

COVID-19 EXTERNAL UPDATE #19

East and Horn of Africa, and the Great Lakes Region

3 - 16 September 2020



₹ 8.1 MILLION
INTERNALLY DISPLACED PERSONS



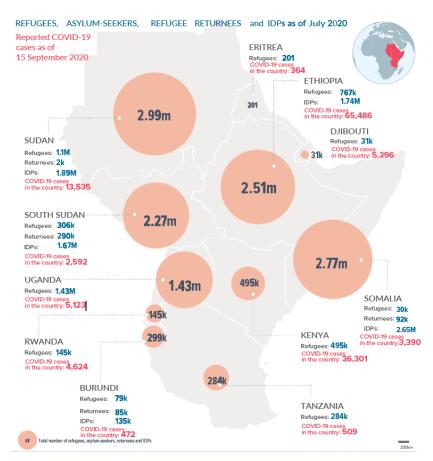
137,792 CONFIRMED COVID-19 CASES IN HOSTING COUNTRIES

Operational Context

The COVID-19 situation in the East and Horn of Africa, and the Great Lakes (EHAGL) region has entered its seventh month since the first cases were reported in March 2020. As the situation continues to evolve, the region is still relatively less impacted than the rest of the continent. As of 15 September, there were 137,792 confirmed COVID-19 cases in the 11 countries overseen by the EHAGL Bureau. Of the reported figures this past two weeks, the EHAGL region reported 10% of the total COVID-19 cases in Africa. Total tests reported as at 21% of the total test figures. Since the first confirmed COVID-19 related death on 21 March, there are now 2, 815 reported deaths in the region (equivalent to 9% of the death cases on the continent) of which 89% are in three countries – Ethiopia, Kenya and Sudan.

While so far there has been no large-scale outbreak in the approximately 100 refugee camps and settlements in the region, 4.6 million refugees and their host communities are at risk, as are some 8.1 million IDPs. The need for preparedness remains urgent as cases are still rising in all countries of the region and a few locations still lack adequate guarantine, testing and isolation/treatment facilities.

Governments have put in place various measures to contain the spread of the virus and are periodically announcing changes to movement and other restrictions, and gradually lifting preventive measures initially adopted. In **Rwanda**, the Ministry of Health has announced the initiation of home-based case strategy for asymptomatic, mild and moderate COVID-19 cases. UNHCR and partners are engaging with refugee hosting districts on the implementation of the new approach in the refugee camps. In **Somalia**, the lockdown imposed at the Aden Adde International airport (AAIA) to minimize the spread of COVID-19 is extended to 19 September.



Key Measures Taken

- Supporting national authorities in ensuring that prevention, preparedness and response are ongoing in all locations.
- Ensuring basic assistance and minimum standards during quarantine for new asylum seekers and refugees who have travelled internally within host countries.
- Procurement and distribution of PPE, health and sanitation equipment and supplies is ongoing.

*COVID-19 Case information: WHO, Johns Hopkins University, Ministries of Health, Governments. Note: COVD-19 cases refer to total cases reported in the countries of asylum. IDP figures source: IOM, OCHA and UNHCR.



UNHCR Response

Protection

UNHCR continues to assess the impact of border closures and travel restrictions on access to asylum. Movements continue through unofficial border crossing points where screening and provision of information is not in place. Across the region, UNHCR has appealed for special measures to be put in place, to allow for asylum-seekers to be screened, quarantined and admitted, and for UNHCR to be granted access to areas where new refugees are arriving. On 30 June, UNHCR launched a global online Platform on the protection impact of temporary measures in response to the COVID-19 pandemic, including access to territory and national asylum systems.

On 10 August, the second group of 507 Burundian refugees in Rwanda have returned home. At the transit center, returnees are tested for COVID-19 and issued with material assistance. One person has since tested positive for COVID-19 among those who returned from Rwanda on 27 August, with another 19 returnees from Tanzania also testing positive. So far UNHCR in Rwanda has registered 4,303 refugees who expressed their wish to opt for voluntary repatriation.

Voluntary repatriation of **Burundian** refugees from **Tanzania** has continued with 2,731 Burundians returning between 01- 10 September. With a surge in number of returns mainly from Tanzania, implementation of COVID-19 protocols has been greatly hampered with only one processing centre currently functional with a testing capacity for 400 people and 140 beds to accommodate suspected cases. UNHCR is currently rehabilitating another centre to guarantee safety for staff and at least 600 persons that arrive with each convoy.

In **Uganda**, COVID-19 has greatly affected Kyangwali, Kiryandongo and Arua settlements. As a result, the Child Protection Sub-Working Group has updated their Continuity Plan to ensure delivery of critical services such as case management for vulnerable children and alternative cares services for unaccompanied and separated children.

In **Ethiopia**, 1,223 South Sudanese new arrivals from the Pagak Reception Centre were relocated to Nguenyyiel camp. Cumulatively, 2,516 people have been transferred from Pagak to either Nguenyyiel or to the isolation centre at the Gambella University. There are 5,704 persons remaining at the Pagak reception centre.

In **Kenya**, 51 refugees scheduled to depart Kakuma for resettlement to USA and Canada underwent COVID-19 test at IOM as part of movement protocols. Results released on 7 September indicated that nine tested positive. They were all placed in quarantine will be tested again after 20 days.

Education



As schools reopen in the region, UNHCR and partners are faced with the need to mitigate risks by increasing WASH facilities and ensuring additional learning spaces.

The decision for Government's in the region to either re-open or not re-open schools continue to be determined by the ongoing COVID-19 situation. So far, only three countries have re-opened schools (**Somalia, Tanzania** and **Djibouti**).

Djibouti reopened schools on 06 September 2020. Ministry of Education and teaching staff strictly adhered to preventive measures against COVID-19 especially social distancing and handwashing.

Sudan is set to re-open schools in 27 September 2020. In preparation for this, the Federal Ministry of Education has established protocols for the new school year in line with the "Safe Back to School guidelines, including provision of face masks for school children, social distancing and handwashing. UNHCR has evaluated the status of safe return to school for persons of concern and noted challenges that include high drop out rate due to long breaks and families that moved; and school spaces that are not aligned with COVID-19 prevention measures.

South Sudan had postponed school reopening until further notice due to increasing cases of COVID -19. However, on 11 September 2020, the Council of Ministers in South Sudan, ordered that all schools (Primary, Secondary and Institutions of Higher Learning) be reopened on 14 September 2020. This decision by the Council of Ministers, was informed by the Ministry of Health report on the significant reduction in COVID-19 cases in South Sudan.



Kenya had postponed school re-opening to January 2021. With a continued decrease in number of COVID-19 cases being reported in the country, propositions have been made to reopen schools for examination classes in November 2020. Note withstanding, the Government has called for a crisis meeting o further discuss school reopening dates.

Tanzania and **Somalia** were among the first countries to re-open schools in the region. However, there have been notable challenges that include limited social distancing by students, students complaining of discomfort in using face masks for long periods of time, low return to school for all students and especially girls and teachers complaining of excess workload.

Health



Major health challenges include immediate availability equipment detect. necessary to test and complicated cases, medical and supplies and adequate quarantine facilities, as well as the feasibility of practicing physical distancing at the community level.

The geographical locations of refugee and IDP locations and their proximity to borders pose challenges for the COVID-19 response. The movement of refugees, new arrivals and pendular movements complicate required testing. The limitation of some national responses has been observed, including excessive centralization and lack of testing in remote areas.

Currently, testing for COVID-19 is regulated and managed by National Health Authorities centrally but many countries in the region are making efforts to decentralize testing facilities including to increase access for refugees and host communities living in remote locations. UNHCR has already been requested and is supporting Governments with COVID-19 testing.

In **Tanzania**, health partners continue to screen at all health centres and the camp entry point. UNHCR has also received 3,000 pieces of oxygen nasal cannulas and suction pumps to boost its COVID-19 preparedness efforts. In **Sudan**, a consignment of 191 cartons of assorted medical supplies was received with another consignment of 84 Cartons containing PPEs expected to arrive in Khartoum.

In **Ethiopia**, UNHCR delivered various items to equip two Government-designated facilities in Barahle Woreda Health Bureau. The intervention is aimed at ensuring persons of concern are included in the Woreda's plans and interventions for prevention and response to COVID-19.

Water, Sanitation and Hygiene (WASH)



Emphasis remains on blanket prevention activities in camps and working with the health sector to assess and prepare for WASH needs and infection prevention control in identified health structures to isolate and treat COVID-19 patients.

WASH prevention activities targeting all camp populations, such as increased water supply, provision of soap for handwashing and public awareness activities are progressing throughout the region. The replenishment of hygiene material requires longer term planning and additional funding as the timeline of the pandemic continues to extend.

In **Kenya**, 6,500 face masks were distributed. Unconditional cash vouchers worth KES 5,000 (USD 50), redeemable from preselected vendors in the markets across the camps, were also issued to 174 unaccompanied minors from the refugee and host communities. Additionally, 32,280 jerry cans were distributed to 13,8214 households with 7 to 20 members across the three camps. In **Ethiopia**, 52,000 facemasks were delivered to Aysaita and Barahle refugee camps in the Afar region. Afar continues to be a vulnerable region, particularly due to lack of testing facilities in the area.



In **Somalia**, cash assistance has been provided to approximately 3,400 vulnerable refugees/asylum seekers and returnees in Bossaso, Galkayo and Hargeisa. Awareness raising has also continued with 200,000 IDPs, refugees and asylums seekers, returnees and host community reached through electronic media and community outreach initiatives. In Galkayo, soap and other hygiene materials to combat the coronavirus was distributed to approximately 540 IDPs and vulnerable members of the hosting community.

In **Tanzania**, construction of permanent handwashing facilities has been completed in Nyarugusu, Nduta and Mtendeli camps and now in use. In total, 24,602 handwashing points are in place across the three camps; 3,550 in institutions and 21,052 at household level. So far, 10,523 kilograms of powder soap and 499 litres of liquid soap have been distributed. Larger volume handwashing devices are currently being installed in all camps



Fardus Ahmed Ismael, an Ethiopian refugee tailor making and selling face masks in her neighbourhood in Hargeisa. She is among the refugees that are making a difference in the fight against COVID-19.

Inter-agency Coordination

Operations are working closely with UN Country Teams, Resident Coordinators and the World Health Organization on crisis management, personnel and business continuity arrangements, program criticality, preparedness, and response planning. Existing refugee response coordination structures continue to function, through virtual communication where relevant.

At the Regional level UNHCR is engaged with the Regional Humanitarian Partners Team (RHPT) to map the impact on humanitarian operations and coordinate on advocacy messaging, as well as with many sectoral groups including health, nutrition, education, and child protection which have been developing context specific inter-agency guidance on programming during the COVID-19 pandemic.

In **Djibouti**, UNHCR handed over two ambulances and 594 boxes of drugs to the Ministry of Health on 7 September 2020, in an event witnessed by the Minister of Health and Minister of Interior. The contribution is aimed at strengthening interventions and inclusion of refugees in the national health programme in response to COVID-19.

In **Somalia**, The CCCM partners continue to provide inclusive risk communication activities (awareness raising on COVID-19) at the IDP site level targeting site leaders, committee groups and IDP populations and reached a total of 921 IDP sites out of 2344 IDP sites nationally, covering 1,091,009 persons (42% out of total 2.6 million). Partners trained more than 680 community members of whom 80% were female on COVID-19 prevention and response.

UNHCR and World Bank jointly with national statistics office in Kenya and Uganda have launched surveys on the impact of the pandemic on refugees and host communities. The datasets have been uploaded to UNHCR Microlibrary.



With regards to COVID-19 inter-agency coordination in the region, the first meeting of the Opportunities/Issues Based Coalition (O/IBC) 7 on Forced Displacement and Migration that is co-led by UNHCR and IOM was held in the context of the UN Sustainable Development Goals and Agenda 2030. As an outcome of the meeting, Terms of Reference for the O/IBC-7 that includes a focus on COVID-19 were endorsed. In addition, the Refugee Response Plans Burundi and South Sudan situations are currently being reviewed to include an addendum on COVID-19.

Funding needs

The second revision of the Global Humanitarian Response Plan was launched on 16 July with overall funding requirements rising to \$10.3 billion, with the inclusion of additional country response plans and other increased needs.. UNHCR's revised requirements of US\$745 million reflected in the revised May Global Humanitarian Response Plan (launched on 7 May seeking US\$6.7 billion) remain unchanged.

UNHCR's Revised Emergency Appeal detailing the country and sectoral breakdown of UNHCR's global budget requirements was launched on 11 May. Within the revised appeal, \$126 million has been requested for ten countries in the East and Horn and Great Lakes Region.

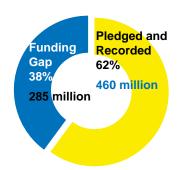
The initial Global Humanitarian Response Plan was launched on 25 March seeking US\$2.01 billion, and which included US\$255 million for initial, prioritized requirements in UNHCR's operations in affected countries.

USD 745 million requested by UNHCR in the revised inter-agency Global Humanitarian Response Plan

USD 126 million requested for 10 countries in the East and Horn of Africa and Great Lakes region

Funding

USD 745M requested for UNHCR's COVID-19 response globally:



Total contributed or pledged to the COVID-19 appeal USD 454M including:

United States \$186.3M | Germany \$62.7M | EU \$45.5M | UK \$26.3M | Japan \$25.1M | African Development Bank \$18.3M | Private Donor 16.1M | Denmark \$14.6M | UN Foundation \$10M | CERF \$6.9M | Canada \$6.4M | Education Cannot Wait \$5.8M | Qatar Charity \$3.5M | Spain \$3.4M | France \$3.4M | Ireland \$3.3M | Sweden \$3M | Sony Corporation \$3M | Austria \$2.5M | Finland \$2.4M

Unearmarked contributions to UNHCR's regular global programmes: Sweden 76.4M | Private donors Spain 52.9M | Norway 41.4M | Netherlands 36.1M | Denmark 34.6M | United Kingdom 31.7M | Private donors Republic of Korea 27.2M | Germany 25.9M | Private donors Japan 17.9M | Switzerland 16.4M | France 14M | Private donors Italy 12.4M | Italy 10.6M

Links:

UNHCR COVID-19 Platform: Temporary Measures and Impact on Protection

Click here to access a live dashboard providing information on COVID-19 cases in the region, as well as travel restrictions and movement and border controls put in place by Governments.

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