



IOM supports refugee children's education through online learning and homeschooling in Pekanbaru, Indonesia.



IOM staff distributing cash assistance to beneficiaries in Buhi, Philippines.



IOM healthcare centers in Rohingya Refugee Camps are regularly disinfected.



Members of Rohingya community practice social distancing while attending a COVID-19 awareness session in Cox's Bazar, Bangladesh.

## OVERVIEW

COVID-19 cases in Asia and the Pacific continue to increase at a steady pace with countries augmenting responses as well as maintaining stringent mobility restrictions. As of 27 April, over **289,700 cases** and more than **13,600 deaths** have been reported in the region. Confirmed cases have been reported in 28<sup>1</sup> countries, territories and/or areas, with new cases reported on a daily basis.

IOM missions in the region are working with governments and partners to ensure that migrants, whether in regular or irregular situations, as well as returnees and forcibly displaced persons are included in efforts to mitigate and combat the illness's impact. The past week has seen evidence of concentration of COVID-19 cases among migrant workers in some locations, highlighting existing inequalities between migrants and host communities and further confirming the critical need for specific outreach and inclusion of migrants in all responses. There are also increasing serious concerns regarding stranded and vulnerable migrants abroad and their ability to satisfy basic needs. In addition to the immediate health risks of COVID-19, the situation poses significant socio-economic and protection challenges for migrants excluded from or unable to access support mechanisms. There are also increasing reports of stigma and discrimination towards migrants at destination, transit and home locations upon return, due to fears around COVID-19 transmission. Devising adequate responses for migrants, refugees, IDPs, returnees and other vulnerable groups remains the top priority for IOM.

High numbers of COVID-19 cases in Iran (the Islamic Republic of) have led approximately **190,000 Afghans** to return to Afghanistan since the beginning of March. In the Greater Mekong Sub-Region, following the announcement of lockdown measures in Thailand, over **224,000 cross-border migrants** from neighboring countries returned to their home provinces or countries, including Cambodia, the Lao People's Democratic Republic and Myanmar. These kinds of migration movements may have the unintended effect of driving transmission in areas with less capacity to provide testing, isolation and treatment, as well as increase vulnerability for migrants during their journey and in their home communities.

## CONTACTS

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<sup>1</sup>Afghanistan, Australia, Bangladesh, Bhutan, Brunei Darussalam, Cambodia, China, Fiji, India, Indonesia, Iran (Islamic Republic of), Japan, Lao People's Democratic Republic (the), Malaysia, Maldives, Mongolia, Myanmar, Nepal, New Zealand, Pakistan, Papua New Guinea, Philippines (the), Republic of Korea (the), Singapore, Sri Lanka, Thailand, Timor-Leste and Viet Nam. Source: WHO Coronavirus situation reports: <https://www.who.int/emergencies/diseases/novel-coronavirus-2019/situation-reports/>.

## IOM RESPONSE

## PILLAR 1 - COORDINATION &amp; PARTNERSHIPS

In **Dhaka, Bangladesh**, IOM remains in contact with the Ministry of Foreign Affairs regarding the safe and dignified return of migrant workers stranded abroad looking to return home. Large-scale return of migrants will have wide-ranging implications on provision of health and social services, as well as employment, resilience and social cohesion.

**IOM Cambodia** continues to coordinate and work with the border authorities in Kamrieng, Poi Pet, and Samrong to monitor migrants' cross border movement in order to understand their mobility, respond to their needs and inform preparedness and response strategies. Five Provincial Coordinators have been hired for IOM's response plans. **IOM Indonesia** conducted coordination and consultation meetings on COVID-19 response with health departments at the regional and local levels to discuss access to health services, treatment protocols and quarantine facilities for refugees and asylum seekers.

**IOM Myanmar** is coordinating the UN response for the situation of returning migrants in Myanmar through the UN Core Group on Returning Migrants. Agency focal points have been assigned at national and regional levels for Kayin (UNHCR), Mon (IOM), Shan (UNICEF), Kayah (UNHCR), Kachin (IOM and UNDP), and Rakhine (IOM) States, as well as Magway Region (IOM). The Group is planning a rapid assessment and immediate assistance measures for returnees, including ensuring a consistent humanitarian assistance package during the quarantine period.

**IOM Nepal** is providing technical support to the Ministry of Health and Population in devising the Health Sector COVID-19 response plan, including guidance on Participatory Mobility Mapping. IOM is also supporting the UNCT to conduct assessments of quarantine facilities in several provinces.

In **Pakistan**, IOM is providing technical support to the National Disaster Management Authority following the host government's request for support with COVID-19 response activities. **IOM Vanuatu** is providing technical assistance to the National Disaster Management Office regarding the emergency response for Tropical Cyclone Harold, as well as COVID-19.

**IOM Viet Nam** is actively participating in the UN technical committee on COVID-19 response and the UN Crisis Management Team. The mission is also contributing to a joint UN working group on the social and economic impacts of COVID-19, ensuring that both internal and international migrants are considered.



Handover of hygiene supplies and masks to Protection Shelters in Lao PDR (the).

## PILLAR 2 - RISK COMMUNICATION &amp; COMMUNITY ENGAGEMENT

In **Cox's Bazar, Bangladesh**, IOM staff, community health workers and volunteers provided 233,624 beneficiaries with COVID-19 related information. IOM staff are also holding outreach sessions with Rohingya refugees to understand their concerns, provide information about services and dispel any rumors. Under the Communications with Communities program, IOM developed a radio drama to address rumors going around in the camps and encourage people to follow trusted sources of information. Since March, IOM teams in Cox's Bazar have reached more than 1 million beneficiaries through awareness-raising sessions on COVID-19.

**IOM Cambodia** printed and distributed IEC materials developed by MoH and WHO, as well as IOM's MHD team, to raise awareness about COVID-19. IOM is also collaborating with UNICEF to manage a hotline providing returning migrants with information regarding access to essential healthcare and psychosocial support.

**IOM Indonesia** started several activities to involve migrants in RCCE responses in their own communities and surrounding host communities, including through poster competitions and social media messaging on preventive actions and hygiene promotion. These posters will be displayed in public places around the community, and the messages will be broadcast through social media platforms.

**IOM Micronesia** continues to translate informational posters and work on outreach tools for supporting persons with disabilities. The mission also installed informational billboards in Pohnpei and Yap and supported a community awareness campaign in Yap, covering 10 villages in 4 municipalities.

**IOM'S global, online interactive platform shows the impacts of the COVID-19 pandemic on human mobility at the global, regional and country levels. The platform can be accessed at the following [link](#).**

## IOM RESPONSE

**PILLAR 2 - RISK COMMUNICATION & COMMUNITY ENGAGEMENT - CONTINUED**

**IOM Myanmar** staff, together with Government Basic Health Staff, disseminated health messages using Ministry of Health and Sports posters and pamphlets in Mon, Kayin, Kachin and Rakhine States, as well as Yangon Region. IOM and CSO partners, with support from the Livelihoods and Food Security Fund and in coordination with state and local authorities, continued distribution of hygiene kits, WASH supplies and IEC materials on risk communication and reducing stigma to quarantine facilities and returning migrants, reaching a total of 48,583 individuals (25,350 women, 23,233 men) since the beginning of April, primarily returning migrants from Thailand and China.

**IOM Nepal** is developing an online platform with official resources, a list of available services and online medical counselling services delivered both in Nepal and in the countries where most Nepalese migrant workers reside. In **Solomon Islands** and **Vanuatu**, IOM is advocating for inclusion of migrants in on-going preparedness and response plans to prevent stigmatization. The missions are also supporting public health authorities to implement and translate COVID-19 communication strategies and activities to help prepare and protect individuals, including vulnerable groups, such as victims of trafficking.

**IOM Thailand** created audio Public Service Announcements (PSAs) to communicate risk information to migrants and refugees in Immigration Detention Centers (IDCs) and translated the PSAs into Somali and Farsi with help from IOM counterparts in East Africa and Central Asia. These PSAs have been provided to immigration officials for dissemination.

**IOM Tonga** is consulting with communities and community associations (including women-led associations, organizations for persons with disabilities, children and student/youth networks) and strengthening existing community engagement and feedback mechanisms to ensure their participation throughout the response and enhance accountability to affected populations.



IOM together with local health partners for COVID-19 awareness raising in Timor-Leste.

**PILLAR 3 - SURVEILLANCE**

In **Cox's Bazar, Bangladesh**, the WHO's Early Warning, Alert and Response System is active across the 35 IOM-supported primary health care facilities. IOM's partners have nominated contact tracing supervisors in 13 camps to lead and coordinate contact tracing activities at the camp level.

**IOM Indonesia** is coordinating with the local task force, Immigration Detention Center and other relevant local government entities to increase monitoring of migrant movements in community accommodations in Tanjung Pinang, Pekanbaru and Medan.

**PILLAR 4 - POINT OF ENTRY**

IOM teams in **Bangladesh** completed assessments at three Points of Entry - Hazrat Shahjalal International Airport, Dhaka; Shah Amanat International Airport, Chattogram; and Chattogram Port – and held a POE Task Force meeting in consultation with airport and port authorities, port health services, customs and immigration department, Ministry of Health, Ministry of Civil Aviation and Tourism, Ministry of Home Affairs, coast guard and private sector representatives.

**IOM Cambodia** continues to support several hundred returning migrants at the various points of entry with hygiene kits, sleeping materials and meals as well as with health screening and disease prevention measures. Due to the COVID-19 pandemic, more than 90,000 Cambodian migrants have returned to the country.

**IOM Myanmar** continues to support health screening and provision of PPE sets, hand sanitizers and non-touch thermometers at points of entry with Thailand in Myawaddy, Kayin State, as well as at three points of entry with China: Panwah gate in Chipwi Township, Kampaiti gate in Wainmaw Township and Lwelgel gate in Moemauk Township.

**PILLAR 5 - NATIONAL LABORATORY SYSTEMS**

**IOM Cambodia** mobilized an IOM Lab Technician to support the Poi Pet Lab Room in the collection of specimens from suspected COVID-19 cases amongst migrants.

**IOM Myanmar** continues to provide transportation support for COVID-19 nasal/nasopharyngeal swab tests taken in Kachin and Rakhine States for the National Laboratory in Yangon.

The Migration Health Evidence Portal for COVID-19, a repository of research publications and high-yield evidence briefs on COVID-19 and its intersection with migration health, can be accessed via the [Migration Health Research Portal](#). Feedback or queries can be sent to [mhdrop@iom.int](mailto:mhdrop@iom.int).

## IOM RESPONSE

**PILLAR 6 - INFECTION PREVENTION & CONTROL**

In **Cox's Bazar**, IOM distributed 7,020 cloth masks, 2,500 hand soaps and sanitizers and 25 disposal bins to Government front-line responders, as well as 3,400 gloves, 80 gowns, 50 coveralls, 100 face masks, 20 respirators and 20 face shields to health workers at IOM-managed primary health care facilities. The mission also distributed 33,612 soap kits, installed 21 handwashing units and prepared 11,429 liters of chlorine solution to disinfect sanitation facilities and communal spaces. Community health workers trained 110 women's committee members on identification of COVID-19 symptoms, preventing transmission and seeking support if needed.

**IOM Indonesia** continues to follow up with migrants in need of medical attention through WhatsApp/phone calls and answer questions or complaints related to both COVID-19 and regular health issues. The mission also coordinates with local health clinics and hospitals, laboratories and pharmacies to ensure migrants with medical needs receive support. In Medan, 20 handwashing stands were provided to the Mayor and COVID-19 task force for installation in much-needed sites around the city. The mission also continues to survey existing and new facilities that could serve as isolation centers to prepare for any confirmed cases among refugees and asylum seekers under its care.

**IOM Micronesia** installed three group handwashing stations at schools in Kosrae and completed construction of 20 group handwashing stations in Chuuk.

**PILLAR 7 - CASE MANAGEMENT**

During the past week in **Afghanistan**, IOM's Mobile Health Teams served 7,480 patients with health services and screened 11,427 undocumented Afghans in IOM's Transit Centers. Fifteen IOM health staff are deployed to major border crossing points with Iran (the Islamic Republic of) to support ongoing COVID-19 response efforts. In **Cox's Bazar, Bangladesh**, the 16-bed isolation and treatment facility IOM constructed in Camp 24 is now functional. Construction is under way to scale up the capacity of the facility to 100 beds.



Doctors conducting outpatient consultation at IOM Healthcare Center, Cox's Bazar, Bangladesh.

**PILLAR 8 - LOGISTICS, PROCUREMENT & SUPPLY**

**IOM Cambodia** provided 300 PPE kits, as well as masks, gloves, infrared thermometers and disinfectant liquid to border authorities and provincial health departments across the country. **IOM Indonesia** is mobilizing funding to respond to the Government's requests for critical medical equipment, supplies and PPE for use by hospitals, clinics and frontline officers.

**IOM Myanmar** is providing State Health Departments in Kachin, Rakhine and Mon States, as well as the Yangon Regional Health Department, with PPE, bedding, towels, mosquito nets and other hygiene and non-food items for both community and hospital quarantine facilities.

**PILLAR 9 - PROTECTION**

In **Afghanistan**, the Protection Unit completed case management assessments for 129 persons with specific needs, including unaccompanied migrant children, medical cases, female-headed households, deported families and single females.

During the reporting period, **IOM Bangladesh** supported more than 5,500 migrants – mainly from Gulf Cooperation Council countries, Malaysia and Australia – through IOM's hotlines for migrants with information about medical facilities, food access, employment status, money transfers and options for returning to Bangladesh.

IOM's MHPSS staff in **Cox's Bazar** continued providing one-on-one counselling for individuals admitted to IOM's quarantine and isolation facilities in Leda. MHPSS teams continue to provide in-facility services, including individual counselling, group counselling, PFA, psychoeducation, case management, follow-up sessions, awareness sessions and referrals, while also expanding remote methods of reaching those in need. In the past week, 40 callers contacted the MHPSS helpline and received guidance to cope with increased stress and anxiety during the COVID-19 outbreak.

**IOM Nepal** conducted a survey with Private Recruitment Agencies (PRAs) and members of the Nepal Association of Foreign Employment Agencies to better understand the impacts of COVID-19 on migrant workers in labour destination countries and on PRAs in Nepal. The survey aims to identify the protection needs of vulnerable migrants and their families, as well as how IOM can assist the private sector during and after the pandemic.

**IOM Tonga** is advocating for the inclusion of migrants in on-going preparedness and response plans to avoid stigmatization. In **Vanuatu**, IOM is mapping migrant and displaced populations to ensure they are included in public health messaging. The country office is also helping migrants to access services and is advocating for the inclusion of migrants in on-going preparedness and response plans.

## IOM RESPONSE

**PILLAR 10 - CAMP COORDINATION & CAMP MANAGEMENT**

In **Solomon Islands**, IOM is supporting government-led CCCM activities for the COVID-19 response. **IOM Vanuatu** is providing technical guidance and support regarding the CCCM/Evacuation Center Technical Working Group in COVID-19 settings in the context of emergency response for Tropical Cyclone Harold.

**PILLAR 11 - TRACKING MOBILITY IMPACTS**

34 country offices are tracking COVID-19 related mobility at 554 POEs in the region: 178 land borders, 48 sea borders, 141 airports, 115 internal transit points and 76 area/sub-national points.

**IOM Bangladesh** is tracing returning migrants from the European Union through ten reintegration service centers to determine level of vulnerability and provide COVID-19-related information and counseling assistance on how to cope with the adverse impacts of the pandemic. **IOM Thailand** field teams are conducting flow monitoring at official crossing points, unofficial crossing points, and bus stations in Ranong Province to determine the number of stranded migrants at the borders with neighboring countries.

**PILLAR 12 - ADDRESSING SOCIO-ECONOMIC IMPACT**

**IOM Indonesia** initiated cloth mask and hand sanitizer making among refugees and asylum seekers who received IOM sewing/tailoring vocational training. Furthermore, to facilitate access to virtual education for refugees and asylum-seekers enrolled in standard schooling and adult literacy programs, IOM will reimburse for internet quotas on top of monthly subsistence allowances.

**IOM Thailand** has provided direct assistance to 96 migrant families in the Tak and Ranong provinces, including essential food items and hygiene kits. **IOM Viet Nam** is modifying a labor market assessment being carried out under a counter trafficking project to include indicators related to the social and economic impacts of COVID-19 on migrants.



Beneficiaries are reached through door-to-door meetings to convey key COVID-19 health messages in Cox's Bazar, Bangladesh.

**INNOVATIVE RESPONSES**

IOM teams in **Cox's Bazar** are adapting the ways to communicate key messages. Multiple programmes and resources are being used to update the Interactive Voice Response database that broadcasts important health and safety-related messages. In Cox's Bazar, Rohingya beneficiaries and IOM staff teamed up to produce COVID-19 awareness-raising songs in their language. The songs have been produced in both high and low-quality video and audio samples for easy sharing across messaging platforms.

**IOM Nepal** has been helping to broadcast the TV show "Talk of the Town" on COVID-19 preparedness and response as part of an ongoing media action program. So far, three episodes of the TV show have been developed and broadcasted through National Television channel. In these episodes, former Health Minister and Member of Parliament, Mr. Gagan Thapa, former Education Minister and Disaster Expert, Dr. Ganga Lal Tuladhar and Deputy Prime Minister and the Coordinator of High-Level Coordination Committee for COVID response, Honorable DPM Ishwar Pokharel, were interviewed on government efforts, public awareness messages and expert analysis on COVID-19.

**FURTHER RESOURCES**

IOM has produced:

- Series of COVID-19 analytical snapshots, which are designed to capture the latest information and analysis in a fast-moving environment. The latest snapshot can be found at the following [link](#).
- Needs assessment report titled "Rapid Assessment: COVID-19 Related Vulnerabilities and Perceptions of Non-Thai Population in Thailand", which can be found at the following [link](#).
- Thematic page "Migration data relevant for the COVID-19 pandemic," which compiles and analyzes existing data on migrants. The page can be found on the Global Migration Data Portal at the following [link](#).



Community Health Worker training on COVID-19 protocols in Herat, Afghanistan.