Key Regional Updates

- As of 29 May there are a total of 249,806 confirmed cases in the region representing a 91.1 per cent increase in the regional caseload since May 13.

- To date, according to IOM’s Tracking Mobility Impact, around 68 per cent of monitored international airports are fully closed and 30 per cent are partially operational. Almost 60 per cent of monitored land border crossing points are totally closed while 38 per cent are only partially operational. Additionally, only two blue border crossing points in the Syrian Arab Republic out of 41 monitored in the region are fully operational for passengers with no restrictions.

- IOM launched its Syria Appeal, including COVID-19 response, covering Syria, Egypt, Lebanon, Jordan and Iraq in order to support vital needs of 1.3 million internally displaced Syrians and 1.7 million Syrian refugees through a USD 206 million appeal. Of the total amount, USD 33 million will be allocated to efforts aimed at mitigating the impact of COVID-19. Download IOM’s 2020 IOM Syria Appeal here and the COVID-19 Annex here.

- With a rapidly growing number of cases in countries affected by conflict, IOM sees that COVID-19 combined with ongoing challenges are aggravating the already dire humanitarian situation. As the first case of COVID-19 was detected in an IDP camp located in Iraq, IOM continues to find innovative solutions that allow humanitarians to ‘stay and deliver’, including IOM efforts in Yemen to provide support to common humanitarian systems (such as logistics, security, health support and accommodation) in Marib and Aden.

- IOM continues to advocate for universal health coverage for displaced persons and migrants to be fully included in the national COVID-19 response regardless of their legal status, counter xenophobia and “infodemic” to discriminate and stigmatize displaced persons and migrants.
The impacts of COVID-19 continue to grow rapidly across the MENA region. Community transmission is reported in Algeria, Tunisia, Syria, Qatar and Sudan, with clusters of cases also reported in Saudi Arabia, Egypt, Morocco, Kuwait, Bahrain, Oman, Iraq, Lebanon, Jordan, and Libya. All countries in the region have reported new cases and fatalities during the reporting period with the region surpassing the 200,000 mark for cumulative cases. Additionally, the highest number of new cases and deaths in a 24-hour period were also reported.
IOM providing much needed support to Migrants in Tunisia

Since the outbreak of COVID-19, life in Tunisia has changed fundamentally. Tunisians are now living with exceptional home-confinement measures that have altered their work, personal life and stability. Similarly, migrants across the country have confronted new and unprecedented circumstances, often leaving them in difficult and fragile situations. A recent IOM study on the impacts of COVID-19 in Tunisia showed that the proportion of IOM beneficiaries working has dropped from 66 per cent before the pandemic, to just 9 per cent today. This loss of livelihoods has been driven by the mobility restrictions put in place to curb the spread of the virus and their knock-on economic effects. These migrants come from all walks of life including international students pursuing higher education, professional apprentices and workers actively contributing to different sectors of the Tunisian economy.

To combat this, IOM supports the Government of Tunisia to successfully ensure the non-discriminatory treatment of migrants in terms of access to healthcare during the COVID-19 response. IOM and its partners have also been working to reach the most vulnerable migrants across the country to respond to their unique needs through the distribution of food and hygiene kits. To date, IOM in Tunisia has supported over 9,060 migrants with direct assistance since the beginning of the pandemic.

Talking to the impact of this support alongside the difficulties faced by migrants, one beneficiary of IOM’s food voucher distribution program, residing in Tunis said, “With the current situation, I cannot even afford to pay the rent of my accommodation. But, at least with this distribution of vouchers, I can do basic groceries to feed my family, my niece and my sisters. It is thanks to IOM that I will be able to overcome this period”.

Other migrants have echoed the same concerns and fears. A single male Comorian living in Tunisia, told IOM, “I used to work in the tourism sector in Tozeur, in the south of Tunisia, but due to the Coronavirus I have lost my job and I am finding myself in a very complicated situation without any financial support and confined at my home”.

These testimonies highlight just some examples of the difficulties that many migrants continue to face, often alone and without family or community support. In addition to those working in Tunisia, international students are also confronted with unique challenges in the face of the COVID-19 pandemic. With many international money transfer agencies closed, students have no access to their remittances and are facing significant financial losses. One Comorian student mentioned that although she has been living in Tunisia for the last two years for her master’s degree, she is now unable to access her monthly allowance, which was a key source of income. While IOM assistance was able to meet her most urgent needs, such as food and hygiene, she mentioned that many other migrants from the Comorian community face much more challenging times and they are in need for further support.

As the leading agency on migration, many IOM staff are at the front line to respond to the urgent needs of migrants and vulnerable populations in a rapidly changing environment. Through being on the ground, IOM has been able to provide critical medical, economic and legal assistance to affected populations across Tunisia. One IOM staff member mentioned, “Our work is very essential to provide much needed help to migrants, who are finding themselves in unusual and vulnerable situations, affecting the different aspects of their life”. She explains that, before the pandemic, IOM had ongoing collaborations with a variety of partners such as community associations and public health professionals, enabling them to identify migrants in need for psychological and physical health assistance. Given the confinement measures, she explains that IOM’s free toll number has provided a critical avenue for many vulnerable migrants seeking urgent and critical health assistance. Noting the importance of strong relationships with local partners, she added, “[...] for a long time, IOM has been working to develop outreach activities and training for the agents of different local municipalities. Such actions have enabled IOM to be known and trusted at the local level and has enabled the organisation to learn more, among others, about the health needs of many vulnerable migrants.”
**Response**

**COORDINATION AND PARTNERSHIPS**

IOM Regional Office co-convened the second meeting of the Task Force on COVID-19 and Mobility on 19 May, attended by WHO, ILO and ESCWA. The Task Force aims to facilitate close coordination among regional partners on COVID-19 and mobility, including through i) provision of operational support to countries; ii) enhancing mobility data collection and analysis capacity; iii) documenting lessons learned; and iv) providing policy guidance to governments.

IOM in Tunisia collaborated with the private sector to provide 800 people with food parcels provided with contributions from a group of Tunisian businessmen. This distribution was carried out in collaboration with seven Civil Society Organizations (CSOs) and two municipalities, which provide social assistance and aid services to vulnerable migrants in Ménédine, Sfax, Tunis et Zarzis. IOM ensured, jointly with the association Tunisie Terre D’Asile, the distribution of 115 food parcels, provided by the Ministry in Charge of Relations with Constitutional Bodies, Civil Society and Human Rights, to a group of vulnerable migrants.

**TRACKING MOBILITY IMPACTS**

At regional level, between 14 and 22 May, data was collected on 204 official locations across 17 countries in the region. These locations include: 97 land border crossings points, 66 airports, 41 blue border crossing points (including sea, river and lake ports). This work is based on the information collected by IOM Country offices in the region. For more information please click on the following [LINK](#).

In Yemen, IOM Flow Monitoring activities are continuing at key flow monitoring points. As of 18 May, 323 migrant arrivals into Yemen were recorded. Tighter border controls in Djibouti and Yemen, and to a lesser extent Somalia, have meant that migrant arrivals into Yemen have slowed considerably in comparison to previous years.

In Sudan, IOM’s Displacement Tracking Matrix (DTM) team is now also monitoring the number of stranded migrant children and effect of COVID-19 mitigation measures on IDP camps throughout Darfur.

**RISK COMMUNICATION AND COMMUNITY ENGAGEMENT (RCCE)**

In collaboration with the Tunisian Agency for Vocational Training (ATFP), IOM implemented a number of awareness-raising sessions on COVID-19 at students’ residences in Nabeul and Borj Cedria. The campaign aimed to inform international students/apprentices about the applicable sanitary protection measures to combat the spread of COVID-19 and to equip them with supporting hygiene kits. In total, this campaign reached 124 participants over four sessions.

In Yemen, activities are being carried out across 11 governorates, with 908 hygiene promotion sessions conducted and 710 kits distributed. IOM also produced a video highlighting essential COVID-19 prevention measures to be played during one of the most popular Yemeni TV shows during the next reporting period. To reach as many Yemenis as possible, IOM is also developing a social media campaign with engaging videos and graphics highlighting RCCE key messages.

IOM Algeria has gathered country-specific information on containment measures, work provisions and social subsidies, including debunking myths on COVID-19. This information will be distributed through social media and traditional channels (leaflets distributed during site visits and through partners and migrant communities) for awareness-raising purposes and to tackle counter-trafficking networks or fraudulent schemes.

IOM in Iraq produced RCCE material on COVID-19, including self-care during lockdown and Eid Precautions in different languages. IOM also developed a training module on COVID-19 and communication with communities, which targeted CSOs and volunteer networks. Three sessions were implemented, targeting 20 participants in Telafar-Ninewa and Kerbala. IOM also organized a hygiene promotion session at Hasan Sham Camp for community mobilizers and focal points at the camp, COVID-19 IEC flyers and posters were distributed, hygiene matching card games for children were also distributed.

**DISEASE SURVEILLANCE**

In Yemen, IOM mobile and static health teams are supporting disease surveillance efforts and will report suspected cases of COVID-19 through the COVID-19 hotline, in line with Yemen’s disease surveillance protocol. During the reporting period, IOM teams did not encounter COVID-19 cases.

**POINTS OF ENTRY (POE)**

In Libya, IOM successfully completed WASH rehabilitation work at disembarkation points along the Libyan coasts. IOM medical teams provided support to health staff to screen 4,000 returnees at Misrata Airport. Screening was done by thermal screening, symptoms screening and review/verification of pre-departure exit screening documents. IOM medical teams also screen for symptoms of COVID-19 during routine outreach health services.

**INFECTION PREVENTION CONTROL (IPC)**

IOM in Morocco has supported over 20 government facilities of the Entraide Nationale (National Social Services) with food supplies and hygiene and cleaning equipment to ensure protection and access to services for all, including local populations at risk and migrants.
IOM in Yemen, under its role as lead of the sub-national health cluster in Marib governorate, has established an isolation and treatment centre in Marib city. The new centre has a capacity of 63 beds: four for triage, 49 for in-patient and 10 in the ICUs and is staffed with 68 health professionals. Two additional isolation centers are being established in two IDP hosting sites in Marib City and one in Marib Al Wadi. As part of its support to health facilities across the country, IOM is also training health workers on COVID-19 prevention and management protocols. In Aden, training sessions are planned for 64 IOM health workers on COVID-19 case management and infection prevention and control, which will bring the total number of health workers trained since April to 144.

IOM in Libya conducted several sterilization fumigation and cleaning campaigns as part of the initiatives to combat the COVID-19 outbreak. Targeted locations included four detention centers (DCs), where different sections and rooms of the DCs were cleaned as well as one disembarkation points, where the intervention covered all the premises and Libyan Coastguard boats.

**Camp Coordination and Camp Management**

In Iraq, as part of the ongoing response to COVID-19 in the formal camps settings, IOM identified an area in each camp that can be used as an Isolation point should any cases be confirmed. The CCCM team in Baghdad coordinated with Camp Managers to select suitable locations for the unoccupied shelters inside each camp and will supply all the necessary items, including beds, fans, disposable gloves and dresses, etc. The CCCM team is also coordinating with health partners working in these camps to raise awareness on COVID-19.

**Case Management and Continuation of Services**

In Morocco, IOM continues to offer migrants continuity of care, especially for health cases, as well as for Unaccompanied and Separated Children (USC) and Gender Based Violence (GBV) cases.

In Yemen, IOM continues to support health services in facilities by providing both material and human resources. The IOM team is also helping to set up triage management spaces to facilitate COVID-19 emergency care.

In Libya, IOM continues to provide primary and urgent healthcare assistance to migrants and IDPs including through outreach teams in various locations across the country. Cases in need of specialized healthcare assistance are referred to medical centres.

**Protection**

IOM Tunisia through its sub-office in Sfax provided food, medical and clothing assistance to 50 migrants who were rescued sea, who have been quarantined by the Tunisian authorities in a shelter in Sfax due to COVID-19 measures.

In Lebanon, IOM, in coordination with relevant partners, is supporting two isolation sites for Migrant Workers in Beirut.

In Sudan, IOM provided emergency food support to 100 vulnerable Ethiopian and Nigerian migrants in Gedaref, together with COVID-19 awareness raising messages.

IOM Morocco has ensured protection assistance to over 8,860 people at risk through an inclusive approach that includes migrants and local populations. This assistance mainly consists of food baskets, hygiene kits or vouchers, as well as housing for the most vulnerable cases. Over 1,116 beneficiaries have also received psychosocial assistance, to reinforce their capacity to cope with their psychological and financial situation generated by COVID-19 and the confinement measures established in the country.

In Yemen, migrant protection activities are being carried out through IOM static and mobile teams, assisting a total of 719 migrants in Aden and Lahj with food and NFI. Awareness sessions on migrants’ rights, COVID-19 prevention and where to access services reached a further 434 migrants. In addition, as co-lead of the Refugee and Migrant Multi-Sector, IOM continues to coordinate the migrant response and is carrying out protection monitoring activities and advocacy on migrants’ rights and inclusion. IOM is also providing basic assistance to 367 migrants in Sana’a.

In Libya, IOM continues to provide vulnerability and child protection assessments including for GBV victims, victims of kidnapping and torture, cases with medical concerns, vulnerable households with no source of income and persons of concern. Provision of in-kind assistance and shelter support has increased during the reporting period to respond to the spiking number of migrants requesting IOM’s assistance at the IOM office or through a dedicated hotline. IOM continues to provide shelter support for the most vulnerable migrants within its host families programme.

**Addressing Socio-Economic Needs**

IOM Iraq conducted a Facebook live stream event for owners of SMEs who are interested in submitting Enterprise Development Fund (EDF) online applications following the online campaigns. To date, 14,176 online applications have been received in 18 governorates. Cash for Work (CFW) activities for returnees in Baaj and health services related to COVID-19 response are being discussed with the authorities of Nineva. Lastly, a supply chain analysis was conducted, and staff will be trained on it once finalized.