

Regional Bureau for Europe

UPDATE #26

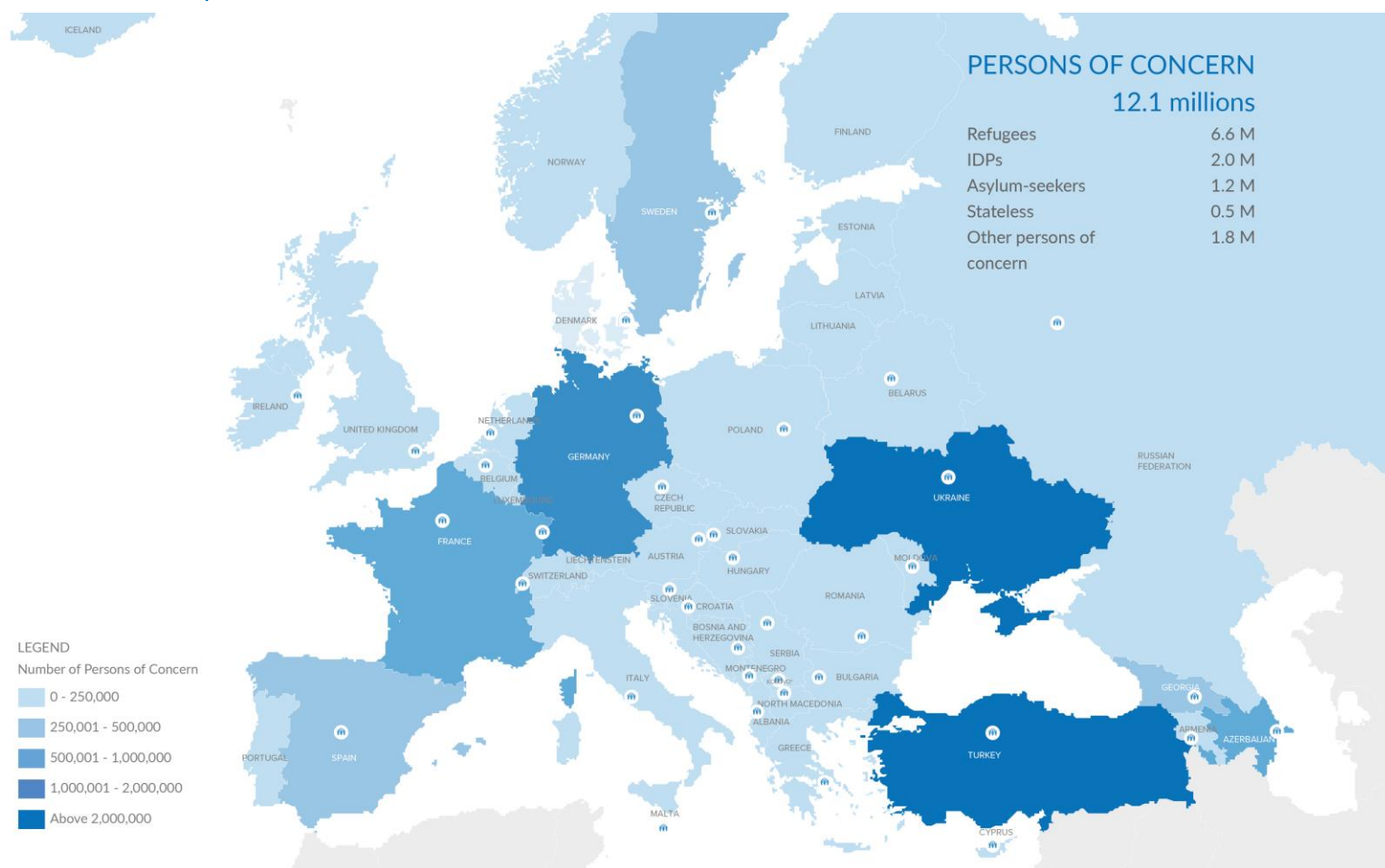
1 – 31 March 2021

Regional COVID-19 infection and death rates maintained an upward trend throughout the month. **Movement and travel restrictions** remained largely in place, with very few exceptions.

Despite tightened COVID-19 prevention measures limiting international travel due to the spread of new variants, **access to territory for persons of concern** was generally maintained.

Movement restrictions continue to impact UNHCR staff in country offices. To date, 35 offices are **partially teleworking** while two are on **full telework mode**.

Populations of Concern



SOURCE: UNHCR 2020 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, 39 countries have reported cases among persons of concern at some point, of which two first reported such cases during the month of March. Some of the concerned individuals have in the meantime recovered. However, any figures or estimates should be taken with caution due to varying approaches to testing, data segregation and reporting.
- According to WHO, infection and death rates in the European region followed an upward trend throughout the month despite movement restrictions and social distancing measures, attributed to a higher transmissibility of the new COVID-19 variants. Meanwhile, the roll out of voluntary COVID-19 vaccination programmes continued at a moderate pace across the region.
- European Council leaders adopted a [Statement](#) after their 25 March meeting to take stock of the COVID-19 epidemiological situation and vaccination status, committing to accelerating production, delivery and application of vaccines. In light of the challenges posed by new variants, EU leaders agreed to maintain restrictions in place for the time being and to redistribute 10 million vaccinations to five EU Member States by the end of June 2021. Bilateral solidarity efforts as well as the COVAX mechanisms resulted in the delivery of tens of thousands of doses during the month of March, with more forthcoming.
- COVID-19 infection rates climbed rapidly in both **Armenia** and **Azerbaijan**. Due to limited humanitarian access, little information is available on the COVID-19 situation in **Nagorno-Karabakh**. UNHCR continued to distribute leaflets on COVID-19 to people departing from the Yerevan bus station to Nagorno-Karabakh.
- As of 31 March, two UNHCR offices were on full telework mode, and 35 offices in partial telework mode. On-site visits to reception centres are strictly regulated, and outbreaks in collective accommodation or detention centres have temporarily limited the ability of UNHCR and partner staff to access persons of concern in some countries.

UNHCR Areas of Intervention



PROTECTION

- **Quarantine measures upon arrival:** Testing and quarantine measures are in place in all countries registering significant numbers of sea arrivals. In March, 2,386 individuals arrived in **Italy** by sea, of which at least 100 reportedly tested positive for COVID-19. Compared to February, both the number of arrivals and of people tested positive to COVID-19 were lower (3,995 and 226, respectively). UNHCR was able to follow up on the disembarkations of rescued people from NGO vessels and their transfer to quarantine ferries. Unaccompanied children and persons with specific needs were transferred to quarantine locations onshore. As of 31 March, 412 new arrivals were observing offshore quarantine on dedicated ferries. To prepare for higher numbers of arrivals, Italy has made available a sixth ferry to quarantine new arrivals offshore. However, more onshore quarantine spaces are needed, in particular for unaccompanied children, and UNHCR has recommended exploring options in order to prevent having children quarantining on vessels.
- Some 2,350 persons arrived in **Spain** in March, mostly by sea, over twice the number of arrivals in February (966). Of these, 49% of arrivals reached the Canary Islands and 30% the Andalusian coast. Several persons reportedly tested positive after arriving by sea in the Canary Islands but no official figures on COVID-19 test results for arrivals in the archipelago were made available to UNHCR. There were no reported COVID-19 cases among sea arrivals in Andalusia.
- **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, and compound risks of contagion. Outbreaks in centres continued as in February, resulting in restrictions of movement for centre residents. Some 27 persons of concern tested positive in a registration centre in **Lithuania** and were transferred to a medical facility, while the remaining residents observed a period of restricted movement

until 26 March. In Ceuta, **Spain**, a UNHCR monitoring visit to the main reception centre found that several staff and asylum-seekers had been placed in quarantine after being in contact with three employees who had tested positive, and movement in the centre was restricted. In **Cyprus**, conditions remained challenging at the Pournara First Reception Centre, which is hosting some 1,528 persons (60% over capacity). In a positive development, amid a broader relaxation of pandemic-related restrictions, all reception centres in Cyprus reopened on 8 March after their closure at the end of October 2020. Asylum-seekers are now allowed to exit and enter the centres in accordance with general public restrictions, subject to weekly negative rapid COVID-19 tests.

- Identification of COVID-19 cases in centres has also led to reduced access to residents by UNHCR and/or partners. In **Bosnia and Herzegovina**, two centres were placed under lockdown until further notice after over 40 people (residents and staff) tested positive in each centre. Due to the worsened epidemiological situation, UNHCR significantly reduced presence in all locations and visits will be undertaken only in case of urgent need. UNHCR and legal aid partners were able to provide remote counselling upon request of residents of some centres. Amid rising infection rates in March, authorities in **Bulgaria** have forbidden the entry of NGO staff to State-run centres, except for legal representatives and interpreters. Meanwhile, authorities in **Hungary** prohibited, for at least one month, visits to and NGO activities in childcare facilities, including an accommodation centre for unaccompanied children.
- **Internally Displaced Persons (IDPs):** In **Ukraine**, movements through Entry Exit Checkpoints (EECPs) remained restricted in March, with only two EECPs functioning: Stanytsia Luhanska (daily) and Novotroitske (twice a week). Over 52,800 crossings were registered through these two EECPs, a 36% increase compared to February. Free COVID-19 testing became available at the Stanytsia Luhanska EECP on 19 March (available in Novotroitske since February); by the end of the month, almost 1,900 people had been tested for free at both EECPs. People testing negative are exempted from self-isolating in the government-controlled area. While the expansion of free testing is a positive development, a challenge remains for those unable to install the phone app required by the Ukrainian authorities to displays test results, as they still have to isolate in designated observation facilities.



HEALTH

- **Inclusion in vaccination plans:** Persons of concern are generally included in national vaccination plans on a par with the general population. As a result, the first persons of concern having received the vaccination have been those in the first priority groups due to age, profession or accommodation in collective shelters. **Serbia began vaccinating** refugees, asylum-seekers and migrants sheltered in 19 government centres countrywide on 26 March, with some 330 having been vaccinated as of end March. Some ten persons of concern have been vaccinated in **Russia** with the assistance of UNHCR partners, and in **Malta**, an asylum-seeker with underlying conditions residing in the Initial Reception Centre informed UNHCR that he had received the first dose of the COVID-19 vaccine. Meanwhile, authorities in **Bulgaria** have confirmed that persons of concern will be included in the national vaccination plan, and **Slovakia's** Government approved a draft amendment that entitles subsidiary protection holders to vaccination, in addition to refugees.
- In **Greece**, authorities and members of the Health Working Group, including UNHCR, agreed on a phased strategy for vaccination rollout in all accommodation facilities, including Reception and Identification Centres (RICs) to facilitate identification, information and registration of people for vaccination.
- As of 29 March, 1,463 asylum-seekers and refugees have reportedly tested positive for COVID-19 since the onset of the pandemic: 650 on the mainland (48 more than last month) and 813 on the islands (15 more than last month). In the meantime, some of those having tested positive have recovered.



COMMUNICATION WITH COMMUNITIES

- Communication with communities of concern continued on COVID-19 vaccine campaigns across the region, making use of different channels, as preferred and most relied on by communities of concern. In **Spain**, UNHCR updated its [Help page portal section on COVID-19](#) with information for persons of concern about the national vaccination strategy, including access to vaccines and population priority groups. On 8 March, UNHCR in **Turkey** launched its revamped [Help page](#), which now includes new sections on COVID-19 vaccinations, gender-based violence and psychosocial support as well as on reporting sexual exploitation and abuse.
- Many UNHCR offices across the region have, jointly with partners and in support of government efforts, developed, translated and disseminated information through online sessions, social media and group messaging, and physical means where possible. UNHCR **Armenia** distributed some 1,000 informational posters and leaflets developed with WHO to raise awareness among host communities, including at NFI distribution points, collective shelters, community-based organizations and the Yerevan bus station where UNHCR monitors returns to Nagorno-Karabakh. In **Bulgaria**, UNHCR's partner has prepared and translated brochures on COVID-19 vaccination. In **Malta**, UNHCR developed visual information on COVID-19 vaccines in six languages for its online platforms, and shared with the relevant ministries for distribution in reception and detention centres. UNHCR in **Croatia** has translated into Arabic the Q&A section from the Government's online platform on vaccinations and registration instructions, and shared with refugees via social media and email. In **Serbia**, Roma Community Volunteers of a joint initiative by UNHCR, UNDP and UN Volunteers started an outreach campaign in Roma informal settlements to provide facemasks, information and encourage vaccination registration.
- As part of broader efforts to strengthen communication with communities of concern, UNHCR in **Bosnia and Herzegovina** rolled out the first batch of child and family-friendly tools this month to assist authorities in providing information on access to asylum. The tools include video explainer animations, posters and brochures with animated and non-animated iconography, developed through the EU-funded project "Addressing COVID-19 Challenges within the Migrant and Refugee Response in the Western Balkans."



CASH-BASED AND IN-KIND ASSISTANCE

- **Cash-based interventions** remain important where livelihoods of refugee and asylum-seeking families have been compromised due to the pandemic and lockdown. In **North Macedonia**, UNHCR and authorities have, as of end March, provided one-time cash assistance to 26 asylum-seekers since mid-February, with more to follow, as part of the regional EU-funded project "Addressing COVID-related Challenges within the Migrant and Refugee Response in the Western Balkans." In **Turkey**, UNHCR and the authorities continued providing one-off COVID-19 emergency cash assistance. As of 25 March, 88,779 out of 108,000 eligible households had collected their cash cards (compared to 87,000 as of end February).
- **In-kind:** UNHCR continued delivering COVID-19-related in-kind support, where needed, to persons of concern, host communities or authorities working with them. In **North Macedonia**, UNHCR provided donations of PPE, plexiglass protective barriers, IT equipment and bedding to the General Hospital in Gevgelija and the local Centre for Social Work, both of which have continuously offered services to refugees, asylum-seekers and migrants in the south of the country, including during the COVID-19 pandemic. In **Cyprus**, UNHCR procured and delivered 3,024 blankets for use at the Pournara First Reception Centre.
- In **Greece**, UNHCR delivered 268,000 PPEs including gloves, masks and disinfectants to authorities and actors supporting persons of concern on the islands and mainland. UNHCR also provided 24 portable WASH units (chemical toilets, showers and hand washing stations). Since mid-March 2020, UNHCR has provided some 92,000 core relief items, 231,000 hygiene items, and more than 752,000 PPEs to authorities to help mitigate COVID-19 spread.

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.

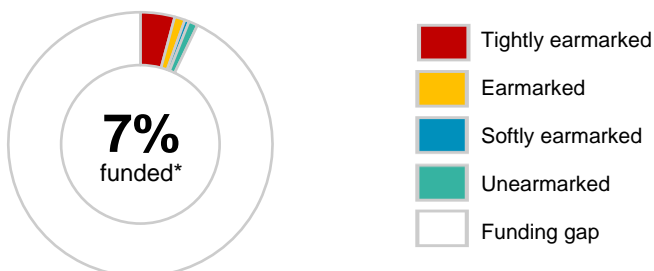
Working in partnership

- UNHCR supports governments' efforts to respond to the COVID-19 pandemic through existing coordination mechanisms and by working closely with WHO and other partners. In addition, UNHCR co-chairs together 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

- UNHCR released in December 2020 its **supplementary appeal for 2021 COVID response** seeking an additional USD 455 million. While most of the pandemic-related activities amounting to USD 477 million have been already mainstreamed and included in UNHCR's 2021 Global Appeal totalling USD 8.6 billion, the supplementary COVID-19 response focuses on exceptional socioeconomic and protection impacts related to COVID-19 as millions of refugees, internally displaced and stateless people fall into conditions of extreme hardship.
- The UNHCR Regional Bureau for Europe is grateful to donors who have provided generous and timely support for the Coronavirus Emergency Situation response globally, and in Europe in particular, including for non-COVID-19-related interventions, which are critical to ensure business continuity.

Requested for UNHCR's COVID-19 response globally in 2021: **USD 445 M**



Total contributed or pledged to UNHCR COVID-19 appeal as of 30 March: **USD 32,352,903 (7%)**

including: African Development Bank | European Union | China | Education cannot Wait | UN Covid-19 MPTF | Unilever (UK) | Swedish Postcode Lottery | Sunshine forever limited | UNHCR Insamlingsstiftelse | Japan Association for UNHCR | Private donors USA | Other private donors

Unearmarked contributions to UNHCR's 2021 global programme

Norway \$80M | Sweden \$66.9M | Netherlands \$36.1M | Denmark \$34.6M | Germany \$22.1M | Switzerland \$16.4M | Ireland \$12.5M | Private donors Spain \$13.3 million | Ireland \$12.5 M | Belgium \$11.9M

Contributed without restrictions on its use, unearmarked funding allows UNHCR critical flexibility in how best to reach refugees and other populations of concern who are in the greatest need and at the greatest risk. Where a donor has contribution \$10 million or more, the total amount of the contribution is shown.

Useful Links

[UNHCR's revised Coronavirus Emergency Appeal](#)

[UNHCR operations overview in Europe](#)

[COVID-19: UNHCR's response](#)

To subscribe to the mailing list of UNHCR's Regional Bureau for Europe, please click [here](#).



CONTACTS

Nicolas Brass, Senior External Engagement Coordinator, UNHCR Regional Bureau for Europe, brass@unhcr.org

Noelia Díaz, Reporting Officer, UNHCR Regional Bureau for Europe, diazno@unhcr.org