

West & Central Africa

21 Countries: Benin, Burkina Faso, Cabo Verde, Cameroon, the Central African Republic, Chad, Côte d'Ivoire, Equatorial Guinea, Gabon, Gambia, Ghana, Guinea, Guinea-Bissau, Liberia, Mali, Niger, Nigeria, Sao Tome and Principe, Senegal, Sierra Leone and Togo.

15 October 2020

While the downward trend in the number of new coronavirus cases continues across West and Central Africa, the **number of active cases keeps declining** since late July, going from 48,443 on 20 July to 19,836 as of 12 October 2020.

As the economic impact of the pandemic is increasingly being felt in West and Central Africa, **refugees and other displaced populations are disproportionately impacted in the livelihoods** and are resorting to negative coping mechanisms.

<p>POPULATION OF CONCERN</p> <p>10,000,000 total PoCs</p> <p>5,600,000 IDPs</p> <p>1,300,000 Refugees</p> <p>1,400,000 Returnees</p> <p>1,700,000 Stateless</p>	<p>COVID-19 CASES*</p> <p>223,779 confirmed cases</p> <p>19,836 still active</p> <p>200,550 recovered</p> <p>3,393 deaths</p> <p><i>*source: WHO as of 12 October 2020.</i></p>	<p>FUNDING REQUIREMENTS</p> <p>for COVID-19 Response Globally</p> <p>US\$745 MILLION</p> <p>Funding gap 32%</p> <p>Funding Received 68%</p>
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As schools reopen across West and Central Africa, UNHCR supports the return of displaced children like in Mali where thousands of school backpacks were distributed in Mopti, Gao & Timbuktu. ©UNHCR Mali

Operational Context

- Downward trend in number of new cases and decrease in active cases in West and Central Africa.** The number confirmed COVID-19 cases in West and Central Africa (WCAR) is at 223,779 as of 12 October 2020 which confirms the downward trend in the number of new cases in the region. The number of active cases in the region continues its steady decline which started at the end of July, going from 48,443 on 20 July 2020 to 19,836 as of 12 October 2020. As of 12 October 2020, **Nigeria** (60,266) remains with the highest number of confirmed cases, followed by **Ghana** (47,005), **Cameroon** (21,203), **Cote d'Ivoire** (20,154) and **Senegal** (15,268). In terms of active cases, **Nigeria** (7,416) has the highest number, followed by **Central African Republic** (2,868), **Senegal** (1,657), **Cape Verde** (1,016) and **Gambia** (972).
- COVID-19 Cases in West and Central Africa by Country (as of 12 October 2020):**

Countries	Confirmed	Deaths	Recovered	Active
Benin	2,411	41	1,973	397
Burkina Faso	2,280	63	1,554	663
Cape Verde	7,072	75	5,981	1,016
Cameroon	21,203	423	20,117	663
CAR	4,854	62	1,924	2,868
Chad	1,304	92	1,115	97
Cote d'Ivoire	20,154	120	19,798	236
Equatorial Guinea	5,063	83	4,894	86
Gabon	8,835	54	8,189	592
Gambia	3,632	117	2,543	972
Ghana	47,005	306	46,398	301
Guinea	11,022	69	10,324	629
Guinea Bissau	2,385	40	1,728	617
Liberia	1,363	82	1,245	36
Mali	3,286	132	2,527	627
Niger	1,201	69	1,123	15
Nigeria	60,266	1,115	51,735	7,416
Sao Tome	929	15	892	22
Senegal	15,268	314	13,297	1,657
Sierra Leone	2,385	72	1,736	498
Togo	1,940	49	1,457	434
Total (WCA)	223,779	3,393	200,550	19,836

- Confirmed cases among PoCs.** As of 12 October 2020, 30 PoCs were tested positive including 16 refugees in **Cameroon**, 2 in **Togo**, 2 in **Niger**, 1 in **Gambia**, 1 in **Ghana**,

1 in **Guinea** and 1 in **Liberia** and 3 IDPs in **Central African Republic** and 3 in **Mali**. So far, 2 refugees died in **Cameroon** and 1 in **Gambia**.

(N.B. The exact number of COVID-19 cases in the region remains uncertain, considering the comparatively low testing in the region. According to the World Health Organization. (OMS) more than eight out of ten Covid-19 cases in Africa are asymptomatic or show few symptoms. Death tolls may exclude people who did not die in hospital, or before they could be tested.)

- **COVID-19 cases and government measures to address the COVID-19 pandemic in the region.** Most countries in the region are reopening their borders and relaxing cross border and internal restriction measures to mitigate the negative socio-economic impact of the pandemic. The archipelago of **Cape Verde** reopens its borders this Monday, October 12 after more than six months of closure. In **Ghana**, high schools reopened on Monday 5th October 2020 after about 7 months of closure due to covid-19. In **Nigeria**, schools reopened on Monday 12 October after consultations with all stakeholders and the country's COVID-19 task force. The government has increased its daily testing capacity to over 3,500 per day. In **Senegal**, the Government formally lifted restrictive measures on public gatherings. To limit the imported cases, the government will impose a fine on any airline company having taken a passenger onboard bound for Senegal with a false test of covid-19.
- **An additional burden on a region grappling with several challenges and vulnerabilities.** In West and Central Africa, the COVID-19 pandemic represented an additional burden on a region grappling with climate shocks, the recent floods in the region being one manifestation, endemic poverty, and chronic vulnerabilities, including fragile national health systems, limited access to water and sanitation facilities and precarious living conditions in most of the areas hosting displaced populations. Basic measures such as handwashing are not effective when over one-third of West Africans have no handwashing facility at home. Social distancing is also complex on a continent experiencing the fastest urban growth in the world, where two to three generations often live under the same roof, and where poor sanitary conditions generally prevail. With humanitarian access already hindered by the ongoing violence and endemic insecurity in the Sahel or the Lake Chad Basin, UNHCR's operations were further constrained by pandemic and the travel restrictions imposed by governments across the region. Similarly, lockdowns and market closures are difficult in a region where preventing people from going to work could jeopardize their survival.
- **Specific protection risks and challenges for forcibly displaced populations.** Refugees and IDPs are often residing in overcrowded and precarious conditions rendering impossible social distancing or basic preventive measures such as hand washing which exposes them to heightened risks of contamination as COVID-19 cases. The congestion in camps and reception centres remains a matter of high concern in the context of the COVID-19. Forcibly displaced populations are also at heightened risk of stigmatization in situations of pandemic. In addition to these specific challenges, forcible displaced populations are also facing the risk of food insecurity in the region, particularly in the Sahel. There are also great concerns regarding gender-

based violence which is on the rise since the beginning of the COVID crisis as a direct result of the preventive measures enforced and the economic strain these restrictions have put on many households. The significant disruption in the livelihoods of many forcibly displaced population is also increasing the risk of resorting to negative coping mechanisms, including child labour which UNHCR is monitoring closely.

Displaced populations are disproportionately impacted by the socio-economic consequences of COVID-19.

As income-generating opportunities disappear and savings dry up, refugees and asylum-seekers are facing increasing difficulties to cover their basic needs and are resorting to negative coping mechanisms. Many who have earned self-reliance over the years, particularly in urban settings, risk losing it; and some are resorting to premature returns.

In **Nigeria**, the socio-economic assessment on the impact of COVID that UNHCR conducted showed that 76% of the refugees and IDPs who worked before the pandemic already earned less than a third of the average income in the country, placing them in a situation of extreme poverty. A dire situation further aggravated by the pandemic during which over 66% of the refugee and IDP households had to reduce their food intake as a coping strategy as their income got reduced. More than two thirds of them reported facing increased prices and food insecurity, and an alarming 13% reported being faced with lack of shelter. Additionally, during COVID almost 84% reported difficulty in accessing vital services (health, water, sanitation, markets, education).

In **Cameroon**, where more than 340,000 are expected to fall back into extreme poverty, a similar assessment of the refugees from CAR was conducted. The assessment found that 68% had monthly earnings below the country's minimum salary before the pandemic. More than 10% have completely lost their pre-pandemic income-generating activity mostly as a result of movement restrictions (38%) and a dwindling of economic opportunities (31%). Like in **Nigeria**, restriction on food consumption has been a coping mechanism for many who lost part of or all their income during the pandemic. Over 30% of households reported that they reduced the number of meals of food quantities compared to before the pandemic. The proportion of households facing severe food insecurity (one meal per day per person) has increased drastically reaching 34% of those surveyed compared to 3% before pandemic.

UNHCR is currently conducting similar assessments in **Niger** and **Chad** to inform its response. The organization is stepping its efforts to mitigate the economic impact of COVID-19 on displaced populations and foster their economic inclusion through livelihoods activities and an enhanced engagement with governments, development and private sector actors.

UNHCR Response

- Ensuring continuity of assistance.** In this extremely difficult regional context, UNHCR operations adapted their processes and approaches to ensure continuity of assistance and to mitigate the impact of the pandemic on forcibly displaced populations, in line with the “stay and deliver” principle. With the reopening of borders and the lifting of restrictions on movements, over 90% of UNHCR staff in the region is now back to their duty station and 10% continue to telecommute.
- Support to governments and directly assistance.** UNHCR continues to support governments in the implementation of their COVID-19 response plans while directly implementing activities to support forcibly displaced populations. These include advocating for preserving access to asylum and international protection, supporting inclusive national health responses, strengthening shelter interventions to improve living conditions in hosting areas, strengthening community-based protection mechanism, livelihoods interventions to mitigate the economic impact of the pandemic, and seeking durable solutions, including local integration, resettlement opportunities, complementary pathways and voluntary repatriation. Already jeopardized by insecurity in the region, education is further disrupted by the pandemic.



Strengthen risk communication and community engagement, and critical protection case management, including protection monitoring and registration

- UNHCR Operations continue to work to mitigate the impact of COVID-19 on persons of concern by increasing communication with communities and introducing innovative approaches to address access limitations including social distancing in protection activities and remote case management.

Key achievements:

- ✓ **3,5 million** displaced persons who had access to protection services
- ✓ **65%** of targeted areas where GBV services are maintained or expanded

HIGHLIGHT: Community engagement and risk communication in Burkina Faso

In **Burkina Faso**, UNHCR has partnered with a local NGO specialized in journalism and the provision of information to populations faced with crisis to produce a short daily COVID-19 news program for IDPs and host populations. As part of this partnership, short daily COVID-19-related news programs in French and local languages were broadcasted to refugees, IDPs and host populations through 37 partner radios across the country. Over 160,000 pandemic related posters have also been distributed. Questionnaires to assess the knowledge of IDPs and host communities on the COVID-19 were completed by 850 families.



Strengthen and support primary and secondary health care and selected WASH services

- UNHCR Operations are sustaining their support to national health systems to strengthen their infection prevention and healthcare responses, including through the provision of medical equipment and supplies and training of health personnel. In camps or settlements this includes identification and training of outbreak response teams, referral systems for laboratory specimens and prepositioning laboratory supplies such as transport media, swabs, specimen containers, training of staff in early identification, notification, case management and contact tracing, data collection and analysis and interpretation. Operations are also reinforcing the WASH systems and services in the main refugee and IDP hosting areas, including by distributing soap and increasing access to water to allow for the implementation of basic preventive hygiene measures such as frequent handwashing.

Key achievements:

- ✓ **445,233** persons received essential healthcare services
- ✓ **3 million** medical masks ordered

Highlight – Border protection monitoring and health screening in Nigeria

In the **Northeast Nigeria**, as cross border movements have continued to take place between **Nigeria, Cameroon, Niger** and **Chad** despite border closures, the absence of dedicated isolation facilities for new arrivals has represented a significant risk of contamination in already fragile communities.

To mitigate this risk and assist the most vulnerable, UNHCR recruited an additional 8 protection monitors and 6 nurses in addition to the 82 protection monitors already in charge of protection, detention, and border monitoring in the Northeast. These additional human and technical resources were dedicated specifically to border monitoring and temperature screening at the border. On duty 6 /7 days a week at the border/ entry points since the beginning of the pandemic, these nurse and monitor teams conducted temperature screening, collected health-related data, and referred suspect cases to the nearest health facilities.

Since April 2020, 4,289 families of 18,350 individuals were screened at the border/entry points in Nigeria. UNHCR also provided 48 Refugees Housing Units, to be used as a Self-Isolation area at the border/entry points, and an additional 250 RHU as shelters for refugee returnees and IDPs newly arrived in Damasak, a Nigeria border town with Niger. A total of 189 sensitization and awareness-raising on COVID-19 were also conducted by UNHCR at the four main border entry points reaching over 4,100 individuals.



Ramp up cash assistance, reinforce shelters, and provide core relief items in congested urban and camps settings

- Shelter remains a priority for UNHCR in West and Central Africa. With ongoing violence and insecurity in several part of the region, especially in the Sahel and the Lake Chad Basin, displacement is constantly on the rise across, and many forced to flee multiple times, living conditions for displaced populations remain precarious. Residing in overcrowded sites, or among host communities in historically underserved areas, refugees and IDPs are often deprived of privacy and exposed to theft and violence. With limited access to water and hygiene facilities, they are at heightened risks of contamination as COVID-19 continues to spread in the region. To address this issue, UNHCR operations are implementing targeted shelter interventions and the distributions of core relief items and exploring ways to decongest the most affected hosting areas in coordination with the national and local authorities.

- UNHCR is also working to mitigate the economic impact of COVID-19 on displaced populations and foster their economic inclusion through direct livelihoods support and through enhanced engagement with governments, development and private sector actors.

Key achievement:

✓ **72,883** individuals in households most vulnerable to/affected by COVID-19 received livelihood support



Support education systems

- **Supporting the progressive reopening of schools across West and Central Africa.** Across the **West and Central Africa** region, UNHCR is supporting the authorities and other UN agencies, such as UNICEF, in their efforts to progressively reopen schools including through the provision of personal protective equipment and by supporting the rehabilitation and cleaning of school environment. Despite these efforts, many children have not been able to go back to school yet and in the countries where students have returned to class, the statistics are already showing the negative effects of COVID-19 on the schooling of refugee children.

Key achievements:

✓ **34,868** children and youth supported with distance/home-based learning

Financial Requirements

US\$745 million requested for UNHCR's COVID-19 response globally.

US\$454.2 million: received by UNHCR against its **global COVID-19 appeal**.

USD US\$34.2 million: received for **COVID-19 activities in West and Central Africa**

Special thanks to the following donors for:

EARMARKED CONTRIBUTIONS TO THE COVID-19 APPEAL | USD

United States of America 186.3 million | **Germany** 62.7 million | **European Union** 46.3 million | **United Kingdom** 25.3 million | **African Development Bank Group** 23.9 million | **Denmark** 14.6 | **UN Foundation** 10 million | **CERF** 6.9 million | **Canada** 6.4 million | **Unilever (UK)** 5.9 million | **Education Cannot Wait** 4.7 million | **Qatar Charity** 3.5 million | **Spain** 3.5 million | **France** 3.4 million | **Ireland** 3.3 million | **Sweden** 3 million | **Sony Corporation** 2.9 million | **Austria** 2.5 million | **Finland** 2.3 million | **UNO – Fluechtlighshilfe** 1.7 million | **Private donors UK** 1.7 million | **Latter Day Saints Charities** 1.6 million | **Norway** 1.5 million | **Australia for UNHCR** 1.4 million | **USA for UNHCR** 1 million | **Espana con Acnur** 0.9 million | **Australia** 0.9 million | **Japan for UNHCR** 0.9 million | **Sawiris Foundation for Social Development** 0.9 million | **Switzerland** 0.8 million | **Country Based Pooled Funds** 0.5 million | **Badr Jafar** 0.5 million | **Private donors Canada** 0.5 million | and other donors

OTHER SOFTLY EARMARKED CONTRIBUTIONS | USD

United States of America 679.8 million | **Canada** 47 million | **Norway** 16.8 million | **Switzerland** 12.8 million | **Sweden** 8.1 million | **France** 7.6 million | **Private donors Australia** 7.1 million | **United Kingdom** 6.9 million | **Denmark** 5 million | **Netherlands** 4.1 million | **Private donors Thailand** 3.5 million | **Republic of Korea** 3.2 million | **Luxembourg** 2.6 million | **Finland** 2.2 million

UNEARMARKED CONTRIBUTIONS | USD

Sweden 76.4 million | **Private donors Spain** 52.9 million | **Norway** 41.4 million | **Netherlands** 36.1 million | **Denmark** 34.6 million | **United Kingdom** 31.7 million | **Private donors Republic of Korea** 27.2 million | **Germany** 25.9 million | **Private donors Japan** 21 million | **Switzerland** 16.4 million | **France** 14 million | **Private donors Italy** 12.4 million | **Italy** 10.6 million | **Private donors Sweden** 10.5 million

Notwithstanding UNHCR's COVID-19 appeal, the continuation of regular programmes in West and Central Africa remains critical. Many of these activities will also help people of concern to cope with COVID-19 and its subsequent protection and economic impact, even if not included in the prioritized appeal.

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