

Migrants in the Middle East and North Africa in a time of COVID-19

Authors: Kolitha Wickramage² PhD, Chiaki Ito² PhD, Mahmoud Hilali PhD³, Sally Hargreaves⁴ FRCPE, and Ana Requena-Méndez^{5,6}, PhD, on behalf of the Migrant Health MENA working group.

Affiliations:

1. International Organization for Migration, Geneva, Switzerland.
2. IOM Regional Office for Middle East and North Africa (MENA), International Organization for Migration.
3. Blue Nile National Institute for Communicable Diseases, University of Gezira, Gezira, Sudan
4. Migrant Health Research Group, Institute for Infection and Immunity, St. George's, University of London, London.
5. Barcelona Institute for Global Health (ISGlobal, Hospital Clínic-University of Barcelona).
6. Department of Medicine Solna, Karolinska Institutet

Corresponding author:

Ana Requena-Méndez

Assistant Professor

Barcelona Institute for Global Health.

ana.requena@isglobal.org

Teaser section:

As COVID-19 vaccine roll-out begins in the MENA region, ensuring migrant populations have equitable access to the vaccine, designing innovative and specific mechanisms for vaccine roll-out in these areas and monitoring vaccine uptake in migrant groups are now imminent challenges.

Greenaway et al suggested that there are little data on the impact of COVID-19 on morbidity and mortality among migrants, but specifically in migrant living in refugee camps, detention centres and reception centres.¹ No where is the impact of this under-reporting seen so starkly as in the Middle East North African (MENA) region, and area with the largest population of forcibly displaced migrants, housed in camps and in detention centres along the North African coast, and these are closed settings known to be high-risk for COVID-19 transmission¹. As Greenaway et al suggest, migrants may have been more severely impacted by COVID-19 compared to the host population due to loss of livelihoods, lockdowns, other restrictions on movement including the halting of the asylum system and resettlement process from the region.^{1,2} In addition, access to health and vaccination systems for migrants is often severely restricted or non-existent, due to their lack of entitlement, and/or structural barriers to accessing basic health care or discrimination, particularly for very marginalised groups such as undocumented migrants.² Migrants are known to have multiple risk factors and vulnerabilities for COVID-19, and may have experienced higher morbidity and mortality than other groups in some settings.²

Ensuring migrant populations in the MENA region have equitable access to the COVID-19 vaccine is now an imminent challenge. WHO has called for low-income migrant workers, irregular migrants and those living in migration centres or camps as priority groups.³ IOM has called on governments to make every effort to address and reduce vulnerabilities faced by migrants by ensuring that regardless of their status, migrant can access COVID-19 vaccines; and to mitigate potential barriers to migrants' accessing services and vaccines such as the identification card's requirements in place in many vaccination-points. Jordan was one of the first countries in the world to prioritise refugees in its vaccination programme, and since January 2021 has now vaccinated up to one third of refugees living in camps in the country, approximately 13,455 individuals⁴. A recent UNHCR survey among asylum seekers and refugees in Algeria on knowledge and interest on COVID-19 vaccination indicated that only 70% surveyed were aware of the ongoing COVID-19 vaccination campaign, yet only 30%

expressed an interest in getting vaccinated⁵. This highlights, the need for innovative and tailored mechanisms for vaccine roll-out in such contexts to not only ensure meaningful inclusion but also address vaccine hesitancy. Strengthening community engagement with such groups and ensuring effective coordination with health authorities, UN, NGOs and civil society groups is critical. To date, poor data collection in the MENA region⁶ has severely hampered efforts to understand the real effects of COVID-19 on these marginalized groups, with immediate implications for vaccine roll out in these populations. Current routine vaccination surveillance systems in the MENA region are in urgent need of strengthening. Greenaway et al highlight that this will require the routine collection of public health data, disaggregating by migrant status, which is not currently available in most countries,¹ and almost inexistent in the MENA region.⁶

Renewed focus must be placed on exchanging and sharing experiences across countries in this region in responding to the COVID-19 pandemic from a mobility perspective. As COVID-19 vaccine roll-out begins in this region, the Sustainable Development Goal mantra of leaving no one behind has never been so important. Although there are some positive recent developments, COVID-19 has shown a spotlight on the major health inequities and health system exclusion experienced by migrant populations in the MENA region, with an urgent need to monitor vaccine uptake in these groups and ensure their meaningful inclusion in the COVID-19 response.

Conflict of interest and disclaimer

Authors declare no conflict of interest.

The opinions expressed in the letter are those of the authors and do not necessarily reflect the views of the International Organization for Migration (IOM). The designations employed and the presentation of material throughout the letter do not imply the expression of any opinion whatsoever on the part of IOM concerning the legal status of any country, territory, city or area, or of its authorities, or concerning its frontiers or boundaries.

REFERENCES

- 1 Greenaway C, Hargreaves S, Barkati S, *et al.* COVID-19: Exposing and addressing health disparities among ethnic minorities and migrants. *J Travel Med* 2020; **27**.
DOI:10.1093/jtm/taaa113.
- 2 Hayward SE, Deal A, Cheng C, *et al.* Clinical outcomes and risk factors for COVID-19 among migrant populations in high-income countries: A systematic review. *J Migr Heal* 2021; **3**: 100041.
- 3 Bartovic J, Datta SS, Severoni S, D'anna V. Ensuring equitable access to vaccines for refugees and migrants during the covid-19 pandemic. *Bull. World Health Organ.* 2021; **99**: 3-3A.
- 4 UNCHR. A third of refugees eligible for COVID-19 Vaccine have been vaccinated in Jordan's refugee camps – UNHCR Jordan. 2021. <https://www.unhcr.org/jo/14917-a-third-of-refugees-eligible-for-covid-19-vaccine-have-been-vaccinated-in-jordans-refugee-camps.html> (accessed June 2, 2021).
- 5 UNHCR Regional Bureau for the Middle East and North Africa. COVID-19 Emergency Response Update. 2021 file:///C:/Users/Ana/Downloads/MENA COVID-19 Update %23 18 (1).pdf.
- 6 Wehbe S, Fahme SA, Rizk A, Mumtaz GR, Dejong J, Sibai AM. COVID-19 in the Middle East and North Africa region: An urgent call for reliable, disaggregated and openly shared data. *BMJ Glob. Heal.* 2021; **6**: 5175.