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**Reporting Period: 1 - 13 May 2020**

# Arab States Region

## COVID-19 Situation Report No. 3

United Nations Population Fund



### Regional Highlights

- The region hosts some of the world's worst humanitarian crises. Prior to the COVID-19 pandemic, more than 62.5 million people were in need of humanitarian assistance, including 15.5 million women of reproductive age of whom an estimated 1.5 million are pregnant.
- All countries in the region have now confirmed Covid-19 cases. The numbers continue to rise and have doubled since the last report on 30 April. After years of protracted crisis, people's resilience is weakened, and the fragile health systems in countries such as Yemen, Syria, Libya, and Somalia, are ill-equipped for the COVID-19 response. Governments have adopted various forms of partial or complete lockdowns. The deteriorating socio-economic situation creates further hardship in already fragile settings.
- UNFPA Arab States Regional Office and country offices support governments and work with UN agencies and national and international partners to minimize disruption to lifesaving sexual and reproductive health (SRH) and gender-based violence (GBV) services, provide protective personal equipment (PPE) and support safety of patients and health workers through strengthening infection, prevention and control. Amid movement restrictions, alternate solutions to deliver services are underway including virtual outreach, mobile clinics, home visits, hotlines and provision of dignity kits in isolation centres.
- With the end of Ramadan (23/24 May) approaching, governments are considering gradual phasing out of the most severe lock-down measures.
- As governments need to put in place evidence-based public health measures to avoid new spikes in infection rates, UNFPA continues its support in the context of the [2020 WHO global strategic preparedness and response plan](#), the [Covid-19 Global Humanitarian Response Plan](#), and the [UNFPA COVID-19 Global Response Plan](#) and the various emerging socio-economic support frameworks.

### Situation in Numbers

 **147,169** Confirmed COVID-19 Cases

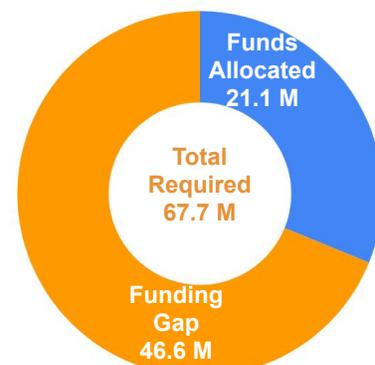
 **2,263** COVID-19 Deaths

Source: WHO 15 May, 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

The UNFPA response in the region aligns with the [2030 Agenda](#), [WHO global strategic preparedness and response plan](#), [UN-coordinated global humanitarian response plan](#), the [UN framework for socio-economic response to COVID-19](#), and [UNFPA COVID-19 global response plan](#).

UNFPA is consolidating a COVID-19 data-platform to support demographic analysis and epidemiologic profiling of COVID-19 in Arab countries for SRH and GBV preparedness and response.

UNFPA regional office and the League of Arab States issued a briefing note on [Ageing and Covid-19 in the Arab region. Leaving no one behind](#) on the effects of COVID-19 on older people in the Arab region.

UNFPA continues to participate in the WHO (regional office for the Eastern Mediterranean) regional crisis management group and sub-working groups (risk communication and community engagement; humanitarian settings and displaced population) and co-chairs the regional inter-agency gender theme group and its GBV Covid-19 sub-working group ensuring integration of GBV within health.

Country offices are working closely with governments, UN agencies, and other partners to ensure the continuity of SRH and GBV services. UNFPA is engaged in the various coordination mechanisms including the UN Country Team and Humanitarian Coordination Team, and supports the respective national COVID-19 Preparedness and Response Plans ensuring integration of SRH and GBV concerns.

In humanitarian settings, UNFPA leads the GBV sub-cluster coordination, under protection cluster, and SRH sub-working groups in the health cluster. Country offices are also coordinating the procurement and shipment of humanitarian relief supplies. UNFPA supports COVID-19 Humanitarian Operation Cells, or similar mechanisms, to address service delivery constraints and advocate for physical access.

Various COVID-19 impact analyses are looking into the impact on SRH and increased risk of GBV among women and girls, including those most vulnerable such as persons with disabilities, older persons, refugees, internally displaced persons and migrants.

Emerging challenges are related to continuity of on-site SRH and GBV service provision in a context of limited physical mobility, and increased funding gaps for pre-existing humanitarian programmes as donor priorities shift toward COVID-19.

## Continuity of SRH interventions, including protection of health workforce

At regional level. UNFPA provided technical guidance on [SRH and Midwifery Care in the context of Covid-19](#), [Supply Chain Management in the context of Covid-19](#), and a [position paper on the impact of Covid-19 on sexual and reproductive health and reproductive rights in the Arab region](#).

### UNFPA Country Offices have supported continuity of SRH interventions by:

- Procuring personal protective equipment (PPE) for frontline healthcare workers delivering both Covid-19 and non-Covid-19 related SRH and GBV services (medical masks, gloves, goggles)
- Training of frontline healthcare workers, including provision of infection, prevention and control (IPC) measures in health facilities, rolling-out standard operating procedures and guidance for COVID-19, with regard to pregnant women/delivery, and adaptation of training packages including on normal deliveries and C-sections;
- Disseminating relevant information, education and communication materials in line with WHO guidelines;
- Establishing alternative delivery modalities (e.g. mobile outreach and home visits) where SRH services have been shut down or severely curtailed;
- Advocating with stakeholders for continuity of services (Jordan), awareness-raising and information sharing; and
- Conducting assessments of impact of COVID-19 on SRH services with concern of countries with fragile health systems, which will impact service provision and cause significant immediate and secondary effects.

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

#### Country examples:

- **Syria:** [UNFPA continues to work](#) to ensure that pregnant women with suspected, probable, or confirmed COVID-19, including women and girls who may need to be in isolation, have access to woman-centred, dignified and skilled care. Mobile teams and clinics supported by UNFPA in all Syrian governorates are working to ensure that pregnant women, women in labor and lactating women, including those who are quarantined, have timely and safe access to RH services. For the protection of health workers, UNFPA is procuring PPE and medical equipment for maternity wards. UNFPA also conducted awareness raising sessions on COVID-19 through reproductive health static clinics and mobile teams.
- **Somalia:** Jointly with WHO, supported the Puntland Bureau of Forensic Science to establish the laboratory testing capacity for COVID-19. While [supporting Covid-19 prevention and mitigation measures](#) in maternal health facilities across the country, UNFPA also maintained the continuity of and access to quality life-saving essential SRH information and services for women, adolescents and youth.
- **Djibouti:** Supported the MoH in developing the COVID-19 response plan including the infection, protection and control component.
- **Jordan:** Supporting the reopening of SRH clinics in host communities, initiating SRH remote counselling services. The national ‘Eleek O feed’ COVID-19 Campaign will include SRH and youth messages.
- **Sudan:** UNFPA is [helping to sustain SRH services](#) during the pandemic, with a focus on people with disabilities. UNFPA and local partners are scaling up efforts to ensure continuity of the referral systems for women and girls while also providing training to midwives on protection, hygiene and prevention measures in maternity units.
- **Libya:** Highlighting the crucial role of midwives in ensuring sexual and reproductive health services during the pandemic and conducted three trainings on COVID-19 and safe motherhood through UNFPA’s partner IMC in collaboration with MoH and the Libyan Midwifery Association. A mobile medical unit, attached to two Primary Healthcare Centers in Tripoli provided essential RH services, including maternal and newborn healthcare. UNFPA distributed personal protective equipment (PPE) items in Tripoli, Sabha and Brak Alshati.
- **Yemen:** Ensuring the provision of RH services in all UNFPA-supported health facilities across the country, including in facilities where COVID-19 cases have been isolated, while reinforcing infection prevention and control in maternal and emergency obstetric care. UNFPA was quick to mobilize its implementing partners in providing infection prevention equipment and supplies to all supported health facilities in the north and south of the county. Maternity wards, in particular, are being continuously disinfected and all hospital nurses and midwives were provided with PPE. As a first-line responder, UNFPA availed 40 ventilators that were positioned for emergency obstetric care to respond to the pandemic, and another 40 ventilators are being shipped to the country. The Rapid Response Mechanism, led by UNFPA, and delivering food, hygiene and dignity kits, is providing immediate assistance to those displaced, and in quarantine centres.
- **Palestine:** Conducting SRH coordination, monitoring, and advocacy within the SRH Working Group (co-chaired by MOH/UNFPA, [Situation Report on behalf of the health cluster](#)), and is providing technical guidance on SRH issues to the MOH and key partners. UNFPA is procuring PPE for SRH workers and is planning IPC trainings for key SRH staff in Gaza and the West Bank. UNFPA is also supporting key NGOs to provide adapted health services, such as home ANC/PNC visits for high risk pregnant women.
- **Iraq:** Supports the Ministry of Health’s efforts to combat COVID-19 through online training of health service providers, midwives, nurses and doctors on the Covid-19 mitigation measures in delivery rooms and reproductive health clinics. All the UNFPA-supported reproductive health facilities continue to provide uninterrupted services.
- **Egypt:** UNFPA continues to protect the physical health of frontline health workers by providing PPE, in collaboration with the Ministry of Health and Population, and in line with WHO specifications. UNFPA also supported the development of standard operating procedures for antenatal care, delivery and post-natal service providers in the context of COVID-19.
- **Lebanon:** Supported the training of 1,000 healthcare providers (social workers, midwives and doctors) on COVID-19 and pregnancy through the National Technical Committee on Pregnancy and COVID-19. Information on pregnancy and COVID-19 is shared by The Syndicate of Social Workers through social media, phone, and SMS.

### Addressing GBV

UNFPA, in partnership with other UN agencies, produced a Policy Brief on the [Impact of COVID19 on Gender Equality in the Arab Region](#) and published a brief on COVID-19 and [Essential Services Provision for Survivors of Violence Against Women and Girls](#). UNFPA, also contributed to a Best Practice Toolkit developed through the UN Regional Gender Theme Group on how to provide services to women and girls. UNFPA regional office, jointly with UN Women and UN Economic Commission for Western Asia, issued an [open letter to the national governments](#) calling upon them to address domestic violence during the COVID-19 pandemic. A webinar on COVID-19 and Essential Services Provision for sexual violence survivors is planned for June and will convene key stakeholders of the health, police and justice and social sectors from the region.

The **Regional Syria Response Hub** developed a [donor advocacy brief](#) on critical GBV services during COVID-19 to continue prioritising all types of GBV interventions and the necessity of flexibility when adapting services. The brief underscores the importance of leveraging innovative methods to support GBV survivors and women and girls at risk throughout the crisis, particularly in light of lockdowns and movement restrictions. The Hub also published a [guidance note](#) on GBV service provision for Whole of Syria during COVID-19, serving as a framework for frontline GBV service providers to deliver timely, dignified and safe GBV services during the pandemic.

At country level, UNFPA continues to address GBV by:

- Developing online media and advocacy tools on GBV prevention and response during COVID-19 and working with faith-based leaders and community networks to provide weekly seminars on protection/GBV-related issues.
- Distributing dignity kits adapted to COVID-19 for female healthcare workers, women and girls in quarantine and isolation, and refugees and asylum seekers.
- Reviewing and updating referral pathways and services addressing GBV to compensate for the disruption of services, in particular for clinical management of rape, and offering the essential package of services to address various GBV prevention and response needs at UNFPA-supported safe spaces.



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UNFPA Yemen: A woman receiving reproductive health care in WHO/UNFPA-supported Al Thawra hospital in Al Hodeida.

### Addressing GBV (continued)

#### Country examples

- **Palestine:** UNFPA leads the protection cluster on rolling out GBV/protection training for staff (police, officials from ministries of health, interior and social development) working at quarantine centres in Gaza. About 1,600 dignity kits have been procured and are set to be distributed along with cash assistance in the amount of \$200,000. UNFPA is supporting the scale up of hotlines and virtual services to be 24 hours a day. The UNFPA-supported hotline run by SAWA has reported a 20% increase every week, with some 420 calls in the last week alone. Women with disabilities are a key focus for GBV interventions in particular.
- **Yemen:** GBV services are continuing with alternative working modalities such as telecounseling, distancing measures and the use of social and mainstream media.
- **Morocco:** A [digital campaign against intimate partner violence](#) reached more than 460,000 hits on social media 7 days after its release and was widely broadcast on national television and radio stations. The campaign raises public awareness of the impact of social isolation, informs women and girls at risk of domestic violence about available protection and care measures, and promotes positive messages to support a non-violent behavior. The President of the Public Prosecutor's Office shared, on April 30, a circular calling on public prosecutors to create digital counseling platforms, set up email addresses to receive complaints, and continue and reinforce GBV data collection and reporting.
- **Libya:** Under the joint Rapid Response Mechanism, supported 433 displaced families with relief items including dignity kits. The “Psychosocial Support Hotline 1417” established by UNFPA through its partner provides psychosocial support and consultations related to emotional, domestic and physical abuse issues.
- **Egypt:** reprogrammed resources available for female genital mutilation (FGM) and early marriage to be inclusive of COVID-19 Response to reach communities through alternative communication means. This included distribution of dignity kits with messages on harmful practices of FGM and early marriage.
- **Jordan:** Supports a gradual reopening of women and girls safe spaces in camps and host communities. Together with Plan International, conducted a rapid assessment on COVID-19 impact on SRH and GBV concerns among adolescent girls in urban and host communities.
- **Djibouti:** UNFPA leads GBV working group with planned joint activities including GBV needs assessment, establishment of a GBV case management committee, and support to an emergency hotline (“green line”).
- **Syria:** UNFPA continues its [Covid-19 GBV response](#) and sustains recreation activities previously conducted at the WGSS through group sessions by using social media to engage women and girls. UNFPA caseworkers continue to provide individual psychosocial support and GBV case management at the WGSS, with staff rotation measures in place to ensure adherence to COVID-19 prevention measures.



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UNFPA Palestine: A midwife at Holy Family Hospital, Bethlehem.

### Risk communication and community engagement

UNFPA offices continue to engage in risk communication and community engagement through:

- Communication platforms such as podcasts, hotlines, and media to reach as many people as possible .
- Joint awareness raising, education, and activism with wide range of partners, including communities.
- Participation in regional and country level risk communication and community engagement working groups.

At regional level, UNFPA is working on a joint UN region-wide awareness campaign, which will feature messages by celebrities from the region on GBV and COVID-19.

Several countries (e.g. Yemen and Palestine) reported a significant drop in demand for antenatal and postnatal care, a sign that women are unwilling to seek health care during the pandemic. As numbers of women seeking antenatal care are gradually increasing, the need for risk communications and community engagement remains a priority.

#### UNFPA support at country level:

- **Palestine:** The inter-agency Risk Communication and Community Engagement task force has dedicated several weeks to messaging around pregnancy (when and where to seek services, pregnancy and lactation in the context of COVID-19), and to women at risk of GBV, and PSEA (hotlines and available services). UNFPA is the chair of the country level Protection against Sexual Exploitation and Abuse work. It aims to build a strong and common complaints mechanism among the Humanitarian Country Team members, and is currently rolling out a COVID-specific interim response.
- **Sudan:** Led an 18 days campaign in all states, rolled out by youth networks and NGOs to raise awareness about COVID19 risks. Youth and NGOs patrolled gatherings and high risk areas and sent out risk awareness messages through loudspeakers. The campaign has so far reached 261,949 people in all states. Youth networks also recorded and aired a 6 days-long local language radio campaign in Kassala state, covering prevention methods, stay at home orders and how to report symptoms to authorities. UNFPA supported partners reaching 115 members of community-based protection network with COVID-19 awareness sessions.
- **Egypt:** Three episodes of Peer Cast have gone live, focusing on raising awareness on COVID-19, during which experts from the WHO are interviewed. Other episodes are slated to focus on sexual and reproductive health and gender-based violence and harmful practices. The episodes have been posted on YPEER's social media platforms, as well as UNFPA's website and social media.
- **Algeria:** Supports health service providers' testimonies on ensuring continuity of SRH services.
- **Oman:** Addressing the stigma related to the pandemic by promoting message of tolerance through its Y-Peer Network. A social media campaign in support of front line health care workers focuses on the need for their protection.
- **Jordan:** Joined the national campaign 'Eleek O feed" on spreading awareness on how to prevent COVID 19, including through SRH and GBV messages for youth. UNFPA also supported the national Y-Peer network to deliver online awareness training on Covid-19 and youth and online training for YPS new coalition members.
- **Somalia:** Continues to mobilize and sensitize on signs/symptoms and prevention of COVID-19 through TV, radios and social media platforms. Large billboards promote correct hand washing hygiene.
- **Iraq:** In collaboration with the Human Rights Office of the UN Mission in Iraq, UNDP, UNOPS, and UN Women, drafted joint messages on domestic violence to be shared through social media, SMS, TV, and radio.
- **Yemen:** UNFPA uses its extensive outreach to communities with an average of 250,000 beneficiaries per month, primarily women and girls, to raise awareness about COVID-19.
- **Syria:** To ensure sustainability of the women networks and women and girls safe spaces, UNFPA and partners leverage social media platforms, for timely and accurate information sharing related to COVID-19.

### Risk communication and community engagement (continued)

#### UNFPA support at country level

- **Morocco:** In partnership with the Ministry of Solidarity, Social Development, Equality and Family, and the Belgian Cooperation, and joined by over 20 Moroccan journalists, actors and influencers, launched a digital campaign to raise awareness and prevent violence against women and girls in the context of Covid-19. A [campaign](#), with ANARUZ NGO Network and supported by Global Affairs Canada, raises awareness on violence against women displaying helpline information in hospitals, grocery stores and pharmacies.
- **Djibouti:** Continues to work with the Y-Peer network, the midwives network and religious leaders (Shamikhat) conducting awareness campaigns on the ground and via social media, and TV.
- **Libya:** Organized a live discussion at Radio Nas (Tripoli), hosting a guest from MoH, a midwife, and UNFPA staff.



**UNFPA regional office and country offices** are turning a negative situation into a positive.

During the COVID-19 crisis, most host countries have applied restrictive measures, bringing most operations into the digital world. To meet the demands of the current reality, communication teams throughout the region have stepped up to the challenge. Communication officers are working closely with the various thematic advisers, host governments, donors, partners, and UN agencies to produce informative material and educational products in Arabic and English. The work includes brochures, posters, TV spots. UNFPA uses traditional media to target rural communities and specific segments of populations that do not have access to the Internet and/or any form of digital access to information.

UNFPA is expanding its reach by running targeted campaigns. Through coordinated efforts between headquarters, regional and country offices, UNFPA is becoming the knowledge hub for all matters related to the wellbeing of pregnant women and their newborns. Such coordinated efforts were highlighted during the most recent International Day of Midwives. UNFPA contributed content to web stories published on UN secretariat's news site and social media platforms. UNFPA global website and global social media accounts made use of produced content, recognizing the great work done by and with midwives throughout the region. UNFPA also used every opportunity to highlight the efforts of partners and donors on the ground.

The collective regional social media activities reached over one million online users. Moreover, there is a noticeable increase in websites' traffic. UNFPA will build on this momentum moving forward by showcasing UNFPA and partners' work, research and advocacy..

### Global, regional and country level efforts:

- [Thank you campaign for medical staff](#): A thank you campaign dedicated to all medical staff and first responders on the frontlines, using the hashtag, [#متضامنون\\_مع\\_القلوب\\_الرحيمة](#). From End of April to 5 May, the campaign focused on Midwives and their heroic role in making every delivery a safe one.
- Regional **UN inter-agency campaign** (ESCWA, WHO, UNFPA, UNWOMEN, UNICEF, UNODC) with gender themed COVID-19 messages through social media.
- [Campaign with LAS](#): The region continues to take part in two social media campaigns: #Tell\_Your\_Story – Initiative to make Arab women's voice heard. This campaign was launched in cooperation with UNFPA regional office, UN Women, WHO, UNHCR, and the League of Arab States to document Arab women's stories, challenges, and roles during their fight against COVID-19. Women and girls in the region are invited to tell their stories.
- [Joint Op-Ed-- UNFPA Regional Director and WHOEMRO Regional director](#).

### Country Stories:

- **Yemen**: [WHO, in partnership with UNFPA, ensures availability and access to lifesaving reproductive health services in Yemen](#)
- **Yemen**: [COVID-19 strikes Yemen as humanitarian funding dries up](#)
- **Algeria**: [Algerian Midwife Portrait: Ms Zohra ROUANE](#)
- **Egypt**: [A day in the life of a pregnant woman](#)
- **Libya**: [Midwives are the backbone of healthy communities: the story of Nuam'a](#)
- **Somalia**: [Somalia needs to invest in midwifery now more than ever](#)
- **Sudan**: [COVID-19 is a crisis for women in Sudan](#)
- **Regional Syria Response**: [Covid-19 Regional Syria Crisis Donor Update](#)
- **Tunisia**: [Covid-19 media products and articles](#)



UNFPA Yemen: mobile medical teams continue to provide reproductive services. © UNFPA

UNFPA Iraq: Providing reproductive health counseling. © UNFPA



UNFPA Somalia: A midwife weighing a newborn. © UNFPA

In Djibouti, UNFPA distributes hygiene and cleaning products to women and girls.



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Raymah, Yemen. A woman producing face masks for community members



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UNFPA Algeria: Midwives celebrating International Day of The Midwife (IDM) 2020

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... Afficher la suite



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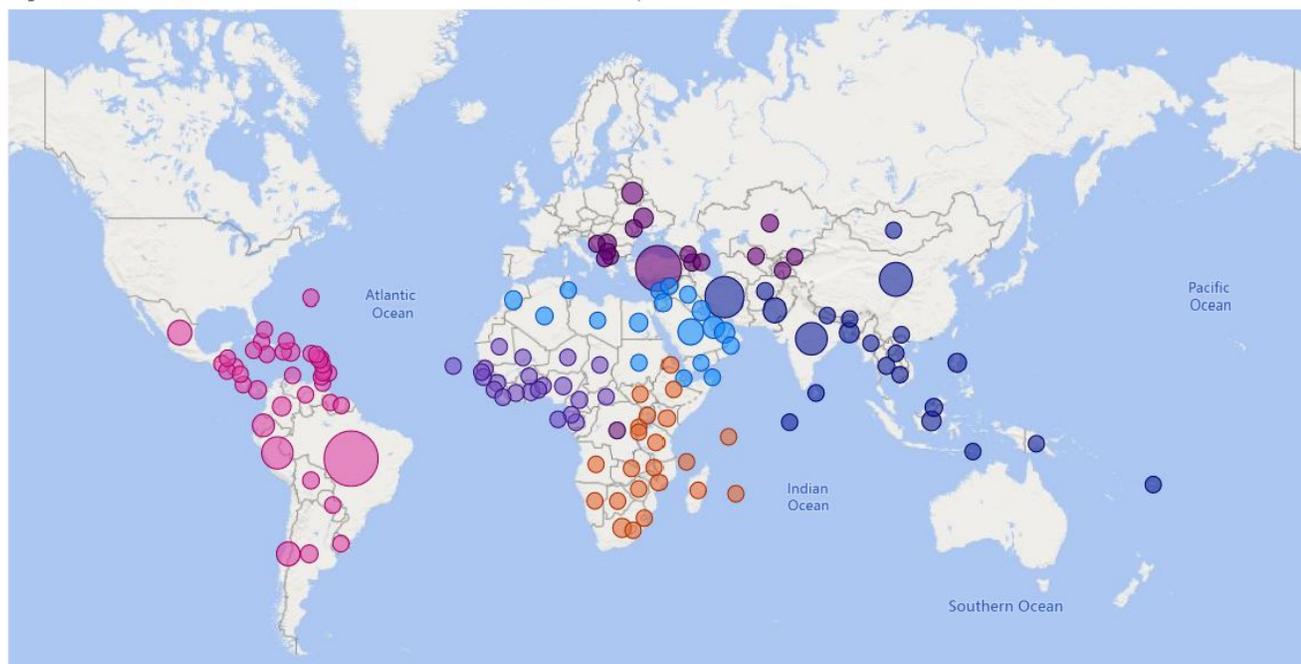
UNFPA Algeria: SRH testimonies

## Confirmed Cases and Deaths (UNFPA programme countries) WHO, 15 May 2020

Country	Confirmed Cases	Deaths
Algeria	6,442	529
Djibouti	1,268	3
Egypt	10,829	571
Gulf Cooperation Council*	112,541	610
Iraq	3,143	115
Jordan	586	9
Lebanon	886	26
Libya	64	3
Morocco	6,593	189
Palestine	548	4
Somalia	1,284	53
Sudan	1,818	90
Syrian Arab Republic	48	3
Tunisia	1,032	45
Yemen	87	13
<b>Total Arab States Region</b>	<b>147,169</b>	<b>2,263</b>

### Confirmed Cases by Country and Region

Region ● Arab States ● Asia and the Pacific ● East and Southern Africa ● Eastern Europe and Central Asia ● Latin America and the Caribbean ● West and Central Africa



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