

## COVID-19

### INCLUDING MIGRANTS AND DISPLACED PEOPLE IN PREPAREDNESS AND RESPONSE ACTIVITIES

#### Guidance for MENA National Societies

##### Background: Migration & Displacement in Middle East and North Africa:

- There are millions of migrants living, working and moving across the MENA region. People are on the move for a variety of reasons including work, travel, transit, education and to be with family.
- There are also millions of people who have been forcibly displaced – as refugees and IDPs. These people may have limited access to information and treatment. A health risk for a person on the move is a health risk for everyone, and therefore the best way to protect the entire population from COVID-19 is to extend all measures to everyone without exception and without discrimination
- The latest estimate is that there are more than **40 million migrants** in the region (*UNDESA – International migrant stock 2019*) and more than **11 million of IDPs** (*Internal displacement monitoring centre*).

##### Risk Factors for Migrants

- Migrants and displaced people may be at an increased risk from the current outbreak of COVID-19.
- Risk factors include:
  - Language barriers to understanding and accessing health care, and reporting on health conditions;
  - Undocumented status, which may create formal barriers to accessing care, or lead to reluctance to access care due to fear or arrest or deportation;
  - Migrants and displaced populations may be de-prioritised in healthcare efforts;
  - Social, religious and cultural barriers to accessing health care;
  - Limited social and support networks;
  - Lack of familiarity and awareness of health procedures and available support;
  - Poor living and working conditions, including overcrowded conditions with poor sanitation and hygiene;

- Financial barriers to accessing health systems and support, including lack of health insurance;
- Migrants who are in quarantine and/or affected by border closures may be unable to return home, and in isolation they may lose contact with family members;
- Migrants may increasingly face stigma and blame for spreading COVID-19;
- Health care officials may not know where and how to reach migrants and displaced populations.
- Migrants may simply not know how and where to access trustworthy information and help.

There may also be needs for the family members of migrants who have stayed behind. Such family members may be concerned about the fate and needs of their relatives in other countries.

Reminder: The approach of the Movement to migration is strictly humanitarian and focuses on the needs, vulnerabilities and potentials of migrants, irrespective of their legal status, type, or category – IFRC Policy on Migration (2009).

### **How can National Societies support migrants and their families?**

**National Societies** should take targeted measures to ensure that vulnerable migrants and displaced populations are included in preparedness and response activities.

**National Societies** can support the families and communities of migrants who have stayed behind in countries of origin.

**National Societies** can support communities who host migrants and refugees in countries of transit and destination.

**In some cases, it will also be important for National Societies to engage in humanitarian diplomacy, to promote access for all migrants – irrespective of their status - to information and services provided by authorities and other organisations.**

Specific activities can be based on an assessment of the risks and needs of migrant communities. This may be a stand-alone assessment or integrated into a more general community assessment.

Specific activities and support to migrants should consider age, gender, cultures, customs and languages (including levels of literacy) of migrants and displaced populations.

### **Key Activity: Accessible and Reliable Information for Migrants**

- The provision of reliable, trustworthy and accessible information for migrants is a key activity that many National Societies can undertake to reduce the risks of COVID-19.
- This information may be delivered via digital and social media platforms, or through targeted distribution using community-based mechanisms like community or religious places and community safe spaces.

- To cater for language barriers and or literacy levels, messages that are more pictorial may be provided. IFRC resources: information on COVID-19.
- The IFRC has produced key messages on reducing the risk of coronavirus infection. These include messages on reducing the risk of infection, as well as specific messages on “when to wear a mask”, “how to stay healthy while travelling” and “how to practice food safety”.
- To help reach migrant populations, these messages are available in many different languages, including: Arabic, Bangla, Chinese, English, French, Japanese, Korean, Mongolian, Myanmar, Nepali, Sinhala (Sri Lanka), Spanish, Tagalog (Philippines), Tamil, Tetum and Thai. ([Link](#))
- These resources will be continuously updated as more translations are produced.
- Please, note that these are generic messages, so they may not fit specific country contexts and should be updated to include location of health centres where migrants or displaced communities can get treatment.
- National Societies should check the official messages from their Ministry of Health before sharing these messages.

National Societies should promote needs of vulnerable groups in particular migrants during meetings with Ministry of Health and stakeholders.

#### Key Activity: Addressing Social Stigma associated with COVID-19

- We must balance our awareness of the risks that migrants face, with ensuring that we do not encourage xenophobia or stigma of people from certain nationalities being associated with Coronavirus.
- People may be labelled, stereotyped, separated, and/or experience loss of status and discrimination because of an affiliation with COVID-19.
- This can negatively affect those with a disease themselves, as well as their caregivers, family, friends and communities.
- Guidance on addressing social stigma associated with COVID-19 is available. ([Link](#))

#### Key Activity: Coping with stress associated with COVID-19 and rebuilding hope

- Make sure that volunteers are aware of why migrants and displaced people are vulnerable to COVID-19

Helping migrants with psychosocial support (PSS) messages that support them to cope with stress during a COVID-19 outbreak.

- Providing facts about COVID-19 to reduce fear and panic.
- Listening and supporting migrants who may be quarantined, isolated or hospitalised using PFA (psychological first aid) which can be added to CBHFA training.
- Mobilising people who have recovered from COVID-19 to act as community ambassadors in risk communication and building social trust and hope.

- Promoting community-led awareness activities through social, cultural and religious systems.
- Providing practical information on how to access essential services for individuals affected by COVID-19, where to get food, treatment, whom to call etc.

#### Key Activity: Humanitarian Diplomacy

- National Societies may notice barriers that migrants face which prevent them from receiving the help they need. These could include:
  - A reluctance from authorities to share information on COVID-19, for fear of creating panic;
  - A lack of willingness (or legal barriers) to helping undocumented migrants.
- In such cases, National Societies may engage in humanitarian diplomacy to persuade “decision makers and opinion leaders to act, at all times, in the interests of vulnerable people, and with full respect for fundamental humanitarian principles”.
- More guidance is available here: [IFRC Humanitarian Diplomacy Policy \(2009\)](#)

#### Key Approach: Community Engagement and Accountability (CEA)

- The national society sets Community engagement & Accountability mechanisms to engage and communicate with migrant communities to promote healthy behaviour and prevent the spread of COVID-19.
- Community Engagement and Accountability mechanism include involving migrant communities with selection of appropriate communication channels to disseminate COVID-19 messages.
- In any communication and engagement with migrant communities whether through direct communication or accountability channels like hotlines, suggestion boxes etc, National Societies should document any feedback on awareness material, circulating rumours and any questions and concerns that arise.
- National Societies can use this feedback to tailor communication and activities in addition to referring cases to other stakeholders when relevant
- CEA and COVID-19 guidance is available and includes more detailed information. [\(Link\)](#)

#### For further general guidance:

- [IFRC Policy on Migration \(2009\)](#)
- [IFRC Global Strategy on Migration 2018-2022](#)
- [Guidelines to Protect Migrants in Countries Experiencing Conflict or Natural Disaster \(MICIC\) \(2016\)](#)

For further information and support, please contact:

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