

61,869,330 Confirmed cases in over 200 countries, territories or areas¹

1,448,896 Deaths from COVID-19

107,830 Travel related measures have been issued by 224 countries, territories or areas

\$296 M Received by IOM for its Global Strategic Preparedness and Response Plan for Coronavirus 2019²

\$	Received:	Gap: \$323 M
	296 M	(Requested: \$619 M)

New funds: \$224 M; Reprogrammed funds: \$72 M.



IOM staff screen Syrian refugees for COVID-19 ahead of their resettlement flights from Lebanon to Europe. © IOM 2020

SITUATION OVERVIEW

COVID-19 continues to spread rapidly across the globe. As of 30 November, and since the outbreak began in December 2019, close to 62 million confirmed cases have been reported and the world is approaching 1.5 million deaths. Confirmed cases have been reported in more than 200 countries/territories/areas. The European Region accounts for the greatest proportion of reported new cases, followed by the Americas, and the Eastern-Mediterranean and African regions.

The global pandemic continues to have a substantial effect on global migration and mobility. Between 2 - 23 November 2020, a total of 224 countries, territories or areas have issued 107,830 travel related measures indicating an increase of eight per cent from 100,065 reported on 2 November 2020. Of these, 78,790 are conditions for authorized entry such as medical requirements while 29,040 are travel restrictions such as airport closures and passenger bans. In this reporting period, there has been an increase of 10 per cent in conditions for entry and a two per cent increase in travel restrictions. In terms of conditions for entry, there was an increase of 91 per cent in location surveillance such as Passenger Locator Forms and a 13 per cent increase in visa requirements for entry. In terms of restrictions, there was a 200 per cent increase in visa suspensions and invalidations and a 42 per cent increase in restrictions on passengers arriving from specific country, territory or areas.

In parallel to existing travel related measures, a total of 170 countries, territories or areas have issued 773 exceptions enabling mobility. As of 23 November 2020, 19 countries, territories or areas have issued 31 new exceptions whilst 11 countries, territories or areas removed 27 exceptions.

As the pandemic's effects continue to vary widely across world regions, mobile populations encounter diverse challenges depending on the policy and epidemiological contexts in their sending, transit, and receiving areas. Regulations and measures are evolving rapidly, and mobile populations often lack timely, accurate information about these changes. These populations are also frequently in vulnerable socioeconomic situations and have been especially impacted by the global economic downturn generated by the pandemic, which has in turn reduced remittances and heightened food insecurity. Furthermore, in crisis contexts, COVID-19 has exacerbated existing gaps in access to basic services and protection challenges, particularly for the most vulnerable groups, and has often generated xenophobia and discrimination against mobile populations. To address these and other questions, IOM missions around the world are working with governments and partners to ensure that migrants, whether in regular or irregular situations, as well as returnees and forcibly displaced persons, are included in all aspects of COVID-19 preparedness, response, and recovery efforts.

¹Source: WHO COVID-19 Situation Dashboard: <https://covid19.who.int/>.

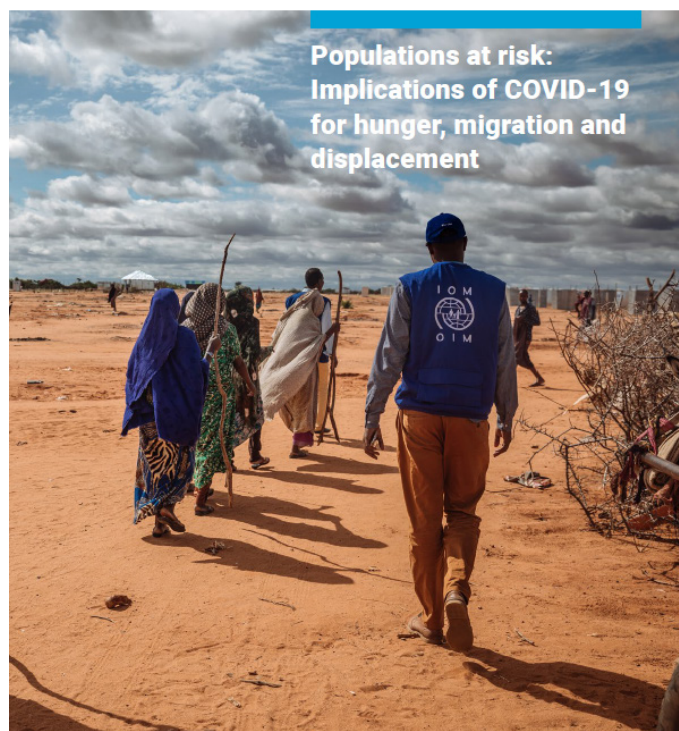
²Funding received excludes the [USD 25 million CERF contribution](#) which is towards NGOs rather than IOM's appeal. See [Global Crisis Response Platform](#) for more information.

SNAPSHOT OF IOM RESPONSE

Coordination and Partnerships

IOM is engaged in ensuring strong and efficient coordination among relevant actors at the community, national, regional and global levels to support the global pandemic response, particularly in coordinating cross-border efforts.

- **IOM and WFP** have published findings from a [joint study](#) exploring COVID-19 and related containment measures' impacts on migrant workers, remittance dependent households, and the forcibly displaced. [The report](#) highlights the links between hunger, conflict, migration, and displacement, and assesses the pandemic's implications for people's mobility, food security, and other livelihood outcomes in major migration and hunger hotspots around the world.
- IOM and Gavi, the Vaccine Alliance, [signed a global memorandum of understanding](#) to increase vaccine coverage for migrants, including forcibly displaced persons, and other at-risk individuals. This agreement will be critical in facilitating COVID-19 vaccinations, once a vaccine is approved, through IOM health centres and other programmes.
- **IOM Kazakhstan**, in cooperation with the Ministry for Foreign Affairs, has implemented the Global Compact for Safe, Orderly, and Regular Migration (GCM) in Kazakhstan. IOM facilitated Kazakhstan's active participation during the first GCM Regional Review, including through a presentation by the Ministry of Labor and Social Protection of the Population on the country's execution of the GCM in the COVID-19 context.
- **IOM Zimbabwe** held a coordination meeting with Port Health to emphasise COVID-19 safety protocols. The National COVID-19 taskforce also visited the Kariba point of entry (PoE) to assess its level of preparedness to re-open.
- As the PoE technical working group (TWG) co-lead and the Epi Surveillance co-lead, **IOM South Sudan** continued to collaborate with the Ministry of Health and to support the Medical Advisory Panel for South Sudan's proposed recommendations, which are currently under review by all pillars of the TWG.
- **IOM Iraq** continues to coordinate closely with officials from Erbil International Airport, Ministry of Health, the World Health Organization (WHO), and other key partners to assess activities at PoEs.



AN ANALYSIS OF FOOD SECURITY TRENDS IN MAJOR MIGRATION HOTSPOTS
NOVEMBER 2020

The cover of the joint IOM-WFP report, released 10 November 2020, which represents a key collaboration between the agencies on COVID-19's impact.

Tracking Mobility Impacts

As movement across borders continues to be affected, IOM's capacity to provide data and analysis on population mobility dynamics remains crucial for a more targeted and evidence-based response.

In an effort to provide a global overview of the impact of COVID-19 on human mobility at global, regional, and country levels, IOM is monitoring, analysing, and reporting on international travel restrictions implemented around the world and has developed a global mobility database to map and gather data on the locations, status, and different restrictions in place at PoEs, as well as Key Locations of Internal Mobility. As of 12 November 2020, IOM has assessed 4,113 PoEs (including 1,030 airports, 2,429 land border crossing points, and 654 blue border crossing points) in 179 countries, territories, and areas. The restrictive measures observed across these locations included restrictions on entry and exit, changes in visa and document requirements, medical requirements, restrictions on nationalities, medical certificate requirements, and other measures limiting mobility. These restrictions impact populations including regular travellers, nationals, irregular migrants, returnees, migrants, IDPs, and refugees. The IOM COVID-19 Impact on Points of Entry Bi-Weekly Analysis can be accessed [here](#).

IOM tracks and monitors in-country and cross border flows in order to understand population mobility trends within and between certain areas, which in turns helps to inform public health preparedness and response strategies.

- In [El Salvador](#), [Guatemala](#), and [Honduras](#), between June and August 2020, IOM conducted baseline assessments through interviews with key informants on the impact the pandemic is having on regular and irregular migratory flows and migrants' needs. Three reports examining this data were published during the reporting period.
- In [Mali](#), IOM is conducting flow monitoring activities across seven flow monitoring points. Between July-September 2020, 880 migrants were interviewed, and a report with findings from Q3 assessments has been published covering the socio-demographic profiles of migrants, their migratory routes, and reasons and conditions of travel. Report findings further affirm that Mali is one of the main routes taken by migrants in West Africa. Findings include: 80 per cent of migrants indicated that their migratory movements were for economic reasons and 69 per cent of migrants reported that they received information about COVID-19 through media sources.
- In [Somalia](#), a total of 19,392 movements were observed by IOM across 7 flow monitoring points in October. This represents a decrease of 34 per cent in comparison with October 2019 when 29,413 movements were observed. 55 per cent of respondents reported being aware of COVID-19. 31 per cent of respondents cited difficulties with sending or receiving remittances, out of whom 50 per cent indicated they had lost their job or business and therefore unable to send money to family, and 30 per cent reported that the closure of banks or money transfer operators was hindering the ability to send money internationally.

IOM is also tracking and monitoring the impact that COVID-19 is having on IDPs and migrants.

- In [Djibouti](#), following border closures in Ethiopia and stricter border management policies in Yemen due to COVID-19, some migrants transiting through Djibouti on their way to or from the Arabian Peninsula have found themselves stranded in country. IOM is monitoring migrant sites across the country. As of 19 November 2020, 503 stranded Ethiopian migrants have been identified across 14 sites. Immediate needs include water, food, hygiene kits, and non-food items. Between 1 - 19 November 2020, 686 migrants were observed arriving at Obock coast from Yemen. Since May 2020, a total of 4,969 migrants returning from Yemen have been recorded mainly between Moulhoulé and Ras Bir.
- In [Lao People's Democratic Republic](#), IOM published a report, "[COVID-19 Related Vulnerabilities and Perceptions of non-Lao Populations in the Lao People's Democratic Republic](#)" using findings from

key informant interviews with representatives from local administration, migrant community leaders, education institutes, humanitarian/social organizations, and recruitment agents who work or live with non-Lao populations.

A dedicated landing page on the [IOM Flow Monitoring Portal](#) has been developed to act as a central repository and dissemination channel for flow monitoring, mobility tracking, border management, movement and other reports, maps and outputs produced at country, regional, and global level in relation to COVID-19.

Risk Communication and Community Engagement (RCCE)

IOM is working with RCCE counterparts at the global, regional, national and community levels to develop RCCE strategies that ensure that mobility is properly considered in public health messaging, and that migrants and mobile communities have access to timely, context-specific, and correct information.

- In the first week of November, [IOM Djibouti](#) reached over 4,200 people, including migrants, with COVID-19 prevention awareness messages at flow monitoring points across five regions.
- The [IOM Libya](#) medical team conducted 85 COVID-19 outreach and awareness raising sessions in Sabha, Ubari, Tripoli and Benghazi for 5,465 migrants. In addition, 655 migrants in Tripoli and Zwara were reached with information materials in Arabic, English, and French.
- In [Somalia](#), more than 7,400 people were reached with COVID-19 awareness and prevention information through nine clinics supported by IOM.
- [IOM Mozambique](#) continues to disseminate COVID-19 prevention messages to cross-border truck drivers crossing the borders with Zimbabwe and South Africa. The messages are delivered in local languages, with a focus on handwashing and physical distancing tips. Since early June 2020, IOM has reached over 15,000 truck drivers.
- [IOM Iraq](#) distributed 66 roll-up banners for the Erbil Airport and another 44 for the Baghdad Airport to increase passenger awareness on COVID-19.

Disease Surveillance

Migration and mobility are increasingly recognized as determinants of health and risk exposure; IOM plays a key role in linking an understanding of population mobility with disease surveillance.

- In [Libya](#), syndromic and event-based health surveillance is ongoing in areas at/near PoEs in collaboration with the Libyan National Centre for Disease Control. As of 21 November, a total of 10,018 migrants have been surveyed.

- **IOM Burundi** is providing financial assistance to 100 community health workers in Muyinga Province who are carrying out community-based traveler surveillance for early detection of epidemics across communities and unofficial POEs.

Logistics, Procurement and Supply Chain

In coordination with the Pandemic Supply Chain Network (PSCN), the Supply Chain Interagency Coordination Cell and the relevant clusters, IOM supports the procurement, storage and distribution of critical supplies.

- Two sets of Multi-Purpose Units were withdrawn from IOM's Global Stocks in Manila, **Philippines** in response to COVID-19 operations undertaken in the city of Zamboanga. These multipurpose tents are currently being used regularly to process 120 IDPs per day.
- 312 kitchen sets, 1,100 mosquito nets, 550 IOM visibility bags, and 1,100 sleeping mats for 1,100 beneficiaries were withdrawn from IOM's Global Stocks in Nairobi in response to COVID-19 operations and site decongestion near Addis Ababa, **Ethiopia**.
- **IOM Philippines** provided 48 vans to the Philippine Coast Guard to support their swabbing operations at various testing and quarantine facilities around Metro Manila. IOM also deployed 12 vans to the Department of Social Welfare and Development for this reporting period, which will be used to shuttle vulnerable people between airport terminals and quarantine facilities.
- **IOM Moldova** provided a batch of 16,750 masks to the Border Police.

Points of Entry (POEs)

IOM is a strategic partner to support Member States in strengthening core capacities for public health measures at points of entry, through mobilizing its broad range of expertise in migration management and emergency operations.

- **IOM Kenya** has tested over 21,800 truck drivers for COVID-19 to facilitate the transportation of essential goods such as food, medicine, and fuel across East, Central and Horn of Africa countries.
- **IOM Zimbabwe** and the WHO are supporting the Ministry of Health to roll out trainings across the country for PoE staff on infection prevention and control in the context of the COVID-19 pandemic, including for port and airport staff in Maputo city and PoE staff in Nampula province.
- **IOM Costa Rica** strengthened the Zone Protocol for COVID-19 at border posts.
- **IOM South Sudan** screened over 14,300 travellers for COVID-19 and distributed an updated Health Arrival Form with COVID-19 information to

airlines and officials at Juba International Airport. IOM also provided healthcare services to over 1,170 people living near the Nimule PoE and conducted a sensitization workshop in Renk for border officials.

- In **Albania**, IOM supported Border Police operations at border crossing points and migrant reception centres through a donation of 5,700 pieces of PPE and hand disinfectants.
- **IOM Ethiopia** provided blankets, mats, bedsheets, soaps, and dignity kits to 364 returnees at PoEs and quarantine facilities. 87 returnees were also provided with onward transportation allowances.
- **IOM Iraq** conducted a Training of Trainers on PoE activities for three National Program Officers to increase their capacity to train border health officers at Erbil and Baghdad airports.
- In the **United Republic of Tanzania**, IOM supported the government with the development of a Standard Operating Procedure for screening at PoEs, currently being rolled out in all PoE zones.

National Laboratory Systems

National diagnostics capacity for COVID-19 remains a core component of any public health strategy. With its global network of laboratories, IOM continues to support the enhancement of national capacity for detection of COVID-19.

- **IOM Moldova** is providing support to strengthen the testing capacity for COVID-19 among migrants and frontline staff. 200 suspected cases were referred to the Public Medical-Sanitary Institution Hospital of Dermatology and Communicable Diseases, an IOM-supported clinic, for testing.
- In **Lebanon**, in the first half of November, 103 COVID-19 PCR tests were conducted for refugees ahead of their resettlement to Belgium and France.

Infection Prevention and Control (IPC)

The provision of safe water, sanitation and hygiene (WASH) is an essential part of prevention efforts during infectious disease outbreaks, including COVID-19. Combined with improved access to WASH services, IOM continues to support national capacity to implement infection prevention and control measures as these are an effective way to prevent or limit the transmission of the disease.

- To mitigate the risk of infection, **IOM Libya** conducted thorough cleaning interventions in five migrant detention centres and 10 disembarkation points. In addition, a water well was handed over to the local population in Sabha and four more wells are underway to minimize the risks of tensions over resources while ensuring a source of safe clean water to help prevent the spread of COVID-19.

- In **Bosnia and Herzegovina**, IOM started the distribution of reusable masks to migrants sleeping rough in squats and unofficial settlements.
- In **North Macedonia**, IOM installed disinfection gates in the Temporary Transit Centres Vinoug and Tabanovce to reduce the risks of COVID-19 transmission among the migrant community.
- In **DR Congo**, IOM distributed a total of 22,457 handwashing kits benefitting 56,142 IDPs living in Ituri, North Kivu and Tanganyika provinces. Additionally, a total of 76,520 bars of multipurpose soap were distributed, benefitting 76,520 IDPs living in North-Kivu and Tanganyika provinces.
- **IOM Somalia** constructed 14 handwashing stations in Bossaso and is providing hygiene kits to 35 households in Bossaso and Dhobley. 102 community hygiene workers and promoters have been recruited and trained and are currently working in Jubaland, South West State and Puntland.
- In **Ethiopia**, a standard operating procedure on COVID-19 alerts, response, and mitigation in displacement sites has been developed and shared for launch by the local government in West Guji zone. The construction of multi-purpose shades to ensure safe, socially distant distributions is ongoing in six IDP sites in Borena zone.
- In **Yemen**, IOM continued COVID-19 awareness raising efforts across 60 IOM-supported IDP hosting sites. IOM also rolled out IPC efforts at the sites, distributing IOM 33 kits with masks, disinfecting material, and hygiene items during the reporting period.
- In **Bosnia and Herzegovina**, IOM continues to ensure preventive measures in the IOM-run camps and centres by adopting mitigation measures, including physical distancing and smart queue management during food distribution, making the use of protective equipment by staff mandatory, and disinfecting common areas more frequently.
- 1,000 migrants have benefited from temporary accommodation in IOM-sponsored quarantine hotels at **Mexico's** northern border. These facilities are staffed with medical personnel who monitor migrants' health conditions, including COVID-19 symptoms, and refer them to public health care centres when required. Migrants also receive protection and psychosocial support.

Case Management and Continuity of Essential Services

IOM continues to provide life-saving support to vulnerable communities affected by widespread transmission of COVID-19 in order to reduce morbidity and mortality rates. In particular, IOM focuses on countries and regions suffering from vulnerable health systems and with high prevalence of malaria, HIV/AIDS, measles and tuberculosis, as well as other preventable infectious and non-communicable diseases.

- In **Kosovo**, a joint programme by IOM, the UN Refugee Agency, and UN Women aims to decrease community members' COVID-19-generated vulnerability by facilitating their access to social and health care services, life-saving support, information and communication, effective coordination and advocacy, and socio-economic support. The project targets more than 57,000 direct beneficiaries in 14 municipalities.
- **IOM Libya** continues to support four primary health care centres with medicines, medical consumables, and information materials. 903 IDPs, migrants and host communities were also provided with medical consultations while nine were referred to hospitals for secondary care.
- **IOM Afghanistan's** seven mobile health teams served 56,308 patients, including 10,222 outpatient consultations, health education sessions for 32,835 persons, and psychosocial counselling sessions for 2,806 patients.

Camp Coordination and Camp Management

As co-lead of the global CCCM cluster, IOM works to support regional, national and local authorities to develop contingency and response plans, and to ensure the continuation of services in existing displacement sites at risk.

Protection

The current COVID-19 emergency is exacerbating all pre-existing vulnerabilities and risks of violence and discrimination, which can intersect with other factors such as gender, age and disability, but also nationality, status or ethnic origin. IOM is committed to ensuring the protection of migrants, displaced persons and other vulnerable populations remains at the center of its COVID-19 response.

- In **Mozambique**, in the first week of November, IOM mental health and psychosocial support (MHPSS) teams carried out home visits and conducted COVID-19 awareness raising activities to displaced families and host communities in the districts of Montepuez, Ibo, Memba, and Pemba city, as well in IDP settlements in Memba district.
- **IOM Afghanistan** completed case management assessments for 197 vulnerable cases in Nimroz, Kabul, Ghor, Balkh, and Kunduz. In addition, COVID-19 protection monitoring assessments were conducted for 115 cases, who were also provided information on COVID-19 prevention and awareness.
- In **Kazakhstan**, IOM organized the return of 222 Tajik migrants and 18 Moldovan migrants who had been stranded due to COVID-19 restrictions without the means to sustain themselves.
- **IOM in Iraq** installed handwashing stations in Ninewa, Anbar, and Salah Al-Din governorates, which have

been modified to be accessible to persons with disabilities.

Addressing Socio-Economic Impacts of the Crisis

Recognizing the importance of including migrants and other mobile population groups in UN development responses, IOM is actively engaging with various partners from governments, the private sector, civil society, communities and individuals to re-establish means of socioeconomic support to prevent human suffering during the crisis, and provide for a durable recovery in the post-crisis environment.

An emerging policy area in the context of COVID 19 socioeconomic impact mitigation, in particular on the **African continent**, is the continued disruptions to **trade and cross-border flows** of people, goods, and services. On 17 November, IOM participated in the Virtual Experts Working Group Meeting to review the “Continental Guidelines on Trade and Transport Facilitation for the Movement of Persons, Goods and Services Across Africa During the COVID-19 Pandemic”. The meeting was organized by the United Nations Economic Commission for Africa (ECA) in collaboration with the African Union Commission (AUC) and African Union Development Agency – New Partnership for Africa’s Development (AUDA-NEPAD). Further, the **IOM Regional Office in Pretoria** is participating in the Trade Industry and Finance Investment Working group within the South-African Development Community (SADC), which is similarly looking into COVID-19’s socio-economic impacts and the implications for the SADC. Finally, IOM engages with the Pan African Parliament (PAP) Committee on Trade by contributing migration-specific dimensions to the COVID-19 impacts, together with partners such as the African Union Commission (AUC)’s Department of Social Affairs and the International Labour Organization (ILO), culminating in a meeting on 23-25 November 2020 in Midrand.

Work continues on capturing information and analysing socioeconomic impacts on specific population groups on the move through **conducting original surveys and assessments**. For example, **IOM Indonesia**, through the Indonesia Migrant Workers Union, is currently conducting a survey of some 2,000 Indonesian migrant workers who returned during the pandemic. The survey will be completed in mid-December 2020 with findings available by the end of the year. This survey focuses on 1) Migrant workers’ experiences working overseas, 2) COVID-19’s impacts on migrant worker returnees (including on their current livelihoods situation), 3) COVID-19’s effects on migrant workers’ remigration decision and their access to support, 4) Protection for vulnerable migrant worker returnees, and 5) Support for migrant worker returnees (including accessibility to the One Roof Integrated Services for migrant workers (LTSP)/ Migrant Resource Centre). In Libya, IOM is monitoring the socioeconomic impact of the pandemic on vulnerable populations on the move through

DTM key informant interviews. A recent report confirms that up to 90 per cent of migrants relying on daily labour work have been negatively impacted and 79 per cent of host community members have been negatively impacted. Unemployment remains one of the major risk factors affecting migrant vulnerability in **Libya**. Compared to March–April 2020, 27 per cent of the migrants interviewed reported being unemployed, representing an 8 per cent increase in migrant unemployment.

To highlight the importance of information provision and awareness raising among migrant beneficiaries, IOM missions continue conducting **awareness raising campaigns and outreach**. In **Thailand**, within the regional PROMISE project, IOM, together with UN Women, the Migration Working Group, and private sector stakeholders, launched MitrThai.com. MitrThai.com is available in Khmer, Lao, Myanmar, and Thai languages and responds directly to migrant workers’ increased risks during the COVID-19 pandemic due to a lack of timely and accurate information. The site provides information on how to stay safe and healthy and how to extend stay and work permits, and provides free access to skills development opportunities, including labour rights training, and 10 hours of Thai language training.

To reach vulnerable populations groups and mitigate evolving socioeconomic impacts on livelihoods, IOM missions globally continued **providing direct assistance and support**. In **Lebanon**, IOM provided 215 short-term employment opportunities to vulnerable Lebanese and Syrian families that lost their jobs due to the economic crisis and COVID-19 outbreak. The beneficiaries worked to support an array of activities identified in coordination with local municipalities. Against the backdrop of growing socioeconomic vulnerability caused by COVID-19, **IOM in Yemen** improved access to livelihoods for 350 vulnerable displaced and host community households in October 2020 through cash for work activities in Hadramaut Governorate. The intervention included street cleaning activities, which supported improvements in sanitation and the continuation of essential services. IOM also provided start up kits for 573 vocational training beneficiaries in Marib and Hadramout governorates. In **Jordan**, IOM distributed vouchers to 1,705 vulnerable migrants from various nationalities. The vouchers enabled migrants to purchase essential goods from local stores for three months, addressing heightened levels of vulnerability during the pandemic.

OPERATIONAL UPDATES

Operational Challenges

- Due to travel restrictions and public health measures, as of 20 November, seven out of 75 IOM migration health assessment sites remain closed and nine others are providing limited services.
- IOM's immigration and visa processing programmes have reduced activities, in adherence with health and local government directives. As of 23 November, 12 per cent of centres have returned to operating and assisting migrants at regular capacity, 59 per cent have temporarily reduced operations, and 29 per cent have temporarily closed.

New Programmatic Approaches

- IOM continues to facilitate movement operations and provide transportation assistance, despite the challenges imposed by COVID-19. Between 21 March and 30 November, 65,104 persons received IOM assistance to facilitate their movement, namely for repatriation, assisted voluntary return and resettlement. This includes the arrangement of 97 charter flights for 8,049 individuals to allow for movements to continue despite the limitations imposed by COVID-19. Since 1 June, resettlement movements continue to increase, with a total of 17,735 persons having embarked on an international flight to begin life anew.
- Migration health staff from IOM's Global Migration Health Assessment Programme (HAP) have been called to contribute to national COVID-19 responses in several locations. On 20 November, there were 98 staff deployed within IOM or government programmes. In addition, 19 HAP sites are currently providing Member States with health supplies and services to support local COVID-19 response

initiatives, including COVID-19 screening at PoEs and elsewhere, the provision of primary and acute care services related to COVID-19, and the provision of PPE and medical supplies.

- As part of IOM's contribution to the UN's First Line of Defence against COVID-19, IOM has started providing health services, including testing for COVID-19, for UN staff in 16 countries. In Burundi, services started in November including a 56-bed quarantine and isolation capacity for UN staff, and testing has officially begun in Lagos, Nigeria, and Colombo, Sri Lanka. In total, IOM is to provide health services to UN staff in 19 countries during the project's first phase.

Information Sharing and Communications

- [IOM's COVID-19 Analytical Snapshots](#) summarize the latest research, information and analysis covering COVID-19's migration and mobility related impacts from around the world. New topics include 'public attitudes on migrants and migration', 'disruptions to migrants' education', 'human trafficking', 'immigration detention', and 'emerging remittance patterns'. New translations are now available in [Chinese](#), [Spanish](#), [French](#), [Arabic](#), and [Russian](#).
- IOM's High-Level Migration Research Adviser papers on COVID19 and the transformation of migration and mobility globally are now available on the [IOM Online Bookstore](#). The short papers cover key topics including migrants' rights, gender impacts, stranded migrants, and mobility systems. The next webinar in the transformation series on 9 December focuses on mapping COVID19 dynamics with the WorldPop team from Southampton University and Facebook's Data for Good team. Register [here](#) for the webinar. Videos from previous webinars can be accessed [here](#).



IOM volunteers work to construct COVID-19 Isolation and Treatment Centers in Cox's Bazar, Bangladesh.
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