

# Reporting Period: 1 - 31 August 2020

### **Regional Highlights**

- As the COVID-19 pandemic accelerates globally, WHO
  urges countries to focus on 4 priorities: prevent amplifying
  events; empower people to protect themselves; focus on
  public health basics; and protect the vulnerable, including
  older people and those with underlying conditions.
- Major challenges in mitigating the pandemic include inadequate risk communications and community engagement; limited national capacities to isolate, quarantine and trace; and, limited adherence to social and physical distancing.
- In the region, some countries are easing previous lockdown measures, and new infections are seeing a steep increase even in countries with previously low rates such as Tunisia and Jordan. Lebanon is experiencing a steady and exponential increase in new infections after the devastating blasts at the Beirut port on 4 August. Iraq is of particular concern.
- Containment efforts and shutting down large sectors of the economy have triggered a global economic crisis, which has the potential to further destabilize the region. The UN Secretary-General's policy brief on the impact of COVID-19 on the Arab region highlights the likely devastating regional effects of the pandemic.
- Some population groups will be especially hard hit, including women, migrants and the more than 62 million people already in need of humanitarian assistance prior to COVID-19. Those caught in armed conflict face particular challenges.
- The pandemic response is an opportunity to address long-standing conflicts and structural weaknesses.
   Continued international support to countries in the region is necessary to weather this crisis and build back better.
- UNFPA is working to ensure the continuity of sexual and reproductive health services and gender-based violence prevention and response, to protect health workers, to engage communities and to reduce the spread of COVID-19 and its negative socio-economic impact.

# **Arab States Region**

**COVID-19**Situation Report No. 7

**United Nations Population Fund** 



### **Situation in Numbers**



1,313,685 Confirmed COVID-19 Cases



**24,151** COVID-19 Deaths

Source: WHO 8 September, 2020

# **Key Population Groups**



8 M Pregnant Women



107 M Women of Reproductive Age

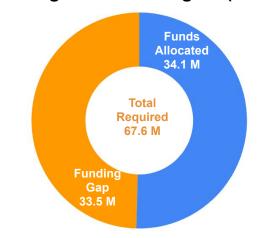


114 M Young People (age 10-24)



21 M Older Persons (age 65+)

# **Funding Status for Region (US\$)**



### **Regional Response Summary**

### **Coordination and Advocacy**

The UNFPA Arab States Regional Office participates in the WHO regional crisis management group and sub-working groups (Risk communication and community engagement; Humanitarian settings and displaced populations; and Supplies). UNFPA co-chairs the regional inter-agency gender theme group and its GBV COVID-19 sub-working group ensuring integration of GBV within health. UNFPA and country offices support governments and work with UN agencies and national and international partners to minimize disruption to life-saving sexual and reproductive health (SRH) and gender-based violence (GBV) services, provide personal protective equipment (PPE) and support safety of patients and health workers through infection prevention and control (IPC). UNFPA is also using its co-leadership and membership in some of the regional issues-based coalitions (IBCs) to address the impact of COVID-19 on health, provision of basic social services, protection and data, focusing on women and girls.

### **Young People and COVID-19**

COVID-19 has caused a **triple shock** for young people, including disruption of education and training, job loss and increased obstacles to find work. UNFPA, jointly with The Arab Coalition for Adolescent Health and Medicine (ACAHM), has initiated a **qualitative study on the impact of the COVID-19 Pandemic on Adolescents** in the Arab States Region.

Adolescent girls and young women are often the most affected by the lack of access to SRH and GBV services as governments often do not consider SRH and GBV interventions as priorities. More emphasis needs to be put on prioritizing the needs of what are considered "life-saving services": SRH services and menstrual hygiene materials for women and girls; expanding and adapting protection and GBV services; and, increasing the investment in mental health and psychosocial services, especially in conflict settings.

Following country-specific socio-economic impact assessments with an emphasis on **SRH**, **GBV**, and **young people** UNFPA is now engaged in positioning these same priorities within the country-specific medium-term UN socio-economic response plans. UNFPA's focus is on health, social protection and basic social services, and gender considerations to ensure no one is being left behind especially those most vulnerable, i.e. persons with disabilities, older persons, refugees, internally displaced persons and migrants.

On the occasion of International Youth Day on 12 August, UNFPA across the region celebrated youth initiatives highlighting the role of youth as active partners. UNFPA **Algeria**, in a webinar with youth volunteers and civil society organizations (CSOs) presented the Regional Youth Strategy and discussed youth involvement in the COVID-19 health response and their support to vulnerable people as Algerian youth have been actively engaged within their communities during this pandemic. UNFPA **Morocco** celebrated the International Youth Day, with the Ministry of Youth, Culture and Sports and UNICEF and launched the campaign "For an engaged and civic youth" to promote the participation of young people in an initiative on the health and well-being of young people in the context of COVID-19. In **Egypt**, over 500 young people participated in a virtual event organized by UNFPA and other UN agencies, as well as the Ministry of Youth and Sports. The two-day event aimed at encouraging the active participation of young people and enabling them to make their own decisions regarding their health, education and work. It also aimed at providing them with evidence-based information to enhance their role in fighting COVID-19, especially with regards to the spread of misinformation online.



Palestinian youth join the global #UN75 conversation, tweeting their hopes & aspirations © UNFPA Palestine



# Continuity of Sexual and Reproductive Health (SRH) interventions, including protection of health workforce

UNFPA, under the regional alliance for the Global Action Plan (GAP) for Healthy Lives and Wellbeing for All, and in partnership with WHO, UNICEF, UNAIDS, UNHCR and World Organization for Family Doctors, developed an online training course for primary health care providers on COVID-19 management, public health measures and on sustaining essential services. The course will be <u>launched</u> on 7 September 2020.

UNFPA, at the Arab States regional level provided technical guidance on <u>SRH and Midwifery Care in the context of COVID-19</u>, <u>Supply Chain Management in the context of COVID-19</u>, and a <u>position paper on the impact of COVID-19</u> on <u>sexual and reproductive health and reproductive rights in the Arab region</u>.

UNFPA, jointly with WHO and UNICEF, supports the continuity of essential Reproductive, Maternal, Neonatal, Child and Adolescent Health (RMNCAH) services especially during the pandemic. Advocacy toward national Ministries of Health highlights the criticality of maternal, child and reproductive health services to avoid excess morbidity and mortality as we start seeing evidence of the pandemic's impact on the provision of and access to essential SRH services.

#### UNFPA continues its support for the continuity of SRH interventions including protection of health workforce:

- Procurement of PPE for frontline health care workers delivering both COVID-19 and non-COVID-19 related SRH and GBV services
- Training of frontline health care workers, including midwives and nurses, on IPC measures in health facilities, rolling out standard operating procedures (SOPs) and guidance on pregnancy and adaptation of training packages including on normal deliveries and C-sections in the context of COVID-19
- Establishing alternative delivery modalities (e.g. mobile outreach and home visits) for SRH services

### **Country Updates**

- Algeria: With support from UNFPA, the Direction of Population/MOH launched an online assessment of SRH service
  continuity targeting service providers. Results will be available in September. Radio and TV spots on the continuity of
  SRH services, family planning and cervical cancer screening services even during the COVID-19 pandemic are being
  prepared with support from UNFPA and will be launched in September.
- Egypt: UNFPA supported the finalization of SOPs for maternal care during COVID-19 with the Ministry of Health and Population (MoHP). Under the EU support to Egypt's National Population Strategy project, UNFPA resumed its workshops with the MoHP, while taking all precautionary COVID-19 measures. A series of workshops was kicked off on 10 August to build the capacity of staff members of the ministry's family planning sector from all governorates on the logistic management information system SOPs.
- Iraq: UNFPA, through its partner Iraq Health Access Organization, supported an orientation session on COVID-19 and its impact on women's health for 30 reproductive health care providers in Nineveh, highlighting the service guidelines on medical checks-ups, services for women during pregnancy, safe deliveries and family planning, and advice on breastfeeding in the context of COVID-19. UNFPA also supported family planning services (Microlut and IUDs) for hospitals and facilities in Erbil, Dahok, Halabja, Kirkuk and Sulaymaniyah.
- Jordan: UNFPA is supporting the initiation of a national SRH hotline that promotes access to SRH remote services
  and information and family planning. Mobile medical teams, addressing the impact of COVID-19 on family planning,
  ensure women's access to family planning in 7 governorates. Prior to the lockdown, MOH centres, supported by
  UNFPA, distributed 3 months of supplies to women so as to minimize any risk of family planning disruptions.
- Lebanon: The deteriorating economic situation is affecting people's ability to access reproductive health (RH) services and pay the necessary fees. RH partners reported women's fear of contracting COVID-19 in health facilities impacting their health-seeking behaviour. In the aftermath of the Beirut port blast of 4 August, UNFPA ensured continuity of reproductive health services for vulnerable Lebanese and Syrian refugees in Bekaa, North and South Lebanon through its implementing partners and provided health care providers and outreach workers with PPE. In August, peer-to-peer awareness sessions on RH/GBV and COVID-19 and pregnancy reached 1,200 Syrians and Lebanese; mobile medical units provided one-to-one counseling sessions on RH to 150 beneficiaries;

# **Regional Response Summary**

### Continuity of SRH interventions, including protection of health workforce (continued)

- **Lebanon (cont.):** of 60 beneficiaries receiving online psychological support services sessions and case management including COVID-19 information, 10 were referred to RH services. As COVID-19 continues to spread, there is an ongoing need for IPC and PPE for humanitarian first responders and health care providers.
- Libya: The COVID-19 pandemic in Libya has severely disrupted access to life-saving SRH services. In some areas, 90% of functioning primary health care (PHC) centres have closed due to COVID-19, since health care staff refuse to work in the absence of PPE. As communities are losing trust in the capacity of the health system to safely meet essential needs and to control infection risks in health facilities, appropriate care-seeking behaviour and adherence to public health advice is declining. An increasing number of IDPs as well as migrants and refugees are reported COVID-19 positive, which is causing stigma. Family planning services were already limited prior to COVID-19 and even less available due to the prioritisation of war casualties and the management of COVID-19 cases. In partnership with the Libyan Red Crescent (LRC), UNFPA deployed a mobile medical unit in the Ghat area, to ensure the provision of essential RH services in the deep southwest, ensuring, within the 1st week, the safe delivery of 6 newborns and assisting 216 women and 125 children with gynaecological and pediatric consultations. Ghat area lacks obstetricians and gynaecologists within a radius of 400 km and women mostly deliver at home or have to travel over 500 km to reach the nearest health facility in Sabha. Through its partner, International Medical Corps (IMC), UNFPA supported the provision of essential RH services in Tripoli and in Sabha through 3 PHCs and mobile medical units. A total of 1,604 individuals were reached through 17 mental health and psychosocial support (MHPSS) consultations and awareness sessions in the 3 supported PHCs on hand hygiene, respiratory hygiene, and COVID-19 and pregnancy.
- Morocco: The Ministry of Health, UNFPA and UNAIDS jointly promoted essential services for women's reproductive health and the fight against sexually transmitted diseases during COVID-19 through a webinar on the "Elimination of mother-to-child transmission of HIV and congenital syphilis". After two years of joint action with the Mohammed VI National Centers for the Disabled (CNMH), under Morocco's "We Decide" initiative for people with disabilities, the first "health card" for people with disabilities will be launched. Under this initiative, multidisciplinary and quality care, especially for the most vulnerable during these difficult times, will be implemented in all CNMH and will be extended to all public health centres by 2021. The health card will contain information on medical history and care of adolescents and young people with disabilities, including SRH and GBV.
- Oman: UNFPA, in cooperation with WHO, has been supporting medical consultations for women, expats and nationals in Oman to mitigate the impact on the health care system and provide critical medical assistance and psychological support remotely during the lockdown.
- Palestine: Home visits for essential SRH services and community awareness activities in areas impacted by COVID-19 are ongoing. 40 health care staff, mostly from Ministry of Health (MOH) hospitals in the West Bank as well as health providers from MOH Gaza maternities, were trained on IPC. UNFPA supported the MOH in the establishment of national guidelines for SRH services and COVID-19.



Strengthening emergency obstetric care in the context of COVID-19 © UNFPA Somalia



Mobile team delivering SRH services in Ghat © UNFPA Libya

### Continuity of SRH interventions, including protection of health workforce (continued)

- Somalia: UNFPA carried out an assessment of the impact of the COVID-19 outbreak on the provision of emergency
  obstetric and neonatal care (EmONC) at the mother and child health (MCH) centres and referral hospitals supported
  by UNFPA in Somaliland. The findings of the assessment were launched in a report in August.
- Sudan: In August, UNFPA focused its support on providing essential SRH services in response to the severe floods while maintaining public health measures such as IPC. RH kits containing essential drugs and equipment, along with family planning commodities and folic acid were distributed in Blue Nile state serving 800 pregnant women. Clean delivery kits were distributed to 12 midwives in the affected locality. As part of the flood response, UNFPA, in coordination with the Khartoum MOH, operates 90 mobile clinics providing SRH services and SRH/COVID-19 health promotion sessions to vulnerable populations; and supports 24/7 active referral services for obstetric complications and for GBV survivors in need of clinical management of rape. Essential SRH supplies were also delivered to other states (Gadarif, Red Sea, Kassala, Gedaref and Gezeira).
- Syria: UNFPA continued to support RH services through its partners, taking into consideration protection of service providers, as each service provider must wear a face mask and gloves in static clinics and during mobile teams outreach service provision. UNFPA Syria continued to support awareness sessions on COVID-19 and different RH topics for beneficiaries who receive services from UNFPA implementing partners, while ensuring adherence to physical distancing and PPE for both beneficiaries and service providers. UNFPA in Aleppo continued to support regular activities in clinics and mobile teams taking into consideration all COVID-19 precautionary measures. UNFPA's response includes provision of maternal and SRH services for pregnant and lactating women, operation of women and girls safe spaces, distribution of SRH and dignity kits (both male and female), distribution of small hygiene kits, an e-voucher system for hygiene supplies, community awareness-raising and referrals.
- Tunisia: UNFPA supported an international forum on "SDGs from a gender perspective: Tunisia's post-COVID-19 priorities" held by the Ministry of Women, Family, Children and Elderly Affairs. Expert panel discussions on health highlighted the need to accelerate action towards the achievement of SRH-related SDGs in view of the huge impact of the pandemic and the general lockdown on the continuity of essential health services, in particular SRH.
- Yemen: UNFPA provides RH services in all UNFPA-supported health facilities across the country, including in facilities where COVID-19 cases have been isolated, while reinforcing IPC in maternal and emergency obstetric care in all supported health facilities. During August, 100 oxygen cylinders were distributed to COVID-19 dedicated hospitals, 92 RH kits with life-saving medical supplies were distributed to 32 health facilities in Yemen's southern governorates, and 164 health workers (mostly midwives) were trained on IPC and response mechanisms to provide RH services during the pandemic as per the National Manual on RH service provision during COVID-19 in Yemen. PPE was provided to 200 health facilities including 8 health facilities in Hodeidah Governorate.



Training for midwives, Al Mukalla © UNFPA Yemen

Marking World Humanitarian Day through an online campaign to thank the real life heroes © UNFPA ASRO



### Addressing Gender Based Violence (GBV)

The United Nations Joint Global Program on Essential Services, a partnership by UN Women, UNFPA, WHO, UNDP and UNODC, issued an updated policy brief in August on COVID-19 and essential services provision for survivors of violence against women and girls in the Arab States. This brief draws upon best practices, knowledge and experience shared by various stakeholders from 7 countries under the roll-out of the global guidelines on the Essential Service Package for Women and Girls Subject to Violence. The policy brief highlights emerging trends of violence against women and girls in the context of the COVID-19 pandemic, and implications for the provision of essential services (health, police and justice, social services and the coordination of these services) for women and girls experiencing violence. The increase in violence has also been coupled with a disruption of services for women and girls survivors of violence. This follows an earlier policy brief on the Impact of COVID-19 on Gender Equality in the Arab Region and a brief on COVID-19 and Essential Services Provision for Survivors of Violence Against Women and Girls.

UNFPA continues to play a lead role in GBV prevention, mitigation and response both through programme implementation and inter-agency coordination. A Guidance Note on Establishing GBV Coordination Mechanisms in Global Humanitarian Response Plan (GHRP) countries in response to the global pandemic draws on the Handbook for Coordinating GBV in Emergencies. There is growing evidence that women and girls affected by the COVID-19 pandemic in crisis and displacement contexts face increased risk of domestic violence/intimate partner violence and sexual exploitation and abuse, in addition to and resulting from loss of income and household stress. UNFPA in the Arab States is increasingly investing in cash and voucher assistance (CVA) as one modality to address economic barriers to access SRH and GBV services or purchase necessary items. At the global level, UNFPA developed a Cash and Voucher Assistance overview and Humanitarian Cash and Voucher Assistance Tip Sheet on CVA and COVID-19 for best practices. UNFPA, with the support of the Regional GBV in Emergency Advisors, has developed a short guide and tip sheet for GBV Coordinators, Cash and Voucher Assistance: Your role as GBV Coordinator, to introduce and champion GBV risk mitigation across CVA interventions.

#### On the ground, UNFPA continues to address GBV prevention and response through:

- Sensitising national partners on the intersections of gender and public health, and how to ethically and effectively address the increased risk of GBV;
- Highlighting the barriers and risk of exclusion that women and girls with intersecting and multiple forms of discrimination face in COVID-19 response;
- Developing online tools on GBV prevention and response during COVID-19 and supporting hotlines to address the most immediate needs of GBV survivors;
- Distributing dignity kits adapted to COVID-19 for female health care workers, women and girls in quarantine and isolation, and refugees and asylum seekers;
- Updating GBV referral pathways to compensate for the disruption of services, in particular for clinical management of rape, and offering the GBV prevention and response essential services package at UNFPA-supported safe spaces.

#### **Country examples**

- Egypt: UNFPA conducted a 2-day training for the National Council for Women's Complaints Office staff on investigation procedures, violence against women legislations and definitions. This comes following the influx of reports on high profile assault cases. GBV case management training was also conducted for medical staff to operate the GBV clinics inside Cairo's Qasr El-Eini university hospital.
- **GCC/Oman:** UNFPA provided capacity building on GBV case management for social workers of Saudi Arabia's National Family Support Programme.
- Iraq: UNFPA mobilised 10 mobile teams, 46 women centres and 159 staff to assist GBV survivors. A total of 105 cases of GBV were reported and 48 cases were referred to specialised services. UNFPA partners distributed 397 dignity kits, and the women centres sewed more than 2,000 masks which were distributed for free to the communities. The online case management system provided more than 291 counselling sessions. Women centres offered awareness-raising sessions on sexual exploitation, domestic violence and prevention methods as part of the COVID-19 response, reaching 731 individuals in camps and non-camp settings. UNFPA implementing partners conducted 88 focus group discussions on the pandemic and responded to questions from beneficiaries.

### **Addressing GBV.** Country examples (continued)

- Jordan: Physical on-site services resumed across the country including in 3 main refugee camps and urban areas. The 19 Women and Girls Safe spaces are offering individual case management following an appointment system while allowing walk-in services for emergency cases. Hotlines are still up and receiving calls from women facing movement restrictions. Group activities resumed at 30% of capacity, respecting sanitising measures and social distancing. This includes psychosocial support groups, empowerment and recreational activities and awareness-raising sessions. UNFPA Jordan distributed 3,000 dignity kits to women and girls in Zaatari refugee camp as part of the COVID-19 response, promoting protection, physical and psychosocial well-being, mobility and hygiene for women and girls at risk, while providing a key entry point for understanding risks facing women and girls in communities and providing additional support when distributions are executed with specialised service providers. UNFPA and UNHCR as co-chairs of the GBV Information Management System (GBVIMS) task force developed, mid-year, a trend analysis of GBV incidents in the context of COVID-19 which informed the SGBV working group programming as well as UNFPA programmatic strategic direction.
- Lebanon: UNFPA continues to provide remote GBV case management and psychosocial support to vulnerable women and girls and survivors based on the case management guidance note developed by the GBV Task Force and the Inter-Agency Standing Committee (IASC) guidance note on remote case management during COVID-19. In August, around 80 women benefited from case management and 300 women benefited from psychological support services along with one man. In the immediate aftermath of the 4 August Beirut port explosion, 40 case workers, social workers, and community mobilisers were trained on conducting psychological support services, psychological first aid and emergency case management while taking into consideration COVID-19 public health measures.
- Libya: UNFPA's "Psychosocial Support Hotline 1417" addressed 552 calls related to psychosocial support and legal consultations on emotional, domestic and physical abuse issues, referring over 22 individuals to receive further specialised services. A daily advertisement about the available hotline services has been broadcasted in both English and Arabic on the Libyan "Radio Nass," throughout the month. Social workers at the UNFPA Women and Girls Safe Spaces in Tripoli, Sabha and Benghazi continued providing remote and in-person services throughout the month of August, reaching a total of 1,210 women and girls through awareness sessions on gender-related topics and psychosocial support consultations. In addition, 249 women were reached in the three locations with livelihood training sessions on sewing and handicraft, leading to the production and distribution of over 2,000 protective face masks. Through LibAid, UNFPA conducted monitoring visits to Al Seka, Al Ganfouda, Al Zawia, and Al Tariq Almatar detention centres, reaching a total of 80 female detainees with psychosocial support consultations and 26 with hygiene kits.



Celebrating International Youth Day in rural Hama awareness and © UNFPA Syria

### **Addressing GBV.** Country examples (continued)

- Palestine: UNFPA supported the Ministry of Social Development in Gaza to strengthen the capacity of 18 social workers on gender and women's rights, child protection, and how to detect and refer GBV survivors, using the developed GBV SOPs. Guidelines on women and girls with disabilities and how to access GBV services, developed by the Palestinian Red Crescent in Gaza, were widely disseminated among service providers. With the support from UNFPA, 40 school teachers from 3 directorates in the West Bank received training on GBV prevention inside schools, general concepts on detection of GBV cases and on the Ministry of Education's service referral policy. The Women's Affairs Center, a UNFPA-supported partner in Gaza, established a helpline service to respond to GBV and provide counselling. The GBV Sub Cluster members in the West Bank and Gaza agreed on GBV priorities in the context of COVID-19 to feed into the Humanitarian Needs Overview (HNO) and Humanitarian Response Plan (HRP) process for 2020-2021.
- Sudan: UNFPA provided skills-building to the most vulnerable women on how to make soap in the context of
  orientation sessions on COVID-19 prevention. Community protection networks as well as communities in Blue Nile
  state received orientation messages on COVID-19 prevention and GBV, including domestic violence.
- Syria: Women and Girls Safe Spaces and mobile teams continue to operate, providing awareness sessions, vocational training, life skills, case management services and recreational sessions, with consideration to all COVID-19 preventive measures. Syrian Society for Sustainable Development, an implementing partner in Aleppo, relocated GBV service provision away from the city, with many GBV service partners including a community centre, to newly accessible rural areas where no services had existed. UNFPA is the first to provide GBV services in the new location, as a result of a rapid needs assessment highlighting service gaps.
- Tunisia: UNFPA-supported GBV services include the opening of a new shelter for female survivors of violence, and social aid for the most vulnerable among them. UNFPA also supported an international forum on "SDGs from a gender perspective: Tunisia's post-COVID-19 priorities", held by the Ministry of Women, Family, Children and Elderly Affairs with expert panel discussions on combating violence against women, digitalisation and innovation in the service of equality, and SDGs and their contribution to upholding gender equality.
- Yemen: UNFPA and the GBV Sub Cluster adopted the use of hotlines and toll-free numbers as an alternative to in-person services previously provided, such as counselling. The concept of tele-counselling is now being mainstreamed among all GBV services with SOPs developed as well as tele-case management. The hotlines operate nationwide as well as governorate-specific, offering psychological counselling, psychosocial support services, GBV case management and referral, legal aid consulting, Covid-19 awareness, and protection services related to women in prisons. This is amplified by awareness-raising through social and mainstream media. Critical services such as specialised psychological centres and shelters continue running, with distancing measures in place, with the provision of PPE. Measures for a phased return of some services are in place while continuing some services such as livelihood interventions. These measures ensure that UNFPA continues to deliver life-saving services safely while adhering to the "do no harm" principle. It also positions UNFPA in Yemen as one of the few frontline responders not just for SRH services but also for GBV.



Palestine Y-Peer network distributing hygiene supplies during COVID-19 pandemic © UNFPA Palestine



Linking skills training on making soap and COVID-19 awareness
© UNFPA Sudan

### Risk communication and community engagement - leaving no one behind

Risk communication and community engagement (RCCE) is an essential tool for governments and development partners to ensure that people are aware of the dangers posed by COVID-19. In order for RCCE efforts to be effective, they need to be gender-responsive and include all segments of societies, particularly the most vulnerable and marginalised groups. COVID-19 is having a devastating impact on the Arab States region. However, its repercussions are not felt evenly across societies. Marginalised and vulnerable groups, particularly those living in conflict-affected countries, are among the hardest hit by the health and socio-economic impact of the pandemic. It is increasingly clear that among these vulnerable groups, women, displaced people, migrants, older persons and people with disabilities, may experience the most harmful impacts of COVID-19.

UNFPA is a member of the Eastern Mediterranean RCCE Working Group, an inter-agency coordination platform established to provide technical support to COVID-19 preparedness and response in the region including the recent launch of new guidelines "COVID-19: How Can Risk Communication and Community Engagement Include Marginalized and Vulnerable People in the Eastern Mediterranean Region". These practical guidelines illustrate the vulnerability of marginalized groups to the pandemic and how national and local efforts can address them so that no one is left behind.

At country level, UNFPA engages in RCCE, including through working with youth-led networks and initiatives:

- Communication platforms such as podcasts, hotlines, and media to reach as many people as possible;
- Joint awareness-raising, education, and activism with a wide range of partners, including communities; and
- participation in country-level RCCE working groups.

#### **UNFPA** support at country level:

- **Egypt:** In cooperation with the Y-Peer network, UNFPA supported the production of two videos raising awareness around protection measures against COVID-19, as well as addressing the stigma associated with it. The videos were shared on the Ministry of Youth and Sports portal and UNFPA social media platforms. UNFPA also partnered Etijah Youth and Development Consultancy Institute and the Ministry of Youth and Sports to organize online mono-drama workshops to document stories told by young people on ways they are coping with the COVID-19 outbreak. The monologues coming out of the workshops will be streamed online. UNFPA continues to work with refugees, asylum seekers and migrants on risk communication and community engagement to raise awareness on care-seeking behaviour of COVID-19.
- Iraq: UNFPA with its partner Zhian Health Organisation and with the support of the Swedish International Development Cooperation Agency (SIDA) launched an awareness-raising campaign in camps for internally displaced persons and refugees in the Erbil, Sulaymaniyah and Nineveh governorates. In its first month, the campaign reached more than 8,000 individuals in seven camps. The ten community mobilisers participating in this campaign helped dispel misinformation about COVID-19 and promote precautionary measures by answering questions from camp residents.
- Oman: UNFPA, in cooperation with WHO, has been supporting medical consultations for women, expats and nationals in Oman to mitigate the impact on the health care system and provide critical medical assistance and psychological support remotely during the lockdown. Youth, led by Y-Peer leaders, were featured in the telemedicine hotline brochures while awareness brochures targeting behaviour change were developed to address the health risks of the pandemic and encourage patients to address their symptoms early without fear of stigma or shame.
- Palestine: UNFPA's NGO partner, Palestinian Medical Relief Society, conducted an awareness-raising session on antenatal care, postnatal care during COVID-19, live-streamed on social media. As part of the RCCE strategy, a series of awareness-raising sessions were organised, targeting youth on accessing SRH during COVID-19.
- Yemen: Awareness-raising through social and mainstream media amplifies the reach of existing GBV tele-counselling services, including coronavirus awareness and protection services related to women in prisons.
   UNFPA reaches an average of 250,000 beneficiaries per month and is using this outreach to raise awareness about COVID-19.

### Risk communication and community engagement - leaving no one behind (continued)





Risk Community and Community Engagement on COVID-19 © UNFPA Iraq

### **UNFPA** support at country level:

- Jordan: UNFPA joined the national campaign 'Eleek O feed", established to spread awareness messages on how to
  prevent COVID-19, including through SRH and GBV messages targeting youth. The SGBV working group, co-chaired
  by UNFPA and UNHCR, created a <u>guidance note on GBV service provision during COVID-19</u> (in English and <u>in Arabic</u>), including key messages to be disseminated by NGOs and women-led organisations at the community-level
  through Whatsapp groups and in-person activities.
- Libya: UNFPA produced RCCE materials on COVID-19 to be displayed in public health facilities and disseminated through SMS. Messages were also disseminated through community health workers deployed jointly with mobile medical units in two PHCs in Tripoli and one PHC in Sabha and through funding youth-led initiatives aimed at raising awareness on the risks of COVID-19 and key prevention measures among their communities, including through radio and on the streets and through awareness messages on social media channels.



Raising awareness on COVID-19 in collective sites © UNFPA Yemen



Raising awareness on COVID-19 for young girls © UNFPA Yemen

### **Media & Communications**

August was a busy month for the humanitarian community within the region as the world received the news about the Beirut Port explosion. Communication teams throughout UNFPA—global, regional, and country offices—were on board to provide coverage for the work done in the field with implementing partners. The messages focused on the needs of girls, women, youth, older persons, persons with disabilities, and families, with the added complexity of delivering assistance during the COVID-19 pandemic. To this end, UNFPA developed a <u>flash appeal for \$20 million</u>, <u>3 situation reports</u> and web stories. UNFPA will continue its coverage of this devastating crisis, which exacerbated other ongoing crises caused by COVID-19 and the economic hardships.

Throughout the region, offices continue to echo COVID-19 related messages. UNFPA continues to recommend preventive measures guidelines put forth by the World Health Organization. While we continue to promote healthy social practices, we are also utilising our social media platforms to mandate related messages. In Egypt, UNFPA launched a social media campaign with the National Council for Women on the rights of women and girls subjected to violence to receive legal, medical and social services.

UNFPA ASRO celebrated this year's International Youth Day by launching a <u>digital campaign</u> on its social media platforms on 5-12 August. The campaign's messages echoed the global theme 'Youth Engagement for Global Action' platforms and highlighted youth engagement and its importance during the pandemic and all other times. Country offices organised virtual events to engage the youth within their own communities. The Jordan office held a virtual music concert, <u>#LetTheMusicSpeak</u>. Tunisia office held a webinar on youth engagement during COVID-19. In Libya, UNFPA hosted a live broadcast in cooperation with a local radio in Tripoli, with young activists participating through phone calls to talk about their initiatives to combat and mitigate the impact of the pandemic on their communities, motivating the public to take all the preventive measures to ensure the safety of themselves and others.

From 13 to 20 August, the regional office dedicated the majority of online activities to thank the real life heroes who are on the frontlines fighting on our behalf. In celebrations of World Humanitarian Day, the region took part in the OCHA-led campaign #RealLifeHeroes, giving our audiences a closer look into the world of humanitarian workers and the different roles our heroes play. The campaign included stories of inspiring local humanitarians who kept providing virtual support and a safe space for women and girls despite the challenges of COVID-19 lockdown.

ASRO communication re-launched the individual giving campaign, <u>#AWomanEvenHere</u>, hoping to reach more people to bring awareness to the issues, which continue to fester.

For the month of August, the collective regional efforts, on all social media platforms, reached 3 million users.

- Egypt: Peer Cast Episode 5- different ways through which UNFPA engages with young people in Egypt.
- Iraq: The youth of Iraq: highlighting the engine of change
- Jordan: Challenges Provoke Innovation in Response to COVID-19
- Lebanon: Mobile medical units deployed as Beirut health system copes after explosion
- Libya: World Humanitarian Day: Youth protecting lives by simple actions
- Morocco: <u>The MCJS and UNFPA launch a digital campaign for the health and well-being of young people during</u> the COVID-19 pandemic. (FR)
- Oman/GCC: the second version of the gender mainstreaming training to government official with MoSD (AR)
- Palestine: <u>Canada's funding contributes to protect and empower GBV Survivors at Nablus Shelter</u>
- Palestine: Spikes in demand for counselling services
- Somalia: Media personnel rally behind the fight against FGM
- Somalia: As Covid-19 rages midwives continue to provide quality care
- Syria: <u>UNFPA supports students in rural Aleppo to continue their learning despite COVID-19 restrictions</u>
- Syria: <u>UNFPA and WFP scale up the e-voucher emergency cash-based transfer mechanism targeting pregnant and lactating women (PLW) across Syria</u>
- Sudan: Women have been authors of the future history of Sudan
- Yemen: From child bride to fearless face mask maker: Yemen's safe spaces help women reclaim their lives

Distribution of dignity kits

© UNFPA Lebanon









Mobile Clinic

© UNFPA Lebanon





UNFPA is providing mobile medical care to girls and women.

© UNFPA

The EU Support to
Egypt's National
Population Strategy has
resumed its workshops
with the Ministry of
Health and Population, in
cooperation with
UNFPA, while taking all
precautionary measures
to prevent the spread of
COVID-19

© UNFPA Egypt





Engaging the youth on International Youth Day

© UNFPA Egypt





Young people enrolled in tailoring classes at Mogadishu Youth Friendly Centre

© UNFPA Somalia

۰۰٫۰ إشراك الشباب في الجهود الدولية اليوم العال*ي* للشياب

۲۰*۲۰* إشراك الشباب في الجهود الدولية اليوم العالمي للتشييا ب



هذا الجيل من الشباب أكثر اتصالا من خلال التكنولوجيا والإعلام والإنترنت من أي جيل آخر.



الشباب الذين يتعاملون بسهولة مع التكنولوجيا سيلعبون دورا حيويا في إبقاء قنوات الاتصال مفتوحة

International Youth Day Awareness Campaign © UNFPA ASRO

يمثل الشباب موردا وشبكة قيمة أثناء الأزمات وطوارئ الصحة العامة. ومع التدريب الصحيح على الأمراض وكيفية انتقالها، يمكن للشباب العمل سويا مع السلطات الصحية للمساعدة في كسر سلسلة العدوى.

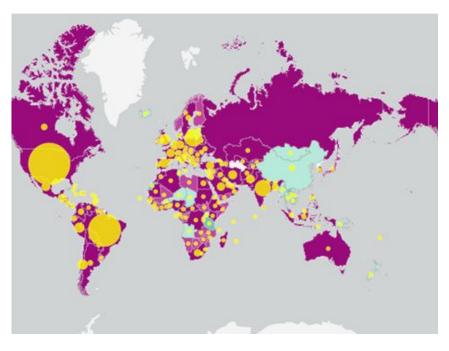




Rapid Response Mechanism (RRM) distribution. © UNFPA Libva

# Confirmed Cases and Deaths (UNFPA programme countries) WHO, 8 September 2020

Country	Confirmed Cases	Deaths
Algeria	15,500	946
Djibouti	5,388	61
Egypt	99,863	5,530
Gulf Cooperation Council*	750,527	6,181
Iraq	264,684	7,589
Jordan	2,478	17
Lebanon	20,826	200
Libya	18,834	296
Morocco	73,780	1,394
Palestine	34,801	206
Somalia	3,362	97
Sudan	13,437	833
Syrian Arab Republic	3,171	134
Tunisia	5,041	93
Yemen	1,993	574
TOTAL	1,313,685	24,151



See UNFPA's <u>COVID-19</u> <u>Population Vulnerability</u> <u>Dashboard</u> for real-time updates

<sup>\*</sup> Kingdom of Bahrain, Kingdom of Saudi Arabia, State of Kuwait, State of Qatar, United Arab Emirates, Sultanate of Oman