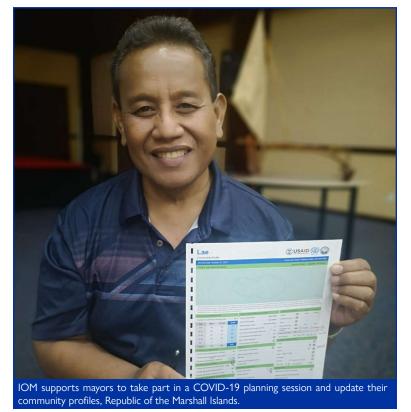


# **COVID-19 RESPONSE**

IOM Regional Office for Asia Pacific

Situation Report 7 - May 4, 2020





nasopharyngeal swabs and blood samples for COVID-19 testing, Myanmar.

## **OVERVIEW**

Reported COVID-19 cases in Asia and the Pacific continue to increase, though at a relatively stable pace, with countries augmenting responses as well as maintaining stringent mobility restrictions. As of 3 May, over 333,500 cases and more than 15,272 deaths have been reported in the region.

Confirmed cases have been reported in 28 countries, territories and/or areas<sup>1</sup>. IOM missions in the region are working with governments and partners to ensure that migrants, whether in regular or irregular situations, as well as returnees and forcibly displaced persons are included in efforts to mitigate and combat the illness's impact. There have been some concerning reports within the region of concentrated clusters of cases in several migrant settings, highlighting existing vulnerabilities including among migrant workers housed in dormitory accommodation in Singapore, in immigration detention settings in Thailand and among migrant and refugee communities in Malaysia.

These situations highlight the critical importance of ensuring active outreach and inclusion of migrants and refugees in all aspects of COVID-19 preparedness and response including prevention, education, testing and treatment; and mitigation efforts. There are reports of stigma and discrimination towards migrants at destination, transit and home locations upon return, due to fears around COVID-19 transmission which may lead to further exclusion from or unwillingness to access health services.

Some good examples of migrant friendly approaches taken by governments include the establishment of a migrant COVID-19 hotline by the Ministry of Public Health in Thailand supported by WHO and IOM as well as conducting Active Case Finding among migrant communities; and in Sri Lanka where the Ministry of Health with support from IOM is ensuring migrants and refuges are included in COVID-19 messaging and support services. There are also increasing serious concerns regarding stranded and vulnerable migrants abroad including within the region, as well as in other regions, and their ability to satisfy basic needs. Devising adequate responses for migrants, refugees, IDPs, returnees and other vulnerable groups remains the top priority for IOM.

#### CONTACTS

#### PILLAR 1 - COORDINATION & PARTNERSHIPS

**IOM Afghanistan** attends weekly meetings for the POE working group and is working with WHO and Provincial Public Health Drectorates to ensure provincial-level needs are covered. IOM is also a member of the High-Level Development Panel on Health to discuss long-term structural interventions to improve the country's health systems for better responding to infectious diseases.

IOM Cambodia deployed Provincial Coordinators to the provinces with the most returning migrants (Banteay Meanchey, Battambang, Siem Reap, Kampong Thom and Prey Veng) to coordinate with the Provincial Governors and Health Departments. The mission also presented its COVID-19 Response Plan to the Provincial Committee Combatting Trafficking, the Prosecutor, Provincial Administrative Director, Police Commissariat, and Departments of Health, Women's Affairs, Education, Social Affairs and Labor. IOM also briefed the Humanitarian Response Forum on the response to Returning Migrants, encouraging a joint effort among NGOs in the country. Finally, IOM and the UN Resident Coordinator organized a high-level consultative meeting with the Deputy Prime Minister of Cambodia and his Cabinet members to discuss joint response efforts for returning migrants and COVID-19.

**IOM Lao PDR** is joining the weekly Protection and Population coordination meeting with other UN agencies. **IOM Malaysia** co-hosted with ILO and the Bar Council a virtual meeting with five Embassies of migrant sending countries (Indonesia, Nepal, Bangladesh, Cambodia, Philippines) to share challenges and best practices and further coordinate on advocacy points about the impact of COVID-19 on migrant workers in Malaysia.

**IOM Mongolia** is supporting the Health Cluster in setting up alternative quarantine and healthcare facilities in the sub-regions. IOM is actively consulting with the Deputy Prime Minister's Office (Chair of the State Emergency Commission), Ministry of Foreign Affairs, General Agency for Specialized Inspections, National Emergency Management Agency, and Governor's Office of the Capital City to improve coordination for COVID-19 response.

**IOM Nepal** is working with the UNRCO to assess quarantine facilities in different provinces. The mission also joined the Ministry of Health and Population to develop a phone survey to conduct in all 753 administrative divisions of Nepal to gather information on migration and migration health. **IOM Sri Lanka** is coordinating with the Ministry of Health to develop interim operational guidelines on cross-border migration in the aftermath of COVID- 19.

This past week, **IOM Timor-Leste** participated in a coordination meeting with the Director General of the MoH to discuss prioritization of border communities for COVID-19 response. IOM has been requested to provide greater support at the municipal level, particularly in remote and rural areas in border sub-districts.



# PILLAR 2 - RISK COMMUNICATION & COMMUNITY ENGAGEMENT (RCCE)

In **Afghanistan**, the IOM team is organizing community-based focus group discussions to share Risk Communication information developed by the RCCE Core Group. The mission is also conducting trainings for CHWs with a focus on border provinces and has trained more than 130 CHWs on COVID-19 awareness, prevention, identification and referrals.

In Cox's Bazar, Bangladesh IOM surveyed 890 households in 13 camps regarding the reach of COVID-19 messaging. Findings from the survey indicate that 96 percent of households have received information on how to prevent the transmission of the virus, while 86 percent of respondents could recall at least three measures to protect themselves and others from COVID-19 transmission.

Through coordination with the COVID-19 Rapid Response team in Battambang, **IOM Cambodia** has supported RCCE capacity building to 402 government partners, including 116 participants from the COVID-19 response team, 82 health workers on the Rapid Response Team, and 204 non-health workers. The mission is also distributing IEC materials developed by UNICEF – including 1,500 pieces on prevention and 1,500 on hand washing – to quarantine centers and border officials and within communities. The team is adapting IEC materials from MoH, WHO, UNICEF and IOM-MHD to distribute to returning migrants at the border.

**IOM Lao PDR** developed a No Stigma script for disseminating to provinces bordering Thailand and Vietnam that have high numbers of returned migrants. Using eight of UNDP's Community Radio stations, this messaging began broadcasting on 6 April via Lao national radio and community loud speakers, with a total air time of approximately 300 hours per week and reaching more than 300,000 people across five provinces. The mission also posts weekly on social media to raise awareness about COVID-19.

# PILLAR 2 - RISK COMMUNICATION & COMMUNITY ENGAGEMENT - CONTINUED

**IOM Malaysia** produced a Migrant Info Poster, which contains the latest Movement Control Order Guidelines and the extended operating hours for the month of Ramadan in 13 languages (Bahasa Indonesia, Nepali, Bengali, Vietnamese, Khmer, Thai, Tamil, Sinhalese, Burmese, Hakha, English, Malay and Mandarin, as well as a Rohingya language audio version). The posters were disseminated to civil society organisations, community leaders, private sector partners, and embassies. **IOM Micronesia** continues to support government partners to develop awareness-raising videos on COVID-19 for persons with hearing impairments.

**IOM Mongolia** is working with UNESCO and other UN agencies to localize and implement the campaign, "Lift Our Voices to End Xenophobia around COVID-19" and is helping create and promote anti-discrimination messages about international migration, return migration and internal migration. The mission is also starting a Communication for Development campaign to increase access to information on COVID-19 prevention, preparedness and response for areas in Ulaanbaatar (outskirts) that are predominantly inhabited by internal rural-to-urban migrants and mobile populations.

**IOM Nepal** developed radio programs and jingles in five different local languages on reducing stigma, discrimination and xenophobia. The mission also provided technical support to the National Health Education Information and Communication Center and RCCE working group to translate the "Preparedness, prevention and control of coronavirus disease (COVID-19) for refugees and migrants in non-camp settings." IOM Nepal also supported the fourth episode of the TV show "Talk of the Town" about COVID-19 preparedness and response, this week focusing on Nepal's health sector, coordination with concerned stakeholders, operation of the National Health Emergency Center and public awareness on COVID-19 testing. The episode featured the Joint Secretary and Spokesperson of the Ministry of Health and Population, Dr. Bikash Devkota, and can be viewed at the following link.

IOM Timor-Leste is supporting the MoH to print and distribute materials, including 2,000 posters and 1,200 stickers, to reach 35 villages and 242 sub-villages. IOM Sri Lanka developed six social media posts in Sinhala and Tamil to raise public awareness about the impact of COVID-19 on safe and regular migration in Sri Lanka. The mission also created a COVID-19 safety information brochure in Sinhala and Tamil for Sri Lankan returnees, counter trafficking messaging to highlight risks and vulnerabilities in the COVID-19 context, and an animated video in English, Sinhala and Tamil on COVID-19 awareness, risk prevention and avoiding stigmatization. The country office has additionally developed IEC materials for the population being quarantined and has shared IEC materials with other IOM missions to support Sri Lankan migrants abroad.



#### PILLAR 3 - SURVEILLANCE

In **Afghanistan**, IOM teams are translating data into maps to share with the wider humanitarian community and the Inter Cluster Coordination Team, demonstrating potential COVID-19 hotspots linked to migration and displacement patterns. This information will also inform the revision to the Afghanistan Humanitarian Response Plan, which is to be completed by early June 2020.

Jointly with Provincial Health Departments, **IOM Cambodia** is mapping quarantine centers in five provinces and assessing the needs of migrants who are placed in them. **IOM Mongolia's** teams are helping the Government design a system to monitor internal movements during health emergencies, including COVID-19.

#### **PILLAR 4 - POINT OF ENTRY**

IOM Afghanistan continues cross-border response programming, including transportation support, basic health services, multipurpose cash grants, hot meals and overnight accommodation for returnees from Iran at IOM Transit Centers in Herat and Nimroz. In Cambodia, migrant worker returnees continue to arrive – between 100 and 300 per day – through both international checkpoints and local borders, including Poi Pet, O'beychuon, and Malay in Banteay Meanchey Province, O'Smach in Odormeanchey Province and Kamrieng District in Battambang Province. The mission is designing a tool on WASH and shelter, which will be implemented at Points of Entry and selected quarantine facilities.

IOM Mongolia is receiving daily information on migrant crossings from the Border Protection Agency and is helping define the technical assistance and capacity development needed to resume border operations. IOM Thailand in synergy with WHO and the MOPH is adapting the IOM SOPs for front-line officials to the national guidance for frontline immigration officials at Points of Entry. The SOPs provide operational advice on responding to COVID-19 related issues, including treatment of ill travelers and suspected cases, and incorporate recent international guidance from WHO in alignment with the Government of Thailand's standards for endorsement.

#### PILLAR 5 - NATIONAL LABORATORY SYSTEMS

**IOM Afghanistan**, in coordination with the Public Provincial Health Directorates, is seconding laboratory technicians and information management staff to increase capacity at four laboratories in border provinces. IOM is also supporting testing teams, including with staff, vehicles and IT equipment, such as laptops and tablets.

During the reporting week, **IOM Cox's Bazar** and WHO organized a training for 22 medical staff (medical officers, nurses, medical assistants and lab technologists) on COVID-19 sample collection and transport. This training will increase capacity among front-line responders to facilitate COVID-19 testing and improve understanding of the scale and impact of the illness on the ground.

#### PILLAR 6 - INFECTION PREVENTION & CONTROL

IOM WASH teams in **Cox's Bazar, Bangladesh** installed 110 hand washing units across the camps. IOM also held focus group discussions and key informant interviews with beneficiaries about COVID-19 quarantine modalities so that they can incorporate community perceptions into quarantine approaches to increase the acceptance of certain measures. **IOM Micronesia** has been working with government partners in Yap to reprioritize the deployment of hand washing stations in remaining schools.

#### **PILLAR 7 - CASE MANAGEMENT**

During the past week, **IOM Afghanistan's** Mobile Health Teams (MHT) served 5,483 patients with basic health services and screened 10,904 undocumented Afghans in IOM Transit Centers. Three IOM MHTs are operating in Herat at an IDP camp at Sharak Sabz and in Kandahar at the Zhari IDP site. These teams have trained over 250 Community Health Workers on COVID-19 awareness, prevention, identification and referrals, and more trainings are planned for other provinces.

In **Sri Lanka**, IOM medical staff continue to identify COVID-19 symptoms, pursue contact screening and follow up over telephone with those who were admitted to hospitals for inward care, as well as with refugees with previously identified health conditions.

#### PILLAR 8 - LOGISTICS, PROCUREMENT & SUPPLY

**IOM Afghanistan** continues to provide PPE and other materials in 10 provinces, despite facing challenges caused by market shortages and increasing prices. The mission is also working to address access constraints around the country due to the ongoing conflict, which is impacting the timely delivery of humanitarian medical supplies.

IOM's Regional Office for Asia and the Pacific launched its Strategic Preparedness and Response Plan COVID-19 on 29 April 2020, which can be accessed at the following <u>link</u>.



IOM provides bedding, towels, mosquito nets, soap, toothbrushes and toothpaste for returnees from Singapore in a quarantine facility in Yangon Region, Myanmar.

#### **PILLAR 9 - PROTECTION**

IOM Afghanistan's protection unit continues to carry out assessments for Persons with Specific Needs among vulnerable undocumented Afghan migrants. During the past week, the Protection Unit completed 94 case management assessments, including 20 unaccompanied migrant children, 12 families facing economic hardship, 10 medical cases, 4 female-headed households, and 2 single female cases. In addition, the IOM team provided protection assistance to 92 special cases, 86 unaccompanied migrant children, 15 medical cases, 14 deported families, 8 cases with substance abuse concerns and 2 female-headed households.

In Cox's Bazar, Bangladesh, counter-trafficking teams conducted door-to-door and small group outreach sessions in order to raise awareness on COVID-19 and to sensitize beneficiaries on the heightened risks of human trafficking during the pandemic. Individual case management and counselling support services are also still ongoing at the Women and Girls' Safe Spaces, with physical distancing measures in place. During the reporting week, protection teams conducted 174 outreach activities reaching a total of 10,524 individuals.

**IOM Mongolia** is in advanced consultations with the Ministry of Foreign Affairs to coordinate provision of protection assistance to stranded vulnerable Mongolian migrants in other countries. IOM trained 67 social workers from ger areas of Ulaanbaatar (outskirts predominantly populated by internal vulnerable migrants) to provide psychosocial support to vulnerable groups in the context of COVID-19. A nation-wide network of NGOs is being set up, which will provide specialized psychosocial support to vulnerable groups in the context of COVID-19 restrictions.

In **Sri Lanka**, IOM's Assisted Voluntary Return and Reintegration and Counter-Trafficking units remain in contact with Sri Lankans who returned to the country before the rapid spread of the pandemic, providing psychosocial support and carrying out reintegration needs assessments remotely.

# PILLAR 10 - CAMP COORDINATION & CAMP MANAGEMENT

**IOM Afghanistan** continues to provide post-arrival humanitarian assistance to returning undocumented Afghan migrants through its transit centers. During the third week of April, 9,987 undocumented migrants returned from Iran, and IOM assisted 26% of them or 2,782 persons, with overnight accommodation, multi-purpose cash grants, basic health services, hot meals, transportation and non-food items.

#### PILLAR 11 - TRACKING MOBILITY IMPACTS

**IOM Afghanistan's** teams started Flow Monitoring in Nimroz, Farah and Islam Qala earlier this week, as well as Baseline Mobility Assessments in 25 provinces and 9,441 communities, to generate essential information for agencies responding to the crisis on targeting, needs and gaps both in communities and in facilities.

**IOM Malaysia** is closely monitoring the status of the Malaysia-Thailand border, which has recently opened for stranded Thai migrants to return home.

IOM Mongolia is cooperating with the Municipality of Ulaanbaatar to implement DTM flow monitoring at six checkpoints around the capital city, and the team has monitored more than 2.2 million movements since this activity started on 27 February. This activity at city checkpoints was also instrumental in identifying the first and only case of COVID-19 community transmission in Mongolia. The DTM Flow Monitoring exercise is now extended until June 1st, mirroring the extended state of heightened alert declared by the Government. The Municipality of Ulaanbaatar is covering 50% of the implementation costs and will fully take over the methodology by the end of the current implementation.



IOM-trained enumerators are collecting flow monitoring data at a checkpoint outside Ulaanbaatar to inform COVID-19 prevention efforts, Mongolia.

# PILLAR 12 - ADDRESSING SOCIO-ECONOMIC IMPACT

During the first quarter of 2020, **IOM Mongolia** launched two thematic studies: "Migration and Employment" and "Effectiveness and Impacts of Migration Ban in Ulaanbaatar City." The studies investigate the relationship between internal migration, employment and vulnerability in Mongolia in order to assess the socio-economic impact of COVID-19 on migrant households and to propose feasible policies to the relevant government authorities. The studies consist of multiple components, including a household survey, focus group discussions, key informant interviews, and Determinants of Vulnerability and will cover a total of 2,400 households in Ulaanbaatar city.

#### **INNOVATIVE RESPONSES**

**IOM Nepal**, in close coordination with the UN Communication Working Group and National Health Education Information and Communication Center, finalized an animated video on facility-based quarantine in five different languages (including sign language). The documents can be accessed using the <u>link</u>.

### **FURTHER RESOURCES**

IOM recently produced guidance for employers and labour recruiters on protecting migrant workers in COVID-19 context, which can be found at this <u>link</u>.

The United Nations Network on Migration's Working Group on Alternatives to Migrant Detention developed the guidance, "COVID-19 & Immigration Detention: What Can Governments and Other Stakeholders Do?" This guidance document can be found <a href="https://example.com/here.network



Health screening by community health workers near the Cambodia-Thailand border in Malai District, Cambodia.

The Migration Health Evidence Portal for COVID-19, a repository of research publications and high-yield evidence briefs on COVID-19 and its intersection with migration health, can be accessed via the Migration Health Research Portal. Feedback or queries can be sent to mhdroap@iom.int.