COVID-19 Emergency Response Update #6
27 May 2020

Algeria, Bahrain, Egypt, Iraq, Israel, Jordan, Kuwait, Lebanon, Libya, Mauritania, Morocco, Oman, Qatar, Saudi Arabia, Syria, Tunisia, United Arab Emirates, Western Sahara, Yemen, and Turkey

Key Figures

- 20 out of 20 UNHCR countries / operations are reporting COVID-19 cases in the region
- 16 million 2020 planning figure for people of concern in the Middle East and North Africa
- 8 COVID-19 cases reported among POCs in MENA

Regional Developments

Operational Context

In Mauritania, the number of confirmed cases increased rapidly in May, and as of 25 May there are 238 confirmed active cases (262 cumulative cases, out of which 15 have recovered, and nine have died) as of 17 May. In Iraq, the rate of infections continued to increase last week, with over 4,600 confirmed cases across Iraq, as well as 163 fatalities, most of which are in Baghdad, Basrah, and Kerbala. In Kuwait, the extension of full lockdown implemented as of 10 May - implemented in an attempt to curb the rate of people being newly infected by the coronavirus - will end on 30 May. Similarly, a spike in new cases in Lebanon prompted the Government to institute a four-day full lockdown from 13 May. Since then, the Government has resumed its five-stage deconfinement plan to gradually reopen the economy.

YEMEN

A sharp increase in the number of confirmed COVID-19 cases has been seen in Yemen, rising by over 325 per cent between the period of 10-16 May. Cases have been confirmed in ten of Yemen’s 21 Governorates. As the humanitarian community attempts to scale up its COVID-19 response, critical funding shortfalls are considerably slowing down efforts. UNHCR, among other Agencies, has started to reduce its regular programmes due to uncertain funding prospects.

As part of the COVID-19 response, UNHCR has:

- Distributed close to 16,500 tents, blankets, mattresses and kitchen sets to support quarantine centres in the north of Yemen.
- Conducted awareness-raising that has reached close to 6,000 people since March, in Sa’ada, Al Jawf and Ibb Governorates in northern Yemen.
- Reached 1,878 refugees and host community members via house-to-house community awareness visits in the south (Aden, Al Mukalla, Lahj) in mid-May.
- Locally purchased 24,000 personal protective equipment (PPE). The PPE will be distributed to frontline partner staff in the north and will help ensure uninterrupted delivery of assistance and protection services.
- Worked with WASH partners, as lead of the Camp Coordination and Camp Management (CCCM) Cluster, to coordinate the response for the 600 most-at-risk IDP hosting sites. CCCM partners continue working with IDP committees on identifying and referring suspected cases to the COVID-19 Rapid Response Teams, setting up community isolation spaces as required. Installation and community management of handwashing stations are also underway.

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1 UNHCR Turkey reports to the UNHCR Europe Bureau, although operations in Turkey related to the Syria & Iraq Situations are included in the MENA update
2 Iraq, Lebanon, Yemen and Israel
Main Lines of Response

Continuing, adapting and delivering protection and assistance to the most vulnerable

Strengthening communication with communities

Prioritizing immediate interventions to prevent infections and supporting access to services and materials

Advocating for the inclusion of refugees, IDPs and other marginalized groups into national public health and other responses, and supporting national systems to deliver assistance

Empowering individuals and families to make the best decisions for themselves, through cash-based assistance

Highlights from the Field

As the COVID-19 situation continues in Egypt, the psychological condition of refugees is deteriorating and a rise in anxiety and depression have been observed, particularly in light of challenging socio-economic conditions. Community leaders and volunteers have been actively trying to respond to the evolving situation, but many noted that they are not trained in psychological first aid and psychosocial support to address developing needs. To strengthen community responses from the grassroots level, UNHCR Egypt organized an online “Psychological First Aid” for volunteers and community leaders, the main objective of which was to prepare them in delivery of care and non-specialized psychological first aid support.

As part of the wider efforts to assess the impacts of COVID-19 on the refugee population in Iraq, a Multi-Sector Needs Assessment will be carried out in 2020, incorporating COVID-19 relevant indicators. In addition, UNHCR partner REACH will be conducting a qualitative study of the impact of COVID-19 on the refugee population to support the 3RP refugee response.

During cash distributions in Bardarash Camp, Iraq, UNHCR implements social distancing and hygiene measures to prevent the spread of COVID-19. Photo by UNHCR / Rosheed Hussein Rasheed
In order to assist persons of concern during this pandemic, UNHCR and its partners are providing financial and other assistance to alleviate economic distress faced by refugees and asylum-seekers in Israel. Last week, the implementation of cash-based assistance started for over 230 households and among whom there are 337 children. These households have been identified through a network of NGO partners working with UNHCR as well as the asylum-seeker community itself, and are the most vulnerable among UNHCR’s people of concern, including women engaged in survival sex, victims of domestic violence and victims of torture and human trafficking. The cash assistance will be complemented with regular psycho-social counselling and the appropriate follow-ups.

Refugees with disabilities have faced additional challenges during the lockdown period in Jordan, limiting the provision of face to face services and increasing their isolation. Targeting around 150 cases per week, UNHCR has started online assistance for those in elderly shelters, including online group physiotherapy sessions, parent/child special education sessions, as well as individual counselling.

Community Health Volunteers (CHVs) in Lebanon and dedicated community groups in informal settlements have been mobilized to play a key role in capacitating and empowering refugees to prevent infection and transmission within their families and the community. Some 58 CHVs and 1,229 site community groups are already in place. A surveillance tool with user guides for CHVs, has also been developed to observe behaviour and compliance of refugees to safety measures like social distancing, and will also be used to assess why refugees cannot comply.

In an effort to improve communication and contact with networks of refugee representatives in Tripoli, Libya, virtual meetings with community representatives using web technologies have been organized around specific themes. Last week, community representatives were briefed on the current situation in terms of resettlement, humanitarian evacuations and pathways to solutions and how the COVID pandemic has impacted on these important avenues for solutions. Further virtual meetings are planned, related to civil status documentation, labour and housing, land and property rights-related issues.

To ensure ease of access of women to UNHCR support and assistance, a hotline, specifically dedicated to women is currently being established in Morocco. This is particularly important given the heightened risk of sexual and gender-based violence that women have been facing during lockdown measures and confinement.

In Syria, UNHCR continues to support 14 Primary Health Centres (PHCs) across the country which provide basic care, critical health information and referrals to refugees, vulnerable IDPs and returnees. During March more than 29,000 IDPs and some 1,400 refugees and asylum-seekers were assisted to access the basic package of primary health care services through these UNHCR supported PHCs.

In support of Tunisia’s national health response plan for COVID-19, UNHCR donated and installed four shelter units (Refugee Housing Units 3) in four hospitals in Medenine Governorate to facilitate screening of visitors before entering the hospital. Since mid-April, UNHCR Tunisia has also distributed over 1,300 hygiene kits, including gloves and masks, to refugees and asylum-seekers living in shelters and urban areas of Sfax, Medenine, Zarzis, Ben Guerdane, Tataouine. During the distribution, awareness sessions on preventive hygiene measures to adopt were conducted and a psychologist from partner CTR was also present to provide counselling.

In Turkey, UNHCR’s livelihoods partners continue to transform their vocational and language courses to online platforms, and in some instances internet data packages have been provided to beneficiaries to mitigate the financial barriers of following distance learning programmes. The Gaziantep Chamber of Commerce will also start to conduct Turkish language courses online in July. Meanwhile, UNHCR is seeking collaboration with a number of entities to generate a new curriculum and online platform for livelihoods courses; an important step in developing the necessary skills to access the labour market.

In the United Arab Emirates, following coordination between UNHCR, Syrian community groups and the Dubai Charity Association, nearly 600 vulnerable Syrian refugee families comprised of over 3,400 household members, will be included in the “10 million Ramadan Meals” government initiative to receive food parcels from Dubai Charity Association. Syrian community members currently engaged in this initiative have started transporting the food items for direct distribution within the community, with further families being identified to benefit from this initiative.

3 Refugee Housing Units (RHUs) are an innovative shelter solution resulting from a collaborative research and development project undertaken by Better Shelter and UNHCR, with the support of the IKEA Foundation. RHUs are comprised of a lightweight steel frame, a roof, wall panels, door and windows, floor covering, a solar energy unit, and an innovative anchoring system.
Turkey Cross-border Operations

The Shelter/NFI Cluster is continuously coordinating with the Health and WASH Clusters to respond to the needs of the IDP population in the context of the COVID-19 pandemic. Hygiene measures, in line with recommended WASH practices specific for COVID-19, are promoted during assistance distributions to reduce the risk of transmission. The Shelter/NFI Cluster recommended providing hygiene kits together with NFI kits and suggested adding soap. In addition, the Shelter/NFI Cluster supported the release of tents from the contingency stock to be used as isolation units. Another 300 tents have been installed in various locations in Aleppo and Idleb to be used as triage stations in health facilities.

Global Financial Requirements

The United Nations launched an updated Global Humanitarian Response Plan on 7 May 2020, expanding the global plan to fight COVID-19 in fragile countries and increasing funding requirements from USD 2 billion to USD 6.7 billion.

UNHCR’s revised prioritized requirements to support the COVID-19 preparedness and response in situation of forced displacement, including those for UNHCR MENA, has increased from USD 255 million to USD 745 million.

UNHCR is grateful to donors who have provided generous and timely support to the Coronavirus Emergency globally and to MENA. So far, a total of USD 235 million (32 per cent) has been contributed or pledged to the UNHCR Global Appeal out of USD 745 million required.

Total contributed or pledged for UNHCR’s COVID-19 response globally:

United States 64M | Germany 38M | European Union 31.8M | United Kingdom 24.8M | Japan 23.9M | Denmark 14.6M | CERF 6.9M | Canada 6.4M | Ireland 3.3M | Private donors 3.1M | Sweden 3M | Sony Corporation 3M | Finland 2.4M | Education Cannot Wait 1.8M | Qatar Charity 1.5M | Norway 1.4M | USA for UNHCR 1M

Unearmarked contributions to UNHCR’s 2020 programme:

Sweden 76.4M | Norway 41.4M | Netherlands 36.1M | Denmark 34.6M | United Kingdom 31.7M | España con Acnur 26.6M | Germany 25.9M | Switzerland 16.4M | Private donors in Republic of Korea 13.9M

Contributed without restrictions on its use, unearmarked funding allows UNHCR critical flexibility in how best to reach refugees and other populations of concern who are in the greatest need and at the greatest risk.
Lebanon - “Without this money, we would be forced to beg in the streets.” Syrian refugee Khaled shows the ATM card on which cash assistance is uploaded every month by UNHCR. Khaled and his family fled Homs, Syria, in 2012 and found refuge in North Lebanon’s Akkar region. The assistance they receive helps buy medicine, pay rent and pay off debts, particularly given the socio-economic impacts felt as a result of COVID-19.

Photo by UNHCR / Martin Dudek

Jordan - Supporting refugees with disabilities during the COVID-19 emergency. Fifteen-year-old Syrian refugee, Wissam, has cerebral palsy and relies on specialist support provided by UNHCR and partners at his home in Amman, Jordan.

Photo by UNHCR / Lilly Carlisle

Resources:
- UNHCR’s Coronavirus Emergency Appeal (Revision)
- UNHCR’s COVID-19 Appeal – Key facts and figures (Revision)
- UNHCR’s COVID-19 Appeal – Operational Highlights
- For MENA regional and country reports on COVID-19 response, please visit – UNHCR Global Focus; UNHCR Operational Portal (Syria Regional Refugee Response); and Regional Refugee and Resilience Plan website

For more details, please contact UNHCR MENA Regional Office in Amman (Jordan) at: MENAreporting@unhcr.org