

COVID-19 response in the Islamic Republic of Iran

April 2020

THE COVID-19 SITUATION IN IRAN continues to evolve rapidly, with the number of individuals who have contracted the virus having increased sharply since the first case was reported around mid-February 2020. There are currently no indications that refugees are disproportionally affected by the Coronavirus itself. While refugees remain resilient, given that refugees often belong to the more vulnerable segments of the population, they may feel the overall impacts more severely, namely on their livelihoods. Working closely with the Bureau for Aliens and Foreign Immigrant's Affairs (BAFIA), UNHCR HAS ENHANCED ITS **EMERGENCY SUPPORT TO THE GOVERNMENT OF IRAN's** response to the COVID-19 pandemic, but more support is needed to further help refugees and their Iranian host communities.



UNHCR is providing **ESSENTIAL EOUIPMENT AND MEDICINES** to help bolster Iran's health system. UNHCR has also distributed hygiene and sanitation products, with a focus on refugee-hosting areas and refugee settlements. So far, UNHCR has received a total of some 6.8 tonnes of essential medical equipment and medicines. Over the next few weeks, additional airlifts containing additional medical items and personal protective equipment for health workers and humanitarian service providers will be received and distributed.



UNHCR has increased its helplines capacities so that REFUGEES CAN CONTINUE ACCESSING PROTECTION **SERVICES** and to address the heightened needs of persons with specific needs, including women and children. UNHCR's hired lawyers and psycho-social counsellors also continue to provide legal advice and counselling to refugees via phone.



Thanks to the Government of Iran's INCLUSIVE POLICIES, refugees and foreign nationals have access to free of charge COVID-related test, treatment and hospitalization, similar to nationals. Refugees can enroll in national health insurance and UNHCR is covering the premium for up to 100,000 of the most vulnerable refugees. Other refugees can enroll by paying the insurance premium themselves, in the same way as nationals. The Government of Iran extended the annual insurance validity of all refugees until 21 June 2020, to ensure access to health care is unimpeded during COVID-19.



UNHCR and BAFIA have increased **COMMUNICATION WITH COMMUNITIES** to share information on hygiene and health practices through engaging with psycho-social legal-aid partners, counsellors, refugee focal points and other partners. UNHCR disseminates information through posters and on its digital platforms, to ensure wider reach.



As of 3 May, UNHCR partially resumed **VOLUNTARY REPATRIATION**. which was temporarily suspended in March in order to limit the risk of refugees and staff members catching COVID-19. In the first quarter of 2020, 233 refugees returned to Afghanistan through UNHCR's return programme -36% lower than in the same period in 2019 - with many reporting fear of COVID-19 spread and loss of livelihood as their main reason to return. Additionally, since January around 200,000 undocumented Afghans returned without UNHCR support.



UNHCR is providing a one-off CASH **ASSISTANCE** to 1,000 households that have a family member that contracted COVID-19, is at risk (with underlying conditions, older persons) and has suffered immediate income loss combined with having specific protection vulnerabilities, to help them cover basic needs for up to three months.



\$18.6M needed for COVID-19 measures in Iran

With your support we can help prevent the virus from spreading.

In Iran, UNHCR is seeking USD 18.6 million for its COVID-19 emergency measures. This is part of the global funding needs of UNHCR and feed into the wider UN appeal, COVID-19 has shown that strengthening and promoting inclusion of refugees in national systems can help mitigate impact on the most vulnerable.

Support for UNHCR's regular activities under the umbrella of the Solutions Strategy for Afghan Refugees further complements the emergency measures in response to COVID-19 by strengthening inclusive national systems, including for health, and mitigating the virus' socio-economic impacts.