

# IMPACT on IDPs

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COVID-19 Mobility Impacts Update Series

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**Important:** Important: This update strives to use terms in conformity with the IOM's Glossary on Migration to describe issues faced by Internally Displaced Persons (IDPs) in relation to the COVID-19 outbreak. Given the sensitive nature of the information, those terms are used to the best of our knowledge and within the limit of our possibilities to confirm political correctness while producing a weekly update. The update is **external** and the information contained in it is **sensitive**. Corrections are very welcomed and should be submitted to DTM COVID-19 [dtmccovid19@iom.int](mailto:dtmccovid19@iom.int) for ensuring consistency of information in the database repository.

Weekly updates on "Impact on IDPs" are a collaboration between DTM and CCCM in drafting and reviewing; MHD, PRD and TRD in technical guidance and sharing of files. The objective of these reports is to gather better situational awareness of the spread and impact of COVID-19 among internally displaced populations globally, with a view to ensuring better public health response and accountability for provision of care to vulnerable populations. The methodology includes integrating direct reporting from IOM Regional Offices and Country Missions, IOM sitreps, IOM files and media outlets, as well as public media outlets. Sources are weighed for relevance and accuracy, and then condensed into summaries by country. Instances of reported cases of IDPs with COVID-19 are checked for confirmation and monitored for continuing developments. Limitations include dependence on IDP cases being reported in public media. Cases emerging in countries without IOM presence and/or that go unreported in the media could be potential blind spots. For feedback, corrections, additions or removal from mailing list please get in touch with DTM COVID-19 [dtmccovid19@iom.int](mailto:dtmccovid19@iom.int).

## ■ Summary

People affected by humanitarian crises, particularly those displaced and living in communal settings, are often faced with challenges including vulnerabilities distinct from those of the general population. These vulnerabilities are further heightened by the disparate health and socio-economic impacts of COVID-19. As recently reported by IDMC, [global figures of internally displaced persons \(IDPs\)](#) reached an all-time high at the end of 2019. Conflict and disasters have triggered 33.4 million new internal displacements across 145 countries and territories in 2019. In particular, the number of new disaster related IDPs have increased to 24.9 million in 2019 (compared to 17.2 million in 2018). This is the highest figure recorded since 2012 and three times the number of new displacements caused by conflict and violence.



IOM's Rapid Response Partner MaCDA demonstrates temperature screening in Mangateen, Juba © MaCDA 2020 / Riya AMANI

The movement restrictions and measures being imposed by countries, territories and areas as a response to the pandemic are directly impacting the daily lives and circumstances of IDPs and host communities. Livelihoods are being interrupted and access to healthcare, where it is available, remains limited. Many communities hosting internally displaced populations lack adequate investment into health, water and sanitation facilities, in addition to the issues of overcrowding, poor shelter, scarce resources and limited access to reliable information. The impact felt by these communities not only increases humanitarian need but also exasperates the existing and already complex barriers for IDPs to seek solutions.

## ■ Key Highlights

- **Reported Cases:** As of 28th May 2020, there are seven confirmed COVID-19 cases reported in among IDP, one in Somalia (Sitrep #2), one in South Sudan (Sitrep #3), one in Iraq (Sitrep #5) and three in

Mali (Sitrep #5). It is most likely that number of COVID-19 cases amongst IDP populations are largely under-reported.

REPORTING PERIOD	LOCATION	CASES REPORTED AMONG IDPS	SOURCE (REPORTED BY)
30 April – 6 May 2020	Nigeria	1	IOM and Media outlet
30 April – 6 May 2020	Somalia	1	Confirmed by the Ministry of Health in Jubbaland
7- 14 May 2020	South Sudan	1	South Sudan's High-Level Task Force
22 – 28 May 2020	Iraq	1	Confirmed by WHO, OCHA, the Directorate of Health and the Ministry of Health
22-28 May 2020	Mali	3	Mopti (UN, confirmed by WHO)

Table 1: Summary of COVID-19 cases in IDP locations by date, location and source

- Restrictions of Movement:** Measures implemented by governments to limit the spread of COVID-19 also directly impact the movement of IDPs in and out of sites. In some countries (e.g. Nigeria, Sudan, and Iraq) specific camp measures have been implemented affecting potential movement of returns, as well as livelihood activities. Certain countries (Nigeria) are slowly lifting mobility restrictions (lockdowns) which will likely impact service access in camps. In Iraq, service delivery to some formal IDP camps improved due to easing of movement restrictions but service delivery remains a challenge in nine camps out of 62 camps where humanitarian actors have recorded partial or no-access to the camps.
- Challenges on Access to Assistance and Services:** Lockdowns and restricted access to camps in places such as Iraq and Myanmar have meant that provisions of goods and services to IDP populations have been reduced. For many countries, movement restriction also prohibits IDPs capacity to access livelihood opportunities, putting further pressures on their ability to supplement limited aid. Concerns that delayed preparedness and contingency actions for the coming monsoon seasons, considered non-essential, will increase the risk and vulnerabilities for IDPs in the coming months.
- Mitigation Measures:** IOM is working with partners and local authorities to put in place mitigation measures to reduce the spread of COVID-19 and improve health and hygiene conditions in displacement sites. Humanitarian partners have also put in place measures to ensure life-saving services can continue in sites despite movement restrictions for staff and continue to prepare for remote management scenarios in case some sites become inaccessible.

## Regional Overview

### ASIA AND THE PACIFIC

**Afghanistan:** Since the start of DTM's data collection in 2016, 4,350,900 arrival IDPs have been counted as being displaced since 2012. Of those, 1,208,083 (28%) arrival IDPs do not have access to a health clinic within a 5-kilometre radius from their villages, 996,690 (23%) do not have access to markets within a 10-kilometre radius and 9% (386,406 individuals) lack access to potable water within 3 kilometers of their village. Such extremely high multisectoral needs, further exacerbated by the COVID-19 pandemic, will contribute to extended local, national and cross-border transmission of COVID-19 in the Islamic Republics of Afghanistan, Iran and Pakistan. As of 17th May 2020, data from the Ministry of Public Health (MoPH) shows that 10,582 people across all 34 provinces in Afghanistan are now confirmed to have COVID-19. Cases are expected to continue to increase during the weeks ahead as community transmission escalates, putting additional burdens onto Afghanistan's economy and people's well-being.

**Myanmar:** IOM Myanmar is coordinating with local and regional health authorities to provide COVID-19 related assistance in Rakhine, Kachin, Mon, Sagaing and Kayin states, home to most of the IDPs in the country. In Kachin State, IDP camps covered by camp management agencies have all received awareness sessions and risk

communication messaging, which are ongoing activities. Local authorities, humanitarian agencies, religious institutions, and community groups are also providing education materials, handwash stations, hygiene items and establishing community surveillance and monitoring in alignment with the authorities' guidance. Since late March, over 3,700 IDPs are estimated to have left IDP camps in Kachin State due to concerns about access to livelihoods considering movement restrictions and to avoid health risks in crowded camps. The majority are temporarily returning to their villages of origin, with a small number temporarily relocating elsewhere. Most camps have stopped receiving visitors, apart from some service providers. There are varying levels of restrictions on entry and exit into camps or IDPs as a transmission prevention measure. IDPs who previously depended on livelihoods activities outside the camp, in addition to food assistance, are finding it increasingly difficult to cope with the situation. IDPs in Kachin are particularly facing loss of livelihoods and increased food insecurity due to movement restrictions.

**Philippines:** As of 28th May 2020, no COVID-19 cases have been reported inside the camps. Multiple measures implemented countrywide impact IDP movement and their livelihoods, and all subsequent indicators related to both. These measures include mobility restrictions and a requirement to wear personal protective equipment (at minimum, a mask covering the nose and mouth) when a family member with a quarantine pass is outside for essential activities. Different industries are also not allowed to operate or are limited, especially the transportation sector and small businesses, which a lot of IDPs are reliant on for their source of income. These measures have resulted in the loss of livelihood, which led to limited essential items stocked due to lack of purchasing means.

IDPs were observed to have moved out of Evacuation Centres following the government's direction to decongest sites—most have since settled in home-based sites or moved into makeshift shelters outside their damaged/unsafe houses. Lack of shelter space is still an issue in most sites, making physical distancing for families living in tents rarely possible. The national government has placed 'modified community quarantine' on locations with displacement to allow for access to services. However, local government units may independently enact stricter measures to curb transmission in their areas of responsibility as needed.

## EAST AFRICA AND THE HORN OF AFRICA

**Burundi:** As of 27th May 2020, Burundi has not reported any epidemiological change within the past week in which the country reported a total of 42 COVID-19 cases with 20 recovered and 1 death. None of the cases were reported among the 117,239 IDPs or returnees in the country. Burundi currently has no specific movement restrictions impacting IDPs, and DTM assessments are being carried out through remote data collection, leveraging the existing network of 4,000 key informants across the country. As for the Flow Monitoring, DTM continues to observe population movements at some unofficial points border with DRC (Cibitoke province) and Tanzania (Muyinga, Cankuzo and Ruyigi provinces).

**Ethiopia:** As of 27th May 2020, a total of 701 COVID-19 cases with 46 recovered and 6 deaths have been recorded in Ethiopia. None of these cases were reported amongst the 1.7M IDP nor the 1.4M returning IDP caseloads, though contact tracing is in place and has in some instances included individuals from these caseloads. While the mobility restrictions in country have led to alternate implementation modalities, there have not been any significant hinderances to the delivery of humanitarian assistance to date. Recent weeks have shown an increase in climate-related displacement incidents and there have also been reports of conflict-induced displacement, though the general trend reflects a decrease in conflict.

IOM has reached 725,384 individuals with hygiene awareness promotion, through door to door sensitizations, mass mobilization, sensitization during distributions, radio spots and leaflet distributions. IOM has provided training on general COVID-19 awareness, use of PPEs, waste disposal, and proper cleaning and disinfecting procedures to over 390 quarantine facility staff, including federal police, health workers, cleaners, and IOM staff. In areas with high number of IDPs, 332 health workers in Wollega, Gedeo and West Guji were trained on COVID-19 surveillance. IOM is resuming its mobility tracking assessments as of 1st June 2020 after a one-month delay and has adapted a protection plan to ensure safety of teams and respondents throughout this exercise. COVID-19 screening is ongoing at five Flow Monitoring Points.

**Somalia:** As of 27th May 2020, 1,711 COVID-19 cases with 253 recovered and 67 deaths have been recorded in the country. There continue to be confirmed cases in districts of very high concentration of IDPs (Kismayo—only IDP positive case so far—Banadir, Hargeisa, Baidoa, Burco, Hargeisa, and Gaalkayo). Banadir, which is home to 497,000 IDPs, remains the epicentre of the epidemic. To minimise further spread of the virus, authorities have imposed a curfew, closed schools and restricted large gatherings.

**South Sudan:** As of 27th May 2020, South Sudan has 994 confirmed cases of COVID-19 (8 deaths, 6 recovered). A total of 647 cases were confirmed in the past week, this is four times higher in comparison to the 154 reported in the previous week. Despite the increase in cases, geographically they are still located in previously reported counties, namely Juba (958), Magwi (15), Yei (7), Rubkona (2), and Torit (1), all of which are located across three states (Central Equatoria, Unity, Eastern Equatoria) and Abyei Administrative Area (11). There were no new cases reported in the UNMISS Protection of Civilians sites (PoC), the largest displacement sites in the country. The total count as of today is 1 case in PoC Bentiu (IDP) and 2 in Juba PoC3 (humanitarian staff).

Inter-communal violence between different youth groups over cattle raiding has continued in Jonglei state causing further displacement. Clashes have resulted in more than 200 deaths, including one MSF staff member. Inter-agency assessment is ongoing in the area and should bring verified estimates on the scale of displacement. Seasonal rains have caused flooding in some areas (Bor Town, Jonglei State) triggering short-term displacement of the population in affected areas. On 27th May 2020, UNMISS and UNDSS in Malakal PoC and humanitarian hub introduced a set of new COVID-19 preventive measures limiting the movement of humanitarian staff within the compound, between PoC and humanitarian hub and UNMISS area, allowing only for movement of critical staff in the overall effort to reduce the footprint within congested sites already initiated with previously reported reduction of UNPOL forces within the PoC.

**Uganda:** As of 27th May 2020, Uganda has 253 COVID-19 positive cases with no reported deaths, 70 recoveries and 191 active cases across health facilities in the country. Violent rains have continued to ravage and displace hundreds of people and destroy shelter, farms, and household items. An estimated 600,000 persons in 18 districts in the country have been severely affected, increasing the risk of COVID-19 transmission as the population has been forced to move and congregate at collection sites such as schools in large numbers. The country has started a phased easing of the lockdown which has allowed humanitarian agencies, especially those active in IDP/refugee settlements, to provide some limited assistance in the form of shelter and non-food items. The government of Uganda continues to provide food assistance to flood affected communities gathered in sites. The ban on public transport continues to hamper access to food as some people in hard to reach areas are unable to reach the assistance sites. Access to health care facilities remains a big challenge for many locals following the destruction and subsequent relocation of Kilembe Health Centre to Kasese district.

## MIDDLE EAST AND NORTH AFRICA

**Iraq:** The first confirmed case in an IDP camp occurred in Hansam Sham, a camp between Ninewa and Erbil. As of 26th May 2020, the World Health Organisation (WHO) has confirmed 4,848 cases of COVID-19 in Iraq; 169 fatalities and 2,852 patients who have recovered from the virus. According to the latest DTM Master List Report 115, DTM Iraq identified 1,389,540 IDPs (231,590 households) dispersed across 18 governorates and 104 districts. The top three governorates of displacement are Ninewa, Dahuk and Erbil. According to WHO, the number of confirmed cases in these governorates are 253 in Erbil, 43 in Ninewa and 26 in Dahuk. On 17th May 2020, the Government of Iraq (GOI) announced that a comprehensive movement ban will be implemented across the country for 8 days, between 22 to 30 May, as a measure to limit the spread of COVID-19. Moreover, six areas in Baghdad are put under a comprehensive movement ban for two weeks starting Wednesday, 20th May 2020. This decision came after some neighbourhoods recorded high COVID-19 cases. During the movement ban, epidemiological monitoring and sterilization campaigns will be implemented in the neighbourhoods.

With regards to the situation of IDPs in camps, in Diyala Governorate, the Khanaqin Health Department (Diyala) has conducted more than 160 tests in the IDP camps in the district (60 tests in Al-Wand 2 and 100 tests in Al-Wand 1), and all 163 IDPs that were tested have tested negative. However, 1 IDP required a second round of test

by Diyala Directorate of Health, also negative, during confirmation period he and his family were under isolation. In Ninewa governorate, the number of cases in the governorate has increased in the past week, particularly in Mosul Town. So far, one individual from Hasan Sham U3 camp has tested positive for COVID-19 and is now in Mosul hospital for treatment. The sector (E) in which he lived has been quarantined by camp security since 26th May 2020. The Department of Health will visit the camp on 27th May 2020 to conduct testing of all families who live in Sector E. Protocol, including disinfection of WASH facilities is being followed.

**Sudan:** As of 28th May 2020, the number of confirmed cases has reached 4,176 across all 18 states in the country, the majority being in Khartoum State. In response to the COVID-19 pandemic, the Government of Sudan (GoS) declared a nationwide emergency and introduced mitigation measures in March 2020 to curb the spread of the virus. The Darfur region hosts the largest population of internally displaced persons (IDPs) living in protracted displacement across all five states in the region. Currently, no cases of COVID-19 have been reported in the IDP camps DTM Sudan is monitoring. However, mobility restrictions have impacted the movement of IDPs in Khartoum wanting to return to locations of origin. The most recent reports from key informants indicate a total of 635 IDP students studying in Khartoum, 10 students in South Darfur and 8 students in Northern State who are currently stranded and unable to return home to IDP camps across North, South and West Darfur. An additional 105 IDP gold miners working in Northern State and seven working in South Darfur are also reportedly unable to return home to Shadad IDP Camp in North Darfur and Geraida IDP Camp in South Darfur respectively

**Syrian Arab Republic:** As the various government and non-government actors involved in the Syrian Arab Republic continue to impose regulatory measures in order to mitigate the spread of COVID-19, movement restrictions have hindered the ability to transport essential food and medical items to key locations. Furthermore, reports of spikes in fuel and bread prices have emerged, which have compounded vulnerabilities in a very fragile situation. Close attention should be paid to sub-districts in which extremely high displacement burdens (rates of IDPs compared to residents) are reported, due to a heightened risk of volatility and competition for already overstretched resources and opportunities. In Dana and Sharan sub-districts, where over 5 IDPs are reported for each resident, the highest priority needs for IDPs are basic services (Dana) and education (Sharan). In Azaz sub-district, where there are over 4 IDPs for each resident, the highest priority need is livelihood support; and in Badama and Jandairis (over 3 IDPs for each resident) highest priority needs are basic services (Badama) and education (Jandairis).

**Yemen:** COVID-19 related displacement was reported in Aden (291 HH), Al Mansura (157 HH), Ash Shaikh Outhman (34 HH), and Attawahi (24 HH) districts. Preliminary analysis suggests that these COVID-19-related displacements could be attributed to households that are leaving Aden due to poor conditions such as lack of water, loss of employment and over-crowded settlements.

## SOUTHERN AFRICA

**Democratic Republic of the Congo:** IOM DR Congo, as co-lead of regional CCCM working groups, started coordinating various stakeholders including IDP committees, local government entities, and actors from different sectors to develop a contingency plan and referral mechanism in displacement sites.

Protracted internal conflicts in the Democratic Republic of Congo and north of Mozambique continue to generate internal displacement patterns which could further challenge the humanitarian response to COVID-19. 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.

**Mozambique:** Over 600 individuals across 20 resettlement sites in Sofala and Manica provinces received sensitization sessions on COVID-19 symptoms, transmission and prevention including hand washing, preventive hygiene measures and social distancing. 28 activists and traditional birth attendants in 11 resettlement sites in Sofala province were also trained to disseminate COVID-19 information, track new arrivals, monitor preventive and quarantine measures, conduct community-level awareness, and monitor hand washing stations' use and

maintenance. Megaphones were distributed for the activists to disseminate key COVID-19 messages in local languages.

## WEST AND CENTRAL AFRICA

**Chad:** As of 25th May 2020, 700 COVID-19 cases have been confirmed in Chad. In Lac Province (which hosts 208,000 IDPs), two active cases are currently under treatment and 74 individuals are in quarantine, in Bol (which hosts 39,000 IDPs) and Ngouri. To this day, no case has been identified among IDPs. Local authorities have transferred 4,706 households (12,463 individuals) from a vast area declared by the government as a war zone to a safer site called Amma, where the humanitarian community provided assistance. Approximately 10,000 IDPs are still living in areas declared “war zones” by the government.

On 23rd May 2020, humanitarian organizations’ vehicles were granted a special authorization by the government to move freely in the country to ensure the implementation and monitoring of their COVID-19 prevention and mitigation activities. On 20th May 2020, the Health Crisis Management Committee (Comité de Gestion de Crise Sanitaire, created on 15 May) eased some of the restrictive measures on internal mobility: the circulation of taxis and minibuses in urban areas was authorized, provided that the number of passengers, all wearing masks, does not exceed 4 and 10 respectively.

**Mali:** As of 27th May 2020, in Mopti, 3 COVID-19 positive cases among the IDP have been reported by the COVID-19 Task Force. No restrictions on mobility between the different administrative regions of Mali have been implemented. Internal displacement is therefore not directly impacted by the restrictive measures put in place by the government. In the regions of Mali, the most affected by the various security crises, namely Mopti, Timbuktu and Gao, there have been recorded 167 confirmed cases at COVID-19. These three regions alone account for 1 96 595 IDPs or 78 per cent of the proportion national.

In addition to the problems of access linked to insecurity, the start of the wintering (rainy season) in certain areas of the country presents another challenge for displaced persons with urgent need of shelter and non-food items. IOM is working within the Shelter / NFI cluster on a response plan adapted to the current context, considering the response to COVID-19.

Access to health among IDPs is another challenge as shown by the latest DTM figures: more than half (68%) of the available health support structures are located outside IDP locations (outside villages, 62% of these structures are more than 30 minutes away).

**Nigeria:** DTM Nigeria conduct a COVID-19 Situation Assessment in the six conflict-affected states of northeastern Nigeria (Adamawa, Bauchi, Borno, Gombe, Taraba and Yobe) between April and May 2020. In this first assessment, 86,657 respondents - or 4 per cent of all identified IDPs as per DTM Round 32 - were interviewed for a range of COVID-19 related indicators. Main results are as follow:

- 99 per cent of all assessed IDPs in the six North-eastern States knew about COVID-19
- 74 per cent of respondents said they were not taking any mitigation measures to prevent infection by the highly contagious COVID-19. 35 per cent of respondents in Yobe were taking mitigation measures.
- 98 per cent of respondents said there have been no threats of evictions. Taraba had the highest percentage of respondents (4%) who had received threats of evictions.
- 49 per cent of respondents said that services including Food Markets, WASH, Health, Education, Protection, Water trucking etc., were affected by the pandemic

## LATIN AMERICA AND THE CARRIBEAN

**Colombia:** During the COVID-19 crisis, the control of the geographical areas left by the FARC in departments of Cocco, North of Santander or Arauca, that often coincide with the presence of illegal economy such as coca or gold

mining, as well as continuous and alarming increased threats and assassination of social leaders, have continued to generate significant internal displacements of population groups including Afro-Colombian and indigenous communities toward urban cities. According to OCHA figures presented to the Humanitarian country team, 12,000 peoples have been displaced in Colombia during the first four months of 2020.

Women victims of displacement in urban and rural contexts have decreased their daily livelihood alternatives given the context of isolation. Likewise, they have increased their conditions of greater vulnerability in the face of threats from illegal armed actors and an intensification in Gender-Based Violence by their family members and people with whom they live during the quarantine.

Indigenous populations who have been displaced by the violence, such as the Nukak people, are at risk of infection due to their proximity to populated centers. Much of this population subsists from informal activities that are impacted by the quarantine mobility restrictions.

The confinement decree taken by the government to avoid the spread of the virus has had as collateral effect to limit the presence of humanitarian actors on those remote areas; in some cases, the Organized Armed Groups (AOG) have prohibited the access of humanitarian actors as well as the exit of the inhabitants to cities to supply with food and other essential goods. Finally, there is the possibility of under registration of the number of cases of IDPS in this period, particularly for those who have not reached important cities with registering capacities due to the COVID-19 mobility restrictions.

According to the coalition against children recruitment COALICO, 129 children have been recruited by several Organized Armed Groups (OAG) since January 2020. The COVID-19 lockdown of the educational institutions could have contributed to the increased figure of children recruitment. According to a Peace foundation (FIP) report, some of the people being displaced had to remain confined due to the COVID-19 lockdown, making their access to basic services even more complicated. The FIP report also mentions that in some cases the vacuums generated by the confinement measures may have left space for the OAG to increase their control in remote areas of the country that could have generated some of the internal displacement. OCHA reported on 20th May 2020, an internal displacement of 363 families from the Embera indigenous community in the Choco department because of combat between OAGs.

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## ■ Key Resources

- [DTM Portals \(migration.iom.int and displacement.iom.int\)](https://migration.iom.int)
- [IOM COVID-19 Camp Management Operational Guidance Frequently Asked Questions](#)
- [Africa Center for Disease Control and Prevention COVID-19 Dashboard](#)
- [Global figures of internally displaced persons \(IDMC\)](#)
- [World Health Organization Situation Reports](#)
- [Nigeria — COVID-19 Situational Analysis: North East \(May 2020\)](#)
- [Djibouti — Stranded Migrants \(21 May 2020\)](#)
- [Turkey — COVID-19 Infosheet \(25 May 2020\)](#)
- [Nigeria — COVID-19 Point Of Entry Dashboard \(16 - 22 May 2020\)](#)
- [Turkey — COVID-19 Infosheet \(27 May 2020\)](#)
- [Middle East And North Africa — Tracking Mobility Impact: Point Of Entry Analysis \(22 May 2020\)](#)