

**COVID-19 Outbreak Response Coordination Group for the 9 temporary shelters along
the Thai-Myanmar border (MHS Province)
8th Meeting, 15 May 2020**

Participants: ADRA (Kelly), ACTED (Wutthipan, Adel), IRC (Parichart), MI (Lasantha), TBC (Umakorn, Tomothy Moore), IOM (Francesco), UNHCR (Lorenzo Leonelli, Duean Wongsa)

1. Situation update (UNHCR/IRC)

- Trends in Thailand

Country, Other	Total Cases	New Cases	Total Deaths	New Deaths	Total Recovered	Active Cases	Serious, Critical	Tot Cases/ 1M pop	Deaths/ 1M pop	Total Tests	Tests/ 1M pop
Thailand	3,018	+1	56		2,850	112	61	43	0.8	286,008	4,098

Trends stable in Thailand. No confirmed cases or PUI in the camps; no active case in MHS Province.

- SBM: coordination meeting held on May 8, access to the MRM/MLO camps restored from May 11 for essential missions, NGOs staff needs to seek DO's clearance first and inform of the purpose of activity; senior Palad requested nonetheless to inform the DO 15 days in advance.
- Advocacy point: UNHCR unable to meet Army commander yet (out of office) to discuss about movement of refugees and COVID-19 response in MHS.

2. Camp governance (KRC, KNRC)

- Overview of community quarantine:

Camp	# Individuals	Location	Total
BMN	5	@ Middle school in S9	2 completed 14 days quarantine.
BMS	21	Home quarantine	CHW team and SL closely monitoring.
MLO	8	-	2 new returnees, 6 remaining in quarantine
MRML	25	-	7 new returnees, 14 completed

- C19 case simulation exercise:
 - BMN/S: postponed upon request of camp committee, due to fear that a simulation will invite the virus in the camp; alternative: IRC to conduct with key staff and local authorities
 - MLO/MRML: planned for the second week of June.
- Border closure: 131 refugees stranded in norther Karen State and unable to return to MRM/MLO and 161 non camp residents unable to return o Karen State. KRC supporting them, UNHCR is advocating for return of safe readmission of refugees to the camp. MI stressed the importance of an organized return as quarantine facilities won't be able to host all 131 at once.

UNHCR to discuss with KRC and KNRC on gradual resumption of activities by NGOs and access to the camps.

3. Surveillance, Case Investigation and Outbreak Rapid Response + Infection Prevention Control (IRC/MI)

- MI/IRC isolation system: IRC facilities in expansion, MI completed.

Camp	Isolation Places for suspected cases/PUI/Confirmed	Medical quarantine for close contact cases (high risk)	Contact cases (low risk)
BMN	BK RCH (12 beds) + BT Clinics (4 beds), planning on expansion	KnCC building in BMN (20 beds), planning on expansion	Home quarantine
BMS	KNHD training center (6 beds), planning on expansion	VRC in BMS (10 beds), planning on expansion	Home quarantine
MLO	IOM building, 14 beds	RSC building, 6 beds for oxygenation, 12-15 beds for mild symptomatic patients	Home isolation
MRM	RSC building, 12 beds	RSC building in S.4 w triage/prescreening + beds available at RSC building as well	Home isolation

- C19 testing will be done through SMRU in MST. CDC providing funds and technical support. Specimen to be send from MHS to MST, travels for medical purposes get easily cleared by local authorities. Discussion on logistic arrangements between MI IRC and SMRU planned for today. All ILI, PUI and 10-15% of respiratory tract infection (lower/upper) all eligible for testing (tbc).
- Triage:

	ILI	URTI	LRTI	Comments
BMN	0	44	14	No PUI
BMS	0	11	3	
MLO	0	1	4	No PUI
MRM	0	12	7	

ILI – influenza like infection; URTI – Upper Respiratory Track Infection – LRTI – Lower RTI

4. Risk Communications and Community Engagement (ADRA)

- ADRA: Loudspeaker campaign ongoing; If any organization have any messaging update, please share with ADRA to share in the camp. No bleach in hygiene kit; kits to be distributed by STC (end of May?), training for teachers for distribution organized. **ADRA to follow up on fees collected by MLO CC on face masks**
- ACTED: Door to door: 309 HHs in BMN and 252 in BMS; face masks: 4,100 pieces produced in the past week with joint UNHCR/ACTED collaboration being distributed to NGOs, CBOs and vulnerable. Additional 5.000 produced and ready for distribution. UNHCR to coordinate in PWG. **UNHCR to share Home Visit Guidelines.** Reminder from IRC: when distribute the hygiene kit, please ensure the practice of social distancing.
- UNHCR shared the feedbacks collected in the last week (665 KOBO forms collected)
- MI: MI conducted two trainings with 18 staff from HI and 16 staff from KWO on the topic of COVID-19 prevention and awareness raising.

- From PWG:
 - COERR: As of May, they have relayed message to 364 EVI in BMN and 178 EVI in BMS. 1306 masks have been distributed to EVI so far. COERR continues to conduct precautionary training to children like hand washing and hygiene. 272 children reached in BMN, 141 children in BMS. COERR collects 3 youth individuals to work for the information dissemination to the community while the rest continues to assist with precautionary activities.
 - HI: Growing Together project provides 120 masks to parents of children of vulnerable group.

5. Food assistance (TBC)

- Last week CC in MLO/MRML allowed the vender to access to the camp and deliver all dry food so they can have stockpile for 3 months in the camp.

6. Protection + Advocacy – RTG engagement (UNHCR)

- UNHCR protection dashboard (draft) shared
- From the PWG:
 - COERR
 - Disabled EVI concerns on food shortage and education for their children as they are not able to pay for the school fee and uniform with no income.
 - At the end of April, COERR has 56 active cases (39 BMN, 17 BMS), breaking down to 8 sexual abuse, 10 physical abuse, and 38 neglect. There are 3 new cases on physical violence at the end of April as well.
 - They plan to discuss and plan activities to occupy children at home, possibly through color painting, to combat negative coping mechanism, also to avoid violence used by caregivers against children
 - WPE
 - 6 new domestic violence cases in April. WPE thinks there are more but underreported
 - Safe House because crowded, plans to expand at nurseries. There are 6 women and 6 children in total who reside in BMN Safe House, and 1 woman and 3 children in BMS. Most of the cases are domestic violence.
 - For home visit, the staff is unable to reach some of the domestic violence cases because of the presence of the perpetrator in the house. Origin of the violence may derive from depression, or other psychosocial symptoms, lack of food and livelihood activities. IRC LAC: No reported case from BMS, but 6 reported in BMN (2 public disturbance cases, 1 dead body found, 3 illegal driving of motorbike
 - IRC Psychosocial (Update through email)
 - PSP plans to set up a counselling room in IRC's quarantine center for one-to-one counselling to patients.
 - Approx 120 PSP's patients as of April 2020; main causes: Schizophrenia, Depression (includes Major Depression, Persistent Depressive Disorder and Dysthymia) and Alcohol Abuse Disorder.
 - No specific increase numbers of any types of cases; but stress, depression or other psychosocial symptoms among camp residents due to fear of being infected, low livelihood opportunities, no income generation, etc.
 - Due to high workload of camp leadership for the response of C19, less attention has been paid from camp leadership on assisting and monitoring those who are with mental conditions.

Next meeting: Friday 27 May 2020 at 10.00 am