In West and Central Africa, there have been 201,083 confirmed cases of COVID-19 and 3,150 deaths to date (WHO, 2 September) with a steady increase in cases throughout the region including confirmed cases of local transmission in many countries.

Beyond the public health challenges posed by COVID-19, the pandemic has significantly disrupted regional mobility in West and Central Africa usually marked by diverse migration flows. While they face the same health threats from COVID-19 as any other human being, migrants may be exposed to a higher level of vulnerability linked to discrimination and exclusion in their living and working conditions or in their access to basic services including healthcare.

To ensure that migrants and other mobile populations, including internally displaced persons (IDPs), are adequately assisted during the pandemic, IOM, building on its presence at key transit and entry points and its network of over 300 enumerators and 2,000 key

To contribute to the fight against the pandemic, returnees in Nigeria have been visiting communities to share vital information on how to prevent the spread of the disease. Photo: Barinedum Agara/IOM Nigeria

FOCUS

Strengthening Data Collection for Improved COVID-19 Response in West and Central Africa

In West and Central Africa, there have been 201,083 confirmed cases of COVID-19 and 3,150 deaths to date (WHO, 2 September) with a steady increase in cases throughout the region including confirmed cases of local transmission in many countries.

Beyond the public health challenges posed by COVID-19, the pandemic has significantly disrupted regional mobility in West and Central Africa usually marked by diverse migration flows. While they face the same health threats from COVID-19 as any other human being, migrants may be exposed to a higher level of vulnerability linked to discrimination and exclusion in their living and working conditions or in their access to basic services including healthcare.

To ensure that migrants and other mobile populations, including internally displaced persons (IDPs), are adequately assisted during the pandemic, IOM, building on its presence at key transit and entry points and its network of over 300 enumerators and 2,000 key
informants across West and Central Africa, launched a series of new data collection activities while adapting already existing ones.

These activities helped the Organization tailor its response while supporting governments to reinforce public health measures for a safe reopening of borders (Border Points of Entry Assessment here), and in mitigating the socio-economic impact of the pandemic on local economies and affected populations.

Building on the principled commitments and actions outlined in the Global Compact for Safe, Orderly and Regular Migration (GCM), particularly its Objective 1 on data collection, IOM in the region has demonstrated responsible use of timely, quality data and evidence on the impact of the pandemic on mobile populations with the aim of further strengthening its response.

This week’s situation report shows the impact of COVID-19 on mobility across West and Central Africa and how IOM uses data to design a human-centred response to the pandemic.

Mapping Mobility Restrictions Across West and Central Africa

Mobility restrictions decreed by governments to prevent the spread of COVID-19 have had a significant impact on migrants, leaving at least 30,000 people stranded across the region. IOM’s Displacement Tracking Matrix (DTM) closely monitors and maps these measures and their impact on mobile populations. Furthermore, IOM developed a new mobility database mapping the status of 444 Points of Entry (PoE), including airports, land and “blue” (maritime) border crossing points, and internal transit points (reports available here: https://migration.iom.int/).

For each PoE, data such as the type of restriction measures implemented or existing health structures at borders are collected by IOM’s enumerators and key informants to help identify and address the specific needs of migrants and mobile populations. The data collected throughout the 444 POEs in the region revealed that handwashing facilities are available in less than 30 per cent of the PoE assessed, and seven per cent only had secured isolation spaces for suspected COVID-19 cases. Using these results, IOM Côte d’Ivoire, Senegal, Guinea and other missions supported governments in providing key POEs with the necessary training on the prevention of the spread of COVID-19 and protection equipment.

Measuring the Impact of COVID-19 Through Tailored Flow Monitoring

Through its 35 Flow Monitoring Points (FMP) located at key transit points across the region and set up with support from the EU-IOM Joint Initiative for Migrant Protection and Reintegration and other donors, IOM observed a 63 per cent decrease in migration flows in April 2020 in comparison to April 2019 and a 39 per cent decrease in May 2020 in comparison to May 2019 (latest report available here).
While a drop in migration flows begun in mid-March 2020, when most border closures and mobility restriction measures were implemented, the number of travelers observed at transit points dropped significantly in April and May and stabilized in June and July.

Nevertheless, few FMPs, including Heremakono and Bamako in Mali, witnessed slight increases in flows this year compared with 2019. This may be a result of seasonal labour migration and the return of migrants to their countries of origin. Building on this data, IOM in Mali was able to identify areas impacted by high mobility during the pandemic and where IOM programs could support the implementation of activities such as awareness raising, provision of personal protective equipment, strengthening of PoE structures.

IOM presence in these key transit points has also been key in providing information on the situation of stranded migrants throughout the region. It has also fostered our advocacy for the safe reopening of borders to reduce the socio-economic impact of COVID-19 on populations.

Mitigating the Impact of COVID-19 on Displaced Populations

In West and Central Africa, an estimated 6 million IDPs face disproportionate harm as COVID-19 renders their areas of displacement ever more precarious. With over 2.6 million IDPs in the Lake Chad Basin, over 1 million IDPs in the Central Sahel, including 1 million IDPs in Burkina Faso only, and over 1.2 million IDPs in the Central African Republic residing in close quarters with host communities or in congested displacement camp or camp-like settings, IDPs and host communities are at a heightened risk of COVID-19 due to the impossibility of respecting preventive measures, such as physical distancing or handwashing.

To better capture the impact of the pandemic on IDPs and adjust IOM response, the IOM DTM team added COVID-19 related indicators to its ongoing data collection activities in Cameroon, Chad, Mali and Nigeria. In April-May 2020, DTM team in Nigeria conducted a COVID-19 Situation Assessment in the six conflict-affected states of Northeastern Nigeria (Adamawa, Bauchi, Borno, Gombe, Taraba and Yobe). This first assessment reveals that, while 99 per cent of
them knew about COVID-19, 74 per cent said they were not taking any measures to prevent infection from the disease. Using these results, projects in IDP camps in Nigeria were tailored to ensure the provision of isolation tents and WASH activities. Similar assessments were conducted in Chad, Cameroon, and Mali.

Data collected on the impact of COVID-19 on IDPs are shared with other UN agencies to ensure a dissemination of information for better use of data. Most data presented in this situational report is available on IOM DTM website (displacement.iom.int and migration.iom.int) or may be requested to RO Dakar - Data and Research (ro dakar-dataresearch@iom.int).

IOM RESPONSE - HIGHLIGHTS FOR WEST AND CENTRAL AFRICA

IOM in West and Central Africa is working to ensure that a well-coordinated, comprehensive, equitable and timely response to the crisis is underway to halt further transmission of the disease, limit the humanitarian and socio-economic effects of the pandemic, and support affected communities to prepare for longer term-recovery. IOM’s approach to preparing for and responding to disease outbreaks is anchored in IOM’s Health, Border and Mobility Management (HBMM) framework. The HBMM framework links an understanding of population mobility with disease surveillance and provides a platform to develop country-specific and multi-country interventions, emphasizing health system strengthening along mobility corridors in line with the 2005 International Health Regulations (IHR).

IOM’s approach is aligned with the World Health Organization (WHO) Strategic Preparedness and Response Plan and its revision, the UN Framework for the Immediate Socio-economic Response to COVID-19, and country-level Preparedness and Response Plans (PRP). IOM responses aim to tackle the pandemic as an organization that can respond to the acute health and multi-sectoral needs of affected populations and communities of concern, while also implementing programmes to mitigate and address the longer term socio-economic impact of COVID-19.

In addition to the ongoing activities mentioned in the internal SitRep 1, SitRep 2, SitRep 3, SitRep 4, SitRep 5, SitRep 6, SitRep 7, SitRep 8, SitRep 9, SitRep 10 and SitRep 11, IOM is currently running the following activities:

STRATEGIC PRIORITY I - Ensure a well-coordinated, informed and timely response through mobility tracking systems and strengthening partnership and coordination structures established at the community, national and regional levels.

- COORDINATION AND PARTNERSHIPS

In Cameroon, IOM organised a Participatory Mapping Exercise in the eastern city of Bertoua on 25th August, gathering 19 participants from the Ministry of Health, commissariats, prefectures, UN agencies, and NGOs. The exercise was designed to collectively map Cameroon’s East region for priority sites of intervention for COVID-19 response activities, including points of entry, main migration
routes and key meeting and activity points (a total of 21 points of activity were chosen as priority sights, as well as approximately 5 PoEs). A report and mapping is now currently being drafted, to be shared with all participants and COVID-19 actors in Cameroon in the coming weeks.

In Chad, IOM has been included in the POE support working group with weekly meetings of coordination of POE preparedness and response in partnership with WHO, UNICEF, WFP and national counterparts.

In Niger, IOM has developed a robust inter-agency cooperation mechanism to ensure testing of migrants before they return to their countries of origin. Through various projects, the Direction Régionale de Santé Publique (DRSP) can now test all migrants in Agadez who are on the list to pursue returns toward their countries of origin. The samples that are taken are transported to Niamey through flights by EUCAP Sahel Niger and examined in the National Laboratory (which receives IOM support too) in Niamey. Through this mechanism, IOM has tested over 1,150 migrants.

In Nigeria. IOM Organized and facilitated a 3-day training on “Mainstreaming of MHPSS Approaches and Principles to Humanitarian Actors and Government Staff” in close collaboration with Rehabilitation Empowerment and Better Health Initiative (REBHI), INTERSOS, and Première Urgence Internationale (PUI). The training focused on the essential knowledge on MHPSS, based on IASC Guidelines n Emergency Settings, basic psychosocial and communication skills, and PFA with COVID-19 considerations. A total of 21 participants from various MDAs participated in the training.

MHPSS WG coordinator participated on the Health Sector virtual meeting focused on the current development of the COVID-19 pandemic and preparedness for any other potential outbreak like cholera.

From 31 August to 4 September, IOM in The Gambia, in coordination with WHO, will be organizing a training on (a) infection prevention and control and (b) psychosocial support for 100 frontline workers and support staff in the North Bank and Upper River Regions.

In Ghana, IOM, in collaboration with the UN Country Team, supported the development of the country preparedness and response plan (CPRP) which outlines the UN proposed health response in the short to medium term. IOM Ghana also contributed to a key message booklet published by the UN in Ghana for practitioners and media, a compilation of messages from UN agencies’ perspectives in the country on the COVID-19 response.

● TRACKING MOBILITY IMPACTS

In Chad, two COVID briefs have been published (on restriction and mobility during Covid-19 pandemics). In addition, Emergency Tracking Tools (ETTs) are continuously published and shared with the humanitarian community and serve as rapid response mechanism trigger within Clusters.

In Mauritania. IOM continues to provide direct assistance to the most vulnerable migrants in the cities of Nouakchott and Nouadhibou, which host the largest number of migrant communities in the country. Since the outbreak of the COVID-19 crisis, a total of 1,094 individuals have benefited from direct assistance provided by IOM, the majority coming from Senegal, Côte d’Ivoire, Mali, Guinea, Central African Republic, Sierra Leone and the Gambia. The
assistance provided includes food support, emergency shelter and medical assistance. IOM AVRR programmes remain at the pre-departure stage in Mauritania, awaiting the reopening of international borders and airports.

On 31 August, IOM Nigeria’s DTM published the second report of the COVID-19 Situation Analysis in the North Eastern states of Nigeria, which was based on the assessment of knowledge, practice and impact of the pandemic on internally displaced persons (IDPs) in conflict-affected communities. The report covers the assessment conducted from 27 July to 15 August 2020 reflecting trends from north-eastern states of Adamawa, Bauchi, Borno, Gombe, Taraba and Yobe states. The assessment was conducted to support government and humanitarian partners in providing better response to the needs of displaced communities.

STRATEGIC PRIORITY II – Contribute to global, regional, national and community preparedness and response efforts for COVID-19 to reduce associated morbidity and mortality.

- RISK COMMUNICATION AND COMMUNITY ENGAGEMENT (RCCE)

The sixth round of findings from the RCCE WCA Regional Coordination Platform feedback subgroup were received from 22-28 July. Key findings include (a) challenges with complying with protective measures, (b) rumours about vaccinations and treatments, conspiracy theory against Africans, and (c) lack of understanding about the continuation of government measures.

IOM Regional Office for West and Central Africa participated in a panel presentation (alongside WHO, UNICEF and MSF) for the Niger Ministry of Health on 13 August, on the topic of RCCE for COVID-19 response. IOM’s presentation covered the CoronaWestAfrica.info website, upcoming COVID-19 RCCE e-Learning and examples of RCCE for different target audiences across the region (including examples from IOM Niger).

The Regional Office has also developed a partnership with a creative consulting agency to promote the CoronaWestAfrica.info platform online on Facebook and LinkedIn.

IOM Cameroon continues to roll out sensitization activities for COVID-19 in the East and Far-North regions of Cameroon, with a total of 18,000 reached as of 31 August.

In The Gambia, from 15-16 August, 15 MaM volunteers led a house-to-house campaign and mask/poster distribution with youth and Red Cross volunteers in Kanifing Municipality.

On 28 Aug, IOM The Gambia completed its month-long, nationwide broadcast of “Debunking COVID-19 Myths” video series which aired for 344 minutes on 7 TV stations, 672 minutes on 10 radio stations and 840 minutes on 10 community radio stations. In parallel, IOM organized three nationwide TV panel discussions in coordination with the Ministry of Health. The panels were on mask-wearing, physical distancing and continuity of services.

On 12 August, International Youth Day, IOM Ghana, in partnership with the Ghana Immigration Service and CSO BOK Africa Concern, participated in TV and radio programmes on “Youth engagement in raising awareness of COVID-19 and safe migration”. Through the EU-IOM Joint Initiative, IOM will partner with local actors (CSOs) to continue awareness
raising activities on COVID-19, including the production and distribution of facemasks.

In Liberia, a video was produced about returnees who took the initiative to create comic strips to get essential preventative information about COVID-19 to communities.

In Mauritania, a WhatsApp group was created with 42 participants, including leaders of the 14 migrant communities in the main urban areas. Over 100 messages were shared in English, French, Arabic and local languages. The group has a potential reach of 11,000 individuals through a tree message sharing system.

In Niger, community mobilizers (MobComs) held a total of 441 awareness raising sessions related to COVID-19, reaching 52,317 people (including 13,211 migrants in transit). An RCCE guide was developed for the sessions, digitally available on tablets. Instructional videos by MobComs were produced in three languages (English, Zarma and Haoussa), as well as more general videos (available here and here). A video about migrant stigmatization related to COVID-19 was also produced and disseminated on social media.

In Nigeria, the IOM WASH team conducted refresher trainings for 41 hygiene promotion community volunteers (HPCVs) in Borno state. The IOM MHPSS, WASH and CCCM team reached 327,098 individuals with specific hygiene promotion messages in Borno, Adamawa, and Yobe states. Awareness-raising activities on COVID-19 transmission, symptoms, and prevention were conducted with emphasis on the importance of physical distancing at water points and proper usage of hand washing stations.

Also in Nigeria, IOM conducted activities at seven markets in Lagos, Edo and Delta states, reaching 4,360 traders with key messages on safe migration pathway, human trafficking, and COVID-19 prevention measures. A total of 310 safe migration posters, 210 COVID-19 prevention stickers, and 117 face masks were distributed among the traders.

In Sierra Leone, returnees wrote the song “Together we can cope” in response to the difficulties of isolation caused by COVID-19 mobility restrictions.

● POINTS OF ENTRY (POE)

In Cameroon, IOM delivered a training to border officials of 3 PoEs (Kousseri, Yagoua and Fotokol) and representatives of various ministries between 14 – 16 August in the city of Maroua in the Far-North region. The training was on screening and referral practices for dealing with suspect cases of COVID-19. An evaluation of PoEs Kousseri and Yagoua was also conducted, and IOM is in the process in resupplying these two PoEs with hygiene and sanitation materials including masks, washing stations and disinfectant tools.

In Chad, a new Canada-funded project has been approved and the project is now active. An IBM assessment was conducted in Adre, near the border with Sudan. Furthermore, a letter was received from the government requesting further assistance on POE assessment.

IOM Nigeria’s DTM monitored the movement of 129 persons from 14 PoEs within Adamawa and Borno states. During the same period 67,178 movements were observed from 17 flow monitoring points in the North-eastern States. Of these movements, 31,803 were entering the country (inflows) while 35,375 were leaving the country (outflows).

In Niger, IOM received 145 Nigerien migrants returning from Côte d’Ivoire who are now
completing their mandatory quarantine at the SENO-site. IOM provided transport and preparation of the quarantine site, in close cooperation with the Ministry for Humanitarian Action. IOM further provided support with food, water, shelter and NFI assistance to the returnees.

In **Mauritania**, IOM conducted a needs assessment mission at the PK55 entry point in the wilaya of Dakhlet Nouadhibou to support the security and health authorities deployed at Mauritania’s land borders. As part of its support to the government in the fight against COVID-19, disinfection materials and PPE were distributed to police, customs and gendarmerie officers and the city of Nouadhibou’s health post. Altogether, approximately 77% of active entry points have been assisted and are prepared to be part of the national response.

**● NATIONAL LABORATORY SYSTEMS**
In **Ghana**, following the approval from the Ministry of Health in July to conduct COVID-19 sample collection and testing, on 10 August, IOM signed an MOU with UNCT to conduct COVID-19 testing through the MHD laboratory.

**● DISEASE SURVEILLANCE**
In coordination with the national crisis response group and within the POE working group, **IOM Chad** is distributing thermostash in over 10 POE (in the North and South of the country) and deploying staff and NFIs for quarantined incoming migrants and students in the Southern provinces; IOM Chad continues to support the people deported and in quarantine in Ounianga Kebir (Libya border); to date, 800 people have been assisted.

**● INFECTION PREVENTION AND CONTROL (IPC)**
During the reporting period, **IOM Nigeria** supplied 10,561,252 litres of water to 42 camps from 55 solar boreholes and 21 handpumps. Since June, IOM has enabled communities with 126,845,149 litres of clean water to 111,827 individuals. Additionally, 6,953 individuals received 13,958 bars of soap in Borno state to help prevent the spread of diseases.

---

**STRATEGIC PRIORITY III – Ensure access of affected people to basic services and commodities including health care, and protection and social services.**

**● CASE MANAGEMENT & CONTINUITY OF ESSENTIAL SERVICE**
In **Chad**, the movement of migrants has been allowed by local and national authorities. National stranded migrants have received assistance to return to their villages of origin. However, third country nationals remain stranded in transit centres because of the mobility restrictions imposed by destination countries. Nonetheless, a special movement operation to Niger has been approved.

In **Ghana**, IOM continues to provide reintegration assistance to stranded and vulnerable migrants amidst COVID-19. For instance, in the reporting period, IOM assisted 11 VoTs. Upon return, beneficiaries receive immediate assistance, such as medical support, food and non-food items (NFIs), or accommodation. Afterwards, IOM assists with counselling and advice on developing business plans to allow for more sustainable reintegration in communities of origin.
- **CAMP COORDINATION AND CAMP MANAGEMENT**

  In Chad, IOM has finalized the construction of 600 transitional shelters in the IDP sites in the Lake region. IOM also distributed 1,000 hygiene kits and 1,000 hand washing stations.

  In Nigeria, IOM completed the construction of 40 units of self-quarantine shelters in Borno state while continuing to decongest overpopulated camps through the rehabilitation of damaged buildings.

- **PROTECTION**

  In Nigeria, MHPSS teams continue to engage project participants and host community members in positive coping strategies/activities, by sharing tips on coping with stress during lockdown or movement restrictions. Covid-19-related messaging and sensitization is integrated in the MHPSS interventions, including psychological first aid, lay counselling, GBV case referral, GBV sensitization, informal education and CT sensitization. During the reporting period IOM conducted 154 sessions to 1431 (312 boys, 249 girls, 736 Men, & 929 Women). Since March 2020, the MHPSS team has assisted 114,319 individuals.

  IOM Nigeria also continues to assist the 157 (68F; 89M) migrants returned from Mali in July through screening of vulnerabilities to identify immediate rehabilitation needs and were supported with family reunification of one child in collaboration with the state government. On 12th and 16th August IOM supported the government to return 70 migrants who were stranded in Lebanon.

- **SOCIO-ECONOMIC IMPACT**

  In Cameroon, a concept note developed in partnership with UNDP, UN WOMEN, UNAIDS, and the UN Economic Commission for Africa on addressing the decline of expected remittances due to the COVID-19 pandemic and the subsequent economic crisis was selected by Cameroon’s RC office for selection for the UN Multi-Partner Trust Fund for addressing the socio-economic impact of COVID-19. Activities include the strengthening of a remittance stakeholder taskforce in Cameroon to reduce costs for remittances for the long term, workshops on financial management and financial instruments, and more research on remittances in Cameroon.

  In Ghana, IOM contributed to the draft of the Common Country Analysis (CCA)/national Socio-economic Response and Recovery Plan (SERRP) which is currently undergoing consultations and validation with Government.
AREAS OF INTERVENTION

- coordination and partnerships
- risk communication and community engagement (RCCE)
- disease surveillance
- points of entry (POE)
- national laboratory system
- infection prevention and control (IPC)
- case management and continuity of essential services
- logistics, procurement and supply management
- protection
- camp coordination and camp management (CCCM)
- tracking mobility impacts
- addressing socio-economic impacts of the crisis

Burkina Faso

Bénin

Cameroon

Central African Republic

Chad

Côte d’Ivoire

Ghana

Guinea

Guinea Bissau

Liberia

Mali

Mauritania

Niger

Nigeria

Sierra Leone

Sénégal

The Gambia

Togo
Soapmaking in The Gambia: Sowing the Seeds of Sanitation and Solidarity

In The Gambia, returnees and their families are coming together to enhance the availability of hand-made soap in their communities — serving as an alternative source of income while building the country’s COVID-19 preparedness, prevention and response.

Burkina Faso Records One Million Internally Displaced, Its Most Ever, as Violence Rages Amid COVID-19

More than a million people have been internally displaced by the upsurge in violence in Burkina Faso. “The majority of displaced persons are women and children, and their needs are enormous, especially during the COVID-19 pandemic which has upended an already complex and multifaceted humanitarian crisis,” said Abibatou Wane, Chief of Mission of IOM in Burkina Faso.

Standing Up to Myths and Misinformation During a Pandemic in Nigeria

IOM Launches Japan-Funded Emergency Response for Displaced Persons in Niger
114 Ivorians, Guineans, Liberian Migrants Return Home from Algeria amid COVID-19 with IOM Assistance

Senegal: Myth-busting Vital to Tackle Pandemic as Misinformation Grows

L’OIM soutient les personnes déplacées dans les régions du Nord-Ouest et du Sud-Ouest du Cameroun

Nearly 120,000 People Displaced, at Least 10 Dead After Flash Floods in Chad

Community Responders Key to Informing People about Preventing Virus in Liberia

Alhassane, de migrant irrégulier à médecin : histoire d’une vocation

Nigeria: Bringing COVID-19 Prevention Messages to Benin Market

IOM Supports Quarantine Centres in The Gambia