



Migrant families receive food assistance from the IOM Migrant Assistance and Counter Trafficking Unit, Thailand.



Community members are employed by IOM to construct and renovate isolation and treatment facilities in Cox's Bazar, Bangladesh.

OVERVIEW

Reported COVID-19 cases in Asia and the Pacific continue to increase, though at a relatively stable pace, with countries streamlining measures, and gradually beginning to relax internal mobility restrictions. As of 18 May, over 467,000 cases and over 19,000 deaths have been reported in the region. Confirmed cases have been reported in 28 countries, territories and/or areas. Afghanistan, Bangladesh, India and Pakistan continue to report an upward trend in new daily cases, whereas Indonesia, Japan, Maldives, Philippines, Thailand, Singapore and Sri Lanka have witnessed relative stability in new cases identified.

There are reports of stigma and discrimination towards migrants at destination, transit and home locations upon return due to fears around COVID-19 transmission, which may lead to further exclusion from or unwillingness to access health services. There are also increasing serious concerns regarding stranded and vulnerable migrants abroad – both in the region and outside of it – and their ability to satisfy basic needs. Furthermore, hundreds of thousands of migrants have lost their jobs and are particularly vulnerable to the socio-economic impacts of COVID-19; as of 2019, the region is home to five of the world's top 10 remittance-receiving countries. There have also been some worrying reports in the region of concentrated clusters of cases in migrant settings, including among migrant workers housed in dormitory accommodation in Singapore, in immigration detention settings in Thailand and among migrant and refugee communities in Malaysia.

To address these challenges, IOM missions in the region are working with governments and partners to ensure that migrants, whether in regular or irregular situations, as well as returnees and forcibly displaced persons, are included in all aspects of COVID-19 preparedness and response efforts. Crucially, IOM is also coordinating closely with governments on both immediate and long-term strategies for ensuring that travel remains safe, including through combined inputs from IOM's border management and health teams.

CONTACTS

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¹Afghanistan, Australia, Bangladesh, Bhutan, Brunei Darussalam, Cambodia, China, Fiji, India, Indonesia, Iran (Islamic Republic of), Japan, Lao People's Democratic Republic (the), Malaysia, Maldives, Mongolia, Myanmar, Nepal, New Zealand, Pakistan, Papua New Guinea, Philippines (the), Republic of Korea (the), Singapore, Sri Lanka, Thailand, Timor-Leste and Viet Nam. Source: WHO Coronavirus situation reports: <https://www.who.int/emergencies/diseases/novel-coronavirus-2019/situation-reports/>.

IOM RESPONSE

TRACKING MOBILITY IMPACTS

COVID-19 related mobility impact is being tracked by 34 country offices at 831 Points of Entry (POE) in the region, including 218 land borders, 114 sea borders, 190 airports, 115 internal transit points, and 194 area/sub-national points. IOM has also ramped up its Displacement Tracking Matrix (DTM) information consolidation exercise globally to capture the impact of COVID-19 on Internally Displaced Persons (IDPs). This information is then used by the DTM team to produce regular sitreps on the situation of IDPs vis à vis COVID-19 and related DTM activities.

With support from **IOM Mongolia**, the Municipality of Ulaanbaatar has created a technical Work Group to institutionalize DTM Flow Monitoring within the capital city of Mongolia. Since 27 February, 2020 when DTM Flow Monitoring started in Ulaanbaatar, more than 2.8 million movements have been monitored. IOM has developed and shared daily situation reports and periodical analytical reports with the leading national and municipal emergency agencies.

RISK COMMUNICATION AND COMMUNITY ENGAGEMENT (RCCE)

In Ukhiya and Teknaf Upazilas in **Cox's Bazar**, IOM reached 13,661 beneficiaries through awareness raising campaigns on health messages and ways to cope with stress and COVID-19-related anxiety. IOM also uses digital and social media platforms, radio services, messaging services, door-to-door and group-level interventions to communicate key messages concerning the COVID-19 outbreak in Cox's Bazar. Community leaders, religious leaders and women's groups helped in disseminating key messages after attending trainings run by IOM staff. In view of physical distancing guidelines, IOM has adapted RCCE activities in areas where people are likely to visit, including shops, water points, and distribution points. In Teknaf, IOM teams are developing assessment tools to determine whether the SMS- and call-based Interactive Voice Response system could replace face-to-face contact in the event of widespread infection across the camps.

In **Lao PDR**, IOM provided information sheets, as well as 100 face masks and 28 hand sanitizer dispensers, to the I-Job recruitment agency selected by the Ministry of Labour and Social Welfare to provide direct assistance to returning migrants at border/quarantine centres in Vientiane Capital, Savannakhet and Xaignabouli Provinces. **IOM Marshall Islands** is updating information on community billboards in Majuro, as well as working with partners to reach outer island communities with risk communication messaging. The mission is also implementing a COVID-19 household rapid vulnerability assessment in Majuro, reaching over two thirds of the population. During the exercise, IOM is also distributing information, education and communication materials with information regarding COVID-19 and sources of accurate, up-to-date information.



Enumerators practice during a training on a Knowledge, Attitude and Practice study, which will be conducted nationwide, Mongolia.

IOM Mongolia has started data collection for the Knowledge, Attitude and Practice (KAP) survey, which will be used to interview 500 existent and prospective migrants in the capital city Ulaanbaatar and rural areas of Mongolia. The survey will help assess the impact of the government's restrictions on the public and the effectiveness of information delivered by the government. The KAP will also help to better target and increase the overall effectiveness of communication campaigns on COVID-19.

IOM Myanmar is providing outreach health workers and community-based volunteers with job aids, health screening assessment tools, personal protective equipment (PPE). Awareness raising activities are under way through public address (PA) systems in cars around Rural Health Centers in Northern Rakhine State. The mission is also helping to distribute informational posters and pamphlets to these Rural Health Centers.

In **Nepal**, the sixth episode of "Talk of the Town" aired on the National Television as part of an ongoing media action program about COVID-19 preparedness and response. The latest broadcast focused on the Government of Nepal's preparation to repatriate Nepali migrant workers stranded in various countries of destination in the wake of the COVID -19 pandemic. The episode especially highlighted the measures taken to control the spread of the virus, including use of well-equipped quarantine centers to accommodate returnee migrants and managing employment opportunities within the country. The complete episode can be accessed [here](#).

IOM Sri Lanka provided the MOH with 100 PA systems and approximately 16,000 printed RCCE materials on safe shopping and quarantine practices. The mission, together with the MOH and Health Promotion Bureau, has developed audio content for the PA system and a video with positive messages to counter discrimination and stigmatization for release through social media channels.

IOM RESPONSE

DISEASE SURVEILLANCE

In **Cox’s Bazar**, 8,940 community members entering local administration offices were screened by IOM-trained Cyclone Programme Preparedness (CCP) volunteers using equipment donated by IOM. IOM is also supporting WHO-led contact tracing activities for COVID-19 surveillance in refugee camps in Cox’s Bazar; staff has already identified and trained contact tracing supervisors from the communities in 13 camps. IOM and partners have identified and trained an additional 130 volunteers and community health workers to support tracing efforts. The training covers locating and interviewing possible contacts, providing status alerts, information counselling, procedures to submit interview feedback and measures to provide follow-up support.

IOM Mongolia is working with the Office of the Deputy Prime Minister (Chair of the State Emergency Commission) to set up an inter-agency working group, tasked with designing a system to monitor internal movements during emergency situations, based on IOM’s displacement tracking matrix model. **IOM Myanmar** is providing PPE to a surveillance team of Kachin State. IOM field staff conducted health screening in Kayin State and followed referral mechanisms to direct the individuals with suspected COVID-19 cases to the designated clinic.

LOGISTICS, PROCUREMENT & SUPPLY

In **Bangladesh**, procurement remains an ongoing challenge, as there are severe market shortages of good quality PPE. During the reporting period, IOM Bangladesh received 5,000 respirators, which are essential for the protection of staff working at IOM-supported medical facilities.

POINTS OF ENTRY (POE)

IOM’s Regional Office for Asia and the Pacific organized an internal webinar on the “SOP for Front-line Border Officials at the Point of Entry in Response to COVID-19 Outbreak.” The online session was attended by 81 staff from 23 IOM Country Offices and was facilitated by the regional Integrated Border Management (IBM) unit. The webinar covered standardized terminology for Points of Entry (POE); listed most relevant POE activities from IOM’s IBM, Migration Health Division, Emergency and Post-Crisis and Displacement Tracking Matrix teams to facilitate cross-thematic synergies; discussed recommendations for implementing the SOP, and provided guidance on SOP-related projects and best practices for engaging with stakeholders in the short and medium term.



Migrant workers receiving support from the Nghe An Migrant Resource Center are screened for fever and other symptoms, Viet Nam.

During the reporting period in **Bangladesh**, IOM hosted two POE Task Force meetings at Benapole and Darshana land ports. Since March 2020, IOM has completed rapid needs and capacity assessments at eight PoEs across the country. IOM has also convened seven Health Border Mobility Management POE Task Force meetings attended by 155 participants from relevant POE authorities. Also in Bangladesh, to help the Government build capacity at POEs, IOM is training POE personnel to identify, screen and refer ill travelers, procured one ambulance and engaged medical support staff to assist with screening at Chittagong Airport and donated equipment to CDC staff in Dhaka to meet data entry and information sharing needs.

IOM Marshall Islands has rolled out the training, “Management of Ill Travelers in the Context of COVID-19 Outbreak,” with all Division of Immigration staff. In Majuro, IOM is working with the POE group to improve WASH facilities at relevant locations. **IOM Myanmar** is distributing crucial surveillance materials and infrastructure, such as testing booths, with the goal to cover every official POE in Kachin State, support the government health capacities and facilitate more testing.

NATIONAL LABORATORY SYSTEMS

IOM Bangladesh in Cox’s Bazar is collecting samples for COVID-19 testing from four primary health care facilities; during the reporting period, 47 samples were collected and transported to testing laboratories.

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

On 12 May 2020, the IOM Media and Communications Division released the [IOM Public Communication Campaign Toolkit](#), which provides tools and templates for producing effective and responsive campaigns in unique and challenging migration contexts.

IOM RESPONSE

INFECTION PREVENTION AND CONTROL (IPC)

In **Cox's Bazar**, IOM distributed 40,588 cloth masks, 4,665 sanitizers, 4,855 soaps, 128 thermometers, and five waste bins to the local government, camps, and law enforcement agencies. A team of five experts from UK-Med has arrived in Bangladesh to provide technical support and expertise to IOM in case management and infection prevention and control at IOM-managed isolation and treatment centers (ITCs). 22 ambulances were disinfected at the IOM-managed Ambulance Disinfection Centre in Cox's Bazar, which is open 24 hours a day and has 12 volunteers working in shifts to ensure uninterrupted service. IOM also installed 135 hand washing devices in communal areas, and WASH teams finalized a beneficiary satisfaction survey of handwashing devices in 13 camps. The survey showed that 86 percent of beneficiaries were satisfied with availability and function of handwashing devices, while 14 percent listed concerns, such as water and soap availability, waiting times/overcrowding, timely repairs, height of taps and water overflow into nearby roads and footpaths. IOM teams are working to address these concerns.

IOM Myanmar is distributing liquid soap and hand sanitizers to local counterparts, targeting more than 20,000 beneficiaries from 35 IDP camps in Kachin, including a large influx of returning migrants due to COVID-19. Also, IPC efforts are supported at three camps and a market in Buthidaung (Northern Rakhine State).

With **IOM Viet Nam's** support, the Migrant Resource Center (MRC) in Nghe An, Viet Nam has been equipped with necessary protective products, such as hand washing basins, masks, hand sanitizers, thermometers, posters and banners with information related to COVID-19, as well as infection prevention methods.

CASE MANAGEMENT AND CONTINUITY OF ESSENTIAL SERVICES

IOM Bangladesh distributed PPE to staff at health facilities in Cox's Bazar, including 1,600 pairs of gloves, 120 gowns, 202 coveralls, 20 goggles, 250 medical masks, 52 face shields, and 74 respirators. During the reporting period, 8,456 consultations were conducted at IOM-supported primary health care facilities. The construction of a 100-bed ITC in Camp 20E continues, and to limit the number of labourers on site, IOM divided the 300 labourers into three teams working at different locations. During the reporting week, the structure has been set-up and installed, and the roof secured. In Camp 22, IOM is helping Médecins Sans Frontières upgrade an ITC, including with fixes to the drainage system and structural reinforcements. In coordination with UNHCR, IOM staff supported the last of the Rohingya, who arrived in Cox's Bazar by boat, to return to their communities after completing their quarantine at the IOM-managed ITC in Leda. IOM also conducted a rapid needs and capacity assessment of the Government-run isolation and treatment centers in Ramu and Chakoria hospitals in Cox's Bazar district.



Community members are employed by IOM to construct and renovate isolation and treatment facilities in Cox's Bazar, Bangladesh.

Also in **Cox's Bazar**, IOM's dispatch and referral unit coordinated 33 requests for isolation bed capacity management and ambulance dispatch. Five additional ambulances have been added to the common pool and seven are assigned to transport potential COVID-19 patients. Intensive care equipment has been installed in two ambulances. A new hotline has been set up to provide direct telemedicine advice and COVID-19-related health information especially for Bangladeshi migrants abroad. The new hotline has 20 WhatsApp-based phone connections and a total of 2,644 migrants were supported. While some requests for information can be addressed over WhatsApp chat, 600 migrants received call backs with telemedicine advice from doctors and health professionals that volunteer their services for the hotline.

IOM Myanmar staff support a 20-patient bed isolation ward for the COVID-19 patients in Buthidaung Hospital, Northern Rakhine State.

CAMP COORDINATION AND CAMP MANAGEMENT

IOM teams in **Cox's Bazar**, distributed 13,864 tie down kits in preparation for cyclone season, provided 11,498 hygiene kits, refilled 18,480 liquified petroleum gas (LPG) cylinders, and distributed 192 new LPG packages, including a stove, cylinder, and necessary accessories. IOM also coordinated with the American Red Cross to run an orientation session on cyclone preparedness for 288 disaster management unit volunteers (61 women; 277 men) across 17 of the 18 camps under IOM's area of responsibility. In preparation for cyclone season, IOM site management teams are prioritizing drainage repair and reconstruction/ drainage network maintenance, slope stabilization, stairway reinforcement, bridge construction, and improving pedestrian access to critical facilities, especially those necessary in the COVID-19 response.

IOM Nepal is drafting a checklist for the local government to ensure provision of basic facilities, services and standards for COVID-19 response, and that all local governments across seven provinces have a common understanding. The mission is also supporting set up of quarantine centres/sites.

IOM RESPONSE

PROTECTION

IOM and partners in **Cox’s Bazar**, sensitized 515 people on key health messages and the need for heightened awareness of the risk of trafficking during the outbreak. In line with guidelines from the Inter-Sector Coordination Group and the Refugee Relief & Repatriation Commissioner, IOM staff maintained small group activities for children and caregivers that included child-friendly messages on COVID-19 and positive parenting. 12 mental health and psychosocial support (MHPSS) staff took part in a workshop on rapid mental health, psychosocial needs and resources assessment of refugees and host communities. In Ukhiya, MHPSS staff led 12 training workshops on mental health wellbeing and the prevention of COVID-19 for 74 participants, including religious leaders, teachers, Cyclone Preparedness Programme and MHPSS volunteers, and members of community support groups. IOM protection staff supported 19 callers with tele counseling and 20 callers with basic emotional support for anxiety and stress. IOM and partners from the MPHSS Working Group are developing guidelines for alternative caregivers and case workers caring for children separated from their parents due to quarantine or isolation measures.

IOM Marshall Islands, in partnership IOM Micronesia and IOM Palau, finalized and translated two information sheets on human trafficking and COVID-19. These materials have been shared with the National Taskforce on Human Trafficking and will be distributed among communities. **IOM Mongolia** is currently expanding trainings for social workers in Ulaanbaatar on providing psychosocial support to vulnerable groups in the context of COVID-19. **IOM Nepal** organized a multi-stakeholder meeting, bringing together a range of key presenters from the Government of Nepal and Private sector to share information regarding ongoing interventions and plans for protecting migrant workers in countries of destination, as well as in Nepal.

IOM Viet Nam Corporate Responsibility in Eliminating Slavery and Trafficking (CREST) team continues to share bi-weekly Overview of Government Response to Ensure Safety and Wellbeing of Migrant Workers Affected by the COVID-19 Outbreak as part of the CREST newsletter. This includes updates on government efforts to protect migrant workers and informational materials for policy makers, employers, recruiters and migrant workers. These resources and communication materials are shared with more than 450 private sector partners with the goal of supporting migrant workers in respective supply chains. IOM CREST is interviewing labour recruiters in Asia to assess the impact of COVID-19 on the recruitment of international migrant workers.

IOM’s Corporate Responsibility in Eliminating Slavery and Trafficking (CREST) team published an [Overview of Government Response to Ensure Safety and Wellbeing of Migrant Workers Affected by the COVID-19 Outbreak](#).



Migrant families receive information about COVID-19 prevention during distribution of food and hygiene items, Tak Province, Thailand.

ADDRESSING SOCIO-ECONOMIC IMPACT

On 7 May, **IOM Bangladesh** organized a talk-show on Jamuna TV, a Bengali-language news channel, titled “The Impact of COVID-19 on Migrants and Migration,” and featuring a panel of guests, including the Secretary of Economic Welfare and Overseas Employment.

IOM’s Regional Office for Asia and the Pacific participated in a webinar by Minderoo Foundation on its paper, “Protecting People in a Pandemic,” about the roles of government and business and global good practice. IOM presented its guidelines for employers and labour recruiters, available in Thai and Khmer, and emphasized the need to safeguard the rights of migrant workers in migration management processes as part of socioeconomic recovery. Other panelists included representatives from Australian Border Force, the Responsible Business Alliance and Migrant Forum in Asia.

FUNDING UPDATE

Financial Requirement

USD 90.7 million

requested for Asia-Pacific under IOM’s Global SPRP (Feb-Dec 2020)

