**COVID-19 Outbreak Response Coordination Group for the 9 temporary shelters along the Thai-Myanmar border (Provincial Level) Tak**

**13th Meeting, 1 June 2020 10:00 – 11:15am**

**Participants**: Madalena Hogg, Nikola Errington (UNHCR), Somsak Thanaborikan (Chair), Atchara Chan-O-Kul, Preeyaluk Sataranon (IRC), Maggi Quadrini (KWO), Honest Roger (ADRA), Arthorn Srikeeratikarn (TBC), Sajith Gunaratne (IOM)

1. **Review of Action Points**
* See updated Action Item Tracker
1. **Situation Overview (UNHCR/IRC)**
* Tak CDC Announcement Nos. 21 & 22 were issued on 22 May. The main contents are that public transportation resumed on 23 May, allowing non-Thai nationals return to MYA via 2nd Thailand-Myanmar Friendship Bridge, mosques were allowed to open on Eid Al-Fitr day.
* During 23-28 May, there are 6,530 migrant workers crossed back to MYA, both registered or unregistered via MYA Embassy, via the 2nd Bridge. The border remains closed officially.
* As of 28 May, there are total 186 Thai people returned from Myanmar and quarantined for 14 days.
* COVID situation in Thailand – 4 new cases yesterday, all from outside of Thailand and stay in State quarantine, generally less than 10/day.
* Migrant workers not officially allowed to return to Thailand
* Two cases of COVID-19 reported in Karen state, in Kawkareik (To be clarified).
1. **Surveillance, Case investigation and Outbreak Rapid Response (IRC)**
* No suspected or confirmed cases in the camps. Even the number in Thailand are low, aware of possible second wave so still ensuring response is prepared. Expanding facilities for isolation wards.Community isolation for patients patients who have mild symptoms, not being worked on yet in preparation stage.
* CDC providing technical and financial support to the “Enhancing Surveillance Project” in 9 refugee camps. This project mainly focuses on surveillance. Therefore, the specimen collection will be selected around 8-10% testing of ARI/IIL patients, MHS supposed to start in June, and will then move to Tak camps. Has been discussed with Nupo/Umpium Camp Committees/Palads to go ahead.
* Work with SMRU for testing for all camps, PHO is planning to do active case finding but only targeting Thai cases, no timeline yet
1. **Infection Prevention Control (IRC)**
* Will discuss with SCI on handwashing stations in schools, IRC only has budget for health/non-health IRC facilities. Need to do assessment first to determine level of needs.
* IRC will conduct soap distribution on own schedule
1. **Risk Communication and Community Engagement (ADRA)**
* Key messages on SGBV were sent to camps last week.
* KAP ongoing, testing this week then start next week in Tak camps.
* Home visits is finished – no ongoing workplan, others (COERR, HI) have ongoing home visits that include COVID-19 messaging.
* Masks – it has been reported that there is a need for more masks in Umpium – UNHCR updated that the procurement of 94,000 masks for all camps, including Umpium will begin shortly, delivery dates from 8-12 June. The mask tracker indicates that there is no longer a gap – a small number of masks will be distributed through HI/COERR for vulnerable groups.
* ADRA indicated it was unclear regarding the 20,000 masks that SCI had indicated would be distributed to students/teachers. KRCEE is also distributing to teachers/students.
* UNCHR confirmed it will refer to its database for distribution purposes.
* Remarked by UNHCR and ADRA that many camp residents are not wearing their masks – need to find creative ways to motiviate them to wear them.
* ADRA will follow-up again with SCI to clarify the distribution of 20,000 masks
* ADRA to share the messages already translated on how to use/maintain face masks.
1. **Food Assistance (TBC)**
* Continue to distribute hand gel, soap/PPE for food vendors.
* COVID-19 prevention video already shared.
* COVID-19 prevention song produced in Karen, needs to be translated into Karenni/Burmese soon. Will be shared through Camp Committees.
* Drawing competition on COVID-19 prevention messages, finished in Mae La. 34 entries, selected winners and gave prizes. Continuing in other camps.
* Contingency delivery completed in MLA – rice, tinned fish and cooking oil, next week expect to finish in Umpium.
	+ Will try to get information next week whether the top rate of the “most vulnerable” will be maintained or not for all camps beyond the end of June.

**8. Protection & Advocacy (UNHCR)**

* Protection Dashboard is finalized. Next step is to collaborate to monitor how vulnerabilities are changing – this is done through the Joint Protection monitoring framework by the PWG and requires further discussion on monitoring changes in the situation for the most vulnerable and identifying new vulnerabilities.
* Protection monitoring conducted by UNHCR findings indicate that the key issue continues to be freedom of movement followed be food, awareness on COVID-19, safety and security, quarantine, health, assistance.
* Deportation of 3 POCs on 27 May (2 x MLA and 1x UMP), now in quarantine in Myawaddy, UNHCR continues to follow-up with the families.
* Feedback from PWG:
	+ HI shared their RNA for PWDs
		- They covered 19 persons in MLA, UMP, NPO. Additional needs identified included disinfectant for prostheses, wheelchairs, sanitary pads and adult diapers (some had been trained by KWO on how to make their own sanitary pads), challenged with assistance to go to hospitals of the HI centers for support due to the lockdown and for those who have family members/cargivers stuck outside the camps. 100% of nterviewees reported having lost income and livelihood opportunities (either individually or their families) due to the lockdown. Coping mechanisms include: reducing the size and/or number of meals per day, buy cheap and less-preferred food, borrow food or money from shops or other people. Highlighted needs for psycho-social support – 79% of their respondents said that in the past 7 days they felt worried/hopefless/nervousness/anxiety/ sleeping difficulties. Specific concerns include how long the camp will stay in lock down, how long foodprices will remain high, less therapy sessions and less social interaction. All said that they do not have access or do not know how to access psychological support/counseling.
	+ Detention monitoring findings
		- Top reasons for detention during April include: breaking the curfew time, drug abuse and selling alcohol overall for the Tak camps.
		- Detention for illegal exit and entrance from the camps was also notably increased as very rarely enforced pre-COVID.
		- Alcohol selling offenses have notably increased (yet drunk and disorderly offenses have decreased), whilst drug abuse cases have decreased perceivably due to the limitations on drugs entering the camps due to lock down.
		- Detention for offenses related to domestic violence have marginally decreased in Mae La and Umpium and increased in Nupo (2%).
		- The highest percentage of reasons for detention in children and youth group is drug abuse at 28% which increased from 18% in Q1. The most affected camp is Mae La.

**Next meeting: Monday 8 June @ 10am.**