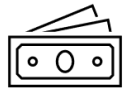




Pharmacist staff producing hand sanitizer in Al-Mukalla City ©IOM Yemen

**COVID-19 RESPONSE INNOVATIONS AND ACHIEVEMENTS**

**ACHIEVEMENT REPORT 2020**



**USD 91.3 M**

Requested for 2020

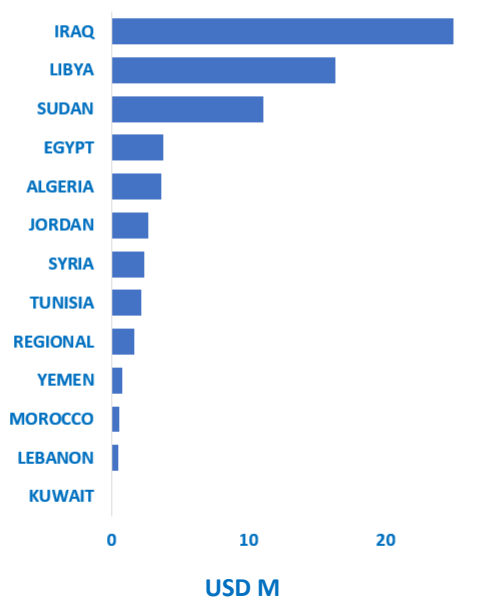
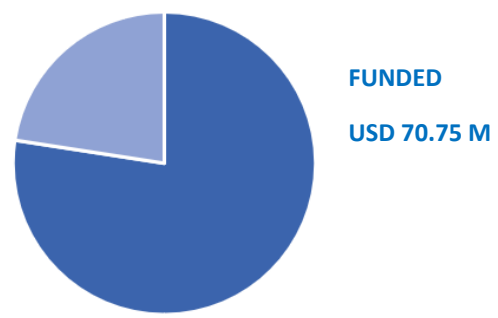
In response to the COVID-19 pandemic, **IOM's offices across the Middle East and North Africa (MENA) Region launched a multi-sectoral response in coordination with governments, other UN agencies, civil society organizations and implementing partners.**

As part of IOM's MENA Region Strategic Preparedness and Response Plan for 2020 (SRRP), **IOM implemented more than 70.75 million USD worth of programming, responding to both humanitarian needs and development agendas**, while supporting community cohesion and stability. Representing **more than 77 per cent of the total IOM appeal requested for 2020**, IOM used the funding received to respond to the dynamic and emergent needs of mobile populations in the region, including migrants, displaced populations and host communities, to improve preparedness for and response to the COVID-19 pandemic.

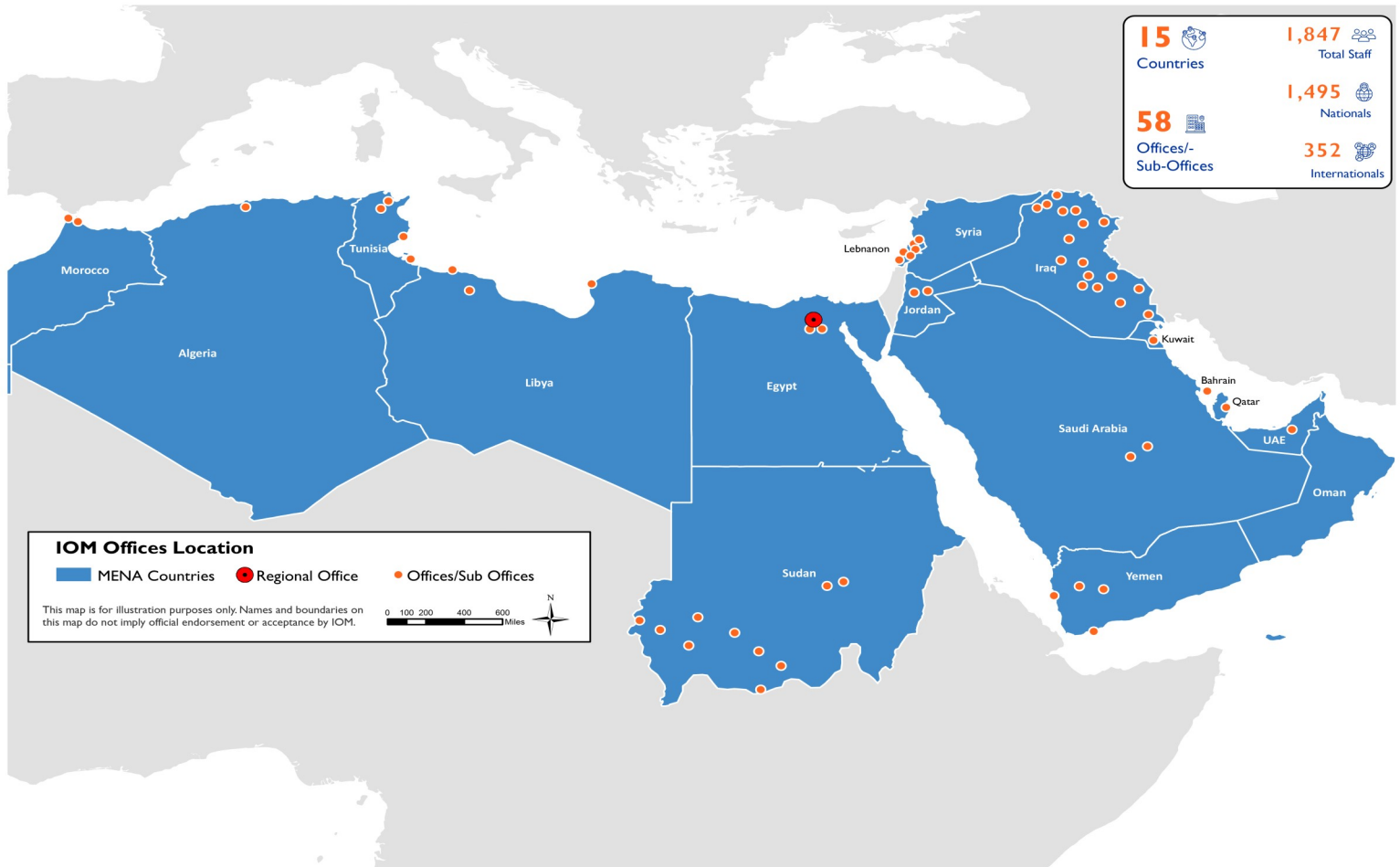
This funding received during 2020 covered a range of activities, including **pandemic preparedness, immediate health response, risk communication and community engagement, infection prevention and control, protection programming**, enhancing and mainstreaming **health response capacities at Points of Entry (PoE)**, voluntary **return and reintegration support** for stranded migrants, and activities to buffer the **socio-economic impact of COVID-19** on migrants and displaced communities.

IOM also worked with migrants, displaced populations and host communities, and implemented programming to **address increased stigmatization, discrimination and xenophobia** and promote universal health coverage to enhance national health response capacity, including testing, treatment, care and support, all of which contribute towards decreasing the risks posed by COVID-19.

This COVID-19 Innovations and Achievements Report highlights milestones and good practices from IOM's Regional and Country Offices across MENA as they supported people, communities, vulnerable groups and Governments.



# COVID-19 RESPONSE INNOVATIONS AND ACHIEVEMENTS



## GLOBAL HUMANITARIAN RESPONSE PLAN

In the MENA region, **Iraq, Libya, Sudan, Syria, Yemen** were included in the **Global Humanitarian Response Plan** coordinated by OCHA and released on 25 March 2020. In addition, **Lebanon, and Jordan** were also included through Regional Response Plans. As part of the 2020 COVID-19 response in these countries, **IOM reached refugees, internally displaced persons (IDPs) and migrants particularly vulnerable to the pandemic with vital COVID-19 assistance.**



**878,000** individuals reached with critical water, sanitation, and hygiene (WASH) support and services

**7.8 M** people reached with risk communication and community engagement activities (RCCE) activities



**63,000** people provided with critical livelihood support to mitigate the socio-economic impacts of COVID-19



COVID-19 awareness and assistance activities in Morocco ©IOM Morocco

## Coordination and Partnerships

From the outset of the pandemic, IOM stepped up its engagement with host Governments, other UN agencies and civil society actors for a streamlined COVID-19 response. **IOM's Country Offices in the region participated in National COVID-19 Taskforce/Inter-Agency Coordination Forums related to COVID-19, Risk Communication and Community Engagement Working Groups and Return Working Groups.** In a number of cases, IOM led or co-led these groups and actively guided inter-agency forums. In Egypt, IOM partnered with the World Health Organization (WHO), United Nations Population Fund (UNFPA), United Nations Children's Fund (UNICEF), and United Nations Entity for Gender Equality and the Empowerment of Women (UN Women), alongside the Ministry of Health to **conduct a comprehensive study of the knowledge, attitudes and perceptions of communities towards COVID-19, inclusive of migrant populations.** While in Sudan, IOM **co-lead the Task Force to coordinate preparedness and response efforts for COVID-19 in internally displaced persons (IDP) camps and settlements** in partnership with the United Nations High Commissioner for Refugees (UNHCR).

At the regional level, **IOM established and played a leading role in the Task Force on COVID-19 and Migration and Mobility**, in partnership with the WHO, the International Labour Organization and the United Nations Economic and Social Commission for West Asia. The **Task Force promoted a coordinated approach and close coordination on the issues surrounding COVID-19 and migration/mobility.**

## Tracking Mobility Impacts

Global and regional mobility dynamics have been severely impacted by the pandemic, as countries around the MENA implement policies to curb the spread of the virus. Suspended international travel and closed Points of Entry significantly hindered labor migration in a region that in 2019 had an international migrant stock of more than 65 million people and included six of the top ten countries of origin of the largest diaspora populations.<sup>1</sup> Ongoing travel restrictions continue to limit international migration, though many countries in the region have resumed limited entry for foreign nationals.

IOM in Iraq, through its Displacement Tracking Matrix (DTM), collected **information on mobility restrictions within Iraq as well as at Points of Entry (PoEs).** These restrictions include limitations on mobility across governorates, as well as on commercial and trading activity, curfews, government and residency office operating hours, and legal regulations. IOM's **DTM assessed multiple locations, including PoEs along land borders and maritime boundaries.** IOM used this data to generate **[Mobility Restriction Reports](#), every two weeks throughout 2020.**

Concurrently, IOM in Libya, through its DTM, conducted key informant interviews on a rolling basis to **assess the socio-economic impact of COVID-19 restrictions on vulnerable populations on the move.** DTM used the data to publish several rounds of the **Libya COVID-19 Mobility Tracking - Impact on Vulnerable Populations on the Move in Libya.** The [reports](#) provided **critical insight into the socio-economic impacts**

## IOM SUPPORTS A MULTI-COUNTRY RESPONSE TO THE SYRIAN REFUGEE CRISIS

Across the region, COVID-19 has stretched local resources and capacities, increasing barriers to livelihoods and basic essentials for refugee populations. In northwest Syria, IOM, through its implementing partners (IPs) on the ground, provided 167,307 IDPs with access to safe water in informal and planned camps, reception centers, and collective centers. IDPs also received hygiene kits, which included special COVID-19 provisions such as masks and/or increased quantities of soap and wet wipes. Of this total, 125,971 IDPs also received emergency water, sanitation and hygiene (WASH) services such as desludging, solid waste management, and care and maintenance of WASH facilities.

As part of its COVID-19 response, IOM provided personal protective equipment (PPE) kits to the field staff of its IPs, supported the health cluster in covering key PPE gaps in its northwest Syria COVID-19 response, constructed handwashing stations, and provided sanitization materials (backpack sprayers and chlorine solution) to IPs to be used in camps, reception centers and planned camps.

IOM also worked to improve risk mitigation measures at supported displacement sites and reception centers, including through support to improve spacing of shelters, establishment of isolation facilities, temperature screening services, and awareness outreach. To support those affected by the socio-economic impacts of COVID-19, IOM partners also provided cash for work opportunities and business support packages to small businesses in northwest Syria.

As part of the cross-border response and to protect refugee and host communities in **Lebanon**, IOM continues to support the Lebanese health system in its efforts to combat COVID-19, providing material supplies to an isolation centre which has recently established intensive care capacity. IOM's health division has provided training and supplies to Points of Entry (PoE) to enhance disease control and prevention.

In **Jordan**, IOM deployed Community Health Volunteers to refugee host communities to raise awareness and provide information on COVID-19 and risk mitigation measures, as well as non-communicable diseases and access to health services. IOM also deployed Mobile Medical Clinics to underserved and hard-to-reach refugee communities, where they provided primary health care services and medical consultations, as well as referrals to secondary/tertiary care.

In **Iraq**, IOM continued to raise awareness among Syrian refugees in and around camps regarding the COVID-19 virus and measures to mitigate transmission.

## Risk Communication and Community Engagement

Across the region, IOM reached more than **7.8 million individuals with critical risk communication and community outreach activities (RCCE) across countries including Algeria, Egypt, Iraq, Jordan, Kuwait, Lebanon, Libya, Morocco, Sudan, Syria (through IPs), Tunisia, Yemen.** These efforts aimed to mitigate the impact of the pandemic through a focus on COVID-19 prevention, stress management, mental health and psychosocial support (MHPSS), tackling stigma and a number of other key areas. The information, education and communication (IEC) materials created targeted a range of affected populations including migrants, displaced persons and host communities in a variety of different languages. IOM and its partners used different formats to disseminate information including leaflet, posters, SMS messages, Facebook, WhatsApp and radio.

In **Morocco**, IOM worked together with local partners to conduct **community-based surveillance within migrant communities.** Sensitization activities and mapping of suspected COVID-19 cases were conducted in coordination with community leaders. The training carried out on community-based surveillance is a good example of capacity-building with long-lasting impact. Evidence has shown the importance of working with peer-educators and community health workers to trigger behaviour change in terms of infectious diseases prevention and control. **The project contributed to the training of ten community sentinels, who were capacitated to sensitize broader community members on COVID-19 prevention and to identify potential cases for referral.** Peer educators were followed-up by the Moroccan Association of Family Planning to further respond to migrant's needs in terms of COVID-19 prevention and case management.



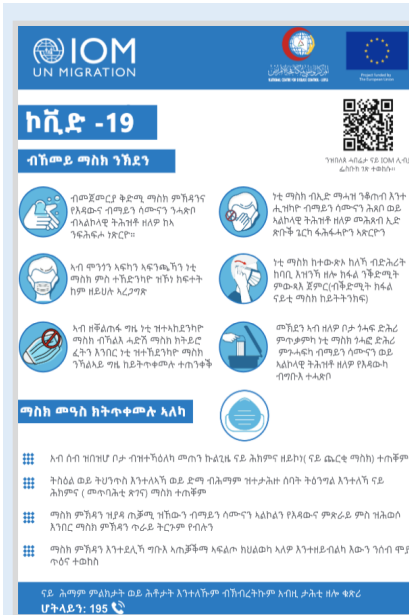
**75**

**Unique IEC materials produced for COVID-19, that are adapted to local languages and contextually appropriate**



**1,214**

**Trained Community Health Workers or RCCE mobilizers delivering risk communication activities**



**In Libya, IOM supported awareness-raising sessions on the prevention of COVID-19 in all its operation areas through medical and non-medical teams. IOM developed information, education and communication materials on COVID-19 precautionary measures in six languages (French, English, Arabic, Hausa, Sawahili and Tigrinya) to help target migrants' communities. Informational posters on COVID-19 and health measures, developed by IOM**

**were also posted at 20 different livelihood and capacity building training sites, as well as during social cohesion activities.**



## IOM USES GAMES TO ENGAGE DISPLACED CHILDREN

**IOM in Iraq distributed COVID-19 awareness-raising games to children living across multiple displacement sites.** The games feature illustrations that taught children how to stay safe during the pandemic. They also helped them understand the importance of social distancing and hand washing. Snakes and ladders, the classic board game, was redesigned to fit the context, with players climbing up the ladder and advance to victory if they manage to avoid the squares with the virus. IOM Iraq also developed a twist on a memory game, with players tasked with pairing 12 cards showing the correct protective measures with 12 cards showing the opposite, incorrect steps to take. Each deck also included a list of COVID-19 safety precautions. **In addition to games, colouring books, with illustrations of children following the correct protective measures, were also distributed to children in camps.**

# COVID-19 RESPONSE INNOVATIONS AND ACHIEVEMENTS

## Points of Entry (PoE)

To track and better understand how COVID-19 affected global mobility, the IOM Displacement Tracking Matrix (DTM) developed a global mobility database to monitor the status of mobility and visa restrictions at Points of Entry (PoEs), together with preparedness and response measures in place to prevent, protect against, control and provide a public health response in line with International Health Regulations (IHR).

In the MENA region, more than 225 international PoEs were monitored including 69 airports, 106 land border crossings (road or rail), 50 blue border crossings (sea, river or lake), and other locations including internal transit points and areas of interest. To support a comprehensive assessment of mobility dynamics across the MENA Region's international PoEs, IOM's Regional Office produced a [report](#) describing the findings from data collected between 23 April and 31 December 2020 (37 weeks).



310

PoE officials trained on COVID-19 including detection, notification, management and referral of ill travellers



22

PoEs supported to undertake COVID-19 preparedness and response measures

## IOM BUILDS PREPAREDNESS CAPACITIES AT POE

IOM conducted joint needs assessments at 22 major PoEs, together with governments, and provided the necessary support to ensure safe operation at the PoEs to respond to COVID-19 and other public health emergencies. This included updating or developing standard operating procedures (SoPs), training on these SoPs, developing necessary infrastructure, such as isolation rooms, and providing necessary personal protective equipment.

For example, in Iraq, IOM established SoPs at four PoEs, including developing and providing training on IHR and screening, providing essential equipment, and supporting the establishment of the first testing laboratory and electronic data management system at Erbil International Airport. In Jordan, IOM provided support to the Ministry of Health (MoH) and border authorities at seven PoEs. This includes upgrading the infrastructure and equipment, provision of information management system and capacity building to enable doctors and nurses and border staff of better protecting themselves and travelers against COVID-19.

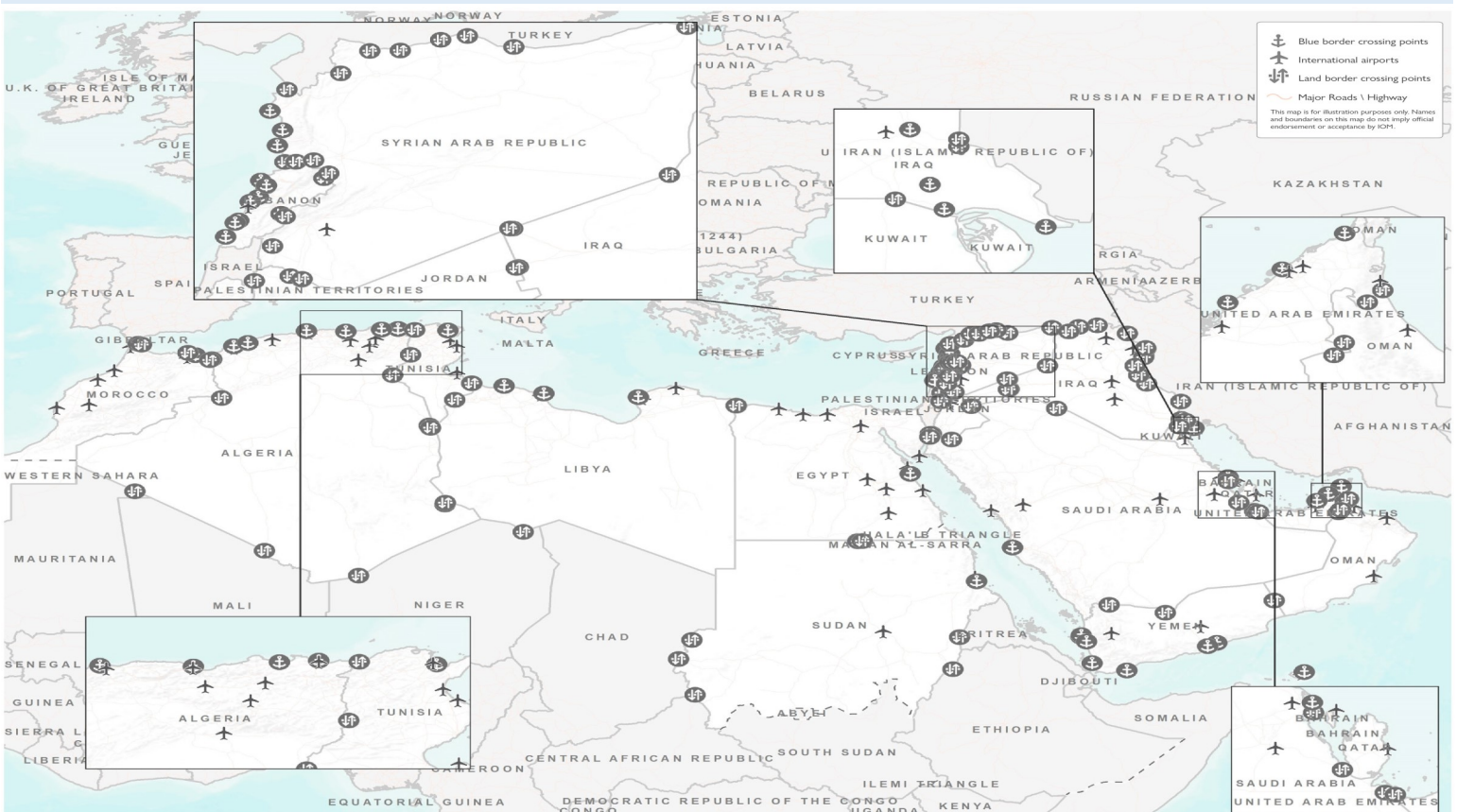


Figure 1: Overview of monitored International Airports, Land border crossing points and Blue border crossing points in MENA

# COVID-19 RESPONSE INNOVATIONS AND ACHIEVEMENTS

## RESTRICTIVE MEASURES AT COUNTRY LEVEL: APRIL 2020—DECEMBER 2020

**225** UNIQUE POINTS OF ENTRY MAPPED



**69** AIRPORTS



**50** BLUE BORDERS



**106** LAND BORDERS

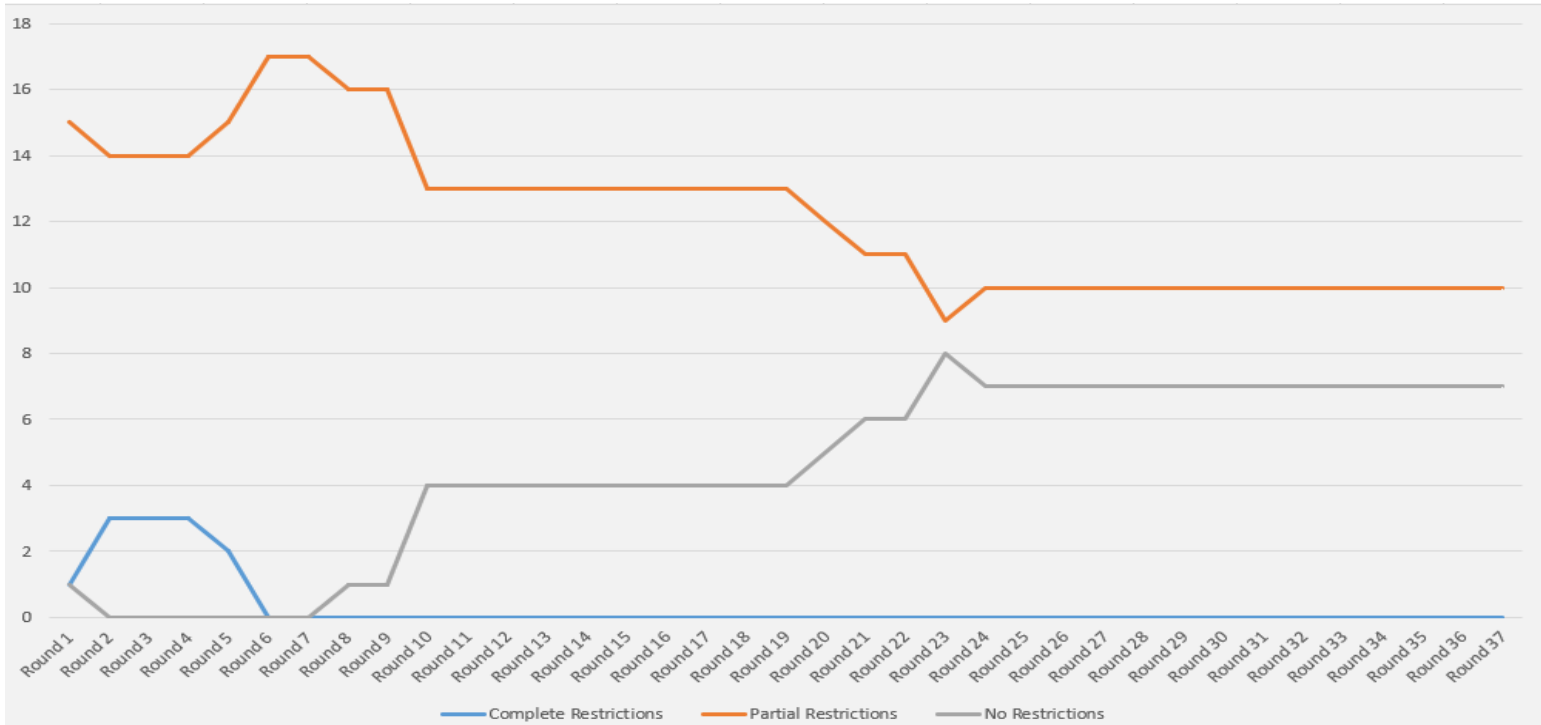


Figure 2: Measures at country level from 23 April to 31 December 2020

In November 2020, IOM collaborated with the Naif Arab University for Security Sciences (NAUSS) and the International Civil Aviation Organization (ICAO) to co-organize a **virtual workshop on Airport Security**. The two-day event was attended by more than 300 officials from the League of Arab States and select European Union Member States, with panelists from ICAO, IOM, the Saudi Civil Aviation, the French and German Governments, and Frontex. The workshop allowed for an exchange of experience and expertise on the implementation of traveller identity programs, including innovative border and identity management solutions, as well as airport security in times of the COVID-19 pandemic.

In December 2020, IOM in Egypt collaborated with the IOM Regional Office for MENA to organize a **Health, Border, and Mobility Management (HBMM) Workshop with national and international counterparts**. Offering a space for dialogue, the conference focused on the exchange of experiences related to the response to the COVID-19 pandemic from a migration and/or mobility perspective, including sessions on the HBMM framework, gender and COVID-19, and four national response plans from other countries from different regions.



IOM staff prepare for to receive 150 Sudanese nationals following their return from Egypt ©IOM Sudan

### IOM IN LIBYA SUPPORTS POE STAFF IN MEDICAL MONITORING

IOM Libya's medical teams provided support to health staff at Misrata International Airport and at Ras Jdir and Wazen land border crossing points to screen passengers returning to Libya. The screening procedures consisted of thermal screening, symptoms screening and the verification of pre-departure exit screening documents, while samples for PCR testing were collected. All travellers were provided with brief health awareness sessions at the airport. A total of 81,865 passengers were screened during 2020. Screening procedures were made possible by the donation and installation of thermal cameras by IOM in the airports of Benina and Misrata, and at the land border crossing points of Amsaad, Ras Jdir and Wazen.

# COVID-19 RESPONSE INNOVATIONS AND ACHIEVEMENTS



69

community health workers

supported to maintain

essential services restrictions



51

health facilities

supported to maintain

essential immunization services



3,865

telemedicine

consultations

provided

## Case Management and Continuation of Essential Services

COVID-19 impacted global supply chains, including medical supplies and medicines. Throughout 2020, IOM Country Offices worked to mitigate the impact of the pandemic on essential services and case management for vulnerable migrants and displaced persons, ensuring access to critical medical supplies and essential goods and services.

In **Jordan**, IOM medical teams ensured that refugees, migrants and Jordanian nationals living in remote areas continued to receive essential medicines. Additionally, they ensure that tuberculosis and HIV health services, including medications for patients, remained available despite lockdowns and movement restrictions. IOM supported the Ministry of Health (MoH) in responding to COVID-19 by strengthening laboratory capacity through provision of PCR COVID-19 testing equipment, kits and PPE for frontline health workers.

In **Lebanon**, IOM also made sure that TB and HIV patients continue to receive essential treatment while the country was experiencing multiple shocks from the COVID-19 pandemic and the explosion at the Port of Beirut.

A remote case management platform, **IOM Migrant Assistance Portal (IMAP)** was also piloted in Lebanon in 2020 and will be rolled out throughout the region particularly in the North Africa in 2021. It allows for safe and secure incoming and outgoing referrals for assistance and offers a self-registration and request for assistance by migrants themselves and it is complementary to the IOM's internal case management system.

In **Iraq**, IOM developed specific guidelines for the provision of MHPSS services through remote modalities, as a mean to ensure continuity of services in the context of movement restrictions and COVID-19 infection prevention and control measures. These guidelines improve the capacity of MHPSS staff to provide targeted MHPSS services to populations in need through a range of methods, and to better communicate with the targeted populations on services available during the pandemic. IOM Iraq subsequently supported other IOM missions to adapt and utilize the guidelines in their own context, and delivered remote trainings on the guidelines which have been rolled out in several missions.

Concurrently, IOM Yemen provided medical supplies and human resource support to 89 health facilities to ensure migrants and conflict affected communities had sustained access to primary and secondary health services.



IOM mobile medical clinic distributes necessary medication and awareness raising materials on COVID-19 to refugees ©IOM Jordan

The IOM team in Yemen provided access to emergency health assistance in displacement sites and along migratory routes in Aden, Lahj and Marib. Approximately 800,000 beneficiaries received services through this assistance in 2020. IOM also established one COVID-19 isolation and treatment centre.

In Libya, IOM provided primary and urgent health care assistance to migrants and IDPs through outreach teams in various locations across the country. Cases requiring specialized health care assistance were referred to medical centres, and all migrants undergoing routine health checks were screened for symptoms of COVID-19 during outreach services. A total of 54,222 consultations were provided to migrants, IDPs and host communities and 692 referrals were made to secondary and tertiary health care facilities. IOM also provided individual counselling services to migrants, including psychological first aid, and awareness sessions on COVID-19 that included MHPSS services and key messages on stress management. In support of this, IOM launched an MHPSS helpline to provide remote psychosocial support to persons who face mobility issues due to COVID-19.

## IOM IN IRAQ SUPPORTED INFECTION PREVENTION AND CONTROL MEASURES AND CONTINUITY OF VITAL HEALTH SERVICES

IOM Iraq filled important human resource shortages and covered needs for essential equipment and supplies to health care centers and hospitals serving a key population of vulnerable IDPs, returnees and host communities. In addition to supporting those facilities, IOM also supported the development and implementation of COVID-19 infection prevention and control measures, including screening and triage, based on international standards. These interventions allowed for the continuation of critical health services, as the Government's resources were redirected to mitigate the impact of the pandemic in all sectors of activity.

## Protection and Assistance to Stranded Migrants

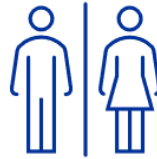
IOM assisted over **7,160 migrants** that were residing in the region to return to their countries of origin, including more than **600 unaccompanied and separated migrant children, victims of trafficking and urgent health cases**. In addition, more than **2,300 stranded migrants** were assisted by IOM to return to the **MENA region**, including **133 unaccompanied and separated children, victims of trafficking and medical cases**.

In **Algeria**, following the onset of the pandemic, **IOM opened a second transit center for migrants waiting for voluntary return, bringing the hosting capacity to 50 places**. A total of **123 beneficiaries** were hosted in the transit center during **COVID-19 in 2020**. IOM also organized **seven special voluntary return flights in coordination with the Algerian Government** that lifted all movement restrictions for IOM, opened the airspace and facilitated AVRR procedures. In total, **this enable 696 stranded migrants to return to their countries of origin**, including Mali, Guinea Conakry, Burkina Faso, Benin, Senegal and other countries in West Africa. IOM also supported individuals to reintegrate in the communities of origin.

The travel restrictions risk catalyzing irregular migration, while also making migrants vulnerable to human trafficking and smuggling, again affecting women and men differently. **IOM Egypt developed a Gender Checklist for COVID-19 Response at PoEs** to be utilized by management staff working at PoE for more gender-sensitive services. This support helped to better protect migrants, who continue to face a variety of different risks and needs. The check list include different gender-specific needs of border personnel, such as health and hygiene arrangements as well as different needs of personal gender-related security measures. The checklist has been shared to the other missions in the region and the world to be trained and utilized at the respective PoEs.

## IOM IN IRAQ DEVELOPS MPHSS GUIDELINES FOR REMOTE DELIVERY

IOM Iraq developed specific guidelines for the provision of MHPSS services through remote modalities, as a mean to ensure continuity of services in the context of movement restrictions and COVID-19 infection prevention and control measures. These guidelines improve the capacity of MHPSS staff to provide targeted MHPSS services to the populations in need through a range of methods, and to better communicate with the targeted populations on services available during the pandemic. IOM Iraq supported other IOM missions to adapt and utilize the guidelines in their own context, and delivered remote trainings on the guidelines which have been rolled out in several missions.



71

**Gender-based violence (GBV) services made available to mitigated the risk of GBV**



281,567

**Individuals provided with protection assistance and services as part of the COVID-19 response**

## IOM PROVIDES INFECTION PREVENTION AND CONTROL SUPPORT

Across the region, IOM also procured and distributed personal protective equipment (PPE) to some of the most vulnerable individuals, including migrants, and displaced persons. In **Tunisia**, IOM supported national authorities to fight the COVID-19 pandemic through the provision of more than 25,000 items of PPE equipment to the governorates of Medenine, Sfax and Tataouine. These are all areas with high concentrations of migrants. While in **Kuwait**, IOM provided 4,045 PPE kits to vulnerable migrant workers, many whom work as essential workers such as food industry and delivery, and continuing to work without sufficient access to PPEs. These items supported efforts to ensure individuals in risk were kept safe.



**IOM Kuwait distributed PPE kits to over four thousand foreign workers covering all 6 governorates in the State of Kuwait**





**63,000** people provided with critical livelihood support activities to mitigate the socio-economic impacts of COVID-19

## Socio-Economic Impact

While the outbreak of COVID-19 has affected entire communities, migrants and displaced populations, who often exhibit high levels of pre-existing vulnerabilities and face significant structural barriers have been some of the most severely affected. IOM's **MENA Regional Office collaborated with eight Country Offices in humanitarian and non-humanitarian settings** across the region, including Algeria, Egypt, Iraq, Jordan, Libya, Sudan, Tunisia and Yemen to **conduct the first comprehensive assessment of the pandemic's affects on the socio-economic outcomes of migrants and displaced populations in the region.**

The assessment was shaped around the five pillars of the UN Framework for the Immediate Socio-Economic Response to COVID-19, namely (1) Health services and systems during the crisis; (2) Access to social protection and basic services; (3) Economic response and recovery; (4) Macroeconomic response and multilateral collaboration; (5) Social cohesion and community resilience. IOM also added a sixth pillar on mobility to provide insight into the mobility dimensions of the pandemic.

For each pillar, a number of key indicators were identified, focusing on the immediate impact of COVID-19 on migrants, displaced populations and communities alongside relevant policy and legal frameworks to respond to these evolving trends. **The final report, [Assessing the Socio-Economic Impact of COVID-19 on Migrants and Displaced Populations in the MENA Region](#), was completed and published in April 2021.**

Separately, **IOM in Libya published "A Long Way from Home - Migrants' housing conditions in Libya"**, in November 2020. The findings of the survey confirm that employment and economic status, migration intentions as well as gender are factors that appear to lead to increased difficulty in accessing and securing adequate housing.

Concurrent to research that strengthened the evidence base for a more inclusive recovery, IOM across the region also implemented a range of programming that mitigated the socio-economic impact of COVID-19 on migrants and displaced populations. **In Yemen, IOM engaged local communities and IDP women to produce more than 196,246 face masks and 10,000 bottles of hand sanitizer.** This supported income generation while also improving protection in communities.

**IOM in Tunisia provided emergency support for livelihood such as food and vouchers** to vulnerable migrants impacted by COVID

## IOM CONTRIBUTES TO SEVEN NATIONAL SOCIO-ECONOMIC RESPONSE PLAN FRAMEWORKS FOR UNITED NATIONS' COUNTRY TEAMS

As the pandemic unfolded, UN Country Teams (UNCTs) across the region needed to quickly respond to the significant and evolving socio-economic impacts of COVID-19 on affected populations. The UNCTs were responsible for generating a comprehensive and cohesive policy framework to guide UN agencies and partners to develop and implement socio-economic response plans (SERPs). These plans were designed to support an integrated and comprehensive response that leveraged the unique value of partners based on their mandates and ensures that no one is left behind in the response.

Country-level SERPs reflected ongoing humanitarian and/or development planning and frameworks that were already operational, and were mainly framed around the five pillars of the UN Framework for the Immediate Socio-Economic Response to COVID-19.

The IOM MENA Regional Office and Country Offices collaborated to ensure migration, mobility and displacement dynamics were effectively integrated across the five pillars in Bahrain, Egypt, Jordan, Morocco, Sudan, Tunisia and Yemen. The SERPs and their proposed activities will continue to guide UNCTs and IOM into 2021.

## ASSESSING THE SOCIO-ECONOMIC IMPACT OF COVID-19 ON MIGRANTS AND DISPLACED POPULATIONS IN THE MENA REGION



**IOM** CAIRO REGIONAL OFFICE  
UN MIGRATION | FOR THE MIDDLE EAST AND NORTH AFRICA

-19 socio-economic impact, including those migrants who were rescued at sea. **In 2020, 18,279 migrants received different types of assistances, including livelihoods, medical, legal, psychosocial assistance in Tunisia.**



IOM medical escorts provide passengers with medical assistance following a repatriation flight of Sudanese nationals stranded in India @IOM Sudan

Pro-

## IOM MIDDLE EAST AND NORTH AFRICA ACTIVITIES ARE GENEROUSLY FUNDED BY



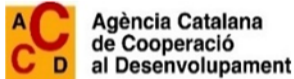
From the People of Japan



Schweizerische Eidgenossenschaft  
Confédération suisse  
Confederazione Svizzera  
Confederaziun svizra



UN COVID-19 Response and Recovery MPTF



For more information, please contact [ROCAiro@iom.int](mailto:ROCAiro@iom.int)

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IOM is committed to the principle that humane and orderly migration benefits migrants and society. As an intergovernmental organization, IOM acts with its partners in the international community to: assist in the meeting of operational challenges of migration; advance understanding of migration issues; encourage social and economic development through migration; and uphold the human dignity and well-being of migrants.

All maps included in this document are for illustration purposes only. Names and boundaries on the maps do not imply official endorsement or acceptance by IOM. All information is the best available at the time when the map was produced.

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