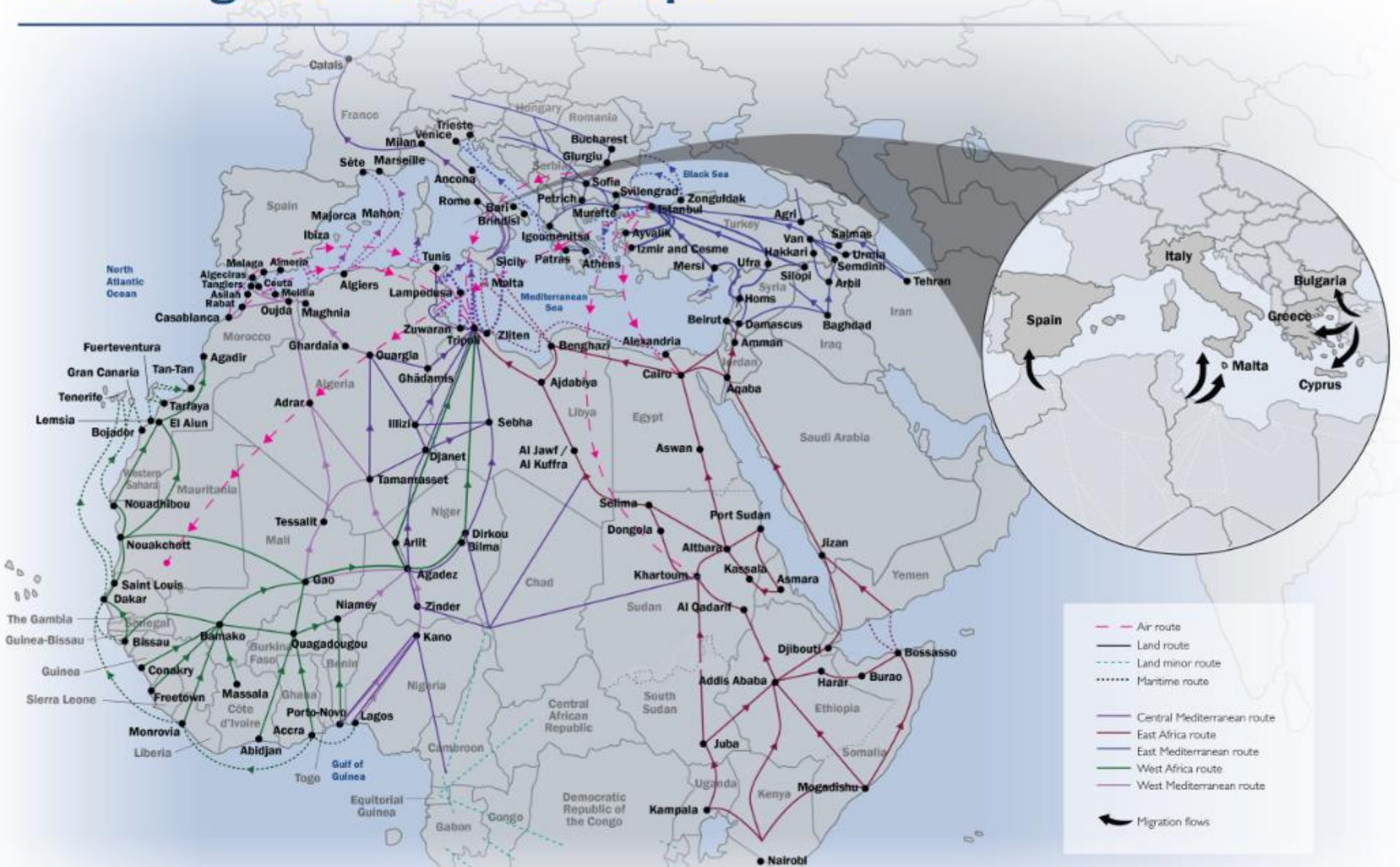


WEBINAR « EVIDENCE AND TRENDS ON MIGRANT FLOWS ALONG THE CENTRAL MEDITERRANEAN ROUTE – IMPACT OF COVID-19 ON MOBILITY »

TUESDAY 9th JUNE 13H30 – 15H00 (GMT+2)



Mixed migration routes to Europe

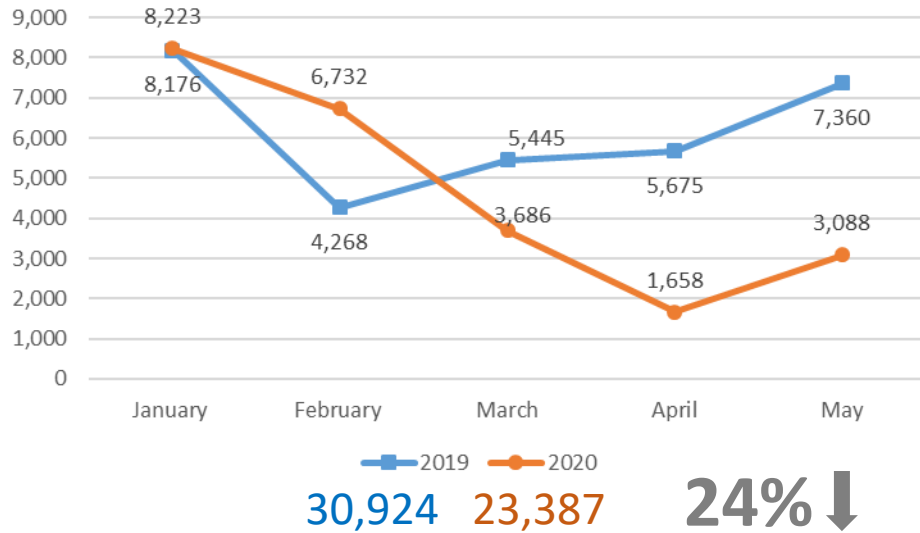


International Organization for Migration (IOM) - The UN Migration Agency
 Boundaries and names used and designations shown do not imply official endorsement or acceptance by IOM. 14/3/17

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

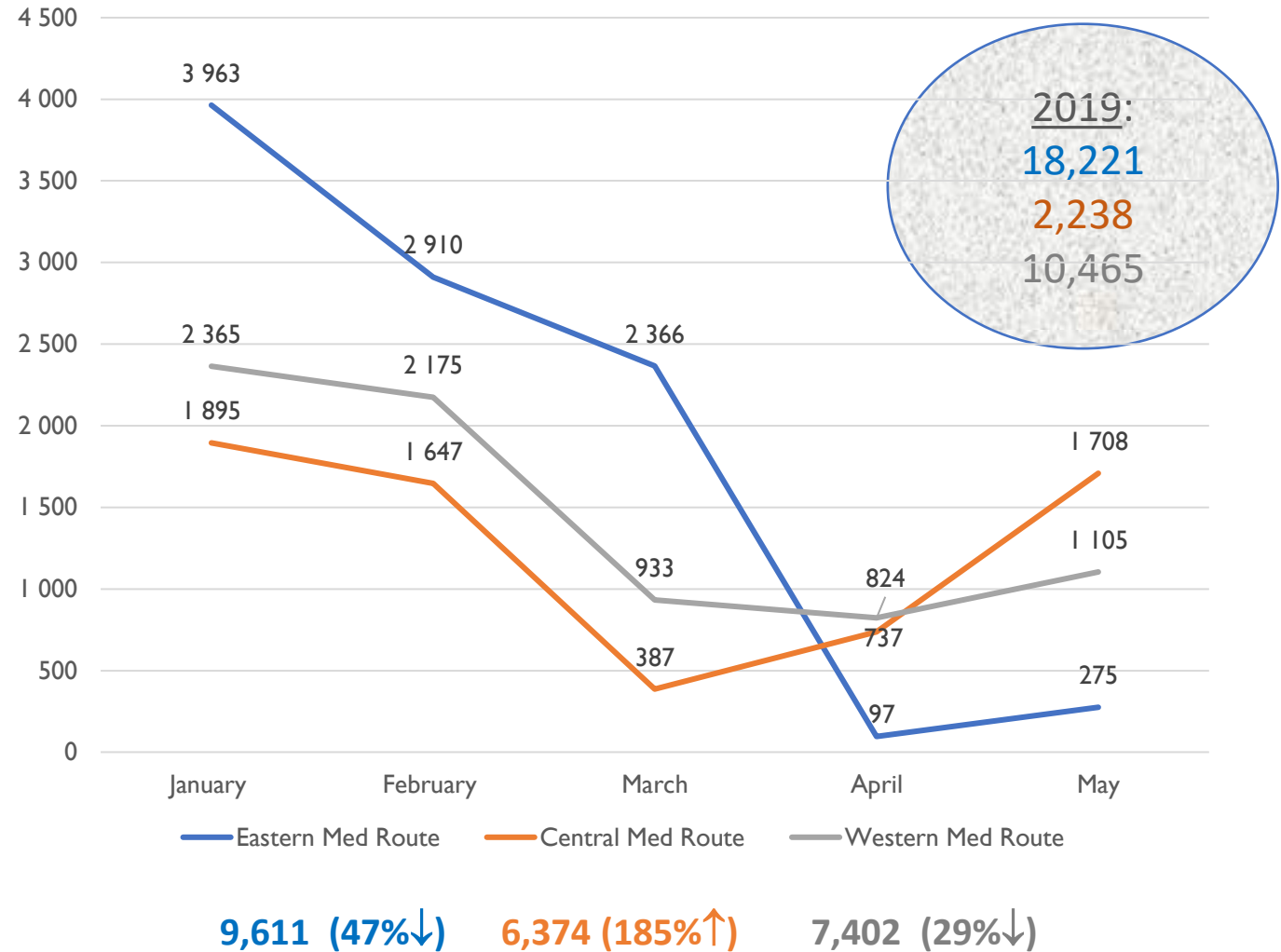
Introduction	1	MIGRATION FLOWS, MOBILITY RESTRICTIONS, AND STRANDED MIGRANTS: COVID-19 IMPACTS ON MIGRATION TRENDS ALONG THE CMR (IOM)	Q&A
	2	AWARENESS, PRECEPTION, ASSISTANCE, INFORMATION NEEDS: COVID-19 IMPACTS ON MIGRANTS (MMC)	
	3	VULNERABILITIES, ACCESS TO SERVICES, SMUGGLING NETWORK: STATE OF EVIDENCE ON THE IMPACT OF COVID-19 ON MIGRANTS (IMREF)	

Arrivals to Europe, January - May 2019/2020

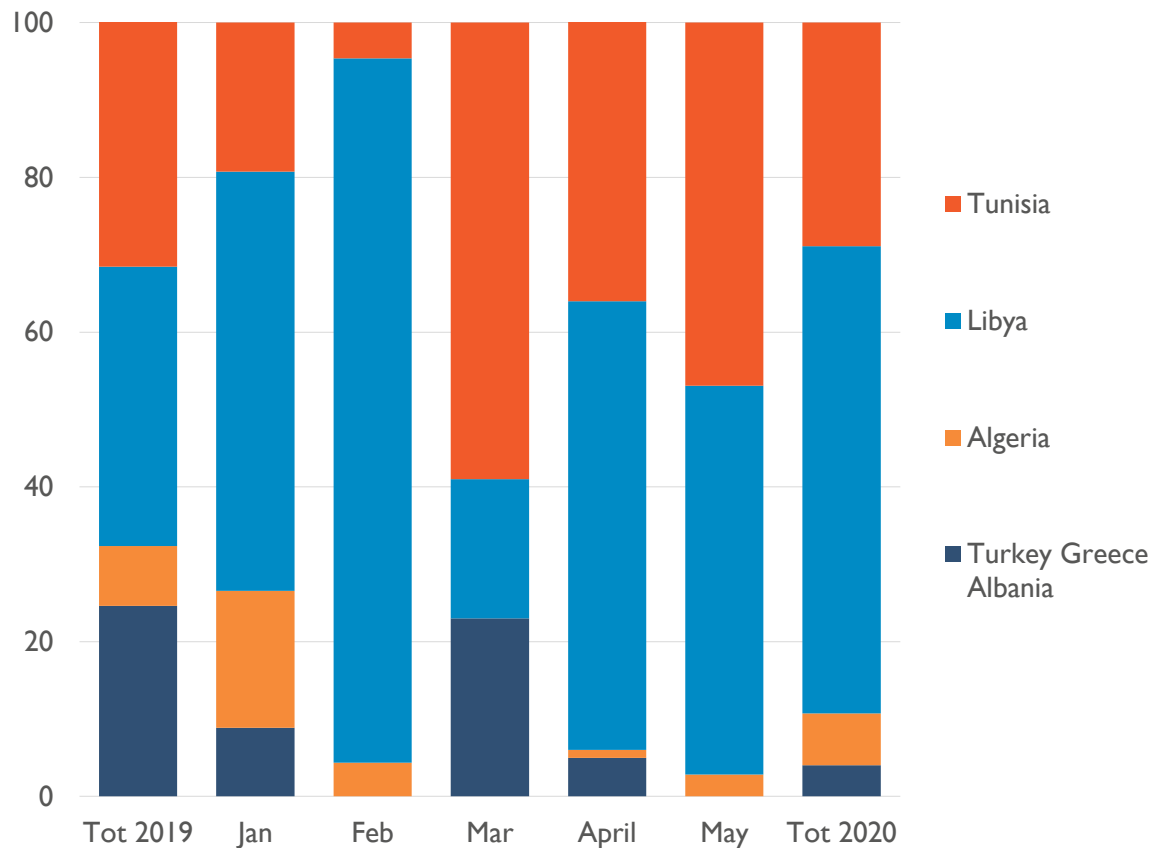


- **1/3** of all arrivals to Spain in **2020** were via the Canary Islands (West African Route) – Gran Canarias, Tenerife, Fuerteventura (in **2019**, **4%** of all arrivals to Spain were via the Canary Islands)

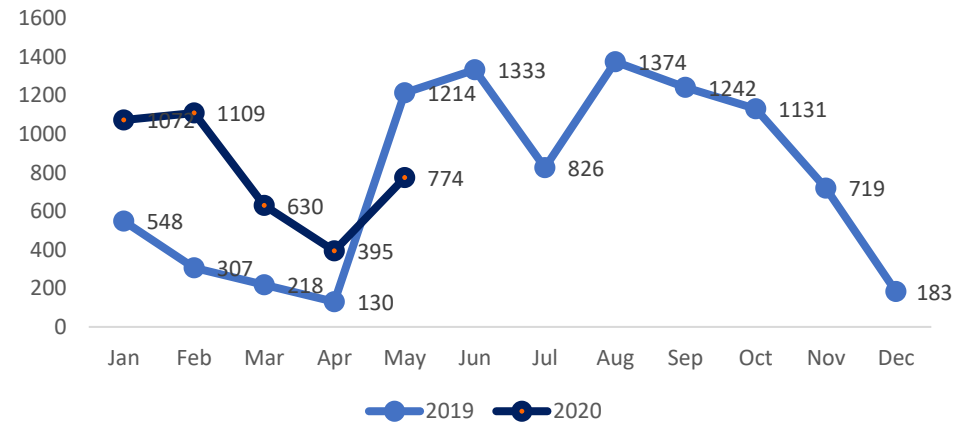
Arrivals to Europe by Routes - Jan/May 2020



Arrivals to Italy by country of departure, 2019-2020



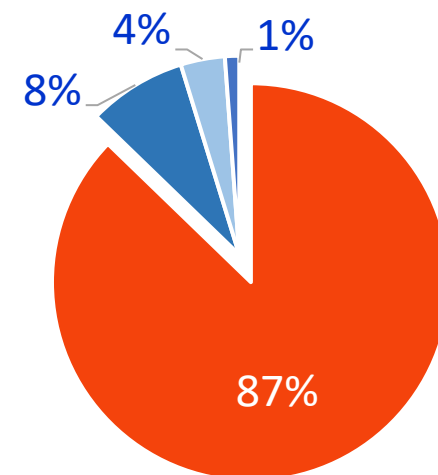
Libya Monthly Disembarkation Trends 2019/2020



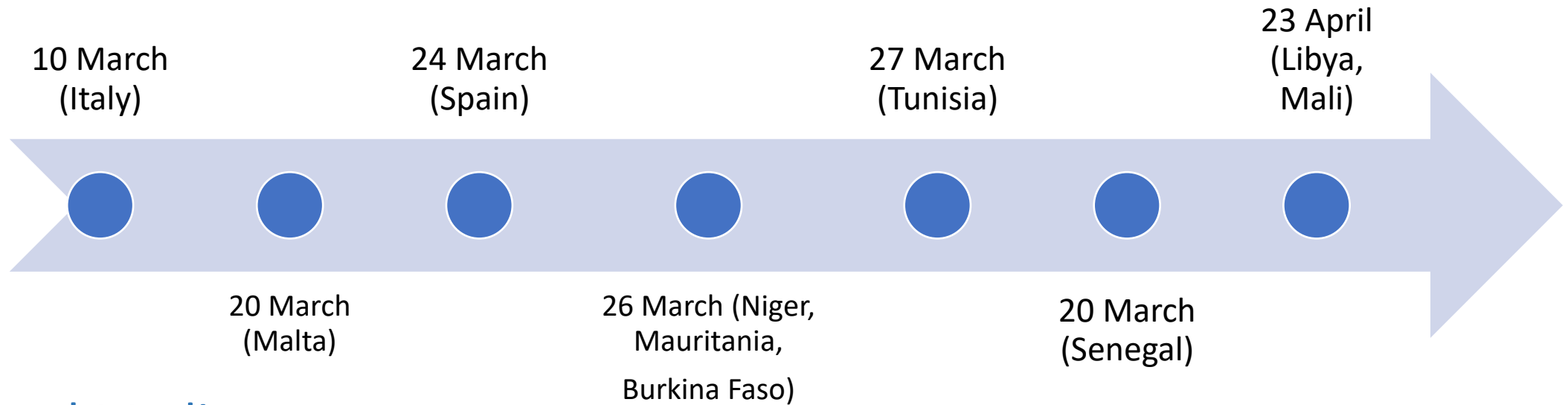
In **2020** so far
3,980 disembarked
60% ↑ compared to
2019

11 Bodies Retrieved
11 Missing

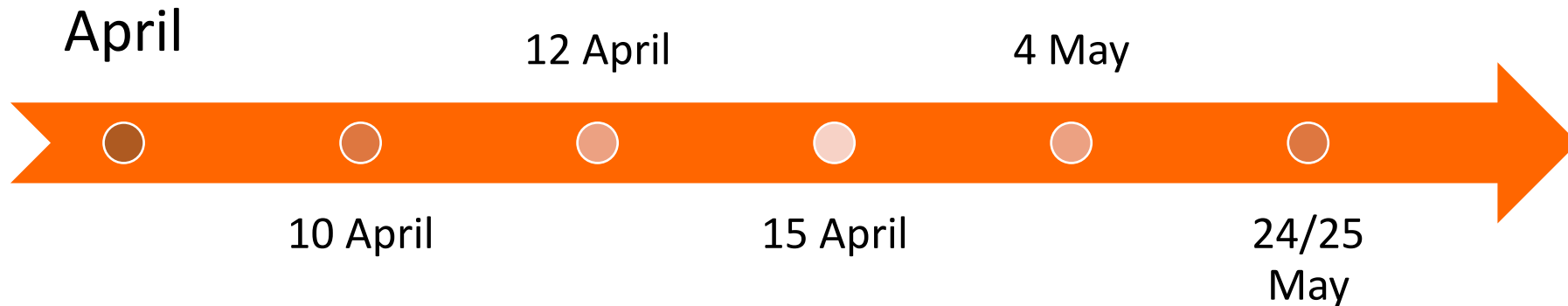
3,472 Men **319** Women **143** Boys **46** Girls



General



Central Mediterranean



860 *Points of Entry and other key locations assessed*

13% *Airports*

42% *Land Border Crossing Points*

15% *Blue Border Crossing Points*

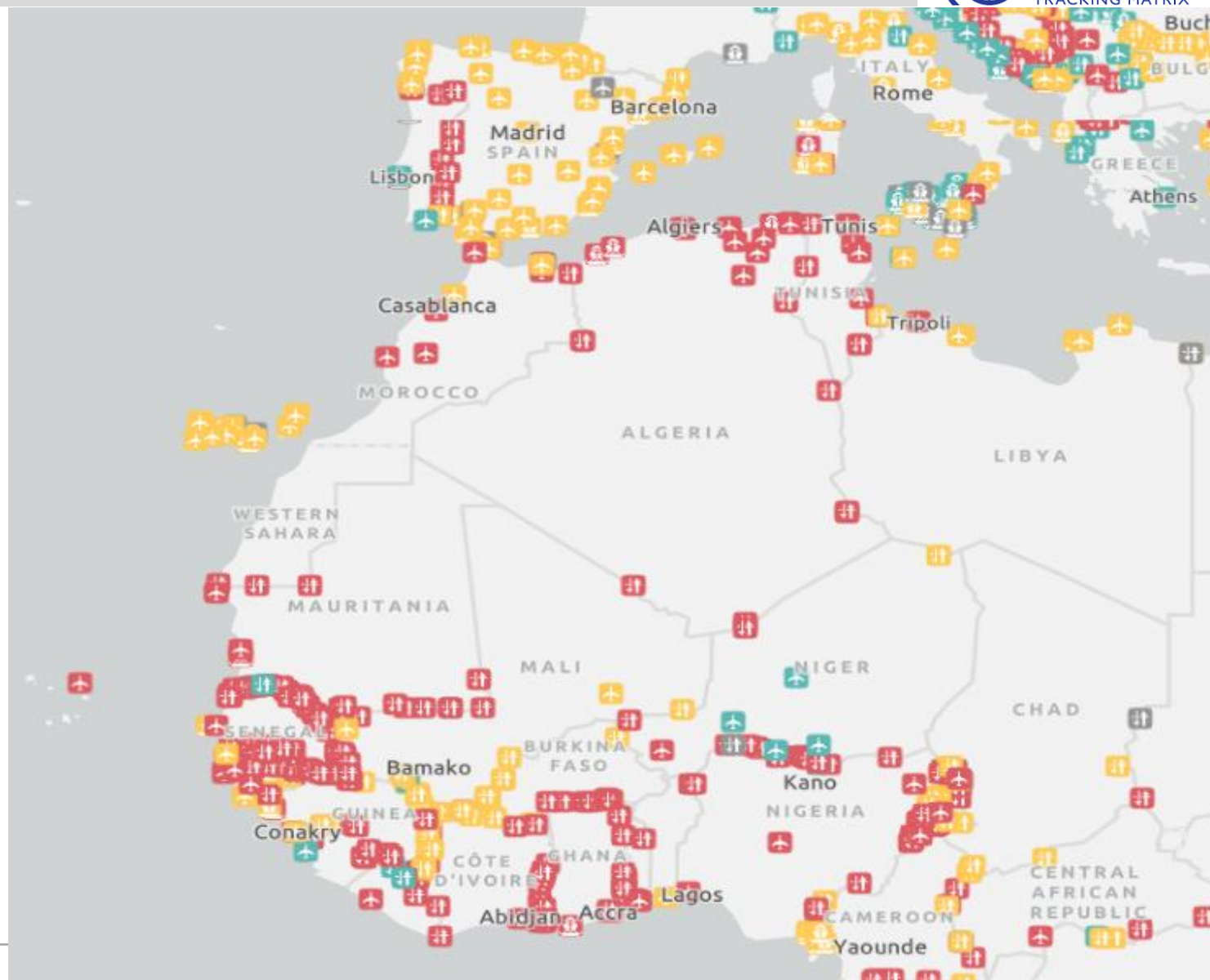
30% Other Key Locations (including internal transit points)

37% *Points of entry fully closed*

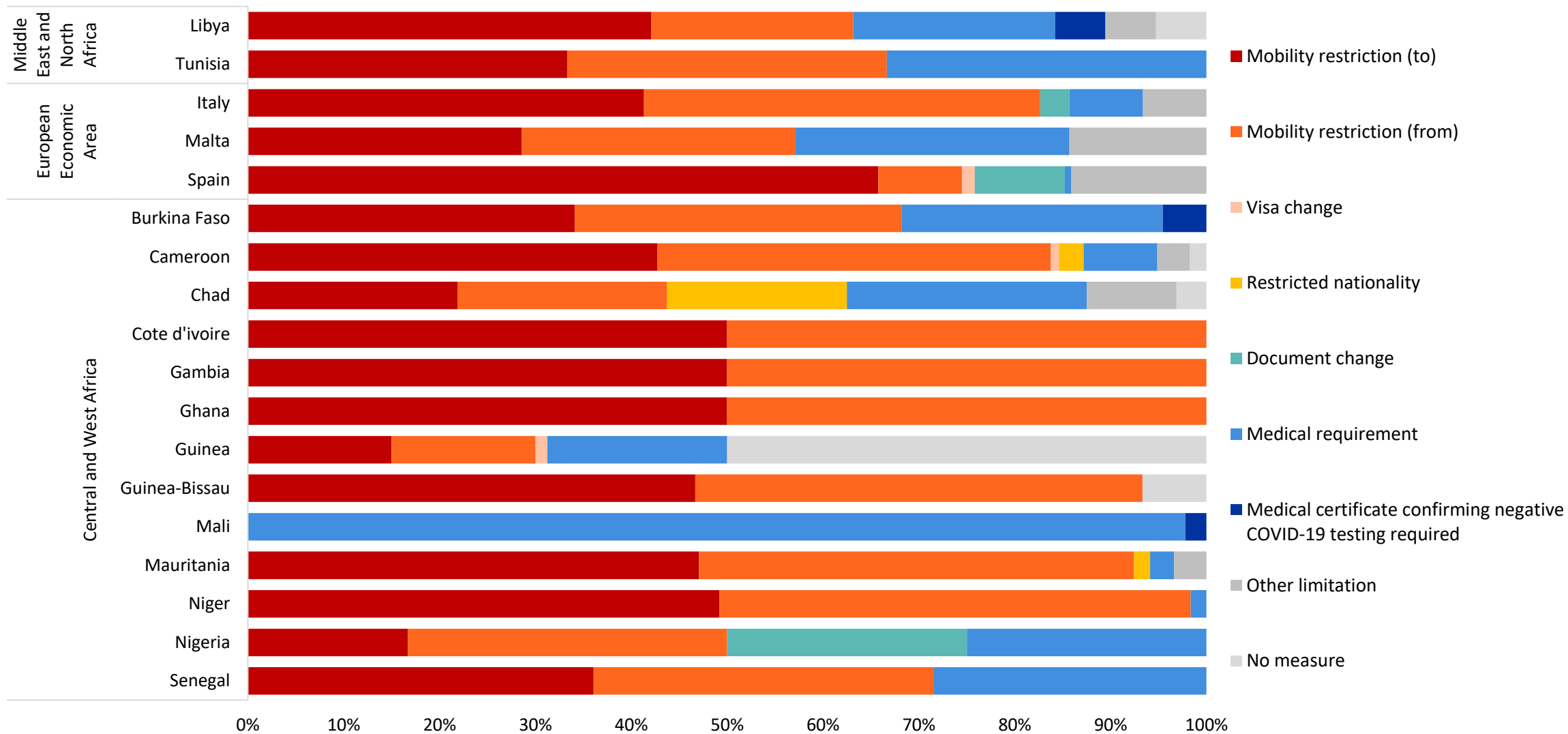
30% *Points of entry partially operational*

11% *Points fully operational*

22% *Other*



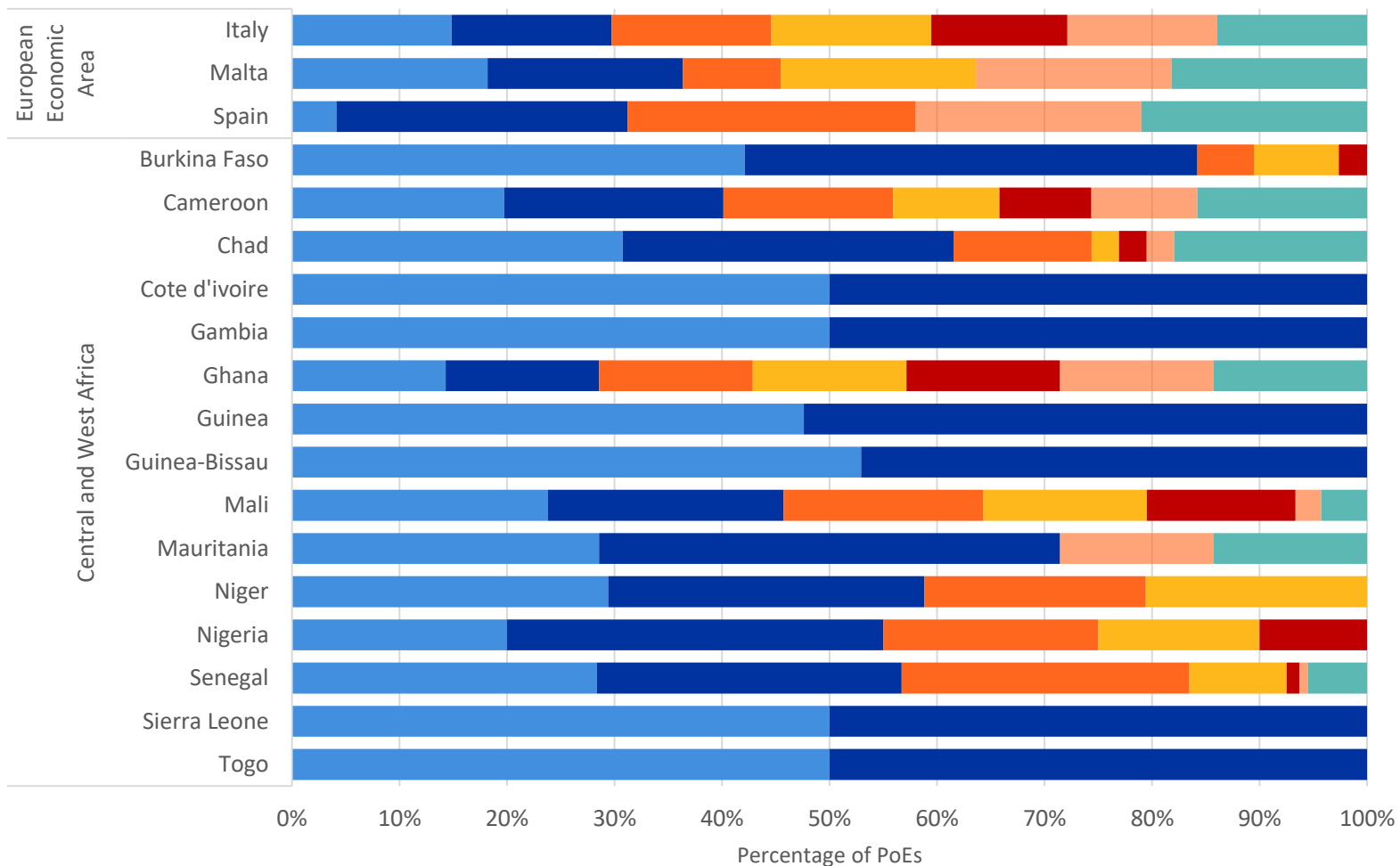
MOBILITY RESTRICTIONS ALONG THE CMR



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

LIBYA MIGRANT EMERGENCY FOOD SECURITY ASSESSMENT

ABOUT THE SURVEY

-  Survey period: 1-23 April 2020
-  1350 migrants surveyed
-  21 / 22 regions (mantika)

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

METHODOLOGY



1350

in-person quantitative interviews of migrants



01-23

April 2020



Based on Migrant Food Security Questionnaire developed by WFP & DTM in 2019

KEY FINDINGS



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%)



1/3

Severely and moderately food insecure

1/3

Marginally food insecure

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.



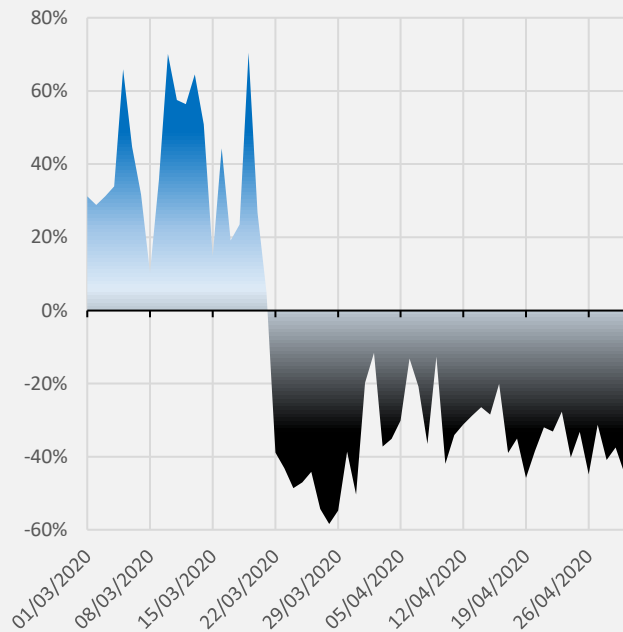
-48%

CHANGE IN FLOWS
OBSERVED FROM
JANUARY TO APRIL 2020

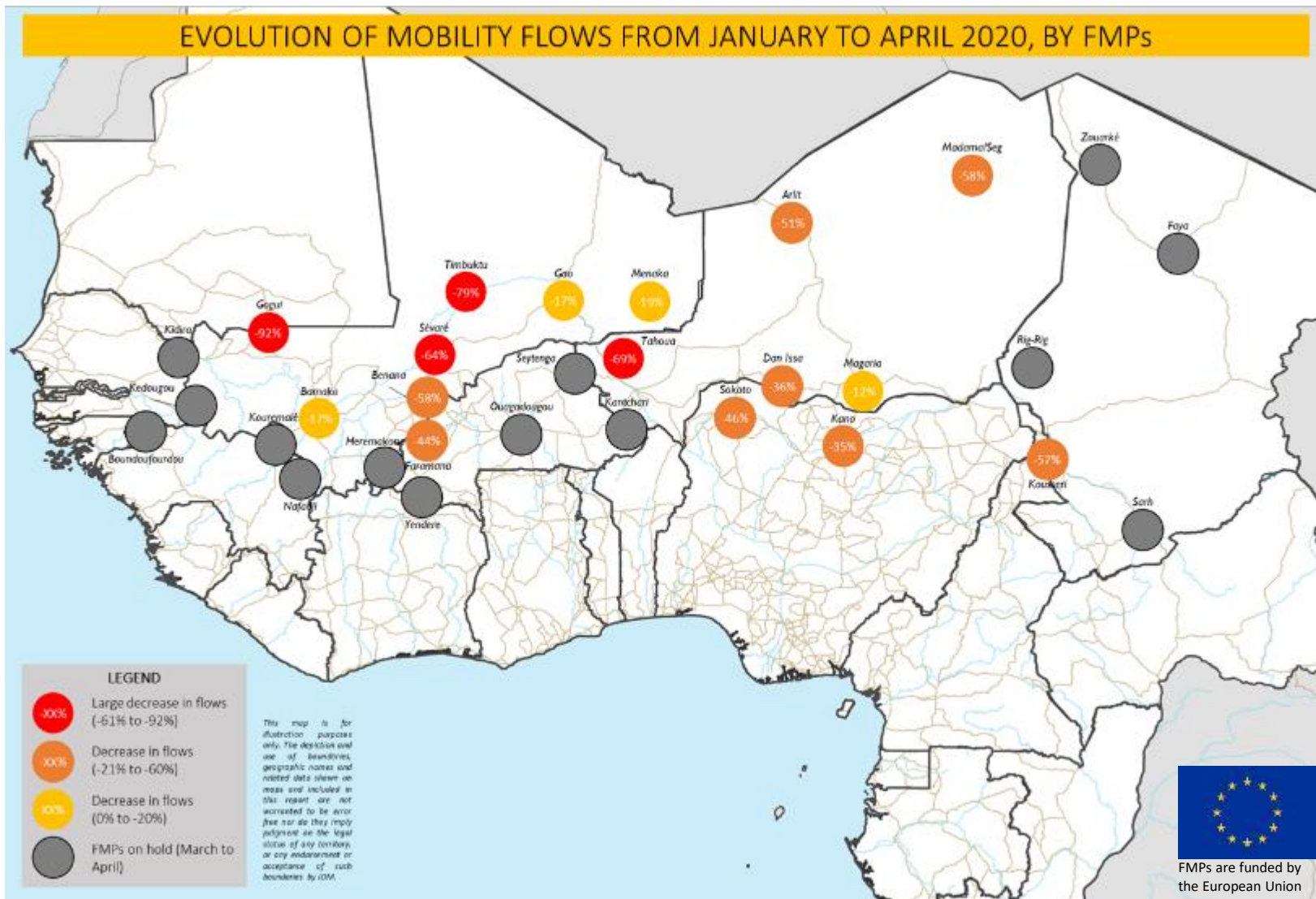
-44%

CHANGE IN FLOWS
OBSERVED BETWEEN 2019
(APR) AND 2020 (APR)

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

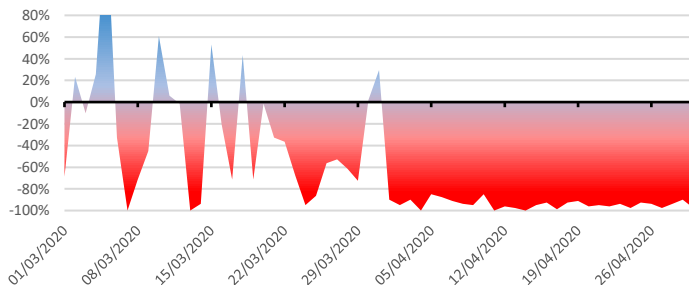


EVOLUTION OF MOBILITY FLOWS FROM JANUARY TO APRIL 2020, BY FMPs

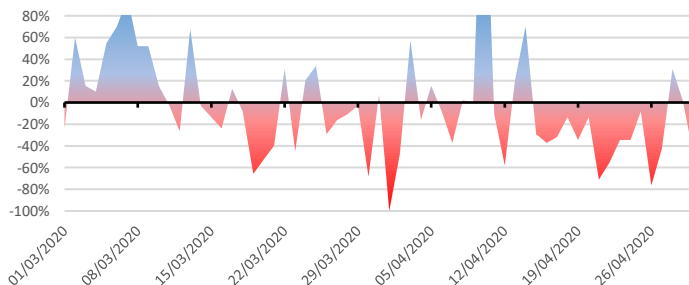


FMPs are funded by the European Union

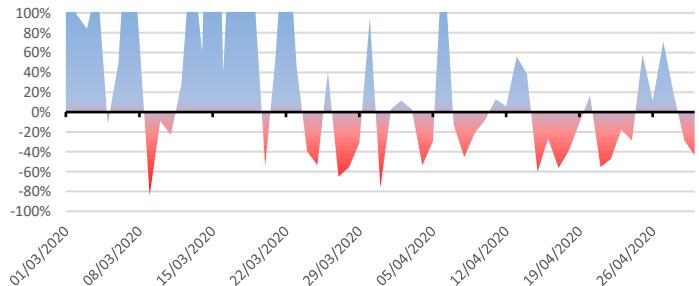
MOBILITY TRENDS IN GOGUI FMP, MALI



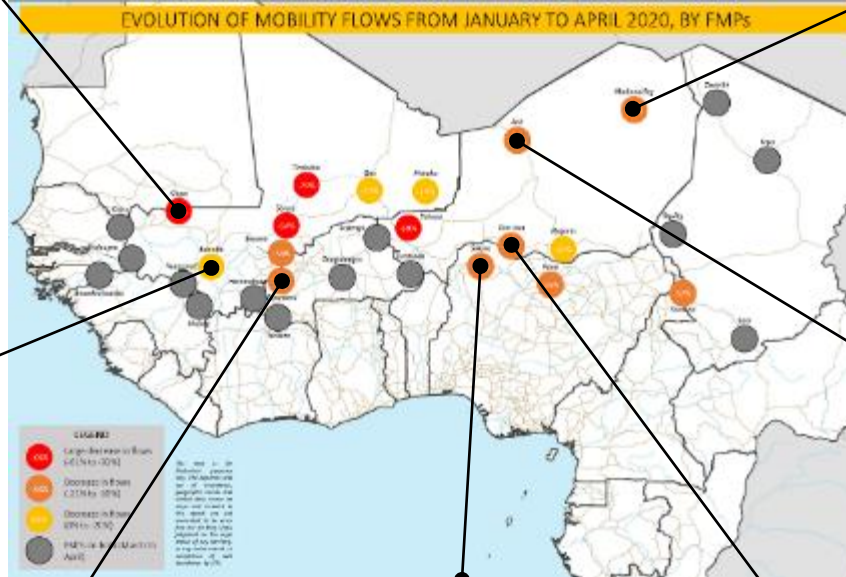
MOBILITY TRENDS IN BAMAKO FMP, MALI



MOBILITY TRENDS IN HEREMAKONO FMP, MALI

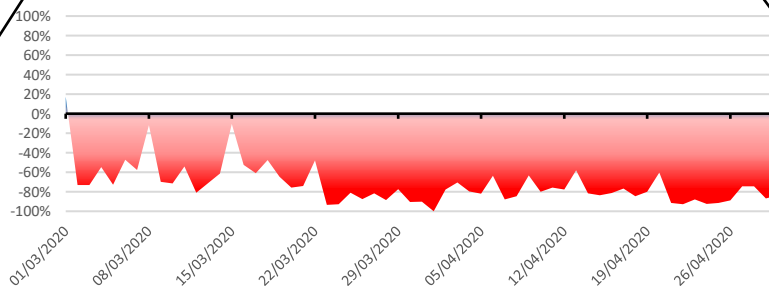


**MOBILITY TRENDS IN WCA
FMPs (BASELINE DAILY
AVERAGE MAR-APR 2019)**

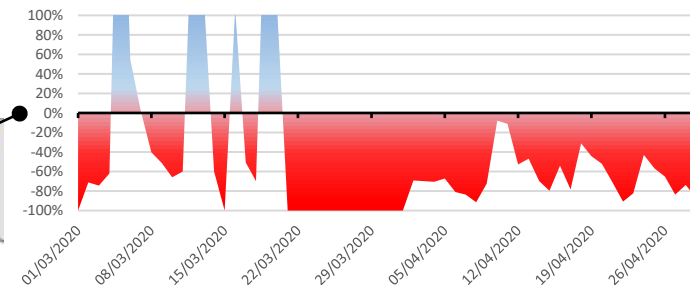


EVOLUTION OF MOBILITY FLOWS FROM JANUARY TO APRIL 2020, BY FMPs

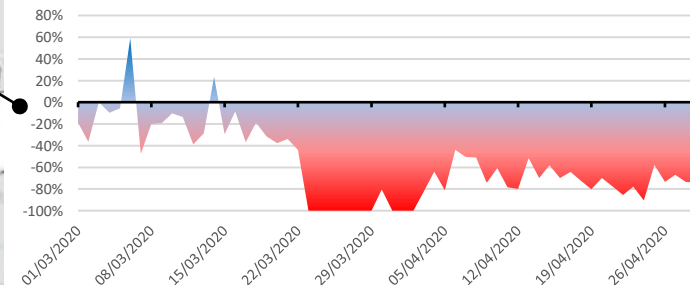
MOBILITY TRENDS IN SOKOTO FMP, NIGERIA



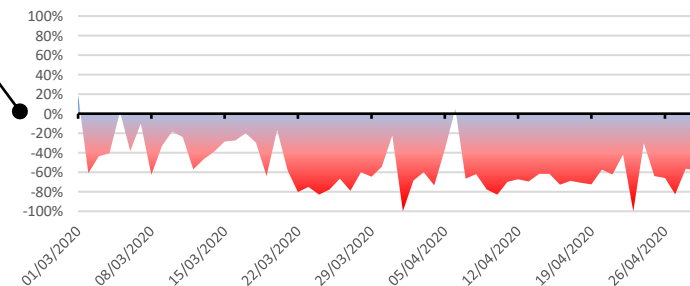
MOBILITY TRENDS IN SEGUEDINE FMP, NIGER



MOBILITY TRENDS IN ARLIT FMP, NIGER



MOBILITY TRENDS IN DAN ISSA FMP, NIGER



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



FMPs are funded by the European Union

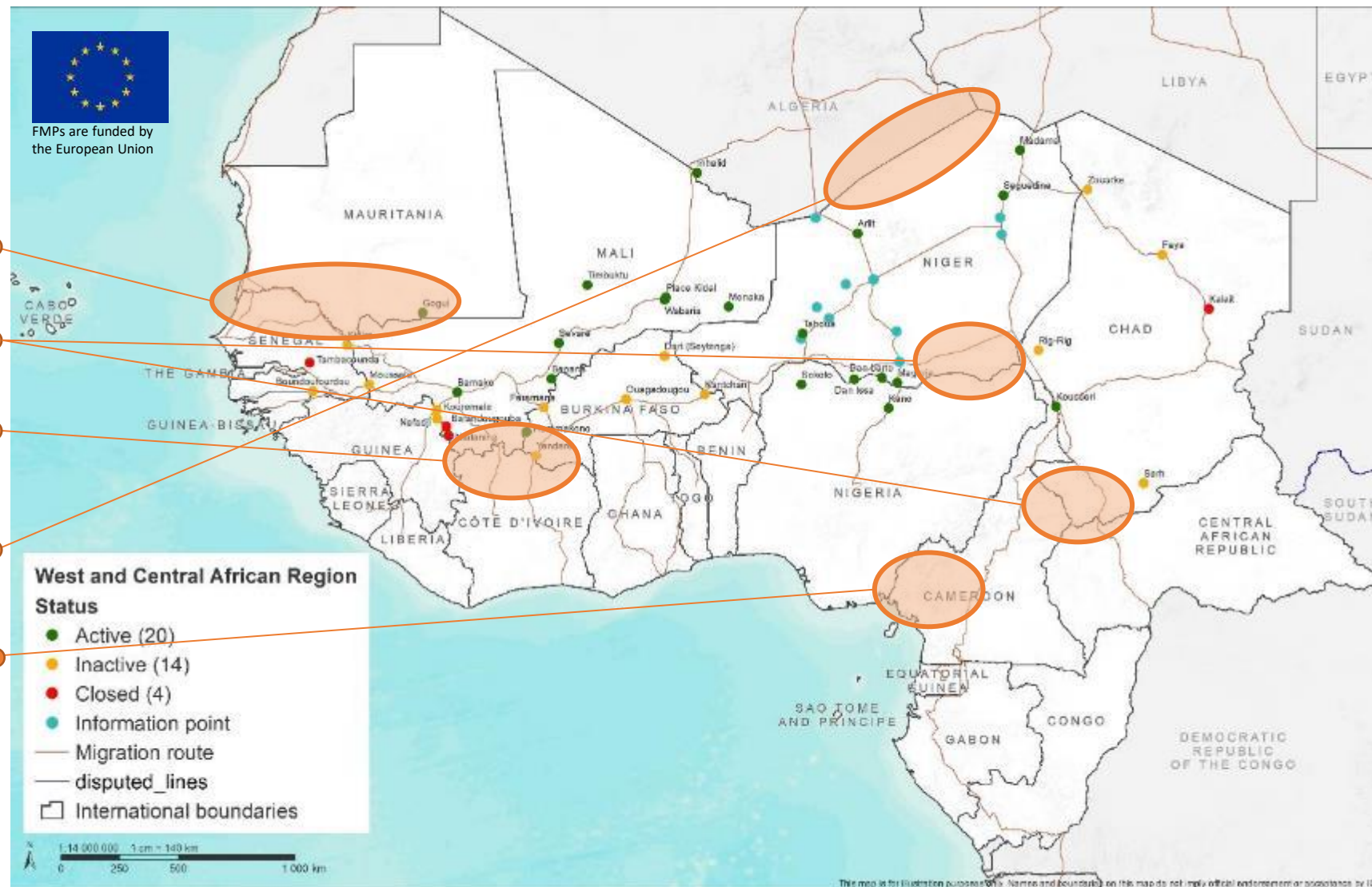
Transhumants ●

Students ●

Seasonal workers ●

Movement to and from Libya/Algeria ●

Internal Displacement ●



The map is for illustration purposes only. Names and boundaries on this map do not imply official endorsement or acceptance by IOM.



MIGRATION.IOM.INT



DISPLACEMENT.IOM.INT

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

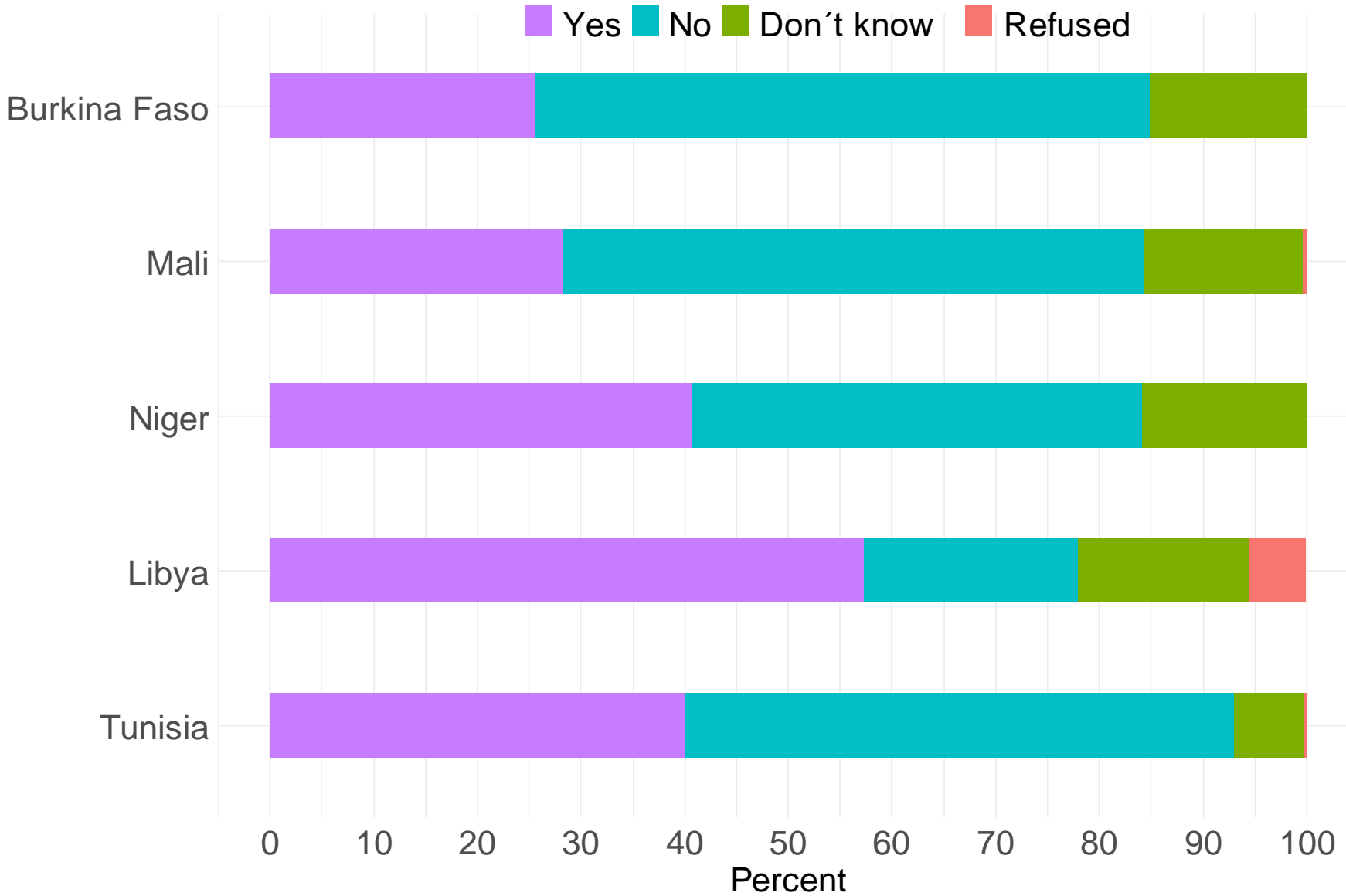
West Africa: Guinea, Nigeria, Niger, Mali, Ivory Coast + Burkina Faso

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.

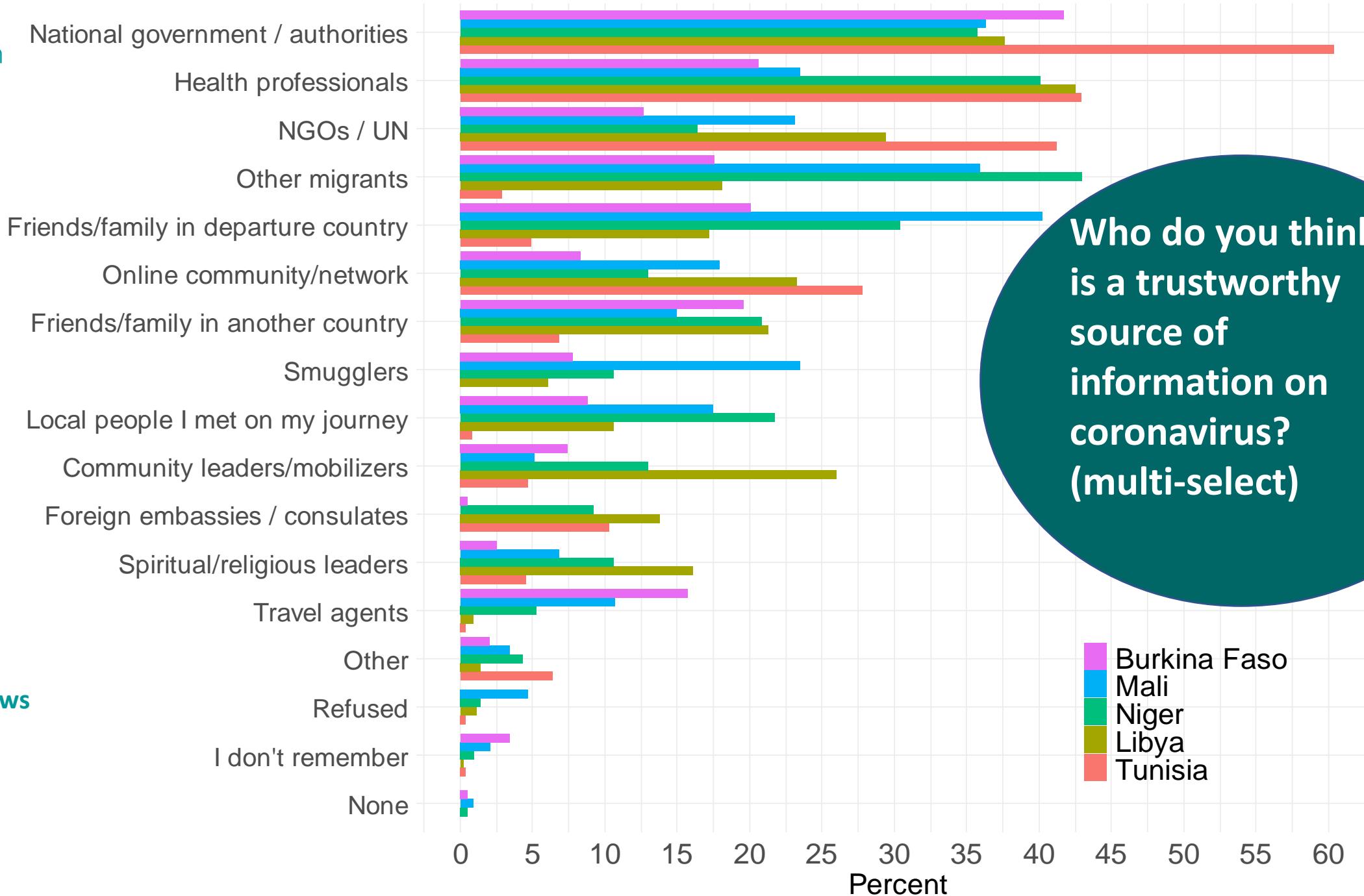
No major differences between men and women.



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?



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

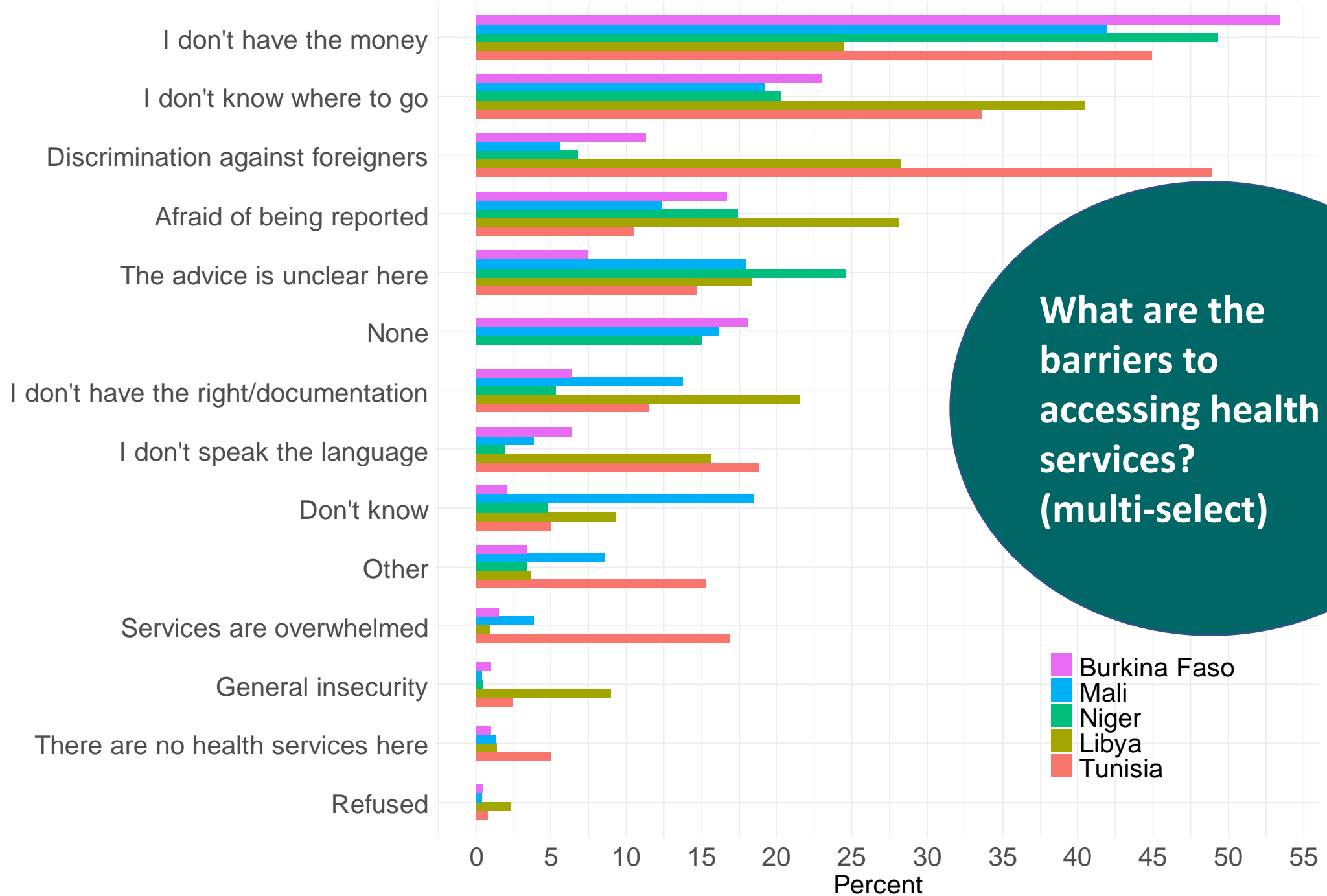
In West Africa the **most used source of information** are other migrants (58%) and national authorities (41%) which are also the two most trusted sources

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%).



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?

Reduced access to work

I am more worried and stressed

Reduced availability of basic goods

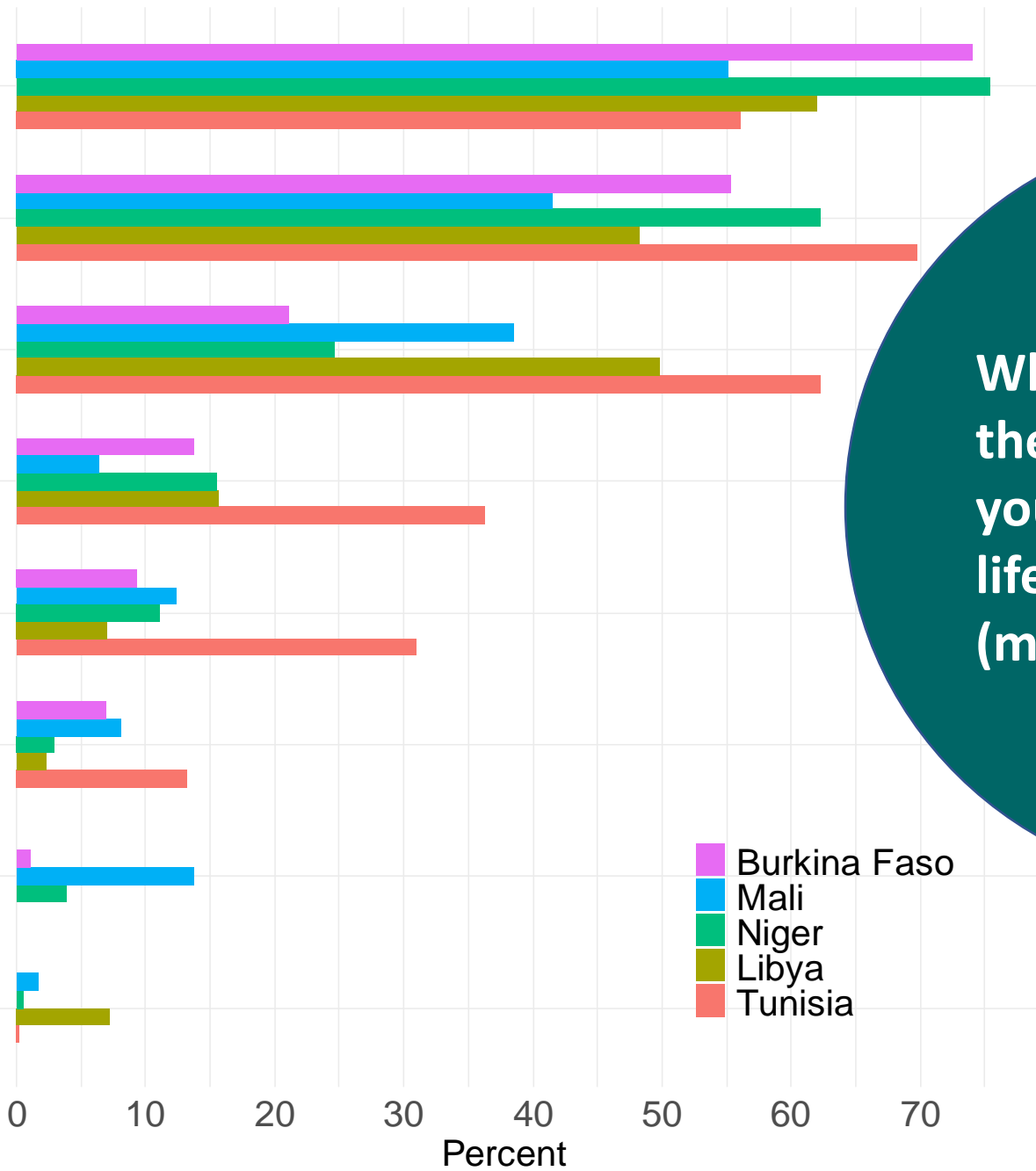
Increased racism and xenophobia

Reduced access to asylum

Other

None

Refused



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

Number of interviews
 Burkina Faso: 204
 Mali: 234
 Niger: 207
 Libya: 436 (n/a: 6)
 Tunisia: 515

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

0 10 20 30 40 50 60 70

Percent

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

Burkina Faso
Mali
Niger
Libya
Tunisia

Number of interviews

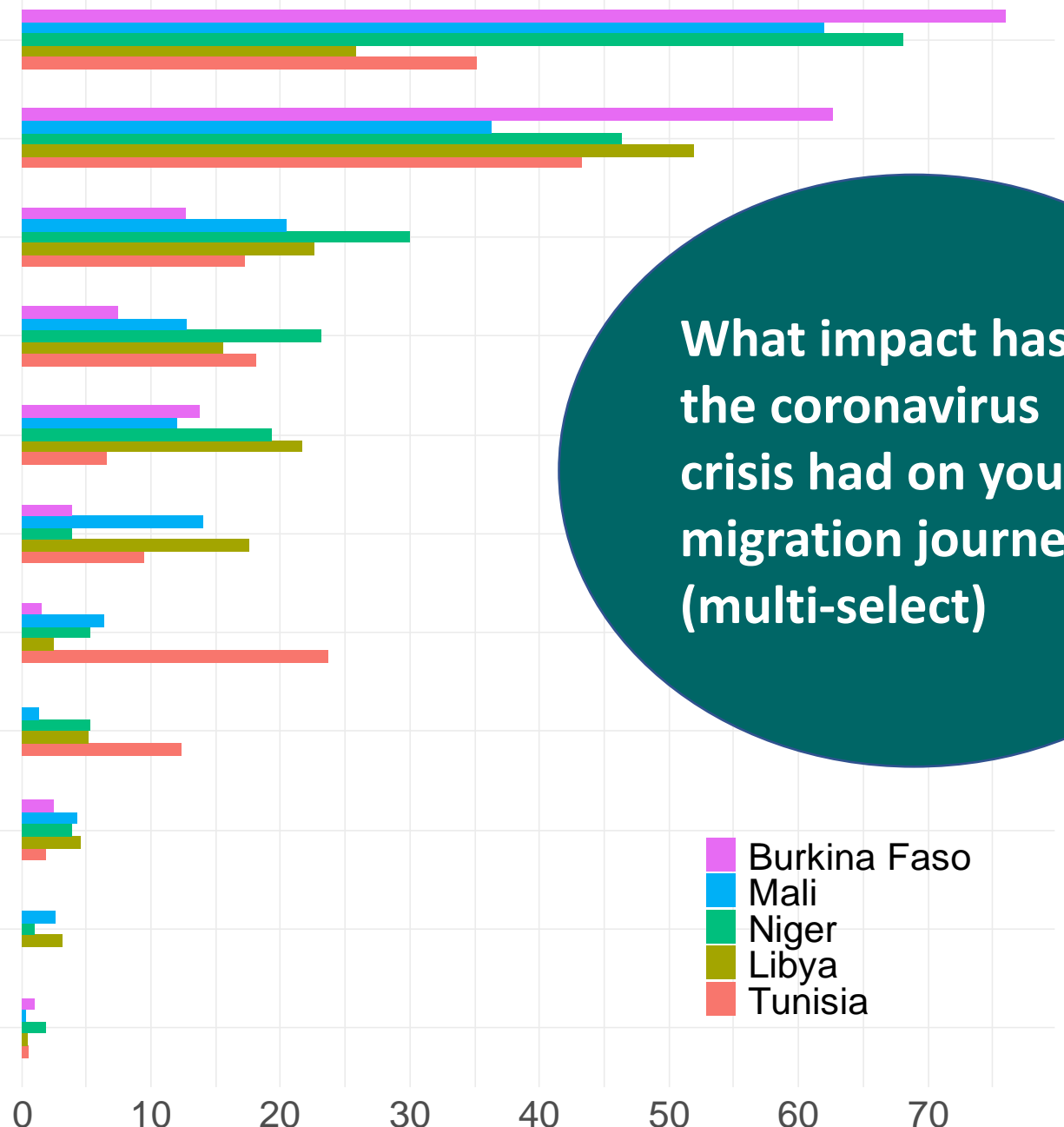
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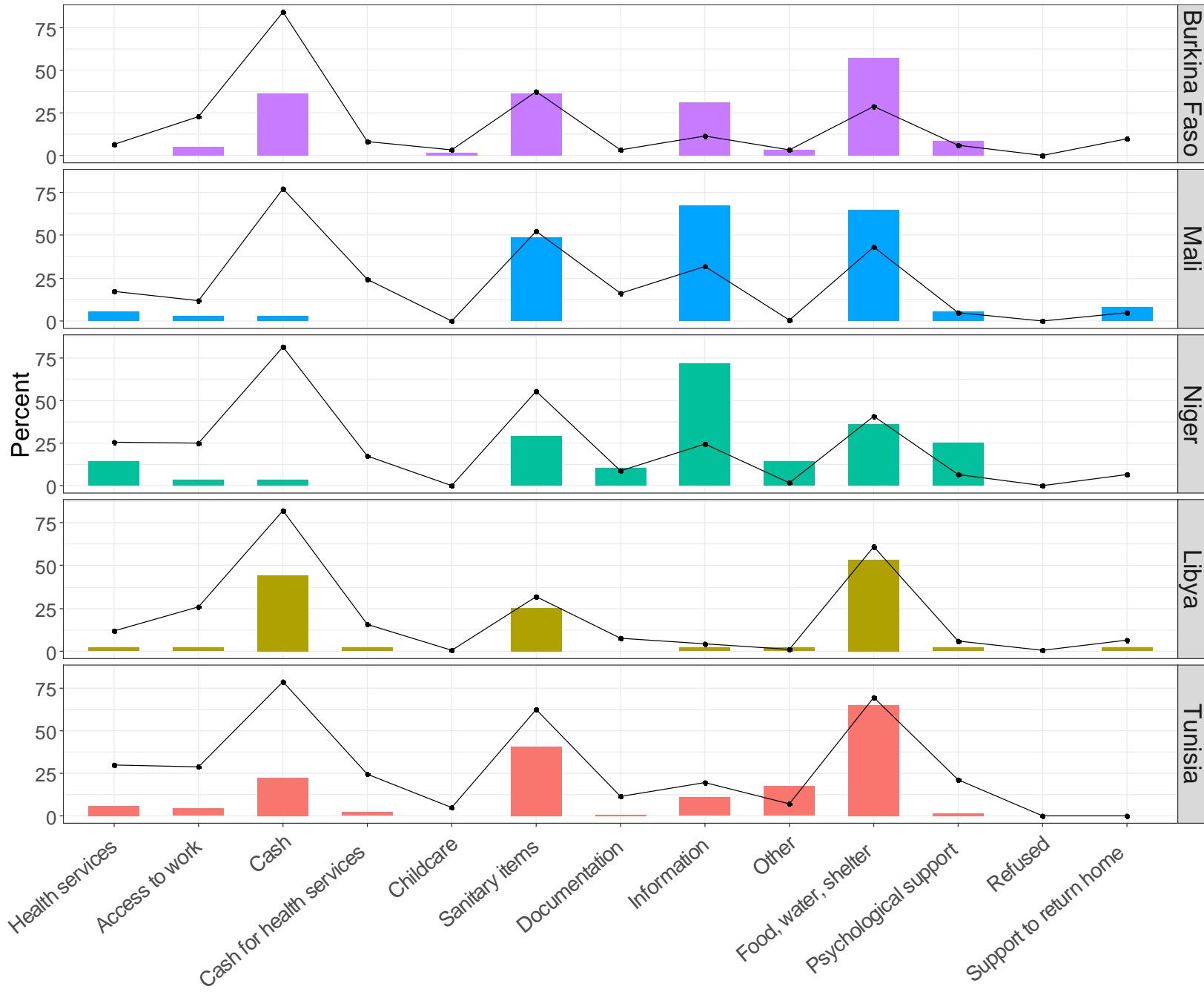


If we break the data down by location within Libya and focus on reduced access to smugglers, we find that this was something reported more by respondents based in coastal cities and not in key cities of arrival to Libya. This may suggest that respondents are still finding ways into the country using 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 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?



Types of assistance received (bars) vs. needed (points) (multi-select)

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



Part of the SSS II programme



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.

State of Evidence: Access to Labour Markets

FINDINGS

Stranded migrants are experiencing increased financial hardships as they struggle to access the informal labour market and other financial resources.



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.

State of Evidence: Discrimination

FINDINGS

Emerging primary evidence that migrants report heightened discrimination from local communities, in particular in Libya and Tunisia.



OPPORTUNITY

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.



GAP

Lack of available research on perceptions of migrants among local communities in the CMR prior to COVID-19.

State of Evidence: Access to Services

FINDINGS

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.



OPPORTUNITY

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



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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Roberto Forin – Global programme coordinator (roberto.forin@mixedmigration.org)

