

REFUGEES AND THE IMPACT OF COVID-19

BACKGROUND GUIDE CHALLENGE TOPIC #1



The <u>MUN Refugee Challenge</u> is an initiative launched by UNHCR, the UN Refugee Agency, to encourage students worldwide to shape solutions for people forced to flee their homes. This guide was drafted to help students prepare for their debates.

> A Syrian refugee girl goes back to school in the Zaatari camp in Jordan as COVID-19 restrictions ease. © UNHCR/ SHAWKAT ALHARFOSH







THE CHALLENGE

The coronavirus pandemic (COVID-19) has spread across the world, infecting over 60 million people and taking the lives of more than one million. The world's 79.5 million people forced to flee their homes due to conflict and persecution constitute one of the most vulnerable population groups.

Anyone can contract COVID-19, but the pandemic has affected certain populations disproportionately. Due to limited testing, the exact number of COVID-19 cases among people forced to flee remains unknown. But in addition to the health threats, forcibly displaced people have faced particularly difficult economic and social challenges associated with the pandemic.

The spread of COVID-19 has devastated many countries' health and economic systems and disrupted the education of more than a billion children. This has been particularly true for developing countries, which host 85 per cent of the world's refugee population. Providing forcibly displaced people with adequate healthcare and maintaining their social and economic wellbeing presents a challenge for host countries and the international community.

WHY IS THIS ISSUE IMPORTANT TO ADDRESS?

What we do now will determine how and for how long the pandemic disrupts our lives.

Governments, organizations and communities must do all they can to protect the rights and the health of everyone, including refugees, if we are to stop the spread of the virus and successfully rebuild.

Thus, including the forcibly displaced in identifying and implementing solutions is in everyone's best interest.

"We are only as strong as the weakest health system in our connected world". —UN Secretary-General António Guterres





IMPACT OF COVID-19 ON FORCIBLY DISPLACED PEOPLE

Health



Refugee communities have faced critical challenges in following recommended risk reduction practices:

- Many refugees live in poor urban areas (60 percent of refugees live in cities) or densely populated camps with inadequate health infrastructure, making physical distancing very difficult.
- The lack of access to face masks, protective gear, clean water and soap makes refugees more vulnerable to COVID-19.
- Refugees have limited access to public health services. For example, Syrian and Palestinian refugees in Lebanon cannot access health facilities without providing identification documents, which is often an issue since most refugees in Lebanon are undocumented.
- Refugee populations often lack the funds to obtain adequate treatment if infected with the virus.

Economic Inclusion



The pandemic has exacerbated the monetary challenges that refugees face on a daily basis. Total or partial lockdowns have prevented refugees from earning their daily income, especially since many refugees do not have stable jobs. The decrease in the income of refugees is also an obstacle to getting adequate treatment if infected with COVID-19. While refugees have the right to work under international law, half of refugees are not allowed to work in their country of refuge and COVID-19 has exacerbated the situation.

Mental Health



Refugees and the displaced already struggle with the trauma of fleeing war, violence, persecution and discrimination. The stress and fear of contracting COVID-19 or losing their livelihoods as well as the isolation and loneliness experienced during lockdowns, have exacerbated mental health issues.

"The need to support mental health assistance for displaced populations was critical before the pandemic but now we are dealing with an emergency and a picture of widespread despair." —UN High Commissioner for Refugees Filippo Grandi



IMPACT OF COVID-19 ON FORCIBLY DISPLACED PEOPLE

Access to Asylum



Seeking asylum is a human right but has been under attack as countries work to contain the virus. At the peak of COVID-19, 168 countries fully or partially closed their borders and around 100 of those countries did not make an exception for individuals seeking asylum. Individuals have in some cases been forced to return to danger and persecution. UNHCR 's position is that governments can protect their countries against the pandemic while ensuring access to fair asylum.

"Everyone has the right to seek and to enjoy in other countries asylum from persecution."

— Universal Declaration of Human Rights, Article 14 (1)

Access to Education



"Half of the world's refugee children were already out of school. After everything they have endured, we cannot rob them of their futures by denying them an education today. "

Filippo Grandi, UN High
Commissioner for Refugees

The future of millions of young refugees living in vulnerable and marginalized communities is in danger if no immediate action is taken to overcome the effects of the pandemic on refugee education.

Refugee girls are particularly at risk. The Malala Fund estimates that half of all refugee girls in secondary school will not return when schools reopen at the start of the 2020 school year as a result of the pandemic.

Refugee children in many parts of the world already face discrimination when it comes to education. The spread of COVID-19 is forcing many countries to close schools and limit numbers in classrooms. Refugees should not be forgotten when countries address the needs of school children during the pandemic– for example by offering remote schooling. If schools close, all children must be able to return when they reopen. This means supporting families so that parents never have to choose whether to send a child to school or send them to work to keep their family from going hungry.



WHAT IS CURRENTLY BEING DONE TO ADDRESS THIS ISSUE?

A <u>Global Humanitarian Response Plan for COVID-19</u> was launched in March 2019 by the UN Office for the Coordination of Humanitarian Affairs (OCHA), outlining the responsibilities and roles of different organizations in addressing the humanitarian, health and economic impact of the pandemic. The target of this response is to provide 250 million people with COVID-19 assistance.

UNHCR



UNHCR has focused on responding to the health and economic needs of refugees. UNHCR has been the lead UN agency in "advocating and ensuring that refugees, migrants, IDPs, people of concern and host population groups who are particularly vulnerable to the pandemic receive COVID-19 assistance."

- UNHCR is distributing soap, shelter material and other core relief items.
- UNHCR is expanding cash assistance to mitigate the socio-economic impact of COVID-19.
- UNHCR is enhancing monitoring to ensure the rights of refugees people are respected.
- UNHCR is advocating for the inclusion of refugees in national health systems and recovery plans.
- UNHCR also supports governments with medical equipment and supplies.

The <u>following map</u> highlights specific examples of UNHCR's Global COVID-19 Response:

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Specific country examples

Greece

In Greece, as asylum offices have gradually re-started their services, the operation has supported the efforts of the Asylum Service by sending text messages to 150,000 asylum-seekers with information on procedures.

Guatemala

In Guatemala, UNHCR is supporting state efforts to respond to the needs of the returned population by providing refugee housing units that are being used as health monitoring areas in shefters. UNHCR has also provided cash assistance to more than 100 returnes to meet basis needs.

Mauritania

In Mauritania, as part of UNHCR's efforts to support social protection outcomes, the distribution of cash to 1,024 vulnerable urban refugee households was completed. During the six weeks of distribution, the total amount distributed to beneficiaries was over USD 264.000.

Burkina Faso

In Burkina Faso, UNHCR also provided in-kind donations, composed of three ambulances one of which is medicalized, medicine, pharmaceutical supplies and information posters on COVID-19, to regional authorities.

Ghana

In Ghana, UNHCR has introduced innovative approaches to ensure continuity of basic protection services, starting with refugee status determination (RSD) and registration. In July, the first virtual RSD adjudications were carried out by the Ghana Refugee Board and a total of 81 cases were approved for the granting of status in Ghana during the COVID-19 pandemic.

Democratic Republic of the Congo

In the Democratic Republic of the Congo (DRC), UNHCR handed over a quarantine centre to the Kasai Province Governor in Katshongo to be used for future identified COVID-19 cases. Since the beginning of the COVID-19 response, UNHCR has established 10 isolation and quarantine centres in the DRC and provided equipment and other support to an additional 8 centres.

Ukraine

In Ukraine, the operation procured over 3,000 pieces of personal protective equipment for 18 primary health care facilities along the 'contact line' in Donetska oblast.

Libya

UNHCR and IRC recently supported the reopening of a primary healthcare centre in Tripoli, Libya which was closed by the government when a state of emergency was declared as the first cases of COVID-19 appeared in March. With support of UNHCR and IRC, a catchment area of at least 30,000 people will be provided with medical and protection services.

Islamic Republic of Iran

With the assistance of ECHO and the EU Humanitarian Air Bridge, over 95 per cent of all personal protective equipment and medical supply orders have been delivered to the Islamic Republic of Iran, with the rest expected to be delivered soon.

Ethiopia

In Ethiopia, a WhatsApp group was established to connect service providers, social workers and women's group leaders to share information on gaps and assess ongoing needs.

Sudan

In Sudan, to contribute to safe learning spaces, UNHCR and partners supported examination centers through the Ministry of Education with hand washing facilities, sanitbers, disinfectants, soap and spray pumps where students, including refugees and internally displaced people, were to attend their final Basic Primary School Leaving Examinations commencing on 19 July.

Zambia

In Zambia, UNHCR has identified 30 qualified refugee health personnel and is engaging the Ministries of Home Affairs and Health to secure their inclusion in the national response as part of the frontline health workers. Malaysia

In Malaysia, UNHCR partners distribute learning materials and worksheets for refugee children when delivering food assistance to refugee families. Completed worksheets are collected and replaced with new ones when the following round of assistance is delivered.

#MUNREFUGEECHALLENGE

In Ecuador, some 200 young people have accessed online courses thanks to the inhibitive "Conectados Ganamos", a programme to improve digital skills aunched by UNHCR in cooperation with its partner Fundack

Ecuador

cooperation with its partner Fundación de las Americas (FUDELA) and Fundación Telefónica Movistar. The initiative aims to improve employment opportunités or help to start small businessies.

World Health Organization

The World Health Organization (WHO) signed an agreement with UNHCR in May 2020 to boost the provision of health services to forcibly displaced and stateless people.

- WHO has been working with governments across the world to ensure that supply chains of medical equipment are reaching all communities, including refugees, internally displaced people and stateless people.
- WHO offices in countries with large refugee populations, such as Lebanon, Turkey and Thailand, have joined efforts with ministries of health to monitor cases and ensure the protection of refugees and the overall community from COVID-19.
- WHO raises awareness of health and safety practices. For example, WHO has conducted a 9-day COVID-19 awareness campaign in Iraq's Kurdistan region, which hosts one million displaced people (refugees and IDPs), in cooperation with the Ministry of Health.

Businesses

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Businesses can also support refugees during the COVID-19 pandemic.

- Businesses can employ refugees. During the pandemic, global companies have joined the Tent Partnership for Refugees, a network of 130 major private businesses, to hire refugees, support refugee entrepreneurs or create financial services that are more accessible to refugees.
- Businesses provide vital support by giving funds and in-kind donations. For example, Sony corporations donated 3 million dollars through their relief fund for COVID-19.
- Businesses can help raise awareness of the situation of refugees. For example, H&M and WeTransfer have used their channels to share messages of solidarity.

Governments

During the pandemic, refugee-hosting governments can play a key role in facilitating the protection of forcibly displaced people from COVID-19.

- Governments can facilitate the access of refugees to doctors, hospitals and healthcare. For example in Thailand, in 2013, all migrants and refugees were given access to health coverage regardless of their legal status.
- Governments can protect refugees from the economic impact of the pandemic by including them in their economic recovery plans.
- Governments can maintain refugees' right to territory, asylum, shelter and resettlement. For example, Portugal granted asylum seekers full citizenship rights during the COVID-19 outbreak and their rights of health were subsequently maintained.

#MUNREFUGEECHALLENGE

WHAT IS CURRENTLY BEING **DONE TO ADDRESS THIS ISSUE?**













Refugees



All over the world, refugee communities are showing solidarity in response to COVID-19.

- Refugee doctors and scientists are stepping up to contribute to the health emergency response. Lubab al-Quraishi, an Iraqi refugee in the United States stepped in to work in the frontline when New Jersey allowed internationally trained medical workers to help the city fight COVID-19.
- Refugees also play a critical role in sharing accurate information and contributing to prevention efforts in their communities. In Dadaab refugee camp in Kenya, COVID-19 information is disseminated by refugees through Radio Gar Gar radio programmes, which reach more than 100,000 listeners.
- Refugees have set up support groups to help older people and have cooked meals for health care workers on the front lines of fighting this pandemic.



Moheyman Alkhatavi, a 24-year-old Iraqi refugee working as a nurse in Iran is part of a team working tirelessly to monitor patients admitted to his hospital's quarantine unit while they await their test results.

In Dadaab refugee camp in Kenya, Amina, a refugee teacher, started broadcasting lessons to her students on a community station called Radio Gargaar when schools had to close. Radio lessons helped support over 100,000 students who attend the camps' 30 primary and secondary schools.





Questions to Guide the Debate

- How do we ensure refugees have access to the latest health and safety guidance? How can we involve refugees in the dissemination of health information in their communities?
- How can health services be expanded to refugees in host countries who are themselves struggling with the pandemic? How to improve refugees' access to hospitals and doctors?
- How can we work against xenophobia, fear and misunderstanding so refugees are welcomed, not shunned?
- How can we ensure young refugees continue to access education during lockdowns and after?
- How can the right of seeking asylum be protected during the COVID-19 pandemic?
- How do we create better conditions in refugee camps to ensure social distancing?
- How do we ensure refugees get access to a vaccine when it becomes available?
- How can refugees be protected from the economic impact of the pandemic?
- How do we protect the mental health of refugees during COVID-19?

Useful Resources

- o UNHCR Story Map on the effect of COVID-19 on Refugees
- o UNHCR's Operational Portal on COVID-19 and Refugees
- o The Impact of COVID-19 on Refugee Education
- <u>Refugees making a difference during the COVID-19 pandemic</u>
- o UN OCHA Global Humanitarian Response Plan: COVID-19