

Asia and the Pacific

10 September 2021



HIGHLIGHTS

- The rapid deterioration of the COVID-19 situation in Myanmar since June 2021 has continued with the country now in its most severe wave of infections so far. Despite a recent decline in the positivity rate (now under 20%), pandemic remains of significant concern. The total number of recorded COVID-19 cases in the country is now over 396,000 – around 32 per cent more cases since the end of July, with 15,287 deaths among reported cases, over 5,600 of these coming in August alone.
- Bangladesh continues to see an increasing number COVID-19 cases which have now crossed the 1.5 million mark. In the refugee camps in Cox's Bazar, as of 31 August, 2,893 positive cases and 30 deaths had been recorded since March 2020. Worryingly, over 1,100 of these cases and 10 deaths were recorded in July and August alone.

UPDATE ON VACCINATION

- In Iran, over 71,000 Afghan persons of concern have been vaccinated. The Government has maintained an inclusive policy towards Afghans in terms of vaccinations. UNHCR continues its advocacy efforts with international community to donate vaccine doses to Iran with a specific focus on the refugee population, which is amongst the most vulnerable segments of society.
- In Pakistan, all persons over 18 may now register for vaccinations by sending their Computerized National Identity Card (CNIC) number to 1166 (free SMS) from any mobile phone, online at nims.nadra.gov.pk or by walk-in to the nearest centre. This includes registered Afghan refugees (proof of registration (PoR) card holders), undocumented Afghans, and stateless persons – however, only vaccinated PoR cardholders receive vaccination certificates. Country-wide, around 22 million people have partially been vaccinated while over 6 million have been fully vaccinated. The government is continuing to increase its capacity and on 3 August, one million people were vaccinated, the highest total so far on a single day. As part of the inclusive COVID-19 response of the Government of Pakistan, refugees are also receiving health care on a par with Pakistani citizens.
- The Government of Bangladesh approved the provision of COVID-19 vaccines for Rohingya refugees in Cox's Bazar, with the first round of running from 10 - 23 August, with 36,943 of the 43,093 targeted population (refugees aged 55 and above) being vaccinated. UNHCR and partners continue to advocate that the vaccination of Rohingya refugees includes other age groups in line with the national rollout.
- In Indonesia, a lack of clear guidance on refugees' inclusion in the national COVID-19 vaccination programme has left them in limbo. The local government in Jakarta recently proposed to the Health Minister the implementation of COVID-19 vaccinations for refugees in the city, citing them as among vulnerable groups. In line with WHO guidelines, UNHCR continues to advocate at all levels for equal access to vaccinations for refugees. In collaboration with IOM and UNICEF, UNHCR started preparations to vaccinate all persons of concern (PoCs) aged 60 and above, frontline PoCs, and some those with comorbidities living in Jakarta and surrounding areas, aiming to cover nearly 300 persons.

KEY ISSUES

- In Afghanistan, healthcare services have faced many challenges due to the recent unrest including lack of medicines, medical equipment and materials, personal protective equipment (PPE), and oxygen for critical COVID-19 patients.
- In Iran, UNHCR is coordinating with the WHO and the Ministry of Health, led by the Communicable Diseases Centre and BAFIA, to plan for potential COVID-19 related health needs linked to new arrivals from Afghanistan, and to identify support that could be offered to strengthen Health services in the poorer eastern provinces.
- In Myanmar, UNHCR is closely monitoring access to vaccinations with some reports citing potential discriminatory practices in the vaccination of the Rohingya population, due to restrictive identity documentation requirements. UNHCR continues to advocate for inclusive and non-discriminatory access for all.
- In Bangladesh, the Government has relaxed the countrywide lockdown but continued to impose restrictions on activities, on protection activities in the camps. Facilities that offer services and safe spaces for women and children including learning centers remain closed but UNHCR and some protection actors can access camps for monitoring and delivering critical protection services. Refugee and host community volunteers continue to contribute significantly to the humanitarian response while access remains limited. Adding to the complexity of the situation, during last week of July, the monsoon intensified, and Cox's Bazar District experienced persistent rains and strong winds resulting in floods and landslides causing the death of eight refugees and 15 Bangladeshis in host community areas. Almost 25,000 refugees were displaced within the camps. Enforcing COVID-19 preventative measures, including lockdown restrictions, while responding to the emergency has been a challenge.
- Across the region, internet connectivity has presented a barrier for refugee children to access education when classes are being conducted virtually. In Malaysia, a survey carried out by UNHCR and its partner JREC on the efficacy and of usage of online learning in 113 learning centres found that, for 93% of respondents, the main challenge was internet connectivity at home. This highlights the potential for students with poor internet access to be left behind and underlines the importance of support in this area. UNHCR is working closely with partners and learning centres to provide digital infrastructure support and ensure that access to education is kept on track for refugee children.
- In the Philippines, quarantine protocols following an increase in COVID-19 cases in Mindanao, have resulted in project partners deferring activities such as face-to-face coordination and validation exercises, among others. Unstable internet connection also poses a challenge since most coordination activities are now limited to phone calls and messaging.
- In Thailand, lockdowns, curfews, restriction of movements and limited humanitarian access are still in place in the border refugee camps. Humanitarian agencies are in general not permitted to enter the camp and have to request permission from the camp authorities. Only health, WASH and waste



Water and sanitation volunteers spreading awareness of good hygiene practices in Cox's Bazaar. Photo: BDRCS

management agencies maintain limited access to camps. Residents are still not allowed to leave the camps apart from emergencies or for the completion of administrative procedures. Refugees leaving without prior permission may be refused readmission or may face detention and even deportation.

UNHCR RESPONSE

- In Bangladesh, UNHCR, as chair of the Community Health Working Group, coordinates the implementation of public health measures to foster prevention of COVID-19 transmission across all 34 camps. Since June, volunteer Community Health Workers (CHWs) visited over 470,000 households (including repeat visits), reaching 950,000 refugees with messages on COVID-19 prevention and identifying over 6,300 individuals with mild or severe COVID-19 symptoms whom they referred to health facilities. A further 64,173 small group sessions were conducted in the camps raise awareness and reduce hesitancy of vaccinations.
- In Myanmar, field activities in some areas have been curtailed due to COVID-19-related and other access challenges. UNHCR has been working on innovative ways to ensure it stays on the pulse of needs. In August for example, a remote monitoring system was developed to track COVID-19 needs and gaps in camps across Kachin and Shan (North) states, ensuring that needs can be swiftly identified and promptly addressed.
- In Thailand, UNHCR is providing cash assistance to refugees and asylum seekers in urban areas who have been hit hard by the impact of the pandemic and the lockdown in place in recent months, as Thailand has seen its worst COVID-19 outbreak since the start of the pandemic. Monthly deposits are made via cash cards with depending on family composition and vulnerabilities.
- In Nepal, in support of the Government's inclusive COVID-19 emergency response, which provides refugees with access to COVID-19 vaccines, testing and treatment, UNHCR Nepal donated medical supplies to local and national authorities in August including oxygen concentrators and personal protective equipment (PPEs).
- In Malaysia, in line with the Government's earlier announcement, walk-in vaccinations for migrants and refugees have commenced at designated vaccination centres in Selangor and Kuala Lumpur. UNHCR assisted the government with interpreters and volunteers. As cases surge in the country, UNHCR has intensified its efforts to mobilize refugee communities for vaccination outreach activities initiated by district health offices and NGOs. UNHCR also has intensified its community messaging on home isolation, the need to seek care if one is COVID positive, and to encourage suspected cases to get tested and treated, as there have been increased general reports of deaths occurring at home of people not seeking medical attention.
- In Afghanistan, despite the current situation, UNHCR continues to conduct protection monitoring in 32 provinces across the country, with household-level interviews being prioritized as the primary mean of monitoring, to mitigate the risk of COVID-19 transmission.
- In Central Asia, UNHCR is providing cash-based assistance to the most vulnerable refugee families in Kazakhstan, Kyrgyzstan, Tajikistan, and Uzbekistan, to mitigate the socio-economic effects of COVID-19 and ensure families have the necessary means to cover their most basic needs. With the same aim, UNHCR is scaling up its livelihoods interventions in Tajikistan targeting both refugees and vulnerable host community members. Consultations are ongoing with private sector companies specializing in the production of textiles to expand capacity to employ both refugees and vulnerable locals.

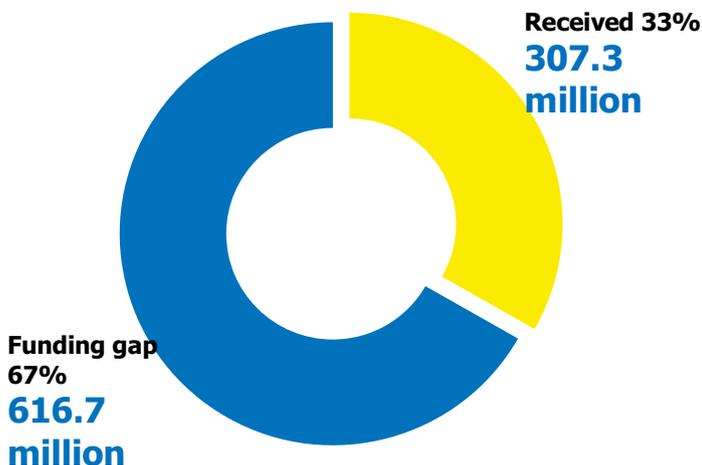
FUNDING NEEDS

About half of UNHCR’s COVID-19-related needs have been mainstreamed into its 2021 Global Appeal. However, with the pandemic evolving, and needs still emerging, UNHCR has in addition focused on a supplementary and limited set of activities related to exceptional socio-economic and protection impacts related to COVID-19. These activities focus on individuals who are newly vulnerable due to loss of income or livelihood or were already vulnerable but whose situation has further deteriorated and may need additional support. Specific attention has been paid to activities that focus on women and girls due to heightened gender inequality linked to COVID-19.

USD 469 million has been mainstreamed into the 2021 Global Appeal. USD 455 million are supplementary needs included in **UNHCR’s 2021 COVID-19 supplementary appeal**. This brings the total COVID-19-related requirements in 2021 to **USD 924 million**, including **USD 132 million for Asia and the Pacific** (ExCom-approved budget (mainstreamed) of USD 87 million and supplementary budget of USD 45 million).

USD 924M

Requested for UNHCR’s global COVID-19 response until the end of 2021 (inclusive of mainstreamed activities and UNHCR’s COVID-19 supplementary appeal). Funding received is as of 7 September.



UNHCR is grateful for the support from donors to its COVID-19 response including the **USA, the African Development Bank Group, Canada, the EU, Unilever (UK), Austria, China, Education Cannot Wait, France, UN COVID-19 MPTF, USA for UNHCR, Country-Based Pooled Funds, Germany, and Japan**, among many others. We also appreciate the support from private donors, UN pooled funds, and development partners that provided support for COVID-19 response in the region.

Moreover, we are grateful to donors of unearmarked and softly earmarked contributions to UNHCR, which enable operations in Asia to respond in a timely and flexible manner. These donors include **Norway, Sweden, the Netherlands, Denmark, Germany, France, Switzerland, Ireland, Belgium, Italy, and private donors in Spain, the Republic of Korea, Japan, and Italy**, among many others.

Contacts

Michael Prendergast, Assoc. Reporting Officer, Regional Bureau for Asia-Pacific: prenderm@unhcr.org