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Update on UNHCR's operations in Europe

A. Situational analysis including new developments

The COVID-19 pandemic significantly impacted population movements within and to Europe during the first half of 2020, prompting States to adapt asylum systems and methods of support accordingly. UNHCR focused on supporting States with technical advice, sharing emerging good practices and adjusting its modes of support to people of concern as necessary.

The overall number of new arrivals decreased by nearly 25 per cent in the first half of 2020 when compared to the same period in 2019, from nearly 37,500 individuals in 2019 to over 28,300 individuals from January to June in 2020. The reduction in the number of arrivals to Europe can be attributed, in part, to a series of COVID-19-related public health measures taken by States, including the imposition of temporary entry bans, quarantine of new arrivals, and, in several cases, the closure of borders.

At the same time, the pandemic posed unprecedented challenges and tested the strength and resilience of existing asylum systems and the capacity of States to innovate and preserve access to territory for people seeking international protection. While some initial border management measures raised concerns in this regard, the majority of States in Europe have since taken corrective action in law or in practice that balanced protection obligations and public health considerations. Notably, the communication of the European Commission regarding exemptions from travel bans for persons seeking international protection, issued on 16 April, contributed to a more coherent practice on access to territory across Europe. By early August 2020, access to registration had been restored in nearly all States.

Consistent with the overall reduction in the number of arrivals to the region, the number of asylum applications received in 32 European countries¹ decreased when compared to the same period in 2019. Only 9,160 asylum applications were registered in these countries in April 2020, which is the lowest number registered since 2008, and represents an 87 per cent decrease from the number of applications recorded in early 2020. There is, however, no evidence to suggest that broad changes in the breadth of global international protection needs contributed to the decrease in arrivals. When emergency measures were eased at the end of May, arrivals to Europe increased, with Greece, Italy, and Spain receiving the most people. Moreover, the socioeconomic consequences of COVID-19 will likely affect global displacement patterns and the directionality of future mixed movements towards Europe.

The number of new arrivals to Europe through Mediterranean routes in the first six months of 2020 decreased markedly when compared with the previous year; however, July witnessed a significant uptick, similar to 2019. Overall, more than 38,900 individuals arrived in Europe between January and July 2020, compared with over 48,500 in the same period in 2019. The points of arrival also suggested evolving patterns and drivers of mixed population movements. While the number of arrivals by sea to Greece reduced by more than half and to Spain by more than a quarter compared with 2019, sea arrivals to Italy more than tripled from January to July 2020, representing approximately 40 per cent of all sea arrivals to European coastal countries this year. Afghans and Syrians accounted for 23 per cent of new arrivals, continuing

¹ This included 28 European Union countries plus four European Free Trade Association countries (Iceland, Liechtenstein, Norway and Switzerland).

trends of prior years. The overall percentage of arrivals from Algeria more than doubled in the first half of 2020, from 5 per cent in 2019 to 11 percent in 2020 to date. Meanwhile, new arrivals from Bangladesh, Côte d'Ivoire, Guinea, Mali, Morocco and Tunisia each accounted for 5 per cent or more of the total number of new arrivals.

To date, some 430 people have lost their lives in the Mediterranean Sea. Although this figure represents a 52 per cent decrease when compared to the same period in 2019, the number of deaths in proportion to arrivals has risen. The capacity of Mediterranean search and rescue operations remained under considerable stress, with quarantine requirements within the context of COVID-19 further hampering progress in ensuring predictable disembarkation arrangements. In the absence of the latter, States continued to adapt their national procedures for disembarkation, putting in place quarantine or other measures accordingly.

Investments in the socioeconomic integration of refugees and migrants continued to show progress and potential in many parts of Europe. This is also reflected in the recently published first evaluation of the National Integration Evaluation Mechanism, a six-year multi-stakeholder initiative to help 15 participating European Union member States address integration challenges in impactful ways. Greater efforts are needed, however, to: address administrative barriers, including in relation to documentation; improve access to social services; and, ensure labour market inclusion. Regarding the latter, the impact of COVID-19 disproportionately affected the livelihoods of refugees who are often employed in the service sector with atypical contracts.

B. Progress and challenges in achieving the global strategic priorities

Ensuring an effective operational response

As COVID-19 spread in Europe, UNHCR's Regional Bureau for Europe coordinated a planning exercise with all country offices in March 2020 to ensure the continuity of essential services and advocacy on behalf of people of concern, as well as the safety and well-being of UNHCR staff members and their families.

Working closely with partners and local civil societies, UNHCR operations in Europe have strongly advocated for the inclusion of people of concern in national COVID-19 preparedness and response plans, and supported national governments and municipal actors in ensuring access to public health and protection-related information through linguistically and culturally appropriate means. To mitigate the subsequent economic hardship on refugee households, UNHCR initiated cash transfers, or topped up existing transfers, in 12 countries in eastern and south-eastern Europe, comprising Albania, Armenia, Azerbaijan, Belarus, Georgia, Lithuania, Montenegro, the Republic of Moldova, the Russian Federation, Serbia, Turkey and Ukraine. Based on preliminary findings of a post-distribution monitoring exercise, the cash transfers were crucial in helping refugees survive lockdowns and preserve household assets.

In countries of arrival across Europe, including Greece, Italy, Malta and Spain, UNHCR worked closely with national authorities to put in place practical, protection and public health-sensitive measures for asylum-seekers. In Greece, UNHCR worked with the Government, providing technical support in a joint effort to quickly identify and move people at high risk of COVID-19 complications to safer accommodation in apartments and hotels, under the existing Emergency Support to Integration and Accommodation programme. At the main reception points on various Greek islands, UNHCR also provided technical advice on the establishment of screening, isolation and quarantine procedures and facilities on the islands and took a number of measures with partners to improve the overall hygiene conditions. In Italy, UNHCR procured personal protective equipment (PPE) and hygiene items to support the host country through UNHCR-led activities with the support of its partners in response to arrivals during the crisis. In doing so, the impact of COVID-19 on persons of concern was mitigated in the short term and allowed for a rapid resumption of UNHCR activities at disembarkation and in centres, as well as in the refugee status determination process.

In south-eastern Europe, onward movements were also impacted by the closure of borders and COVID-19-related containment measures. UNHCR worked closely with governments and partners to mitigate the potential spread of the virus in crowded reception centres through the

provision of public health information on prevention; legal aid; procurement; and the distribution of medical equipment, PPE and hygiene items.

In Ukraine, UNHCR purchased hygiene items for local authorities, as well as non-food items (e.g. bedding) for medical institutions, to support their preparedness.

Safeguarding asylum space and building effective protection systems, including in the context of mixed movements

The Asylum Capacity Support Group (ACSG), a key provision of the Global Compact on Refugees, was formally launched during the Global Refugee Forum in December 2019. Many States in the region have indicated their interest in contributing to the future initiatives of the ACSG, and initial steps to match corresponding requests have been taken in consultation with national authorities. Furthermore, UNHCR produced a set of practical suggestions for governments in Europe to help States balance public health considerations with international legal obligations, specifically with regard to access to territory, registration and the provision of essential documentation.

The measures taken by States in response to COVID-19 have reaffirmed their strong commitment to ensuring continued access to asylum in many parts of Europe. It has also shown that public health considerations can be addressed while maintaining access to territory for asylum-seekers, including in the context of search and rescue and disembarkation. The multitude of good practices and COVID-19-related innovations adopted by States can inform future asylum system reform, such as the use of digital means for registration and interviews.

At the same time, UNHCR remains very concerned about recent reports of push-backs along the European Union's external borders, ongoing obstacles to rescue at sea operations, continued restrictions to access various land borders, and the lack of progress on reaching an agreement with regard to predictable and equitable disembarkation procedures. The Office continues to appeal to concerned States to take the necessary remedies to ensure continued access to protection for those who need it and for respect of the principle of non-refoulement.

Promoting acceptable reception conditions

UNHCR continued to monitor first- and second-line reception conditions to promote minimum standards, particularly to address the long-standing challenges of inadequate and overcrowded conditions, limited staff capacity, a lack of basic services, and insufficient identification and response mechanisms for people with specific needs. In locations where the national public health responses resulted in an increase in the use of detention or closed facilities, the Office worked closely with authorities to address these challenges and issued guidance to highlight and promote good practice in the region. Despite these efforts, UNHCR remains concerned with regard to the sub-standard reception conditions in several States. It is of paramount importance that the safety and dignity of asylum-seekers is respected while individual cases are being processed.

Physical distancing requirements and other public health measures arising from the pandemic have in some cases resulted in limited oversight and support for people with specific needs. This includes unaccompanied children and survivors of violence and torture. However, several positive practices have also emerged with a number of States facilitating access to national child protection services while assessment procedures remained pending.

The range of public health measures have also posed challenges for young asylum-seekers to access education, with limited connectivity for online learning and crowded or isolated environments in reception facilities. States have responded with generosity and innovation; in Belgium, Bulgaria, Croatia and Ireland, laptops were provided to children in reception facilities, while in the Russian Federation a private-sector partner donated 130 mobile phones to facilitate online learning.

Strengthening participatory and community-based approaches

The spread of COVID-19 underscored the importance of working in direct partnership with local communities and persons of concern to help safeguard public health. UNHCR's prior support of refugee networks, refugee-led or municipal organizations, and the design of

participatory approaches to service delivery, reaped significant benefits as local groups demonstrated resilience, dedication and effectiveness in their collective public health response.

European States and UNHCR offices adapted and expanded communication with communities through social media, community networks, leaflets and phone contact. Greece, Malta and Turkey expanded their hotline services, while WhatsApp and Viber were used in Georgia, Malta, Montenegro and the Republic of Moldova. Online sites providing help, such as Service Advisor in Turkey and Juma Map in Italy, were updated to reflect available services. Online or phone support (e.g. case management support, psychosocial support and counselling) were also available for people with specific needs through UNHCR's partners in countries including Greece, Malta, Spain and Ukraine. The use of digital platforms and reliance on community networks ensured that vital public health information reached persons of concern in efficient and culturally appropriate ways.

Securing solutions for refugees

Refugees and asylum-seekers often required assistance to cover their basic needs and to access national social safety nets as COVID-19 spread. In addition to the provision of one-off emergency cash transfers, UNHCR undertook socioeconomic impact assessments in several countries to assist in formulating their response, inform targeted information dissemination, and provide support with regard to counselling, referrals and advocacy.

The breadth of the public health crisis also provided refugees with opportunities to demonstrate solidarity with host communities through initiatives such as mask production and other local schemes. As the crisis intensified, several States publicly called for refugee health practitioners to identify themselves and invited them to participate in the response. The Council of Europe and UNHCR worked closely to identify refugees for assessment under the European Qualifications Passport for Refugees initiative, which helps the national authorities in participating States determine the competence of refugees in regulated professions, and can facilitate the eventual placement of refugees in professional environments.

The pandemic further impacted refugee resettlement to the European Union in the first half of the year. In June 2020, UNHCR and the International Organization for Migration (IOM) announced the lifting of the temporary hold on departures, which cleared the way for a resumption of admissions. The European Union remains a leader in refugee resettlement, and UNHCR commends member States for taking all possible steps to reach its target of 30,000 admissions in 2020, including from the emergency transit mechanisms in Niger and Rwanda.

Following the European Commission's call for member States to support the relocation of 1,600 unaccompanied children living in precarious conditions on islands in Greece, 12 countries pledged a total of 1,145 places, with 239 children already transferred to Belgium, Finland, France Germany, Ireland, Luxembourg and Portugal. In addition, Germany has relocated 519 individuals following their pledge to relocate 243 children with severe medical conditions, along with their families. As of 25 September, following the fire in Moria's registration and identification centre, additional pledges have been received from 12 countries for 2,338 individuals, including 415 unaccompanied children. UNHCR has coordinated closely with the Greek Government, the European Asylum Support Office, IOM and the United Nations Children's Fund in the relocation exercise. In particular, this work pertains to the facilitation of best interests procedures for children concerned and to promoting access to asylum processes, education, appropriate care arrangements, guardianship, social work support and other services in host countries. Relocation following search and rescue operations has also taken place, with 814 places pledged by Finland, France, Germany and Ireland, and 162 transfers occurring thus far.

Preventing and resolving situations of statelessness

In 2020, several States have implemented commitments made during the High-Level Segment on Statelessness held in October 2019. Notably, Montenegro began the implementation of a new joint procedure to register the birth of abandoned children or those whose mothers lack identity documents. In Azerbaijan, a presidential decree granted citizenship to 343 people, of whom 86 were stateless, while the President of the Russian Federation signed a federal law that simplifies the acquisition of citizenship by naturalization.

In Ukraine, a new law came into effect in July 2020, formally establishing statelessness determination procedures with 35,000 people who are either stateless or whose nationality is undetermined, and who are expected to benefit from legislative changes. Recognized stateless people will then be able to regularize their stay by obtaining temporary residence permits, which will pave the way for their naturalization as Ukrainian citizens in due course. Albania's Parliament also approved amendments to the Law on Citizenship, closing the remaining risks of statelessness in the country.

Strengthening external relations and advocacy, and mobilizing support

UNHCR actively participated in the inter-agency response to the COVID-19 pandemic in Europe. The Office has since focused its advocacy efforts on ensuring continued access to protection and the inclusion of people of concern in national prevention and response plans. Many European states responded positively to the global appeal in this regard, reaffirming the spirit of the Global Compact on Refugees through solidarity and generosity. Within Europe, UNHCR's advocacy efforts also aimed at ensuring that the spread of COVID-19 would not be unfairly attributed to incoming asylum-seekers and refugees, or result in their further stigmatization or exclusion.

UNHCR continued to engage with United Nations reform in Europe. It supported relevant offices in constructively taking part in the United Nations Sustainable Development Cooperation Framework to ensure that no one is left behind, including refugees, asylumseekers and stateless people. As a co-chair (together with IOM and the United Nations Development Programme) of the Issue-based Coalition on Large Movements of People, Displacement and Resilience, UNHCR worked closely with Resident Coordinators and United Nations Country Teams to ensure that the specific needs of refugees, asylum-seekers, migrants and stateless people were taken into account in advocacy messaging at the national level.

Partnerships with a range of non-governmental organizations (NGOs), faith-based and refugeeled organizations in 2020 were also strengthened. A regional dialogue between UNHCR and NGOs was organized jointly with the European Council on Refugees and Exiles and the International Council of Voluntary Agencies to foster complementary advocacy.

C. **Financial information**

The budget for UNHCR's activities in Europe, as approved by the Executive Committee of the High Commissioner's Programme during its seventieth session in October 2019, amounted to \$806.7 million for 2020.

By end of August 2020 the budget had been increased by \$20.9 million under a supplementary budget and transfers to \$827.6 million in response to new COVID-19-related needs.

At the sub-regional level, 50 per cent of the overall budget is allocated to operations in eastern Europe including Turkey and Ukraine. Four per cent is allocated to south-eastern Europe and 42 per cent to central, northern, southern and western Europe which includes Greece. Four per cent of the budget is allocated to Europe overall comprising the Bureau's budget.

The Central Mediterranean situation represents 35 per cent and the Syria situation 36 per cent of the overall budget. As of end-August 2020, the needs for Europe of 827.6 million were 50 per cent funded when considering the indicative allocation of unearmarked and softly earmarked contributions.