

2,356,414

Confirmed cases in more than 200 countries, territories or areas¹

160,120

Deaths

48,588

Restrictions on mobility have been imposed by 196 countries, territories or areas

1,174

IOM movements cancelled

\$499 M

Requested by IOM for the Strategic Preparedness and Response Plan for COVID-19



IOM leads hygiene promotion sessions in Yemen, teaching handwashing as a mitigation measure for COVID-19 and Cholera @IOM 2020."

SITUATION OVERVIEW

Since it was initially reported on 31 December 2019, the illness known as Coronavirus Disease 2019 (COVID-19) has spread rapidly across the globe, leading the World Health Organization (WHO) to declare it a pandemic on 11 March 2020. As of [21 April](#), more than 2.3 million confirmed cases and over 160,000 deaths have been reported globally since the outbreak began. Confirmed cases have been reported in more than 200 countries/territories/areas, with new cases and countries reporting daily.

While many borders and airports continue to remain closed for common use, the varying impacts of COVID-19 across the affected countries, territories and areas continues to generate a diversity of responses. Even with global mobility and migration dynamics on pause, the total number of COVID-19 related mobility restrictions reached 48,588 on 20 April 2020, marking a slight increase of nearly one per cent from the 48,359 recorded on 17 April, as well as a similar one per cent increase on restrictions on the arrival of passengers from specific countries, territories or areas. In such a context, Governments and authorities have started demonstrating a preference for mixed measures, cautiously loosening some essential mobility restrictions yet curbing overall internal mobility.

At the same time, a variety of factors related to COVID-19, including border closures, high prevalence of the disease in

certain countries, and conflict de-escalation measures (in order to allow for COVID-19 prevention and response), have caused sizable returns in many regions of the world. For example, high numbers of COVID-19 cases in Iran (Islamic Republic of) have pushed more than 177,000 Afghans to return to Afghanistan since the beginning of March. While in the Greater Mekong Sub-Region, following the announcement of lockdown measures in Thailand, over 193,000 cross-border migrants from neighbouring countries returned to their home provinces or countries, including Cambodia, the Lao People's Democratic Republic and Myanmar. In Syria, IOM partners have reported that over 106,000 people displaced by military operations in the northwest have now returned to their place of origin, while over 20,000 have returned to their former place of displacement; 55 per cent of returnees were motivated by an improvement in the security situation, whereas almost half of internally displaced persons (IDPs) (48%) who arrived in their former place of displacement were pushed by concerns related to COVID-19. These types of movements are concerning for a variety of reasons, but key among them is the fact that many of the receiving locations have even less capacity to provide testing, isolation and treatment, and thus may in fact drive transmission even further.

¹WHO COVID-19 Situation Dashboard: <https://who.sprinklr.com/>.

SNAPSHOT OF IOM RESPONSE

Coordination and Partnerships

IOM is engaged in ensuring strong and efficient coordination among relevant actors at the community, national, regional and global levels to support the global pandemic response, particularly in coordinating cross-border efforts.

- In **Hong Kong SAR, China**, IOM organized a working group to coordinate the development of joint messaging and dissemination strategies for employers of migrant domestic workers. Ten organizations joined – including UN entities, recruitment agencies and NGOs – to discuss how employers can mitigate risks, ensure ethical recruitment and reduce the negative impact of COVID-19 containment measures on migrant domestic workers.
- The **Regional Office for Central America, North America and the Caribbean in San Jose** recently provided technical assistance to Costa Rica on implementing safe and appropriate border management in the context of COVID-19, as the country expects increased migrant flows from Nicaragua and Cuba.
- To address the urgent daily needs of the 5 million migrants unemployed in **Malaysia**, IOM is leading the UNCT Humanitarian Response, which includes drafting a response plan, leading advocacy with the government, conducting a migrant needs assessment, coordination with NGOs and developing a fundraising strategy.
- **IOM Armenia** has been working to engage diaspora communities, [by digitally connecting local medical teams in Armenia](#) with doctors in New York of Armenian origin.

Tracking Mobility Impacts

As movement across borders continues to be affected, IOM's capacity to provide data and analysis on population mobility dynamics remains crucial for a more targeted and evidence-based response.

In an effort to provide a global overview of the impact of COVID-19 on human mobility at the global, regional and country levels, IOM is monitoring, analyzing and reporting on **international travel restrictions** being implemented around the world. IOM maintains a global mobility restrictions database based on information from IATA, WHO Situation Reports and relevant media and official sources. This database provides daily updates on the changing travel restrictions being imposed by countries, territories and areas in response to COVID-19, enabling interactive analysis and mapping.

IOM tracks and monitors **in-country and cross-border flows** in order to understand population mobility trends within and between certain areas, which in turns helps to inform public health preparedness and response strategies.

- In **South Sudan**, IOM is working with UNICEF, UNHCR and REACH on mapping flows between affected areas in neighbouring countries and destination locations in South Sudan. IOM's Displacement Tracking Matrix (DTM) flow monitoring data and analysis were presented to the COVID-19 Steering Committee chaired by South Sudan's Ministry of Health and used by the Point of Entry Technical Working Group and Needs Analysis Working Group to inform geographical prioritization.
- In **Nigeria**, IOM is working with WHO and the State Ministry of Health to collect travel history data at relevant border posts with Cameroon.
- In **Afghanistan**, IOM teams are engaged in Mobility Mapping Assessments in 25 provinces and have completed data collection through focus group discussions (FGDs) in 1,775 settlements across 11 provinces. FGDs have also provided a forum for COVID-19 hygiene and awareness sessions and the distribution of information, education and communication (IEC) materials.

IOM is also tracking and monitoring the impact that COVID-19 is having on IDPs and migrants.

- In **Burundi**, IOM tracked 116,951 displaced individuals as of February 2020. Following the closure of borders as a result of COVID-19, many day labourers are no longer able to undertake their daily activities (cross-border farming or other business) especially at the border with Rwanda, the Democratic Republic of the Congo and the United Republic of Tanzania.
- In **West and Central Africa Region**, through the DTM Event Tracking Tool (ETT), IOM is reporting on key mobility events related to Covid-19. ETT is now active in Burkina Faso, Cameroon, Chad, Guinea, Mali, Mauritania, Niger, Nigeria and Senegal, and includes information on how measures being put in place are impacting migrants.
- In **Panama**, IOM is monitoring the impact that the border closure between Panama and Costa Rica is having on migrants in-country. Approximately 2,500 migrants have been stranded in Panama since 18 March 2020; between 2-9 April, IOM identified needs per sector and mapped actions being implemented.

A dedicated landing page on the [IOM Flow Monitoring Portal](#) has been developed to act as a central repository and dissemination channel for flow monitoring, mobility tracking, border management, movement and other reports, maps and outputs produced at country, regional and global level in relation to COVID-19.

Risk Communication and Community Engagement (RCCE)

IOM is working with RCCE counterparts at the global, regional, national and community levels to develop RCCE strategies that ensure that mobility is properly considered

in public health messaging, and that migrants and mobile communities have access to timely, context-specific, and correct information.

- In **Panama**, IOM is developing messaging tailored to migrant populations, both at Migrant Reception Centers at the borders, as well as in Panama City, San Miguelito and La Chorrera. Messages on proper hygiene and measures to prevent the spread of COVID-19 have been shared with migrant populations via social media.
- In **Guinea Bissau**, IOM has trained community leaders and key stakeholders regarding COVID-19 including signs and symptoms associated with the illness, and measures on how to protect oneself and others.
- In **Uruguay**, IOM has developed simple basic messages that are being shared with migrants via WhatsApp and text messages. IOM is also working with UNICEF to provide specific COVID-19 support for children, aimed at migrant families with children.
- **IOM Tunisia** produced a video on prevention with migrant faith leaders and disseminated health messages during voucher distributions.
- **IOM Kazakhstan** has developed and conducted an online training for NGO partners working with migrants affected by restrictions imposed by the State of Emergency. IOM has provided NGO workers with information on preventative measures, as well as the use of disposable protective masks, protective gloves, glasses, and suits during the COVID-19 pandemic.
- **IOM Micronesia** is translating scripts for Q&A videos on WASH and safe hygiene practices in Chuuk and is supporting the development of a video for the hearing impaired in Pohnpei.
- **IOM Thailand** has completed the first phase of its nationwide survey to understand existing challenges, needs and concerns for migrant populations in Thailand. Initial results revealed misconceptions about the prevention and treatment of COVID-19 that the mission is now developing IEC materials to address. The mission is also working closely with the UNCT Communications Team to develop a campaign called, "Solidarity Against COVID-19," which will be rolled out on social media platforms.
- In **Mozambique**, IOM is supporting the Ministry of Health (MoH) in community outreach and dissemination of key COVID-19 prevention messages to migration-affected communities across Maputo, Gaza and Inhambane provinces – areas where Mozambican migrant workers have been returning in the past few weeks following the lockdown in South Africa. IOM is also supporting the MoH and partners in crafting messages tailored to returned migrant workers and their families and supporting local community radio in producing COVID-19 programming in local languages.

- **IOM Indonesia** has developed a video campaign on Prevention Measures for COVID-19 and the point of entry protocol for returning migrants from overseas. The video has been handed over to the Ministry of Social Affairs and the National Board for the Protection of Indonesian Migrant Workers, which is mandated to provide return support to the migrant workers.

Disease Surveillance

Migration and mobility are increasingly recognized as determinants of health and risk exposure; IOM plays a key role in linking an understanding of population mobility with disease surveillance.

- In **Lao People's Democratic Republic**, IOM and the Ministry of Labor and Social Welfare jointly reviewed and revised the rapid assessment monitoring tool for returning migrants, which will cover 18 provinces of Lao PDR in coordination with government counterparts.
- In **Mozambique**, IOM has mobilized its community health workers across the southern provinces to contact returned migrant workers to ensure that they have received COVID-19 prevention and quarantine messages, and to refer them to a health centre if they are experiencing symptoms.

Logistics, Procurement and Supply Chain

In coordination with the Pandemic Supply Chain Network (PSCN), the Supply Chain Interagency Coordination Cell and the relevant clusters, IOM supports the procurement, storage and distribution of critical supplies.

- In **Guatemala**, at the request of the Ministry of Foreign Affairs (MINEX), IOM is providing support in the operation of daily buses to assist migrants entering the returnee reception centres in Guatemala City in accessing different provinces in the country.
- **IOM Viet Nam** has donated thermometers, hand sanitizers, gloves, gowns and masks to frontline immigration officers working at the two biggest airports – Ha Noi Noi Bai International Airport and Ho Chi Minh City Tan Son Nhat Airport. Along with the donation, IOM delivered a "training of trainers" (ToT) training on infection prevention and control and the importance of migrant protection during the pandemic crisis.

Points of Entry (POEs)

IOM is a strategic partner to support Member States in strengthening core capacities for public health measures at points of entry.

- **IOM Bangladesh**, in partnership with local authorities and the Ministry of Health, conducted a rapid needs and capacity assessment of Hazrat Shahjalal

International Airport in Dhaka as well as multiple railway stations. IOM continues supporting the Government of Bangladesh at eight sea, land and air borders through the provision of equipment, training of health and immigration staff, and strengthening inter-agency coordination at points of entry.

- In **South Sudan**, IOM supported the Ministry of Health as co-lead of the PoE technical working group in the development of COVID-19 standard operating procedures (SOPs) for Border Health and Points of Entry, RCCE, and Infection Prevention and Control (IPC). IOM is undertaking active COVID-19 screening at three PoEs (Juba International Airport, Wau, and Nimule checkpoint), and has conducted stakeholder mapping across border areas.
- IOM contributed to public health SOPs for key PoE in **Mauritania**, while in **Guinea Bissau**, IOM reviewed and drafted SOPs for detection, notification and case management of public health emergencies and suspected cases.
- In **Zimbabwe**, IOM completed rapid assessments to identify needs and gaps at all PoEs to better inform interventions as the mission scales-up its support for Zimbabwe's humanitarian response to the COVID-19 pandemic to cover all PoEs.
- In the **Democratic Republic of the Congo**, five points of control (POCs) are supported by IOM in Kinshasa. IOM has equipped frontline workers with personal protection equipment (PPE), health screening materials and tablets to support contact tracing, and has provided direct technical supervision at the POC sites in Gombe – Kinshasa. Between 6-15 April, 178,848 travellers were screened at the five PoCs.

Infection Prevention and Control (IPC)

The provision of safe water, sanitation and hygiene (WASH) is an essential part of prevention efforts during infectious disease outbreaks, including COVID-19. Combined with improved access to WASH services, IOM continues to support national capacity to implement infection prevention and control measures as these are an effective way to prevent or limit the transmission of the disease.

- In **Micronesia**, IOM has partnered with the Departments of Health Services and Education, as well as UN partners, to provide handwashing trainings to 12 community groups. Additionally, IOM installed multiple group WASH stations, and distributed more than 1,200 bars of soap.
- In **North Macedonia**, the medical teams in both Temporary Transit Centers (TTCs) are performing medical screening of each new arrival, as well as regular daily body temperature checks of the accommodated migrants/refugees/asylum seekers. Additionally, in cooperation with the Institute for Public Health, disinfection activities and epidemiological control have been intensified in the TTCs.

- In the **Democratic Republic of the Congo**, IOM facilitated the establishment of 63 hand washing stations in Gombe and its perimeters. In addition, digital thermometers, sprayers for disinfecting administrative buildings and tents to serve as shelters at strategic health checkpoints have been donated to the National Border Hygiene Programme.
- **IOM Afghanistan** has trained more than 100 community health supervisors and health workers in Nimroz and Herat provinces on infection prevention and control.

Case Management and Continuity of Essential Services

IOM continues to provide life-saving support to vulnerable communities affected by widespread transmission of COVID-19 in order to reduce morbidity and mortality rates. In particular, IOM focuses on countries and regions suffering from vulnerable health systems and with high prevalence of malaria, HIV/AIDS, measles and tuberculosis, as well as other preventable infectious and non-communicable diseases.

- Migration health staff in **IOM's Health Assessment Programmes (HAP)** have been called upon to contribute to national COVID-19 response activities in some locations. As of 17 April, 56 staff have been deployed to support COVID-19 related programmes, both within IOM programmes and to government efforts. 29 HAP sites are liaising with Member States to provide supplies and services to support local COVID-19 response initiatives, including, among others, screening for COVID-19 at PoEs and elsewhere, the provision of primary and acute care services related to COVID-19, and the provision of personal protective equipment and supplies for COVID-19 response.
- In **Syria**, IOM is providing tents to set up triage centres in the northwest of the country.
- In **Turkey**, IOM-supported migrant service centres are providing counselling and referral services on COVID-19 by telephone, and prioritizing support to those over 60.
- In **Cox's Bazar, Bangladesh**, IOM has extended its support to Cox's Bazar Sadar Hospital with 10 medical officers, one radiologist, one radiographer, one sanitation officer and 15 cleaners. IOM has also provided building materials to Save the Children for the construction of an isolation centre.

Camp Coordination and Camp Management

As co-lead of the global CCCM cluster, IOM works to support regional, national and local authorities to develop contingency and response plans, and to ensure the continuation of services in existing displacement sites at risk.

- **IOM Philippines** completed eight WASH and COVID-19 preparedness facilities within the Makaila displacement site, bringing the total number of displacement sites with COVID-19 preparedness facilities to six. Furthermore, to ensure the protection of IDPs in Mindanao, IOM is issuing localized CCCM operational guidance to aid field staff, camp managers, Local Government Units and humanitarian organizations in their COVID-19 preparedness and response.
- **IOM Mozambique** is disseminating COVID-19 prevention messages to displaced and resettled populations in Sofala and Cabo Delgado, targeting both displaced families and host communities, integrating these messages into ongoing distributions of non-food items and other aid delivery.
- **IOM Portugal** has updated their [information products](#) on COVID-19, state of emergency and psychosocial well-being, which are also now available in Nepalese, Farsi, Arabic, Russian and Thai.
- **IOM Marshall Islands** has been working closely with the Shelter and Gender and Protection clusters to update and develop new preparedness and response activities and finalize means of identifying the most vulnerable households in Majuro and Ebeye. IOM has also developed local and contextualized MHPSS materials for community outreach, has provided technical guidance on IPC for vulnerable populations, and is helping to coordinate the development of a rapid vulnerability assessment.

Protection

The current COVID-19 emergency is exacerbating all pre-existing vulnerabilities and risks of violence and discrimination, which can intersect with other factors such as gender, age and disability, but also nationality, status or ethnic origin. IOM is committed to ensuring the protection of migrants, displaced persons and other vulnerable populations remains at the centre of its COVID-19 response.

- In **Cox's Bazar**, IOM has developed “MHPSS Tele-health Guidelines”, a tool to support delivery of remote MHPSS services, ensuring adherence with physical distancing requirements. It encompasses two categories, a MHPSS hotline and tele-counselling.
- **IOM Lao People's Democratic Republic** provided support to the Lao Women's Union Counselling and the Protection Centre for Women and Children in Luang Namtha Province, which currently has 15 female victims of trafficking under the age of 18 who returned from China and are receiving counselling support. At the request of Lao Women's Union, IOM provided PPE equipment to strengthen the protection and prevention of COVID-19.

Addressing Socio-Economic Impacts of the Crisis

Recognizing the importance of including migrants and other mobile population groups in UN development responses, IOM is actively engaging with various partners from governments, the private sector, civil society, communities and individuals to re-establish means of socio-economic support to prevent human suffering during the crisis, and provide for a durable recovery in the post-crisis environment.

- **IOM Sri Lanka's** Assisted Voluntary Return and Reintegration and Counter Trafficking units undertook a virtual rapid assessment, interviewing returnees, stranded migrants, local NGOs and government stakeholders on the socio-economic impact of COVID-19 on migrants and returnees. The assessment addressed employment, mobility restrictions, access to social protection schemes and health care, remittances, challenges faced by undocumented migrants, stigma, human trafficking risks and re-integration.
- **IOM in the Western Balkans** is engaging existing networks working in PVE (Preventing Violence Extremism) to address the impacts of COVID-19 on the social and economic well-being of communities in order to meet the needs of at-risk youth, and the communities who support them, amidst the pandemic.



IOM's enumerators are sensitized about COVID-19 in Somalia © IOM 2020.

OPERATIONAL UPDATES

Operational Challenges

IOM's Resettlement and Movement Management (RMM) operations have been severely impacted by the current crisis. Of departures scheduled for between 11 February and 30 April, 1,174 movements have been cancelled, affecting 10,500 individuals, the majority of whom are resettlement cases.

Based on local epidemiological realities and government decisions, IOM has had to scale back its pre-migration health activities and movement operations temporarily to guarantee the safety of the migrants as well as staff. As of 17 April 2020, 73% of [IOM Migration Health Assessment Centre \(MHAC\)](#) sites have temporarily ceased main Health Assessment Program (HAP) activities; however, efforts are being made to ensure that essential services are still being provided to migrants with significant medical conditions. Additionally, 23% of MHACs have reduced their HAP services, and 4% have re-opened to deliver reduced services.

New Programmatic Approaches

[IOM Marshall Islands](#) is drafting a contextualized workplace toolkit to support local businesses to prepare for COVID-19 and potential lockdown situations. The mission is also launching a nation-wide competition (via local papers, education networks and social media) for households to share stories and drawings of how they are preparing for COVID-19, with prizes for entries.

Guidelines and Guidance Documents

IOM contributed to the WHO Interim Guidance, "[Preparedness, Prevention and Control of Coronavirus Disease \(COVID-19\) for Refugees and Migrants in Non-Camp Settings](#)", published on 17 April.

Information Sharing and Communications

As co-lead of the Global CCCM Cluster, IOM has been supporting a series of [CCCM Cluster webinars](#) that are available to watch here. The latest, which were hosted on 14 and 21 April respectively, were entitled, "Training remotely: sharing of tips and best practices for capacity building in remote management" and "Adaptation of CCCM activities in urban neighbourhoods and informal sites for the COVID-19 response." The next session, entitled, "Digital communication and clean energy in responding to COVID," will take place on 28 April.

IOM's Migration Health Division Research Unit has developed a [portal](#) for research publications and high-yield evidence briefs on COVID-19 and its intersection with migration health.

IOM's [COVID-19 Analytical Snapshots](#) summarize the latest analysis covering migration and mobility related impacts of Covid-19 from around the world. New snapshots include: "international remittances"; "impacts on migrant children and youth" and "migrants and global food supply".

[IOM Coordination Office for the Mediterranean](#) has released informational [brochures](#), [audio](#), and [video](#) on COVID-19 and how individuals can protect themselves. The resources have been translated into multiple languages commonly spoken by migrants.

IDaspora.org will host the [Global Diaspora Virtual Exchange on Response to COVID19](#) on Wednesday, 22 April bringing together diaspora representatives from Africa, Asia and Europe. The objectives of the event are to create a space for collaboration amongst diaspora groups, and to showcase the important work that diaspora groups are already doing. The event will be organized in collaboration with partners from the Africa-Europe Diaspora Development Platform (ADEPT), African Diaspora Network, Omek, and Diaspora Emergency Action and Coordination (DEMAC).



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