

# ISHMUN

## Chair Research Report Guide

(United Nations High Commissioner for Refugees)

Chair Research Report

Topic: The Question of Refugees and The Impact of COVID-19

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## **Introduction**

Many people have been left susceptible as a result of the recent COVID-19 outbreak and its consequences. Refugees are an example of such a group. Refugees are people who have been forced to flee their nations or homes due to a conflict or political reasons. According to UNHCR, there are nearly 79.5 million refugees around the world, 26 million of them being under 18 (UNHCR). Refugees and other displaced individuals are among society's most vulnerable and neglected people, which leaves them defenseless against such a pandemic.

The COVID-19 pandemic has proven to be a severe health threat for Refugees. With their living conditions that lack basic sanitation and social distancing, the risk of contagion increases. While there have been many attempts to implement the precautions suggested by the World Health Organization (WHO), it's seen to be close to impossible to succeed. Limited medical resources and insufficient camp hospitals are just a few of the impediments increasing the vulnerability of Refugees to the COVID-19 pandemic. The pandemic has also affected the mental health of the refugees. Past trauma exposure (PTSD) combined with the hardships caused by the outbreak may become a challenge in risk assessments against the pandemic. Despite the lack of large prospective studies, their higher risk of COVID-19 infection appears to cause significant levels of stress, which could exacerbate or cause new mental health issues.

So far the UNHCR has responded with life-saving epidemiologies such as boosting water and sanitation facilities, increasing access to public health and hygiene as well as airlifting emergency supplies, establishing isolation units, and is continuing to monitor the outbreak (UNHCR). All of the efforts of UNHCR are funded by donations and the World Bank.

While a pandemic might serve as a wake-up call to recognize and heal the sociocultural, sociopolitical, and sociohistorical ruptures that create vulnerability among refugees around the globe, refugees are in need of urgent support in their fight against COVID-19. Controlling the outbreak among refugees relies on the beliefs of unity, human rights and equality. Otherwise, the risk of leaving the most neglected people behind lies on the shoulders of the world.

### **Key Terms**

**Refugees:** Under the 1951 Refugee Convention a refugee is defined as someone who is unable or unwilling to return to their country of origin owing to a well-founded fear of being persecuted for reasons of race, religion, nationality, membership of a particular social group, or political opinion (UNHCR).

**Epidemiology:** the study of the distribution and determinants of health-related states or events in specified populations, and the application of this study to the control of health problems (CDC).

### **Background Information on The Topic**

Following World War II, the large waves of people fleeing Eastern Europe were defined as the first refugees. Since then, several diseases have been reported to spread amongst the refugees such as cutaneous diphtheria, shigellosis, hepatitis A, and tuberculosis (Wejse). Besides such diseases, refugees have also faced medical conditions such as hepatitis, and vitamin D insufficiency (Wejse). Besides Refugees facing many diseases and medical conditions, they have also been dealing with problems considering their mental health. Considering forced displacements due to armed conflicts, persecutions or natural disasters putting significant psychological stress on individuals, families and communities, the refugees have dealt and are continuing to deal with severe mental health issues (UNHCR). Refugees with preexisting mental health conditions, including depression, anxiety, bipolar disorder and psychosis, face greater challenges with the combined stress of a pandemic (UNHCR).

Insufficient information has been published about medical conditions in refugee camps. Although factors such as overcrowding, poor water and sanitation conditions, lack of vaccination, delayed diagnosis and reduced access to treatment leading to increased occurrence, severity and case fatality of infectious diseases are known, UNHCR has yet not opened a database for further information to be shared with the public. (Kahi). With refugees and their highly mobile living conditions, such factors are difficult to take under control. IN past successful attempts to lower cases within epidemics the UNHCR has followed many epidemiologies. The routine collection of data on population, mortality, morbidity, inpatient and referral services, laboratory, disease control, immunization, nutrition, and reproductive health has been substantial (Kahi). The UNHCR has also made a list of diseases with outbreak potentials and assigned a corresponding weekly alert threshold (Kahi). Reaching the threshold triggers the declaration of an outbreak and its reporting, where a “closed outbreak report” is prepared by UNHCR Health Officers to be shared with the public (Kahi). Although such reports were present in epidemics with cases lower than 10 per camp, such a way would be more helpful to bring in donations for COVID-19.

### **Major Countries and Organizations involved**

**Bangladesh:** Bangladesh is one of 17 countries with the most COVID-19 cases. With a poor health infrastructure, limited resources, and poor adherence to physical distancing Bangladesh has had a challenge against COVID-19. In Cox's Bazar, a city in southern Bangladesh, the country is hosting 1 118 576 forcibly displaced Myanmar citizens known as Rohingya, including 860 175 Rohingya individuals who are sheltering in the world's largest refugee camp (The Lancet). Although the government provides daily testing, since Rohingya refugees with signs of the disease are not coming forward to be tested, the reported number of people with COVID-19 may not be correct. Fear creates stigma in communities, preventing people from seeking and receiving treatment.

**The Islamic Republic of Iran:** The Islamic Republic of Iran is one of the top ten countries impacted by the coronavirus. The Iranian government responded by closing schools, universities, and guilds, among other things. Furthermore, the Iranian government has vowed to close most sectors. Despite these measures working in favor of the citizens, such measures are close to impossible to be conducted on the Afghan Nationals( one of the largest refugee populations in the world). For such a large group, the Iranian government faces challenges such as the lack of insurance and high medical expenses. Since many people cannot pay insurance owing to a lack of residency permits, they are not referred to medical centers and are unwilling to be admitted to hospitals. The number of patients referred to clinics has reduced, owing to the fact that most refugees in Iran are day workers who do not have an income because of the COVID-19 outbreak and statewide quarantine. As a result, the primary worry for treatment is connected to medical costs, which, if resolved, will eliminate the need to hospitalize these individuals.

**Relevant UN Reports or Previous Resolutions:**

<https://www.unhcr.org/5fc1262e4.pdf>

- This UN report outlines the background of the topic of COVID and its impact on Refugees. This report also describes some of the ways UNHCR has tried to solve the problem in various different countries worldwide. This article also contains numerous useful sources which can be used for further research.

<https://www.who.int/bulletin/volumes/98/8/20-271080/en/>

- This article written by the World Health Organization explains how this issue has come into shape and why refugees tend to have disproportionately higher infectivity, and mortality rates from it.

***Previous Attempts to Solve the Issue:***

The UNHCR committee has made numerous measures to help solve this issue.

Firstly, UNHCR has helped distribute key materials required to maintain hygiene, such as soap and hand sanitizers; which has played a vital role in limiting the spread of COVID-19.

Additionally, in partnership with Fidela, UNHCR has also created Conectados Ganamos, an initiative which aims to improve people's ability to use digital technology all over the world. Through this initiative, UNHCR has given hundreds of refugee kids access to online courses, with the hope that it will help create employment opportunities in the future.

To further ensure that young refugees living in vulnerable and marginalized communities are able overcome the effects of the pandemic, the UNHCR committee has also helped create numerous Safe Learning Spaces across the world; which contain hand-washing facilities, disinfectants, and hand sanitizers.

Moreover, the WHO (World Health Organization), a UN's specialized agency, has collaborated with governments all around the globe to make sure its medical equipment reaches every community, including homeless, displaced and refugee people. WHO has also started monitoring cases in high refugee population areas such as Turkey, Lebanon, Thailand and Iraq to ensure the protection of refugees from the COVID-19 virus.

Lastly, WHO has also greatly helped raise awareness to limit the spread of COVID-19. For example, in Iraq, WHO recently conducted a nine day awareness campaign to teach citizens on how they can help prevent the spread of COVID-19.

### ***Possible Solutions:***

One solution to this problem is mass distribution of the COVID-19 vaccine. This will greatly help solve this problem for two main reasons. Firstly, on the health side, if a refugee has been vaccinated, they are more immune to the effects of COVID-19. Secondly, with a significant portion of the world's population vaccinated, all the lockdowns would be able to be lifted, which would result in the economy 're-opening'. With this, there would be a lot more job opportunities available, which would make it significantly easier for refugees to get

a source of income and integrate into society. Additionally, this solution would also mainly solve the problem of refugee kids not receiving education because with no lockdowns, kids would be able to return back to their schools.

Until the majority of the population becomes vaccinated, it is important to continue to give everyone access to COVID-19 testing. This is an effective short-term solution because it allows adults and children who test negative to go back to work and school respectively. This, as stated previously, helps open up the economy and help refugees integrate into society. However, for this to work, international cooperation is crucial. This is because for mass testing, all countries will need sufficient amounts of testing equipment, which currently some countries don't have.

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