

Including migrants and displaced persons in prevention and response activities related to the COVID-19 pandemic

Guidelines for National Societies in the Sahel – version 2.0 (April 2020) – English version

Reminder

The RCRC Movement approach on migration is strictly humanitarian and focuses on the needs, vulnerabilities and potentials of migrants, irrespective of their legal status, type, or category. National Societies are under no obligation, as auxiliaries to public authorities or otherwise, to have a role in coercive acts or migration control (such as expulsions, deportations, etc.) – *IFRC Policy on Migration (2009)*.

In line with the IFRC's 2009 Policy on Migration, 'migrants' are persons who leave or flee their habitual residence to go to new places – usually abroad – to seek opportunities or safer and better prospects. This includes migrant workers, stateless migrants, migrants deemed irregular by public authorities, as well as asylum seekers and refugees. – *IFRC Global Strategy on Migration 2018 – 2022*.

The RCRC Movement serves all those affected by internal displacement — the people actually displaced, host communities and others — and make decisions according to the most pressing needs for humanitarian services, including health services – *Movement Policy on Internal Displacement (2009)*.

Context : Migration and Displacement in the Sahel region

- The Sahel region has always be a place of intense human mobility. Today, it is facing complex migration and displacement dynamics.
- The majority of migratory movements (80%-85%) remain at the regional level. Generally, people migrate and flee for different reasons, notably to improve their socio-economic condition, to reunite with their families, to access international protection, and as a result of climate change, conflict and other situations of violence.
- The ECOWAS legal framework on free movement facilitates cross-border exchanges and movements. At the same time, land borders in the Sahel region are porous and difficult to control.
- Despite considerable media attention, North-bound movements significantly decreased in the years 2018-2019. Risks along migration routes nevertheless increased, as a result of stricter migration policies adopted by States and of a worsening security environment.
- Returns have increased during 2019. Return movements differ considerably when it comes to their legal nature and humanitarian implications. These movements comprise forced return, deportations, humanitarian evacuations, spontaneous returns and assisted voluntary return programmes.
- The region is facing growing insecurity and internal displacement concerns, particularly in Northern Mali, in Burkina Faso, and around the Lake Chad basin. The IDP population in Burkina Faso increased from 47,029 to more than 600,000 in only twelve months (Jan-Dec 2019).

- Many migrants in the region find themselves in irregular situations and at risk of statelessness.
- Western Europe hosts a high number of individuals from the Sahel region, notably in countries that are facing the highest COVID-19 impact, such as Italy, France, Spain, the UK and Germany.
- On 17 March 2020, IOM and UNHCR announced the temporary suspension of refugees' resettlement travels, due to the COVID-19 pandemic.

Risk factors for migrants and displaced persons

- In the Sahel, migrants generally face numerous barriers in accessing basic services, including health services. These obstacles are generally of a socio-cultural or financial nature, but they can also entail legal barriers and discrimination risks.
- IDPs face a similarly limited access to essential products and services, including healthcare. They can expose themselves to collateral risks in attempting to meet essential needs.
- Besides the above-mentioned obstacles and threats, migrants and IDPs could face a higher risk due to the COVID-19 pandemic.
- Risk factors include:
 - Being in an irregular situation may result in **formal and informal barriers** in accessing healthcare, protection services and psychosocial support, or lead to a reticence in accessing services for fear of being arrested or deported;
 - Due to confinement and quarantine measures, **social support networks and social relations become more limited**;
 - **Lack of knowledge or understanding** on services and procedures required to access health services and other available services;
 - **Quarantined** migrants and migrants impacted by border closure may not be able to return home or continue their journey. They become isolated and may lose family contact. They may feel distressed, disoriented, fearful and uncertain about their future;
 - Due to the **closure of borders**, migrants along migratory routes may find themselves stranded and without access to information and services, undetected by authorities and humanitarian actors;
 - Border closure may limit access to international protection and expose refugees to the **risk of refoulement**¹;
 - Migrants and IDPs risk being increasingly **stigmatised and blamed** for contributing to the spread of COVID-19.
 - Migrants and IDPs may not be prioritised in the national health response;
 - National health authorities may not know where and how to reach migrants and IDPs;
 - **Poor living and work conditions**, including low food security levels and overcrowded accommodations/shelters with inadequate water and sanitation systems;
 - **Financial obstacles** preventing access to the health system and health assistance, including lack of medical insurance;
 - **Socio-cultural and linguistic barriers** in accessing information and humanitarian services;

¹ According to the *1951 Refugee Convention*: "No Contracting State shall expel or return ("refouler") a refugee in any manner whatsoever to the frontiers of territories where his life or freedom would be threatened on account of his race, religion, nationality, membership of a particular social group or political opinion."

- **Loss of livelihoods** as a consequence of COVID-19 preventive measures, generating community tensions and exposing migrants and IDPs to the risk of being exploited;
 - The COVID-19 crisis may exacerbate pre-existing **human trafficking** trends and generate new ones;
 - **Children on the move** are more exposed to the immediate and secondary effects of COVID-19 – particularly unaccompanied and separated children. Migrant children often live in cramped conditions with limited access to water, sanitation and hygiene, and can be hardest to reach with accurate information in a language they understand. Confinement measures and the interruption in the provision of child protection services aggravate their vulnerability;
 - Quarantine and confinement increase the risk of **sexual and gender-based violence**, including domestic violence and intimate partner violence.
- The family members of migrants and IDPs in locations of origin may need assistance and **RFL services**. They may be concerned about the whereabouts and the needs of their relatives.

How can National Societies assist migrants and their families?

National Societies should take specific/targeted measures to ensure that migrants and IDPs are included in the prevention and response activities related to the COVID-19 pandemic.

- National Societies can provide aid to vulnerable migrants whatever their legal status – at any point during their migration experience, i.e. before departure, in transit, at their destination, and upon return.
- All activities should be based on an analysis of the risks and needs of migrant and IDP communities – either through a stand-alone evaluation or integrated into a general assessment as part of ongoing response plans (appeals, DREFs, contingency plans, etc.).
- Activities supporting migrants and IDPs should consider their age, gender and diversity, as well as socio-cultural norms and languages (including the literacy level).
- National societies can support the families and communities of migrants who have stayed behind in countries of origin and may also have humanitarian needs.
- National Societies can support communities who host migrants, refugees and IDPs.
- In some cases, it is important that National Societies engage in humanitarian diplomacy initiatives to promote the access of all displaced populations and migrants – whatever their status – to information and services provided by authorities and other organisations.
- Working in close coordination with national authorities and humanitarian actors and update referral networks, with the goal of ensuring access to services for vulnerable populations.
- National Societies should integrate migrants and displaced people as staff and volunteers.
- National Societies can share experiences, challenges and lessons learned with within in the region (e.g. through the Sahel+ network) and globally (e.g. through the Global Migration Task Force).

Key activity: Accessible and reliable information for migrants and IDPs

- The provision of reliable, trustworthy and accessible information for migrants is a vital activity that many National Societies can undertake to reduce the risks of COVID-19.

- This information may be delivered via digital and social media platforms, or through targeted distribution using community-based mechanisms like community or religious places and community safe spaces, including in sites and camps hosting refugees and IDPs.
- To cater for language barriers and or literacy levels, more pictorial (infographics or cartoons) or audio messages may be provided.
- Communication activities should be adapted to children and take into considerations the specific needs of persons with vision and hearing impairments.

IFRC resources: COVID-19 information

- The IFRC has produced key messages on reducing the risk of coronavirus infection. These include messages on reducing the risk of infection, as well as specific messages on “when to wear a mask”, “how to stay healthy while travelling” and “how to practice food safety”.
- To help reach migrant populations, these messages are available in many different languages, including French, English, Portuguese and Arabic.
- These messages are available [here](#).
- These resources will be continuously updated as more translations are produced
- Please note that these are generic messages, so they may not fit specific country contexts.
- National Societies should check the official messages from their Ministry of Health before sharing these messages.

National Ministry of Health resources: Information on COVID-19

- It is possible in some cases that the Health Ministry or other national authorities have elaborated messages in languages used by migrants.
- The websites of relevant national authorities, ECOWAS and WHO can be found at the end of this document.

Key activity : Addressing social stigma associated with COVID-19

- Awareness of the risks that migrants and displaced people may face must be balanced with ensuring that xenophobic attitudes and social stigma of people from certain nationalities being associated with COVID-19 are not promoted.
- People may be labelled, stereotyped, separated, and/or experience loss of status and discrimination because of an affiliation with COVID-19.
- This can negatively affect those with a disease themselves, as well as their caregivers, family, friends and communities.

Key activity: community Engagement and Accountability (CEA)

- In any communication and engagement with migrants and displaced people, National Societies should document any questions and concerns that arise.
- National Societies can use this feedback to tailor communication and activities.
- Guidelines for community workers and volunteers are available [here](#).

Key activity: restoring family links (RFL)

- RFL activities are essential in crisis contexts.
- To limit health risks during RFL activities, volunteers and staff should follow the guidance of their National Society medical focal point and of the ICRC Delegation.

Key activity: Coping with stress associated with COVID-19 and rebuilding hope

- Provide migrants and displaced people with psycho-social support (PSS) to help them to cope with stress related to the COVID-19 outbreak.
- Provide robust facts about COVID-19 to reduce fear and panic.
- Listen to and support migrants and displaced people who may be quarantined isolated or hospitalised.
- Mobilise people who have recovered from COVID-19 to act as community ambassadors in risk communication and to build social trust and hope.
- Promote community-led awareness activities through social, cultural and religious systems.
- Provide practical information on how to access essential services (i.e. where to get food, treatment, whom to call etc.) for individuals affected by COVID-19.

Key activity: humanitarian diplomacy

- National Societies may notice barriers that migrants and displaced people face which prevent them from receiving the help they need. These could include:
 - Reluctance from authorities to share information on COVID-19, for fear of creating panic.
 - Lack of willingness (or legal barriers) to helping undocumented or irregular migrants.
- In such cases, National Societies may engage in humanitarian diplomacy to “persuade decision makers and opinion leaders to act, at all times, in the interests of vulnerable people, and with full respect for fundamental humanitarian principles”.

For more information, please refer to the following documents:

- **IFRC and RCRC Movement policies and strategies:**
 - [IFRC Policy on Migration \(2009\)](#)
 - [Movement Policy on Internal Displacement \(2009\)](#)
 - [IFRC Humanitarian Diplomacy Policy \(2009\)](#)
 - [IFRC Global Strategy on Migration \(2018 – 2022\)](#)
- **IFRC and ICRC resources on COVID-19:**
 - [Guidance on Safe and Remote Risk Communication and Community Engagement during COVID-19](#)
 - [COVID-19 Risk Communication and Community Engagement Strategy for Africa](#)
 - [Library of CEA resources on COVID-19](#)
 - [COVID-19 Radio Show Guide and Running Order](#)
 - [COVID-19 : Guidance for Social Mobilisers and Volunteers](#)
 - [IFRC Messages on COVID-19](#)
 - [Prevention and Control of COVID-19 in Schools \(IFRC, UNICEF and WHO\)](#)
 - [IFRC Global Appeal](#)
 - [Public Note on the Protection of Migrants during COVID-19 \(ICRC\)](#)
- **Other documents:**
 - [Guidelines on Protecting Migrants during Conflicts and Natural Disasters \(IOM-MICIC, 2016\)](#)
 - [UNICEF Quick Tips on COVID-19 and Children on the Move](#)
 - [UNHCR Perspective on Access to Health Services for Refugees](#)
- **Useful links:**
 - [Burkina Faso : Ministère de la Santé](#)
 - [Cabo Verde : Ministério da Saúde](#)
 - [Gambia : Ministry of Health](#)

- [Guinée Bissau : Ministério da Saúde Pública](#)
- [Guinée Conakry : Ministère de la Santé](#)
- [Mali : Ministère de la Santé et des Affaires Sociales](#)
- [Mauritanie : Ministère de la Santé](#)
- [Niger : Communiqués du Conseil des Ministres](#)
- [Sénégal : Ministère de la Santé et de l'Action Sociale](#)
- [Tchad : Ministère de la Santé Publique](#)
- [ECOWAS Statement on COVID-19](#)
- [WHO Q&A on Coronavirus](#)

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