Jens Laerke, for the United Nations Office for the Coordination of Humanitarian Affairs (OCHA), expressed concern about the potential impact of COVID-19 on millions of people across Syria, in particular the over 900,000 internally displaced persons in the north-west. There were currently over 6 million internally displaced people throughout Syria. Health preparedness and response in the country was considered low; only half of the public hospitals and public primary healthcare centres were fully functional at the end of 2019, while thousands of health professionals had left the country.

In Libya, the COVID-19 outbreak could overwhelm the already stretched humanitarian aid capacity. The United Nations was supporting Libyan authorities in COVID-19 preparedness and response efforts, but additional funding was urgently required to implement the national and the UN health sector’s response plans. Hostilities continued in and around Tripoli despite the announced humanitarian pause.
Sudan had announced a national COVID-19 response plan with a budget of $76 million. The UN and partners continued to assist the Government in COVID-19 response. In Iraq, 382 cases of COVID-19 with 36 fatalities had been confirmed as of 26 March. Humanitarian clusters had developed initial guidance for COVID-19 preparedness and response in internally displaced persons’ camps.

In Afghanistan, where COVID-19 cases had been confirmed in 12 provinces, key concerns were border crossing areas, lack of social distancing and movement restrictions.

Iran was severely affected by the COVID-19 pandemics and suffered a “conspiracy of humanitarian crises”, as parts of the country experienced flooding and locust invaded crops in six provinces.

The United Nations in Ukraine had issued the COVID-19 humanitarian response plan to support response over the next nine months and mitigate the humanitarian consequences of the virus transmission.

Responding to questions, Mr. Laerke said that cases of COVID-19 had been reported in Syria and that the World Health Organisation had started health preparedness and response activities. OCHA was very concerned for the six million internally displaced persons, especially the 900,000 in the northwest where the access was very difficult, and people were exhausted. Delivering support where possible to prevent that the situation spiralled out of control was a race against time, Mr. Laerke said. Drawing attention to the Global Humanitarian Response Plan COVID-19, he stressed that there was still time to apply prevention measures and called upon donors to support the Plan.

Alessandra Vellucci, Director of the United Nations Information Service in Geneva, said that the WHO had issued a statement on their activities to strengthen the capacity to respond in Syria.

Andrej Mahecic, for the United Nations Refugee Agency (UNHCR), emphasized that in several countries, the COVID-19 crisis interposed on the existing critical refugee situations. The virus knew no borders and boundaries and UNHCR advocated for the inclusion of refugees, asylum-seekers and internally displaced persons in the response plans.

Elisabeth Byrs, for the United Nations World Food Programme (WFP), announced the launch of a ground-breaking digital map that showed the terrible impact of COVID-19 on school meals around the world. The Global Monitoring of School Meals during COVID-19 School Closures provided daily updates on school closures and the number of children not receiving school meals as a result. As well as displaying global totals, the map showed how many children were affected in each country, with real-time data indicating both the scale of the challenges and the need for solutions. According to the latest data, more than 364 million schoolchildren were now missing out on school meals. Partial or country-wide closures of schools had been reported in 48 countries, where nearly 11 million children were no longer receiving WFP school meals. That number was set to rise in the coming days and weeks.

Responding to questions, Ms. Byrs said that malnutrition could aggravate the vulnerability to infections and stressed that meeting nutritional needs and consuming the adequate quantity of micronutrients such as zinc and vitamin A fortified the health and immune system. WFP continued to identify the population at risk of COVID-19 and provide nutritional support. In developing countries, it was prepositioning the supplies and coordinating with governments to ensure the continued and interrupted supply.

WFP was also boosting its logistic capacity to serve the wider humanitarian community and global response to COVID-19 pandemic. It had asked for $350 million for this purpose in the Global Humanitarian Response Plan COVID-19. The logistical centre in Brindisi, Italy was fully operational and was not affected by the crisis.

United Nations Secretary-General Ceasefire appeal

Askerd about positive reactions to the Secretary-General’s appeal for a global ceasefire to focus on ‘the true
fight of our lives’, Alessandra Vellucci, Director of the United Nations Information Service in Geneva, said that there were several good news from the field to this appeal. The Office of the Special Envoy for Yemen had issued a statement in which it welcomed the positive responses to the Secretary-General’s call for a ceasefire from both the Government of Yemen and Ansar Allah. There had been also been positive signs from Syria and from the Cameroon conflict, where temporary ceasefire had been announced on 24 March.

COVID-19 and human rights

Rupert Colville, for the Office of the High Commissioner for Human Rights (OHCHR), noted that Hungarian Parliament was due to pass a bill to extend what was termed a “state of danger” declared earlier this month in response to the COVID-19 pandemic. The bill appeared to give the Government practically unlimited powers to rule by decree and bypass parliamentary scrutiny with no clear cut-off date. It could negatively affect the legitimate work of journalists and have a potentially chilling effect on freedom of expression in Hungary. Under international human rights law, emergency legislation and measures should be strictly temporary, limited to addressing the situation at hand and contain appropriate safeguards. Briefing note in full.

In Ethiopia, OHCHR remained very concerned by the continued communications shutdown and called on all countries to ensure that everyone had ready and unhindered access to the Internet and phone services, all the more in the context of the COVID-19 pandemic, when fact-based and relevant information on the disease and its spread and response must reach all people, without exception. Read more.

Asked about the human rights-based responses to COVID-19, including in the context of housing and the rights of elderly people, Mr. Colville said that the United Nations Special Rapporteur on the right to housing had issued a statement on 18 March. The governments had an obligation to ensure access to housing for the people, especially since in many countries people had been ordered to stay home. They should also exchange best practices on the issue and pay special attention to the homeless, especially new homeless.

On the human rights of the elderly in the current epidemic, Mr. Colville said that COVID-19 was indeed a humanitarian crisis and human beings must be the starting point in the response. The governments were facing something unprecedented and there were vulnerable groups and individuals who could be made more vulnerable due to lack of means to apply social distance or wash hands. The impacts could be devastating. “We are all in this together because if the virus is not eradicated globally, it would continue to re-emerge.” National human rights institutions, non-governmental organizations, community-based organizations and self-help groups had a crucial role to play in raising the alarm and increasing awareness and it was incumbent upon the governments to ensure that they could freely work and speak, Mr. Colville stressed.

Answering another question, Mr. Colville said that the World Health Organisation (WHO) was facing a massive problem and needed the cooperation of governments. WHO was doing an incredible job and it was not constructive to criticize their relationship with individual governments at the moment, as they had an enormous task to guide the world through the health crisis the best they could.

On Libya, where the first case of COVID-19 had been confirmed, Mr. Colville said that OHCHR was concerned about the potentially catastrophic impact of COVID-19 outbreak, given the difficult security situation in the country and its impact on the functioning of the health system, overcrowding in migrant detention centres and lack of access to reliable information.

Alessandra Vellucci, Director of the United Nations Information Service in Geneva, reiterated the concern of the United Nations by the confirmation of the first COVID-19 case in Libya. The United Nations Secretary-General spokesperson had stated that the United Nations was supporting Libyan authorities in COVID-19 preparedness and response efforts. He had called for the funding to be provided for the implementation of the health sector response plans and the sustained funding for the Libya Humanitarian Response Plan for the
COVID-19 pandemic.

Andrej Mahecic, for the United Nations Refugee Agency (UNHCR) said that for now, there had been no identified COVID-19 cases among refugees in Libya. UNHCR advocated for the release of all detained migrants and asylum-seekers into the community, where they could receive better care.

**The situation in Italy and the global response to COVID-19 by the International Red Cross and Red Crescent Movement**

Francesco Rocca, President of the International Federation of the Red Cross and Red Crescent Societies, speaking on behalf of the International Red Cross and Red Crescent Movement by phone from Italy, briefed the Geneva press corps on his visit to the epicentre of the COVID-19 epidemics in Italy – Bergamo, Lodi and Codogno. On 26 March, the Movement had launched a revised emergency appeal for 800 million Swiss francs to help the world’s most vulnerable communities halt the spread of COVID-19 and recover from its effects.

Responding to questions, Mr. Rocca noted that the COVID-19 crisis was a social bomb that could explode at any moment as marginalized people in several Western countries were excluded from social protection networks and were not receiving support.

In those difficult times, many people were supporting the Red Cross with concrete actions, including volunteering. In Italy for example, some 20,000 temporary volunteers had joined the existing 160,000 permanent ones. The hospitals in the most affected regions in Italy were focused on supporting COVID-19 patients and needed disposable materials and ventilators. Mr. Rocca also emphasized the need to ensure psychological and emotional support to health workers.

Mr. Rocca urged countries that were not yet fully impacted to act now and prepare for the crisis – upgrade hospital facilities and procure ventilators. This was not the time for optimism – thinking that the crisis would bypass any country - but for contingency plans. One lesson learnt in the current crisis, he said, was the lack of global procurement policy to govern the purchase of the necessary medical equipment and materials, which allowed the highest bidder to purchase first.

It was too early to say whether the outbreak in northern Italy had reached its peak; there were some positive signals, such as a decrease in the calls for ambulances, but everyone should wait for the data at the end of the week. Southern Italy was making contingency plans but more needed to be done, especially to address the lack of ventilators.

**COVID-19, economy and the world of work**

Rosalind Yarde, for the International Labour Organization (ILO), said that the following week, the International Labour Organization would issue several briefs that would outline the impact of COVID-19 on the world of work, including the updated employment impact statistics, and on inequality and protection of health workers and persons with disabilities. A virtual briefing would be held as well. Further information could be found on ILO COVID-19 pages.

Catherine Huissoud, for the United Nations Conference on Trade and Development (UNCTAD), announced a new study on the financial shortfall in developing countries in addressing the pandemic. The governments had announced trillions of USD to fight the pandemic and mitigate the economic contagion, which would attenuate the extent of the shock physically, economically and psychologically. Still, the world economy would go into recession this year, with a predicted loss of global income in the trillions of dollars. For developing countries, the consequences of a combined health pandemic and global recession would be catastrophic and for many, the 2030 Agenda was already a lost dream.
Multilateralism at its best: countries coordinate efforts to guarantee the delivery of medical supplies, including oxygen

Jean Rodriguez, for the United Nations Economic Commission for Europe (UNECE), said that in the European Region, the COVID-19 pandemic had caused an unprecedented demand for medical gasses, especially medical oxygen, used to provide respiratory assistance to patients developing acute respiratory symptoms. In response, countries were coordinating efforts to guarantee the delivery of medical supplies, including oxygen, and to ensure their safe transport. Olga Algayerova, UNECE Executive Secretary commented: “This is an example of multilateralism at its best: adopting coordinated solutions to common problems. Only by working together will we overcome the COVID-19 pandemic leaving no-one behind.” Briefing note in full.

OHCHR “troubled” by presidential pardon to the convicted perpetrator of atrocities in Sri Lanka

Rupert Colville, for the Office of the High Commissioner for Human Rights (OHCHR), said that his Office was troubled by reports that the convicted perpetrator of the Mirusuvil massacre in Sri Lanka had received a Presidential Pardon and had been released from jail. Former Army sergeant Sunil Ratnayake had been sentenced in 2015 for the murder in 2000 of eight civilians, including a five-year-old child. Pardoning one of the sole convicted perpetrators of atrocities committed during the Sri Lankan conflict further undermined the limited progress the country had made towards ending impunity for mass human rights abuse. Briefing note in full.

Mounting civilian displacement in western Myanmar and in Yemen also increases risk to COVID-19 outbreak

Andrej Mahecic, for the United Nations Refugee Agency (UNHCR), briefed the journalists on mounting civilian casualties and growing displacement triggered by the latest escalation of clashes in western Myanmar. The authorities estimated that more than 61,000 people were newly displaced in Rakhine State as of 16 March, representing an increase of some 10,000 people as compared to the previous month. UNHCR reiterated the appeal by the UN Secretary-General António Guterres urging warring parties across the world to cease their fighting in support of the bigger battle against the threat of the COVID-19 pandemic. Civilians in areas ravaged by conflict, in particular those displaced, were especially vulnerable in this global public health emergency. More.

In Yemen, after five years of conflict, families continued to flee their homes. An intensification in fighting across Al Jawf, Marib and Sana’a governorates in northern Yemen since January had displaced more than 40,000 people to Marib governorate, joining the 750,000 internally displaced persons already hosted there. UNHCR was worried that displaced communities and their hosts would be at heightened risk in the event of a COVID-19 outbreak, given their precarious situation and dire living and sanitary conditions. Press release in full.

Asked about Syrian refugees in Lebanon, where the health and economic situation was worrisome, Mr. Mahecic stressed that the country had been a generous host for nine years. According to the current data, there were no COVID-19 cases among the refugees. UNHCR was strengthening its preparedness and response capacities in collaboration with the Government, to ensure that all refugees and humanitarian support personnel received the necessary health care without competition over resources.

United Nations virtual briefing to the Member States on COVID-19 pandemic to focus on mitigation, response and plan for global recovery

Alessandra Vellucci, Director of the United Nations Information Service in Geneva, said that, due to the unprecedented challenge posed by the COVID-19 pandemic to the work of the United Nations, the Presidents of the General Assembly, Security Council, United Nations Economic and Social Council
ECOSOC) and the Secretary-General would convene a joint virtual briefing for the Member States on 27 March 2020, from 10:00 a.m. to 12:00 p.m. EST (15:00 to 17:00 Geneva time).

The briefing would focus on outreach to the Member States and other stakeholders, including the measures taken to mitigate the impact of this pandemic on the work of the Organisation, as well as the activities of the Principal Organs of the United Nations during this crisis. The Secretary-General would update the Member States on efforts across the United Nations system to respond to the crisis in its multiple dimensions and plan for the global recovery.

Ms. Vellucci said that to date, 78 cases of COVID-19 had been confirmed among the United Nations staff worldwide.

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The webcast for this briefing is available here: https://bit.ly/unog270320