

COVID-19 RESPONSE

IOM Regional Office for Middle East and North Africa Situation Report 28 (1-31 October 2021)



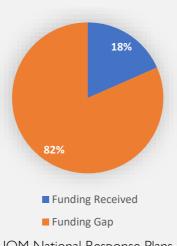
IOM supports the second round of a vaccination campaign in urban areas in Tripoli ©IOM Libya

Key Regional Updates

- As of 31 October 2021, a total of **8,707,805 COVID-19 cases have been confirmed** in the Middle East and North Africa (MENA) region, out of which **138,704 fatalities** have been reported.
- On 7 October 2021, IOM engaged in the 5th Cross-Regional Consultation with Civil Society Organizations and other Stakeholders in the Asia Pacific MENA Region. The consultation is part of the Migrant Forum in Asia (MFA) and the International Organization for Migration (IOM)'s initiative to bring together civil society, trade unions, and other stakeholders to discuss migration trends and issues across the Asia Pacific MENA region. As part of a series, this consultation focused on the challenges of social protection coverage, especially for migrants as they return to their countries of origin. The main objectives of the consultation were to explore and assess the different areas in which social protection can operate and promote migrant workers' rights; and to develop recommendations on a comprehensive and responsive social protection scheme for migrant workers in both the short and medium-to long term, especially to those impacted by the COVID-19 pandemic. The consultation included a range of representatives, including from IOM, ILO, civil society, trade unions, Red Cross and Red Crescent societies and academia among others.
- IOM continues to support the inclusion of migrants in vaccination rollout across the region. In collaboration with Libya's National Centre for Disease Control (NCDC), IOM contributed to the COVID-19 vaccination roll-out in Libya, by conducting an intensive three-day awareness-raising campaign followed by vaccinations for migrants in Baten al Jabal, Ganfouda, Shara Zawya and Triq al Sika detention centres. With the aid of community mobilizers, IOM medical teams addressed questions and misconceptions expressed by the migrants and helped to administer the COVID-19 vaccines. As of 16 October, 2021, 4,288 migrants attended awareness sessions on COVID-19 vaccinations, while 1,152 migrants received their first dose of COVID-19 vaccine in detention centres and urban locations in Libya. While in Yemen, where communities are experiencing a resurgence in COVID-19 caseloads, a total of a total of 1,500 Yemenis, including displaced people, have been vaccinated against COVID-19 in IOM-supported health facilities.

IOM's appeal for the MENA region for 2021 142,181,250 USD

Funding contributions to COVID-19 for 2021:
26,168,802 USD in funding, including 6.1 million USD in COVID-19-specific projects and 20 million USD in mixed projects.



IOM National Response Plans related to COVID-19 can also be found at IOM's Crisis Response Site

Stories from the Field

Displaced Yemeni Women Step Up to Care for Children Left Behind by Impact of Conflict

Fire and bullets were flying everywhere, children were crying and people were running, that is when 30-year-old Nimrah and her 26-year-old sister Hasna knew it was time to again flee with only their children.

Years before, Nimrah had lived in Ma'rib with her three daughters, her sister, who has two children, her mother and 16 sheep. They supported each other to live and raise their children together.

Nimrah's husband was killed in a battlefield nearly six years ago. Hasna lost her husband in similar circumstances. They are one of many widows in Ma'rib, a governorate where half of displaced families are headed by single women, many of whom lost their husbands to the conflict.

"There are many widows around here," said Nimrah, noting that her deceased brothers left their spouses behind. "Three of my five brothers were killed in the battlefields in Sirwah, and two of them have left and not come back."

The family was first displaced one year ago when they had to flee to Madghal District in Ma'rib. "When we fled, we were hoping that the conflict would end soon, and we'd be able to return to our home and our old life."

But this was just the beginning of a long journey. Two months later, the family was forced to leave again this time to Raghwan. Then soon after, armed clashes intensified there, and they ran for their lives yet another time.

On that day, the two sisters were hurrying to load a pickup with their important belongings to escape to safety, but Hasna never made it. She was shot in the back of her head and killed immediately.

In the blink of an eye, Nimrah found herself alone, holding her deceased sister's body in her hands and suddenly responsible for her young niece and nephew who lost their mother. "I could hear nothing but people screaming and shouting at us to take her to the hospital. I couldn't move for a moment then without thinking, I put her head on my lap and tried to save her, but she was gone."

After this tragedy, life seemed so cruel. "I was full of sorrow. I still cannot stop thinking about what may happened if we fled earlier, or if we had been closer to a hospital. We may then still have my sister Hasna," said Nimrah.

After the death of her sister, Nimrah moved again with her



Nimrah and her daughters speak about their story at their shelter ©IOM Yemen

children, her mother and Hasna's two children. She became the primary caretaker for the entire family.

One of Hasna's two children was her seven-year-old son Saleh, who suffers from brain atrophy and needs constant observation and medical care. "His father had taken him to hospitals all over the country to try to find a cure for him, but doctors did not know what was wrong. Some said he was suffering of typhoid, while others said he had a blood infection," explained Nimrah.

Over the years, Saleh's condition has deteriorated, affecting the entire family's life. "I had to borrow money for his medicine and hospital checks. I started a small shop here in one of my two shelters to sell goods. I tried needle work to decorate women's veils, but none of these ventures lasted," she recalled.

"I told my mother that I must go with the children to Ma'rib City to be closer to the hospitals to provide Saleh with the health care he needs," she added. Leaving her mom behind, Nimrah moved to a farm but soon after, the landlord evacuated all displaced people, and so Nimrah was on the move again. This time to a displacement site.

It has been nearly eight months since Nimrah and the children settled in the site, and Saleh's condition kept deteriorating as the days went by. He eventually became weak and could no longer stand up without support.

Nimrah did not know how she could continue to support Saleh. Upon the advice of an IOM staff member, Nimrah joined the IOM caregiver programme intended to support people like her who are providing for sick relatives, vulnerable children or others in need.

"Nimrah was an active woman, and people in the camp trusted her. She is a humanitarian by nature, given the experiences that she had to live through. She is someone who takes care of everyone in the camp," explained Sabah, a member of IOM's camp coordination and camp management team.

As a volunteer with IOM, Nimrah does door-to-door visits and refers cases of people with specific needs to IOM staff who can provide specialized care. In the caregiver training, Nimrah learned safe hygiene, psychosocial welfare and first aid skills. The programme also teaches participants about measures to prevent against diseases like cholera and COVID-19.

Nimrah also now receives a monthly stipend to help her provide a better life and nutrition for her family.

"Taking Saleh to the hospitals and giving him the recommended medicine is not enough. I have to learn how to take care of him and how to enhance his overall health, including his hygiene and mental health,"

She is also determined to convey what she learned to her daughters and cousins.

"I have taught the other women in my family, as well as my daughters, how to take care of their families, and how to give Saleh what he needs to thrive."

The International Organization for Migration (IOM) collaborated with USAID's Bureau for Humanitarian Assistance (BHA) to provide training and support to 23 displaced women and men like Nimrah.

The COVID-19 situation in the MENA region continues to evolve even with the progress made so far on vaccination and the implementation of other public health measures. More than two-thirds of the countries in the region reported a significant decline in the number of new infections and new deaths during October 2021. Despite this, the International Health Regulations (2005) Emergency Committee continued to assert during its recent meeting that despite the decline in new infections currently being experienced in most regions, COVID-19 still constitutes a Public Health Emergency of International Concern (PHEIC). As of the end of October 2021, the MENA region had reported a total of 8,707,805 cases of COVID-19, out of which 138,704 proved fatal. During the reporting period, 179,971 new infections, and 4,383 new fatalities were reported. The number of new cases and new fatalities dropped significantly by 57.6 per cent and 47 per cent respectively. The case fatality ratio (CFR) remains at 1.6 per cent. The top five (5) countries in the region in terms of COVID-19 case load include Iraq (2,052,123), Morocco (945,201), Jordan (856,450), the UAE (739,654) and Tunisia (712,139). Combined, these countries account for 60.9 per cent of the regional case load. Overall, the MENA region accounts for 3.5 per cent of the global COVID-19 caseload. Countries experiencing the highest number of case fatalities include: Tunisia (25,221), Iraq (23,083), Egypt (18,428), Morocco (14,647), and Jordan (10,983). Cumulatively, the **MENA region accounts** for 2.8 per cent of the global fatalities associated with COVID-19. As of the end of October 2021, a total of 199,411,300 vaccinations have been conducted out of which 85,705,831 people have been fully vaccinated. Six countries, including Iraq, Egypt, Libya, Syria, Sudan, and Yemen, are yet to achieve a 10 per cent coverage for full vaccination.

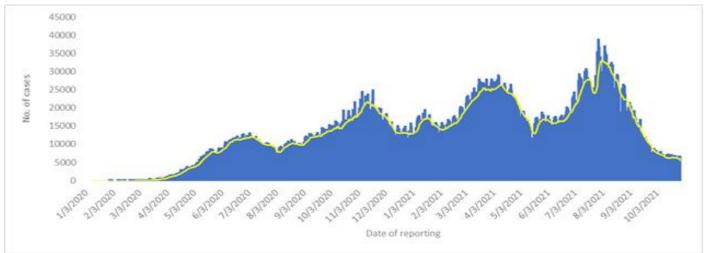


Figure 1: An epi curve showing a 7-day moving average for new COVID-19 cases in the MENA region as of 31 October 2021 ©WHO

The COVID-19 pandemic continues to significantly impact regional mobility in the form of various travel bans and mobility restrictions. Some significant changes have been recorded in the operational status of international Points of Entry (PoEs) in the MENA region during the reporting period, marking a shift towards a broader imposition of partial movement restrictions at PoE level all over the region. To date, according to IOM's Tracking Mobility Impact, there are no international airports that are fully closed in the region with around 75 per cent of monitored international airports now fully operational and 25 per cent partially operational. Around 13 per cent of the 106 monitored land border crossing points remain fully closed, 27 per cent are partially operational, while 58 per cent of land border crossing points that are now classified as fully operational, marking a decrease in the number of fully operational land border crossing points compared to September 2021. Out of 50 monitored blue border crossing points in the region, only two (2) of them are fully closed and 27 are partially operational, while 19 blue border crossing points are now fully operational for passengers¹.

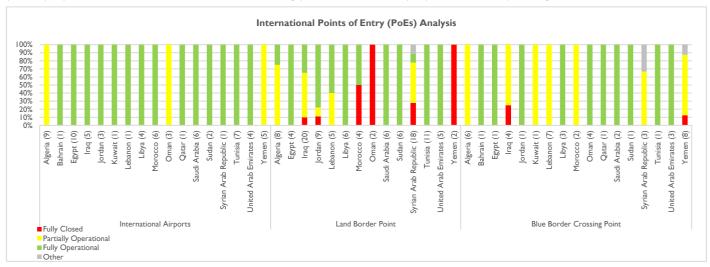


Figure 2: Operational status of PoEs as of 28 October 2021 across the MENA Region ©IOM Tracking Mobility Impacts

¹¹ Unknown status category for PoEs include three (3) per cent for land borders and one (1) for blue borders.

Response

COORDINATION AND PARTNERSHIPS

IOM in Yemen, as the co-lead of the refugee and migrant sector, continues to coordinate the migrant response in Yemen and advocacy for the equitable inclusion of migrants in vaccination campaigns. IOM also co-leads the Rapid Response Mechanism (RRM), which provides aid kits and multi-purpose cash assistance to newly displaced populations to cover their basic needs, including hygiene kits and materials to help prevent COVID-19 community transmissions. In October 2021, the teams distributed RRM kits to 940 newly displaced households in Ma'rib and Ma'rib Al Wadi districts. An additional 3,582 households were assisted with multi-purpose cash assistance in Ma'rib, Al Bayda, Ad Dali', Ibb, Al- Hodeidah, Dhamar, Hajjah and Sana'a governorates.

IOM Morocco continues to support the Ministry of Health and the Ministry of Interior as they rollout their COVID-19 vaccination campaign. Since mid-October 2021, migrants in irregular situation can have access to COVID-19 vaccinations in Morocco. IOM is currently working with civil society organizations (CSOs) that are in contact with migrants throughout the country to identify migrants willing to receive the vaccine.

In Iraq, IOM participated in the Kurdistan Health Summit, with the head of IOM's Migration Health Unit participating in a panel discussion on IDP integration titled, "A city of 1 million population absorbed one (1) million IDPs: A lesson for global health."

TRACKING MOBILITY IMPACTS

In Lebanon, IOM's Migration Health Division team performed 31 pre-departure examination for migrant workers, including four (4) Nigerians, 14 Sierra Leoneans and 11 Sudanese nationals. Fit-to-fly and polymerase chain reaction (PCR) tests were completed prior to departure for 33 applicants from Kenya, Sri Lanka, Nigeria, Sierra Leone, Sudan and Ethiopia.

RISK COMMUNICATION AND COMMUNITY ENGAGEMENT (RCCE)

In Yemen, IOM conducted more than 559 awareness raising sessions on COVID-19 and hygiene practices, reaching approximately 13,947 individuals in Ma'rib and Ta'iz governorates and the west coast of Yemen. IOM also distributed hygiene kits to 2,343 households in Ma'rib and



IOM conducts COVID-19 awareness campaign in Tajoura ©IOM Libva



IOM in Iraq conducts COVID-19 awareness raising sessions in Shariya Camp ©IOM Iraq

Ta'iz governorates and the west coast.

IOM in Algeria, through its assisted voluntary return and reintegration (AVRR) program, assisted 344 migrants (including ten (10) females and 334 males) to return to their home countries. In addition to returnee sensitization, IOM Algeria continues posting on social media to reach a broad audience on COVID-19 matters. All returnees were sensitized on COVID-19 preventive measures and received leaflets on COVID-19 prevention. During the reporting period, IOM Algeria finalized one (1) online post that reach a total of 2,301 people.

IOM in Iraq conducted 120 COVID-19 sensitization and awareness-raising sessions in health facilities and their catchment areas, reaching 973 people in Erbil, Dohuk, and Anbar governorates. These activities were led by community mobilizers and organized jointly in collaboration with the Department of Health (DoH). Information, education, and communication (IEC) materials (1,875), hygiene kits (668), and re-usable fabric/cloth facemasks (100) were distributed across the three governorates to men and women of all ages in internally displaced persons (IDP) camps, healthcare centers, and through door-to-door and household visits. Key messaging focused on infection prevention and control (IPC) measures during the elections to vote safely, COVID-19 vaccines and vaccination, and continued precautions for the gradual reopening of schools. IOM's RCCE teams also supported with screening activities at health facilities to community acceptance and control/management to ensure that all visitors safely access available health services. TV displays in health facility waiting areas regularly screened COVID-19 videos to target patients with key messages, and suggestion/complaints boxes were maintained in all facilities to provide an opportunity for community feedback. Communication with communities (CwC) teams distributed 2,500 COVID-19 IEC materials in Khanke Camp and conducted focus group discussion (FGD) on the most effective ways to use the materials. IOM's shelter and non-food items (SNFI) team has continued to sensitize communities on COVID-19 mitigation measures through FGDs and assessments to better understand community dynamics around COVID-19.

In **Libya**, IOM's medical team conducted 197 outreach and awareness raising sessions in Sabha, Ubari, Zwara, Tripoli, Bani Walid, and Benghazi areas. A total of 7,245 migrants

were able to improve their awareness and knowledge of COVID-19 precautionary measures and responsible behavior when confronted with a suspected infection through the sessions. In October 2021, IOM and the National Centre for Disease Control (NCDC) launched a joint vaccination campaign during which IOM community mobilizers, in collaboration with IOM and NCDC medical teams, provided 7,007 migrants with information on COVID-19 vaccination. Prior to vaccination activities, IOM and the NCDC addressed questions and misconceptions expressed by migrants in nine (9) detention centres and four (4) municipalities in Libya. By the end of the first month, a total of 3,207 migrants have received at least one dose of the COVID-19 vaccination.

DISEASE SURVEILLANCE

In Yemen, more than 23,750 COVID-19 screenings were conducted at IOM-supported health facilities. The World Health Organization (WHO) reported 712 new cases, 159 new deaths as of 30 October 2021. Yemen continues to go through another wave of COVID-19 after a significant uptake in new cases for the third month on row. The pandemic's catastrophic impact on Yemen has weakened public health systems, particularly in displaced communities that already have limited access to hygiene and sanitation services. Due to the lack of access to testing and tracking of COVID-19 cases, the full extent of the spread of the virus in Yemen is expected to be much higher than the reported figures. The first COVID-19 vaccination campaign in Yemen was launched in Aden on 20 April 2021, and as of October 2021, a total of 460,159 COVID-19 vaccines doses have been administered throughout the country according to WHO. The vaccination campaign is critical to containing the outbreak, however, ongoing conflict, limited vaccine supply and doubts around vaccine safety have slowed down the process in many areas of the country.

In **Lebanon**, IOM continues to ensure COVID-19 surveillance is conducted under its resettlement activities and assisted voluntary return (AVR), with 922 individual PCR tests administered to departing migrants and refugees during the reporting period.

In Iraq, IOM's community-based surveillance (CBS) teams continued to conduct CBS activities in four supported IDP camps, including AAF, Sheikan, Debaga and Jadah five (5) camps. During active case finding efforts, 115 IDPs were identified, of which 105 were referred to camp health facilities. A total of 94 individuals (90 per cent) referred by



IOM facilitate a voluntary humanitarian return (VHR) flight to Gambia from Misrata International Airport ©IOM Libya



IOM conducts a vaccination campaign in Tripoli ©IOM Libya

the CBS team visited the clinics, where in-depth assessments by clinicians indicated 52 were probable COVID-19 cases.

POINTS OF ENTRY (POE)

In Algeria, IOM hired two (2) consultants to support the Ministry of Health (MoH) in the development of an emergency response plan for PoEs. IOM Algeria is also coordinating with WHO for the development of standard operating procedures (SOPs) at PoE to accompany the implementation of the emergency plan once completed. During the reporting period, IOM and WHO provided IT equipment for PoEs in Algeria.

In Libya, IOM supported the NCDC staff at Misrata Airport and Ras Jedir PoE by providing medical check up to all passengers returning to Libya. A total of 82,332 cross-border travellers were screened through temperature measurement and general medical assessments during the reporting period.

INFECTION PREVENTION CONTROL (IPC)

In Yemen, IOM continues to work with the local authorities to increase surveillance, boosting testing capacity and protecting essential health services through the provision of testing machines, personal protective equipment (PPE) and capacity building training to public health workers. As of the end of October 2021, a total of 1,500 Yemenis, including displaced people, have been vaccinated against COVID-19 in IOM-supported health facilities. In October 2021, 93 migrants were tested for COVID-19 in Aden Governorate ahead of their return to their countries of origin through IOM's Voluntary Humanitarian Return (VHR) programme. IOM also provided a training workshop on IPC and COVID-19 prevention to 20 nurses in Lahj Governorate.

CAMP COORDINATION AND CAMP MANAGEMENT (CCCM)

In Iraq, IOM continues to implement screening and triage processes at eleven (11) facilities including five (5) IDP camps and six (6) community facilities prior to patient consultations. During October 2021, 27,295 people were screened in IOM-supported facilities across Anbar, Erbil, Dohuk, Kirkuk, Ninewa, and Baghdad governorates. A total of 141 probable and suspect cases have been identified through the screening process in the supported facilities.

CASE MANAGEMENT AND CONTINUATION OF SERVICES

In Sudan, four (4) health clinics and community health programs in the four (4) states of north, south and west

Darfur and West Kordofan. There is also a plan for the provision of medical supplies and equipment for future PoE activity on the border with Chad. The activity will include screening for COVID-19.

IOM in **Libya** donated 60 oxygen cylinders to consolidate the Ministry of Health (MoHs) Emergency Directorate's efforts to address oxygen shortage in hospitals and COVID-19 isolation centres.

In **Syria**, IOM continues to provide multisector humanitarian assistance in northwest Syria through its partners on the ground. Assistance aims to address lifesaving and lifesustaining needs while mitigating the risks of COVID-19 transmission and strengthening local health systems response capacity. IOM contributes to this effort through its NFI, Shelter, WASH, CCCM, and Health programmes, all of which are closely coordinated with interagency clusters and local partners. IOM continues to expand its health sector response and has deployed mobile testing equipment through its partners on ground. In coordination with WHO and the Syrian Immunization Group (SIG), IOM is also distributing COVAX vaccination awareness materials to partners and affected populations and continues to facilitate referrals across its areas of operation. In coordination with SIG, IOM has also begun to offer transportation to beneficiaries to and from camps to vaccination sites to support the vaccination efforts.

PROTECTION

IOM in **Libya** organized a two (2)-day training session on "Mental Health and Psychosocial Support (MHPSS) in response to the COVID-19 pandemic" in Benghazi area, targeting 20 participants from Amazonat Libya, Halo, and GIZ, as well as health workers working at primary healthcare centres in Libya and active members from the Libyan



IOM conducts a joint RCCE activity with local NGO Harikar in Khanke IDP camp, Dohuk Governorate ©IOM Iraq

Psychological Association, University of Benghazi, and MHPSS frontline workers from the Ministry of Social Affairs. The training aimed to enhance participants' knowledge on MHPSS during pandemic settings and to provide an understanding of key concepts, relevant frameworks, community-based approaches, tools and resources, psychological first aid (PFA) and supportive communication skills. IOM also continued to provide group support and psycho-social support (PSS) awareness sessions on coping with stress during COVID-19 and distribute MHPSS flyers migrants as part of IOM mobile health clinics' routine work in urban locations.

ADDRESSING SOCIO-ECONOMIC NEEDS

In Iraq, IOM's innovative Enterprise Development Fund



IOM doctor screens elderly displaced woman in a health clinic in Ma'rib, Yemen ©IOM Yemen

(EDF) approved 67 businesses for support, projected to receive USD 1,140,964 of financing. The injection of additional capital allows businesses to grow their operations and improve service delivery and will create 375 new jobs in their communities, while supporting 238 existing jobs. SMEs were selected from key economic areas, including Baghdad, Dohuk, Kirkuk, Ninewa, Basra, Diyala, and Thiqar governorates. IOM undertakes rigorous analysis on businesses financial and operational plans and selects those that have the greatest potential to create new jobs. IOM continues to select SMEs that applied to various EDF calls launched this year, including EDF-Women, EDF-Agriculture, EDF-Culture, and EDF-Renewable Energy. IOM also continues to provide individual livelihood assistance (ILA) and cash-for-work (CfW). In October 2021, IOM Iraq selected 360 individuals to receive ILA in a form of either Business Support Package (BSP) or On the Job Training (OJT). ILA beneficiaries were selected from Diyala, Sulaymaniyah, and Ninewa governorates. A total of 183 people were selected to receive CfW assistance in Anbar, Diyala, Dohuk, and Ninewa governorates. In total IOM has also identified 35 projects related to water, sanitation, and hygiene (WASH) and health community infrastructure since the start of the pandemic to support COVID-19 response efforts. The projects are in Anbar, Baghdad, Dohuk, Diyala, Erbil, Kirkuk, Ninewa, Salah Al Din, and Sulaymaniyah governorates. Out of the 35 identified, 18 projects are completed, and the rest are ongoing. They will contribute to strengthen basic services in health and WASH sectors during COVID-19 pandemic.

IOM in Kuwait, under the framework of the ethic recruitment (IRIS) global hospitality project in Kuwait, conducted a consultation meeting with hotels to review the modules developed by the IRIS secretariat on the IRIS hospitality project, which includes training on ethical recruitment and IRIS standards amongst other relevant topics. A civil society organization (CSO) was also recruited to develop and disseminate a questionnaire for the deployment and employment stage of the migrant workers and to assess the migrant community, all which will support



IOM staff hands out a jerrycan to a displaced child on the west coast region, Yemen ©IOM Yemen

in the development of the IRIS Compliance Oversite Mechanism (COM) handbook. IOM Kuwait participated in a panel discussion during the 'Freedom from Slavery' forum organized by 'Free the Slaves' organization. The forum focused on the "Impact of COVID-19 on vulnerability to modern slavery and migration". The discussion was mainly around the realities of migrant workers following their arrival in the MENA region, the vulnerabilities associated with their experiences, and the instrumental role survivors play in strengthening the movement by transforming approaches, policies, laws, etc. and how best to counteract modern slavery and protect the most vulnerable. During the forum, IOM Kuwait introduced IRIS and discussed mainstreaming programmes in the region.

With thanks to our current donors







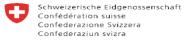




















Agència Catalana de Cooperació al Desenvolupament

























