



## COVID-19 RESPONSE

IOM Regional Office for Middle East and North Africa  
Situation Report 15 (16 – 28 October 2020)



Host community members in Umshalaya, Central Darfur receive personal protective equipment (PPE) as part of the COVID-19 response ©IOM Sudan

### Key Regional Updates

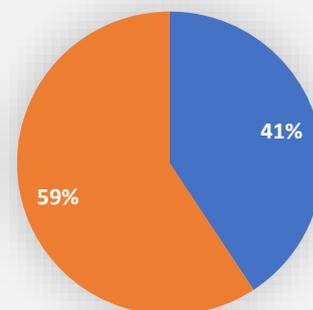
- As of 28 October 2020, a total of **2,034,442 COVID-19 cases** have been confirmed in the Middle East and North Africa (MENA) region, out of which **35,794 fatalities** have been reported.
- Countries in conflict continue to be disproportionately vulnerable to the impacts of COVID-19. In Yemen, a recent flare in conflict has resulted in more than **200,000 internally displaced persons (IDPs) in need of emergency humanitarian assistance**. Significant **gaps** have been observed across **water and sanitation, health, camp management, protection and shelter sectors**. As conflict frontlines along Marib and Al Jawf governorates continue to shift, causing more and more people to flee active fighting, the **risks of COVID-19 transmission in already overcrowded IDP sites increases**. With the highest case fatality rate in the world, any increase in COVID-19 transmissions is likely to be catastrophic. While in the north west of Syria, the number of COVID-19 cases has risen drastically in the last month, with IDPs, often located in cramped conditions, some of the most vulnerable to COVID-19 transmission.
- IOM, in collaboration with the United Nations Economic and Social Commission for West Asia (ESCWA) and the League of Arab States (LAS), organized an **online event to discuss the modalities for the upcoming Regional Review of the GCM in the Arab Region on 20 October 2020**. The meeting was followed by updates of the regional review processes in other regions, as well as epidemiological and mobility updates that **explored the potential impact of the COVID-19 on the review process**.

IOM's appeal for the MENA region

**91,360,418 USD**

Funding contributions to COVID-19 to date:

**37,219,873 USD**, including **5.03 million USD** reprogrammed funding.



■ Funding Received

■ Funding Gap

IOM National Response Plans related to COVID-19 can also be found at [IOM's Crisis Response Site](#)

## Stories from the Field

### IOM Educational Games Help Keep Children Safe during the COVID-19 Pandemic

Duhok Governorate, Kurdistan Region of Iraq - Years of conflict across Iraq have increased vulnerability to the COVID-19 pandemic. Weakened healthcare infrastructure, as well as socio-economic challenges making it difficult to enforce public health safety measures, have led to a steady rise in COVID-19 cases.

Since the start of the pandemic, IOM Iraq has collaborated with the Government of Iraq (GoI) and the Kurdistan Regional Government (KRG) to address healthcare and socio-economic issues. IOM also provides humanitarian assistance, particularly to the 1.3 million Internally Displaced Persons (IDPs) living in informal settlements or camps.

IDPs often have different vulnerabilities compared to the general public. For example, in situations where families live in close quarters, such as in tents in camp and camp like settings, it is difficult to impose quarantine measures if suspected cases arise. These vulnerabilities are further heightened by the lack of adequate health, water, and sanitation facilities.

This October, IOM's Communications with Communities (CwC) team distributed 1,000 COVID-19 awareness-raising games to the children living in Sharia Camp for IDPs in Dohuk Governorate.

"The games we've designed are easy to play. It's a good way for children to have fun while increasing their knowledge of the precautions [to take so they can] stay protected," said Nashwan, IOM Iraq CwC project assistant.

The games feature illustrations that teach children how to stay safe during the pandemic. They also help them understand the importance of social distancing and hand washing.

Snakes and ladders, the classic board game, has been redesigned to fit the context with players climbing up the ladder and advance to victory if they manage to avoid the squares with the virus. IOM Iraq's CwC team has also developed a twist on a memory game with players tasked with pairing 12 cards showing the correct protective



*Educational games can help children learn how to stay safe during the pandemic ©IOM Iraq / Yad Abdulqader*

measures with 12 cards showing the opposite, incorrect steps to take. Each deck also included a list of COVID-19 safety precautions, so that children can learn to play at home safely.

In addition to games, colouring books with illustrations of children following the correct protective measures were also distributed to 1,000 children in the camp.

"It's harder for children to stay protected as compared to adult; it takes time to fully imprint the precautions in their minds. That is why I think these games are good; the illustration would jog their memory every time they played," said Kherya, who has lived in Sharia Camp for more than five years. Kherya is one of several community mobilizers who work with IOM and other NGOs to implement activities in the camp. They have strong relationships within their communities and are trained to support the international community's work.

"Children can most easily transfer the virus inside the camp; it is huge and crowded, and the children always play in groups of five (5) or six (6)," said one of the camp residents, during an IOM-led community session focused on teaching children to stay safe.

In addition to the games, IOM has conducted many awareness raising sessions in the community and displayed informational posters in key locations throughout the camp. To respect social distancing measures, IOM ensures the number of session participants does not exceed ten (10).

Reliable information about COVID-19 and preventive measures is essential to slowing the spread of the disease, but it is only one piece of the puzzle. IOM Iraq has also been providing IDP families with hygiene kits and other supplies; providing essential items for families who have lost their primary source of income due to the pandemic; and working with GoI and KRG authorities to strengthen the national response to the pandemic. This programme is implemented with funding from the German Government.



*The classic boardgame, snakes and ladders, has been reimagined as an awareness raising tool during the pandemic ©IOM Iraq / Yad*

The effects and impact of the COVID-19 pandemic continue to be felt across the MENA region. As of 28 October 2020, a total of **2,034,442 COVID-19 cases have been confirmed** in the MENA region, out of which, **35,794 cases have proven fatal**. The **case fatality ratio (CFR)** for the region has stabilized at **1.8 per cent**, which is relatively low compared to the global CFR of 2.6 per cent. However, **countries affected by conflict continue to demonstrate elevated CFRs, with Yemen having the highest regionally and globally**. The region currently accounts for **4.5 per cent of global burden of COVID-19 cases** and 3.0 per cent of global COVID-19-associated deaths. An **increase of 12.9 per cent in the number of cases** and 11.5 per cent in the number of deaths associated with COVID-19 was recorded during the reporting period. **Iraq continues to have the highest number of reported COVID-19 cases** in the region (463,951) followed by Saudi Arabia (346,047) and Morocco (207,718). Combined, these three (3) countries account for 50 per cent of the regional COVID-19 burden. **Four (4) countries**, including United Arab Emirates, Kuwait, Morocco, Tunisia, and Libya, **showed an upward trend in the number of new cases of COVID-19 reported**. Iraq, Tunisia, Lebanon, Jordan, Libya, and Morocco constitute countries with the highest proportion of active COVID-19 cases.

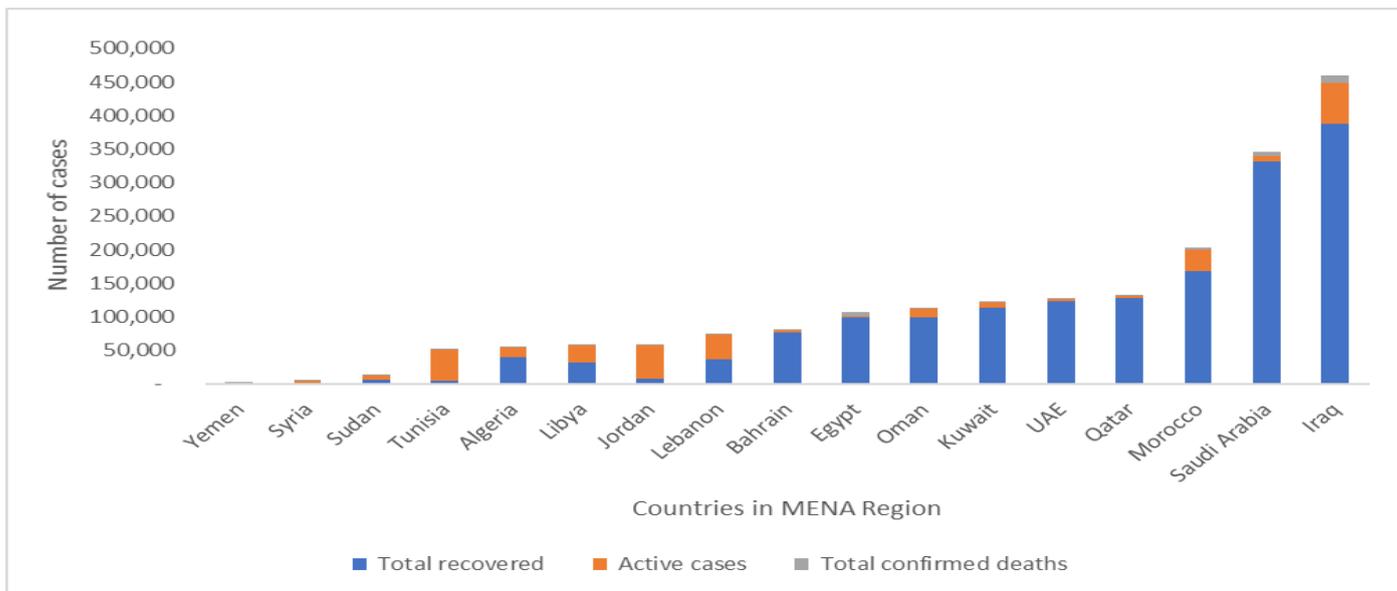


Figure 1: COVID-19 situation in MENA Countries as of 27th October 2020 ©WHO Situational Reports

The COVID-19 pandemic continues to impact regional mobility through various travel bans and mobility restrictions. After a significant reopening process was recorded in the previous reporting period, **no substantial changes have been recorded in the operational status of international Points of Entry (PoEs)** in the region during the current reporting period. To date, according to IOM’s Tracking Mobility Impact, around **48 per cent of monitored international airports are fully operational**, eleven (11) per cent are partially operational and 35 per cent remain fully closed. Around **39 per cent of the 98 monitored land border crossing points remain fully closed** and 35 per cent are partially operational while there are 21 land border crossing points that are now classified as fully operational. Out of 42 monitored **blue border crossing points** in the region, **23 of them are fully closed** and 15 are partially operational, while only three (3) blue border crossing points are fully operational for passengers.<sup>1</sup>

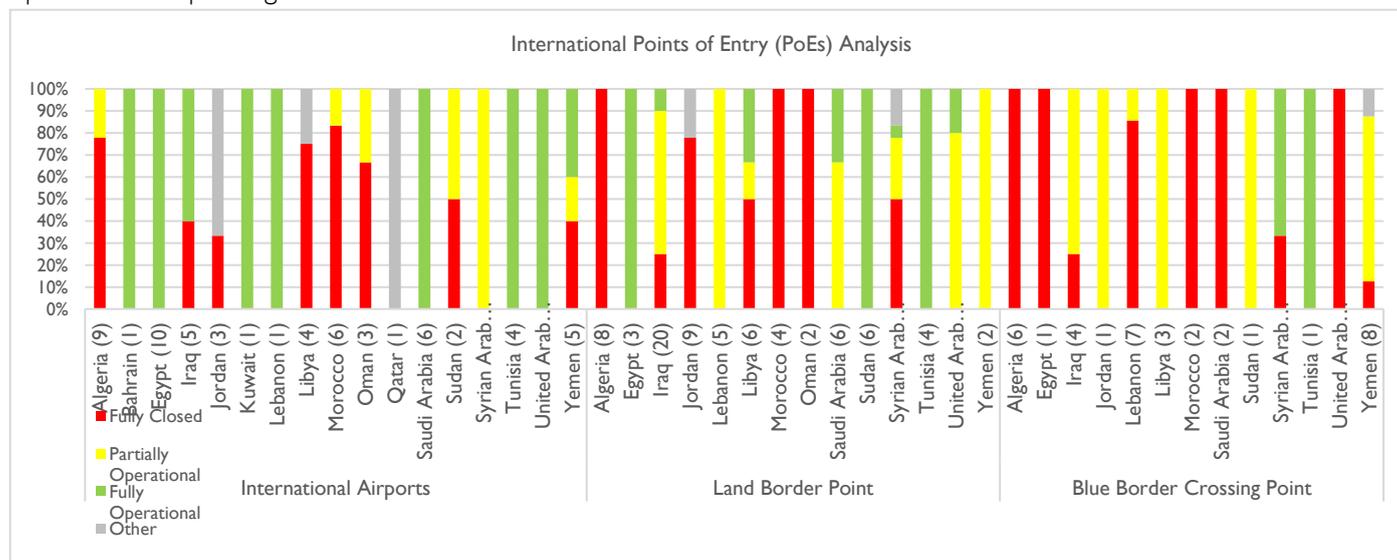


Figure 2: Operational Status of PoEs across the MENA Region ©IOM Tracking Mobility Impacts

<sup>1</sup> Unknown status category for PoEs include nine (9) per cent for airports five (5) per cent for land borders and one (1) for blue borders.

## Response

### COORDINATION AND PARTNERSHIPS

IOM in **Algeria** held a technical meeting with the United Nations High Commissioner for Refugees (UNHCR) to discuss areas of cooperation during COVID-19. The meeting included discussions on the potential to exchange current data for registrations during COVID-19 and emergent COVID-19 trends. It also explored areas for closer collaboration, notably around mixed migration flows and joint counselling for asylum seekers willing to return.

In **Yemen**, IOM is working with partners to develop scenario and risk plans to ensure appropriate preparedness mechanisms in the event of a large influx of displaced persons into Marib City. Limited partner presence in Marib poses a major challenge, and IOM is working within humanitarian frameworks to mobilize partners to establish a stronger presence on the ground.

### TRACKING MOBILITY IMPACTS

IOM in **Lebanon**, through its Displacement Tracking Matrix (DTM), continues preparations to implement Migrant's Presence Monitoring (MPM) pilot activities. The MPM aims to increase understanding of the number of migrants in the Governorate of Beirut and surrounding areas alongside inflow and outflow movements between each neighbourhood of Lebanese and foreign nationals. IOM aims to pilot the MPM in three (3) municipalities in Mount Lebanon, Bourj Hammoud, Sin El-Fil, and Furn El-Chebbek. On 23 October 2020, IOM received a letter of approval from the Beirut Governor's Office to move forward with the MPM. In parallel, IOM prepared a list of primary key informants in Beirut to be interviewed and trained enumerators on their roles and responsibilities during the MPM. IOM is also mapping stranded refugees' beneficiaries of United Kingdom (UK) resettlement programs, as well as migrant workers in Lebanon scheduled for medical checks.

In **Yemen**, IOM's DTM recorded 887 newly displaced households between 04 and 24 October 2020. All displaced households were fleeing conflict in Marib, Taizz and Al Hudaydah governorates, bringing the total number of households displaced by the crisis in 2020 to 26,040. No COVID-19-related movements occurred in recent weeks. However, more than 10,000 people moved to areas deemed safer from the outbreak in July and August 2020. A majority of the newly displaced, particularly in governorates like Marib Governorate, are moving into already



IOM provides assisted voluntary return (AVR) assistance from Jordan to the Philippines ©IOM Jordan

overcrowded displacement sites. The situation raises significant safety concerns, increasing the risk of community-wide disease outbreaks.

### RISK COMMUNICATION AND COMMUNITY ENGAGEMENT (RCCE)

IOM in **Egypt** reached approximately 2,000 people through social media with COVID-19-related awareness information. In addition, IOM also engaged 88 migrants in two (2) awareness raising events related to COVID-19.

In **Iraq**, IOM organized approximately 84 awareness raising and sensitization activities on COVID-19, reaching more than 850 individuals in camp and non-camp settings. Activities targeted Basra, Diyala, Dohuk, Kirkuk, Najaf and Ninewa governorates.

In **Libya**, IOM's mobile medical team conducted door-to-door outreach activities and health awareness sessions on COVID-19 precautionary measures for 714 migrants in Sabha and Tripoli cities. IOM also conducted three COVID-19 awareness raising sessions, during which 149 information, education and communication flyers were distributed to migrants in Benghazi and Sabha cities. Separately, IOM conducted seven (7) focus group discussions through the #informedmigrants campaign, which included health components. IOM also organized two (2) psycho-social support (PSS) awareness sessions for a total of 431 migrants, during which 76 health awareness flyers on COVID-19 in Arabic, English and French were distributed. IOM's mental health and psycho-social support (MHPSS) team also provided emotional support and psychological first aid, conducting psychosocial assessments, follow-up sessions and psycho-social awareness sessions on coping with stress



Central Darfur community members receive personal protective equipment (PPE) as part of the COVID-19 response ©IOM Sudan

during COVID-19. The team also organized a group reading of IASC COVID-19 booklet with children and their families and distributed MHPSS flyers and booklets to 90 migrants. Furthermore, the MHPSS team organized art-based psychosocial activities for girls, which ensured a safe and friendly space conducive to emotional expression.

In **Morocco**, IOM has reached a total of 73,400 individuals, including migrants and vulnerable Moroccans, with hygiene awareness promotion activities. This was achieved through door-to-door communication when offering direct assistance, social media mobilization and sensitization activities during the distributions of leaflets. Leaflets are available in three languages on the [IOM Morocco Website](#).

### DISEASE SURVEILLANCE

In **Morocco**, IOM continues to map disease surveillance activities in collaboration with its implementing partner, Association Marocaine de Planning Familial (AMPF). A community-based surveillance unit within the migrant community in Marrakech City also organized a set of activities focused on community sensitisation and the mapping of suspected COVID-19 cases. A total of ten (10) community leaders were also trained on identification of COVID-19 cases, procedures to report suspect cases and the tools available for community sensitization.

IOM in **Libya**, in collaboration with the National Centre for Disease Control (NCDC), continued to implement syndromic and event-based health surveillance in, and around, points of entry (PoE). To date, a total of 7,359 migrants have been surveyed. In addition, IOM conducted a two (2)-day training for 28 Rapid Response Team healthcare staff in Tripoli City on infection prevention and control (IPC) and contact tracing of COVID-19 patients.

### POINTS OF ENTRY (POE)

In **Lebanon**, the IOM-supported construction of a training centre for the General Security Directorate (GSD) is ongoing. IOM is also finalizing preparations to complete an in-kind donation to the GSD at the Port of Beirut of COVID-19 prevention materials. This includes two first aid kits, a sanitization tunnel and a medical emergency bag for rapid responders.

IOM in **Iraq** continued to coordinate closely with officials from the Erbil International Airport, Ministry of Health (MoH), World Health Organization (WHO), and other key partners to assess PoE activities. IOM has been providing ongoing technical support at the request of airport officials and WHO, including finalization of PoE training modules for border/airport officials, which were translated into Arabic and Kurdish.



IOM provides voluntary return counselling at the Ethiopian Consulate, Beirut ©IOM Lebanon



IOM call centre staff provide mental health and psychosocial support (MHPSS) to beneficiaries through phone calls ©IOM Iraq

### NATIONAL LABORATORY SYSTEMS

IOM in **Yemen** is in the process of procuring six (6) GeneXpert machines to increase the testing capacity in underserved locations in Yemen. Assessments are ongoing to identify areas in Taizz and Marib governorates in need of COVID-19 testing support.

### INFECTION PREVENTION CONTROL (IPC)

In **Iraq**, IOM continues to implement screening and triage activities within IDP camp health clinics in Ninawa, Erbil, Kirkuk and Anbar governorates. IOM also screened patients for COVID-19 at more than 20 health facilities Anbar, Erbil, Dohuk, Kirkuk, and Ninewa governorates prior to health consultations.

IOM in **Libya** conducted fumigation, disinfection, and cleaning interventions at four (4) IDP camps, four (4) disembarkation points (DP) and one (1) detention centre (DC) to combat COVID-19. Additionally, IOM distributed hygiene kits to 134 migrants in Sabha City, as part of COVID-19 awareness sessions. IOM also conducted a two-days training session for 14 health workers on IPC, as well as case management in Benghazi district. Separately, IOM organized a handover ceremony for the Alshaba water well in Sabha City, with members of the municipal council and inhabitants of the neighbourhood.

IOM in **Yemen** continues to improve access to water and sanitation facilities in displacement sites and host communities. Daily water trucking activities are ongoing in 144 water points in Ibb, Marib, Al Hudaydah and Taizz governorates, reaching 35,772 people. IOM also carried out trainings on IPC for 28 hygiene promoters and 32 community mobilizers in Marib Governorate. In Taizz and Abyan governorates, IOM distributed 3,459 hygiene kits at three (3) IDP hosting sites, and community hygiene volunteers continued house-to-house hygiene promotion visits reaching 9,512 beneficiaries in nine (9) IDP-hosting sites. In Marib Governorate, five (5) hand washing stations in the largest IDP site have been set up.

### CAMP COORDINATION AND CAMP MANAGEMENT (CCCM)

IOM in **Iraq** completed the construction of a quarantine area in Jadah 1 Camp, Ninewa Governorate. IOM continued to conduct COVID-19-related awareness activities, including the distribution of COVID-19 card games at informal sites

in Mosul, Tal Abta and Sinjar in Ninewa Governorate and Tikrit in Salah Al-Din Governorate. Work is ongoing to install handwashing stations in Ninewa, Anbar, and Salah Al-Din governorates with appropriate usage guidance material also under development. IOM also distributed 1,224 COVID-19 preventative kits to 306 households across 18 informal sites in Baiji and Tikrit governorates.

In **Yemen**, IOM installed an isolation centre in the country's largest displacement site, Al Jufainah Camp in Marib City, to provide safe isolation and support for suspected COVID-19 cases. With the increased influx of IDPs into Marib City, the centre will allow suspected COVID-19 cases to safely isolate away from overcrowded areas of the displacement site.

### CASE MANAGEMENT AND CONTINUATION OF SERVICES

In **Morocco**, IOM continues to offer a range of protection assistance to migrants in needs. This includes provision of continuation of care services for individuals with chronic health conditions as well as maternal health and childcare support. In total, 3,320 consultations have been provided to the most vulnerable beneficiaries, including unaccompanied and separated children, including psycho-social support (PSS) through focus group therapy and case-by-case follow-up via phone consultations.

In **Iraq**, IOM supported the opening of an isolation area on 25 October 2020 in Laylan Camp 2, Kirkuk Governorate, in coordination with the CCCM cluster, Médecins Sans Frontières (MSF), the UN Office for the Coordination of Humanitarian Affairs (OCHA), and other stakeholders. IOM is providing technical, material, and human resource support to the isolation area.

In **Libya**, IOM is supporting four (4) primary healthcare centres (PHC), where a total of 430 IDPs were offered primary healthcare medical consultations, with the provision of medicines, medical consumables, and information, education and communication (IEC) materials on COVID-19.

In **Yemen**, IOM is providing material and human resource support to 22 health facilities across Al Jawf, Aden, Sada'a, Al Baydah, Amanat Al Asimah, Lahj, Marib, Shabwah and Taizz governorates. All 22 health facilities have also received PPE supplies, and triage points have been established at 18 of the 22 facilities. Through eight (8) mobile health teams, IOM is providing access to emergency health assistance in displacement sites and along migratory routes in Aden, Lahj and Marib governorates. During the reporting period, 7,527 people, including 1,766 migrants, received access to health



*IOM staff conduct screening services at Sinjar Hospital, Ninewa Governorate ©IOM Iraq*

services. A total of 3,146 long lasting insecticide nets (LLINs) were also distributed to immuno-compromised patients in Marib governorate.

In **Sudan**, IOM, through the Migrant Resource and Response Centre (MRRRC) in Khartoum City continues implementing protection activities to mitigate the impact of COVID-19 on vulnerable migrants. The MRRRC provided 223 new cases with medical counselling and one (1) new case with prescription support. A total of 25 migrants collected medication prescribed by the MRRRC doctor from safe houses. Counsellors supported six (6) migrants.

### PROTECTION

IOM in **Lebanon** supported 43 migrant workers to return voluntarily to their countries of origin. The assisted individuals were from Sierra Leone, Nigeria and Sudan. They were provided with accommodation for three (3) days prior to departure, during which, they underwent PCR testing and pre-embarkation health checks. IOM conducted protection screening and voluntary return counselling sessions with all migrants assisted to return. They were also provided with legal counselling by the NGO Legal Action Worldwide. Medical escorts travelled with individuals with significant medical conditions. Additionally, IOM organized psychological first aid training for four (4) migrants community leaders. PSS activities and counselling are ongoing in IOM community centres. IOM also registered and screened 74 migrants. Depending on individual needs, migrants were referred to immediate assistance including multi-purpose cash assistance, AVR, medical assistance, PSS support and protection. IOM supported the Ministry of Social Affairs (MoSA) to develop a tool to rapidly screen migrants for vulnerability to abuse, violence and exploitation. This tool is currently being digitalized using the IOM IMAP application. This initiative will strengthen national referral mechanisms to ensure migrant workers with special protection needs and those who were affected by COVID-19, the economic crisis and/or the Beirut Port explosions



*IOM provided hygiene kits to 3,300 displaced people from Tawergha ©IOM Libya*

are properly identified and referred for assistance.

IOM in **Jordan**, in coordination with the Embassy of Philippines in Jordan, assisted 33 migrants who were stranded in Jordan to safely return to their home country through IOM's assisted voluntary returns (AVR) program. The assistance included pre-departure cash, medical examinations, as well as airport assistance throughout the trip.

IOM in **Iraq** continues to provide case management to victims of trafficking (VoT) and individual services to cases deemed critical and urgent, including people with a 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, or by phone. As a part of efforts to further understand MHPSS needs across the country, IOM completed an MHPSS survey among target areas and an assessment on livelihoods and MHPSS integration in IDP locations like Dohuk, Hassan Sham, and Wahed Huzeiran. IOM expects to complete the analysis of the data in late October 2020. IOM also aims to finalize a leaflet to support bereaving families who lost a loved one to suicide in the next reporting period.

In **Algeria**, IOM assisted fifteen (15) migrants, including eleven (11) men, three (3) women and one (1) child. Individuals were provided with PSS to sustain positive coping mechanisms during the COVID-19 pandemic and while waiting to return to their countries or origin. Support was delivered in cooperation with the Algerian Association of Psychologists.

### ADDRESSING SOCIO-ECONOMIC NEEDS

In **Jordan**, IOM completed the post-distribution monitoring of refugee households that received basic needs cash assistance to help mitigate the loss of household income due to COVID-19. The surveys showed that the cash assistance was spent on rent, food, utilities, debt repayment, health-related costs and hygiene items. Other costs covered included transportation costs, clothes and shoes, household items, shelter repairs, and saving for other purposes. With the support of the United States Government Bureau of Population, Refugees, and Migration (PRM), IOM reached a

total of 502 refugee households.

IOM in **Tunisia**, in coordination with the municipalities of Kram and Beb Souika, distributed vouchers to 133 migrants and 38 Tunisian families, whose livelihoods have been negatively impacted by COVID-19. IOM also coordination with the municipality of Sfax to distribute vouchers to 187 migrants and three (3) Tunisian families in El Bousten. In Djerba, IOM distributed food vouchers to 191 beneficiaries. Throughout distributions, IOM also implemented awareness sessions for beneficiaries on COVID-19 prevention measures. IOM continued providing shelter and different types of assistance, including food vouchers, hygiene kits and medical and PSS to 63 migrants, including those rescued-at-sea, residing in two (2) IOM shelters.

In **Iraq**, IOM continues to implement a wide range of cash for work (CfW) activities, with some of these activities directly supporting efforts to tackle the spread of COVID-19. This includes four (3) activities to support face mask sewing in Salah al-Din and Ninewa governorates, one (1) cleaning activity for school and clinics in Salah al-Din governorate, and four (4) activities to assist the Directorate of Health to clean and sterilize a quarantine centre and a hospital in Ninewa governorate. Other CfW activities are also ongoing to support individual livelihood. Need assessments are ongoing for potential infrastructural support in the health and WASH sectors response to the COVID-19 pandemic.

In **Yemen**, CfW activities, including street rehabilitation and cleaning campaigns, are ongoing in Hadramaut governorate, targeting 350 vulnerable IDP and host community households. IOM and partners have also completed the distribution of 50,000 face masks and 10,000 bottles of hand sanitizer to vulnerable communities in Hadramaut governorate. IOM is currently engaging local partners in Marib and Hadramaut governorates to support the manufacturing of waste containers which will be donated to local authority cleaning funds in each governorate in support of community waste management efforts.

In **Sudan**, IOM supported 917 migrants from the Nigerian, Filipino, Congolese, Eritrean and Ethiopian communities with food assistance.

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