

Southern Africa

1 - 31 January 2021

Highlights

Since UNHCR's COVID-19 response began in Southern Africa in March 2020



2.7 million people reached through COVID-19 awareness-raising campaigns



466,252 people receiving additional soap to promote handwashing



24 isolation and **20** quarantine facilities established and supported



UNHCR supports a primary school hygiene campaign in Brazzaville, Republic of the Congo. The school, which is attended by refugee students, received handwashing stations and disinfectant gel. ©UNHCR / S. Duysens

Population Figures

7,381,485* people of concern to UNHCR in Southern Africa, including



730,311 refugees and 311,968 asylum-seekers



6,196,561 internally displaced persons (IDPs)

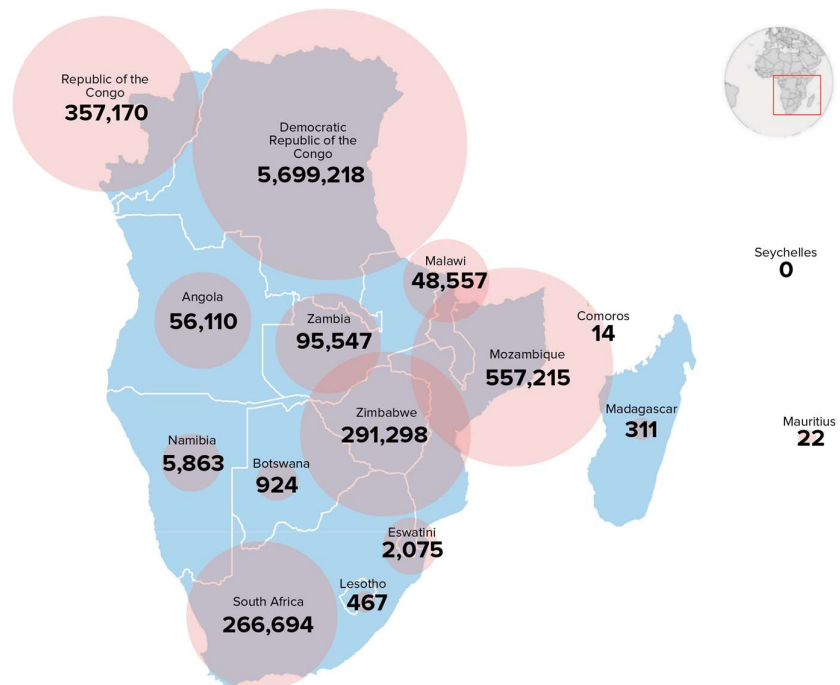


36,645 other people of concern

(as of 31 January 2021)

*Reduction in overall population compared to previous report is due to removal of IDP and refugee returnee figures from 2020, in line with UNHCR's policy to report returnees only during the calendar year in which they returned.

People of Concern to UNHCR in Southern Africa



Operational Context

The COVID-19 situation in the Southern Africa region intensified in January 2021, with spikes in the number of cases in several countries and governments confirming resurgences – or “second waves” – of the virus. As of 2 February 2021, there were 1,766,087 reported cases of COVID-19 in the 16 countries covered by UNHCR’s Regional Bureau for Southern Africa, representing an increase of 471,992 confirmed cases over a one-month period. While South Africa continued to have by far the highest number of reported COVID-19 cases in the region, the resurgence has also resulted in upward trends in countries such as the Democratic Republic of the Congo (DRC), Malawi and Zambia. Notably, in Namibia, the number of COVID-19 cases doubled from December to January. As a result of this upward trend, restrictions to curb the spread of COVID-19 continued to be tightened, with measures varying from country to country, and including longer curfews, bans or restrictions on public gatherings, restrictions on the sale of alcohol, closure of schools and restaurants, travel restrictions and closure of land borders for all but essential travel.

UNHCR continues working closely with governments, the World Health Organization and other UN agencies and non-governmental organizations (NGOs) to secure the inclusion of people of concern to UNHCR – refugees, asylum-seekers, internally displaced persons (IDPs), and stateless persons – into preparedness and response measures for COVID-19. Given the impacts on livelihoods and economic opportunities, UNHCR advocates for people of concern to UNHCR to be included into social safety nets and other social assistance programmes for COVID-19. Importantly, countries in the region are taking steps towards acquiring COVID-19 vaccines through COVAX, the African Union, and direct acquisition from manufacturers. UNHCR Representations across the region have actively engaged with government ministries to ensure that people of concern are included in national vaccine plans, and in some cases are part of government task forces and working groups developing vaccine roll-out plans and strategies. While most vaccine rollouts are still in the planning stages, response from governments has so far been positive. To date, no country has expressly excluded people of concern, and some have included consideration for people of concern as vulnerable groups under the national plans.

UNHCR and partners continue to follow a “stay and deliver” approach, maintaining protection services and other forms of life-saving assistance. Programmes have been adapted to observe social distancing and other COVID-19 mitigation measures, health protocols are in place at registration and distribution points, and hotlines and community protection structures are utilized to support case management. Since the beginning of the response to COVID-19 in March 2020, UNHCR has focused on risk communication and outreach efforts to spread information about COVID-19 prevention and services. Health systems strengthening has been a priority, equipping health centres, training health workers, and establishing isolation and quarantine centres. Additional handwashing facilities have been installed and additional soap continues to be distributed to promote good hygiene practices. UNHCR has also been providing cash assistance and core relief items (CRIs) to those worst impacted by lockdowns and other restrictions, while children and youth have been supported with virtual and distance learning to continue with their studies.

UNHCR Response

Health and WASH



14 isolation centres and **10** quarantine centres established and supported by UNHCR in the **DRC**.



More than **68,500** people receiving soap to promote handwashing and reduce the spread of COVID-19 in **Zambia**

Throughout the response to COVID-19 in Southern Africa, support to health systems and services has been a priority for UNHCR and partners, including equipping health centres, training health workers, establishing screening systems, and supporting isolation and quarantine centres. In Dundo, **Angola**, UNHCR supported improvements to the isolation centre’s infrastructure, installing 12 pit latrines for the general public (six for women and four for men), two latrines for staff, six showers (four for women and two for men), one 10,000 litre portable water tank, one

chlorinating point with 10,000 litres capacity and one incinerator. The improvements are expected to serve the centre in its full capacity of 100 people. Similarly, in the **DRC**, WASH infrastructure was established at the three quarantine centres in Lusenda and Mulongwe, South Kivu Province. Across the region, UNHCR has established and supported 24 isolation and 20 quarantine centres, the largest number being in the DRC, with 14 isolation centres and 10 quarantine centres supported by UNHCR.

In **Zimbabwe**, community health workers conducted daily awareness-raising sessions about COVID-19 at the health centre in Tongogara refugee camp. National COVID-19 statistics were shared with Community Health Workers, Community-Based Counsellors, Community-Based Rehabilitation Assistants, Gender-Based Violence focal persons, Education Assistants and Community Leaders to enable the community structures to disseminate accurate statistics to the community. The Community Health Workers reached 1,773 refugees and asylum-seekers during the month of January with COVID-19 information at the clinic and during community outreach initiatives including at the firewood distribution site.

Support to water, sanitation and hygiene (WASH) systems has also remained a priority, as a key element in the fight against the spread of COVID-19. With the reopening of schools in many countries, special attention has been given to preventive measures in the school environment for both refugee and host community children. In the **DRC's** Haut Katanga Province, UNHCR's partner distributed ten handwashing kits to primary and secondary schools attended by refugee students, while in **Zambia**, the Ministry of Health, in conjunction with UNHCR, disinfected classrooms and toilets in the two schools in Mantapala refugee settlement as required by the Ministry of General Education for school reopening on 1 February. In addition, UNHCR distributed soap to 15,230 people in an ongoing double ration distribution for January and February to lessen physical contact and crowding in view of COVID-19. 68,538 people are currently receiving double rations of soap from UNHCR in Zambia. Across the region, 466,252 people have benefitted from regular soap distributions to promote increased handwashing to reduce the spread of COVID-19 during the pandemic.

Protection, Communication and Community Engagement



1.7 million people reached with COVID-19 risk communication in the **DRC**



450,196 people reached with COVID-19 awareness-raising in **South Africa**

Across the region, risk communication and awareness-raising on COVID-19 continued for refugees, IDPs and host community through community-based protection groups and community mobilizers, information sessions, flyers and leaflets, reaching nearly 2.7 million people. Given reports of complacency and non-compliance with COVID-19 mitigation measures, UNHCR is redoubling its efforts to encourage people to remain vigilant and adhere to COVID-19 prevention protocols. The region's largest COVID-19 risk communication and awareness-raising campaign continued in the **DRC**, reaching nearly 1.7 million people since the beginning of the COVID-19 response. In the month of January, UNHCR and partners reaching nearly 10,000 refugees, displaced people and host community members through individual, household and community-level engagements and activities. This figure does not include those reached through radio programming, which has also been an important way of spreading the word about COVID-19. For example, in North and South Kivu provinces, over 14,350 people are estimated to have been reached in January with COVID-19 preventive messages via radio broadcasts in different languages. In addition, in South Kivu Province, four free hotlines were established in refugee-hosting areas Mulongwe and Lusenda, which are accessible to both refugees and host community to alert about suspected cases of COVID-19.

In light of changing COVID-19 regulations and restrictions in **South Africa**, UNHCR and partners have been keeping refugees and asylum-seekers informed of changes to the National Disaster Management Regulations and public health measures through risk communication activities. This includes information specifically targeted to demystify issues around COVID-19 and the vaccine. This information campaign was also planned in response to reports that people of concern were not accessing health care services due to COVID-19 stigma, and subsequent concerns that the stigma may impact vaccine uptake in refugee-hosting communities. UNHCR is also circulating complementary information through community networks using email and WhatsApp trees.

Challenges

There are continued reports across the region of fatigue with COVID-19 prevention measures, leading to complacency or non-compliance with restrictions and regulations including wearing masks, self-isolating, social distancing and other prevention measures. UNHCR and partners are redoubling efforts in risk communication and community engagement on COVID-19 and seeking innovative approaches to strengthen impact. At the same time, concerning reports of rising xenophobia and stigmatization of refugees continue to be noted in the region, impacting on the physical safety of people of concern as well as on social cohesion and peaceful coexistence with local communities. UNHCR is making efforts through its social cohesion programming to roll out initiatives that enable dialogue and foster good will and understanding between refugees and their hosts.

Furthermore, UNHCR, governments and partners continue to face challenges ensuring a reliable supply and stock of medical supplies and equipment for COVID-19 and other medical conditions, due largely to delays of international orders and lack of local providers. Slowness and sparse coverage of COVID-19 testing also remains a concern, linked to shortages of test kits, limited laboratory capacity, and delays in results being shared. This is especially worrying as the region is experiencing a resurgence – or “second wave” – at a time when there is widespread fatigue with basic COVID-19 prevention measures.

Supporting LGBTQI+ refugees in South Africa

Fruit Basket is an organization that advocates for the rights and freedoms, as well as the safety and security, of LGBTQI+ migrants, asylum-seekers and refugees living in South Africa.

Since the COVID-19 pandemic started, the organisation has responded to some of this community's most urgent needs, including food, rent, medications and health emergencies. Fruit Basket has also incorporated a holistic approach ensuring support and a sense of community for LGBTQI+ migrants, asylum-seekers and refugees across South Africa during the pandemic and the ensuing isolation that many have experienced, particularly those in marginalised and more vulnerable groups.

In recognition of their innovative approaches for protection and delivery of services to refugees and asylum-seekers, Fruit Basket was recognized as a winner of UNHCR's **2020 NGO Innovation Award**.



A distribution of food parcels by Fruit Basket, supported by UNHCR, in Johannesburg, South Africa. ©UNHCR / K. Pond

Financial Requirements

In 2021, UNHCR is seeking US\$ 924 million for the response to COVID-19, of which over 50 per cent is mainstreamed into the annual budget, and some US\$ 455 million is sought through the [COVID-19 Supplementary Appeal](#), for activities in 2021 related to the exceptional socio-economic and protection impacts of COVID-19. As of 17 February, the COVID-19 Supplementary Appeal has received US\$ 22 million in contributions.

In Southern Africa, US\$ 39 million is needed for the response to COVID-19, which includes US\$ 19 million mainstreamed into the annual budget, and US\$ 20 million under the COVID-19 Supplementary Appeal. As of 22 February 2021, the region has received contributions totalling US\$ 757,822, accounting for approximately 4% of financial needs. The Regional Bureau for Southern Africa is grateful to donors who have supported operations in the Southern Africa region for COVID-19 response, including Education Cannot Wait, UN COVID-19 Response and Recovery Fund, and the European Union.

CONTRIBUTIONS TO UNHCR'S GLOBAL COVID-19 RESPONSE 2021 | USD

African Development Bank 11.9M | European Union 4.2M | China 2M | Education Cannot Wait 1.3M | UN COVID-19 MPTF 0.7M | Swedish Postcode Lottery 0.2M | Sunshine Forever Limited 0.2M | UNHCR Insamlingsstiftelse 0.1M | Japan Association for UNHCR 0.1M | Private donors USA 0.1M | Other private donors 0.1M

UNHCR is also grateful to the donors that have provided unearmarked support to UNHCR's global programme so far in 2021. Contributed without restrictions on its use, unearmarked funding allows UNHCR critical flexibility in how best to reach refugees, the internally displaced, stateless persons and other populations of concern who are in the greatest need and at the greatest risk.

UNEARMARKED CONTRIBUTIONS TO UNHCR'S 2021 GLOBAL PROGRAMME | USD

Norway 80M | Sweden 66.9M | Netherlands 36.1M | Denmark 34.6M | Germany 22.1M | Switzerland 16.4M | Ireland 12.5M | Belgium 11.9M

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**Global Financial Requirements:
UNHCR 2021 COVID-19
Supplementary Appeal**

