WEBINAR « EVIDENCE AND TRENDS ON MIGRANT FLOWS ALONG THE CENTRAL MEDITERRANEAN ROUTE – IMPACT OF COVID-19 ON MOBILITY »

TUESDAY 9th JUNE 13H30 – 15H00 (GMT+2)
WEBINAR « EVIDENCE AND TRENDS ON MIGRANT FLOWS ALONG THE CENTRAL MEDITERRANEAN ROUTE – IMPACT OF COVID-19 ON MOBILITY »

<table>
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<tr>
<th>Introduction</th>
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<tr>
<td>MIGRATION FLOWS, MOBILITY RESTRICTIONS, AND STRANDED MIGRANTS: COVID-19 IMPACTS ON MIGRATION TRENDS ALONG THE CMR (IOM)</td>
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<td>AWARENESS, PRECEPTION, ASSISTANCE, INFORMATION NEEDS: COVID-19 IMPACTS ON MIGRANTS (MMC)</td>
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<td>VULNERABILITIES, ACCESS TO SERVICES, SMUGGLING NETWORK: STATE OF EVIDENCE ON THE IMPACT OF COVID-19 ON MIGRANTS (IMREF)</td>
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<td>Q&amp;A</td>
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**ARRIVALS TO EUROPE – May 2020**

<table>
<thead>
<tr>
<th>Months</th>
<th>Arrivals 2019</th>
<th>Arrivals 2020</th>
<th>% Change</th>
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<tbody>
<tr>
<td>January</td>
<td>8,223</td>
<td>30,924</td>
<td>306%</td>
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<tr>
<td>February</td>
<td>8,176</td>
<td>23,387</td>
<td>217%</td>
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<td>March</td>
<td>6,732</td>
<td>2,238</td>
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<td>April</td>
<td>5,445</td>
<td>10,465</td>
<td>97%</td>
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<tr>
<td>May</td>
<td>5,675</td>
<td>7,402</td>
<td>29%</td>
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- 1/3 of all arrivals to Spain in 2020 were via the Canary Islands (West African Route) – Gran Canarias, Tenerife, Fuerteventura (in 2019, 4% of all arrivals to Spain were via the Canary Islands)

**Arrivals to Europe by Routes - Jan/May 2020**

- **Eastern Med Route**
  - January: 1,895
  - February: 1,647
  - March: 933
  - April: 824
  - May: 1,708

- **Central Med Route**
  - January: 2,365
  - February: 2,910
  - March: 2,366
  - April: 387
  - May: 275

- **Western Med Route**
  - January: 1,050
  - February: 1,052
  - March: 737
  - April: 97
  - May: 275

**Summary:**

- **2019:**
  - Eastern Med Route: 18,221
  - Central Med Route: 2,238
  - Western Med Route: 10,465

- **2020:**
  - Eastern Med Route: 9,611 (47% ↓)
  - Central Med Route: 6,374 (185% ↑)
  - Western Med Route: 7,402 (29% ↓)
**ARRIVALS TO EUROPE/DISEMBARKATION from/to LIBYA**

**Arrivals to Italy by country of departure, 2019-2020**

- **Tunisia**: Tot 2019 - 548, 2020 - 1072
- **Libya**: Tot 2019 - 130, 2020 - 1333
- **Algeria**: Tot 2019 - 218, 2020 - 630
- **Turkey Greece**: Tot 2019 - 183, 2020 - 0
- **Albania**: Tot 2019 - 1214, 2020 - 774

**Libya Monthly Disembarkation Trends 2019/2020**

- **In 2020 so far**
  - 3,980 disembarked
  - 60% ▲ compared to 2019
  - 11 Bodies Retrieved
  - 11 Missing

**3,472 Men 319 Women 143 Boys 46 Girls**
MOBILITY RESTRICTIONS ALONG THE CMR

General

10 March (Italy)  24 March (Spain)  27 March (Tunisia)  23 April (Libya, Mali)

20 March (Malta)  26 March (Niger, Mauritania, Burkina Faso)  20 March (Senegal)

Central Mediterranean

April

10 April  15 April  24/25 May

12 April  4 May
860 Points of Entry and other key locations assessed

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13% Airports
42% Land Border Crossing Points
15% Blue Border Crossing Points

30% Other Key Locations (including internal transit points)

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37% Points of entry fully closed
30% Points of entry partially operational
11% Points fully operational
22% Other
<table>
<thead>
<tr>
<th>Country</th>
<th>Mobility restriction (to)</th>
<th>Mobility restriction (from)</th>
<th>Visa change</th>
<th>Restricted nationality</th>
<th>Document change</th>
<th>Medical requirement</th>
<th>Medical certificate confirming negative COVID-19 testing required</th>
<th>Other limitation</th>
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Points of Entry – Affected Population

Affected population categories at PoEs and Internal Transit Points

- Nationals
- Regular travellers
- Irregular migrants
- Returnees
- IDPs
- Refugees
- Migrant workers

Multiple choice question

At 376 locations Irregular Migrants
- 215 Returnees
- 152 IDPs
- 212 Refugees
- 243 Migrant Workers

*Excludes MENA Countries
HINDERED MOBILITY
- Stranded migrants
- Migrant workers (internal and international)
- International students
- Travellers and visitors

RETURN MOVEMENTS
- Migrant workers returning home
- Enforced returns

PRECARIOUS LIVING SITUATIONS
- Health risks in camps and camp-like settings
- Health risks for migrants in essential jobs
- Xenophobia

MOBILITY AT SEA
- Migrants at Sea
- Sea workers

MIGRANT FATALITIES
- 63% resort to food-related coping strategies
- 56% reported having to compromise their food intake
- 32% had inadequate food consumption level
- 72% of migrants who rely on daily casual labour stated that it had been difficult to find work in the past several days

MOBILITY TRACKING
- 24% of migrants reported being unemployed during April 2020, an increase of 7% over Jan-Feb 2020

LIBYA MIGRANT EMERGENCY FOOD SECURITY ASSESSMENT

ABOUT THE SURVEY
- Survey period: 1-23 April 2020
- 1350 migrants surveyed
- 21 / 22 regions (mantika)
Nearly 1 in 3 migrants is identified as being potentially food insecure according to both food consumption scores (32%) and the livelihood coping strategies (31%).

Drivers of vulnerability & food insecurity:
- Type and availability of employment
- Daily wage workers
- Length of stay in Libya
- Migrants who have been in Libya for less than 1 year

Prolonged insecurity and COVID-19 mobility restrictions have significantly reduced daily labour opportunities which can increase the vulnerability of migrants who rely on informal work for their food security, housing and access to health services and can further erode their capacity for resilience.
CHANGE IN FLOWS
OBSERVED FROM JANUARY TO APRIL 2020
-48%

CHANGE IN FLOWS
OBSERVED BETWEEN 2019 (APR) AND 2020 (APR)
-44%

MOBILITY TRENDS IN WCA FMPS (BASELINE DAILY AVERAGE MAR-APR 2019)

EVOLUTION OF MOBILITY FLOWS FROM JANUARY TO APRIL 2020, BY FMPs

FMPs are funded by the European Union.
STRANDED MIGRANTS – WEST AND CENTRAL AFRICA

40,000 migrants, nationals and/or displaced affected by border closures and other COVID-19 Mobility restrictions

Transhumants

Students

Seasonal workers

Movement to and from Libya/Algeria

Internal Displacement

West and Central African Region Status
- Active (20)
- Inactive (14)
- Closed (4)
- Information point
- Migration route
- Disputed lines
- International boundaries
Data collection and profiles

4Mi covid-19 data collection
New survey
Remote data collection
Limitations
Dissemination

Number of interviews
North Africa: 442 Libya, 515 Tunisia
    West Africa: 204 Burkina Faso, 234 Mali, 207 Niger

Gender
North Africa: 32% female, 68% male
    West Africa: 28% female, 72% male

Nationalities
North Africa: Ivory Coast, Sudan, Eritrea, Guinea, Nigeria, Niger + Ghana
    West Africa: Guinea, Nigeria, Niger, Mali, Ivory Coast + Burkina Faso
What is the level of awareness and the perception of risk of coronavirus among refugees and migrants?
The vast majority of respondents in West Africa (88%) and North Africa (90%) expressed **fears over catching coronavirus** relative to 67% in West Africa and 70% in North Africa who expressed **concerns about transmitting it**.

This seems to suggest that there may be a **reduced awareness of asymptomatic carriers** and a need for further information about stopping the spread to others.

No major differences between men and women.
Are you able to practice the recommended 1.5 metre of distance between people?

Number of interviews
- Burkina Faso: 204
- Mali: 234
- Niger: 207
- Libya: 436 (n/a: 6)
- Tunisia: 515
Where or who are refugees and migrants getting information on coronavirus from, and where are they turning to?
Who do you think is a trustworthy source of information on coronavirus? (multi-select)

Number of interviews
Burkina Faso: 204
Mali: 234
Niger: 207
Libya: 436 (n/a: 6)
Tunisia: 515
In North Africa the **most used sources of information** ARE NOT the same sources that have been identified as trustworthy. The single most accessed source of information is the online community (53%) identified as a trustworthy sources only by 25% of the respondents.

In West Africa the **most used source of information** are other migrants (58%) and national authorities (41%) which are also the two most trusted sources.
What is the perception of access to health services and what are the barriers?
Against the background of approximately 90% of the respondents in both regions expressing concerns about catching the virus, reported **access to health services** in case of appearance of coronavirus symptoms is generally quite low, but with important differences between regions/countries.

In North Africa 30% of the respondents in both Tunisia and Libya believe they would have access, along with 36% (Libya) and 33% (Tunisia) who don’t know if they do have access.

In West Africa the percentage of respondents reporting access is higher (35% in Burkina Faso, 43% in Mali and 63% in Niger) and the percentage of people not knowing is slightly lower (Burkina Faso 27%, Mali 29%, Niger 22%).
I don't have the money
I don't know where to go
Discrimination against foreigners
Afraid of being reported
The advice is unclear here
None
I don't have the right/documentation
I don't speak the language
Don't know
Other
Services are overwhelmed
General insecurity
There are no health services here
Refused

What are the barriers to accessing health services? (multi-select)

Number of interviews
Burkina Faso: 204
Mali: 234
Niger: 207
Libya: 436 (n/a: 6)
Tunisia: 515
What impacts has the crisis had on refugees and migrants day-to-day life?
**Number of interviews**
- Burkina Faso: 204
- Mali: 234
- Niger: 207
- Libya: 436 (n/a: 6)
- Tunisia: 515

**What impact has the crisis had on your day-to-day life? (multi-select)**

- Reduced access to work
- I am more worried and stressed
- Reduced availability of basic goods
- Increased racism and xenophobia
- Reduced access to asylum
- Other
- None
- Refused

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- Burkina Faso
- Mali
- Niger
- Libya
- Tunisia
More than half of respondents in Libya (approx. 51%) and in Tunisia (approx. 60%) said they had lost income because of the COVID-19 crisis and restrictions. Moreover, 21% of respondents in Libya and 37% in Tunisia reportedly did not have an income before the crisis.

Also in West Africa the percentage of respondents who lost income is higher in Burkina Faso (60%) and Niger (54%) than in Mali (35%). Similar to North Africa, 37% of the respondents in Burkina Faso, 23% in Niger and 40% in Mali reportedly did not have an income before the crisis.
What impact has the coronavirus crisis had on migration journeys?
Increased difficulty crossing borders
Increased difficulty moving around
I feel to afraid to move
Reduced access to smugglers
Increased risk of detention
None
Other
About to be resettled, now delayed
Deported back to previous country
Refused
Delayed because of sickness

What impact has the coronavirus crisis had on your migration journey? (multi-select)

Number of interviews
Burkina Faso: 204
Mali: 234
Niger: 207
Libya: 436 (n/a: 6)
Tunisia: 515
If we break the data down by location within Libya and focus on reduced access to smugglers, we find that this was something reported more by respondents based in coastal cities and not in key cities of arrival to Libya. This may suggest that respondents are still finding ways into the country using smugglers, but to move through the country and engage in any sea departures using smugglers has become more difficult. This was supported by key informant interviews.

More than 50% of respondents in Libya said their migration decision-making had changed because of COVID, either related to the intended destination, route, decision to return home, or stopping for the time being (reported by 36%). 36% said their plans were unaffected.

In West Africa 43% of respondents reported not to have changed their plans. 28% reported to have stopped for a time because they are stuck. 15% reported to have changed the planned route but the destination remains the same. Only 4% reported to have changed destination.
What additional assistance is needed by refugees and migrants since the outbreak began and what they received so far?
Number of interviews
Burkina Faso received = 58
needed = 184

Mali received = 37
needed = 190

Niger received = 28
needed = 196

Libya received = 43
needed = 336

Tunisia received = 115
needed = 473
WEBINAR “EVIDENCE AND TRENDS ON MIGRANT FLOWS ALONG THE CENTRAL MEDITERRANEAN ROUTE - IMPACT OF COVID-19 ON MOBILITY”

IMREF
Background

IMREF conducted two studies on the impact of COVID-19 on migrants on the CMR in May 2020:

A **systematic review of 146 sources** to identify what we know and what we don’t know.

**Qualitative interviews with 34 stranded migrants in Agadez, Gao and Ouagadougou**, including 10 women, to better understand their vulnerabilities and access to services since the start of the outbreak.

IMREF is the Independent Monitoring, Rapid Research and Evidence Facility of the SSS Phase II programme commissioned by the Department for International Development (DFID). IMREF facilitates adaptation and learning in SSS II by delivering and using evidence from research to inform programmatic and potentially policy decisions to that support vulnerable people in mixed migration flows.
State of Evidence: Migratory Patterns

FINDINGS
Strong evidence that border closures and disruptions of return opportunities have left more migrants stranded on the CMR. Signs that migrants continue to migrate along the CMR and to cross the Mediterranean Sea.

OPPORTUNITY
IOM DTM through the Emergency Tracking Tool provides updates on mobility trends and stranded migrants.

GAP
Limited understanding of how different types of people in mixed migration flows may be impacted by movement restrictions differently.
State of Evidence: Smuggling networks

**FINDINGS**

Slowdown in smuggling activities. Signs that some migrants continue to use smugglers to facilitate journeys through the desert.

**OPPORTUNITY**

The Global Initiative Against Transnational Crime monitors changes in smuggling practices in the Sahel.

**GAP**

Use of smuggling in new routes, use of smuggling for return journeys.
Stranded migrants are experiencing increased financial hardships as they struggle to access the informal labour market and other financial resources.

**FINDINGS**

**OPPORTUNITY**
MMC and UN OCHA surveys on migrants’ financial situations is available for Libya, Tunisia, Mali, Burkina Faso and Niger.

**GAP**
Lack of clarity around comparability of challenges to the local community, and the role of discrimination in labour market access.
Emerging primary evidence that migrants report heightened discrimination from local communities, in particular in Libya and Tunisia.

IFRC is planning a study on the impact of COVID-19 on the relations of migrants with host communities, State authorities and humanitarian actors in West Africa.

Lack of available research on perceptions of migrants among local communities in the CMR prior to COVID-19.
Reliable evidence that migrants are facing barriers in accessing COVID-19 health services due to a lack of information on how to access those services, language barriers, discrimination from the local governments and authorities, and fears of deportation.

State of Evidence: Access to Services

**FINDINGS**

MMC will continue to provide increasing amounts of data on barriers migrants face in accessing services.

**OPPORTUNITY**

**GAP**

Little evidence about how COVID-19 may affect trust in humanitarian actors.
WEBINAR « EVIDENCE AND TRENDS ON MIGRANT FLOWS ALONG THE CENTRAL MEDITERRANEAN ROUTE – IMPACT OF COVID-19 ON MOBILITY »

QUESTIONS AND ANSWERS

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