



GLOBAL HUMANITARIAN RESPONSE PLAN COVID-19

UNITED NATIONS COORDINATED APPEAL
APRIL – DECEMBER 2020

GHRP MAY UPDATE: ABRIDGED VERSION



Foreword by the Emergency Relief Coordinator

The COVID-19 pandemic is hurting us all. But the most devastating and destabilizing effects will be felt in the world's poorest countries.

We face the biggest economic slowdown in living memory. The humanitarian system is preparing for a sharp rise in conflict, food insecurity, and poverty as economies contract, and export earnings, remittances and tourism disappear.

Lockdowns and economic recession may mean a hunger pandemic ahead for millions.

As countries with weak health systems attempt to fight the virus, we can expect an increase in measles, malaria, cholera and other diseases as vaccinations are put on hold, health systems buckle under the strain and medical supplies are disrupted.

“This pandemic is unlike anything we have dealt with in our lifetime. This is not business as usual. Extraordinary measures are needed.”

If we do not support poorer countries as they battle the pandemic, we are leaving the virus to spread unchecked and circle back around the world. That is in no-one's interest. Nor is economic collapse and instability in fragile and poor countries.

It is in all our interests to come together in an urgent and coordinated response to this pandemic in the world's most fragile settings. The COVID-19 Global Humanitarian Response Plan is the international community's primary fundraising vehicle to do that. This update of the Plan is based on extensive in-country consultations and reflects real-time needs. It brings together appeals from the WHO and other UN humanitarian agencies. Non-governmental organizations and NGO consortia, often the frontline responders have been instrumental in helping shape the plan and can access funding through it.

Lockdowns, curfews and restrictions on movements of personnel and cargo – part of the strategy to slow down transmission of the virus – are affecting humanitarian operations. But despite these obstacles, resources are moving quickly to the field and having immediate impact. The Global Humanitarian Response Plan has supported the installation of handwashing facilities in vulnerable places like refugee camps; the distribution of gloves, surgical masks, N95 respirators, gowns and goggles to help vulnerable countries respond to the pandemic; and the creation of new transport hubs from which supplies can be transported by air.

The Plan prioritizes the needs of the the most vulnerable including older people, people with disabilities, and women and girls. Given that the pandemic has already heightened existing levels of discrimination, inequality and gender-based violence, the Plan includes specific metrics to ensure that the vulnerabilities of these groups are addressed. This plan also includes programmes that respond to the projected rapid growth in food insecurity.

Everything achieved so far has only been possible because of the generous funding donors have provided. Progress will only continue if additional funding is made available.

As we come together to combat this virus, I urge wealthy governments to make their response proportionate to the scale of the problem we face.

I ask wealthy governments to take two steps. Firstly, pledge your support to this COVID-19 global humanitarian response plan. It requires \$6.7 billion. Secondly, continue to support existing humanitarian response plans. If funding is diverted from these operations to tackle COVID-19, the consequences could be grave and potentially life-threatening for those already at greatest risk in humanitarian contexts. This pandemic is unlike anything we have dealt with in our lifetime. This is not business as usual. Extraordinary measures are needed.

Mark Lowcock

Emergency Relief Coordinator, United Nations

At a glance

REQUIREMENTS (US\$)

\$6.71_B

FUNDING RECEIVED (US\$)

\$923_M

COUNTRIES

63

Objectives scope, countries included

Since the publication of the **Global Humanitarian Response Plan (GHRP) on 25 March 2020**, the **COVID-19 pandemic has taken hold in the 54 countries with ongoing humanitarian crises at varying scale, speed and severity levels**. Based on their vulnerability and response capacity, an additional nine countries¹ and Djibouti, as part of the **Regional Migrant Response Plan for the Horn of Africa and Yemen**, were included in this update, bringing the number of countries covered by this plan to 63.

The total financial requirements have risen from US\$2 billion to \$6.71 billion. This significant increase is due to a rapid evolution of humanitarian needs, the inclusion of the additional countries, increased cost of essential health and other supplies, and air and sea transportation. To date (5 May), \$923 million has been received, with another \$608 million reported outside the GHRP, bringing the total received for the COVID-19 humanitarian response to about \$1.5 billion. The GHRP requirements target the most vulnerable people and are a small part of the \$90 billion required overall to support 10 per cent of the poorest populations affected by the pandemic worldwide.

The additional requirements for the COVID-19-related emergency response compound the already significant funding gap for humanitarian response plans globally. At the time of writing, only 13 per cent of the funding appealed for in the **Global Humanitarian Overview (GHO)** had been received. This shortfall is dramatic as humanitarian needs predating the outbreak have worsened, notably due to a deterioration of the food security situation, supply chain disruptions and ongoing conflict. In particular, the number of acutely food insecure people could almost double from 135 million in 2019 to 265 million due to COVID-19 economic impact.

In December 2019, the UN projected a requirement of \$28.8 billion in the GHO for its response to humanitarian needs in 2020. Drawing a parallel to the global crisis of 2008-2009, when humanitarian requirements grew by 54 per cent, all indications are that humanitarian needs will increase significantly by the end of 2020 due to the secondary impacts of COVID-19.

Humanitarian situation and needs analysis

The GHRP begins to capture and anticipate the most immediate of those needs, based on the existing revisions or the development of new humanitarian response plans. It will be updated again mid-June. The forthcoming GHO will fully incorporate the COVID-19-related increases for 2021, together with requirements stemming from other crises, which will themselves be compounded by the consequences of the pandemic.

Data and analysis conducted since the release of the GHRP in late March confirm the anticipated humanitarian impact of the pandemic on the health and socioeconomic conditions of vulnerable groups identified. Concerns are growing around the disruption of essential health services as lockdown measures and fear of infection are leading to significant reductions in utilization and access. Due to disruption of air flights, vaccines

¹ Benin, Djibouti (part of the Regional Migrant Response Plan), Liberia, Lebanon (now counted as 'country' on top of being part of the 3RP for Syria), Mozambique, Pakistan, the Philippines, Sierra Leone, Togo and Zimbabwe.

shipments to countries fell by approximately 80 per cent, and an increasing number of countries are reporting depleting stock, impairing essential vaccination campaigns.

Those who stand out as suffering the most are older persons, people with comorbidities, people with mental health and psychosocial needs, persons with disabilities, women, children and youth, forcibly displaced persons, refugees, asylum seekers and migrants, and people who have lost their sources of income and fall outside social protection systems.

This is exacerbated when they live in dense and underserved locations, and when other shocks and stresses are occurring due to natural disasters, pest infestation or conflict.

Many population groups and individuals are negatively affected at different levels. Their health may be directly impacted along with their ability to access essential services and sustain livelihoods.

Of particular concern is the situation of women and girls due to elevated gender-based violence in lockdown situations, their important role in health care and social work and increasing exposure to the virus, and their large dependence on informal and insecure sources of income that have become inaccessible due to mobility and physical

distancing measures. UN WOMEN indicates a surge in intimate partner violence of upwards of 25 per cent since the outbreak of the pandemic in countries with a reporting system in place. The realities, unique requirements and responses to the needs of women and girls, especially as relates to sexual and gender-based violence, are detailed in the GHRP.

Older people suffer from a greater health impact from COVID-19, combined with higher risks of discrimination and physical and financial barriers to access essential services. Persons with disabilities also face risks of stigmatization and loss of access to specialized-assistance services and treatment. Children are deprived not only from education but also from associated services such as school feeding and social assistance, while being at increased risk of domestic violence.

Vulnerable population groups of all ages, many of whom are also IDPs, refugees, asylum seekers and migrants, are susceptible to increased mental health issues due to stress, anxiety and an increase in violence stemming from the pandemic, at a time when mental health and psychosocial support services are either interrupted or suffering from limited resources available in countries.

Progress of the response

Humanitarian actors have stepped up their responses to additional needs caused by the pandemic. Significant efforts have been made to establish Global Humanitarian Response Hubs located close to where medical supplies are manufactured in Liège, Dubai, and China which will link to regional hubs in Ethiopia, Ghana, Malaysia, Panama, Dubai, and South Africa, maintain and increase supply chains for health and other essential items. Critical COVID-19 response interventions are enhancing the protection of the most vulnerable groups, securing the continuity and expansion of essential health services, water, sanitation and hygiene, education services, risk communication and social cohesion, and food production and consumption.

Local and international NGOs and community groups, including faith-based and women-led groups, have continued to play a vital role in the response delivery, expanding their outreach and links with development interventions that some were already implementing. While some UN agencies have taken steps to provide flexible funding and ease administrative procedures, more will be done to facilitate direct NGO access to funding, including through pooled-funding mechanisms.

Individual and collective leadership for protection against sexual exploitation and abuse remains a core commitment of the organizations participating in the GHRP.

Financial requirements and funding

Funding shortfalls, mobility and access constraints, supply chain delays, threats to humanitarian workers perceived as carriers of the disease, and uncertainties around medical evacuation and treatment of staff are constraining the response. Wherever necessary, more must be done to scale up critical COVID-19 responses together with other previously planned humanitarian responses in order to address the humanitarian needs and prevent further deterioration. Without significant and accelerated efforts to cover both the GHRP and the 2020 GHO funding requirements, a major deterioration of the humanitarian health and socioeconomic situation of the most vulnerable people must be expected. Long-term effects will ensue, significantly jeopardizing achievement of the Sustainable Development Goals.

This inter-agency appeal aims to cover the health and immediate COVID-19-related humanitarian needs. It seeks roughly \$1 billion to support common humanitarian services, such as medical evacuations, field hospitals and passenger and cargo air services. From the amount requested for country-based operations, most requests will be used by the health, food security, WASH, protection and education sectors.

Of the \$6.71 billion required to cover the response under this plan, \$1 billion will cover global support services, while \$5.7 billion will cover needs in the 63 countries covered - with \$3.49 billion targeting Humanitarian Response Plans countries, nearly \$1 billion intended for Regional Refugee Response Plans countries, \$439 million for Regional Refugee and Migrant Response Plans countries, \$157 million for countries under other plans, and \$628.8 million for the countries under new plans presented in this update.

Coherent and complementary needs analysis, and planning and funding flows between humanitarian and development actors are more important than ever. Opportunities are being seized to link the GHRP, WHO's Strategic Preparedness and Response Plan, and the UN Secretary-General's Framework for the Immediate Socioeconomic Response to COVID-19 in common response areas.

Financial requirements (US\$)

COVID-19 REQUIREMENTS		TOTAL ADJUSTED HUMANITARIAN REQUIREMENTS				
REQUIREMENTS	OF WHICH:	REQUIREMENTS ¹		OF WHICH:		
\$6.71 B	HEALTH: \$2.03 B NON-HEALTH: \$3.67 B	\$36.75 B	COVID-19: \$6.71 B NON-COVID-19: \$30.04 B			
INTER-AGENCY APPEAL	COVID-19 TOTAL	OF WHICH: HEALTH	NON-HEALTH	ADJUSTED NON-COVID-19	TOTAL HUMANITARIAN COVID + NON-COVID	
Afghanistan	HRP	108.1 M	21.7 M	86.4 M	695.7 M	803.8 M
Burkina Faso	HRP	60.0 M	15.0 M	45.0 M	311.6 M	371.6 M
Burundi	HRP	36.7 M	-	36.7 M	131.7 M	168.4 M
Cameroon	HRP	99.6 M	23.0 M	76.6 M	292.7 M	392.4 M
CAR	HRP	152.8 M	7.7 M	145.2 M	400.8 M	553.6 M
Chad	HRP	99.5 M	6.0 M	93.5 M	610.7 M	710.2 M
Colombia	HRP	197.0 M	152.7 M	44.4 M	209.7 M	406.7 M
DRC	HRP	287.8 M	119.4 M	168.4 M	1.82 B	2.11 B
Ethiopia	HRP	322.6 M	100.0 M	222.6 M	1.00 B	1.32 B
Haiti	HRP	105.0 M	105.0 M	-	319.3 M	424.3 M
Iraq	HRP	263.3 M	65.4 M	197.9 M	397.4 M	660.7 M
Libya	HRP	38.8 M	14.9 M	23.9 M	90.9 M	129.8 M
Mali	HRP	42.3 M	10.1 M	32.2 M	350.7 M	393.2 M
Myanmar	HRP	46.0 M	18.1 M	27.9 M	216.3 M	262.3 M
Niger	HRP	76.6 M	9.9 M	66.7 M	433.3 M	509.8 M
Nigeria	HRP	259.8 M	85.2 M	174.6 M	839.0 M	1.10 B
oPt	HRP	42.4 M	19.1 M	23.3 M	348.0 M	390.4 M
Somalia	HRP	176.4 M	72.1 M	104.4 M	1.08 B	1.25 B
South Sudan	HRP	217.2 M	21.0 M	196.2 M	1.55 B	1.77 B
Sudan	HRP	87.5 M	87.5 M	-	1.35 B	1.44 B
Syria	HRP	384.2 M	157.5 M	226.7 M	3.42 B	3.81 B
Ukraine	HRP	47.3 M	16.6 M	30.7 M	157.8 M	205.1 M
Venezuela	HRP	72.1 M	44.1 M	28.0 M	677.9 M	750.0 M
Yemen	HRP	179.1 M	101.6 M	77.6 M	3.20 B	3.38 B
Zimbabwe	HRP	84.9 M	35.0 M	49.9 M	715.8 M	800.7 M
Burundi Regional	RRP	65.4 M	36.5 M	29.0 M	209.9 M	275.4 M
DRC Regional	RRP	155.7 M	94.7 M	61.0 M	483.0 M	638.7 M
Nigeria Regional ²	RRP	-	-	-	-	-
South Sudan Regional	RRP	128.8 M	51.4 M	77.4 M	1.21 B	1.34 B
Syria Regional ³	3RP	643.8 M	82.6 M	561.1 M	5.56 B	6.21 B
Venezuela Regional	RMRP	438.8 M	132.4 M	306.4 M	968.8 M	1.41 B
Rohingya Crisis ⁴	JRP	117.2 M	71.8 M	45.3 M	-	-
DPR Korea	Other	39.7 M	19.7 M	20.0 M	107.0 M	146.7 M
Benin	New	17.2 M	10.9 M	6.3 M	-	17.2 M
Iran	New	89.5 M	64.4 M	25.1 M	-	89.5 M
Lebanon	New	94.0 M	53.8 M	40.2 M	-	94.0 M
Liberia	New	57.0 M	17.5 M	39.5 M	-	57.0 M
Mozambique	New	68.2 M	16.0 M	52.2 M	-	68.2 M
Pakistan	New	126.8 M	29.2 M	97.6 M	-	126.8 M
Philippines	New	96.2 M	23.2 M	73.0 M	-	96.2 M
Sierra Leone	New	60.5 M	16.8 M	43.7 M	-	60.5 M
Togo	New	19.4 M	3.3 M	16.0 M	-	19.4 M
Global Support Services		1.01 B	-	-	-	1.01 B
TOTAL		6.71 B	2.03 B	3.67 B	30.04 B	36.75 B

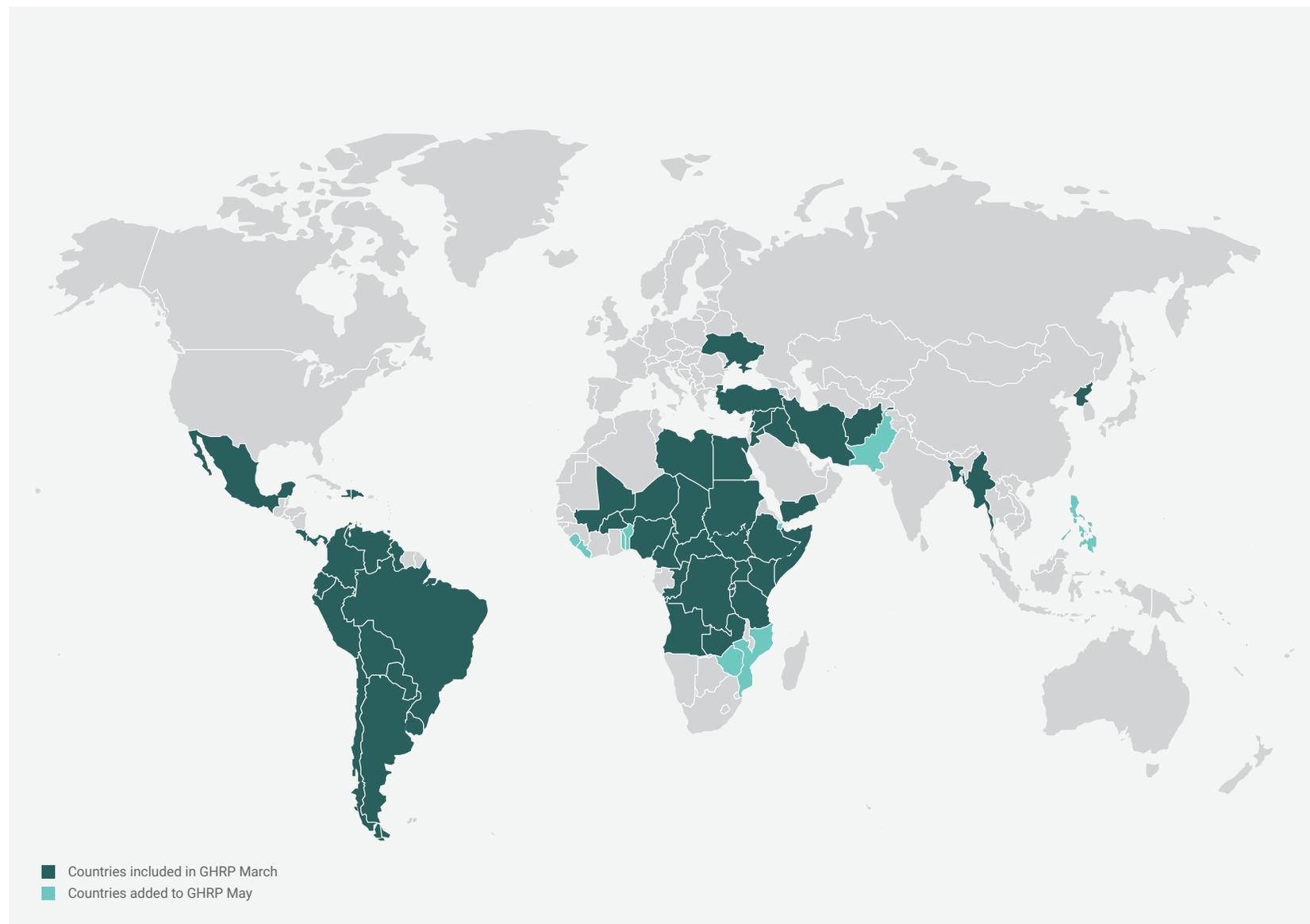
¹ Funding requirement updated on 11 May 2020. The figures are expected to change as country offices continue revising their projects and ongoing activities. For the most up-to-date figures, please refer to hpc.tools or fts.unocha.org.

² The requirements for the Nigeria RRP are included in the Cameroon, Chad and Niger HRPs.

³ The existing 3RP 2020 budget is 5.56 billion. A full prioritization exercise is ongoing in and an adjusted non-COVID-19 figure is pending

⁴ Revised new COVID-19 related requirements, plus total 2020 JRP requirement adjusted to COVID response, will be presented in the June GHRP update

GHRP countries: May update



NUMBER COUNTRIES
GHRP MAY

63

OF WHICH:
NUMBER COUNTRIES
GHRP MARCH

54

Afghanistan, Angola, Argentina, Aruba*, Bangladesh, Bolivia, Brazil, Burundi, Burkina Faso, Cameroon, CAR, Chad, Chile, Colombia, Costa Rica, Curaçao*, Dominican Republic, DPR Korea, DRC, Ecuador, Egypt, Ethiopia, Guyana, Haiti, Iran, Iraq, Jordan, Kenya, Lebanon, Libya, Mali, Mexico, Myanmar, Niger, Nigeria, oPt, Panama, Paraguay, Peru, Rep. of Congo, Rwanda, Somalia, South Sudan, Sudan, Syria, Tanzania, Trinidad and Tobago, Turkey, Uganda, Ukraine, Uruguay, Venezuela, Yemen, Zambia.

NUMBER COUNTRIES
ADDED TO GHRP MAY

9

Benin, Djibouti, Liberia, Mozambique, Pakistan, Philippines, Sierra Leone, Togo, Zimbabwe

Source: OCHA. **Disclaimer:** The designations employed and the presentation of material in this publication do not imply the expression of any opinion whatsoever on the part of the Secretariat of the United Nations concerning the legal status of any country, territory, city or area or of its authorities, or concerning the delimitation of its frontiers or boundaries.

* Aruba (Netherlands), Curaçao (Netherlands)

“A world free of COVID-19 requires the biggest public health effort in global history: data must be shared, resources mobilized and politics set aside.

We are in the fight of our lives.

We are in it together.

And we will come out of it stronger, together.”

António Guterres,
Secretary-General, United Nations

