

## Asia and the Pacific

6 August 2021



### HIGHLIGHTS

- Myanmar has seen a rapid increase in COVID-19 cases in since June, with preventative measures and related movement restrictions in place across the country, including road closures which have impacted the evacuation of flooded areas of Kayin State. A case-surge in Kachin and Shan States has compelled some IDPs and villagers to self-impose lockdown. Preventative measures, coupled with an increase in prices, have impacted livelihoods and access to basic services. The political situation following the 1 February military takeover has disrupted the national COVID-19 response - diminishing testing and quarantine capacities, limiting essential health services, and pushing the health system to a point of near-collapse.
- Bangladesh continued to see a significant increase in COVID-19 positive cases. In the refugee camps in Cox's Bazar, as of 31 July, 2,451 positive cases and 27 deaths had been recorded since March 2020. Worryingly, over 1,200 of these cases and 10 deaths were recorded in June and July alone.
- Since July, Pakistan has been experiencing a significant fourth wave of CoVID-19 including spikes in cases and deaths, including from new variants. In response, the National Command and Operations Centre (NCOC) for COVID Response reintroduced restrictive lockdown measures across the country.

### UPDATE ON VACCINATION

- Under the Government of Iran's inclusive policy, refugees and foreign nationals are included in the National Deployment and Vaccination plan (NDVP). However, the government faces constraints in operationalizing the NDVP, with challenges in the international procurement of vaccines linked to sanctions and access to financial channels. UNHCR in collaboration with WHO and UNICEF, has supported the Ministry of Health and Medical Education to apply via the COVAX Humanitarian Buffer to receive vaccines for 20% of the refugee/Afghan population (1.6 m doses) - outcome pending.
- 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 Afghan refugees. On July 30, Chief Minister Murad Ali Shah announced that modalities are being reviewed to facilitate COVID-19 vaccines for people living in Karachi (Sindh), without a CNIC after on the spot biometric registration at city's the Mass Vaccination Centres. This will enable stateless and undocumented individuals to be vaccinated.
- The Government of Bangladesh has approved the provision of COVID-19 vaccines for Rohingya refugees in Cox's Bazar from 10 August, starting with refugee leaders and frontline workers, including refugee volunteers, aged 18 years and above. This will be followed by refugees aged over 55. Altogether over 65,000 refugees are targeted to be vaccinated in the first cohort.
- In Indonesia, UNHCR continued discussions with the National Refugee Task Force, city governments, and the Ministry of Health to include refugees in the national vaccination scheme, with advocacy support from an influential religious organization, Nahdlatul Ulama (NU). A possible solution involves contributions from UNHCR and IOM. UNHCR is working to mobilize support and funds from Embassies and private donors.

- In Malaysia, some refugees have received vaccination appointments after registering online for the National Immunisation Programme. Vaccinations access for refugees and the undocumented should further improve following the Government's recent announcement of walk-in vaccination centres in Selangor and Kuala Lumpur, to enhance coverage in the hardest-hit states. Mobile vaccination clinics will support those who cannot reach vaccination centers, including the elderly and disabled. UNHCR is working with the Family Health Development division of the Ministry of Health and NGO medical teams to include vulnerable refugees in this mobile programme, while also working on messaging to refugee communities.
- UNHCR Thailand continues to advocate for the inclusion of refugees, asylum-seekers, and stateless persons in the Royal Thai Government vaccine distribution plan. Following assurances earlier in the year that this would be the case, UNHCR is awaiting details of how and when this would be carried out.
- In India, 11,596 refugees and asylum-seekers have been vaccinated. 3,807 refugees and asylum-seekers under UNHCR mandate have been vaccinated of which 3,347 received vaccinations based on the Government of India Standard Operating Procedures for those without identity documents.
- In Japan, access to vaccinations/related medical services by unregistered asylum seekers requires individual case support from NGOs. A UNHCR's project partner has arranged, in partnership with a private clinic, state funded vaccination sessions targeting asylum seekers without residency status.

## KEY ISSUES

- In response to the fourth wave of the virus in Pakistan, the Government has announced plans to block phones of non-vaccinated individuals and has reportedly already blocked non-vaccinated individuals from taking domestic flights and staying in hotels and other accommodation.
- In Afghanistan, documentation renewal for persons of concern is ongoing with the necessary precautionary measures in place to prevent COVID-19 transmission. However, Voluntary Repatriation has been significantly impacted by the ongoing conflict.
- On 12 July, Nepal received 1.5 million doses of Johnson & Johnson's vaccine from the United States, with the Ministry of Health and Population including refugees aged over 18 as one of several eligible population groups. UNHCR is coordinating closely with the Government, local NGO health partners, and refugee communities to ensure timely information dissemination and to monitor vaccine roll-out to refugees. UNHCR Nepal also handed over a newly constructed hospital building to Pathari Municipal Hospital at Pathari-Sanischare Municipality, Morang district in Province 1. The hospital provides health services to refugees and host communities and is currently being used to care for COVID-19 patients.
- In Indonesia, the Ministry of Health recently issued a regulation stating that only Indonesian nationals will be covered through State Budget for COVID-19 treatment. As a result, UNHCR and partners are now receiving payment requests for refugees who are hospitalized with COVID-19.
- In the Philippines, people of concern report limited financial capacity to cover basic needs, including food, medicines, and rent with some expressing intentions to voluntarily depart the country due to their situation.
- In Malaysia, the reintroduction of the Movement Control Order has had a damaging impact on refugees, especially women, children and LGBTI persons. Deteriorating socio-economic conditions, restricted movement, suspension of community programmes, and heightened negative public sentiment towards refugees has deterred at-risk groups from seeking support.

## UNHCR RESPONSE

- Despite the difficult situation in Malaysia, UNHCR and its Child protection and GBV partners continue to deliver essential services, including shelter, comprehensive case management, community-based foster

care, adapted interventions to online support, toll-free and hotline services, and continue to find new and innovative ways of engaging the community through refugee focal points.

- In Cox’s Bazar, Bangladesh, UNHCR continues to support two Severe Acute Respiratory Infection (SARI) Isolation and Treatment Centres (ITC) and one Intensive Care Unit (ICU) providing services to refugee and host communities. Overall occupancy in the camp SARI-ITCs at the end of July was 53%, while the Intensive Care Unit was 84%. Patients and their families also continue to receive mental health support.
- In India, 25 oxygen concentrators and 60 hospital bed mattresses were donated to hospitals catering for refugees and asylum-seekers during the second and impending third wave of COVID-19. Thermometers, masks, hand sanitizer, dignity kits, and medical kits were also distributed to refugees and asylum seekers.
- In Thailand, UNHCR continued its outreach efforts amongst urban refugees and asylum-seekers in June and July. UNHCR used the Line application to broadcast information to refugee and asylum-seeker communities on the evolving COVID-19 situation and government restrictions to prevent transmission. UNHCR counselling services remain open and suspected COVID-19 cases are referred to our partner organization’s medical unit, which provides advice and referrals for medical treatment as well as home quarantine supplies to those who have tested positive or have symptoms.
- In Afghanistan, in response to the devastating impact of the pandemic, UNHCR continues to provide multisectoral assistance to IDPs, refugees, Afghan refugee returnees, and vulnerable host community households. This includes cash assistance for shelter and protection, the distribution of core relief items, sanitary materials, and family tents, and the operation of the Protection Hotline and Protection Mailbox. Some 17,450 individuals received cash for protection in June alone. There were no reports of inability to access protection and assistance services due to COVID-19 related restrictions, but movement restrictions caused by conflict remain a concern. To facilitate cash assistance delivery with limited access, UNHCR started negotiations with government counterparts to explore digital transfers.
- In Pakistan, UNHCR donated 600,000 face masks and ambulances to the Government of Balochistan to support its COVID-19 response, benefiting both Pakistanis and Afghans. UNHCR is also combatting misinformation regarding COVID-19 vaccines. Religious, ethnic, and community leaders have been engaged to convey messages including in refugee villages via loudspeaker announcements after prayer time for those who may not have access to phones or internet. UNHCR is also carrying out risk communication on social media platforms such as Twitter, Facebook, and Instagram.
- In Kazakhstan, Kyrgyzstan, Turkmenistan, Tajikistan, and Uzbekistan, UNHCR is providing cash assistance to persons of concern to mitigate the socio-economic effects of COVID-19 and ensure families have the necessary means to cover their most basic needs.



COVID-19 education and awareness raising being carried out at Mya Taung IDP site in Buthidaung Township, Northern Rakhine State, Myanmar. July 2021.

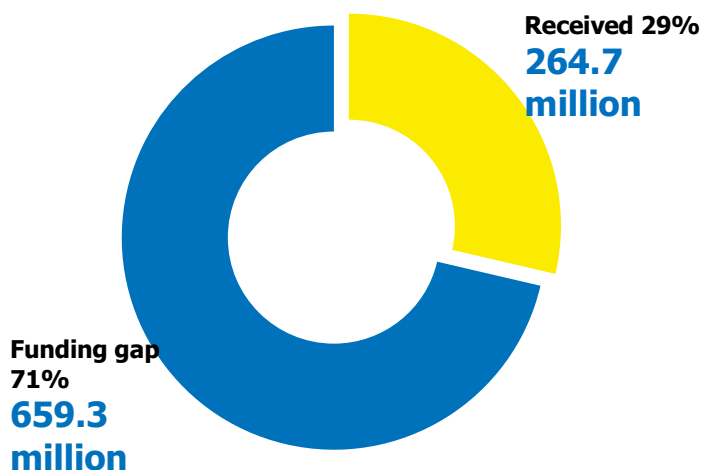
## FUNDING NEEDS

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 21 July 2021



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.

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