January - December 2021

The report provides an overview of the migration health activities in the Regional Office (RO) Vienna and throughout South-Eastern Europe, Eastern Europe and Central Asia (SEECA) in 2021. Within its Migration Health Division (MHD), IOM delivers and promotes comprehensive, preventive and curative health programmes which are beneficial, accessible, and equitable for migrants and mobile populations. Bridging the needs of both migrants and IOM member states, MHD, in close collaboration with partners, contributes towards the physical, mental and social well-being of migrants, enabling them and host communities to achieve social and economic development.

IN THIS REPORT: COVID-19 Prevention and Treatment in the Western Balkans; IOM’s Monitoring of Migrants’ Inclusion in National Vaccination Plans; COVID-19 Vaccination and Risk Communication projects in North Macedonia, Armenia and Bosnia and Herzegovina; Health and Border Management projects in Central Asia and Moldova; Health Assistance to Conflict-Affected Populations in Armenia, Ukraine and Kosovo*; Air Pollution Reduction in Migrant Residential Areas in Kyrgyzstan; Awareness-Raising on Migration and Mental Health and Disability issues in Tajikistan; Tuberculosis Prevention among Migrants in the Republic of Moldova, and much more...

*All references to Kosovo in this report shall be understood to be in the context of Security Council Resolution 1244/1999
# TABLE OF CONTENTS

## MHD Annual Report 2021 - Content Overview

<table>
<thead>
<tr>
<th>Section</th>
<th>Pages</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>MHD Introduction &amp; Facts and Figures</strong></td>
<td>3-5</td>
</tr>
<tr>
<td>Foreword by the MHD Regional Thematic Specialist</td>
<td>3</td>
</tr>
<tr>
<td>MHD Project &amp; Budget Overview</td>
<td>4</td>
</tr>
<tr>
<td>MHD 2021 in Numbers</td>
<td>5</td>
</tr>
</tbody>
</table>

| **COVID-19 Prevention & Treatment**          | 6-7   |
| Addressing COVID-19 Challenges within the Migrant & Refugee Response in the Western Balkans | 6     |
| Vaccinating Vulnerable Migrant Populations in Armenia and North Macedonia | 7     |

| **COVID-19 Vaccination**                     | 8-10  |
| Monitoring of Migrants’ Inclusion in National Vaccination Campaigns | 8     |
| COVID-19 Vaccination in Armenia & North Macedonia | 9     |
| COVID-19 Vaccination in Bosnia Herzegovina   | 10    |

| **Health Border Management**                 | 11-13 |
| Border Management Staff Course in Tajikistan | 11    |
| CDC Project for Border Health Management in Central Asia | 11-12 |
| Building Capacity of Borders and Penitentiaries in the Republic of Moldova | 13    |

| **Health in Humanitarian Contexts**          | 14-16 |
| Humanitarian Assistance to Forcibly Displaced Populations in Armenia | 14    |
| Ukraine 2019 Crisis Response Plan            | 15    |
| Strengthening the Response for U.S. bound Afghan Evacuees in Kosovo | 16    |

| **Non-Communicable Diseases and Risk Factors** | 17     |
| Air Quality and Health Impacts in Migrant Settlements in Kyrgyzstan | 17     |
| Mental Health and Disability Issues among Returnees in Tajikistan | 17     |

| **TB and Gender**                            | 18     |
| Gender-Sensitive TB Prevention and Treatment in Moldova | 18     |
Welcome to the 2021 Annual Report of the Migration Health Division at the Regional Office Vienna.

The year of 2021 marked the start of the COVID-19 vaccine deployment, and with it, renewed hope for the pandemic’s end. Millions of COVID-19 vaccine doses were administered throughout the year across the SEECA region, yet refugees, migrants and displaced populations often remained neglected by national vaccination programmes. In an effort to promote equitable access to COVID-19 vaccination for migrants, IOM has been actively calling on the Governments in the region to count and include all migrants present in their territories, regardless of legal immigration status, in national COVID-19 vaccination plans, as no one will be safe until everyone is.

IOM has been closely monitoring migrants’ inclusion in COVID-19 vaccination campaigns and conducted a wide range of activities to promote vaccination of migrants. This year’s MHD Annual Report provides insight into these activities, including bringing COVID-19 vaccination to remote villages in Armenia, raising awareness in transit reception centres in North Macedonia, and advocating for the inclusion of migrants in COVID-19 vaccination in Bosnia and Herzegovina. It celebrates inter-sectoral action and cross-border cooperation in Central Asia and the Western Balkans to build COVID-19 prevention and response capacity.

Besides the public health crisis, the region faced several challenges, as new conflicts erupted in 2021 and ongoing crises persisted or exacerbated. Mass evacuations took place following the political transition in Afghanistan, and large numbers of civilians were forced to flee their homes in Armenia and Ukraine. IOM has been addressing the immediate needs of forcibly displaced populations by deploying mobile health clinics and medical teams to reach the hard-to-reach groups, distributing information, providing mental and physical health assistance and psychosocial support and counselling. Other IOM projects presented in this report aim to reduce the tuberculosis burden among labour migrants in the Republic of Moldova, raise awareness about the deteriorating air quality in migrant residential areas in Kyrgyzstan, and improve response for returnees in Tajikistan who have mental health problems or acquired a disability while working abroad.

The increased need for MHD programming in the region is also visible in the budget—which tripled compared to five years ago—and increased the workload. The MHD team of the Regional Vienna would therefore like to thank all IOM staff in the missions, partners and donors who contributed to promoting migrant health in 2021. Special thanks go to the IOM colleagues who provided the content and feedback for this report: Nune Asatryan, Dren Berishaj, Zulaika Esentaeva, Philipp Freudenthaler, Vanja Laziridis, Violina Nazaria, Treisi Resuli, Rukhshona Qurbonova, and Margherita Vismara.

Lastly, we take this opportunity to thank Juliette Nicolaï who recently graduated from a Master’s Degree in Global Health at the University of Copenhagen and joined the IOM Regional Office in Vienna as Regional Migration Health Intern in November 2021. She has been instrumental in producing this Annual Report, in addition to supporting the team.

On behalf of the IOM RO Vienna MHD Team, it is my pleasure to present the 2021 MHD Annual Report to you, we hope you enjoy this issue.

Regards,
Dr Jaime Calderon
Migration Health 2021—Facts & Figures

Migration Health - Project Overview

<table>
<thead>
<tr>
<th></th>
<th>11 Active MA/MP projects</th>
<th>7 New MA/MP projects endorsed in 2021</th>
<th>14 Cross-cutting projects (MA/MP as secondary project code)</th>
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</thead>
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Number of MA/MP Projects

<table>
<thead>
<tr>
<th>Primary Project Code</th>
<th>Secondary Project Code</th>
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<tbody>
<tr>
<td>MP</td>
<td>MA</td>
</tr>
</tbody>
</table>

Thematic Focus - MA/MP Projects

MA: Health Promotion and Assistance to Migrants; MP: Migration Health Assistance to Crisis Affected Populations

Migration Health - Budget Overview

<table>
<thead>
<tr>
<th></th>
<th>2,660,845 $</th>
<th>2,305,858 $</th>
<th>354,986 $</th>
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<tr>
<td>Total Budget for MA/MP Projects in 2021</td>
<td>Budget for MP Projects</td>
<td>Budget for MA Projects</td>
<td></td>
</tr>
</tbody>
</table>

Budget for MA & MP Projects per Implementing Mission in 2021 in USD

<table>
<thead>
<tr>
<th>Country</th>
<th>Budget 2021 in USD</th>
</tr>
</thead>
<tbody>
<tr>
<td>Kosovo</td>
<td>51,909</td>
</tr>
<tr>
<td>Uzbekistan</td>
<td>154,374</td>
</tr>
<tr>
<td>Kazakhstan</td>
<td>154,375</td>
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<tr>
<td>Kyrgyzstan</td>
<td>182,200</td>
</tr>
<tr>
<td>Moldova</td>
<td>189,695</td>
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<tr>
<td>Macedonia</td>
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<td>Armenia</td>
<td>296,910</td>
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<tr>
<td>Tajikistan</td>
<td>323,812</td>
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<tr>
<td>BIH</td>
<td>397,116</td>
</tr>
<tr>
<td>Turkey</td>
<td>404,282</td>
</tr>
</tbody>
</table>

Budget for MA & MP Projects in USD per Year

Funding by Type of Donor in 2021 in USD

- Government
- United Nations
- IDF
- Other
Migration Health in the SEEECA Region in Numbers

Based on IOM missions’ reporting on MHD indicators

- **857,750**
  - # of persons directly reached with health promotion and/or RCEE efforts in 2021

- **222**
  - # of Points of Entry (POE) supported in 2021

- **80**
  - # of persons trained in TB detection and referral through IOM programming in 2021

- **24**
  - # of implementing partner organizations engaged in 2021

- **13,980**
  - # of referrals to higher levels of care in 2021

- **47**
  - # of mission personnel working on health programming in 2021

- **16,764**
  - # of consultations provided by IOM-managed/IOM-supported PHC facilities in 2021

- **51,332**
  - # of MHPSS activities provided in 2021

- **150**
  - # of PHC facilities built, rehabilitated, or supported with essential supplies or equipment by IOM in 2021

COVID-19 VACCINATION IN BIH © IOM BIH 2021
COVID-19 Prevention & Treatment in the Western Balkans

**Key Project Achievements in 2021**

- Health authorities in host communities were supported
- COVID-19 infections rates among migrants remained equal or below infection rates among the local population in all 6 countries and territories
- Image of migrants as carriers of the virus was countered and no major incidents were recorded in host communities
- Migrants were included in government vaccination plans
- MHPSS services for migrants remained operations and were scaled up when necessary

Implemented through a Multi-Partner Contribution Agreement with IOM and the United Nations High Commissioner for Refugees (UNHCR), this project supported a coordinated response for COVID-19 prevention and risk mitigation across six Western Balkans countries and territories, namely Albania, Bosnia and Herzegovina (BiH), Montenegro, North Macedonia, Serbia and Kosovo. The proposed action aims to alleviate gaps and provide immediate solutions to the most urgent needs of project partners in their response to the COVID-19 outbreak, filling critical gaps for a timely and effective response to prevent the spread of COVID-19 and to mitigate social and economic impacts which may lead to or exacerbate existing tensions within and between mobile and local communities.

The objective of this project was to protect migrants, asylum seekers, refugees and other vulnerable persons by ensuring that systems and services in place were supported, reinforced and could be quickly adapted to the measures that had to be implemented in response to the COVID-19 pandemic. Personal protective equipment (PPE), Plexiglas screenings and disinfection equipment and supplies were donated, as well as and medical and testing equipment and containers for screening. Online training on COVID-19 in migration and border management was conducted to enhance authorities’ preparedness to respond to the pandemic. To further prevent COVID-19 transmission among migrants, COVID-19 medical screening, testing and care to migrants and asylum seekers was provided in 31 reception facilities, and information on COVID-19 infection risks and prevention measures in 33 reception facilities. Two new reception centres opened and 17 were refurbished or equipped with isolation areas, medical wards and additional water, sanitation and hygiene (WASH) facilities. In addition to COVID-19 prevention measures, Mental health and psychosocial support (MHPSS) services and recreational activities were provided, to counter the negative effects of the restrictive pandemic measures.
The COVID-19 pandemic disproportionately affected the most vulnerable groups such as women, non-majority communities and internally displaced persons in Kosovo. Women and children already vulnerable to domestic violence were at heightened risk, as reported domestic violence cases increased significantly. In addition, certain non-majority groups already at the socio-economic margin of society, such as the Roma, Ashkali and Egyptian communities, faced additional challenges. Against this background, the joint programme of IOM, UN Women and UNHCR aimed at addressing the heightened needs of these vulnerable groups by facilitating their access to social and health care services, life-saving support, access to information and communication, advocacy as well as socio-economic support. Within the joint programme, IOM was responsible for providing psychosocial support and counselling, medical examinations, assisting in establishing a referral system to address various community needs and improving information and awareness regarding COVID-19 prevention. In addition, IOM supported job seekers with highly relevant vocational and on-the-job training, provided other income generating opportunities for those in need and connected beneficiaries with potential employers. IOM’s intervention focused on the most vulnerable members of non-majority communities in 12 municipalities throughout Kosovo that lack an easy access to healthcare and other socio-economic activities.

The project was granted a one month no-cost extension until January 2021 in order to complete all necessary activities. During that time, IOM, in close cooperation with eight local NGOs, provided medicine and home medical equipment to 453 vulnerable beneficiary families of minority communities in Kosovo. IOM also conducted an intensive risk communication and community engagement campaign on COVID-19 protective measures as well as on debunking myths and countering misinformation, which reached around 350,000 individuals.
Monitoring Migrants’ Inclusion in Vaccination Campaigns

As countries are launching mass COVID-19 vaccination campaigns, IOM stands ready to support national authorities and other international organisations in the roll-out, at the policy, technical and operational level. IOM calls on countries of the SEECECA region to include all migrants present in their territories in national COVID-19 vaccine distribution plans, regardless of their legal immigration status, and has been monitoring the situation globally.

Migrants’ Inclusion: Plans Versus Practice

This graphic compares vaccine access for migrants as stated on National Deployment and Vaccination Plans (NDVPs) – based on WHO/IOM analysis, where available – against observations made by IOM regarding access in practice in the SEECECA region.

IOM Ongoing Activities to Facilitate Migrant Inclusion

In an effort to fill the gaps in migration inclusion, IOM is pro-actively working to facilitate vaccine access for migrants during the COVID-19 pandemic, and is engaging with governments to implement a range of interventions promoting COVID-19 vaccination of migrants.

Main Barriers to COVID-19 Vaccinations Observed in the Region

Impediments to vaccine access can significantly reduce immunisation rates among migrants and create “clusters” of under-vaccinated communities. The most important barriers regarding vaccination of migrants in the SEECECA region are the following:

- **Administration**—Specific ID documents or registration in a scheme is a prerequisite
- **Information/Trust**—Lack of tailored information and trust; vaccine hesitancy identified among migrants; insufficient messaging tailored to migrants
- **Supply**—Insufficient vaccines for everyone, not only migrants
COVID-19 Vaccination and Risk Communication

NORTH MACEDONIA & ARMENIA

Title: Improving access to COVID-19 Vaccinations for Vulnerable Migrants in Humanitarian Settings (MP.0555)
Donor: Swiss Agency for Development and Cooperation
Budget: USD 6,499,050
Duration: July 2021 — December 2021

Vulnerable migrant populations in humanitarian settings are disproportionately at risk of being left behind in national vaccination campaigns. IOM, in collaboration with GAVI, the World Health Organisation (WHO) and respective Ministries of Health (MoH), took on the mission to improve vaccination rates among the most hard-to-reach populations. Project activities include:

- assisting vaccine supply chain management through procurement and provision of dry storage, cold chain equipment and transportation to remote locations;
- supporting the direct implementation of vaccine administration, where requested, through targeted interventions in strategic locations;
- conducting social mobilisation activities in coordination with health partners and government officials;
- enhancing vaccination data management and quality through use of digital data collection tools, and support for collecting, inputting and analysing the data;
- conducting capacity-building for public officials and other partners on a variety of aspects of vaccine delivery;
- and monitoring access to vaccines for migrants and other vulnerable populations in order to advocate for inclusion in national vaccination planning and implementation.

In North Macedonia, the vaccination promotion team conducted discussion with 480 migrants, (391 men and 89 women) in the two transit reception centres in Kumanovo and Gevgelija, informing them on vaccination and assessing interest. Out of these migrants, 379 were vaccinated (41 with one dose and 298 with two doses). A total of 140 migrants expressed interest in vaccination, and 58 expressed interest in receiving a second dose.

In Armenia, IOM is providing COVID-19 vaccinations in the capital Yerevan and in remote villages via its mobile health teams, in partnership with the National Centre for Infectious Diseases (NCID) of the MoH. The mobile vaccination teams have visited 115 communities and vaccinated 6,017 individuals, including 2,790 women and 3,227 men.

IOM Armenia also delivered messages on the importance of vaccination and COVID-19 prevention, through the social media campaign “Sincere Talk”, implemented on Facebook and Instagram. The campaign gathered 7,701 and 1,111 followers on each social media platform respectively. 25 publications and 4 videos were shared during project implementation. The page reach was 162,633 on Facebook and 51,912 on Instagram. Furthermore, on the advice of the MoH, 134,000 animated Viber messages and 26,109 SMS messages on the importance of COVID-19 vaccination were sent to persons over 55 years.

“Mobile vaccination is one way to reach people residing in communities with limited access to medical providers or in communities where the health care facilities are overloaded.” (Nune Asatryan, IOM Project Coordinator)

“Thank you for bringing clinical staff, including nurses, and emergency medical technicians. People of our village can be vaccinated at the medical centre of the nearby town, however, traveling distance, lack of public transportation, mobility issues, and work and family care schedules make it hard for some people to get vaccinated.” (Anna Avagyan, Paramedic at the health post in Basen village)

“I was afraid of side effects of vaccination. The doctor of the mobile team screened me for contraindications and precautions before administering the vaccine.” (beneficiary)
In early 2021, the health authorities of Bosnia & Herzegovina (BiH) took the first steps to plan a country-wide COVID-19 vaccination programme. To date, the plan only targets health care workers, the elderly and individuals with critical medical conditions. While advocating for the inclusion of all migrants in the overall vaccination plan, IOM, WHO and the UN Children’s Funds (UNICEF) received an indication that vaccinating migrants would require the international community’s financial contribution. Also, while other countries in the region have already started the rollout of the COVID-19 vaccination, BiH is lagging because of the gaps in the cold chain establishment and procurement of medical consumables, like syringes and needles.

In response to the challenges faced by the Government of BiH in addressing the COVID-19 pandemic in its communities, IOM has been implementing a project that aims to improve access to prevention and vaccination services against COVID-19 for migrants, asylum seekers and refugees in temporary reception centres (TRCs) across BiH, particularly women, unaccompanied children, the elderly and persons with disabilities or with critical medical conditions. Efforts were undertaken to logistically support national authorities to vaccinate migrants against COVID-19 in reception facilities, which had a positive impact on access to COVID-19 vaccination for migrants in BiH. Advocacy of the UN agencies, increased outreach and awareness raising among migrants, and the cooperation with the cantonal Public Health Institutes (PHI) in BiH, led to the establishment of a monthly COVID-19 vaccination plan in TRCs, which will ensure follow up on second doses and more regular access to vaccines for all migrants in TRCs. The Federation of BiH included migrants into its COVID-19 vaccination campaign, leading to the immunisation of 763 migrants between September and November 2021, including 610 with the first dose and 153 with two doses. Once a month, vaccination is provided directly in the TRCs, with support by the cantonal PHI. The COVID-19 response is coordinated closely with other partners such as the Danish Refugee Council (DRC). Through this action, IOM also provided information on COVID-19 vaccination and on the importance of immunisation to 989 migrants and asylum seekers sheltered in reception facilities in BiH, using the printed materials, periodic information sessions and surveys on interest in getting vaccinated.
Health and Border Management

**CENTRAL ASIA**

**Title:** Enhancing the Health and Border Management in Kazakhstan, Kyrgyzstan, Tajikistan and Uzbekistan to respond to COVID-19 and other communicable diseases (MP.0370)

**Donor:** Centres for Disease Control and Prevention (CDC)

**Budget:** USD 600,000

**Duration:** October 2020 - June 2021

While migration and mobility are increasingly recognised as determinants of ill health and risk exposure, the COVID-19 pandemic emphasised that travel poses new challenges to cross-border disease control and underlines the need for innovative, systemic and multisectoral responses. This regional project implemented in four Central Asian countries (Kazakhstan, Kyrgyzstan, Tajikistan, Uzbekistan) aims to implement measures that help reduce spread of and the likelihood of contracting COVID-19 and other communicable diseases/public health threats by enhancing health management at the borders in Central Asia through strengthening response capacity, and enhancing inter-sectoral and cross-border cooperation at Points of Entry (PoEs).

In 2021, IOM in Central Asian countries launched the project by sharing an official letter about the purpose of the project and organising meetings with the national authorities. After obtaining the support of the health and non-health authorities for the project implementation in Kyrgyzstan, Tajikistan and Uzbekistan, IOM, in collaboration with state ministries and entities responsible for border health, established a multisectoral team to support the conducting of need assessment at PoEs. The Center for Disease Control and Prevention (CDC) Atlanta expert on border health conducted an online training on need assessment at PoEs for the IOM national consultants from Kazakhstan, Tajikistan and Uzbekistan, who later conducted a training on need assessment for the members of the multisectoral team. IOM Kyrgyzstan, IOM Uzbekistan and IOM Tajikistan designed the methodology, adapted the questionnaires (CDC questionnaire and IOM checklist), organised pre-field visits orientation trainings for the assessment team and jointly with the multisectoral team, completed the need assessment at 6, 8 and 12 PoEs respectively. A list of the required equipment for capacity building at PoEs was then drafted by national consultants and shared with national authorities. IOM Kyrgyzstan and Kyrgyz national partners, who had completed the need assessment first, shared their experience conducting a need assessment at PoEs with IOM colleagues, national consultants and the multisectoral team in Uzbekistan.

In the last quarter of 2021, IOM conducted four training of trainers (ToT) for 60 health workers in Kazakhstan, Kyrgyzstan, Tajikistan and Uzbekistan. Participants of the 3 days ToT for health workers were engaged in designing the agenda for the two-days cascade training for health workers that will be conducted next year as a part of the second phase of the project. IOM received a CDC Note Verbale relating support of the second phases of the project for 700,000 USD.

As agreed during the coordination meetings with WHO and CDC, WHO specialists were invited to all activities scheduled within the running project. WHO took part in the multisectoral meetings in Tajikistan and Uzbekistan. The national staff of the WHO Tajikistan was included in the list of the enumerators for the need assessment at PoEs in Tajikistan.

**Key Project Achievements in 2021**

- Support of the health and non-health authorities for the project implementation is obtained
- Multisectoral team is established and regular meetings are set up in Kyrgyzstan and Uzbekistan. Working meetings with border services and epidemiologists started in Tajikistan
- The need assessment at PoEs was conducted in Kyrgyzstan, Tajikistan and Uzbekistan
- The equipment required for the capacity building of the PoEs has been identified
- IOM lead coordination meetings with CDC and WHO on border health in Central Asia
- IOM Kyrgyzstan is involved in developing the Country Preparedness and Response Plan (pillar on POEs) lead by the Kyrgyz office of WHO and Ministry of Health of the Republic of Kyrgyzstan

**30th Staff Course of the Organisation for Security and Co-operation in Europe (OSCE) Border Management Staff College in Tajikistan**

On December 3 2021, Ursula Wagner, Regional Migration Health Coordinator, presented on public health surveillance and IOM’s work on COVID-19 at Points of Entry for the 30th Border Management Staff Course. The training was delivered online to officials of diverse agencies involved in all aspects of border security.
Some Key Events...

1st Multi-Stakeholder Round Table
In May 2021, IOM together with CDC conducted the first Multi-stakeholder Round Table of the joint Border Health Security initiative in Tashkent. The main goal of the event was to present the CDC-IOM project, discuss the International Health Regulations and use a multi-stakeholder approach in developing the roadmap for the institutionalisation of the Border Health Security initiative. A joint needs assessment was then conducted at the PoEs using the CDC assessment tool for determining public health needs and capabilities at PoEs, to provide technical support in the development of standard operating procedures (SOPs) on screening operations at PoEs and other border health intervention.

3-Day Master Training Programme
IOM, in collaboration with the CDC, conducted a 3-day Master Training Programme in Almaty, Bishkek, Dushanbe, and Tashkent in October 2021, which aimed to provide key information on identifying and responding to public health events, including COVID-19, by training epidemiological specialists in identifying potentially ill travellers, the correct donning and doffing of personal protective equipment, conducting risk assessments, and developing SOPs, along with public health emergency response plans at PoEs. The acquired skills and materials will be adapted and transferred by the training participants to the staff of PoEs through cascade trainings. The presented Master Training Programme will be institutionalised into the framework of continuous medical programmes.

The Health, Border and Mobility Management Framework (HBMM)
The HBMM Framework articulates IOM’s strategic role and objectives in the prevention, detection and response to communicable diseases in the context of widespread and multi-directional human mobility. It provides an action framework for IOM to undertake activities related to health, border and mobility management, and serves as a reference for IOM Member States and partners to understand the Organization’s role and contributions in this area of work. The overarching aim of the HBMM Framework is to ensure that: 1) Governments and communities have the capacity to address the mobility dimensions of public health threats. 2) Affected and at-risk populations benefit from appropriate and timely support, through inclusive and rights-based approaches that leave no one behind. IOM plays a leading role in supporting governments and communities to build health systems that are responsive to the needs of migrants and mobile populations, and equipped to address public health concerns along the mobility continuum. In particular, by bringing a deeper understanding of mobility dynamics, IOM facilitates targeted and evidence-informed approaches to communicable disease preparedness, response and recovery, within and across borders.
Title: Enhancing the Republic of Moldova’s COVID-19 preparedness and urgent response capacity in the international borders and penitentiaries (MP.0506)
Donor: Embassy Office of the Kingdom of the Netherlands in Chisinau
Budget: USD 200,000
Duration: October 2020 - January 2021

In responding to the ongoing emergency, IOM, in coordination with the Resident Coordinator Office (RCO), United Nations Office on Drugs and Crime (UNODC), and through the generous support of the Embassy office of the Kingdom of the Netherlands, donated medical equipment and personal protective equipment (PPE) necessary in the context of COVID-19 pandemic to the General Inspectorate of Border Police (GIBP) and National Administration of Penitentiaries (NAP). These actions have been implemented within a 4-month project with the overall objective of contributing to the Republic of Moldova's efforts in the urgent COVID-19 preparedness and response plan to halt further transmission of COVID-19 and mitigate the impact of the outbreak in the country.

Project activities were accomplished in close coordination with the GIBP and NAP as the primary counterparts and with the technical support of the UNODC. The final donation handover events took place on the 28 and 29 of January 2021, and were hosted by the General Inspectorate of Border Police and National Administration of Penitentiaries. Overall, IOM Moldova donated over 403,500 infection prevention supplies, including PPE, thermal scanners, UVC germicidal lamps for sterilising the air inside waiting rooms, automatic non-contact dispenser, nebulizers predestined for room disinfection, disinfectant mats and travel kits with information leaflet on personal protection, distributed at international checkpoints, medical equipment, 500 rapid tests for the detection of the SARS-CoV-2 virus and over six tons of disinfectant and two tons of liquid soap.

Vladimir Cojocaru, NAP director: “The penitentiary administration system is grateful for your contribution. With your assistance we’ve managed to increase the capacities of penitentiary institutions to ensure the management control of infection prevention by improving access to the personal protective equipment and for the detection of suspicious cases, WASH consumables, as well as relevant medical devices for saving life related to COVID-19 infection.”

Mr. Simon Springett, UN Resident Coordinator for Moldova: “The UN has come together, through the IOM and UNODC project, with the support of the Netherlands to provide the much needed support to the Prisons Administration and in particular to prison hospital nr.16. Personal protective supplies for prison staff, hand soap and sanitizers for prisoners as well as COVID-19 related medical equipment for diagnostics and treatment were provided.”

Lars Johan Lönnback, IOM Chief of Mission in Moldova: “Representing IOM, the UN migration agency in Moldova, I would like to emphasize the productive collaboration with the GIBP and the enormous contribution of the Kingdom of the Netherlands to the improving of the border security and safe mobility in the context of COVID-19 pandemic.”

Ina Tcaci, UNODC National Coordinator in Moldova: “In the light of overcrowding in many places of detention, which undermines hygiene, health, safety and human dignity, a health response to COVID-19 in closed settings alone is insufficient, there is a need to involve all national and international partners. The assistance offered today ensures access to liquid soap and disinfectants for all prisons, personal protective equipment for prison staff and medical equipment to ensure diagnostics and treatment of prisoners infected with COVID-19.”
Health in Humanitarian Contexts

ARMENIA

Title: Providing health assistance to address the immediate needs of displaced populations affected by the Nagorno-Karabakh conflict in Armenia (MP.0524)
Donor: Central Emergency Response Fund (CERF)
Budget: USD 219,999
Duration: January 2021 – July 2021

Tens of thousands of Armenians have been displaced following the conflict in and around Nagorno-Karabakh last year. The majority of the displaced are women and children, many of whom have both physical and mental health care needs, while Armenia’s national healthcare system has been put under great strain due to the COVID-19 pandemic. IOM has responded by, partnering with the Ministry of Health, supporting the deployment of mobile multi-disciplinary health teams wherever they are most needed. The clinic is supported by the IOM Global Rapid Response Grant.

Over six months, the clinic provided 9,985 lifesaving primary health care consultations to conflict-affected persons, including 7,205 adults, 2,780 children and 60 people with disabilities, through the deployment of two multi-disciplinary mobile teams reaching 104 displacement locations across Armenia. Displaced families and individuals were residing in collective centres and with the host community. The mobile teams enabled health services to be provided very close to their locations by conducting 188 visits in total. Medical teams included a therapist, paediatrician, psychologist, sonographer, and nurse/laboratory technician. A neurologist, gynaecologist and cardiac specialist were also introduced to the teams as required. In total, 2,197 individuals received symptomatic treatment by the mobile clinics’ specialists. Mental health and psychosocial support (MHPSS) referrals have been made to the local partner, Intra Mental Health Centre, and 1,278 people have benefitted from a range of special MHPSS services, including group/family and individual therapy, drama/ play therapy, psychoeducation sessions and psychiatric consultations.

“Mobile Clinics bring free, high-quality health care directly to communities where the health care facilities are overloaded,” said Nune Asatryan, Project Coordinator with IOM Armenia. “Staffed by professional health practitioners, clinics offer basic medical treatment and preventative screens and are designed to find patients who need further treatment.”

“I did not feel well and was overjoyed to learn that doctors would be coming to the village for a free consultation,” said Manushak, who was displaced from the Hadrut region of Nagorno-Karabakh. “The doctor referred me to the sonographer, and they found polyps in my bladder. After that I was referred to the Hrazdan Medical Centre for further free examination. Today I was told that I am going to get surgery, free of charge.”
The overall aim of this project was to contribute to addressing the humanitarian and early recovery needs of the most vulnerable individuals and communities in Donetsk and Luhansk regions, who are affected by conflict. IOM has worked towards this achievement through a multi-sectoral approach encompassing life-saving and life-preserving activities in both the government controlled areas (GCA) and non-government controlled areas (NGCA) of Ukraine’s Donetsk and Luhansk regions.

During the project period, local interlocutors in both the GCA and NGCA requested international partners’ support to address the lack of capacities to deliver critical services to vulnerable citizens, a situation that had been further exacerbated by the COVID-19 pandemic. IOM responded to the immediate needs to mitigate the spread of COVID-19 and supported medical facilities with necessary equipment, so they could deliver essential medical services to the displaced and other conflict-affected communities. A total of 106 medical and social facilities were supported across the GCA with a variety of essential WASH consumable items and equipment, as well as soft inventory, which contributed to reduced infection rates and risks and improved conditions of stay for patients in these facilities. In total, 15,802 beneficiaries were assisted through this activity. To ensure that the equipment supplied could quickly be brought to use, small-scale renovation works were carried out in some facilities. IOM also ensured the proper installation of the equipment and tested it. Furthermore, IOM printed and distributed 75,000 COVID-19 awareness raising posters amongst these institutions, as well as within public spaces, in order to facilitate the public’s access to information on the virus and best personal practices to mitigate the risks of infection.

The shock of the COVID-19 pandemic added pressure on the already struggling population, further increasing mental stress and vulnerabilities. Through the project, IOM held burnout prevention trainings for staff working in social and medical facilities. The aim was to help them address their own MHPSS needs, as such indirectly also benefitting the communities they serve. IOM continued the operation of the MHPSS hotline established in September 2020 as part of the PRM-funded COVID-19 response. Staffed with 10 psychologists and 1 psychiatrist, the hotline received over 2,827 calls and provided a total of 3,340 consultations in nine months (January-September 2021). As part of the MHPSS work, IOM also trained 119 frontline responders and social workers, and conducted a very successful awareness raising campaign targeting particularly men and boys, that led to a 190 per cent increase of calls - from 232 calls in August to 672 calls in September. Beyond the project end date (November 2021), IOM Ukraine was invited to present the campaign and methodology at the IASC Working Group on MHPSS for men and boys.
Title: Strengthening the Response for U.S. bound Afghan Evacuees in Kosovo, through Provision of Protection and MHPSS Assistance (DP.2404)
Donor: USA Bureau of Population Refugees & Migration (PRM)
Budget: USD 3,975,132
Duration: September 2021 - September 2022

The objective of this project is to contribute to a safe and protection-sensitive response to the temporary accommodation of Afghan evacuees hosted in Camp Liya, United States Military Base, in Kosovo in accordance with international protection standards. In line with the project objective, IOM directly provided assistance and protection services to beneficiaries in the camp by distributing information, providing assistance, including Mental Health and Psychosocial Support (MHPSS), and facilitating referrals to protection and health services.

Highlighting for this report the MHPSS activities, from October to December 2021, IOM organised an array of different activities. Based on mental health assessments upon arrival, the most critical mental health interventions initially focused on females as they expressed their needs more intensely comparing to men. The feeling of insecurity, sudden loss, and distress of leaving their loved ones back in Afghanistan caused frustration and anxiety. Over time, an increased need for individual psychological sessions was also observed among males, as they found it more difficult to display their emotions openly in a group. Following intake evaluations, beneficiaries were encouraged to participate in MHPSS raising awareness sessions occurring on a daily basis and covering a range of topics, such as facts and myths of mental illnesses; anxiety; depression; sleeping disturbances; post-traumatic stress disorder (PTSD) and trauma; self-harm and good practices; anger and stress management; self-help guidance for crisis and displacement; achieve psychological resilience; self-awareness and self-esteem. IOM initiated an empowerment working group with adolescent girls and boys, which focused on capacity building through experiential learning activities and on recreational games as a tool of improvement of self-confidence. 93 individual psychological sessions and 13 group counselling for both females and males were organised on request from beneficiaries. In the initial reporting period, IOM observed a higher-than-expected number of individual sessions necessary for the male population to prepare them to join group sessions. IOM also organized group discussions on the topics of self-awareness, positive mental health and significance of emotional wellbeing. IOM organised two parental group sessions with parents, which focused on children’s behaviour and child nutrition – topics suggested by parents.

Finally, a one-time three-hour GBV awareness session took place on 25 November for the “International Day for the Elimination of Violence against Women”. The awareness session focused on preventing and responding to violence against women followed by inspirational speeches given by women beneficiaries. Follow-up sessions were organised for those who needed targeted individual support and psychological assistance.
Non-Communicable Diseases and Risk Factors

TAJIKISTAN

Title: Returned Tajik Migrants: Promoting a Multi-Stakeholder response to Mental Health and Disability Issues (MA.0498)
Donor: IOM Development Fund (IDF)
Budget: USD 300,000
Duration: November 2020 – October 2022

IOM Tajikistan launched this project to understand the burden of the disability and mental health among Tajik migrants and improve multisectoral response to address occupational safety of the Tajiks abroad and reintegration issues at the home country. In order to assess health, social protection and gender-specific needs of returned migrants with disabilities, IOM designed a research methodology for conducting interviews with Tajik migrants returned within the last 5 years with disability due to work experience abroad, and conducted in-depth interviews with nine local experts on migration and disability. After securing the support of the Ministry of Health and Social Protection (MHSP), and in collaboration with the Japan International Cooperation Agency (JICA) and the local Research Agency M Vektor, IOM integrated 25 migration-related questions into the national survey on disability. IOM conducted training sessions on migration for 58 enumerators involved in the national survey. In November 2021, the research methodology proposed for investigating disability and migration was approved by the MHSP. Members of the Technical Working Group on disability and migration were trained to conduct interviews among 50 returned Tajik migrants in the 9 target districts. In December 2021, the field work was completed. The recorded interviews are currently being transcribed and translated from Tajik to Russian. The collected information will be shared with the International Research Consultants for further analysis and reporting. International Consultants also conducted interviews with key informants in the Russian Federation, and a desk review on disability and migration policy in Kazakhstan.

KYRGYZSTAN

Title: Kyrgyzstan: Enhancing Migrants’ Awareness on Air Pollution and Moving Towards a "Healthy City Vision" in Bishkek (MA.0514)
Donor: IOM Development Fund (IDF)
Budget: USD 300,000
Duration: July 2021—July 2023

IOM Kyrgyzstan launched this project to enhance migrants’ awareness of air pollution, its causes and impacts, and move towards alignment with the WHO’s “Healthy City Vision”. IOM Kyrgyzstan met with the Ministry of Health, Ministry of Natural Resources, Ecology and Technical Oversight, Bishkek City Mayor’s Office to discuss the modalities of joint implementation, hired a national research partner, NGO MoveGreen, and incepted the assessment of factors contributing to poor air quality and impact on communities of migrants in the new residential areas of Bishkek. The 25 most polluted residential areas were identified, and the assessment methodology and research instruments were developed by the national research partner, in close collaboration with the Vienna RO. The research team also piloted focus groups discussions and key informant interviews with the health service providers to refine the household (HH) survey questionnaire. The HH survey was then piloted with 10 HH and finalised. IOM Kyrgyzstan met with the WHO and the Republican Association on Public Health to discuss a strategy to integrate healthy city vision principles in the project plan. Furthermore, the project team hired two trainers to develop the training modules for municipality representatives and conduct the trainings. Mayor’s Office provided the list of heads and deputies of municipality departments in each of Bishkek city’s four districts. Trainers have been coordinating the municipality staff’s training needs assessment online, with the municipality heads and deputies.

44th Plenary Meeting of the SEE Health Network

On December 21 2021, Ursula Wagner, Regional Migration Health Coordinator, presented IOM’s work on Mental Health and COVID-19 at the occasion of the 44th SEEHN Plenary “Mental Health and COVID-19, facing the challenges-building solutions”. This Plenary meeting gave the opportunity to review and capitalise on the SEEHN Secretariat efforts to build capacities for mental health under the COVID-19 pandemic, and provided a platform to discuss options, find additional follow-up actions and identify viable solutions for the SEE Region.
Moldovan migrant workers are shouldering a higher tuberculosis (TB) burden than the general population, and face significant barriers in accessing healthcare and TB treatment. The fear and stigma associated with TB have different impacts on men and women, often due to women living in more precarious social and economic conditions than men. Yet, the intersecting factors of gender and migration have been generally neglected in TB research and policy interventions. This project aims to institute good migration and health governance in the Republic of Moldova by developing effective migrant-centred and evidence-based policies, and mainstreaming gender and migrant-sensitive TB interventions throughout the Moldovan National TB Programme, while contributing to empower TB affected migrants and their families as development actors.

On World Tuberculosis Day, IOM Moldova together with the National TB Response Programme (NTRP), the Phthisiopneumology Institute, the General Inspectorate of Border Police (GIBP) and in coordination with the Ministry of Health and Social Policy organised a public awareness campaign. Activities included the placement and distribution of 6,000 leaflets, 60 rollups, 200 posters, 350 stickers in 48 medical facilities, at the 10 Points of Entry with the highest traffic, and at medical check-ups performed under IOM’s Pre-departure Health Assessment programmes. A short animated video was disseminated through TV, radio, social media at the International Airport Chisinau and the IOM office waiting and registration area. On the eve of the International Day of Migrants, which promotes the rights of migrants and capitalises on the potential of human mobility, IOM, NTRP and GIBP organised two flash-mobs at Chisinau Airport and at the National Bus Station. These actions are part of the national campaign “Stop TB with Joint Efforts” which began on 6 December and aimed to inform migrants on TB diagnosis and treatment.