Week in review around the *Global Humanitarian Response Plan*

26 June 2020

UNICEF Ethiopia is strengthening accountability to affected populations via the use of monitoring and complaint mechanisms that focus on protection from gender-based violence and sexual exploitation and abuse.

Non-governmental organizations (NGOs) in Iraq have adapted their activities to help protect against the COVID-19 pandemic. Through its project in Hamam Al-Alil camp, the NGO Mercy Hands has produced 48,000 face masks and will start the same project in Salamiyah camp.

In Syria, the Cash Working Group and REACH are working collaboratively to monitor how markets in the north-east and north-west are responding to the impact of COVID-19. The
monthly assessment, initiated in March 2020, focuses on the availability and prices of key goods, including plastic gloves and antibacterial gel. It also considers the functionality of local markets, including vendors’ supply and financing challenges, and mitigation measures imposed on communities and taken by shopkeepers to slow the spread, such as limiting crowds and the use of face masks.

The Education Cluster in Venezuela, in collaboration with Radio Fe y Alegría and the Ministry of Education, produced a series of audio messages (“radio capsules”) to inform teachers and educators about protection and psychosocial support during lockdown. Five topics have already been covered in live broadcasts: (1) mental health and psychosocial support; (2) promoting well-being and learning for children in their homes; (3) promoting mental health and psychosocial support through education; (4) key messages on COVID-19 for public workers and the general public; and (5) child protection in the context of COVID-19.

Food security concerns in Myanmar are being addressed through increased market monitoring, the provision of two months of food rations at a time, and increasing the volume of distribution from 70 per cent to 100 per cent of need in critical areas.

In Mali, community outreach agents in the three OCHA sub-offices (Mopti, Timbuktu and Gao) are working with local communities to distribute appropriate messaging in local languages on humanitarian activities and principles to sensitize local communities on COVID-19 and prevention measures. Community agents are also collecting opinions on people’s perceptions on the humanitarian response at the local level.

In Afghanistan, a humanitarian helpline, Awaaz Afghanistan, operates daily for 12 hours to help provide information about assistance to Afghans (internally displaced people, returnees) and refugees affected by conflict and natural disasters. The organization has also developed a dedicated dashboard for community feedback relating to COVID-19. The operators work closely with the health clusters to share inquiries from communities and help design awareness-raising for communities.

In Bangladesh, humanitarian communities continue to address misinformation, rumours and stigma around COVID-19 in camps. For example, some Rohingya communities believed, as per the perception studies carried out, that they were immune to the virus due to their religious beliefs. In response to misinformation, aid agencies have actively adapted messages and are working through different channels, including religious leaders, to ensure trust-building among the communities. The Communication with Communities Working Group also continues to produce information and communication materials using relevant formats and languages.
Humanitarian organizations in the **Central African Republic** have integrated preventive measures into sectoral and intersectoral humanitarian programmes, including social distancing and handwashing.

More than 423,000 people have received multisectoral humanitarian assistance in the **Central African Republic**, and more than 1.2 million people have benefited from awareness-raising campaigns on COVID-19. Humanitarian partners are prepositioning stocks and creating isolation areas, especially in sites for internally displaced people; monitoring market prices and cash-based interventions; analysing gender-based violence trends; providing additional water, sanitation and hygiene supplies; engaging with communities; and providing radios to sustain remote education.

**19 June 2020**

A third humanitarian air shipment arrived at Venezuela’s main international airport near the capital, Caracas, on Friday, 19 June. The plane carried 94 tons of medicines, medical supplies, personal protective equipment for front-line health workers, water purification tablets, water tanks, hygiene kits and nutrition support packages for the response against COVID-19. The
supplies will help strengthen the health system, improve access to safe water for thousands of families and ensure continued assistance in other critical areas, including women’s health. This is part of a joint effort by the United Nations and Switzerland, and includes supplies from PAHO/WHO, UNICEF, UNFPA, IOM and other humanitarian organizations.

Such supplies are vital for people like Rosa, a single mother of six in San Felipe in the Western state of Yaracuy. Rosa worries every morning about how to feed her children as the COVID-19 related restrictions are hampering her capacity to put food on the table for her family. Even the informal jobs she had before are no longer available. “This disease has affected everything in my life. I can’t go out and look for work. I feel like I’m drowning, locked up, worried … I need to work to support my children.” In the meantime, Rosa and her family receive food, hygiene kits and nutritional supplements from humanitarian organizations.

To date, humanitarian actors have reached more than 1 million people as part of the COVID-19 response and ongoing assistance in other critical areas such as shelter and non-food items, food, protection, education and nutrition, including for returnees and local communities.

Meanwhile, earlier today, an aircraft carrying 43 tons of laboratory supplies, ventilators, test kits, PCR machines and vital PPE to fight COVID-19 arrived in Yemen. This important milestone occurred thanks to a donation to WHO facilitated by Hayel Saeed Anam Foundation on behalf of the International Initiative on COVID-19 in Yemen, a collaborative partnership of multinational companies and the United Nations.

Logistics and supply chain management play a key role in making aid shipments like these a reality. With much of the world’s commercial transport systems having been grounded by the COVID-19 pandemic, the World Food Programme (WFP) – the world’s largest humanitarian organization fighting hunger and a global leader in supply chain and logistics – has stepped in to provide a range of transport and other services on behalf of the humanitarian community worldwide, known as Common Services. The service is provided in support of UN agencies, including the WHO/PAHO and other humanitarian partners, under the terms of the UN’s Global Humanitarian Response Plan launched in March 2020.

While sustaining its own global food assistance operations, WFP has established air transport links to guarantee the movement of aid workers and of life-saving medical and humanitarian cargo. The network consists of Global Humanitarian Response Hubs in Guangzhou (China), Liège (Belgium) and Dubai (UAE), near where supplies are being manufactured, and regional hubs in Ethiopia, Ghana, South Africa, Malaysia, Panama and Dubai. From there, aid workers and humanitarian cargo – including medicines, ventilators and PPE – can be transported by WFP Aviation to final destinations in Africa, Asia and Latin America. Cargo transport between global and regional hubs is provided free to users.

These common services are needed now more than ever because the pandemic, which has exacerbated already record-high humanitarian needs, has at the same time precipitated disruptions to supply lines and reductions in international normal transport across the world. This makes humanitarian aid providers and health workers’ ability to move essential staff and goods
across borders, access communities, and provide live-saving services, wholly dependent on the maintenance of the Common Services.

To date, the Common Services have operated 375 passenger and cargo flights flown to destinations across Africa, Asia, Latin America and the Middle East. More than 2,500 responders from more than 80 aid organizations have been flown to destinations where their assistance is urgently needed. On the cargo front, some 45 humanitarian partners have used the Common Services, and there are currently 67,901 m³ of supplies in the pipeline for the next few weeks. That is enough to fill of 120 Jumbo Jets.

This week, WFP indicated urgent funding needs to maintain its global network of passenger and cargo services in support of the humanitarian community. Unless a substantial injection of funds is provided by donors by the end of the first week of July, WFP will have no choice but to ground most of its humanitarian air fleet by the end of July. Of the Common Services budget of $965 million until the end of the year is, only $178 million has so far been confirmed or advanced.

12 June 2020

The COVID-19 pandemic is affecting communities the world over. But its disruptive force disproportionately affects the most vulnerable people in societies. From the elderly to people on the move, from women and children to people with disability, vulnerable groups require special attention and tailored assistance. The pandemic is changing the way aid organizations are able to operate, forcing the humanitarian community to adjust its interventions. Here are some examples of how humanitarians make a difference for the most vulnerable.

The COVID-19 pandemic is causing untold suffering and anxiety for older people across the world. Older people face a wide range of risks from coronavirus. Rates of serious illness and death are highest among older people. Older people also face significant secondary impacts. Already high levels of income and food insecurity, poor access to health services and threat of violence and abuse among older people are likely to worsen due to COVID-19. They are also experiencing anxiety about the virus, as well as increased distress due to physical distancing measures.

In Idleb, Syria, HelpAge International is working with SEMA to support local health structures and adapt home-based care approaches to ensure community-level care is available to older people at home, including those with COVID-19. With a potential decline in care and support because of movement restrictions, they are also supporting family caregivers with information about how to care for older people at home, including at the end of life.

People are having to stay at home more because of movement restrictions that have been introduced to reduce COVID-19 transmission. That is significantly more challenging when your home consists of a tent or sub-standard building of just a room or two! Overcrowding was already a problem in Lebanon, in particular for families that have fled conflict. Restrictions and the deteriorating economy have also restricted even the small options that existed for earning income – people are struggling to get enough food to feed their families.
Medair has stepped up to the challenge and shifted its programme rehabilitating migrants and refugee shelters to building centres where the most vulnerable people affected by COVID-19 can stay for self-isolation.

The pandemic is forcing many migrants and refugees to move again. In Latin America, as countries hosting Venezuelan migrants implement COVID-19 containment measures, many are returning home after losing their jobs. Kariani, a 27-year-old mother and her two young children returned from Colombia after losing her job as a hairdresser. “We are exhausted, after 23 days of travel it is like a victory, we are almost at home.” Aid organizations are stepping in to support shelters and isolation centres with food, clean water, medicine and other basic services.

OCHA in Nigeria reports that although men’s health seems to be more affected by the COVID-19 virus, vulnerable households with women and girls, especially those from IDP communities, are particularly affected by the lasting secondary impacts of the pandemic. With that in mind, aid workers in north-east Nigeria have already adapted their programmes. They sharpened a rapid gender analysis to evaluate early responses and identify specific needs, as the pandemic and the virus are presenting new and unprecedented challenges. This is leading to the adoption of interventions that recognize, reduce and redistribute the unpaid care and household responsibilities assigned to women and girls, and safeguard their dignity.

Mercy Corps in Nigeria is prioritizing female recipients in its interventions by selecting female-headed households for food, cash and shelter assistance. It is also selecting more women as community hygiene promoters and nutrition promoters for house-to-house COVID-19 sensitization. An electronic platform for food assistance showed that 70 per cent of people who did not turn up for food assistance are pregnant and breastfeeding women, as they returned home early to prepare meals, care for their children and do household chores. Mercy Corps is now ensuring that these women are prioritized during the monthly food distribution.

5 June 2020

Humanitarian workers are delivering on their commitment to fight COVID-19, from providing health workers with critical personal protective equipment to helping vulnerable families meet basic needs.

Here are some highlights from this past week: UNICEF delivered 330 COVID tests in Palestine, while IOM provided ventilators and dispatched health specialists to the main hospital in Mogadishu, Somalia. FAO is sending electronic vouchers to buy seeds for the ongoing planting season by phone text message to about 40,000 farming households. In Beirut, UN Habitat is distributing hygiene kits to 1,000 families. And in Rwanda, World Vision and its partners conducted 47 live radio talk shows to raise awareness on child protection during the pandemic. With thanks to WFP and donors, the logistical backbone is gaining strength, helping to move planeloads of life-saving equipment and humanitarians to places where they are needed the most.