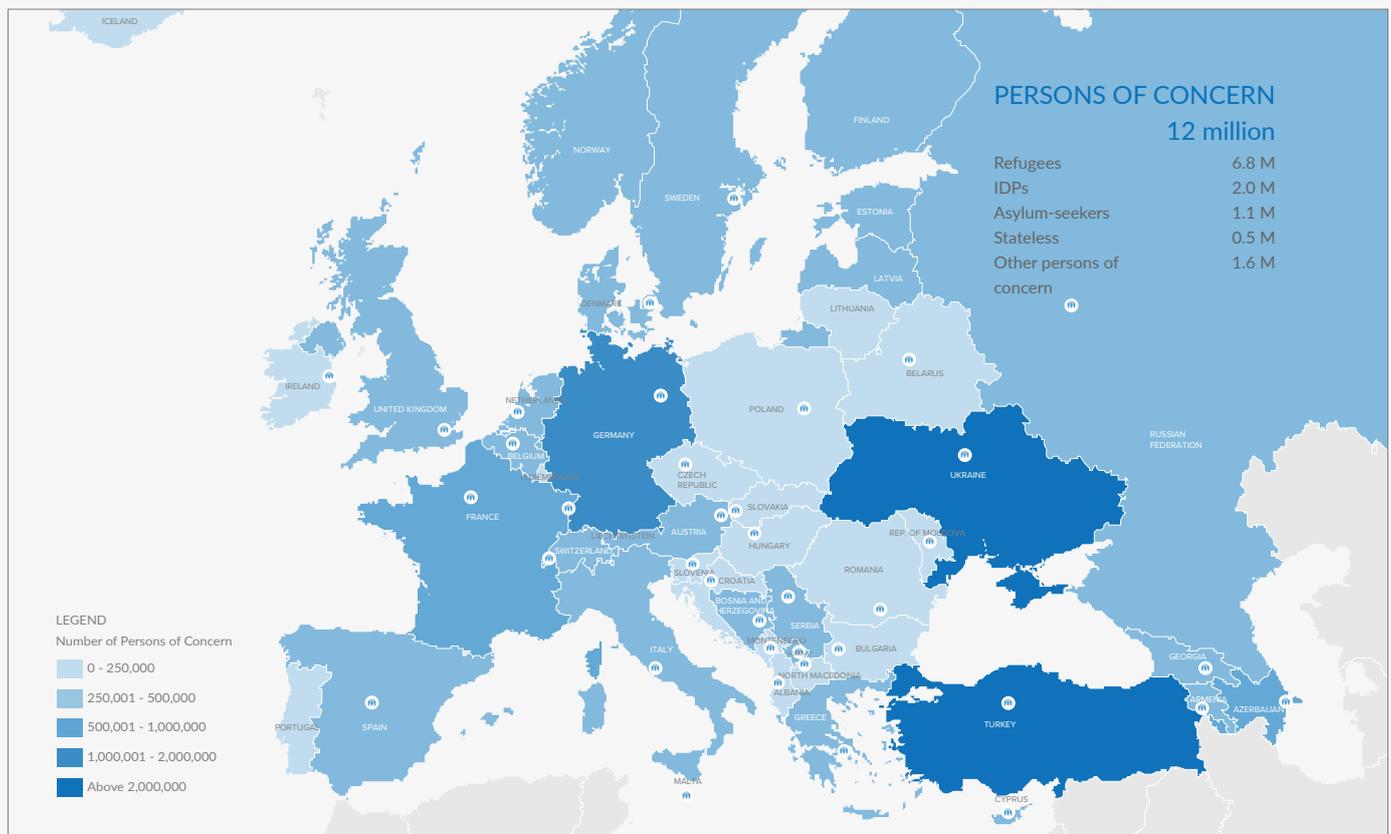


## COVID-19 EMERGENCY RESPONSE

Regional COVID-19 infection rates continued on a sharply upward trend this month, reaching a new daily record of 2 million cases detected in the region on 27 January (WHO). A number of countries extended [movement and travel restrictions](#), while others cautiously loosened them.

COVID-19 travel restrictions remain broadly protection-sensitive and in general include exceptions enabling [access to territory](#) by persons seeking international protection.

Movement restrictions continue to impact UNHCR staff in country offices. To date, all 36 offices are [partially teleworking](#).



Source: UNHCR 2021 [mid-year trends](#) and [annex table](#). Includes Serbia and Kosovo (S/RES/1244 (1999)). The boundaries and names shown, and the designations used on this map do not imply official endorsement or acceptance by the United Nations.

### OPERATIONAL CONTEXT

All 49 countries and one territory in the region have reported COVID-19 cases among the general population. To date, at least 40 countries and one territory have reported COVID-19 cases among persons of concern at some point, and many have in the meantime recovered. Any figures or estimates should be taken with caution due to varying approaches to testing, data segregation and reporting.

According to the [World Health Organization \(WHO\)](#), regional COVID-19 infection rates continued trending sharply upward this month, reaching a new daily record in the Europe and Central Asia region with some 2 million cases detected on 27 January. Authorities in a number of countries maintained the restrictions already in place or introduced new ones, such as expanding use of vaccination/recovery certificates and limiting social gatherings.

In many other countries, however, where pressure on health care systems was reported as stable, authorities cautiously loosened some restrictions, most commonly by reducing the duration of quarantine and isolation periods.

Some 63 per cent of countries in the region have vaccinated 50 per cent or more of their general population. **Malta, Portugal** and **Denmark** and had the highest share of fully vaccinated population: 84 per cent, 83 per cent and 81 per cent, respectively (according to WHO as of 1 February 2022).

At the end of January, all 36 UNHCR offices were in partial telework mode. Visits to reception centres are strictly regulated, and outbreaks in collective accommodation or detention centres continue to temporarily limit the ability of UNHCR and partners to access persons of concern in some countries.

## UNHCR AREAS OF INTERVENTION

### PROTECTION



To date, at least 40 countries and one territory have reported COVID-19 cases among persons of concern at some point, and many have in the meantime recovered.

**Quarantine measures upon arrival:** Testing and quarantine measures are in place in all countries registering significant numbers of sea arrivals. Some 3,000 persons arrived in **Italy** by sea in January (4,100 in December). Some 2,500 people were either quarantined or being transferred to quarantine facilities as of 30 January. With the exception of unaccompanied and separated children and some persons with specific needs, arrivals usually observe quarantine on offshore ferries. In January, there were delays in post-quarantine transfers from Lampedusa, Sardinia and Sicily to reception facilities elsewhere, due to a new requirement for proof of vaccination to access means of transport, including ferries. To overcome this, quarantine vessels were temporarily made to disembark in Reggio Calabria, where persons of concern were transferred to reception facilities by the military or police.

Among some 3,800 arrivals in **Spain** in January, 18 tested positive for COVID-19 in Almeria, Cadiz and Melilla and were isolated as per protocol.

In **Greece**, UNHCR and NGOs continued advocating with the authorities to ensure consistency in the quarantine period for new arrivals in line with European Centre for Disease Prevention and Control protocols and appropriate quarantine facilities for persons with specific needs. UNHCR also raised concerns with authorities over the legal status of quarantine areas in reception and identification centres, as the areas are not established formally.

**Reception conditions:** Lack of sufficient reception spaces, overcrowding and inadequate facilities in a number of locations continue to pose challenges for residents to follow physical distancing, hygiene and other preventive measures, compounding risks of contagion. Outbreaks in reception centres remain a concern, and typically result in restrictions of movements for some centre residents, with additional cases detected this month in centres in **Austria, Bosnia and Herzegovina, Bulgaria, Croatia, Greece, Ireland, Kosovo, Latvia, Malta, Romania** and **Serbia**.

In **Cyprus**, 146 positive cases were detected this month at the Pournara First Reception Centre, all of whom were transferred to two hotels for quarantine. Meanwhile, as of end January, there were no positive COVID-19 cases in the Limnes multipurpose centre, but 226 close contacts remained in isolation, after having been transferred there for that purpose from Pournara. In January, UNHCR successfully advocated with the authorities to ensure the release from isolation of those who had been isolated far beyond the mandatory 11-day period and intervened to identify the most vulnerable persons, including those with COVID-19 symptoms and other health issues, and ensure their transfer to appropriate facilities.

In the **Belarus** border area near Poland, some 780 refugees and migrants were accommodated in a

warehouse as of the end of January in substandard living conditions. There was no indication that COVID-19 preventive measures were in place and there is no information about the vaccination status of the people there.

### HEALTH

**Inclusion in vaccination plans:** Persons of concern are generally included in national vaccination plans on par with the general population. As a result, persons of concern have generally been receiving vaccination along with priority groups by age, profession or accommodation in collective shelters.

Vaccinations progressed in reception centres in **Bosnia and Herzegovina, Bulgaria, Croatia, Kosovo** and **Serbia**. In **Romania**, 25 refugees were vaccinated in January at the Emergency Transit Centre in Timisoara and a further eight expressed willingness to be vaccinated next month. Vaccination of persons of concern in private accommodations and centres also reportedly continued in **Armenia** and **Azerbaijan**, as well as in **Ukraine**, where, in addition, the authorities this month set up vaccination points at the Stanytsia Luhanska and Novotroitske Entry-Exit Checkpoints for persons crossing between government-controlled and non-government-controlled areas in the east of the country.

According to data shared by **Italy's** Ministry of Interior in January, 76 per cent of persons of concern accommodated in reception facilities throughout the country had received COVID-19 vaccination as of 20 December 2021. Vaccinations are also reportedly ongoing in some government quarantine facilities, but practices vary depending on location, with vaccinations not currently provided at the Crotona facility, for instance.

**Advocacy** for inclusion of all persons of concern in national COVID-19 response plans continues, where these are not equally applied to all population groups, for example in **Albania**, where asylum-seekers who have not yet received their national health service card remain unable to access vaccination, as well as in **Austria**, where subsidiary protection holders have only limited access to social welfare support and as a consequence cannot benefit from many COVID-19 support measures. Meanwhile, UNHCR's partner in **Slovenia** is advocating with national health authorities to ensure free rapid antigen tests for asylum-seekers, which are required to access public transportation and other services.

In a positive development, a new Joint Ministerial Decision in **Greece** stipulates that NGOs can now take part in the vaccination roll-out in collaboration with the Ministry of Health, which is expected to accelerate vaccination of refugees. In addition, following advocacy by UNHCR and others, the decision clarifies procedures for vaccination of undocumented persons, ensuring they will face no administrative or penal sanctions when seeking vaccination or vaccination certificates.



Quarantine measures upon arrival: Testing and quarantine measures are in place in all countries registering significant numbers of sea arrivals.



Reception conditions: Lack of sufficient reception spaces, overcrowding and inadequate facilities in a number of locations in Europe continue to pose challenges for residents to follow physical distancing, hygiene and other preventive measures, compounding risks of contagion.

## COMMUNICATION WITH COMMUNITIES

Communication with communities of concern on vaccination campaigns and the latest COVID-19 prevention measures continued across the region, making use of different channels, in line with the needs and preferences of persons of concern. This month, UNHCR and partners delivered information and awareness sessions in collective accommodation facilities on COVID-19 preventive measures and vaccination, for example at the Krnjača Asylum Centre in **Serbia**. UNHCR's partner in **Bosnia and Herzegovina** provided similar sessions in informal settlements, where it also conducted COVID-19 symptom screenings and referred suspected cases to health authorities. In **Azerbaijan**, UNHCR received multiple requests by phone in January from persons of concern seeking booster vaccination and referred them to the health authorities who administered the boosters free of charge.

## CASH-BASED AND IN-KIND ASSISTANCE

Where needed, UNHCR continues delivering COVID-19-related cash and in-kind support to persons of concern or authorities working with them. In **Turkey**, UNHCR's COVID-19 cash assistance top-up payment was completed on 15 January, reaching 71,839 COVID-19 cash beneficiary households and 4,070 cash-for-protection beneficiary households with a collection rate of 99 per cent. Meanwhile, UNHCR in **Ukraine** reimbursed the costs of COVID-19 medical treatment of 20 asylum-seekers in January.

This month, UNHCR in **Greece** delivered 36,185 core relief items and PPE to authorities supporting persons of concern on the islands and mainland, as well as 35,553 PPE, personal hygiene and dry food items to Emergency Support to Integration and Accommodation II (ESTIA II) programme partners to help refugees and asylum-seekers meet their basic needs. In **Azerbaijan**, UNHCR distributed over 400 hygiene kits, including masks, sanitizer and other items, to children from refugee and asylum-seeking families.

## UNHCR RESPONSE IN EUROPE

UNHCR's response to the COVID-19 situation is focused on:

- Continuing to **provide protection assistance**, including legal aid, support to registration, documentation, refugee status determination, protection counselling, prevention and response to gender-based violence, as well as child protection services;
- Supporting national authorities in setting up **preparedness and response plans**, including improving access to water and sanitation where possible and enhancing reception capacity post disembarkation by establishing quarantine and isolation areas in reception centres to better monitor and isolate confirmed or suspected COVID-19 cases, as necessary;
- Enhancing national and community-based **communication platforms** to interact with refugees and displaced communities and transmit quality information on hygiene, access to health care and other essential measures in a culturally appropriate manner and in relevant languages;
- Supporting authorities, in some operations, in identifying alternative **accommodation** or bringing current housing for asylum-seekers up to acceptable protection and hygiene standards;
- **Ensuring the inclusion** of persons of concern, host communities and service providers in the provision and distribution of adequate hygiene items;
- **Advocating continuously** to ensure the inclusion of persons of concern in national COVID-19 preparedness and response plans, including vaccination campaigns;
- **Providing additional one-off cash distributions to persons of concern**, to allow them to cope with the adverse economic impact of COVID-19 and related measures on their livelihoods and self-reliance.

## WORKING IN PARTNERSHIP

UNHCR supports governments' efforts to respond to the COVID-19 pandemic through coordination mechanisms and by working with WHO and other partners. In addition, UNHCR co-chairs with UNDP and IOM the Issue-Based Coalition on Large Movements of People, Displacement and Resilience, steering collective advocacy efforts on COVID-19-related issues affecting persons of concern.

## FINANCIAL INFORMATION

As of 2022, UNHCR's COVID-19-related needs have been streamlined into the Office's regular programme presented under the **Global Appeal**. UNHCR's financial requirements in Europe amount to USD 591.3 million and are 8 per cent covered, as of 2 February 2022.

The UNHCR Regional Bureau for Europe is grateful to donors who have provided generous and timely support to its work globally and in Europe.