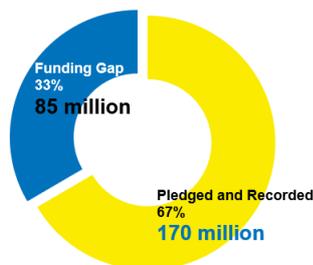


Highlights

FUNDING (AS OF 8 APRIL)

USD 255 million requested for the Coronavirus Emergency Situation



49

countries and one territory in Europe have COVID-19 cases (all countries in the region)

24

out of 34 UNHCR Offices are fully teleworking

11.4 million

2020 planning figure for persons of concern in Europe

UNHCR COVID-19 Preparedness and Response

Context

- The region is home to over 11.4 million persons of concern, including 7 million refugees, 2.5 million internally displaced persons (IDPs) and over 1.3 million asylum-seekers and returnees. There are some 490,000 stateless persons, many of whom are refugees or IDPs.
- Given the magnitude of the COVID-19 pandemic worldwide, UNHCR declared, on 25 March, a Global Level 2 Emergency for a duration of three months. The emergency activation provides operations with the necessary flexibility to continue delivering assistance to persons of concern.
- Across the region, most countries have taken specific border management measures to prevent the further spread of COVID-19 in form of restrictive border measures, such as temporary entry bans (for some or all non-nationals or from specific destinations) or actual border closures. Nevertheless, 50 per cent of states with partially or totally closed borders continue to exempt persons seeking international protection from restrictive measures, either by law or practice.
- Operations are focusing their activities on providing support to the efforts led by national authorities across the region, maintaining delivery of regular programmes to provide critical protection assistance to persons of concern and ensuring their inclusion in national COVID-19 preparedness and response plans.
- Efforts are being strengthened towards the COVID-19 preparedness and response, in particular in the following operations: Greece (the largest operation in the region), Ukraine, South Eastern Europe (Albania, Bosnia and Herzegovina, Kosovo, North Macedonia, Montenegro, and Serbia), Italy and Spain, while also closely monitoring the situation in Cyprus and Malta.

Overview

- All 49 countries and one territory in the region have reported COVID-19 cases, so far ten countries have reported cases among persons of concern, however any figure or estimate at this point would not be accurate or reflect the reality due to differing approaches of testing, data segregation and reporting.
- Access to territory, including through resettlement, is widely affected by border closures, travel restrictions and entry bans across the region. A few States have adopted preventive measures like health screenings and 14-day quarantines in order to preserve a level of access to territory for people seeking international protection. However, over 20 countries (half of those with partially or totally closed borders) in the region provide for exceptions for persons seeking international protection, either by law or practice. Countries that have not adopted specific restrictions have their access to territory impacted by measures taken by neighbouring countries. Movement in and out of reception, detention and transit centres has also been restricted in many countries. Where countries already had movement restrictions in place for asylum-seekers and migrants before the COVID-19 crisis, measures have been reinforced since the outbreak of the pandemic.

- Some countries have temporarily suspended registration for new arrivals. The inability to register an asylum claim results in a lack of access to safe reception conditions, including accommodation and health care. Where reception conditions gave reasons for concern prior to the COVID-19 pandemic, the present situation compounds health risks, notably in overcrowded centres and shelter. The situation is particularly worrisome in Cyprus, where authorities have transferred asylum-seekers from hotels to the first reception centre (to a tented area with no electricity and sanitation facility). Many of the transferred show psychological or health conditions.
- In the region, where national health systems are generally the primary responders to the medical needs of persons of concern, the virus spread has been stretching the capacities of most of these systems for all populations. Additional concerns have been raised about the lack of health services for undocumented persons and persons staying irregularly. Stateless persons and other vulnerable groups are also believed to be less likely to receive health services in case of COVID-19 symptoms. Where detention is practiced, access to health services is challenging, and hygiene and sanitary facilities are below standard.

UNHCR Response

UNHCR's response to the COVID-19 situation is focusing on:

- Supporting national authorities to set up **preparedness and response plans**, including improving access to water/sanitation where it is possible and by establishing quarantine and self-isolation areas in reception centres to better monitor and isolate, as necessary, COVID-19 confirmed or suspected cases;
- Strengthening national and community-based **communication platforms** to interact with refugees and displaced communities and transmit quality information on hygiene, access to health care and other essential measures in a culturally appropriate manner and in relevant languages;
- In some operations, supporting national authorities in identifying alternative **accommodation** or bringing current accommodation for asylum-seekers up to minimum protection and hygienic standards;
- **Ensuring the inclusion** of persons of concern, host communities and service providers in the provision and distribution of adequate hygienic items;
- **Continuous advocacy** to ensure the inclusion of persons of concern in national COVID-19 preparedness and response plans.
- **Additional one-off cash distributions** to existing registered PoC to allow refugees and asylum seekers to cope with the adverse economic impact of the COVID-19 on their livelihoods and self-reliance.

Progress to date and impact

- Likewise, measures affecting the host populations, UNHCR's access to persons of concern is limited in countries with generalized restrictions of movement and lack of availability of PPEs. This also impacts the work of partners who face the same constraints. Access to informal settlements, is still curtailed. Access to detention and reception facilities is also limited. Therefore, communication with communities has been enhanced through UNHCR's networks, for example in Armenia, Greece,

Italy, and Turkey. Legal services are offered by partners in most operations through phone hotlines, while social media and other digital platforms are also being used where connectivity permits.

- The COVID-19 pandemic has made it more challenging for many countries to receive asylum-seekers and assess their claims for protection. A few countries have taken mitigating measures to prevent the full suspension of asylum procedures, registration and documentation. Some offer remote interview modalities by video conference. In other countries, asylum-seekers have the possibility to submit online applications for asylum, appeals and/or documentation, such as in Azerbaijan, Malta and Ukraine. However, not all persons of concern have access to the internet and the necessary equipment.
- Across the region, UNHCR has enhanced **communication with communities** using a variety of channels and collaborating with partners and authorities to amplify the outreach. In reception and detention centres to which UNHCR and partners no longer have access, remote monitoring and means of communication have been scaled up, including through hotlines, social media and other digital platforms. Legal services are telephonically offered by partners in most operations.
- Good practices are also emerging: a number of countries have adopted (or publicized existing) measures to train or allow qualified refugees to perform certain public health functions, such as in Denmark, France, Germany, Ireland, Spain and the UK. In Portugal, all migrants and asylum-seekers, will be treated as permanent residents from Monday until at least July 1 to ensure access to services during the COVID-19 outbreak.

Highlights by country

- In **Austria**, an innovative app from Uugot.it has been developed in order to enable refugees and asylum seekers to access real-time and updated news from the authorities and translates TV content through sub-titles in different languages, allowing for non-German speakers to follow Austrian TV. The app is supported by the Austrian Government.
- In **France**, information sharing on COVID-19 has also been strengthened through the platform [réfugiés.info](http://refugiés.info), managed by the inter-ministerial delegation in charge of reception and integration of refugees (Diair) in partnership with UNHCR and a network of NGOs. Ongoing work also includes virtual activities to maintain social ties during the COVID-19 crisis, including with NGOs in reception centres.
- **Greece** is the largest operation in the region, hosting more than 115,000 refugees and migrants, of whom 40,000 are living on the islands.
- On the Aegean islands, about 40,000 refugees are hosted in overcrowded centres and informal sites, under heightened risk of an outbreak. Whereas two sites on the mainland have confirmed cases, no asylum-seeker on the islands has tested positive so far. Coordination with authorities and other stakeholders to take prevention action and plan a response. Near most reception centres, some screening/isolation/quarantine spaces have been identified and/or set up. Core relief and hygiene items are also being provided, strengthening water and sanitation activities and supporting the medical response. A last shipment of containers to serve as quarantine spaces in Kos and Leros is being prepared.
- The operation is working on transferring 1,600 elderly and immunocompromised persons and their families to mainland accommodations, with the support of the European Commission. Forms of cash-based interventions without physical certification requirements are under discussion, to facilitate continued support to the most vulnerable while maintaining social/physical distance.

- In **Italy**, as part of UNHCR's Risk Communication and Community Engagement, a multi-lingual information portal ([JUMA](#)) has been set up, for refugees and asylum-seekers to access information on COVID-19 in 15 different languages, as well as health advisories, regulations and movement restrictions, administrative procedures and available services; it was developed and is hosted by the Italian Ministry of Health and other national authorities. UNHCR and INTERSOS have also launched a [digital capacity building platform for refugee-led organizations](#), planned before the COVID-19 situation, for refugee-led organizations to access trainings and enhance community reach-out.
- In **Turkey**, communication with communities is a priority. To support efforts to ensure that important information reaches refugees and asylum-seekers in Turkey, UNHCR shares information, including COVID-19 related information, using WHO and Ministry of Health advice, in their languages, on its communication platforms. UNHCR is working to support its government partner (DGMM) in the identification and modalities to provide temporary assistance to particularly vulnerable persons of concern, impacted by the COVID-19 crisis.
- In **Ukraine**, movement restrictions across the contact line have reportedly caused protection risks for IDPs in Ukraine by, for example, impacting access to pensions, documentation and humanitarian aid. Risks are further compounded by the fact that 41 percent of the population in those areas are elderly, and access to clean water and health services has been compromised by the conflict. UNHCR's partner Proliska has developed a [community-level protection monitoring tool](#) to assess the impact of COVID-19 in villages along the contact line in the government-controlled area to inform measures for prevention and response. Due to the restrictions, humanitarian organizations have also faced challenges in delivering aid to affected populations and providing the necessary gear and resources for staff. On 3 April, UNHCR and OCHA facilitated the logistics and negotiation of a humanitarian convoy that crossed the contact line for the first time since the de facto authorities suspended access on 21 March. The convoy delivered medical and hygiene items for several aid organizations that will be distributed in Donetsk NGCA.

Coordination and partnerships

- UNHCR supports governments' efforts to respond to the COVID-19 pandemic through existing coordination mechanisms. The Office works very closely with WHO and other partners. WHO has set up a regional coordination / information-sharing mechanism dedicated to UN response to COVID-19. In addition, existing for a are being used, such as the Issue-Based Coalition on Large Movement of People, Displacement and Resilience, to develop and advance collective advocacy on COVID-19-related issues affecting persons of concern.
- In Greece, the operation is supporting the Government's efforts by enhancing coordination mechanisms in response to the COVID-19 situation, with a particular focus on the islands, regarding health, clean water and sanitation as well as Communication with Communities.
- In Ukraine, where the humanitarian programme cycle is implemented, the UN Resident Coordinator/Humanitarian Coordinator and the Humanitarian Country Team lead the response, with WHO providing lead expertise on public health issues in consultation with authorities.
- Country programme criticality plans are being reviewed to ensure continued capacity to deliver, together with partners, protection and assistance for people of concern. Where possible, activities will be jointly reprioritized with partners in light of the changing circumstances.

Workforce and capacities

- Non-essential activities have been suspended across the region and operations have developed their own Business Continuity Plans (BCPs). The BCPs focus both on alternative working arrangements and alternative ways to carry out operational activities and deliver to persons of concern. All activities have been reviewed and prioritized, resulting in the suspension of some actions. Currently, 24 out of 34 UNHCR offices in Europe are fully teleworking. All other offices have most staff teleworking, with only skeleton staff allowed to access office premises.

Financial Information

- On 25 March, the UN Secretary General launched the COVID-19 Global Humanitarian Response Plan (GHRP), initially covering a period of nine months. UNHCR seeks USD 255 million to globally boost preparedness, prevention and response activities to address the immediate public health needs of refugees and host communities prompted by the spread of COVID-19. The amount presented in the appeal does not represent the magnitude of UNHCR's engagement to support governments' efforts in responding to the COVID-19 pandemic. This is a fast-moving situation and UNHCR is looking further at reprioritizing certain activities in operations. The full amount of UNHCR's operational engagement will be updated as required, including for Europe.
- UNHCR Regional Bureau for Europe is grateful to donors who have provided generous and timely support to the Coronavirus Emergency Situation globally and to Europe in particular, including for non-COVID-19 related interventions, which are critical to ensure business continuity.

Links

[UNHCR operations overview in Europe](#)

[COVID-19: UNHCR's response](#)

[Coronavirus emergency appeal – UNHCR's preparedness and response plan](#) (revised 27 March 2020):

Contacts:

Nicolas Brass, Senior External Engagement Coordinator, UNHCR Regional Bureau for Europe,
brass@unhcr.org

Delphine Crespin, Donor Relations Officer, UNHCR Regional Bureau for Europe,
crespin@unhcr.org