

IOM NEPAL

APPEAL COVID-19

APRIL 2020





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SITUATION OVERVIEW

As COVID-19 has spread progressively to 213 countries and territories in a short span of time, it cannot be categorically ignored the fact that the outbreak of the disease is mostly related to the mobility/migration of the human population from one place to another. With more than 2.4 million confirmed cases, and more than 163,000 deaths around the globe; the World Health Organization (WHO) had declared a Public Health Emergency of International Concern (PHEIC) on 30 January 2020, and characterized as pandemic on 11 March 2020.

In Nepal, the first case was detected on 23rd of January 2020. This case had direct link to the Wuhan province as the person was the returnee student. Since then, the number has reached 45 in total (23 April 2020). The majority cases are migrants returning from India. The number of passengers travelling via Tribhuvan International Airport (TIA) is estimated to be around 10,000 every day. When it comes to land border and Point of Entry (POE), there are 3 districts with an official POE with China. Similarly, Nepal's southern neighbour, India has the largest border crossings, with official nine (9) POEs. Even though the land borders are closed recently, the number and whereabouts of unofficial crossings are unknown on the both frontiers. Though China has been able to contain the situation with a possibility of rebounding cases, there has been reportedly rapid increase in the number of confirmed cases (18,601 confirmed cases and 590 deaths as of 21 April, 2020) in India. The land of India has a large number of Nepalese migrants workers, which is estimated to be around 1.5 million and the number of people crossing the open border is in thousands, every day.

Furthermore, Kathmandu valley, where the first point of contact for all the international travellers, is one of the most

densely populated cities (around 1.3 million residing population) in Nepal. The city is unplanned and the arbitrary growth has led to many vulnerabilities and impacts on urban environments to varying degrees, including the health hazards. Not to forget, the similar situations are encompassing the urban areas all around Nepal.

In response to the COVID-19, The government of Nepal's preparation seems to be inadequate due to the lack of resources and well-functioning health system, hence the current developments has made Nepal to be declared as outbreak risk at the highest level by WHO. Coupled with all these conditions of unregulated people crossing both the southern and northern border, poor management of screening at the POEs, crowding population in the cities, and lack of resources; the threat of precarious situation due to COVID-19 seems to be imminent in Nepal. Both the possibility of people being exposed to the virus and spreading is highly possible, where the outbreak could be hard to contain.

International Organization for Migration (IOM) globally is fully active in responding to the COVID-19 crisis. IOM has put out a Global appeal of \$499 million and IOM Nepal appeal does not count the global appeal funding. This is the gap in funds we need for Nepal not covered by any other appeals.

Funding required \$ 4 MILLION



IOM NEPAL



COVID-19 APPEAL

IOM NEPAL CAPACITY TO RESPOND

IOM started its operations in Nepal in 2007 facilitating the resettlement of over 113,000 Bhutanese refugees to various third countries till date. Since then, IOM has expanded significantly both in terms of programme areas and target populations and has contributed to the government of Nepal's efforts to manage migration more effectively through a wide range of programmes. IOM is a member of UN Country Team and works within the UN Development Assistance Framework (UNDAF), now known as Sustainable Development Framework which is aligned with Sustainable Development Goals (SDGs), Nepal's 14th National Development Plan and international commitments to which Nepal is a Party. Globally IOM is a coordinating agency of the UN Network on Migration established to support the Member States in ensuring effective, timely coordinated implementation of Global Compact for Migration (GCM). IOM has a strong presence in all seven provinces of Nepal through its Provincial Focal Points as well as its presence in five worst earthquake affected districts through its District Focal Points. Its current staff strength is 140 including five international staff.

IOM, as one of the world's key humanitarian responders, supported the Government of Nepal in its response and recovery activities during Koshi Flood 2008, Nepal Earthquake 2015, and Terai Flood 2017. After the 2015 Earthquake, IOM quickly reacted by deploying a rapid response team of experts in order to support the affected population with shelter, camp coordination and management (CCCM), health and psychosocial support, pro-

tection and early recovery activities. Consequently, IOM launched Relief, Recovery and Reconstruction (RRR) programme to efficiently and timely respond to the pressing needs in the aftermath of the earthquake. Amid the current COVID 19 preparedness and response, currently IOM is working in coordination with the Government of Nepal, Humanitarian Cluster Team including IOM's representation in the National Cluster with the strategic approach 'leave no one behind' to ensure migrants and the communities are mainstreamed in all the preparedness response and recovery plans.

While promoting comprehensive, preventive and curative health programmes which are beneficial, accessible, and equitable for mobile populations, bridging the needs of both migrants and Member States, IOM contributes towards the physical, mental and social well-being of migrants, enabling them and host communities to achieve social and economic development. In Nepal, IOM provides pre-departure health assessment services to outbound migrants through its Migration Health Assessment Centres at Kathmandu (Bagmati Pradesh) and Damak (Province-1) equipped with 9 doctors, 11 nurses supported by adequate number of medical staffs. Beside this, IOM has been supporting the Government in development and implementation of migrant-sensitive health policies and plans.

IOM Nepal STRATEGIC APPROACH

IOM Nepal aims to contribute to the overall objective of the IOM COVID-19 Global Preparedness and Response Plan to halt further transmission and mitigate the impact of the outbreak.

IOM believes that preparedness and response plans need to be responsive to population mobility and cross-border dynamics, and that inclusive approaches which take into account migrants, travellers, displaced populations, and local communities, and counter misinformation that can lead to anti-migrant sentiment and xenophobia are essential in the event of an outbreak.

Efforts are initially focused on preparedness and response, but IOM keeps the need for recovery in mind through incorporating elements of social cohesion and programming throughout.

With this Preparedness and Response Plan IOM Nepal aims to contribute to the government of Nepal and national health partners preparedness and response efforts for COVID-19 to reduce associated morbidity and mortality and prepare for and address the crosscutting humanitarian needs of migrants impacted by COVID-19.

COORDINATION AND PARTNERSHIPS

- Initial Mapping of all seven provinces to assess the impact of migrants by COVID.
- Advocate for all migrants to be included in the national COVID-19 response plan and ensure that they can access services, without fear of stigma or discrimination.

 Coordination and partnership with the local and provincial government, Civil Society Organization for migrant sensitive preparedness and response plan for COVID-19. Funding required \$200,000

RISK COMMUNICATION AND COMMUNITY ENGAGEMENT (RCCE)

- Mobilize radio network for Risk Communication and Community Engagement
- Establish community feedback mechanisms to systematically collect information on community perceptions, concerns, and questions, and utilize community feedback findings to design and implement community engagement and other response activities.

Funding required \$200,000

DISEASE SURVEILLANCE

Expansion of the Participatory Mobility Mapping (PMM) in remaining 4 provinces of Nepal to
identify priority locations that are most vulnerable to the spread of COVID-19 as a result of transborder flow of migrants. Identify the health and operational resources to calculate the overall
index of vulnerability and potential risk to public health and increase access to timely and quality
life-saving health assistance.

Funding required

\$700.000

- Developing the capacity of the federal, provincial and local bodies based on the findings of PMM activities.
- Train related government counterparts and key partners on involve them during the participatory
 mapping exercise to identify high-risk transmission mobility corridors and areas to inform national preparedness and response plans.
- Train government counterparts and other key partners on community evidence based surveillance by linking mobility information to surveillance data particularly within migrant-dense area based on the PPM findings.

POINTS OF ENTRY (POE)

- Conduct a health needs assessment at the point of entry and identify existing needs.
- Trainings for immigration, border and health staff to manage ill travelers and on infection prevention and control:
- Strengthen the referral mechanism at each of the POEs for the referral of migrants to quarantine and isolation facility for further management.
- Strengthen Community Event-Based Surveillance by linking mobility information to surveillance data, particularly among border communities, Points of Entry (PoE), and migrant dense areas in line with PPM.

Funding required

\$400,000

CASE MANAGEMENT AND CONTINUITY OF ESSENTIAL SERVICES

 Mobilize three team of Mental Health Psychosocial Support (MHPSS) for periodic assessment and PSS counselling to affected migrants and the family.

Funding required \$300,000

- Orientation to local elected bodies and government officials from western two provinces with high flow of returnee migrants from India on PSS and Stigma reduction;
- Provide MHPSS support to at least 800 migrant workers with confirmed COVID-19 cases requiring
 Psychosocial Support;
- Mobilize Migrant Network for community assessment for identification of migrant requiring MHPSS support after being affected from COVID-19.

PROTECTION

Migrants Family Reunification: mapping and tracing of returnee migrants that are admitted to isolation/quarantine facilities and Stranded across Borders.

Funding required \$500,000

- Temporary accommodation and logistic support.
- Return assistance (ground transportation allowance in cash) and communication support to migrants to reunite with their families and within their communities.
- Legal counselling and referral services to aspiring/returnee migrants for access to remedy and compensation related to foreign employment, labour migration and safer migration procedure
- Capacity building, community mobilization, awareness raising activities, community outreach targeting Civil Society Organization (CSO)s, local bodies, communities to address trafficking in person, stigma, fear, gender based violence (GBV), domestic violence associated risks, vulnerabilities with COVID 19.
- Direct MHPSS interventions targeting migrants and vulnerable communities, Victim of Trafficking to address metal health wellbeing, fear, stigma, GBV, Domestic violence, xenophobia.

ADRESSING SOCIO-ECONOMIC IMPACT

 Cash grant for families of returning migrants to support their essential needs upon return (transportation, and immediate livelihood needs)

Funding required \$1,700,000

- Rapid assessment to map returnee migrant workers and their skills and private sector needs and employment opportunities for unemployed Nepali workers at all provinces.
- Financial literacy trainings and support to households with migrant workers through series of community outreach programs at the local level, and at national through media to encourage productive utilization of the remittances and investments to create jobs locally.



SUMMARY OF IOM NEPAL PROJECTS WITHIN THE APPEAL FOR COVID-19

S. No.	AREA OF INTERVENTION	TOTAL REQUESTED AMOUNG (USD)
1	COORDINATION AND PARTNERSHIP	200,000
2	RISK COMMUNICATION AND COMMUNITY ENGAGEMENT	200,000
3	DISEASE SURVEILLANCE	700,000
4	POINT OF ENTRY (POE)	400,000
5	CASE MANAGEMENT AND CONTINUITY OF ESSENTIAL SERVICES	300,000
6	PROTECTION	500,000
7	ADDRESSING SOCIO-ECONOMIC IMPACT	1,700,000
TOTAL APPEAL		4,000,000

All interventions proposed in this appeal are in line with the Country Preparedness and Response Plan of Nepal.

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