

IOM COVID-19  
IMPACT ON  
KEY LOCATIONS OF  
INTERNAL MOBILITY  
BI-WEEKLY ANALYSIS  
26 AUGUST 2020

# 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](mailto:dtmccovid19@iom.int)

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## COVER PHOTO:

©IOM Colombia / Ana Eugenia Duran; 29 March 2020.  
Preventative health activities to combat COVID-19, carried out by IOM Colombia staff with the Amoruá indigenous group in Vichada, Eastern Colombia.

# TABLE OF CONTENTS

METHODOLOGY & DEFINITIONS .....	3
EXECUTIVE SUMMARY .....	5
1. NATIONAL-LEVEL MOBILITY RESTRICTIONS.....	6
2. KEY LOCATIONS OF INTERNAL MOBILITY SCOPE AND COVERAGE.....	7
3. OVERVIEW OF INTERNAL TRANSIT POINTS.....	8
4. OVERVIEW OF AREAS AND SITES OF INTEREST .....	11
5. CASE STUDY: THAILAND .....	14
ANNEX .....	15

# Methodology & Definitions

IOM COVID-19 Impact on Key Locations of Internal Mobility Bi-Weekly 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 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. Data has been collected between 13 March and 20 August 2020. Data for 11 per cent of the assessed locations has been updated in August, while data for 11 per cent of the assessed locations has been updated since the beginning of July, with 24 per cent of the assessed locations that have been updated in June, while 18 per cent was last updated in May. The data for the remaining assessed internal locations was last updated before May (specifically, 23% in April and 13% in March). For more information see Table 3 in the annex.

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](#).

The dataset is 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.

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 <sup>1</sup> :

- 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 <sup>2</sup>:

- 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 to 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<sup>3</sup>
- 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. Mobility Restrictions are captured in the same way for all Points of Entry. For more information please refer to the weekly PoE report.*

*3. 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 and 20 August 2020. Data for 11 per cent of the assessed locations has been updated in August, while data for 11 per cent of the assessed locations has been updated since the beginning of July, with 24 per cent of the assessed locations that have been updated in June, while 18 per cent was last updated in May. The data for the remaining assessed internal locations was last updated before May (specifically, 23% in April and 13% in March).

Through this exercise, IOM collected information about 180 C/T/As across all IOM regions. Among these, 46 per cent (82 C/T/As) declared a national emergency due to the COVID-19 pandemic and 76 per cent introduced some sort of mobility restriction. Some restrictive measures that have been adopted are quarantine for all international arrivals (64%) and the suspension of the issuance of new visas (39%). On the other hand, some facilitations for stranded populations have also been adopted, such as the automatic extension of expired visas and working permits (29%) and the removal of fines for visa overstays and expired residency and working permits (34%).

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

- IOM assessed 1,494 key locations across 135 C/T/As, including 383 internal transit points, 471 areas of interest and 640 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.
- 55 per cent of the assessed internal transit points were fully operational, with 23 and 18 per cent which were respectively either fully closed or partially operational. Moreover, 48 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 (63% of the assessed areas), school closure (62%), restricted operating hours for public establishments (55%) and alternative working arrangements (54%). Moreover, non-essential movements outside home were restricted in 27 per cent of the assessed areas while lockdown or quarantine measures were enforced by police or military in 35 per cent of the cases.
- Stranded foreign nationals were reported in 62 per cent of the assessed sites with populations of interest, while in 22 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

**46%**

Declared national emergency

**76%**

imposed significant mobility restrictions<sup>4</sup>

**29%**

automatically extended visas and working permits

**180**

Assessed C/T/As

**64%**

imposed mandatory quarantine for international arrivals

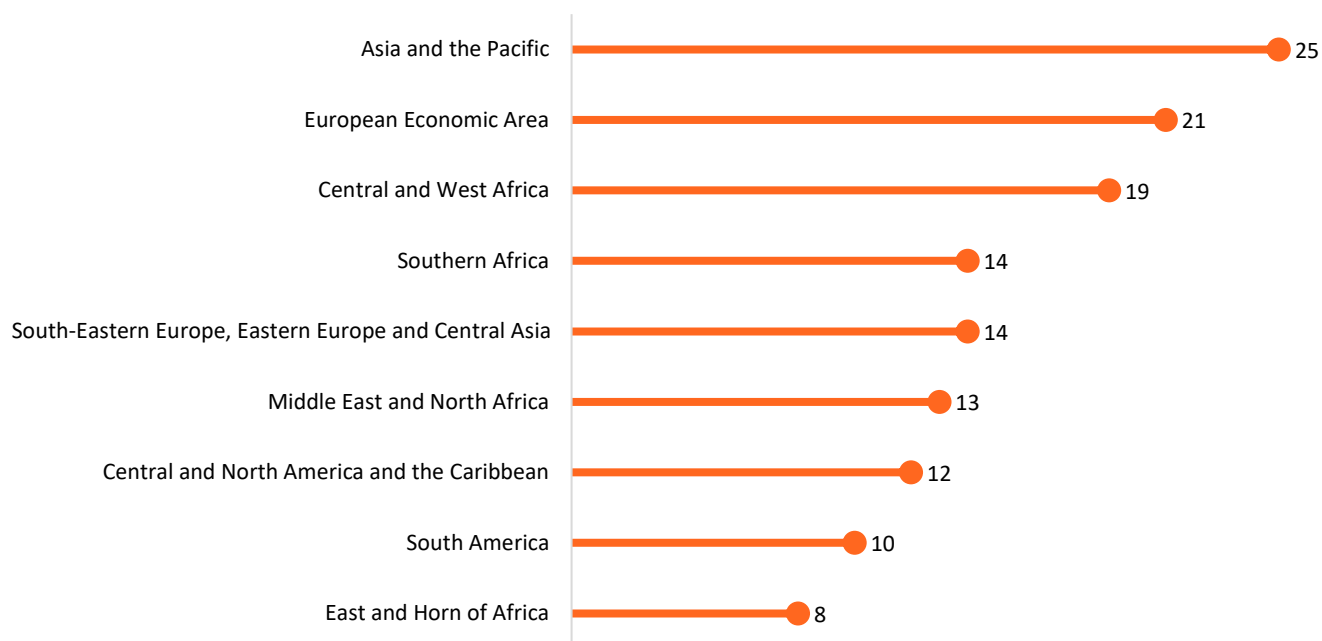
**34%**

removed fines for visa overstays, expired residency and work permits

**39%**

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

383

Assessed Internal Transit Points

1,111

Assessed Areas and Sites

135

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 **20 August 2020**.

IOM has assessed a total of 1,494 locations (including internal transit points, areas of interest and sites with population of interest) in **135 countries, territories and areas** so far. The highest share of these assessed locations remained consistent with sites with populations of interest (43%), followed by areas of interest and important internal transit points between cities and regions, with 32 and 26 per cent respectively. More details can be found in Table 1.

Table I: 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	308	100%	115	37%	105	34%	88	29%	24
Central and North America and the Caribbean	154	100%	1	1%	102	66%	51	33%	18
Central and West Africa	197	100%	98	50%	28	14%	71	36%	11
East and Horn of Africa	164	100%	21	13%	20	12%	123	75%	9
European Economic Area	191	100%	2	1%	80	42%	109	57%	23
Middle East and North Africa	146	100%	26	18%	57	39%	63	43%	17
South America	66	100%	6	9%	19	29%	41	62%	9
South-Eastern Europe, Eastern Europe and Central Asia	235	100%	114	49%	48	20%	73	31%	13
Southern Africa	33	100%	0	0%	12	36%	21	64%	11
<b>Total</b>	<b>1494</b>	<b>100%</b>	<b>383</b>	<b>26%</b>	<b>471</b>	<b>32%</b>	<b>640</b>	<b>43%</b>	<b>135</b>



### 3. Overview of Internal Transit Points

**383**

Internal Transit Points  
assessed in 28 C/T/As

**55%**

of the assessed internal transit  
points are fully operational  
(+3 p.p. compared to the  
previous report)

**48%**

of the assessed locations  
imposed medical restrictions  
(+1 p.p. compared to the  
previous report)

Of the **383 internal transit points** monitored in 28 countries, territories or areas, more than 40 per cent had introduced some mobility restrictions and they were either **partially operational (23%**, i.e. a 1 p.p. decrease on a fortnightly basis) or **fully closed (18%**, i.e. a 3 p.p. decrease compared to two weeks ago). **Fully operational** internal transit points represented **55 per cent** of the assessed locations, indicating a 3 p.p. increase on a fortnightly basis (see Table 4). Moreover, approximately half of the assessed locations (186 out of 383, 49% of the total: a 1 p.p. increase 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 (30%), South-Eastern Europe, Eastern Europe and Central Asia (30%) 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 different across the abovementioned regions with more than 70 per cent of the internal transit points situated in Asia and the Pacific that are fully closed or open to returning nationals only compared to 74 per cent of the assessed internal transit points that were fully operational in West and Central Africa (73 out of 98, i.e. no relative change). As in the previous report, in South-Eastern Europe, Eastern Europe and Central Asia, 74 per cent of the assessed internal transit points were fully operational (84 out of 114). For more information, please refer to Table 4.

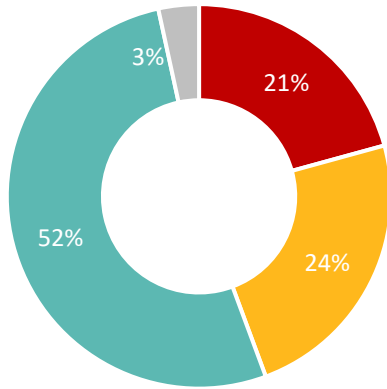
In 219 out of the 383 assessed internal transit points (57% of the total, i.e. a 1 p.p. increase compared to the previous report), the foreseen duration of the restrictions was unknown (i.e. information was unavailable). In 25 and 14 per cent of the cases the restrictions will be in place for 14 days to one month or less than 14 days, respectively. Only in 16 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), especially on **regular travelers** and **nationals** (affected in respectively in **71%** and **70%** of the assessed locations). **Irregular migrants** (in **34%** of the assessed internal transit points), **returnees (29%)** and **IDPs (18%)** have also been affected by the abovementioned restrictions. Finally, a less significant impact has also been reported on **migrant workers** (in **12%** of the assessed locations) and **refugees (6%)**.

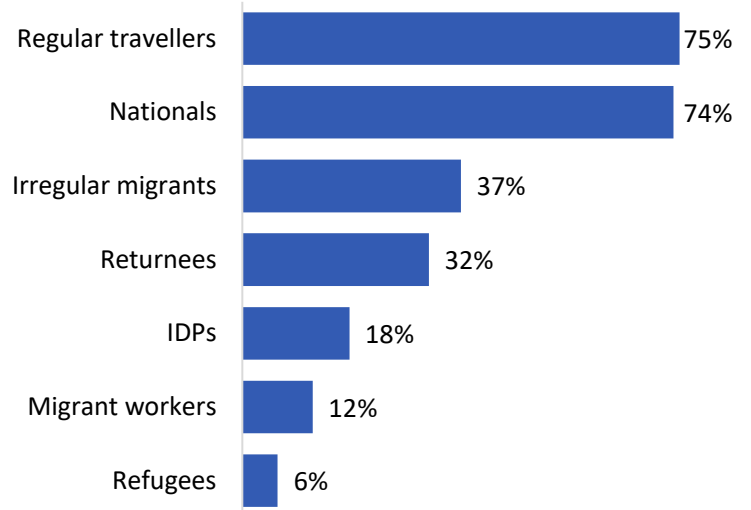
# 3. Overview of Internal Transit Points

## Operational status of the assessed internal transit points

- Fully closed
- Fully operational
- Partially operational
- Unknown

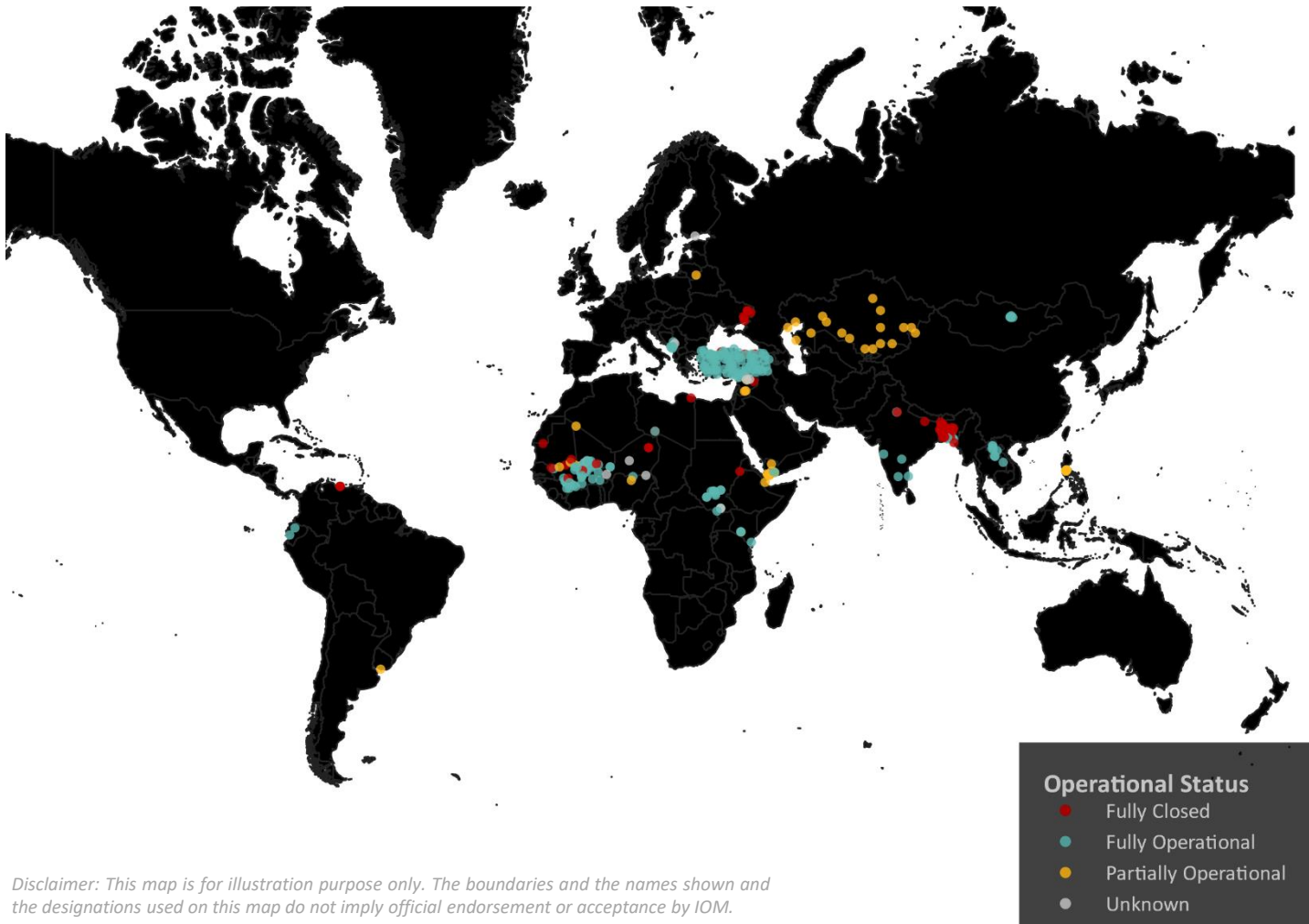


## Percentage of internal transit points with affected population



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 following public health measures were reported to be in place in assessed internal transit points through IOM’s missions participating in this exercise (for further information, see Table 6).

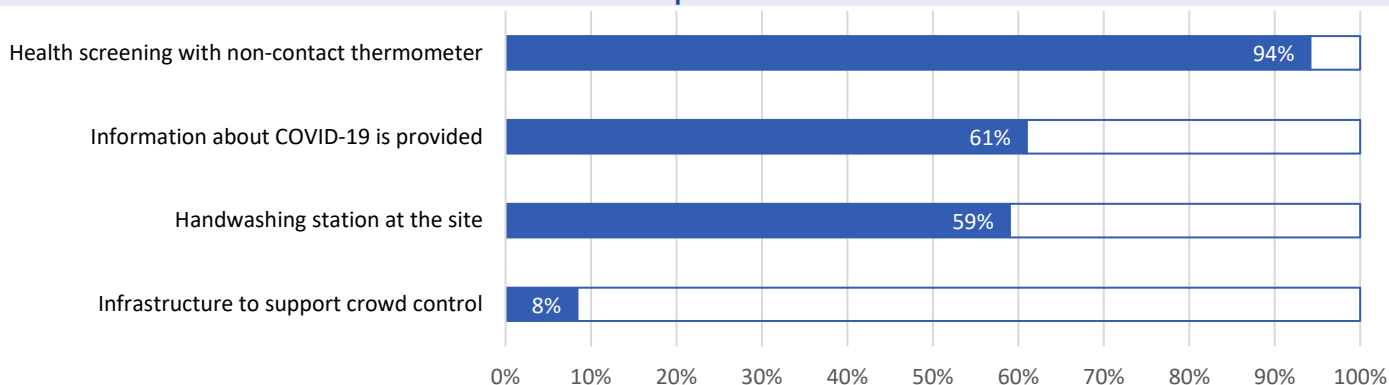
On risk communication and community engagement at the assessed internal transit points, 61 per cent of the assessed locations (141 out of 232 identified internal transit points) reported that information on COVID-19 was provided to travelers at the site through leaflets, posters or announcements. Additionally, in 136 out of 230 identified locations (59% of the total) handwashing stations were available as an infection prevention and control measure.

Health screening using non-contact thermometers was reported at almost all identified internal transit points (113 out of 120 locations recording a response, 94% of the total). However, only 10 out of 119 assessed internal transit points (8% of the total) reported that there was infrastructure in place to support crowd control and ensure safety of screeners.

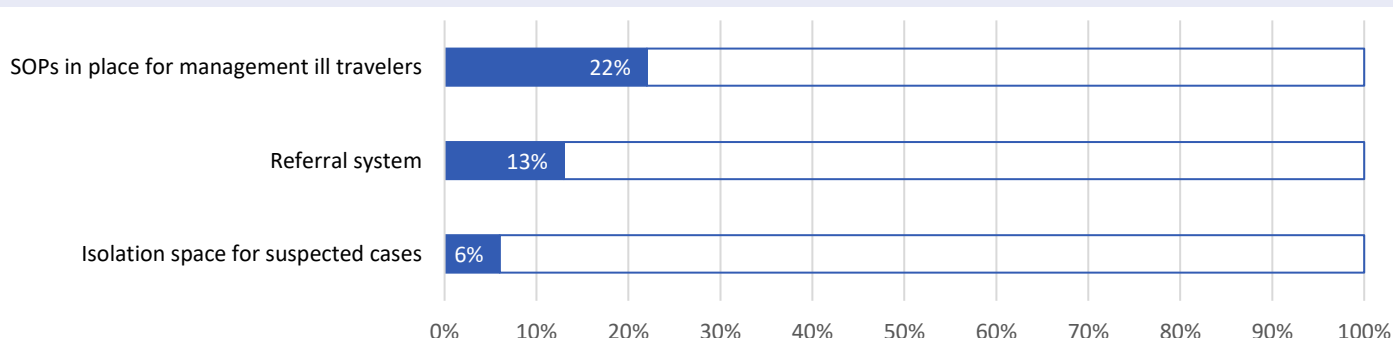
For the detection, management and referral of ill travelers, standard operating procedures were reported to be in place at 22 per cent of identified internal transit points (53 out of 244 locations recording a response), while a referral system was reported to be in place at only 29 out of 231 specified internal transit points (13% of the total). Finally, only 15 internal transit point had reliable information regarding the availability of an isolation space for suspected COVID-19 cases, prior to their appropriate referral (15 out 233 assessed internal transit points, 6% of the total).

Maintaining and enhancing 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 together contribute to prompt and effective responses to public health emergencies such as COVID-19.

### Public health measures in place in the assessed locations



### Available tools/measures in the event of a COVID-19 case at the site



**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

**471**

areas assessed  
in 77 C/T/As

**22%**

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

**63%**

of the assessed areas have  
restrictions on public events

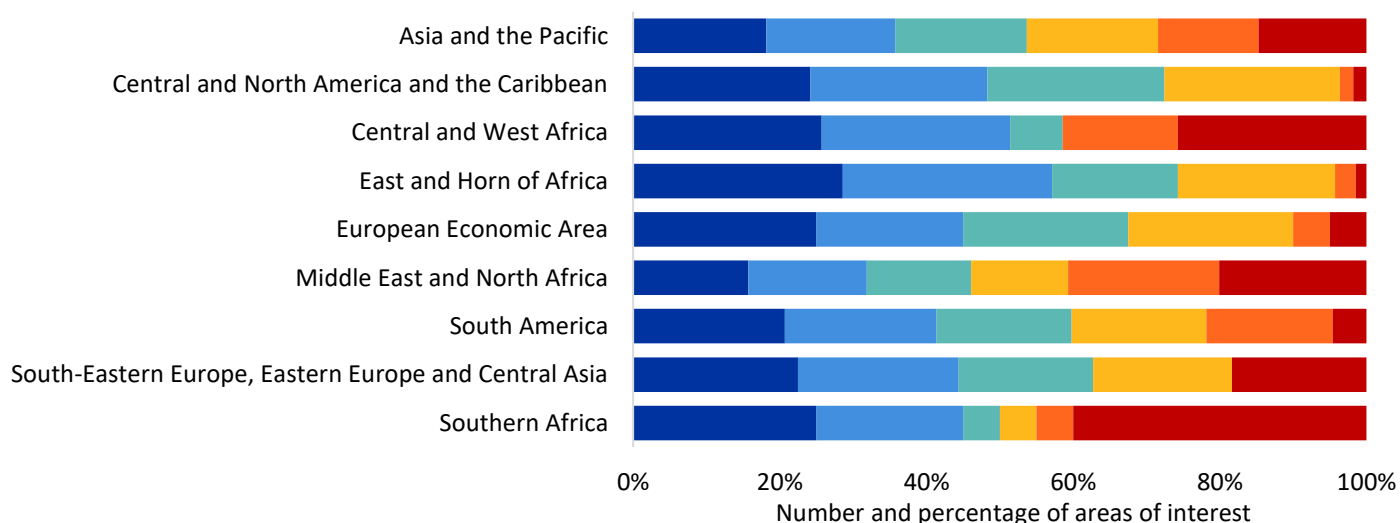
In total, 471 (no change since the previous assessment) areas of interest were assessed in 77 countries, territories and areas. These areas were chosen from sub-administrative units of interest, such as areas of outbreak of COVID-19 or areas under lockdown/quarantine. Assessed areas consisted of cities, 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.

Among the regions, the IOM region of Asia and Pacific continued to have the highest share of assessed areas (105 out of 471 assessed areas or 22%), closely followed by the IOM region of Central and North America and the Caribbean (102 out of 471 assessed areas or almost 22%). The IOM region of European Economic Area followed with 17 per cent, IOM Region of Middle East and North Africa had 12 per cent and the IOM region of South-Eastern Europe, Eastern Europe and Central Asia had 10 per cent of the assessed areas (80, 57, 48 areas respectively).

The type of restrictive measures being imposed on the assessed areas varied. In 63 per cent of assessed areas (295 out of 471 assessed areas) public events were cancelled or postponed. Schools were closed also in almost 62 per cent of the assessed areas (294 areas). Restricted operating hours for public establishments (café, restaurant, etc.) and alternative working arrangements (working remotely, etc.) were in place in 55 and 54 per cent of the assessed areas respectively (260 and 256 areas respectively). Movement outside home was restricted in 27 per cent of the assessed areas while lockdown or quarantine measures were enforced by police or military in 35 per cent of them (127 and 164 assessed areas respectively). In the largest proportion of areas (36%) the expected duration of restrictions was 14 days to one month, followed by less than 14 days (21%) and one to three months (6%). However, in other 36 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
- Lockdown/quarantine enforced by police or military



# 4. Overview of Areas and Sites of Interest

## 4.2. Sites with Populations of Interest

**640**

sites assessed in 115 C/T/As

**19%**

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

**62%**

of the assessed sites have reported cases of stranded foreign nationals

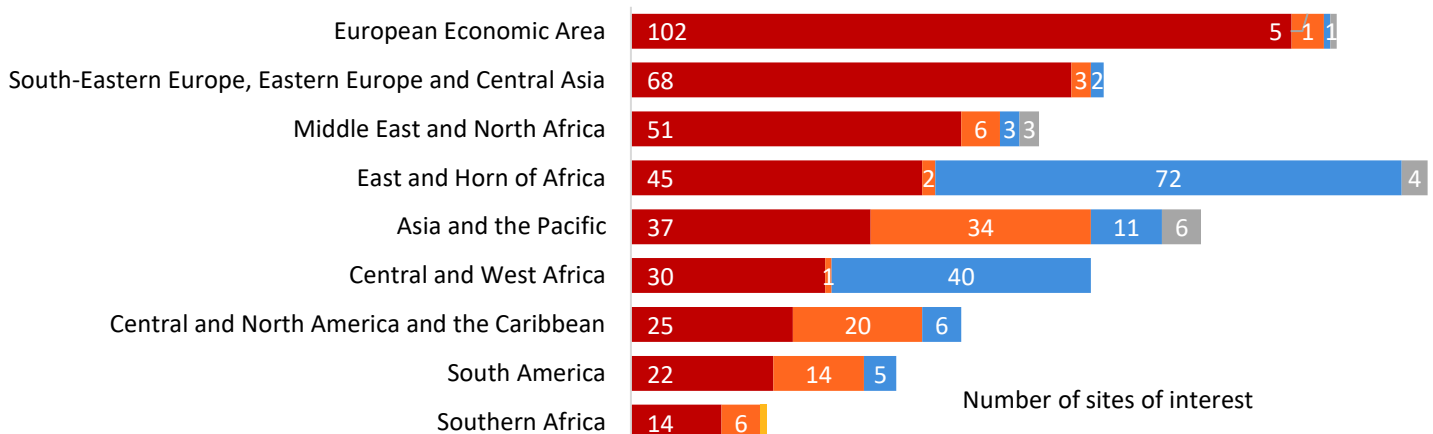
In total, 640 (1% decrease since the last assessment) sites were assessed in 115 countries, territories and areas. These sites were selected as they concern populations of interest such as stranded foreign nationals and IDPs. Hotels, temporary reception centers, camps, transit centers and detention centers can be given as examples of assessed sites.

Affected population groups consisted of stranded, repatriated and returning migrants, IDPs, asylum seekers and regular travelers. In 62 per cent of the assessed sites with populations of interest, foreign nationals were stranded (394 out of 640 assessed sites) and in 14 per cent of cases there were foreign nationals reported returning to their country of origin (91 sites) while in 22 per cent of cases, nationals were affected by restrictive measures (140 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, both IOM regions of East and Horn of Africa and European Economic Area had the highest proportion of sites (19% and 17% respectively). IOM region of European Economic Area had the highest proportion of sites with stranded foreign nationals in the country (26%), followed by the IOM region of South-Eastern Europe, Eastern Europe and Central Asia with 17 per cent. 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 has 51 per cent of the sites with reported cases of affected nationals. A within region analysis can be also conducted in order to investigate the distribution of sites with populations of interest in certain regions. In the IOM region of European Economic Area and IOM region of South-Eastern Europe, Eastern Europe and Central Asia separately, almost 93 per cent of assessed sites had reported cases of stranded foreign nationals, 39 per cent of the sites in both IOM region of Asia and Pacific and the region of Central and North America and the Caribbean separately had cases of foreign nationals returning to their country of origin while nationals are the affected group in almost 59 per cent of the assessed sites in both IOM Regions of East and Horn of Africa and West and Central Africa separately.

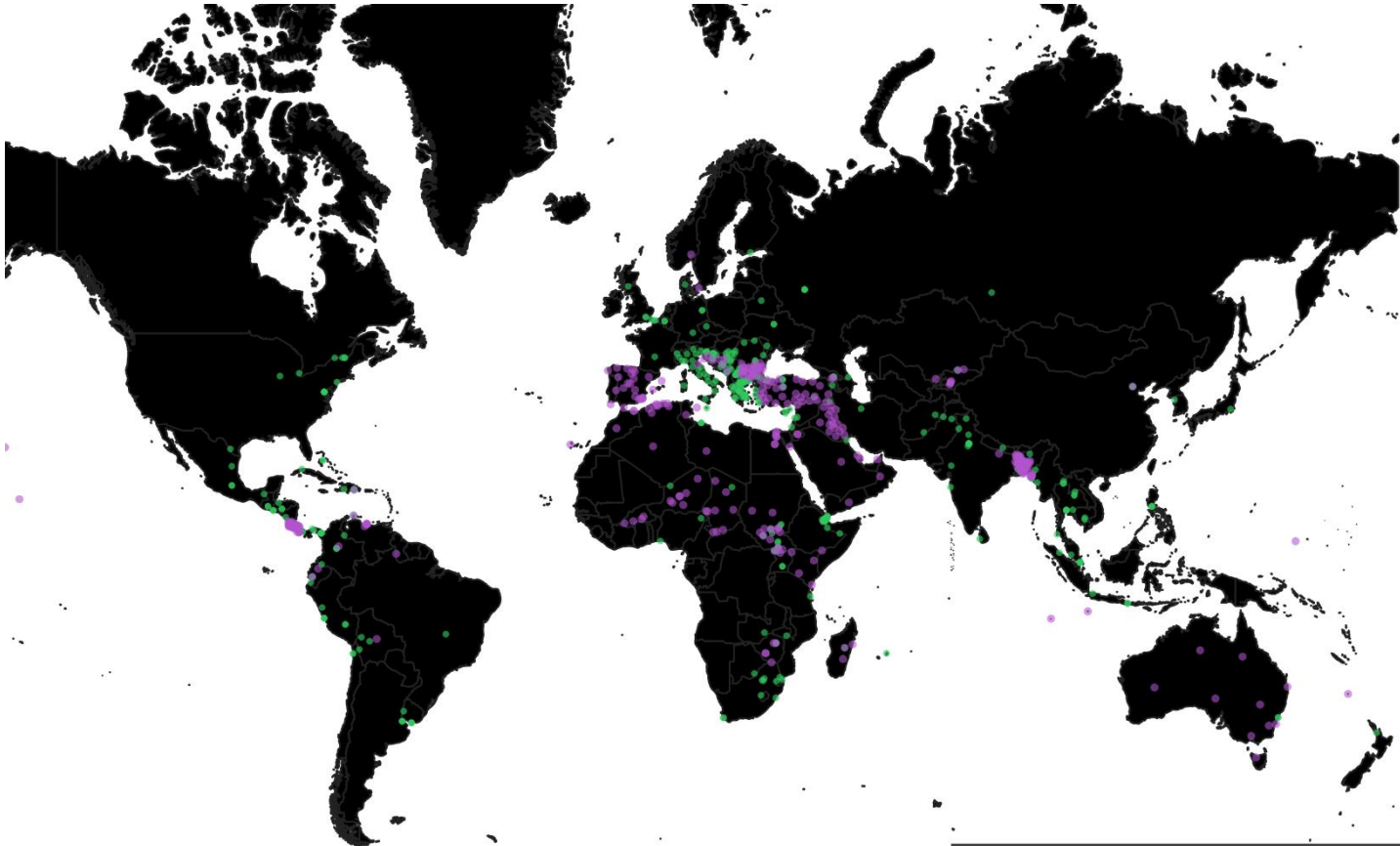
### Number of sites with population of interest disaggregated by population categories and IOM region

- Stranded foreign nationals in the country
- Foreign nationals returning to their country of origin (repatriation, deportation, etc.)
- IDPs
- Nationals
- Unknown



# 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.*

**Areas and Sites**

- Areas of Interest
- Sites with population of interest



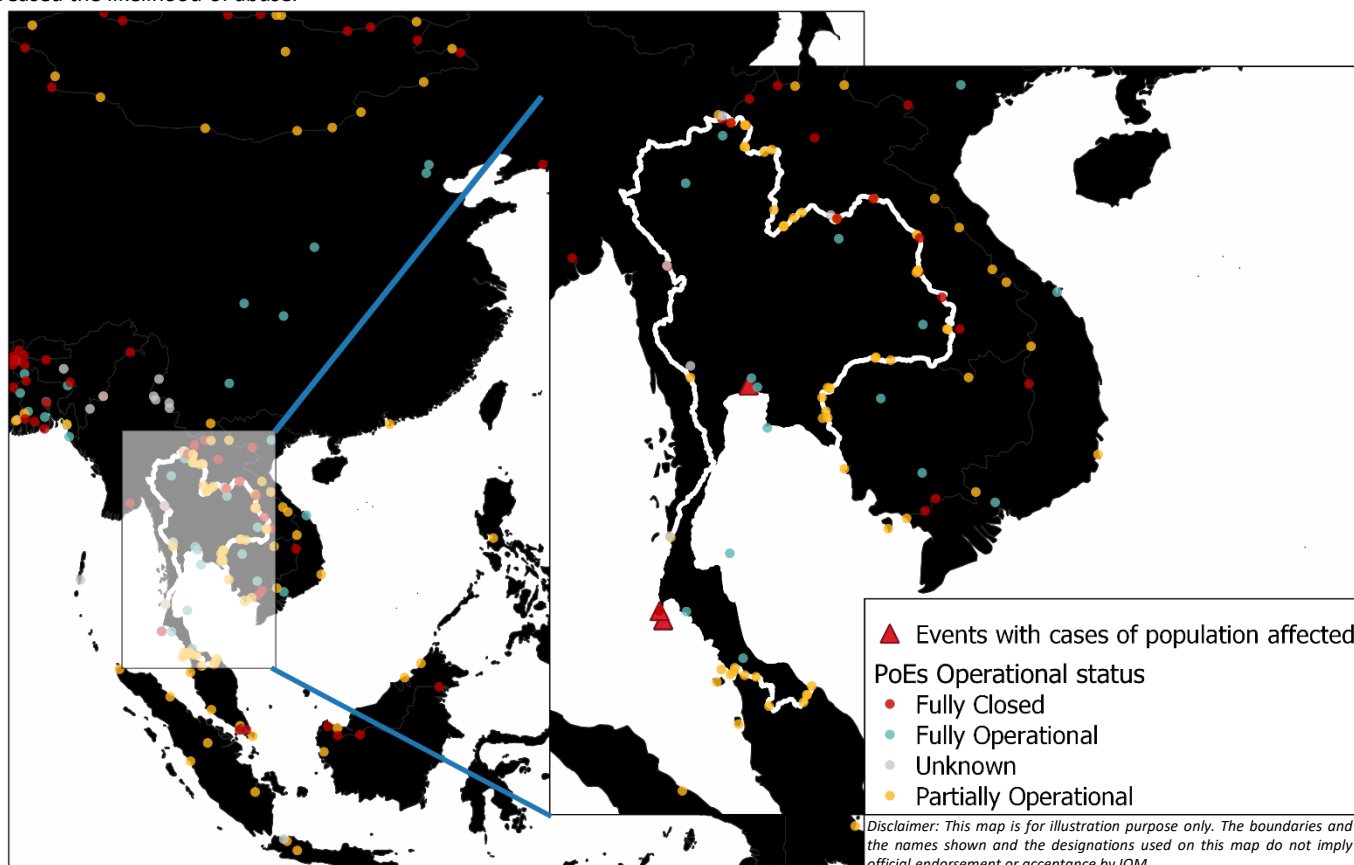
## 5. Case Study: Thailand

This section provides reported examples of various impacts of COVID-19 mitigation measures on migrants in Thailand during the pandemic. 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, as well as public media outlets. Please note that the content in this section is dependent on what is reported and available from reports mentioned and as such, does not reflect data collection from DTM Thailand.<sup>1</sup>

The various mobility restrictions and subsequent easing has impacted various communities in diverse ways. For instance, thousands of travellers and internal migrant workers were left stranded on the southern Thai island of Phuket after the governor issued a travel ban preventing travellers and vehicles from entering and leaving the island on 30<sup>th</sup> March in an effort to mitigate the spread of COVID-19 when the number of positive cases increased to 53. The ban also impacted the mobility of all maritime vessels, preventing entry and departure through its international ports, with the exception of cargo ships. On 1<sup>st</sup> May, Thai authorities loosened travel restrictions to allow internal migrant workers stranded on Phuket to return to their home provinces while the island remained closed for entry. Approximately 40,000 people had registered to leave; fit-to-travel certificates were required prior to their departure. Further restrictions were lifted on 1<sup>st</sup> June when Phuket's governor issued an order relaxing the entry and exit of people arriving and leaving the island by land. The ports also reopened for domestic interprovincial travel. Cargo ships carrying essential items that traveled through international waters were the only vessel allowed to port at Phuket. The easing of restrictions on Phuket enabled some stranded people to return home. For example, it was reported that 648 Russian travellers returned home from Phuket, including 193 on 24<sup>th</sup> April, approximately 220 on 2<sup>nd</sup> May, and 235 on 19<sup>th</sup> May. Also, 183 Filipino travellers returned to the Philippines on 29<sup>th</sup> June.

While restrictions on domestic travel have eased, measures for international travel remain in place, with the exception of nationals and residents of Thailand, airline crew with a return scheduled flight and students. Prior to entry into Thailand, passengers must have a medical certificate stating they tested negative for COVID-19 at most 72 hours before arrival, have insurance to cover medical expenses while they are in the country, a Certificate of Entry issued by Royal Thai Embassy, and a Fit to Fly health certificate. Thai nationals, however, are not required to provide a COVID-19 medical certificate.

Other groups have experienced negative impacts as a result of the COVID-19 containment measures, a trend notable not only in Thailand but worldwide. According to reputable media reports, migrant workers stranded in Thailand since COVID-19 lockdown measures began in March 2020, are experiencing financial insecurity. Thai authorities are providing government assistance for all workers affected by COVID-19, including nationals and non-nationals, but there nevertheless remain concerns that the needs of the most vulnerable are still underserved. Administrative obstacles to accessing the available assistance are reportedly affecting many of Thailand's 3.6 million migrant workers. Additionally, other reports have raised concerns regarding the potential increased risk of abuse faced by migrant workers in Thailand amid economic slowdown brought on by the COVID-19 crisis. In an International Labour Organization (ILO) assessment conducted from April to May, 32 per cent of polled migrant workers who were able to maintain their jobs reported many other work-related problems, such as being pushed to take unpaid leave, an inability to refuse work during lockdown, or confiscation of legal documents, such as passports, by their employer. For especially vulnerable groups like women and child migrants, there is an added risk of exploitation. Though official data on possible increases in gender-based exploitation of migrants in Thailand is not yet available, according to the ILO, previous epidemics saw increased violence against women as economic tensions and added restrictions increased the likelihood of abuse.



5. Please visit the Methodology tab of [migration.iom.int](https://www.migration.iom.int) for more information on stranded migrant mapping methodology.

# Annex: Tables

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

Region	Yes	No	Unknown	n/a	Total
East and Horn of Africa	25	10	0	4	39
South America	12	0	0	10	22
Central and North America and the Caribbean	19	0	0	1	20
Middle East and North Africa	8	0	0	1	9
South-Eastern Europe, Eastern Europe and Central Asia	21	7	0	1	29
Southern Africa	13	4	0	0	17
Central and West Africa	10	0	0	0	10
European Economic Area	14	4	0	1	19
Asia and the Pacific	14	1	0	0	15
<b>Total</b>	<b>136</b>	<b>26</b>	<b>0</b>	<b>18</b>	<b>180</b>

Table 2.I: 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	53	42	31	54	180
National emergency declared	82	80	0	18	180
Quarantine for international arrivals	115	46	0	19	180
Removal of fines for visa overstays or expired residency or work permit	61	28	37	54	180
Significant mobility restrictions	136	26	0	18	180
Suspension of issuance of new visas	70	58	0	52	180

Table 3: Number of location updates by month

Month	Location type			
	Area	Area2	Internal Transit Point	Total
March	96	2	89	187
March (%)	20%	0%	23%	13%
April	99	225	19	343
April (%)	21%	35%	5%	23%
May	46	128	98	272
May (%)	10%	20%	26%	18%
June	84	142	134	360
June (%)	18%	22%	35%	24%
July	82	73	8	163
July (%)	17%	11%	2%	11%
August	64	70	35	169
August(%)	14%	11%	9%	11%
Total	471	640	383	1494
<b>Total (%)</b>	<b>100%</b>	<b>100%</b>	<b>100%</b>	<b>100%</b>

# Annex: Tables

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

Region	Fully Closed		Partially Operational		Fully Operational		Other		Total	
	#	%	#	%	#	%	#	%	#	%
Asia and the Pacific	40	35%	45	39%	30	26%	0	0%	115	100%
Central and North America and the Caribbean	0	0%	0	0%	1	100%	0	0%	1	100%
Central and West Africa	9	9%	8	8%	73	74%	8	8%	98	100%
East and Horn of Africa	1	5%	2	10%	17	81%	1	5%	21	100%
European Economic Area	0	0%	1	50%	0	0%	1	50%	2	100%
Middle East and North Africa	6	23%	12	46%	5	19%	3	12%	26	100%
South America	3	50%	1	17%	2	33%	0	0%	6	100%
South-Eastern Europe, Eastern Europe and Central Asia	11	10%	18	16%	84	74%	1	1%	114	100%
<b>Total</b>	<b>70</b>	<b>18%</b>	<b>87</b>	<b>23%</b>	<b>212</b>	<b>55%</b>	<b>14</b>	<b>4%</b>	<b>383</b>	<b>100%</b>

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	269	273	130	110	70	23	45	383
Percentage	70%	71%	34%	29%	18%	6%	12%	100%

Table 6: Public health measures at internal transit points

Question	Yes	No	Don't know	Total
Handwashing station at the site	136	63	31	230
Health screening with temperature check using non-contact thermometer	113	0	7	120
Information about COVID-19 being provided at site	141	57	34	232
Infrastructure at the site to support crowd control and ensure safety of screeners	10	5	104	119
Isolation space exists for evaluation of any suspect case away from crowds	15	86	132	233
Referral system in place at the site	29	71	131	231
SOPs in place at the site for management and referral of ill travelers	53	73	118	244

# Annex: Tables

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	22%	10
Central and North America and the Caribbean	102	22%	8
Central and West Africa	28	6%	4
East and Horn of Africa	20	4%	5
European Economic Area	80	17%	15
Middle East and North Africa	57	12%	15
South America	19	4%	7
South-Eastern Europe, Eastern Europe and Central Asia	48	10%	8
Southern Africa	12	3%	5
<b>Total</b>	<b>471</b>	<b>100%</b>	<b>77</b>

Table 7.I: 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	65	63	64	64	48	52	105
Central and North America and the Caribbean	93	93	93	92	6	7	102
Central and West Africa	18	18	5	0	11	18	28
East and Horn of Africa	16	20	12	15	2	1	20
European Economic Area	10	8	9	9	2	2	80
Middle East and North Africa	32	33	29	27	42	41	57
South America	18	18	16	16	15	4	19
South-Eastern Europe, Eastern Europe and Central Asia	38	37	31	32	0	31	48
Southern Africa	5	4	1	1	1	8	12
<b>Total</b>	<b>295</b>	<b>294</b>	<b>260</b>	<b>256</b>	<b>127</b>	<b>164</b>	<b>471</b>

# Annex: Tables

Table 7.2: Duration of restrictive measures in areas of interest

Duration	No. of Areas of interest	Percentage
1 - 3 months	27	6%
14 days to One month	171	36%
Less than 14 days	97	21%
More than 3 months	6	1%
Specific Date	1	0%
Unknown	169	36%
<b>Total</b>	<b>471</b>	<b>100%</b>

Table 8: Affected population categories in sites with populations of interest

Affected population categories	No. of Sites of interest	Percentage
Foreign national returning (on the way) to origin (Returnee/Repatriation/Deportation...)	91	14%
Foreign national stranded in country (Stranded)	394	62%
IDPs	1	0%
Nationals	140	22%
Other	0	0%
Unknown	14	2%
<b>Total</b>	<b>640</b>	<b>100%</b>

Table 8.I: 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		Others		Unknown		Total	
	#	%	#	%	#	%	#	%	#	%	#	%	#	Region's %
Asia and the Pacific	37	42%	34	39%	0	0%	11	13%	0	0%	6	7%	88	100%
Central and North America and the Caribbean	25	49%	20	39%	0	0%	6	12%	0	0%	0	0%	51	100%
Central and West Africa	30	42%	1	1%	0	0%	40	56%	0	0%	0	0%	71	100%
East and Horn of Africa	45	37%	2	2%	0	0%	72	59%	0	0%	4	3%	123	100%
European Economic Area	102	94%	5	5%	0	0%	1	1%	0	0%	1	1%	109	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	68	93%	3	4%	0	0%	2	3%	0	0%	0	0%	73	100%
Southern Africa	14	67%	6	29%	1	5%	0	0%	0	0%	0	0%	21	100%
<b>Total</b>	<b>394</b>	<b>62%</b>	<b>91</b>	<b>14%</b>	<b>1</b>	<b>0%</b>	<b>140</b>	<b>22%</b>	<b>0</b>	<b>0%</b>	<b>14</b>	<b>2%</b>	<b>640</b>	<b>100%</b>