West & Central Africa

01 July 2020

The West and Central Africa region has seen a 40% percent increase in confirmed COVID-19 cases in the past two weeks with a total of 100,549 contamination as of 29 June compared to 71,791 on 15 June 2020.

Despite the restrictive measures taken across the region, limited cross-border movements are continuing through unofficial border entry points or allowed by the authorities based on protection needs.

As restrictions are progressively lifted across the region, UNHCR is collaborating with national authorities to organize the return of refugee and IDP students to school and allow for basic preventive measures.

<table>
<thead>
<tr>
<th>POPULATION OF CONCERN</th>
<th>COVID-19 CASES*</th>
<th>FUNDING REQUIREMENTS</th>
</tr>
</thead>
<tbody>
<tr>
<td>10,000,000 total PoCs</td>
<td>100,549 confirmed cases</td>
<td>for COVID-19 Response Globally</td>
</tr>
<tr>
<td>5,600,000 IDPs</td>
<td>42,331 still active</td>
<td>US$745 MILLION</td>
</tr>
<tr>
<td>1,300,000 Refugees</td>
<td>56,399 recovered</td>
<td>Funding Gap</td>
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<tr>
<td>1,400,000 Returnees</td>
<td>1,819 deaths</td>
<td>68%</td>
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<tr>
<td>1,700,000 Stateless</td>
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<td>Pledged and recorded</td>
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*Source: WHO as of 29 June 2020.

In Abidjan, the World Refugee Day celebration took on a special dimension with the intervention of the young Ivorian graphic designer, O’Plérou Grebet, 22, who presented to the audience the meaning of the new WRD 2020 emoji which he designed and launched in collaboration with UNHCR and Twitter. This emoji, which represents two hands tied together in a heart shape, symbolizes solidarity and diversity. Twitter has activated the emoji globally with the hashtags #RefugeeDay, in 12 languages. © UNHCR Cote d’Ivoire

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Operational Context

- **Continuous increase of confirmed cases.** The West and Central Africa region has seen a 40% percent increase in confirmed COVID-19 cases in the past two weeks with a total of 100,549 contamination as of 29 June compared to 71,791 on 15 June 2020. **Nigeria** (25,133) remains with the highest number of confirmed cases, followed by **Ghana** (17,741), **Cameroon** (12,592) and **Cote d’Ivoire** (9,214). In terms of active cases, **Nigeria** (15,158) has the highest number, followed by **Cote d’Ivoire** (5,152), **Ghana** (4,361) and **Gabon** (2,932). The exact number of cases, however, is very uncertain, particularly given the low levels of testing. Death tolls are also unreliable as they may exclude people who did not die in a hospital, or who died before they could be tested.

- **Confirmed cases among PoCs.** So far, twelve persons of concern to UNHCR have tested positive to COVID-19, including four refugees in **Cameroon**, one in **Ghana** and seven IDPs in **Mali**. Among them two passed away (in Cameroon), two recovered (one in Cameroon and one in Ghana) and the remaining nine cases are still active being assisted by UNHCR.

- **Preventive measure in the region.** Despite this continuous spread, some countries in the region have relaxed restriction measures imposed to curb the spread of virus since March while others maintain or strengthen them. Among the measures taken recently, **CAR** is allowing a gradual reopening of places of worship and the airport. In **Chad**, the authorities have extended the state of emergency until 15 July and maintained the prohibition to entry or exit N’djamena remains except for necessity goods and foodstuff. In **Ghana**, while the authorities are reducing not wearing a face mask in public places has become an offence punishable by heavy fines or even time in prison. In **Guinea-Bissau**, the state of emergency was extended until 25 July and movements of people between regions were banned except for essential goods and humanitarian aid. International flights leaving the country are subject to prior authorization by the Government and flights into the country are allowed only all passengers got a negative test for Covid-19 up to 72 hours before boarding. In **Liberia**, international commercial flights resumed on 28 June 2020 with health checks for all passenger arriving or departing. In **Senegal**, the state of emergency and nighttime curfew imposed to curb the spread of coronavirus will be lifted from today. In **Sierra Leone**, people can now freely move from one district to another without the need for a special pass, as the government gradually relaxes Covid-19 restrictions despite an increasing number of infections.

- **Impact of COVID-19 in West and Central Africa.** The COVID-19 pandemic continues to have a direct and indirect impact on the protection of persons of concern to UNHCR in West and Central Africa. Although the number of COVID-19 cases and fatalities might still appear comparatively low in the region compared to other world regions, the
pandemic Covid-19 is putting significant strain on countries' health-care systems, social fabric, and economies around the world. In West and Central Africa, the pandemic has severely impacted jobs and livelihoods, particularly in the informal sector, aggravating food and nutrition insecurity, further damaging economic performance and jeopardizing the stability of the region. The informal sector dominates the regional economies. Most households are unable to survive without some form of daily trade. A very small minority have bank savings, credit cards, or access to online businesses to allow them to stay indoors for extended periods. There is a persistent need to go out for food, water, or work. Jobs and livelihoods therefore have been threatened by measures of confinement, social distancing, transport and trade restrictions, factory closures as well as market closures, force people to stay at home. The general economic slowdown in the region will soon be aggravated by a reduction in remittances associated with the economic slowdown in the European Union and other Northern economies hosting West and Central African diasporas. Several factors inherent to the region prevent effective implementation of certain preventive measures. 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, and where poor sanitary conditions generally prevail.

- **Protection risks and challenges for forcibly displaced populations.** Forcibly displaced populations are among the most exposed to these practical challenges. Many are living in camps and crowded environments that lack adequate sanitation facilities to prevent contamination from Covid-19. Many have very limited access to healthcare and basic social services, and many do not receive accessible information in order to understand how to protect themselves from infection. Although most of the countries in the region grant forcibly displaced persons the right to access national health services, the areas hosting refugees and internally displaced people, public health services are ill-equipped to deal with the COVID-19 as a result of limited number of trained health personnel, weak case detection management, inadequate treatment units, etc. In the Sahel or the Lake Chad Basin, ongoing armed conflicts have resulted in the closure of hundreds of health centers, and displaced populations are contributing to overstretching the capacity of those that remain open. In addition, the health situation is already fragile, characterized by the persistence of diseases such as malaria, respiratory infections, measles and diarrhea, exacerbated by a precarious security situation. These conditions provide the perfect breeding ground for the virus, adding an additional layer of challenges to those that these populations are already facing. In this context,

- UNHCR has been scaling up its activities to address the key protection risks face by the more the 10 million refugees, IDPs, asylum seekers, returnees, stateless persons in West and Central Africa.
UNHCR Response

UNHCR Operations are taking steps to ensure continuity of assistance and basic protection services despite movement restrictions through teleworking and remote protection and assistance. UNHCR operations are also stepping up their engagement and advocacy with Governments, the UN country teams and other Inter-Agency platforms to contribute to a coordinated response to the COVID-19 crisis and to ensure that persons of concern are included in all relevant response plans.

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

UNHCR Operations are working 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, remote case management via telephone, preventive measure in registration processes, while continuing advocacy to maintain avenues for asylum seekers to access international protection and safeguarding the principle of non-refoulement.

- **Access to territory and asylum.** In line with widespread Government containment measures limiting movement to curb the spread of COVID-19, the facilitated voluntary repatriation of refugees has been suspended throughout the region. This suspension is affecting principally population refugees from Central African Republic, Cote d'Ivoire and Mali. The risk of refoulement linked to border closure is closely monitored by UNHCR and partners. Despite these restrictions, cross-border movements have nevertheless been observed, through unofficial border entry points, or allowed by the authorities based on protection needs, such as the arrival of asylum seekers from Cameroon to Nigeria or from Niger to Mali. Spontaneous returns are also occurring through the few remaining open borders or through informal border crossing points, such as the returns of Malian refugees from Burkina Faso and Niger to Mali or returns from Cameroon to CAR. These returns without assistance and appropriate protection and health control measures may put both the refugees and their communities at risk. UNHCR is engaging with refugee communities in the region to inform them about the context, explain the suspension of the facilitation of voluntary repatriation, seek their patience and discourage spontaneous returns through informal border crossing points without adequate health prevention measures in place.

- **Resettlement and complementary pathways.** All resettlement departures have been suspended globally since 17 March 2020 and while restrictions on movements are progressively being lifted, resettlement departures remain suspended. The most
significant impact of COVID-19 on resettlement and complementary pathways to third countries in the region is the loss of already allocated resettlement slots. To mitigate this impact, UNHCR also engages with resettlement countries to continue the submission and processing of resettlement cases and to assess how resettlement programmes can be adapted to the current context and the new health constraints created by COVID-19. UNHCR operations are also accommodating remote interview procedures to move resettlement processes forward despite the pandemic. In Chad, UNHCR worked with the authorities to organize the transfer from N'Djamena to the regions of Iriba and Farchana in Eastern Chad of 96 refugees whose resettlement movements have been postponed due to the COVID-19 pandemic outbreak. All refugees returned to the camps have been ordered to self-isolate and are monitored at home.

- **Refugee Status Determination and Registration** procedures. As of June 2020, registration of asylum-seekers and process of asylum claims have restarted in most countries of the region, using prevention and control measures. This is a clear improvement compared to April 15, where registration of asylum-seekers had been halted in three countries and restricted to urban or critical cases only in seven countries, and where refugee status determination procedures were still underway in only nine countries and limited to critical cases in two others. Overall, data shows that the numbers of registrations of asylum-seekers and refugees have remained steady in
the region since the start of the year and haven’t been significantly impacted by COVID-19.

- **Statelessness.** General measures enacted by several governments in the region to fight the new pandemic had negatively impacted UNHCR and partners’ capacity to identify and support persons at risk of statelessness, ensure birth registration, birth documentation and issuance of nationality certificates to stateless persons and persons at risk of statelessness.

- **Sexual and gender-based violence (SGBV) & child protection.** In West and Central Africa, displaced women, girls, and LGBTI individuals have always been confronted to a number of challenges, including in terms of access to health services, employment, aid and information, decision-making, bodily autonomy as well as equal participation. These longstanding vulnerabilities are exacerbated by the COVID-19 crisis. Increased gender-based violence has been reported by various grassroots women organizations and human rights defenders. The impact of COVID-19 on children’s rights is multifaceted, with repercussions on education, protection, mental health and psychosocial support, health, nutrition with human rights implications. The significant disruption in the livelihoods of many forcibly displaced population is enhancing the risk of resorting to negative coping mechanisms, including child labour. In Chad, UNHCR most recent monitoring showed that more than 71 per cent of refugee women in Chad identified their husband/partners as perpetrators of physical violence. As of the 13 June 2020, a total 584 cases of SGBV had been registered throughout the operation: 12 sexual assault, 27 forced marriages, 26 rape, 123 denial of resources, 182 psychological violence, 214 physical assault. Despite the challenging working conditions, UNHCR prioritizes assistance to victims of SGBV.

- **Risk communication and community engagement.** Risk communication messages and community engagement approaches have been adapted to social distancing, including through the use of audio and radio content, as well as to the profiles and specific needs of refugees and others of concern, via the development of age and gender-sensitive material which is also culturally appropriate as well as the engagement of youth, women’s groups and traditional religious leaders. Throughout the region, the celebrations and activities organized around World Refugee Day on 20 June provided an opportunity to sensitize displaced and host communities on the continuous risk linked to COVID-19 and to inform them on the basic preventive measures to take to curb the spread of the virus. These celebrations were also used to organized distribution of protective masks, hygiene products and food to persons of concern.

- **In Burkina Faso,** communication with communities is of particular importance for UNHCR. So far, more than 500 members of the community-based protection committees trained on COVID 19 prevention measures, are sensitizing their community members. To date, UNHCR and its partner the Fondation Hirondelle distributed 10
speakers and 136 radios in the Centre Nord as well as 4 speakers and 44 radios in Ouahigouya, in the Nord, and Djibo, in the Sahel. Overall, 700 radios and 44 speakers will be distributed as part of this project to strengthen sensitization and awareness raising on COVID-19 amongst IDPs and host communities.

- **In Mali**, UNHCR is pursuing its sensitization and information effort. In the past two weeks, over 70 refugees and IDPs were reached by UNHCR and its partners in the regions of Timbuktu, Segou, Sio and Mopti.

- **In Nigeria**, UNHCR and its partners continue to conduct awareness and sensitization on COVID-19 and other protection-related issues in refugee, IDP and host communities in Banki, Bama, Damasak, Gwoza, MMC/Jere Area, Monguno and Ngala. The topics included COVID-19 preventive measures, effects of domestic violence, safety and security in the camp, flood safety messages, peaceful coexistence and access to justice.

UNHCR Operations are increasing their direct 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. 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.

- **In Burkina Faso**, UNHCR continues to support regional authorities in their fights against COVID-19 through the provision of medical and sanitary material. Following the completion of the livelihood project on 16 June, which saw the production of 35,000 masks by refugees and host communities, some 30,000 masks were donated to the Governor of Dori on 24 June. These will benefit IDPs living in the Sahel Region. UNHCR also handed over some 73 hand-washing devices, bins and soaps as well as an ambulance to the Governor of the Nord Region. These will benefit IDP, asylum-seekers, returnees and host families in Ouahigouya. The donation is part of the USD 1.22 million of in-kind assistance provided so far by UNHCR to regional authorities as part of its COVID-19 response.

- **In CAR**, UNHCR has also installed two RHUs at the main entrance of the Bouar-Baoro health district hospital to facilitate the triage of patients and the sampling of suspected COVID-19 cases. In the Ouaka prefecture, hand-washing kits were distributed by UNHCR in the Ngaoumba and Pladama areas. In Obo, over 2,000 refugees benefited from soap distribution, all within the framework of prevention against covid-19. UNHCR
also installed 20 handwashing devices and 8 soap dispensers in various schools and high schools in Baga-sola in the Lake Chad province in the North West region of Chad.

- In **Chad**, UNHCR built a quarantine center in Kariari and health care center in Amdjarass in Eastern Chad. UNHCR also completed the construction of quarantine and isolation centers in Dosseye (60 bed), Bekan (10 places) and Gore District Hospital (10 beds) in the Gore region in South Chad. In Moissola, the Gore region, UNHCR provided trainings on prevention, epidemiological monitoring and COVID case management to 19 security agents (camp leaders, government security agents) and 24 nurses from Moissala Hospital and Moissala Health Centers. This will help COVID monitoring at the entry points of sites and the villages of Moissala and the investigation and medical management of COVID-19 cases in the area.

![Image of handwashing in Chad](image)

*The distribution of 135 hand washing stations to the local education authorities of Mali’s Gao region has been completed. Around 13,500 boys & girls, in the region, will be able to learn in a more protective environment. © UNHCR Mali*

- In **Nigeria**, UNHCR built eighty concrete latrine slabs, sixty-two bathing shelters, fourteen new latrines, and cladding of seventeen-bathroom superstructures were completed in the Adagom 3 and Ikyogen settlements in the Southeast on the border with Cameroon. The construction of forty-two additional slabs for installation of latrines at the quarantine centre and of new emergency shelters is ongoing in Adagom 3 settlement. At least 859 refugees from Adagom 3 settlement and 510 individuals from Ikyogen benefitted from the distribution of latrine cleaning tools, to promote environmental sanitation. Items distributed included toilet brush, broom, disinfectants, detergents, and replacement of broken hand washing buckets. A boost in water supply
was experienced at the Ikyogen settlement, following the completion of an additional 10m3 capacity water collection point at the quarantine centre for new arrivals.

In **Niger**, UNHCR completed the construction of the Isolation Centre in Tahoua. Inaugurated by Authorities last 25 of June 2020, the centre is fully operational and can accommodate up to 50 COVID-19 patients.

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

In many parts of the region, refugees and IDPs are residing in heavily overcrowded camps and sites exposing them to heightened risks of contamination as COVID-19 cases may soon affect most of the most of major hosting areas. To address this issue, UNHCR Operations are implementing targeted shelter interventions and distributing core relief items while decongesting the most overcrowded sites to allow for the implementation of the most basic prevention measures. UNHCR Operations is also increasing their focus on strengthening community-based protection mechanism and enhancing the capacity and self-reliance of refugee and IDP communities including through the ramping up of cash assistance.

**Challenges and risks related to the rainy season.** In most countries of the region, the rainy season will increase the impracticality of roads, reduce movement and access to persons of concern, affect and degrade weak infrastructures and make transportation of goods by trucks more challenging and expensive. Shelter needs will increase and UNHCR’s intervention will be crucial during this period to ensure adequate the rehabilitation of dwellings and allow for more distancing and isolation in case of COVID infection. With the rainy season starting in the region, UNHCR operations are strengthening their preparedness and emergency response mechanisms to mitigate the potential impact of floods in high risk hosting areas.

In **Burkina Faso**, the COVID-19 pandemic deepened already existing vulnerabilities amongst certain groups of IDP women, increasing the risk of them turning to negative coping mechanisms. In Kaya, on June 19, 52 IDP widows benefited from NFI kit consisting of mats and blankets and also received 30,000 FCFA in cash. As part of UNHCR’s effort to strengthen the resilience and self-reliance of displaced communities and to include them in the fight against COVID-19, a four-day training took place in Dori, during which 10 refugee women were retrained by Agence Nationale pour l’Emploi (ANPE) in partnership with Vétérinaires Sans Frontières, a UNHCR Partner, to produce solid and liquid soap which will undergo national certification to ensure quality standards. This project will improve IDPs, refugees and host community’s access to soap and strengthen the respect of preventive measures against the virus.
To address the growing risk of floods with the beginning of the rainy season, UNHCR is also reinforcing dwellings in flood prone hosting areas.

- In CAR, UNHCR distributed NFI kits to over 16,500 IDPs in the region Ndele and to 359 of the most vulnerable IDP households in the Ouaka prefecture on 22 June 2020.

- In Côte d’Ivoire, UNHCR launched a Cash/COVID distribution for a period of three months on 16 June in an effort to address the socio-economic impact of the pandemic on refugees and asylum-seekers. A total of 1,042 households of refugees and asylum seekers in Greater Abidjan and the interior of the country (Guiglo, Danané, Tabou, San Pedro, Yamoussoukro, Bouaké, Korhogo, Agboville, Aboisso and Bouna) were reached and received cash grants in addition to food supply (rice, oil, pasta), protective kits (bleach, soap, water tank, etc.) as well as dignity kits for women and girls of childbearing age.

- In Liberia, as of the end of June 2020, UNHCR has distributed hygiene items (hand sanitizers, buckets, jerry cans and soap) to 10,000 persons in refugee settlements and refugees hosting communities in 5 counties (Nimba, Grand Gedeh, River Gee, Maryland and Montserrado). To compensate the negative economic impact of the pandemic, UNHCR also continues its livelihoods activities with over 200 refugees provided with seeds and tools and over 60 having received animal husbandry so far.
In **Nigeria**, UNHCR distributed food and non-food items including (rice, salt, sugar, pots, mosquito nets, buckets, jerry cans, mats, touch lights, blankets and soap) to over 680 vulnerable Cameroonian refugees in the Ikyogen settlement in Southeast Nigeria.

In **Senegal**, UNHCR distributed health kits composed of washable masks, 3,482 packs of soaps, hydroalcoholic gels to some 4,000 families representing over 16,000 refugees and asylum seekers, in addition to the food kits distributed to 500 vulnerable refugees and asylum-seekers families.

Support education systems

To ensure the continuity of learning in a protective environment and to prepare for the safe reopening of schools, UNHCR is working with Ministries of Education and education partners to support students access to distance education programmes, enhance health training for teachers, support community awareness-raising activities on COVID-19 while upgrading water and sanitation facilities in schools.

With students progressively allowed back to school in some countries of the region, UNHCR has initiated the disinfection of refugee education facilities in the region and installed hand washing basins to prevent measures against a potential outbreak of COVID-19. UNHCR is also organizing sensitization session with parents to remind them of the important to apply social distancing at school.

In **Mali**, as part of the Education Cannot Wait project, UNHCR conducted a distribution of 135 handwashing kits, as well as 45 boxes of soap for 45 schools in the Gao area. This contribution aims to support schools in preventing the COVID-19 pandemic, as children are back to school and are preparing for a second cycle of basic education exams.

Financial Requirements

**US$745 million** requested for UNHCR’s COVID-19 response globally through December 2020. Total funding received by UNHCR against its COVID-19 appeal: **US$237.5 million**. The following donors have provided earmarked contributions for the Coronavirus Emergency Situation in **West and Central Africa**:
Special thanks to the following donors providing:

**EARMARKED CONTRIBUTIONS TO THE COVID-19 APPEAL** | USD
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United States of America 64 million | Germany 38 million | European Union 32.8 million | United Kingdom 24.8 million | Japan 23.9 million | UN Foundation 10 million | Denmark 14.6 million | CERF 6.9 million | Canada 6.4 million | Private Donors 6.3 million | Ireland 3.3 million | Sony Corporation 3 million | Sweden 3 million | Finland 2.4 million | Education Cannot Wait 1.8 million | Norway 1.5 million | Qatar Charity 1.5 million | Australia 0.8 million | Italy 0.5 million | Badr Jafar 0.5 million | UN COVID-19 MDFT 0.4 million | Ahmed Abdelkodous Ehsan 0.4 million | Monaco 0.2 million | Jersey 0.2 million | Estonia 0.1 million | Iceland 0.1 million | Liechtenstein 0.1 million | Portugal 0.1 million | UPS 0.1 million | Unilever 0.1 million | WFP 0.1 million | Russian Federation 0.1 million | Slovakia 0.05 million | Spain 0.03

**OTHER SOFTLY EARMARKED CONTRIBUTIONS** | USD
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United States of America 210.1 million | Canada 45.2 million | Japan 18.5 million | Norway 16.8 million | Switzerland 12.8 million | Sweden 7.3 million | United Kingdom 7.1 million | Denmark 5 million | Netherlands 4.1 million | Republic of Korea 3.2 million | Private donors Australia 3 million | Luxembourg 2.7 million | Finland 2.2 million

**UNEARMARKED CONTRIBUTIONS** | USD
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Sweden 76.4 million | Norway 41.4 million | Netherlands 36.1 million | Denmark 34.6 million | United Kingdom 31.7 million | Private donors Spain 26.6 million | Germany 25.9 million | Switzerland 16.4 million | Private donors Republic of Korea 13.9 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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