

## Assessing the effect of COVID-19 on Egypt's refugee population - version 8

---

### EXECUTIVE SUMMARY: week ending 14 May

Egypt's total caseload for COVID-19 has risen to over 10,000 this week, with multiple cases confirmed among refugee communities. There is momentum to ease restrictions on public life after Eid al-Fitr, which falls in late May.

Many refugees, increasingly desperate, are attempting to return to employment, despite an absence of adequate social distancing and hygiene measures. Refugees are increasingly reliant on food and cash assistance from service providers, or turn to unhealthy coping mechanisms to secure money. Given the scale of the crisis, assistance is unable to meet the totality of needs.

Concerns about the Egyptian healthcare system persist. A number of refugees have been turned away from public hospitals, or have reported receiving inadequate treatment. With the system overburdened by the pandemic, non-nationals such as refugees become increasingly likely to fall through the cracks.

→ *New developments this week are indicated with a red arrow.*

### 1. Impact of COVID-19 on refugees in Egypt

#### Healthcare

- World Health Organization (WHO) guidance indicates that access to health services should be equitable, and not discriminate against refugees and migrants.<sup>1</sup>
- According to UNHCR's Public Health Section, public health facilities should ensure "sufficient spacing and flow of persons to reduce unnecessary contact."<sup>2</sup>
- "Preventive community and individual health and hygiene practices" are a core pillar of international guidance on COVID-19 responses.<sup>3</sup>

Reports from refugees since the pandemic began indicate some difficulty in accessing public health facilities.

- Refugees report being refused admission and being asked to pay bribes in order to be treated. Public hospitals that have been reported as turning away refugees include Matariyyah, Masheyet el Bakry, el Demerdesh, el Zahraa, 6th of October, and Sheikh Zayed. Refugees

---

<sup>1</sup> WHO, Preparedness, prevention and control of coronavirus disease (COVID-19) for refugees and migrants in non-camp settings, p. 2. Available [here](#).

<sup>2</sup> UNHCR HQ Public Health Section, Supporting the Continuity of Health and Nutrition Services in the context of a COVID-19 in Refugee Settings – Interim Guidance (April 2020), p. 1.

<sup>3</sup> Inter-agency Risk Communication and Community Engagement Working Group on COVID-19 Preparedness and Response in Asia and the Pacific, COVID-19: How to Include Marginalized and Vulnerable People in Risk Communication and Community Engagement, p. 10. Available [here](#).

turned away have been told it is because they are foreigners and hospitals are no longer treating foreigners. We are also aware of refugees being turned away in emergency situations.

- ➔ As of mid-May, one CBO has reported the deaths of two refugees purportedly due to a refusal to admit them to public healthcare facilities for necessary treatment.

International best practices highlight the importance of the continuation of emergency sexual and reproductive health services, including “intrapartum care for all deliveries, emergency obstetric and newborn care.”<sup>4</sup>

- Reports from pregnant refugee women of all nationalities indicate that they have been turned away from entering public hospitals when they approach for delivery.
- ➔ There are an increasing number of reports about the Egyptian healthcare system’s ability to handle the COVID-19 outbreak.
    - On 5 May it was reported that Egypt’s COVID-19 dedicated isolation hospitals have reached maximum capacity.<sup>5</sup>
    - Local aid agencies are reporting shortages in procuring PPE within Egypt. Egyptian medical staff have reported shortages in supplies.<sup>6</sup>
    - ➔ As of 6 May, 113 doctors in Egypt have confirmed COVID-19 infections.<sup>7</sup> There has also been a growing number of fatalities among nurses who have contracted COVID-19.
    - ➔ On 10 May, a government official described the issues faced by the Health and Population Ministry, citing an increase of infections and a shortage of nurses.<sup>8</sup>

Due to socioeconomic limitations, it is difficult for refugees to observe preventative measures such as social distancing and frequent sanitation.

- Many refugees live in crowded conditions with up to 30 individuals sharing accommodation.
  - Most refugees cannot afford to purchase appropriate hygiene supplies. Refugee community based organizations (CBOs) have reported that accessing such supplies has been a challenge for their community members owing to their inflated cost and shortages in many pharmacies since the outbreak began.
  - Cash assistance from refugee service agencies intended for purchasing hygiene supplies is being used by refugees to provide for their basic needs including rent and food.
- ➔ In the preceding week, there have been increased reports of refugees with COVID-19.
    - ➔ The Ethiopian community have reported four confirmed cases. All are women who continued to work despite the pandemic. All cases are in self-quarantine at home.
    - ➔ One Syrian CBO reported three cases of COVID-19. One patient, a father of six, is currently receiving treatment at Abasseya Fever Hospital where he has been kept in the emergency

---

<sup>4</sup> UNHCR HQ Public Health Section, Supporting the Continuity of Health and Nutrition Services in the context of a COVID-19 in Refugee Settings – Interim Guidance (April 2020), p. 2.

<sup>5</sup> “Egypt’s coronavirus isolation hospitals at maximum capacity: official”, *Egypt Independent*. Available [here](#).

<sup>6</sup> “In Egypt, medics fear raising the alarm on Covid-19”, *Codastory*. Available [here](#).

<sup>7</sup> “Infections on the front line”, *Ahram Online*. Available [here](#).

<sup>8</sup> “Coronavirus infections in Egypt rise amid shortage of nursing staff”, in *Egypt Independent*. Available [here](#).

room for four days without being admitted into the ICU. His family fears that he is not receiving proper treatment due to his Syrian nationality.

### Livelihoods

The economic impacts of Egypt's COVID-19 response plan on refugees have been severe.

- Egypt's refugee populations work largely in the informal sector and have been disproportionately affected by restrictions on movement and business opening hours, as well as the economic downturn.
- Refugees have been left with no access to livelihoods and, as the pandemic continues, find themselves in increasingly vulnerable situations. What savings some refugees had are exhausted.
- UNHCR reports that the bulk of calls to its hotlines have related to destitution due to recent unemployment.
- ➔ Refugee community leaders have noted an increase in theft and assault among community members. The leaders believe that this is the result of the inability of refugees to cover their basic needs.

Housing security is a major concern.

- One UNHCR partner indicated that it assessed 500 cases of imminent eviction in the first two weeks of May alone.
- ➔ Refugee CBOs are reporting the growing inability of their communities to pay rents, resulting in communal - and often overcrowded - living arrangements. There have also been reports of assaults from landlords due to unpaid rent.
- Assistance intended for other purposes, such as World Food Program's (WFP) cash-for-food assistance, is being spent on rent, meaning that other needs are left unmet.

The International Committee of the Red Cross (ICRC) declares that "as a matter of urgency, access to emergency shelter/housing suitable for the implementation of COVID-19 infection prevention and control measures should be offered."<sup>9</sup>

There are widespread reports of refugees without sufficient food. While food assistance has been expanded to reach more beneficiaries, there is still great need among refugee communities. Mandated mosque closures and a ban on public charity Iftar meals due to COVID-19 mean that alternative sources of food are limited.<sup>10</sup>

➔ Since the beginning of May, there have been increasing reports of refugees attempting to return to work. Some CBOs state that their community members have been contacting them to assist in finding jobs. Community leaders believe that as desperation increases, refugees are eager to find job

---

<sup>9</sup> International Committee of the Red Cross, Note on the protection of migrants in the face of the COVID-19 pandemic, p. 2. Available [here](#).

<sup>10</sup> "Charity iftar dinners banned in Egypt owing to coronavirus: Endowments ministry", *Ahram Online*, available [here](#).

opportunities despite the public health risks involved. However, the majority of refugees are still without work and unable to find means to cover their basic needs.

## Education

All schools and universities in Egypt closed on 15 March, and at present are mandated to remain shut.

- Egyptian public schools have moved to remote assessment for school students, with an online platform for submitting research assignments. Many refugee children and their parents have reported difficulties accessing this platform, and are unable to participate in their assessment.
- Refugee students who learn at community schools have largely been left unable to continue their education online due to resource limitations. There is concern that these schools will be unable to weather the economic shock, cannot continue paying rent in the absence of school fees, and may not be able to re-open when restrictions are decreased.

The Inter-Agency Network of Education in Emergencies (INEE) advises that “governments, donors and partners must prioritize access to inclusive distance learning”.<sup>11</sup> Guidance also recommends that additional funding should be provided to support marginalized students in accessing alternative education.<sup>12</sup> Refugee children commonly do not have access to the internet, limiting their ability to participate in remote learning opportunities.

➔ Refugee community schools play a vital role in providing education to refugee children. In a StARS survey of 51 community schools, collectively educating more than 15,000 students, 94 percent reported they have been unable to pay their teachers full salaries since March. Most concerning is that 82 percent of the surveyed community schools have been unable to meet their rental costs, and face imminent closure. Many refugees do not have the right to attend Egyptian state schools, including Eritreans, Ethiopians, and Somalis who make up more than 60 percent of unaccompanied and separated refugee children, and are reliant on community schools.

## Xenophobia

Refugee communities have reported an increase in xenophobia and violence in relation to COVID-19.

- Before the pandemic, there were already high levels of harassment experienced by refugees, particularly from Sub-Saharan African countries.
- Since the pandemic, the harassment reported has been specifically related to the idea that refugees brought COVID-19 to Egypt and are spreading it.

Communities have reported both verbal harassment and physical attacks on these grounds.

Best practice guidance from the ICRC recommends that in such situations of prevalent discrimination, “authorities, including law enforcement agencies, have the obligation to protect

---

<sup>11</sup> Inter-Agency Network for Education in Emergencies (INEE) Recommendations for COVID-19, p. 4. Available [here](#).

<sup>12</sup> Inter-Agency Network for Education in Emergencies (INEE) Recommendations for COVID-19, p. 4. Available [here](#).

migrants from abuse.”<sup>13</sup> A growing trend is that refugees who approach police to report such assaults are turned away.

### Gendered Implications

Refugee women have been particularly affected by the response to COVID-19. International guidance recognizes that gender-based violence (GBV) and in particular intimate partner violence (IPV) are likely to increase during this period of restrictions on movement and accessibility of services.<sup>14</sup>

→ Globally, such rises have been reported,<sup>15</sup> but refugee service providers in Egypt have observed a decrease in GBV reporting since the beginning of the outbreak. This perhaps indicates a lack of access for refugee women in Egypt to GBV response services, many of which are currently only available through phone hotlines. This is contrasted by refugee CBOs reporting a rise in violence at home against women and children. Since the beginning of May, there has been a noted increase in the reports of domestic violence from CBOs, including serious cases of physical violence.

International guidance also highlights the economic impact of the current situation on women, who are likely to be engaged in informal or low-wage activities.<sup>16</sup> Before the outbreak the primary occupation of many refugee women in Egypt was as domestic workers. Since the outbreak, refugee women have reported being expelled from their employers’ homes, or conversely, being forced to remain in their employers’ homes indefinitely or be fired. Accounts from CBOs in recent weeks reflect this, noting that women have been approaching them for financial assistance at much higher rates than men.

## **2. Impact of COVID-19 on refugee services in Egypt**

### Agency operations

Agencies that continue to provide services to refugees in Egypt are operating at severely reduced capacities, including, for most, the cessation of all in-person services. Service providers that continue to operate are encouraging clients to reach them by telephone, email, and Facebook, rather than approach offices in person.

- Many refugees in Egypt do not have regular access to the internet, which limits their ability to contact service providers.
- Phone credit is quickly consumed when waiting on hold to reach overburdened service providers, meaning that refugees may not be able to afford to keep calling. Since 17 March, UNHCR has reported 19,000 calls through its hotline.

---

<sup>13</sup> ICRC, Note on the protection of migrants in the face of the COVID-19 pandemic (April 2020), p. 4. Available [here](#).

<sup>14</sup> CARE International, Gender Implications of COVID-19 Outbreaks in Development and Humanitarian Settings, p. 3. Available [here](#).

<sup>15</sup> UN Women: Violence against women and girls: the shadow pandemic. Available [here](#).

<sup>16</sup> CARE International, Gender Implications of COVID-19 Outbreaks in Development and Humanitarian Settings, p. 4. Available [here](#).

According to the Inter-Agency Standing Committee, all COVID-19 responses must consider “languages understood, literacy levels, access to communication channels and existing barriers.”<sup>17</sup>

Refugee CBOs are struggling to serve their communities amidst increased need for aid and reduced financial capacities. As CBOs are heavily reliant on membership fees from community members and fees for childcare and educational services, many CBOs no longer have sufficient income to cover rent and other essentials. CBOs have endeavored to meet the immediate needs of their communities, including collecting donations for food and hygiene items for the most vulnerable members. CBOs are also the first responders to many eviction cases, finding urgent solutions and community placements to ensure none of their members are homeless. With limited support from international aid organizations, CBOs have exhausted many of their human and material resources. StARS is now providing financial support to 20 CBOs so that they can remain open at this time of heightened need.

### Cash distribution

Best practice recommendations for assistance distribution during the COVID-19 pandemic, shared by the Cash Learning Partnership, suggest that service providers should “ensure the least and safest contact between the provider and the beneficiary,” and also that providers should “reduce queuing and clustering at distribution sites.”<sup>18</sup>

In Egypt such measures are not in place. Cash assistance from UNHCR and other agencies is largely disbursed through Egypt Post.

- Egypt Post is currently operating under heavily reduced operating hours, with some branches closed entirely or open only on alternate days.
- During operating hours, refugees have reported that Egypt Post offices – particularly in poorer neighborhoods of Cairo – are dangerously overcrowded as people have fewer hours during which they can access services, resulting in a public health risk.
- In late April, Caritas, UNHCR’s assistance provider for unaccompanied and separated youth, relocated its cash distribution for sixteen- and seventeen-year old unaccompanied children from its own sites to Egypt Post offices.
- Due to the reasons outlined above, clustering of people is likely during the collection of cash assistance for refugee beneficiaries and this places unaccompanied children at increased risk of infection.

WFP is distributing its cash-for-food assistance through Fawry Pay, which operates terminals at many kiosks and small shops. In the past month, refugee communities have reported being charged a fee by Fawry Pay terminal operators in order to access their WFP assistance, despite WFP repeatedly assuring refugees that there should be no fee associated with this service.

---

<sup>17</sup> Inter-Agency Standing Committee, Interim Guidance: Scaling Up Covid-19 Outbreak Readiness and Response Operations in Humanitarian Situations, Including Camps and Camp-like Settings, p. 5. Available [here](#).

<sup>18</sup> The Cash Learning Partnership (CaLP), CVA in COVID-19 contexts: guidance from the CaLP network (version 1), p. 7. Available [here](#).

## Registration and legal procedures

COVID-19 guidance published by UNHCR's Regional Bureau for Europe proposes that "even in such times, UNHCR strongly advises to ensure the registration of asylum claims and proper documentation of asylum-seekers," and goes on to propose registration by mail, email, or through digital platforms.<sup>19</sup>

Registration appointments with UNHCR have been postponed since 17 March, which until the end of April had affected 7,100 asylum seekers. While UNHCR is recording new arrivals by email, formal registration has been halted. Registration requests for new arrivals have been much lower than usual monthly figures. UNHCR Egypt has been able to provide emergency registration on a case-by-case basis, particularly for individuals in detention or requiring access to medical services.

Emergency Protection counselling is continuing by phone. This aligns with the Inter-Agency Standing Committee's recommendations that "protection remains central to any response."<sup>20</sup>

## Egyptian government services

ICRC calls on all host nations to ensure that "existing barriers impeding migrants' inclusion in COVID-19 responses ... be addressed as a matter of urgency."<sup>21</sup>

Government immigration and residency services have been suspended since March, with many refugees currently in possession of expired documentation. UNHCR has advocated with the Egyptian government for leniency on expired documentation, but such an understanding appears to be unevenly applied.

- Lacking a residency permit may restrict access to medical treatment in public facilities.  
➔ 220 incidents of arrest and detention have been reported to UNHCR since 17 March, with a sizeable portion of these related to expired or invalid documentation.

➔ Residency permits also act as a barrier to refugee access to services: the duration of SIM cards in Egypt is tied to the validity of residency permits; for this reason, many refugees have had their phones cut off, or risk this happening imminently. UNHCR is advocating with GoE for change to this rule. ICRC calls on states to ensure continuity of services, particularly "for migrants dependent on social services and humanitarian aid to survive."<sup>22</sup>

---

<sup>19</sup> UNHCR Regional Bureau for Europe, Practical Recommendations and Good Practice to Address Protection Concerns in the Context of the COVID-19 Pandemic, p. 10. Available [here](#).

<sup>20</sup> Inter-Agency Standing Committee, Interim Guidance: Scaling Up Covid-19 Outbreak Readiness and Response Operations in Humanitarian Situations, Including Camps and Camp-like Settings, p. 2. Available [here](#).

<sup>21</sup> International Committee of the Red Cross, Note on the protection of migrants in the face of the COVID-19 pandemic, p. 1. Available [here](#).

<sup>22</sup> International Committee of the Red Cross, Note on the protection of migrants in the face of the COVID-19 pandemic, p. 2. Available [here](#).