## UN MIGRATION COVID-19 Preparedness and Response



#### SITUATION OVERVIEW

The humanitarian crisis in Somalia, characterized by both natural and man-made factors, is one of the most complex and longstanding emergencies in the world. Somalia is currently facing Locust crisis, whilst simultaneously entered the Gu rainy season. With 2.6 million displaced persons, COVID-19 poses an additional challenge in already fragile context where it may further hinder access to basic services, leaving the population highly vulnerable.

As a key source, transit and, to some extent, destination country for migratory flows, Somalia continues to have an influx of migrants from neighboring countries through irregular migration routes, especially from Ethiopia. The Assisted Voluntary Returns from Yemen have been suspended with the closure of seaports along the Somali coastline, which may increase the number of spontaneous returns. Similarly, with the border closures, vulnerable Ethiopian migrants who may wish to return home are now stranded in Somalia. Due to misinformation that migrants are the carriers of virus, there are signs of increasing stigma of Ethiopian migrants in Somalia. Recognizing that mobility is a determinant of health and risk exposure, there is a need to urgently adopt innovative, systematic, multisectoral and inclusive responses to mitigate, prepare for and respond to COVID-19 amongst the migrant population.

The number of COVID-19 cases in Somalia are increasing rapidly. As of 25 April 2020, Somalia has confirmed 390 COVID-19 cases (286 male, 104 female) in the country, 18 reported fatalities and 10 recovered cases. Most of the cases are reported in Mogadishu and includes at least 15 health workers. One case was reported in an IDP site in Kismayo. The Ministry of Health and WHO confirmed that most of the patients have no travel history outside Somalia. Testing is currently available in Mogadishu, Hargeisa and Garowe, however capacity to trace and test more cases is limited, partly due to a lack of equipment, isolation and treatment facilities.





11 March 2020 WHO declared COVID-19 a pandemic



16 March 2020

First confirmed case in Somalia and suspension of all international flights



8 April 2020

First reported fatality



25 April 2020

390 cases confirmed

<sup>&</sup>lt;sup>1</sup> As of 25 April 2020.

<sup>&</sup>lt;sup>2</sup> Somalia Humanitarian Response Plan 2020.



OVER 800,000 IDPS reached with RCCE activities (CCCM Cluster)



entering Doolow from Ethiopia were screened at PoEs (No suspected cases were recorded)

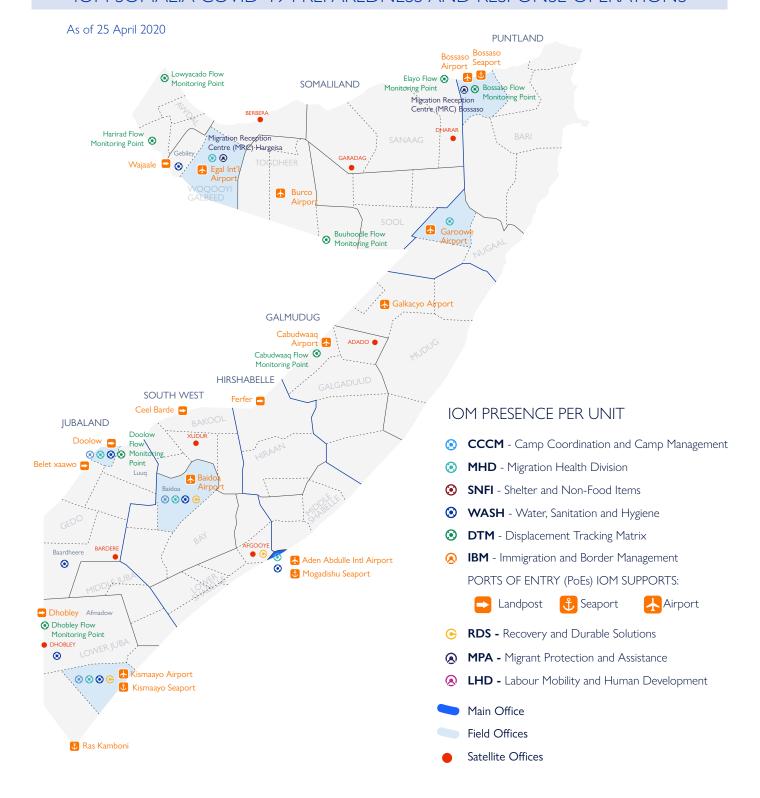


approx. **76,725 PEOPLE** reached with COVID-19 information



2.452 PEOPLE reached with COVID-19 information at **8** FLOW MONITORING POINTS (FMP)

#### IOM SOMALIA COVID-19 PREPAREDNESS AND RESPONSE OPERATIONS



## PROGRAMME UPDATES

In coordination and partnership with relevant actors at the national, regional and global levels, IOM will contribute to the overall objective of the National Preparedness and Response Plan for COVID-19, UN COVID-19 Country Preparedness and Response Plan (CPRP), as well as the IOM and WHO Global Strategic Preparedness and Response Plans to halt further transmission of COVID-19, and mitigate the impact of the outbreak, including the socio-economic impact. To ensure that IDPs, migrants, communities in hard to reach locations, returnees and vulnerable populations are assisted, IOM will build its response on existing partnerships with relevant actors at global, regional, national and sub-national levels. IOM will address cross-cutting humanitarian and development needs through expansion of its programmes designed to engage directly with communities.

During this reporting period, IOM continued to scale-up its awareness-raising activities among IDP and migrant communities. The increased number of stranded Ethiopian migrants is concerning, therefore IOM continued to provide direct assistance to them, particularly in and around Bossaso. Additionally, IOM is collecting information on internal migration routes to analyse the changes due to COVID-19, in order to better respond to the needs of migrants using these routes.

IOM added another Flow Monitoring Point, with a total of eight points across the border and reached 2,452 people entering and exiting Somalia with COVID-19 awareness information. Screening at Points of Entries (PoEs) continued, with a total of 963 people entering Somalia in Doolow from Ethiopia, with no suspected cases being reported.



## 240 INDIVIDUALS

reached in Doolow including 150 IDP leaders

Indirect beneficiaries: 34,221

## 106 INDIVIDUALS

reached in Kismayo including 15 IDP leaders

Indirect beneficiaries: 14.358

## **400** INDIVIDUALS

reached in Baidoa including 150 IDP leaders

Indirect beneficiaries: 34,221

Joint activities of CCCM, MHD and WASH



#### **CCCM CLUSTER**

- Conducted a cluster meeting in Mogadishu to discuss COVID-19 preparedness and response.
- Finalized the Clusters' Risk Communication and the Remote Operations Strategy.
- CCCM partners have reached a total of 685 IDP sites with Risk Communication and Community Engagement (RCCE) activities, reaching over 800,000 IDPs.



# CAMP COORDINATION AND CAMP MANAGEMENT (CCCM)

CCCM team continued to disseminate information to ensure IDPs are aware of the risks, signs and symptoms and mode of transmissions of COVID-19 and know the appropriate mitigation measure to reduce the risks. Awareness raising sessions were conducted at the information centres, marketplaces or during community meetings, with a highlight on how to practice social distancing. Furthermore, IOM is working with the site leaders on how to operationalize the CCCM remote operational plan in case of a total lockdown. This includes, amongst others, ensuring that the IDP communities are aware how services will be delivered when access is restricted; emergency referral pathways, including health, GBV and child protection are updated and shared with the community; IDPs have knowledge on and access to information on COVID-19; and hotline numbers are available to share complaints and feedback on service provision.

CCCM trained to raise awareness on practices for COVID-19 prevention



In coordination with:

HEALTH CLUSTER MINISTRY OF HEALTH PARTNERS IDP LEADERS **IDP COMMISSION OFFICES IDP GROUPS & COMMITTEES** 





# WATER, SANITATION & HYGIENE (WASH)

WASH teams continue to scale up its community mobilization and sensitization sessions on good community hygiene and sanitation practices to IDP community leaders in coordination with MHD and CCCM.

IOM continues to coordinate with Ministry of Health, WASH Cluster and other partners. In Somaliland, the team met with district officials in the Somali-Ethiopian border town Wajale, to discuss basic hygiene needs at this Point of Entry (PoE). IOM agreed to start hygiene promotion in Wajale district. In Hargeisa and Bossaso, together with the MPA unit, migrant communities will be targeted with awareness-raising and soap distribution.



385 HOUSEHOLDS provided with SOAP in Afmadow District



2,996 HOUSEHOLDS reached with **HYGIENE PROMOTION** activities



**6 HYGIENE PROMOTERS** recruited in Kismayo



**2** HYGIENE AWARENESS MESSAGES aired on radio in Baidoa



14 HANDWASHING POINTS installed (10 in Baidoa, 4 in Kismayo)





**963 PEOPLE** entering Doolow from Ethiopia were screened at PoEs. No suspected cases were recorded

MHD and the Ministry of Health, through 40 health facilities, continued to screen patients for COVID-19 symptoms and to conduct awareness sessions about COVID-19 preventive measures. Together with the Ministry of Health in South West State, IOM trained teams working at PoEs, including the airport and four main roads into the town on COVID-19 screening. Furthermore, IOM organized meetings with the Federal Ministry of Health on the delivery of psychosocial services, as part of the national COVID-19 response and preparedness plan. The need for capacity building and psychosocial support to frontline workers, including health professionals and officers working at PoEs, were discussed. IOM will provide a refresher training next month on mental health and psychosocial support.



COVID-19 awareness raising sessions in health facilities and IDP sites and reached:

556 through HUDUR STATIC CLINIC

580 through HUDUR MOBILE TEAM

900 IN DHOBLEY

432 IN DOOLOW Qansaxley Health Center

276 through AFGOYE STATIC CLINIC

367 through AFGOYE MOBILE TEAM

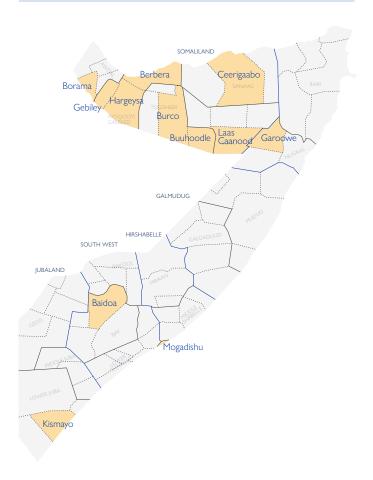


10 HEALTH WORKERS were trained on COVID-19 preparedness and prevention in Garadag Health Centre

Activities are closely coordinated with the Ministries of Health at Federal and Member State level and with local authorities.



#### MIDA HEALTH EXPERTS IN SOMALIA





DTM continues to raise awareness among migrants crossing the border at eight Flow Monitoring Points (FMPs). During the reporting period, 2,452 people, entering and exiting Somalia, were reached.

FMP	INCOMING	OUTGOING	TOTAL
Bossaso	512	9	521
Buuhoodle	58	5	63
Cabduwaq	679	0	679
Elayo	0	209	209
Harirad	328	0	328
Lowyacado	53	61	114
Dhobley	200	103	303
Doolow	199	36	235
GRAND TOTAL	2,029	423	2,452

# LABOUR MOBILITY AND HUMAN DEVELOPMENT (LHD)

IOM's diaspora expert working at the Ministry of Health Development in Hargeisa, was broadcasted on the local television channel to inform the public about COVID-19. His main message was to inform the public that cultural and traditional treatments do not cure the disease, and no treatment or vaccine is yet available. He urged the public to follow the government and experts' advice.

# MIGRANT PROTECTION AND ASSISTANCE (MPA)

IOM continues to provide direct assistance to stranded Ethiopian migrants in informal settlements in Bossaso and its surroundings. Furthermore, an increasing number of Ethiopian migrants, fearing deportations and stigmatization linked to COVID-19, is attempting to return to Ethiopia and are consequently stranded at borders due to movement restrictions and closed borders. To better highlight internal migration routes, MPA team went on a mission in Somaliland to map internal routes of migration flows within Somaliland and Puntland along the Eastern Route. The information gathered during this trip will be instrumental to understand how and if routes changed due to COVID-19.

Furthermore, the Migration Response Center (MRC) teams conducted an awareness-raising session about COVID-19 symptoms and prevention in Bossaso targeting communities of migrants.



IOM's MPA's team map the internal routes of migration flows within Somaliland and Puntland along the Eastern Route. © IOM Somalia

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#### MIDA DIASPORA EXPERT ON THE FRONTLINE OF THE **COVID-19 RESPONSE IN SOMALIA**



Dr. Abdiaziz Ali Mohamed, a MIDA expert has been instrumental in leading the COVID-19 response last month in Somalia. He was at the front line responding and treating patients at De Martino Hospital, the primary hospital to treat COVID-19 patients. He has returned to the UK, but the impact of his contribution can be seen at the hospital through the trained medical staff.

#### IOM GLOBAL INITIATIVES

The current outbreak of COVID-19 has affected global mobility in the form of various travel disruptions, restrictions and blockages. To better understand how COVID-19 affects global mobility, the International Organization for Migration (IOM) has been working to map the impacts on human mobility, at Global, Regional and Country level. Subsequently, the IOM globally have initiated the following activities:



COVID 19 Travel Restriction Monitoring;



COVID 19 Country Points of Entry (POE) Status Baseline Assessment.

The different products (Interactive Dashboards, Reports, Static Maps, Databases), along with the different methodologies can be found here.

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