

IMPACT on IDPs

Weekly Update • 30th July 2020



COVID-19 Mobility Impacts Update Series
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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 dtmccovid19idps@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 informed 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 dtmccovid19idps@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.



A boy coming from the market washes his hands at IOM built handwashing station. IOM 2020 / Alex McBride

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.

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 exacerbates the existing and already complex barriers for IDPs to seek solutions.

■ Key Highlights

- **Reported Cases:** As of 30th July 2020, there were sixty-four confirmed COVID-19 cases reported among IDPs, with a total of 2 in Nigeria, 9 in Iraq, 3 in Somalia, 8 in Mali and 39 in South Sudan. It is likely that

number of COVID-19 cases is largely under-reported. The CCCM Cluster in South Sudan, also announced in a POC Sites COVID-19 update, the death of 5 IDPs due to COVID-19 ([link](#)).

Reporting Period	Location	Cases notified among IDPs	Source (Reported by)
30 April – 06 May 2020	Nigeria	1	IOM and Media outlet
30 April – 06 May 2020	Somalia	1	Confirmed by the Ministry of Health in Jubbaland
22 May – 28 May 2020	Iraq	1	Confirmed by WHO, OCHA and the Ministry of Health
22 May – 28 May 2020	Mali	3	Mopti (UN, confirmed by WHO)
29 May – 04 June	Mali	5	Mopti (UN, confirmed by WHO)
05 June – 11 June	Somalia	1	Baidoa (Camp Management Agency update)
05 June – 11 June	Nigeria	1	Dalori 2 Camp (confirmed by WHO)
12 June – 18 June	Iraq	6	Sulimaniya, Baghdad, and Kirkuk (confirmed by IOM Iraq)
12 June – 18 June	Somalia	1	Baidoa (Camp Management Agency update)
22 June – 06 July	South Sudan	19	PoC (Juba, Bentiu, Malakal) - link
02 July – 16 July	Iraq	2	Ninewa and Kirkuk (confirmed by IOM Iraq)
17 July – 30 July	South Sudan	20	PoC (Bentiu, Malakal) - link

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 Uganda 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.
- Public health and socioeconomic measures:** IOM is working with partners and local authorities to put in place public health and socioeconomic measures to reduce the spread of COVID-19 and improve health and hygiene conditions and access 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. Humanitarian actors also continue to prepare for remote management scenarios in case some sites become inaccessible.
- 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 and access 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

Philippines: National and regional stakeholders (under the Department of Social Welfare and Development lead) have adapted and localized the CCCM Operational guidance for COVID-19 at the start of the pandemic for implementation in Mindanao where displacement is on-going following the earthquake in October 2019. This include establishing referral mechanism and SoPs for suspected cases in Collective Centres. At the same time, training and awareness raising material were also developed, including online training package, as part of preparation effort ahead of the up-coming typhoon season where additional displacement can be expected.

EAST AFRICA AND THE HORN OF AFRICA

Burundi: As of 29th July 2020, Burundi reported a total of 387 COVID-19 cases with 304 recovered and 1 death. None of the cases were reported among the country's 136,610 IDPs or returnees. 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.

South Sudan: As of 28th July 2020, the Ministry of Health reported a total of 2,313 COVID-19 known cases (46 deaths, 1,190 recovered). The capital Juba remains the hotspot with cases confirmed across twenty different counties in ten states and Abyei Administrative Area. According to CCCM's bi-weekly PoC site update, a total of 37 cases were confirmed within the largest displacement sites (Juba, Bentiu and Malakal) protected by the UNMISS, hosting more than 160,000 IDPs and 5 deaths due to COVID-19. Security situation within the PoC sites is relatively calm. Partners in Juba PoCs continued to conduct all activities with COVID-19-adapted approaches and reduction of relocatable staff, while in Bentiu PoC, Malakal PoC and Wau PoC AA sectors are operating with a minimum footprint, using a remote management approach. Lack of testing and delays in the release of test results have remained the challenge. The national Public Health Emergency Operations Center (PHEOC) has called for improved data and case management, and flagged gaps in resources for more comprehensive surveillance.

Localized conflict across the Jonglei state had continued causing displacement of estimated 87,000 IDPs. Some 6,000 have sought refuge in the area adjacent to Pibor UNMISS base. Another 70,000 are estimated to have been displaced across Bor South, Duk, Nyirol, Twic East and Uror counties. All affected counties are projected to be in IPC Phase 4 (Emergency) in the second half of the year, adding to almost half a million in emergency phase across the in Jonglei State. Humanitarian partners are scaling up response in the Greater Pibor Area, including CCCM and DTM teams who will support with site management and population count on displacement sites adjacent to the base.

Uganda: As of 28th of July 2020, there is a cumulative number of 1,140 COVID-19 positive individuals recorded, with 1,028 recoveries, and 2 deaths. The Government continues to restrict movement across all the country's border points, as well as transit points within the country in some districts, especially those bordering with countries that have registered high cases, to minimize possible spread of COVID-19.

MIDDLE EAST AND NORTH AFRICA

Libya: A sharp increase in the number of confirmed COVID-19 cases was registered by the National Centre for Disease Control (NCDC Libya) in the second half of July, double the number of two weeks prior. As a result of this increase in confirmed cases, mobility restrictions were further extended throughout the country. In 86 per cent of assessed locations by IOM DTM, all residents including IDPs were reported to have been negatively affected to some extent (due to the mobility restrictions and/or curfew).

Iraq: As of 30th July 2020, the World Health Organisation (WHO) has confirmed 118,261 active cases of COVID-19 in Iraq, with 4,603 fatalities, 30,236 active cases and 83,461 patients who have recovered from the virus. Governorates with the largest amounts of cases include Baghdad (39,902) and Basrah (9,465). According to the latest DTM Master List Report 116 (15 June), DTM Iraq identified 1,381,332 (230,222 households) IDPs 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 3,762 in Erbil, 448 in Dahuk and 1,025 in Ninewa.

A nation-wide lockdown has been put in place by the Iraqi government since Sunday, 22 March 2020 to curtail the spread of COVID-19.

Syrian Arab Republic: Since early July, there have been 30 notified COVID-19 cases in Northwest Syria, where according to HNAP baseline figures there are over 2.5 million IDPs in communities under the control of non-state armed groups and Turkish-backed armed forces (NSAG & TBAF). Over the month of June, 31,071 IDPs were reported to have arrived to NSAG & TBAF controlled areas—their highest priorities were livelihoods, basic services and food. Extremely difficult living conditions across this region are exacerbated by the recent COVID-19 outbreak. HNAP's most recent COVID-19 rapid assessment, collecting data over 27 and 28 July, found that the majority of the population is in need of soap and water in 53 per cent of sub-districts across NSAG & TBAF regions, masks in 63 per cent of sub-districts, and disinfectant in 79 per cent. Furthermore, in 88 per cent of communities across NSAG & TBAF control, authorities do not implement compulsory mask wearing.

Despite on-going reports of COVID-19 cases, most subdistricts across all areas of control (AoC) report insufficient COVID-19 related medical services. SDF areas display the lowest overall sufficiency, with only two per cent of sub-districts having sufficient space in local health facilities to monitor, isolate and quarantine suspected cases. Interestingly, however, in SDF-controlled areas the public reportedly has the best knowledge of the COVID-19 related risks (54 per cent), with NSAG & TBAF having the lowest (34 per cent). In terms of COVID-19 mitigation measures, compulsory mask wearing remains low across most sub-districts. The proportion of subdistricts with no communities enforcing mask usage is highest in SDF controlled areas, where 98 per cent of communities do not implement this measure. This is followed by NSAG & TBAF controlled areas and the Government of Syria (GoS) controlled areas, where 88 per cent and 84 per cent of communities do not implement this measure.

Of 44 transit points (8 internal and 20 international), 28 were open between July 13-27th. All internal points did report the presence of temperature screening, but only 5 had COVID-19 awareness campaigns, a concerning figure given that more than 6,000 individuals traversed the internal points during the reporting period. 3 of the 17 active international border crossings are not conducting temperature screening (Hura and Al-Qaeim in Rural Damascus, as well as Ras al Ain in Al-Hasakeh). It is estimated that over 11,000 people crossed international borders within the reporting period, however 10 crossing points which facilitated the travel of over 5,000 individuals did not require any quarantine upon arrival to destination. Commercial and humanitarian operations were present at 21 and 10 transit points respectively. Individuals traveling for economic purposes were also present at 8 transit points. In the case that increasing restrictions are imposed on the country's transit points, there will likely be significant impacts on the supply of essential items and livelihood opportunities for local populations, as well as the livelihood in these areas.

Yemen: Through IOM Yemen's Displacement Tracking Matrix, between 19th and 25th July 2020, 165 new displaced households were recorded in areas where IOM has access. The highest number of displacements were due to conflict and seen in Marib, Taizz and Al Dhale'e. Additionally, 4 households were displaced from Aden, Lahj and Taizz, in relation to COVID-19 within the week. From 1st January to 25th July 2020, IOM Yemen DTM estimates that 17,186 households or 103,116 individuals have experienced displacement at least once in Yemen.

Low COVID-19 testing capabilities across Yemen has meant that the number of confirmed cases and reported deaths do not represent the spread of the virus. Yemen noticed a very high case fatality rate which could be linked to several factors. In addition, limited preventive measures and overall obstacles to access to health services for both for COVID-19 related services but furthermore continuity of essential health care negatively affect the outcomes. The country's fuel crisis is also crippling the health system, forcing hospitals to close, delaying COVID-19 testing and threatening to impact broader COVID-19 response activities.

In IOM-supported IDP sites in Marib, Ibb and Taizz, CCCM, SNFI, WASH, Protection, and Health teams are carrying out COVID-19 preventative and response interventions. During this reporting period, 11,623 IDPs were reached through RCCE activities, and 401 hygiene kits and 195,110 soaps were distributed.

As part of WASH activities in displacement sites, IOM has established 175 handwashing stations in IDP hosting sites in Marib. Water trucking activities in 112 sites in Al Hudaydah and Taizz are also ensuring that 6,540 people have access to clean and safe water daily. In Marib governorate, healthcare services continue to be provided to IDPs via IOM's static clinic in Al Jufainah IDP Camp, four mobile medical teams, and an isolation centre for COVID-19. The establishment of a quarantine centre in Al Jufainah IDP hosting site is also ongoing. In Hadramaut and Marib, training activities have supported 575 people.

SOUTHERN AFRICA

Mozambique: As of 27th July 2020, 1,701 cases of COVID-19 and 11 deaths have been recorded in Mozambique. The WHO transmission status for Mozambique was reclassified from clusters of cases to community transmission with the highest number of cases being reported in the northern provinces of Nampula and Cabo Delgado, followed by Maputo. IOM trained 243 community leaders across 23 resettlement sites of Dombe district, Manica province, on COVID-19 prevention, prevention of gender-based violence and stress management during the pandemic; hand-washing demonstration were also conducted at all sites. In response to the COVID-19 pandemic, IOM's Displacement Tracking Matrix (DTM) in collaboration with the Government of Mozambique's National Disaster Management Agency (INGC) conducted an assessment in resettlement sites in central Mozambique from 7th to 11th July 2020, with the sole purpose to inform the government and humanitarian partners on the precautionary measures currently available in resettlement sites hosting displaced populations since Cyclone Idai.

The information gathered will help decision-makers to plan interventions and to recommend health and site preparation measures for outbreak prevention and containment in the resettlement sites in the central region. In the 72 resettlement sites assessed, nine sites (Bandua 2019, Begaja, Chingemidji, Inhajou 2019 and Maximedje sites in Buzi district of Sofala province and Chibue, Macocoe, Mucombe and Ngurue sites in Sussudenga district of Manica province) reported that in the past month, 43 Mozambican migrant workers returning from South Africa and Zimbabwe settled in the sites. All sites reported a noticeable change in people's behaviours and habits to better prevent COVID-19.

WEST AND CENTRAL AFRICA

Chad: As of 29th July 2020, 926 COVID-19 cases (including 810 recovered, 41 under treatment and 75 deaths) have been confirmed in Chad. In Lac Province (which hosts 236,000 IDPs), five cases have been confirmed since the beginning of the pandemic, none of which are currently active. One death has been registered in Bol (which hosts 39,000 IDPs) and one person is currently in quarantine there. To this day, no case has been identified among IDPs. IOM has conducted a sensitization campaign in 10 sites located in Ngouboua sous-préfecture, targeting approximately 10,000 IDPs. IOM is also donating another round of hand-washing stations to sites and villages around Baga Sola sous-préfecture.

■ Key Resources

Global:

- [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](#)
- [COVID-19 Points of Entry Analysis – 26 June – EEA](#)
- [IOM COVID 19 Response - Situation Report 25 \(24 July 2020\)](#)
- [COVID-19 Travel Restrictions Output — 27 July 2020](#)
- [Mobility Restriction Dashboard 12 \(23 July 2020\)](#)

Regional:

- [East and Horn of Africa — COVID-19 Regional Overview On Mobility Restrictions \(as of 16 July 2020\)](#)
- [RO MENA Mobility Impact Mapping Quarterly Report \(April-June\)](#)
- [Middle East And North Africa — Tracking Mobility Impact: Point Of Entry Analysis \(23 July 2020\)](#)

Country:

- [Sudan — Mobility Restriction Dashboard 13 \(30 July 2020\)](#)
- [Libya — COVID-19 MOBILITY TRACKING 3 \(June 2020\)](#)
- [Panama- Emergency Tracking: Migratory Receiving Stations-COVID 19 Pandemic \(25 June-2 July\)Apply](#)
- [Somalia — Border Point Flow Monitoring \(19- 25 July 2020\)](#)
- [Mozambique – COVID-19 Preparedness Assessment in Resettlement Sites Report 6 \(July 2020\)](#)
- [Nigeria — COVID-19 Point Of Entry Dashboard 12 \(18 - 24 July 2020\)](#)
- [Djibouti — Stranded Migrants \(23 July 2020\)](#)
- [Uganda — Flow Monitoring Dashboard: Uganda/South Sudan Border \(June 2020\)](#)
- [South Sudan — Flow Monitoring Dashboard \(June 2020\)](#)