawlamyine team is supporting the COVID-19 related data recording and reporting system in close collaboration with Mawlamyine Hospital Laboratory Unit. IOM is supporting transportation of samples from quarantine sites to Township Health Departments, as well as from townships to Sittwe.

INFECTION PREVENTION AND CONTROL (IPC)
IOM Afghanistan assists and support implementation of IPC measures by providing hygiene, sanitizing supplies, installation of hand hygiene equipment at the border crossing points and at service facilities in the provinces. A recently held Community Health Worker (CHW) orientation was attended by 342 individuals who also received PPE items for community/field work.

IOM Bangladesh’s door-to-door COVID-19 messaging is ongoing in the Cox’s Bazar camps, where IOM is the area focal point for WASH services, as well as in an additional camp where IOM provides WASH services through local partners. IOM held 94,769 awareness-raising sessions and distributed 20,145 soap kits to beneficiaries in camps and host communities in Ukhia. IOM also distributed 39,200 cloth face masks, 7,640 locally manufactured hand sanitizers, 12,000 gloves, and 1,350 face shields.

CASE MANAGEMENT AND CONTINUITY OF ESSENTIAL SERVICES
In Cox’s Bazar, Bangladesh, IOM’s Dispatch and Referral Unit (DRU) coordinates live isolation bed capacity management and ambulance dispatch for the COVID-19 response. DRU responded to 107 requests for transport support; of the total provided with ambulance/transport support, 28 were confirmed COVID-19 cases, 27 were suspected cases, 51 were contacts for quarantine, 33 humanitarian workers were transported for COVID-19 testing and 20 contacts who had been discharged were provided with transport to return to their homes from quarantine facilities.
CASE MANAGEMENT AND CONTINUITY OF ESSENTIAL SERVICES (CONT.)

Also in Cox’s Bazar, a total of 42,871 consultations were conducted at the 35 IOM-supported primary health care facilities. A total of 64 babies were delivered and 79 patients were provided with emergency referral support to secondary and tertiary care outside of the camps. Through the pandemic, IOM health staff have continued to provide sexual and reproductive health care services at 22 IOM-supported and Government-managed facilities.

IOM Myanmar is supporting the renovation of the quarantine section of Hlaing Bwe hospital and constructed 42 isolation rooms in Buthidaung Hospital for COVID-19 positive patients. Additionally, referral support packages (including meal allowance and snacks, personal protective equipment, a hygiene kit and payment for COVID-19 investigation and transportation) were provided to 36 patients.

LOGISTICS, PROCUREMENT AND SUPPLY MANAGEMENT

IOM Afghanistan has donated 43,034 pieces of Personal Protective Equipment (PPE), such as masks, gowns, gloves, and head mounted eye glasses. The country office also supplemented the Provincial Public Health’s stock of sanitizer, bleach-based cleaning solution, and infra-red thermometers in coordination with Afghan Border Police (ABP), Provincial Public Health Directorates (PPHD), the Ministry of Refugees and other relevant government entities engaged in the COVID-19 response.

IOM Lao PDR provided IPC materials to the Department of Labour and Social Welfare Bolikhamsay Province, including PPE for health workers to treat COVID-19. IOM has also been providing PPE to the Department of Immigration, Ministry of Public Security to provide to frontline officers at POE. Items include 35 PPE sets, 40,800 gloves, 2,000 surgical masks, 60 Surgical Respirator FFP2/N95 masks, 640 goggles, and 448 bottles of hand sanitizer.

IOM Myanmar provided the Mon State Health Department with 3,150 N95 masks, 1,500 surgical masks, 200 bottles of hand sanitizer, 6,400 examination gloves, 25 infrared thermometers and 1,000 surgical gowns.

CAMP COORDINATION AND CAMPMANAGEMENT

IOM Myanmar supported renovation of a satellite office for rapid response teams at Hpa-an and Myawaddy in Kayin. IOM is also constructing latrines at 10 fever clinics and 3 quarantine centers at Kawkareik, Hlaing Bwe and Myawaddy townships.

IOM Lao PDR has partnered with the Lao Ministry of Public Security to address mobility challenges in border management under COVID-19.

IOM Nepal, as co-lead of the CCCM cluster in Nepal, constructed a multipurpose center in Nilkantha, which was officially handed over to Nilkantha Municipality. The center is currently being used by the municipality as a quarantine center where suspected cases of COVID-19 are separated from others to prevent possible spread of infection. In the future, this center will be used to provide emergency temporary shelter to disaster-displaced persons in the municipality, giving priority to vulnerable people, such as pregnant women, children, people with special needs (both physical and psychosocial) and the elderly, among others. Through the CCCM Cluster, IOM Nepal has also supported with distribution of more than 5,880 pieces of non-food items (masks, sanitizers and mosquito nets) in 24 quarantine centers, 3 holding centers and 20 isolation centers.

IOM Philippines handed over 500 sleeping kits to the Ministry of Social Services and Development in anticipation of the arrival of 400 transferees from Sabah, Malaysia. With trainers from DSWD, IOM also conducted two provincial-wide trainings on Camp Coordination and Camp Management and Shelter based on DSWD’s operational guidelines on COVID-19, with 65 local government representatives (25 from North Cotabato and 40 from Davao del Sur) participating in the training.

PROTECTION

In Afghanistan, IOM is providing Cash for Protection for undocumented Afghan returnees to address needs arising due to COVID-19. During September, 52 persons with specific needs across six provinces were considered for Cash for Protection; of these, 64% had special situations, 12% were households with children in need, 10% had a serious medical condition, and 6% were women at risk. IOM has also undertaken COVID-19 Protection Monitoring with the Afghanistan Protection Cluster, reaching 2,664 respondents across 11 provinces. A COVID-19 Protection Monitoring Report covering May – July 2020 was published in September.
In Bangladesh, MHPSS staff provided psychosocial support to a total of 106 beneficiaries (80 men and 26 women) through over-the-phone counselling. A total of 16 staff from the MHPSS telephone counselling team attended a refresher training on providing remote/over-the-phone counselling and information support to callers.

In Cox’s Bazar, IOM distributed dignity kits to 50 extremely vulnerable individuals, including female-headed households, pregnant women, and women and girls with disabilities. The dignity kits have been adapted to the COVID-19 situation, and to support safe hygiene, items have been added including hand sanitiser, disposable menstrual pads, and floor/surface cleaner.

IOM also reached 28,398 individuals with COVID-19 prevention and protection messages regarding personal hygiene, physical distancing, avoiding mass gathering, information on treatment and isolation, and messages on potential risks and trends of human trafficking that may occur during the pandemic.

Addressing Socio-economic Impact

IOM Bangladesh continues to support vulnerable households in Teknaf with unconditional cash grants in two instalments. During the reporting period, 400 beneficiaries received the first instalment to meet immediate needs for food, shelter, and medication. Each eligible household will receive a total of BDT 9,000.

IOM Cambodia coordinated three meetings with provincial authorities to discuss and draft a proposal to improve socioeconomic recovery for returning migrants in Siem Reap. The country office also distributed meals to 2,960 returning migrants at the O’Bei Choin and Poi Pet POEs, as well as food packages to 1,146 migrants (478 female) in Komrieng District.

IOM Thailand is supporting migrants with immediate basic needs resulting from the loss of livelihood during COVID-19. IOM provided 250 vulnerable migrant families in Pathum Thani and Chonburi Provinces with food items and hygiene supplies. Additionally, IOM partnered with NGO partner, JILAF, to provide livelihood support to migrants in Ranong through interest-free loans, a crab net making vocational program and boat engine repairation support. Responding to migrant job losses in the hardest-hit sectors in Thailand, IOM provided in-service training to 181 migrant workers in information technology, construction, sewing and cooking.

As part of IOM Afghanistan’s COVID-19 response, the Protection Unit provided protection mainstreaming training to frontline staff across Protection, DTM, Cross Border Return and Reintegration and Health teams in early September. The Inter-Agency Standing Committee released new guidance, “Key Protection Advocacy Messages COVID-19,” highlighting the primary protection concerns that have worsened during COVID-19 and appropriate messages for addressing each.