



IOM COVID-19
IMPACT ON
KEY LOCATIONS OF
INTERNAL MOBILITY

MONTHLY ANALYSIS

12 MAY 2021

PUBLISHER

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Please send any feedback, comments and suggestions related to the Covid-19 Mobility Tracking dashboards and outputs to the DTM Covid-19 Team at dtmccovid19@iom.int

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COVER PHOTO:

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With funding from the Citi Foundation, technical assistance from the International Organization for Migration (IOM) and through the Bogotá Solidaria en Casa de la Mayor de Bogotá program, food aid and toilet kits were delivered to 2,424 families belonging to different groups ethnic groups, who have been affected by the COVID-19 emergency in Bogotá. This union of efforts allowed around 14,500 people from Afro-Colombian communities, Palenqueras, Raizales and indigenous and gypsy peoples to receive these markets made up of basic necessities..

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Methodology & Definitions

IOM COVID-19 Impact on Key Locations of Internal Mobility Monthly Analysis is meant to serve IOM Member States, IOM, UN and voluntary partner agencies, the civil society, including media, as well as the general population in analysing the impact of COVID-19 pandemic on different key locations impacting internal mobility. It is particularly relevant when identifying and addressing specific needs faced by migrants and mobile populations, disproportionately affected by the global mobility restrictions.

The report is based on information provided by IOM field staff, using resources available at the IOM country office level and is accurate to the best of IOM's knowledge at the time of compilation. All information is being constantly validated, including the geo-location and attributes, and through regular assessments and triangulation of information. The updates depend on the time frame within which the information becomes available and is processed by IOM. For this reason, the analysis is always dated and timestamped in order to reflect the reality at a given time. However, as the situation continuously evolves and changes, despite IOM's best efforts, the analysis may not always accurately reflect the multiple and simultaneous restrictive measures being imposed at a specific location.

As the situation of the COVID-19 pandemic continues to evolve, the resulting restrictive measures issued to mitigate the spread, has become increasingly complex and varied. The IOM global mobility database has been updated in a way which reflects the varied stages of measures issued at different times by countries, territories, or areas (C/T/As). As such, the evolution of global restrictive measures, has resulted in varied update timelines and can explain the difference in monthly updates.

This report provides an overview and analysis on the data from a global and regional perspective Key Locations of Internal Mobility and complements the bi-weekly report on Points of Entry (PoE), which focuses on the impact on cross-border movements and can be found [here](#). For more detailed country-specific information and dataset used for the analysis please visit: <https://migration.iom.int/>. For further information on the methodology, definitions and explanation please refer to the [Methodology Framework](#).

Regional maps are available [here](#).

Data is collected on the following location types:

Other Key Locations of Internal Mobility:

- Internal Transit Points (internal transit point inside a given country, territory or area)
- Areas of interest (region, town, city or sub-administrative unit in a given country, territory or area with internal COVID-19 related restrictive measures, including areas with an outbreak of COVID-19 or areas under lockdown/quarantine)
- Sites with a population of interest (including stranded, repatriated and returning migrants, IDPs, nationals, asylum seekers and regular travelers, who have been affected by COVID-19 mobility restrictions at specific locations, for example hotels, temporary reception centers, camps, transit centers and detention centers). For more information on these classifications, please refer to the [IOM Glossary on Migration](#).

While not included in this report, to give a comprehensive view of the COVID-19-related impact on mobility, please also refer to the weekly report on Points of Entry (PoEs) mentioned above, which assesses the impact on cross-border movements at locations such as:

- Airports (currently or recently functioning airport with a designated International Air Transport Association (IATA) code)
- Blue Border Crossing Points (international border crossing point on sea, river or lake)
- Land Border Crossing Points (international border crossing point on land, including rail)

The following operational status is captured for each assessed Internal Transit Point ¹ :

- Fully operational:
 - Open for entry and exit: all travelers can use the PoE or internal transit point.
- Partially operational:
 - Open for commercial traffic only: only transport of goods is permitted, travelers are not allowed to cross;
 - Closed for entry: travelers cannot use this location to enter the country, territory or area;
 - Closed for exit: travelers cannot use this location to leave the country, territory or area;
 - Open for returning nationals and residents only: the location is open to returning nationals and residents only, including military and humanitarian personnel and other special groups for whom entry and exit is permitted according to national procedures in place.
- Fully closed:
 - Closed for both entry and exit: no one is permitted to use the PoE or internal transit point.
- Unknown

1. Operational status is captured in the same way for all Points of Entry. For more information please refer to the bi-weekly PoE report.

Methodology & Definitions

The report systematically captures the following types of mobility restrictions in place at assessed Internal Transit Points :

- Movement restricted to this location
- Movement restricted from this location
- Rules pertaining to identification and/or travel documents needed to enter or disembark at this location have changed
- Medical measures including mandatory quarantine or additional medical checks have been imposed at this location
- Requirement for medical certificate confirming a negative COVID-19 test result
- Other
- None

Additionally, more information is collected on areas of interest, specifically concerning whether:

- Public events were cancelled or postponed
- Schools were closed
- Restricted operating hours for public establishments (café, restaurant, etc.) were adopted
- Alternative working arrangements (working remotely, etc.) were implemented
- Movement outside home was restricted
- Lockdown/quarantine measures were enforced by police or military

Country/territory/area level restrictions are aggregated as following:

- Significant mobility restrictions (E.g. curfew, lockdown, state of emergency, medical requirements for international arrivals and other mobility restrictions)
- No restrictions
- Specific national measures such as: national emergency declared and mandatory quarantine of arrivals from abroad

Affected Populations:

COVID-19 mobility restrictions affect different population categories. For example, for the purpose of this report, stranded migrants are individuals unable to return as a result of mobility restrictions related to COVID-19. This could include economic migrants, students, temporary visa or work permit holders. It could also include other populations such as tourists who may be stranded owing to COVID-19-related travel restrictions. These populations may be seeking repatriation or assistance while remaining abroad.

Other affected populations include regular travelers, nationals, returnees, irregular migrants, internally displaced persons (IDPs), migrant workers and refugees. The various populations are affected in diverse ways across the different types of assessed locations, including but not limited requirements for additional documentation, temporary relocation, quarantine or medical screening, up to an inability to continue their intended travel.

Public Health Emergency Preparedness and Response Capacities (COVID-19) at Internal Transit Points:

To understand public health emergency preparedness and response capacities with regard to the COVID-19 pandemic, additional questions are asked about specific public health interventions that have been put in place in the specified locations including both internal transit points as well as PoEs. These include risk communication and community engagement, infection prevention and control, and measures to detect, manage and refer ill travelers suspected of having COVID-19, existence of standard operating procedures, health screening, presence and functionality of a referral system for suspected COVID-19 cases, and the availability of an isolation space for suspected cases before referral to designated health facility.

List of acronyms used throughout the report

- C/T/As: countries, territories or areas
- DTM: Displacement Tracking Matrix
- IDPs: Internally Displaced Persons
- ITP: Internal Transit Point
- PoE: Point of Entry
- p.p.: Percentage Point ²
- SOPs: Standard Operating Procedures

Data is geographically aggregated by IOM Regional Offices. The list of countries under each IOM Regional Office can be found here: <https://www.iom.int/regional-offices>

2. Not to be confused with per cent, percentage point (p.p.) refers to an increase or decrease of a percentage rather than an increase or decrease in the raw number.

Executive summary

The current COVID-19 pandemic has affected global mobility both in terms of international mobility restrictions and restrictive measures on internal movement. To better understand how COVID-19 affects global mobility, IOM has developed a global mobility database to gather, map and track data on these restrictive measures impacting movement. This report provides a global perspective of the COVID-19-related measures and restrictions imposed by countries, territories and areas impacting internal movements, as well as the resulting effects on stranded migrants and other population categories. The information in this report relies on a compilation of inputs from multiple sources, including from IOM staff in the field, DTM reports on flow monitoring and mobility tracking.

Data has been collected between 13 March 2020 and 6 May 2021. Data for 3 per cent of the assessed locations has been updated since the beginning of May, while data for 4 per cent of the assessed locations has been updated in April, with 11 per cent of the assessed locations that have been updated in March, while 3 per cent was last updated in February. The data for the remaining assessed internal locations was last updated before February 2021 (specifically, 1% in January, 4% in December, 3% in November, 4% in October, 3% in September, 7% in August, 7% in July, 16% in June, 11% in May, 16% in April and 9% in March). For more information see Table 3 in the Annex.

Through this exercise, IOM collected information from 186 C/T/As across all IOM regions. Among these, 39 per cent (72 C/T/As) declared a national emergency due to the COVID-19 pandemic and 77 per cent introduced some sort of mobility restriction. Some restrictive measures that have been adopted are quarantine for all international arrivals (68%) and the suspension of the issuance of new visas (28%). On the other hand, some facilitations for stranded populations have also been adopted, such as the automatic extension of expired visas and working permits (27%) and the removal of fines for visa overstays and expired residency and working permits (32%).

Key Locations of Internal Mobility (Internal Transit Points, Areas of Interest, and Sites with Populations of Interest):

- IOM assessed 1,586 key locations located in 141 C/T/As, including 395 internal transit points, 527 areas of interest and 664 sites with population of interest.
- Assessed internal transit points and areas of interest were mostly situated in Asia and the Pacific, while the highest number of assessed sites with population of interest were from the East and Horn of Africa and the European Economic Area.
- 89 per cent of the assessed internal transit points were fully operational, with 6 and 3 per cent which were respectively either fully closed or partially operational. Moreover, 49 per cent of the assessed internal transit points had introduced medical measures within the location.
- The most common restrictive measures in place in the assessed areas of interest included the cancellation of public events (52% of the assessed areas), school closure (49%), alternative working arrangements (48%) and restricted operating hours for public establishments (46%). Moreover, non-essential movements outside home were restricted in 15 per cent of the assessed areas while lockdown or quarantine measures were enforced by police or military in 21 per cent of the cases.
- Stranded foreign nationals were reported in 64 per cent of the assessed sites with populations of interest, while in 20 and 14 per cent of cases respectively nationals and foreign nationals on their way to their country of origin were reported to be present in the assessed sites with population of interest.

I. National-level mobility restrictions

39%

Declared national emergency

77%

imposed significant mobility restrictions⁴

27%

automatically extended visas and working permits

186

Assessed C/T/As

68%

imposed mandatory quarantine for international arrivals

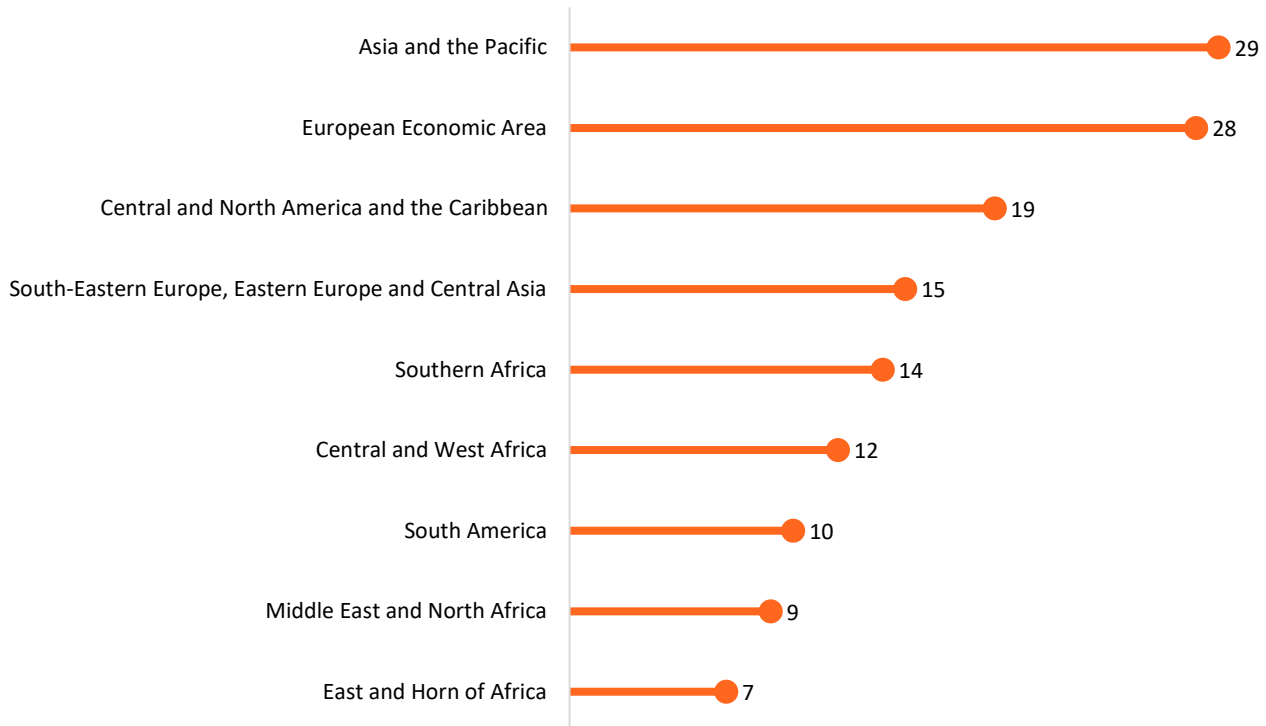
32%

removed fines for visa overstays, expired residency and work permits

28%

suspended the issuance of new visas

Number of C/T/As which imposed significant mobility restrictions by IOM region



4. These mobility restrictions include, among others, curfew, lockdown, checkpoints and patrols.

2. Key Locations of Internal Mobility: Scope and Coverage

395

Assessed Internal Transit Points

1,191

Assessed Areas and Sites

141

Assessed C/T/As

The current COVID-19 pandemic has also affected global mobility in the form of various internal travel disruptions and restrictions. To better understand how COVID-19 affects internal mobility, globally, IOM has included internal transit points as well as assessed areas and sites in the global mobility database. IOM maps and gathers data on the locations, status and restrictions at internal transit points as well as other sub-administrative such as areas of outbreak of COVID-19 or areas under lockdown/quarantine, and sites where populations of interest, such as stranded foreign nationals and IDPs, are particularly affected.

This report provides an overview and analysis on the data from a global and regional perspective, using data updated as of **6 May 2021**.

IOM has assessed a total of 1,586 locations (including internal transit points, areas of interest and sites with population of interest) in **141 countries, territories and areas** so far. The highest share of these assessed locations, which remained consistent, was sites with populations of interest (42%), followed by areas of interest and important internal transit points between cities and regions, with 33 and 25 per cent respectively. More details can be found in Table 1 in the Annex.

Table 1: Number (#) and percentage (%) of assessed locations by type and IOM region

Region	Total		Internal transit points		Areas of interest		Sites with population of interest		No. of C/T/As
	#	%	#	%	#	%	#	%	#
Asia and the Pacific	316	100%	121	38%	105	33%	90	28%	27
Central and North America and the Caribbean	157	100%	2	1%	103	66%	52	33%	18
West and Central Africa	183	100%	102	56%	30	16%	51	28%	10
East and Horn of Africa	168	100%	21	13%	20	12%	127	76%	9
European Economic Area	211	100%	3	1%	97	46%	111	53%	25
Middle East and North Africa	153	100%	26	17%	64	42%	63	41%	17
South America	66	100%	6	9%	19	29%	41	62%	9
South-Eastern Europe, Eastern Europe and Central Asia	299	100%	114	38%	77	26%	108	36%	15
Southern Africa	33	100%	0	0%	12	36%	21	64%	11
Total	1586	100%	395	25%	527	33%	664	42%	141

3. Overview of Internal Transit Points

395

Internal Transit Points
assessed in 34 C/T/As

89%

of the assessed internal transit
points are fully operational
(no change compared to the
previous report)

49%

of the assessed locations
imposed medical restrictions
(no change compared to the
previous report)

Of the **395 internal transit points** monitored in 34 countries, territories or areas, a large majority were reported as **fully operational (89%**, i.e. no change compared to the previous report). The remaining internal transit points are either **fully closed (6%**, i.e. no change compared to last month) or **partially operational (3%**, i.e. no change compared to one month ago), with 3 per cent of the assessed internal transit points whose operational status is unknown. Moreover, approximately half of the assessed locations (193 out of 395, 49% of the total: no change compared to the previous report) have imposed medical restrictions, such as quarantine or medical screening.

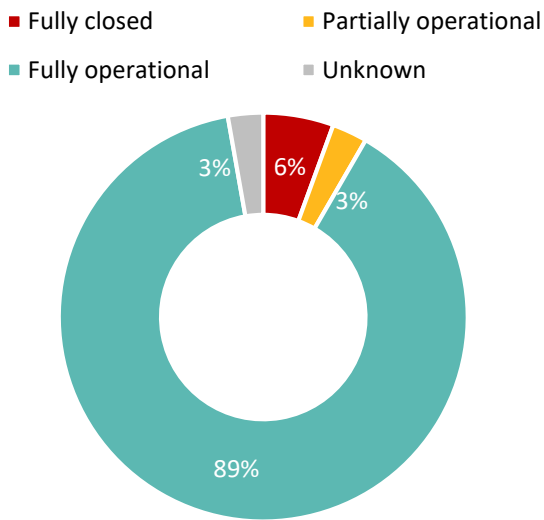
IOM-assessed internal transit points were mostly situated in Asia and the Pacific (31%), South-Eastern Europe, Eastern Europe and Central Asia (29%) and West and Central Africa (26%). Specifically, almost two thirds of the assessed internal transit points were from only four countries: Turkey (81 assessed internal transit points, 21% of the total), Mali (74, 19%), Bangladesh (50, 13%) and the Philippines (44, 11%). The operational status of the assessed internal transit points appears very similar across the abovementioned regions with a majority of locations that are fully operational. For more information, please refer to Table 4 in the Annex.

In 236 out of the 395 assessed internal transit points (60% of the total, i.e. no change compared to the previous report), the foreseen duration of the restrictions was unknown (i.e. information was unavailable). In 22 and 14 per cent of the cases the restrictions will be in place for 14 days to one month or less than 14 days, respectively. Only in 15 internal transit points (4% of the total), the restrictive measures will be valid for more than one month.

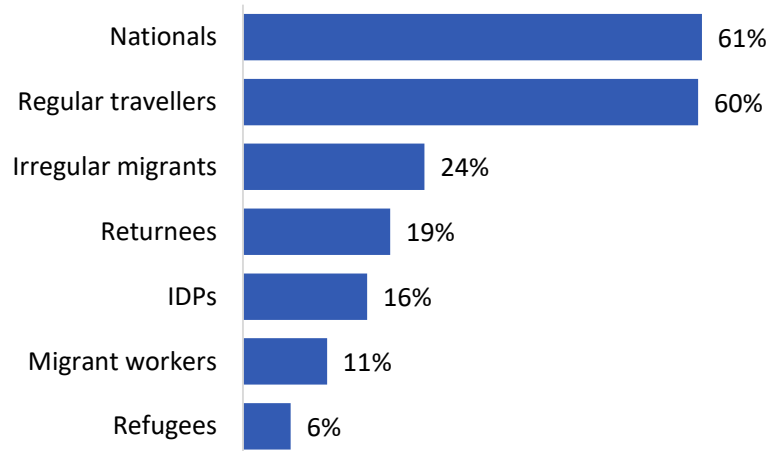
These restrictions had an **impact** on all categories of population (for more details, see Table 5 in the Annex), especially on **nationals** (affected in **61%** of the assessed locations) and **regular travelers (60%)**. **Irregular migrants** (in **24%** of the assessed internal transit points), **returnees (19%)** and **IDPs (16%)** have also been affected by the abovementioned restrictions. Finally, a less significant impact has also been reported on **migrant workers** (in **11%** of the assessed locations) and **refugees (6%)**.

3. Overview of Internal Transit Points

Operational status of the assessed internal transit points



Percentage of internal transit points with affected population



Percentage of Internal Transit Points

Global map of assessed internal transit points and their operational status



Disclaimer: This map is for illustration purpose only. The boundaries and the names shown and the designations used on this map do not imply official endorsement or acceptance by IOM.

3. Overview of Internal Transit Points

Public Health Measures

The global mobility database collects information on public health measures in assessed internal transit points through IOM's missions participating in this exercise. The data are collected in five categories, covering various aspects of public health capacity at the PoEs. The categories are: 1) Standard Operating Procedures; 2) Risk communication and community engagement; 3) Infection prevention and control; 4) Surveillance; and 5) Referral system. Among the 395 internal transit points assessed by country missions, response rates for these public health questions range from 31 to 65 per cent. Please see Table 6 in the Annex for more details on specific questions asked and the response rate for each question.

For the detection, management and referral of ill travellers, standard operating procedures were reported to be in place at 49 out of 255 (19%) of identified internal transit points.

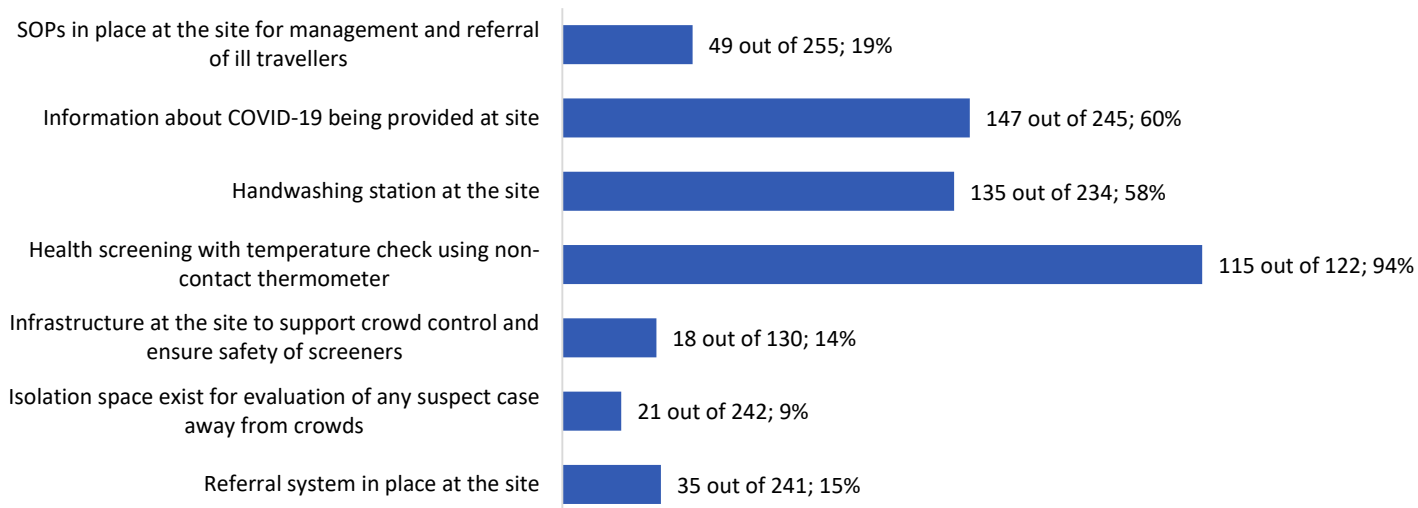
On risk communication and community engagement, 147 out of 245 (60%) assessed internal transit points reported that information on COVID-19 was provided to travellers at the site through leaflets, posters or announcements. In 135 out of 234 (58%) internal transit points, handwashing stations were available as an infection prevention and control measure.

Health screening using non-contact thermometers was reported in 115 out of 122 (94%) assessed internal transit points. Moreover, 18 out of 130 (14%) assessed internal transit points reported that there was infrastructure in place to support crowd control and ensure safety of screeners, whereas 21 out of 242 (9%) assessed internal transit points reported that the availability of an isolation space for suspected COVID-19 cases, prior to their appropriate referral.

A functional referral system was reported to be in place at 35 out of 241 (15%) assessed internal transit points.

Examining these public health measures and interventions across various levels (e.g. local, national, regional) can facilitate the detection, assessment, and notification or reporting of events that can collectively contribute to prompt and effective responses to public health emergencies such as COVID-19.

Assessed internal transit points with the relevant public health measure*



*Covered points with response to each public health question.

Disclaimer: The reported findings on Public Health measures should be considered with important caveats. The descriptive summary provided in this report is aimed at providing a rapid capture of assessed ITPs in terms of these public health measures and prompt more detailed rigorous evaluation. Data collection is conducted by country offices with varying resources and capacity, as such assessment coverage, data collection methodologies and modalities vary. Data validation, such as verification from those designated International Health Regulation (IHR) focal points and/or competent authorities at each ITP is not presently possible. These factors impose limitations to the ability to conduct analysis across POE settings within or between countries, territories and areas and comparisons externally at regional and global levels. Furthermore, the limitations of the exercise may impact the consistency of the captured public health measures, and the inter-rater reliability across different enumerators, influencing the quality of the data.

4. Overview of Areas and Sites of Interest

4.1. Areas of Interest

527

areas assessed
in 82 C/T/As

20%

of the assessed areas are located in
the IOM region of Asia and the Pacific

52%

of the assessed areas have
restrictions on public events

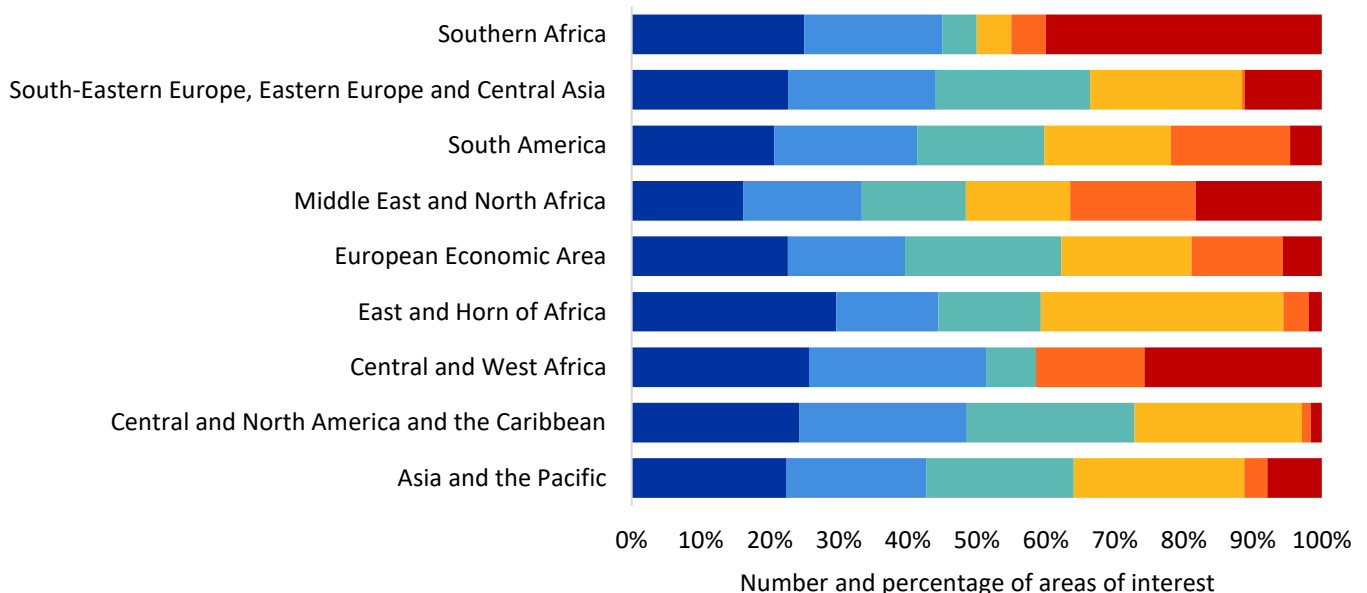
In total, 527 areas of interest were assessed in 82 countries, territories and areas (increase of 7 areas since last report). These areas were chosen from sub-national units of interest, such as areas of outbreak of COVID-19 or areas under lockdown/quarantine. Assessed areas consist of cities, towns and regions. Cancellation of public events, school closures, restricted operating hours for public establishments and alternative working arrangements can be listed as restrictive measures imposed in these areas.

The IOM region of Asia and Pacific continued to have the highest share of assessed areas (105 out of 527 assessed areas or 20%), along with followed by the IOM region of Central and North America and the Caribbean (103 out of 527 assessed areas or 20%). The IOM region of European Economic Area followed with 18 per cent, IOM Region of South-Eastern Europe, Eastern Europe and Central Asia had 15 per cent and the IOM region of Middle East and North Africa had 12 per cent of the assessed areas (97, 77, and 64 areas respectively).

The type of restrictive measures being imposed on the assessed areas varied. In 52 per cent of assessed areas (276 out of 520 assessed areas) public events were cancelled or postponed. Schools were closed also in 49 per cent of the assessed areas (260 areas). Restricted operating hours for public establishments (café, restaurant, etc.) and alternative working arrangements (working remotely, etc.) were in place in 46 and 48 per cent of the assessed areas (245 and 251 areas respectively). Movement outside home was restricted in 15 per cent of the assessed areas while lockdown or quarantine measures were enforced by police or military in 21 per cent of them (80 and 113 assessed areas). The largest proportion of areas (34%) reported their expected duration of restrictions as 14 days to one month, followed by less than 14 days (19%), one to three months (11%), specific date (3%) and more than 3 months (1%). However, in 32 per cent of assessed areas, the expected duration of restrictions was unknown.

Number and type of restrictions in areas of interest by IOM region

- Public events cancelled or postponed
- Schools closed
- Restricted operating hours for public establishments (café, restaurant, etc.)
- Alternative working arrangements (work remotely, etc.)
- Restricted movement



4. Overview of Areas and Sites of Interest

4.2. Sites with Populations of Interest

664

sites assessed in 118 C/T/As

19%

of the assessed sites are located in the IOM region of East and Horn of Africa

64%

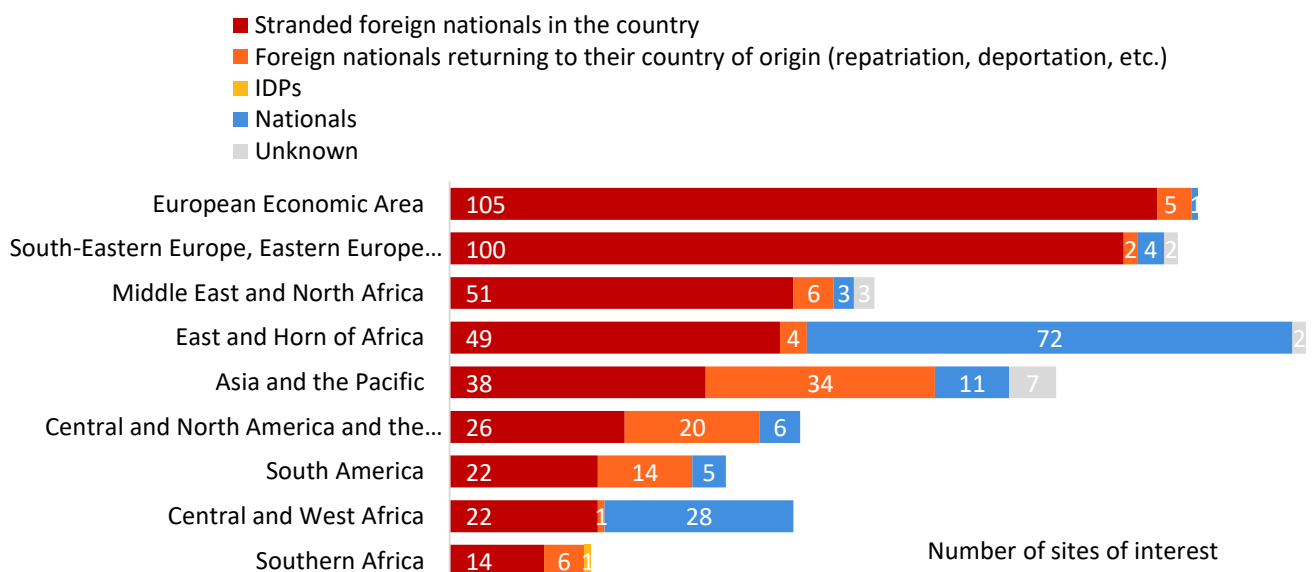
of the assessed sites have reported cases of stranded foreign nationals

In total, 664 (increase of 1 assessed sites since the last assessment) sites were assessed in 118 countries, territories and areas. These sites were selected as they concern populations of interest such as stranded foreign nationals and IDPs. Hotels, temporary reception centers, camps, transit centers and detention centers can be given as examples of such assessed sites.

Affected population groups consisted of stranded, repatriated and returning migrants, IDPs, asylum seekers and regular travelers. In 64 per cent of the assessed sites with populations of interest, foreign nationals were reportedly stranded (427 out of 664 assessed sites) and in 14 per cent of cases foreign nationals reported returning to their country of origin (92 sites) were impacted, while in 20 per cent of sites, nationals were affected by restrictive measures (130 sites). In 2 per cent of the sites, there were other affected population groups including migrants and refugees that were in reception centers before COVID-19 (14 sites). In only one site, IDPs were affected by restrictive measures.

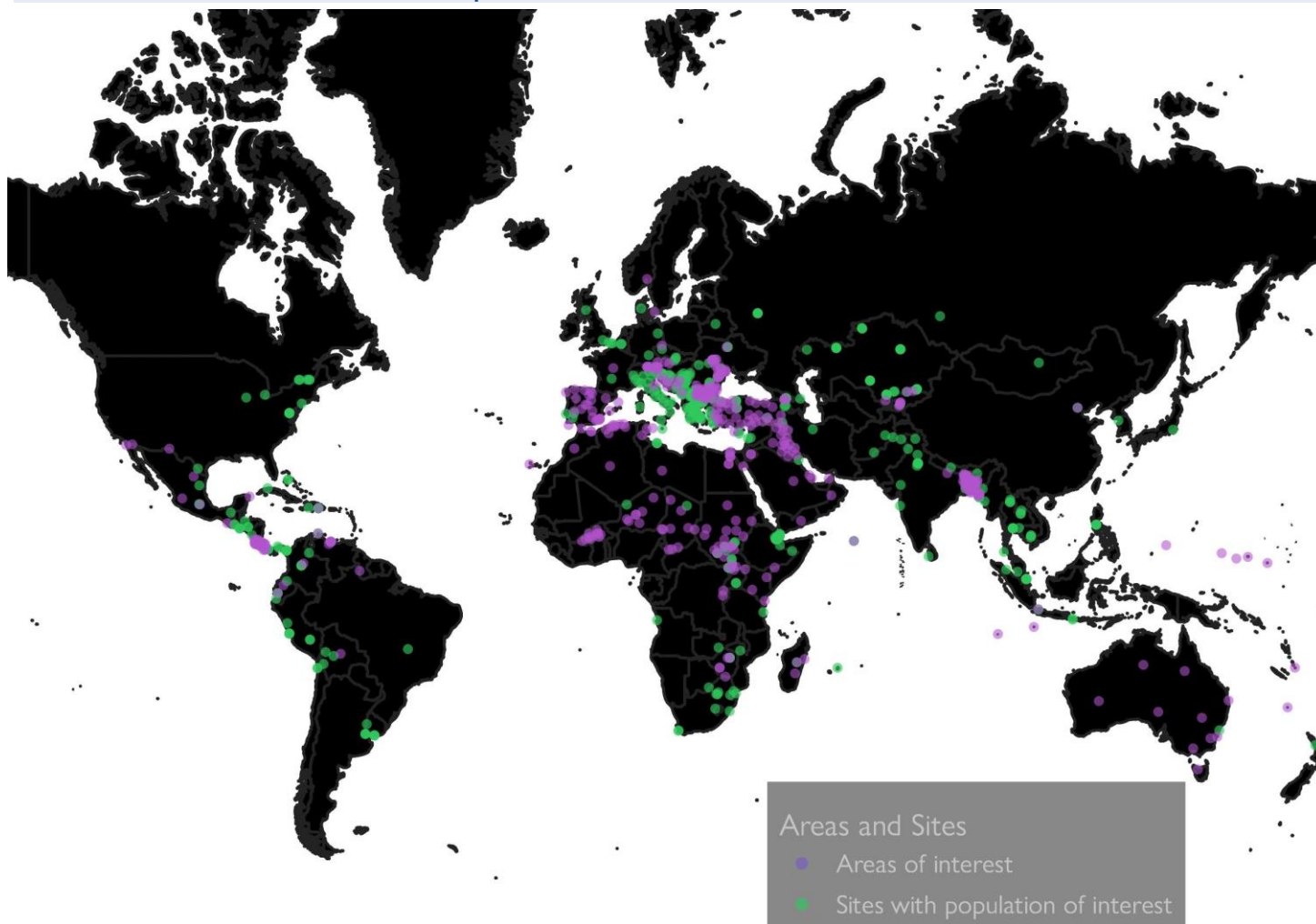
Among the regions, the IOM region of East and Horn of Africa, European Economic Area and South-Eastern Europe, Eastern Europe and Central Asia had the highest proportion of sites (19%, 17%, 16% respectively). IOM region of European Economic Area had the highest proportion of sites with stranded foreign nationals in the country (25% or 105 out of 427 stranded foreign nationals), followed by the IOM region of South-Eastern Europe, Eastern Europe and Central Asia with 23 per cent. The IOM region of Asia and Pacific has the highest proportion of sites with reported cases of nationals returning to their country of origin (37%) followed by IOM Region of Central and North America and the Caribbean with 22 per cent, while IOM region of East and Horn of Africa reported the highest per cent of sites with reported cases of affected nationals (55%). Analysis within regions can be also conducted in order to investigate the distribution of sites with populations of interest in certain regions. In 95 and 93 per cent of the sites in the IOM region of European Economic Area and IOM region of South-Eastern Europe, Eastern Europe and Central Asia, respectively, there were reported cases of stranded foreign nationals. In 38 per cent of the sites in IOM region of Asia and Pacific and the region of Central and North America and the Caribbean, separately, there were reported cases of foreign nationals returning to their country of origin, who were impacted while nationals were the most impacted the most in IOM Region of East and Horn of Africa (in 57% of the assessed sites).

Number of sites with population of interest disaggregated by population categories and IOM region



4. Overview of Areas and Sites of Interest

Global map of assessed Areas and Sites of Interest



Disclaimer: This map is for illustration purpose only. The boundaries and the names shown, and the designations used on this map do not imply official endorsement or acceptance by IOM.

5. Case Study: Singapore

This section provides reported examples of the various ways in which COVID-19 mitigation measures have had an impact on populations of concern during the pandemic, using Singapore as a case study. This section is intended to present an overview and the case study is not meant to be a comprehensive account of the impact of COVID-19 in the country. The information presented in this case study comes from a range of sources including IOM Regional Offices and Country Missions, IOM sitreps, IOM files and media outlets. Please note that the content in this section is dependent on what is reported and available from reports mentioned, focusing on more recent events during 2021.

It was reported that many COVID-19 cases were identified in workers' dormitories which house more than 300,000 migrant workers from South Asian countries, including Bangladesh, India, Nepal, and Pakistan. The first case involving a migrant worker was reportedly identified on 8th February 2020, when a 39-year-old Bangladeshi man working at the Seletar Aerospace Heights construction site contracted the virus. Meanwhile, the first case of COVID-19 in migrant workers' dormitory was reportedly identified on 30th March 2020, with four infections at the S11 dormitory⁴. According a report published on 17 April 2020, cases among workers living in dormitories quickly increased to 2,689 – representing 60 per cent of all cases in Singapore – of which 979 came from the S11 dormitory. Authorities responded immediately by placing migrants living in dormitories under prolonged mandatory quarantine, followed by strict testing and surveillance as they gradually returned to work⁵.

Movement restrictions on migrant workers living in workers' dormitories were reported to continue, according to a report published on 19th April 2021. While the response to reduce the spread of the virus was successful, authorities are reportedly still hesitant to relax restrictions until vaccination is widespread as workers' dormitories remain potential sites for new outbreaks⁵. A few days later, on 22nd April 2021, it was reported that approximately 1,200 migrant workers in Westlite Woodlands workers' dormitory in Singapore have been placed under quarantine again, after authorities discovered positive COVID-19 cases among residents who recovered from the virus. One of the cases was a 35-year-old Bangladeshi worker, who tested positive during a routine test on 19th April, six days after he was fully vaccinated⁶. Authorities have express concerns about possible re-infections and are taking measures to prevent another outbreak. This includes banning the entry of long-term visa holders and short-term visitors with recent travel history to India within the last 14 days, beginning 11:59pm on 22nd April. Travellers are also not allowed to transit through the country, including those who had obtained prior approval. Many of Singapore's migrant workers are from India, which is battling a devastating second wave of COVID-19⁷. The travel ban also applies to crew change, according to the Maritime and Port Authority of Singapore which will reportedly have an impact on the shipping industry due to its reliance on Indian crew members⁸.

Moreover, following the announcement of the travel ban on 22nd April, it was also announced that Singapore and Hong Kong Special Administrative Region (SAR), China delayed plans on a quarantine-free travel bubble after the cluster of COVID-19 cases was detected in Singapore. This is the second time plans for a travel bubble between the two financial hubs have been postponed. The bubble was originally scheduled to start in November 2020 but was cancelled due to a flare up of cases in Hong Kong SAR, China. No new date for the travel bubble has been set⁹.

Efforts, however, are underway to vaccinate approximately 30,000 migrant workers living in 30 dormitories as the vaccination programme for migrant workers moves into its second phase¹⁰. COVID-19 vaccinations for migrant workers first began with 10,000 people living in the country's five largest workers' dormitories, who had never been infected by the virus. Vaccinated workers will be subjected to a lower frequency of testing, moving from the current 14-day cycle to every 28 days¹¹.

3. Please visit the Methodology tab of migration.iom.int for more information on stranded migrant mapping methodology.

4. Source: [South China Morning Post](#)

5. Source: [Bloomberg](#)

6. Source: [Reuters](#) and [The Straits Times](#)

7. Source: [Singapore Ministry of Foreign Affairs](#)

8. Source: [South China Morning Post](#)

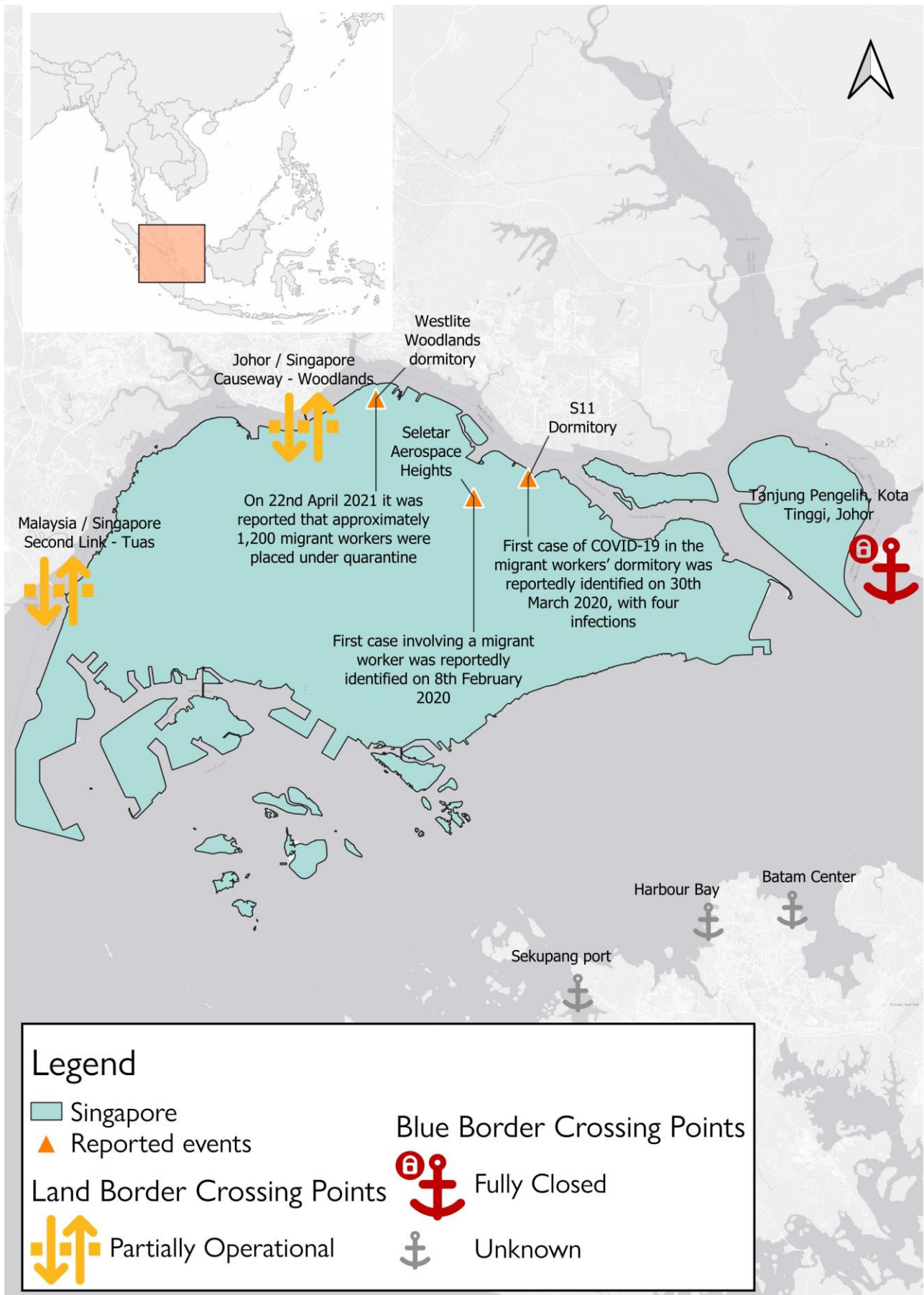
9. Source: [Sea Trade Maritime News](#)

10. Source: [Forbes](#)

11. Source: [Channel New Asia](#)

12. Source: [Channel New Asia](#)

5. Case Study: Singapore



Disclaimer: This map is for illustration purposes only. The boundaries and the names shown and the designations used on this map do not imply official endorsement or acceptance by IOM.

3. Please visit the Methodology tab of migration.iom.int for more information on stranded migrant mapping methodology.

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Table 2: Number of C/T/As which imposed significant mobility restrictions by IOM region

Region	Yes	No	Unknown	n/a	No. of C/T/As per region
Asia and the Pacific	29	8	0	3	40
Central and North America and the Caribbean	19	3	0	3	25
Central and West Africa	12	7	0	2	21
East and Horn of Africa	7	1	0	1	9
European Economic Area	28	2	0	0	30
Middle East and North Africa	9	8	0	0	17
South America	10	0	0	0	10
South-Eastern Europe, Eastern Europe and Central Asia	15	4	0	0	19
Southern Africa	14	1	0	0	15
Total	143	34	0	9	186

Table 2.1: Measures taken by C/T/As in response to COVID-19

Measure taken in response to COVID-19	Yes	No	Unknown	n/a	Total
Automatic extension of visas and work permits	51	49	45	41	186
National emergency declared	72	104	0	10	186
Quarantine for international arrivals	127	49	0	10	186
Removal of fines for visa overstays or expired residency or work permit	60	36	49	41	186
Significant mobility restrictions	143	34	0	9	186
Suspension of issuance of new visas	52	102	0	32	186

Table 3: Number of location updates by month

Location Type	March	March (%)	April	April (%)	May	May (%)
Area	89	17%	54	10%	44	8%
Area2	0	0%	181	27%	54	8%
Internal Transit Point	47	12%	11	3%	79	20%
Total	136	9%	246	16%	177	11%

Location Type	June	June (%)	July	July (%)	August	August (%)
Area	74	14%	68	13%	59	11%
Area2	65	10%	30	5%	33	5%
Internal Transit Point	112	28%	6	2%	13	3%
Total	251	16%	104	7%	105	7%

Location Type	September	September (%)	October	October (%)	November	November (%)
Area	20	4%	6	1%	1	0%
Area2	18	3%	24	4%	37	6%
Internal Transit Point	10	3%	32	8%	17	4%
Total	48	3%	62	4%	55	3%

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Table 2: Number of C/T/As which imposed significant mobility restrictions by IOM region

Location Type	December	December(%)	January 2021	January 2021 (%)	February 2021	February 2021 (%)
Area	4	1%	3	1%		
Area2	33	5%	7	1%	40	6%
Internal Transit Point	27	7%	8	2%	1	0%
Total	64	4%	18	1%	41	3%

Location Type	March 2021	March 2021 (%)	April 2021	May 2021 (%)	May 2021	May 2021 (%)	Total	Total (%)
Area	36	7%	29	6%	40	8%	527	100%
Area2	119	18%	21	3%	2	0%	664	100%
Internal Transit Point	17	4%	14	4%	1	0%	395	100%
Total	172	11%	64	4%	43	3%	1586	100%

Table 4: Number (#) and percentage (%) of operational status at internal transit points

Region	Fully Closed		Partially Operational		Fully Operational		Unknown		Total	
	#	%	#	%	#	%	#	%	#	%
Asia and the Pacific	9	7%	0	0%	112	93%	0	0%	121	100%
Central and North America and the Caribbean	0	0%	0	0%	2	100%	0	0%	2	100%
West and Central Africa	0	0%	0	0%	93	91%	9	9%	102	100%
East and Horn of Africa	1	5%	0	0%	20	95%	0	0%	21	100%
European Economic Area	0	0%	0	0%	2	67%	1	33%	3	100%
Middle East and North Africa	4	15%	2	8%	20	77%	0	0%	26	100%
South America	3	50%	0	0%	3	50%	0	0%	6	100%
South-Eastern Europe, Eastern Europe and Central Asia	5	4%	9	8%	99	87%	1	1%	114	100%
Total	22	6%	11	3%	351	89%	11	3%	395	100%

Table 5: Affected population categories at internal transit points

Location type	Nationals	Regular travellers	Irregular migrants	Returnees	IDPs	Refugees	Migrant workers	No. of locations assessed
Number	240	238	95	77	65	25	44	395
Percentage	61%	60%	24%	19%	16%	6%	11%	100%

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Table 6: Public health measures at 395 assessed internal transit points

Public health measures	Yes	No	Don't know	No response	Total responses	Response rate%
Standard operating procedures						
SOPs in place at the site for management and referral of ill travelers	49	87	119	140	255	65
Risk communication						
Information about COVID-19 being provided at site	147	64	34	150	245	62
Infection prevention and control						
Handwashing station at the site	135	68	31	161	234	59
Surveillance						
Health screening with temperature check using non-contact thermometer	115	0	7	273	122	31
Infrastructure at the site to support crowd control and ensure safety of screeners	18	7	105	265	130	33
Isolation space exists for evaluation of any suspect case away from crowds	21	88	133	153	242	61
Referral system						
Referral system in place at the site	35	75	131	154	241	61

Table 7: Number of areas of interest in each IOM Region

Region	Areas of interest	Percentage of Total	No. of C/T/As
Asia and the Pacific	105	20%	10
Central and North America and the Caribbean	103	20%	9
West and Central Africa	30	6%	4
East and Horn of Africa	20	4%	5
European Economic Area	97	18%	17
Middle East and North Africa	64	12%	15
South America	19	4%	7
South-Eastern Europe, Eastern Europe and Central Asia	77	15%	10
Southern Africa	12	2%	5
Total	527	100%	82

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Table 7.1: Number and type of restrictions in areas of interest

Region	Public events cancelled or postponed	Schools closed	Restricted operating hours for public establishments (café, restaurant, etc.)	Alternative working arrangements (work remotely, etc.)	Restricted movement	Lockdown/ quarantine enforced by police or military	Total
Asia and the Pacific	20	18	19	22	3	7	105
Central and North America and the Caribbean	93	93	93	93	5	6	103
Central and West Africa	18	18	5	0	11	18	30
East and Horn of Africa	16	8	8	19	2	1	20
European Economic Area	12	9	12	10	7	3	97
Middle East and North Africa	31	33	29	29	35	35	64
South America	18	18	16	16	15	4	19
South-Eastern Europe, Eastern Europe and Central Asia	63	59	62	61	1	31	77
Southern Africa	5	4	1	1	1	8	12
Total	276	260	245	251	80	113	527

Table 7.2: Duration of restrictive measures in areas of interest

Duration	No. of Areas of interest	Percentage
1 - 3 months	60	11%
14 days to One month	178	34%
Less than 14 days	100	19%
More than 3 months	6	1%
Specific Date	14	3%
Unknown	169	32%
Total	527	100%

Table 8: Affected population categories in the sites of interest

Affected population categories	No. of Sites of interest	Percentage
Foreign national returning (on the way) to origin (Returnee/Repatriation/Deportation...)	92	14%
Foreign national stranded in country (Stranded)	427	64%
IDPs	1	0%
Nationals	130	20%
Unknown	14	2%
Total	664	100%

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Table 8.1: Number (#) of sites disaggregated by population categories and by IOM region

Region	Stranded foreign nationals in the country		Foreign nationals returning to their country of origin (repatriation, deportation, etc.)		IDPs		Nationals		Other		Unknown		Total	
	#	%	#	%	#	%	#	%	#	%	#	%	#	Region's %
Asia and the Pacific	38	42%	34	38%	0	0%	11	12%	0	0%	7	8%	90	100%
Central and North America and the Caribbean	26	50%	20	38%	0	0%	6	12%	0	0%	0	0%	52	100%
Central and West Africa	22	43%	1	2%	0	0%	28	55%	0	0%	0	0%	51	100%
East and Horn of Africa	49	39%	4	3%	0	0%	72	57%	0	0%	2	2%	127	100%
European Economic Area	105	95%	5	5%	0	0%	1	1%	0	0%	0	0%	111	100%
Middle East and North Africa	51	81%	6	10%	0	0%	3	5%	0	0%	3	5%	63	100%
South America	22	54%	14	34%	0	0%	5	12%	0	0%	0	0%	41	100%
South-Eastern Europe, Eastern Europe and Central Asia	100	93%	2	2%	0	0%	4	4%	0	0%	2	2%	108	100%
Southern Africa	14	67%	6	29%	1	5%	0	0%	0	0%	0	0%	21	100%
Total	427	64%	92	14%	1	0%	130	20%	0	0%	14	2%	664	100%