



IOM GHANA COVID-19  
Strategic Preparedness  
and Response Plan  
February-December 2020

## SITUATION OVERVIEW

On 11 March 2020, the World Health Organization (WHO) upgraded the status of the COVID-19 virus outbreak from epidemic to pandemic, thereby signalling its geographic spread across the world. As of 13 July 2020, there have been 12,685,374 confirmed cases and 565,000 deaths globally.<sup>1</sup>

The Government of Ghana (GoG) identified its first two cases of COVID-19 on 12 March 2020. Since then, it has swiftly implemented measures to combat the spread of COVID-19, including suspending all public gatherings exceeding 25 people, closing all universities and schools, and closing all borders to travellers until further notice.<sup>2</sup> Since 13 July 2020, there are 24,518 confirmed cases and 139 deaths throughout the country with the Greater Accra being the epicentre.<sup>3</sup>

Although primarily a public health issue, the pandemic has had a tremendous socio-economic impact, with global response measures causing unprecedented mobility and movement restrictions. In Ghana, COVID-19 has once again put a spotlight on the national public health system and the role that points of entry (POEs) play within this system – building upon knowledge gained during the Ebola epidemic.

Challenges to border management in Ghana, especially in terms of infrastructure and the large number of irregular crossing points, are well documented. These challenges limit the ability of border management officials to respond to international public health emergencies or border-related crises according to International Health Regulations (IHR) and humanitarian border management (HBM) principles. IOM's Health, Border and Mobility Management (HBMM) framework offers solutions to these challenges by supporting border authorities and frontline officers in improving prevention, detection and response to the spread of infectious diseases and other health threats along the mobility continuum, with a focus on border areas. Previous IOM interventions in Ghana, such as the Global Health Security Agenda (GHS) project during the Ebola crisis, have effectively used the HBMM framework by increasing information sharing between border communities and national authorities on prevention, detection and response at irregular border crossings and developing standard operating procedures (SOPs) for border management officials and training them on their implementation.

1. [https://www.who.int/docs/default-source/coronaviruse/situation-reports/20200519-covid-19-sitrep-120.pdf?sfvrsn=515cabfb\\_2](https://www.who.int/docs/default-source/coronaviruse/situation-reports/20200519-covid-19-sitrep-120.pdf?sfvrsn=515cabfb_2)

2. <https://www.imf.org/en/Topics/imf-and-covid19/Policy-Responses-to-COVID-19#G>

3. [https://www.who.int/docs/default-source/coronaviruse/situation-reports/20200519-covid-19-sitrep-120.pdf?sfvrsn=515cabfb\\_2](https://www.who.int/docs/default-source/coronaviruse/situation-reports/20200519-covid-19-sitrep-120.pdf?sfvrsn=515cabfb_2)

Furthermore, the closure of borders has led to a disruption in cross-border circular mobility and trade which has not only negatively impacted many vibrant border communities such as those in Aflao, Elubo and Sampa but has also led to many migrants becoming stranded across the borders.<sup>4</sup> IOM figures highlight over 21,000 stranded migrants at various borders in the West and Central Africa region as well as an estimated 2,500 migrants waiting in transit centres, including Ghanaian citizens.<sup>5</sup> There are also reports of Ghanaians stranded in Kuwait<sup>6</sup>, China<sup>7</sup> and Dubai<sup>8</sup>.

Restriction measures could also present new risks or could heighten already existing risks to vulnerable migrants. Migrants reliant on cross-border trade or employment might become desperate and seek the services of smuggling networks to breach border restrictions, increasing their susceptibility to human rights abuses and exploitation, including trafficking in persons (TiP). During crises, such as the current pandemic, migrants could face specific vulnerabilities as they cannot rely on the natural social protection mechanisms available to nationals by extended family and other social networks and would need to rely on the host state's social protection systems to provide a safety net. They might find themselves forced to work without payment or in high risk situations without appropriate protective measures. Victims of trafficking (VoTs), or those at risk of trafficking, are likely to experience increased vulnerability due to a lack of access to health care, information, protection and support.

Female migrant workers might also face heightened exposure to gender-based violence (GBV). In Ghana, many young girls and women from rural areas within the country and

4. [https://www.iom.int/news/iom-supports-migrants-stranded-cote-divoire-ghana-border-officials-trained-and-equipped?utm\\_source=Unknown+List&utm\\_campaign=bb10a2b60b-EMAIL\\_CAMPAIGN\\_2020\\_05\\_12\\_05\\_28&utm\\_medium=email&utm\\_term=0\\_-bb10a2b60b-](https://www.iom.int/news/iom-supports-migrants-stranded-cote-divoire-ghana-border-officials-trained-and-equipped?utm_source=Unknown+List&utm_campaign=bb10a2b60b-EMAIL_CAMPAIGN_2020_05_12_05_28&utm_medium=email&utm_term=0_-bb10a2b60b-)

<https://www.graphic.com.gh/news/general-news/ghana-news-80-immigrants-refused-entry-into-ghana.html>:

<https://www.graphic.com.gh/news/general-news/immigration-on-high-alert-12-okada-riders-arrested.html>:

<https://www.graphic.com.gh/news/general-news/immigration-on-high-alert-12-okada-riders-arrested.html>:

<https://www.modernghana.com/news/997651/9-arrested-for-trying-to-cross-ghana-togo-border.html>

5. <https://rodakar.iom.int/covid-19>

6. <https://www.myjoyonline.com/news/national/first-ghanaian-deportees-arrive-from-kuwait/>

7. <https://www.bbc.com/pidgin/tori-51717056>

8. <https://www.ghanaweb.com/GhanaHomePage/NewsArchive/Coronavirus-Over-200-stranded-Ghanaians-in-Dubai-cry-for-govt-intervention-962761>

neighbouring countries work in urban homes as domestic labourers where they bear the burden of caring for sick persons or work without appropriate preventive measures, making them vulnerable to contracting COVID-19. Migrant children may be adversely affected by their parents losing their employment or may be left at home due to school closures while their parents continue to accept any employment available. It is essential that, despite the ongoing pandemic, national stakeholders continue to provide protection services and are supported to be able to adapt to evolving protection concerns occasioned by the pandemic.

Anecdotal evidence shows that there has been a significant return of migrant workers to their places of origin – both internally and across borders - in response to the pandemic, which could have an unintended impact on communities in that these would lack the capacity to cope with the socio-economic effects of these spontaneous returns and also lack the capacity to provide isolation/quarantine facilities, testing and treatment. Many migrants live in areas of high population density, such as Greater Accra, Greater Kumasi, Kasoa, and Tema. Highly congested areas are at risk to the rapid spread of the virus, thus putting pressure on the limited health infrastructure for testing and case management. In addition, migrants risk being stigmatized by misperceptions of being vectors of the disease, while simultaneously being excluded from infection prevention and control (IPC) sensitization due to language barriers or the use of inappropriate mediums to transfer the message. Integrating migrant communities into a coherent risk communication and community engagement (RCCE) strategy is critical to combat stigma against migrants while ensuring that migrant hosting communities play an active role in prevention, response and recovery efforts.

Migrants, including refugees, might live in camps or overcrowded informal settlements or slums where social distancing and limiting public gathering might be impossible

to control. These living conditions might also mean that they do not have access to adequate water, sanitation, and hygiene infrastructure. They might also rely on the informal economy for income generating activities or be totally reliant on humanitarian funding to meet their daily needs. It is crucial that migrant settlements, especially the most vulnerable ones are accounted for in response and recovery efforts.

As the economic impact of current restrictions continue to take shape, it is becoming apparent that migrants will be greatly impacted. Most economies in West Africa, including Ghana, are largely dominated by the informal economy and agriculture. Most migrants in Ghana are low-skilled workers, often working for a daily wage and with limited social protection, making them extremely vulnerable in times of crisis, as they are usually the first to lose their jobs and wages. Key challenges to address these issues include the fact that the informal economy and its interaction with market shocks is under-researched in the region, making it difficult to provide tailor-made responses to support their socio-economic recovery. There is a need to better understand the economic impact this pandemic will have on migrant workers in Ghana and how to adequately build resilience and support their economic recovery.

To address these challenges, IOM Ghana proposes this Strategic Preparedness and Response Plan (SPRP) which outlines eight intervention pillars across four strategic priorities: coordination and partnerships, RCCE, disease surveillance, points of entry, laboratory systems, IPC, protection, and addressing the socio-economic impact of the crisis. This plan is in line with the Socio-Economic Response and Recovery Plan (SERRP) conducted by the United Nations (UN) in Ghana as well as the WHO-led UN Country Preparedness and Response Plan (CPRP) for Ghana, which has been endorsed by the GoG and development partners. The plan is envisioned to be implemented until the end of 2020.

## Key Points

- COVID-19 restrictions are impacting mobility, including disrupting circular mobility and trade at cross-border markets such as those in Aflao, Elubo and Sampa. An estimated 21,000 migrants are stranded at various borders in the West and Central Africa region as well as an estimated 2,500 migrants, including Ghanaian citizens, are waiting in transit centres in countries such as Niger. While some are stranded, other migrants are attempting to enter and/or leave Ghana through irregular means, increasing their risk to TiP and smuggling of migrants.
- COVID-19 has raised concerns about the protection of vulnerable migrants in Ghana such as domestic labourers and female migrants, with increasing incidence of GBV globally, especially affecting women and girls. National protection systems need to remain functional while they also adapt to evolving protection concerns occasioned by the pandemic.
- Limited infrastructure, inadequate operating procedures and numerous irregular crossing points limit the capacity of border management officials to perform their functions in the national public health emergency response system, including referral, screening, and surveillance.
- Migrants and their host communities (including border communities) need to be integrated into a coherent RCCE strategy to combat stigmatisation and ensure effective IPC.
- There is a need to ensure that migrant communities have adequate access to testing and case management facilities if response and recovery measures are to be effective.

## IOM GHANA CAPACITY TO RESPOND TO COVID-19

With more than 430 offices and about 14,000 staff across the world – including thousands working specifically on health and RCCE, IOM is uniquely placed to provide support in international public health emergencies such as the COVID-19 pandemic.

Operating in Ghana since 1987, with dedicated medical staff, nurses, and lab technicians, IOM's Migration Health Division (MHD) in Ghana has over the years provided essential medical assistance to refugees, potential and returning Ghanaian migrants, and mobile populations. Working in close collaboration with private laboratories, IOM is in a key position to assist the Government of Ghana in lab sample collection for COVID-19 testing by providing its partner laboratory with Xpert Xpress SARS-CoV-2 test kits for COVID-19 diagnosis, among other interventions.

Furthermore, through the GHSA, IOM Ghana has worked with the GoG during the Ebola crisis preparedness and contributed to strengthen Ghana's preparedness and response capacity on infectious disease outbreaks, health threats and public health emergencies of international concern (PHEICs) in line with IHR requirements. These interventions have also contributed to strengthening community-based surveillance capacity among migrant communities along the borders of Ghana and at POEs. IOM is currently participating in several committees that address surveillance, POEs, laboratory and risk communication to provide technical support in the fight against the COVID-19 pandemic.

Additionally, IOM Ghana works with different arms of the GoG on programs and activities supporting better migration management and governance and has significant experience in providing assistance, support and services to address critical humanitarian needs in the country, for instance through its Assisted Voluntary Return and Reintegration (AVRR) program, which includes dedicated medical and psychosocial assistance for vulnerable Ghanaians returning home, as well as through support provided to child and adult VoTs. IOM also has an experienced Immigration and Border Management (IBM) division and longstanding expertise in supporting the Ghana Immigration Service (GIS) and other actors in addressing challenges related to border security through projects such as the GHSA and the Anti-Crime Capacity Building Program (ACCBP) implemented across Ghana, Togo and Benin

## IOM GHANA'S STRATEGIC AND OPERATIONAL APPROACH

IOM Ghana aims to contribute to the overall objective of the IOM Global Strategic Preparedness and Response Plan to assist governments and partners to respond to COVID-19 by supporting a coordinated, comprehensive, equitable and timely response to the crisis to halt further transmission of the disease, limit the humanitarian and socioeconomic effects of the pandemic, and support affected communities to prepare for longer term-recovery. IOM Ghana's approach is founded on the belief that population mobility and cross border dynamics need to be considered in response and recovery, including the protection of migrants and travellers. In preparing for and responding to disease outbreaks, IOM's interventions are anchored on IOM's Health, Border and Mobility Management (HBMM) Framework. The framework links the understanding of population mobility with disease surveillance and provides a platform to develop country-specific and multi-country interventions, emphasizing health system strengthening along mobility corridors in line with the 2005 International Health Regulations (IHR). IOM aims to support the Government of Ghana in ensuring that essential protection services, such as shelters and emergency health care, remain available to the most vulnerable persons, while also ensuring that protection actors can continue to provide services in a safe way. The proposed strategy will provide operational, technical and policy support to, amongst others, reinforce coordination and partnerships; track mobility patterns; risk communication and community engagement; management of points of entry; and infection prevention and control. IOM Ghana's Strategic Preparedness and Response Plan is also in line with the GoG National Preparedness Plan; WHO Strategic Preparedness and Response Plan; the UN CPRP and the SERRP.

## IOM GHANA AREAS OF INTERVENTION

### **STRATEGIC PRIORITY 1: ENSURE A WELL-COORDINATED, INFORMED AND TIMELY RESPONSE THROUGH MOBILITY TRACKING SYSTEMS AND STRENGTHENING PARTNERSHIP AND COORDINATION STRUCTURES ESTABLISHED AT THE COMMUNITY, NATIONAL AND REGIONAL LEVELS**

#### COORDINATION AND PARTNERSHIPS

Ghana's land, sea and air borders have been closed since 22 March 2020. However, there have been reports of migrants using irregular crossing points to enter the country. During this time, and when borders reopen, it is crucial to have effective coordination/partnership with border communities and neighbouring countries to ensure effective disease surveillance systems. IOM Ghana will support the establishment of coordination mechanisms at community, national and regional levels through the following:

- Facilitating cross-border cooperation between GoG agencies and their counterparts in neighbouring countries on the application of operational guidance on screening, isolation and referral of suspected cases; engaging cross-border communities on surveillance and prevention measures; and supporting the management of irregular crossing points and counter human smuggling and trafficking activities.
- Developing SOPs for cross-border cooperation on referrals, return and repatriation of stranded migrants, possible sharing of cross-border emergency management resources, consular assistance, and addressing migrant protection concerns.

## TRACKING MOBILITY IMPACTS

IOM figures highlight over 21,000 stranded migrants at various borders in the West and Central Africa region as well as an estimated 2,500 migrants waiting in transit centres, including Ghanaian citizens. There are also reports of Ghanaians stranded in Kuwait, China and Dubai. As movement across borders continues to be affected, IOM's capacity to provide data and analysis on population mobility dynamics remains crucial for a more targeted and evidence-based response. IOM will contribute to providing a comprehensive understanding of the effect of COVID-19 on mobility at country level by:

- Tracking presence of stranded migrants and vulnerable populations in border areas and locations in the country
- Mapping internal and cross-border mobility patterns in order to understand where to set up screening stations in the medium to long term
- Mapping and monitoring points of entry to report more in-depth and up-to-date information on the operational status, types of restrictions, duration of restrictions, population categories affected and public health measures

## STRATEGIC PRIORITY 2: CONTRIBUTE TO GLOBAL, REGIONAL, NATIONAL AND COMMUNITY PREPAREDNESS AND RESPONSE EFFORTS FOR COVID-19 TO REDUCE ASSOCIATED MORBIDITY AND MORTALITY

### RISK COMMUNICATION AND COMMUNITY ENGAGEMENT (RCCE)

Past crises have shown that the stigmatization of certain groups may occur, with migrant communities being particularly vulnerable as they may be perceived as having brought the virus to Ghana. The distribution of contextualized, translated and fit-for-purpose awareness raising material during community engagement activities can be effective in combating stigmatization as well as in communicating the risks associated with COVID-19. IOM Ghana will continue to support the GoG through the following:

- Provide technical guidance and support to the Health Promotion Division of the Ghana Health Service (GHS), in coordination with GIS, on how to effectively communicate risks on the COVID-19/human mobility nexus. This would be achieved through the development of communications strategies which include targeting migrant/mobile populations, including children.
- Communicate risks associated with COVID-19 during the implementation of community engagement activities in Ghanaian border communities, specifically along the country's Eastern and Northern mobility corridors, with contiguous border communities between countries and districts with high migrant populations.
- Consult with migrant communities to understand perceptions of the virus' transmission, treatment, and how this may differ between groups. This will enable to address misinformation and disease-related stigma.

### POINTS OF ENTRY (POE)

The effective management of POEs is critical to the successful control of COVID-19. Port Health authorities are present in only 13 of the 45 authorized POEs, with 80 percent of authorized POEs without Public Health Emergency Response Plans (PHERP) in place. GIS officers often perform health screening with limited or no capacity and equipment. Building on previous interventions, such as the development of border SOPs, IOM will support Ministry of Health (MoH), GIS, Port Health, and other key border management stakeholders to enhance preparedness at prioritized POEs through the following:

- Support efforts at POEs where there are no port health officials to develop SOPs based on the existing PHERP, in order to conduct screening and referrals, provide health information for travellers and improve hygiene infrastructure and equipment, including referrals of non-COVID critical services for persons with specific protection needs.
- Conduct trainings for GIS, Port Health, and Customs officials on the PHERP SOPs, including training-of-trainers for officials and four table-top simulation exercises to test the PHERP SOPs.
- Coordinate the donation of personal protective equipment (PPE) such as surgical gloves, surgical masks, thermal scanners, handheld infrared thermometers and isolation suits to the GoG and hygiene products such as alcohol-based sanitizers and veronica buckets for handwashing directly to Port Health officials in border communities.
- Support the identification and equipping of land POEs with temporary isolation structures and improved hygiene infrastructure (safe water supply systems and toilets) to support the prevention and control the spread of the virus.
- Equip POEs with information technology (IT) equipment to facilitate data collection to support contact tracing and data exchange with the public health emergency database called Surveillance Outbreak Response Management and Analysis System (SORMAS).
- Develop SoPs for the Operation and Maintenance (O&M) activities for WASH facilities at PoEs to ensure cleaning and disinfection of facilities.

## NATIONAL LABORATORY SYSTEM

Globally, it has been shown that the early diagnosis of infected individuals reduces the spread and mortality of COVID-19. Thus, the ability to provide rapid diagnosis of COVID-19 cases in Ghana is critical to controlling the outbreak. In addition, enhanced border infrastructure in Ghana is needed to support the surveillance and case management functions of border management officials. IOM will continue to enhance existing national and regional level disease surveillance systems as well as increase the country's laboratory testing capacity through the following:

- Encourage partnerships with government designated laboratories (including private sector) to provide Xpert Xpress SARS-CoV-2 test kits for COVID-19 diagnosis on GeneXpert DX platform.
- Work with GHS to offer COVID-19 sample collection to UN staff, their dependents and the diplomatic corps using existing IOM facilities. Xpert Xpress SARS-CoV-2 test kits will be made available to test this targeted population.

## INFECTION PREVENTION AND CONTROL (IPC)

In Ghana, most authorized POEs do not have IPC plans in place or the necessary infrastructure to implement them, putting both border officials and migrants at risk. IOM will support enhanced national capacity for IPC through the following:

- Distribute hygiene kits for men, women and children such as veronica buckets, detergent, soap, homemade alcohol-based sanitizers, disinfectants, and thermometers, as well as install handwashing stations during COVID-19 awareness raising events.
- Provide training on the proper use of PPE for health professionals at the community level, particularly in border areas, to prevent the spread of the disease among health workers and their relatives.
- In order to improve WASH infrastructure, construct/maintain boreholes in selected remote border communities and POEs.
- Conduct trainings for the implementation and maintenance of IPC measures such as hand washing, proper wearing and disposal of masks, physical distancing, proper cleaning and disinfection in six border communities.
- Offer technical assistance to the GoG to support contact tracing and related mapping exercises in the immediate term.

### **STRATEGIC PRIORITY 3: ENSURE ACCESS OF AFFECTED PEOPLE TO BASIC SERVICES AND COMMODITIES, INCLUDING HEALTH CARE, AND PROTECTION AND SOCIAL SERVICES**

#### **PROTECTION**

COVID-19 restriction measures, including those related to mobility, present new risks or heighten existing risks for migrants. Lessons from previous crisis response evaluations teach us that during crisis, migrants are often at heightened risk of exploitative practices including trafficking in persons and human smuggling. They might find themselves forced to work without payment or forced to work in high-risk situations without appropriate protective measures. VoTs, or those at risk of trafficking, are likely to experience increased vulnerability due to a myriad of factors, including a lack of access to health care, information, protection and support. Female migrant workers might also face heightened exposure to gender-based violence (GBV). In Ghana, many young girls and women from rural areas within the country and neighbouring countries work in urban homes as domestic labourers where they bear the burden of caring for sick persons or work without appropriate preventive measures making them vulnerable to contracting COVID-19. Unaccompanied and separated children (UASC) may suffer maltreatment, including arbitrary detention and mass deportation due to COVID-19 related restrictions. It is critical that protection systems for vulnerable migrants persist despite the crisis. IOM will enhance capacities to ensure the protection and access to services for migrants and local communities continue through the following:

- Support the continuation of critical protection and referral mechanisms, providing protective equipment, developing contextualized operational guidance and capacity building, including related to emergency shelter, access to health care, and family tracing in order to ensure assistance to or referrals of the most vulnerable persons, including survivors of GBV, UASCs, and stranded migrants.
- Support shelters that provide services to vulnerable persons (survivors of GBV, stranded migrants, and UASCs) with WASH infrastructure, training, and PPEs to carry out their work in a safe manner.
- Train frontline response staff and other migration stakeholders including at community level with Mental Health and Psychosocial Response tools specifically tailored for migrant populations (including those that are stranded, in quarantine, freshly reintegrated in communities or stigmatized).
- Provide immediate assistance (non-food items, sanitization kits, etc.) to stranded and returning migrants and to the quarantine facilities supporting them, and provide reintegration support to the most vulnerable returnees.
- Conduct a rapid assessment of COVID-19 impact on GBV, child protection, and counter-trafficking trends in the country to inform national response and stakeholders plans.

## STRATEGIC PRIORITY 4: SUPPORT INTERNATIONAL, NATIONAL AND LOCAL PARTNERS TO RESPOND TO THE SOCIO-ECONOMIC IMPACTS OF COVID-19.

### ADDRESSING SOCIO-ECONOMIC IMPACTS OF THE CRISIS

Most migrants in Ghana are low-skilled workers with limited social protection, making them extremely vulnerable in times of crisis, as they are usually the first to lose their jobs and their wages. Lessons learnt from previous responses to crises highlight that migrants and displacement affected populations are often overlooked, negatively impacting the ability of migrants and the economy to recover after a pandemic. However, a deeper understanding on this topic is needed. IOM will support in addressing the socio-economic impacts of the crisis through the following:

- Assess the impact of COVID-19 on remittances flows to Ghana and on beneficiary households (health, nutrition, education, etc.).
- Support returnees and migrants' livelihood resilience through entrepreneurship trainings and direct livelihood assistance.
- Support capacity building for remittance service providers (RSPs) to develop innovative tools for recipients of remittances to access savings and investment products.
- Advocate for the inclusion of migrants in social protection schemes and other recovery measures, including community resilience programmes and livelihood protection interventions.

## IOM'S FUNDING REQUIREMENT

IOM Ghana's funding requirement is **USD 2,500,000, from February – December 2020**

This amount represents an indicative requirement for IOM Ghana's planned interventions, disaggregated by activity pillars and is bound to evolve, given the changing nature of the outbreak and the national priorities.

		TOTAL REQUESTED AMOUNT (USD)
Coordination and Partnerships		\$ 100,000
Tracking Mobility Impacts		\$ 75,000
Risk Communication and Community Engagement		\$ 300,000
Points of Entry		\$ 750,000
National Laboratory System		\$ 450,000
Infection Prevention and Control		\$ 200,000
Protection		\$ 550,000
Addressing Socio-Economic Impacts		\$ 75,000
<b>TOTAL</b>		<b>\$ 2,500,000</b>