

Impact of COVID-19 on refugees and migrants in Somaliland – Update

This snapshot provides a [cumulative update](#) on the impact of the COVID-19 crisis on refugees and migrants¹ in mixed movements² into and through Somaliland. It aims to contribute towards a solid evidence base to inform targeted responses on the ground, as well as advocacy efforts related to the situation of refugees and migrants during the coronavirus pandemic.

Key findings

- 58% of respondents who started their journeys in or after April 2020 (n=654) said that COVID-19 was a factor in their decision to move. This was most frequently linked to the pandemic's impact on economic factors (71%) and conflict and violence (43%).
- Despite high levels of awareness of coronavirus among respondents, 56% (n=899) reported that they were doing nothing to protect themselves from COVID-19. When asked why not, 45% of respondents said that they did not feel it was necessary.
- Income loss related to the COVID-19 crisis is contributing to vulnerability among refugees and migrants in Somaliland, as 68% say they are unable to afford basic goods, 25% say they are falling into debt, and 11% say they are using up savings.

Profiles

The analysis in this snapshot is based on 1,738 interviews conducted with refugees and migrants in Somaliland between 28 August and 31 December 2020. 1,369 respondents were from Ethiopia and 369 were from Yemen. 72% of respondents were men and 28% were women, with an average age of 29.

Table 1. Nationality and gender of respondents

Nationality	Men	Women	Total
Ethiopia	973	396	1,369
Yemen	277	92	369
Total	1,250	488	1,738

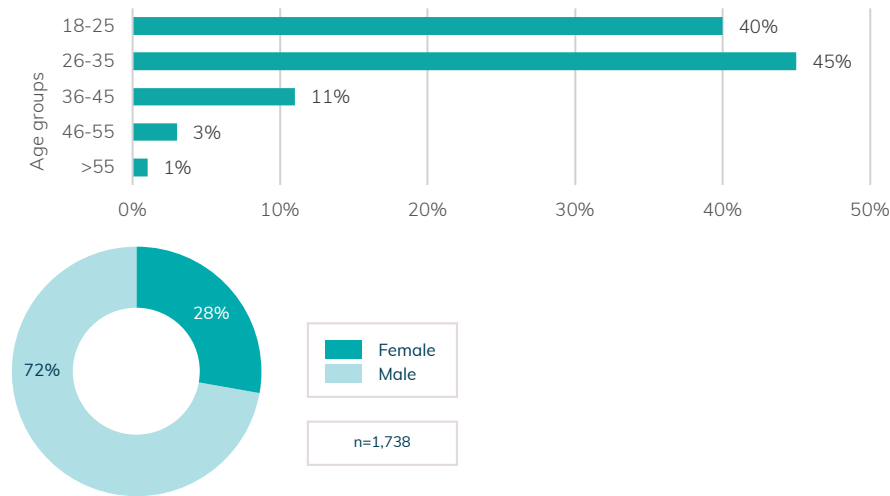
Table 2. Location of interviews

Interview Location	Number of Interviews
Berbera	408
Borama	145
Burao	201
Erigabo	144
Hargeisa	325
Lasanod	105
Wajaale	420

1 MMC uses 'refugees and migrants' when referring to all those in mixed migration flows (including asylum seekers, stateless people and others on the move), unless referring to a particular group of people with a defined status within these flows.

2 MMC normally applies the term 'mixed migration' to refer to cross-border movements of people including refugees fleeing persecution and conflict, victims of trafficking and people seeking better lives and opportunities. See MMC's full definition of mixed migration and associated terminology [here](#). UNHCR applies the term 'mixed movement', defined as: The cross-border movement of people, generally in an irregular manner, involving individuals and groups who travel alongside each other, using similar routes and means of transport or facilitators, but for different reasons. People travelling as part of mixed movements have different needs and profiles and may include asylum-seekers, refugees, victims of trafficking, unaccompanied or separated children, stateless persons, and migrants (including migrants in irregular situations or migrants in vulnerable situations). In light of the partnership between UNHCR and MMC to develop this joint publication the term 'mixed movement' is used.

Figure 1. Age range and gender of respondents



Somaliland is a destination for most respondents

The majority of respondents (63%) reported Somaliland as their final destination (54% Yemenis and 62% Ethiopians). Among Ethiopians still on the move (n=483), the Gulf was a top destination (cited by 79% of all respondents). For Yemenis still on the move (n=133), Europe was the top destination (50%).

Yemeni refugees qualify for prima facie refugee status in Somaliland, and 91% of Yemeni respondents identified as either refugees or asylum seekers. In contrast, only 10% of Ethiopian respondents identified as refugees or asylum seekers. Further 89% of Ethiopians reported that they had no documentation to support their stay in Somaliland.

Surveyed refugees and migrants less concerned about contracting COVID-19

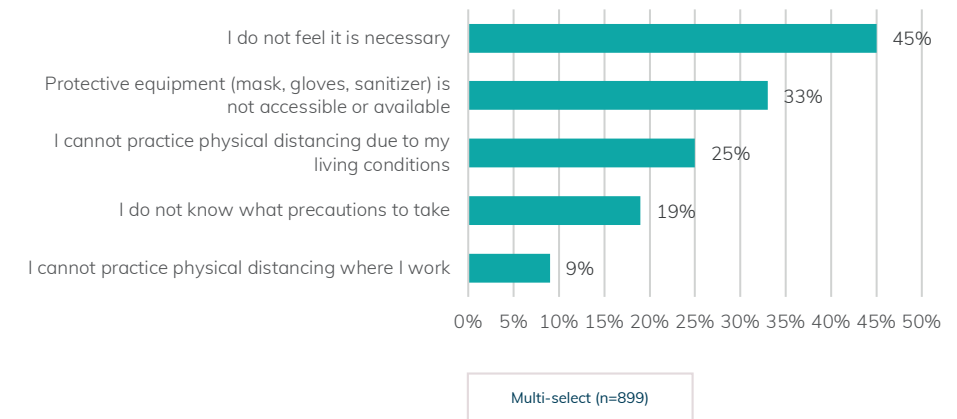
The majority of respondents, 92% (n=1,592) said they were aware of COVID-19. All remaining respondents said they had either not heard of COVID-19 (n=71), or declined to respond (n=75), and will be excluded from the following analysis.

The majority of respondents (81%) responded positively (either agreed or strongly agreed) to the statement “I know about coronavirus and how to protect myself and others”. However, 56% (n=899) said that they were not taking any precautionary measures. The

proportion of those not taking measures was far higher among Ethiopians (61%, n=755) than Yemenis (40%, n=144).

When asked why they were not taking any measures (Figure 2), 45% of respondents said they didn't feel it was necessary, which indicates a [sense of apathy](#) among the population. In fact, 40% of respondents said that they felt that the COVID-19 situation was improving where they were, despite [data to the contrary](#).

Figure 2. Why are you not taking any protective measures?



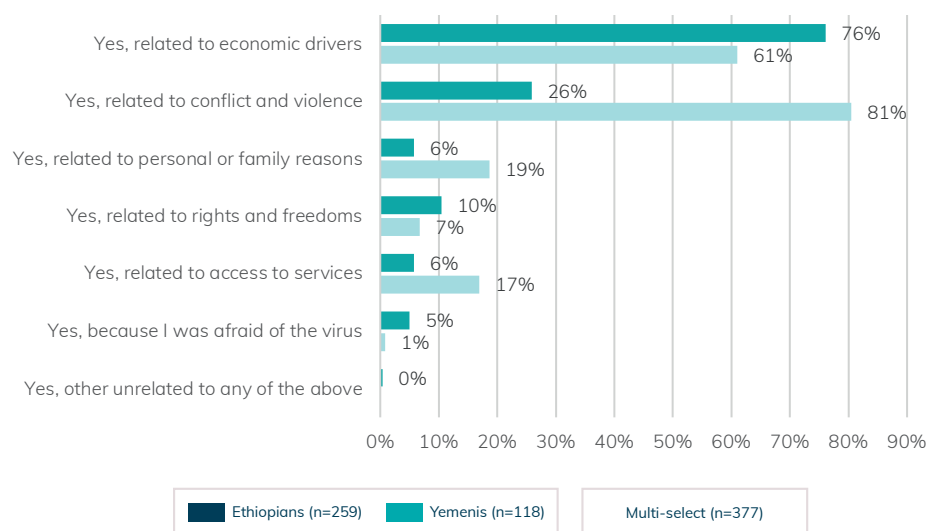
58% of respondents report COVID-19 as a factor in their decision to move

In line with [earlier findings](#), economic factors were the most frequently mentioned driver among Ethiopians respondents (80%), whereas violence was more frequently cited by Yemeni respondents (95%).

38% of respondents started their journeys in or after April 2020. Among this group (n=654), 58% (n=377) said that COVID-19 was a factor in their decision to leave, increasing over time. 65% of respondents interviewed in December 2020 (n=199), said that COVID-19 and its effects were a factor in their decision to leave, up from 46% interviewed in September (n=120). Where COVID-19 did play a factor, the most frequently cited effects were linked to the pandemic's impact on economic factors (71%), and conflict and violence (43%). These impacts were often multifaceted. 35% of respondents cited more than one issue related to coronavirus as a factor in their decision to leave.

COVID-19 as a factor in movement was more frequently reported among Yemeni respondents than Ethiopian respondents. The coronavirus pandemic has added a [new stressor to Yemen's fragile health system](#) that has already been impacted by multiple other disease outbreaks, including cholera and measles, and devastated by the impacts of war. 69% of Yemenis (n=118) said COVID-19 impacted their decision to migrate, of which (n=95) 81% of respondents said that this was related to conflict and violence. While 54% of Ethiopians (n=259) said COVID-19 was a factor, of which (n=197) 76% said that this was linked to economic drivers.

Figure 3. Was coronavirus a factor in your decision to leave? (yes responses only)



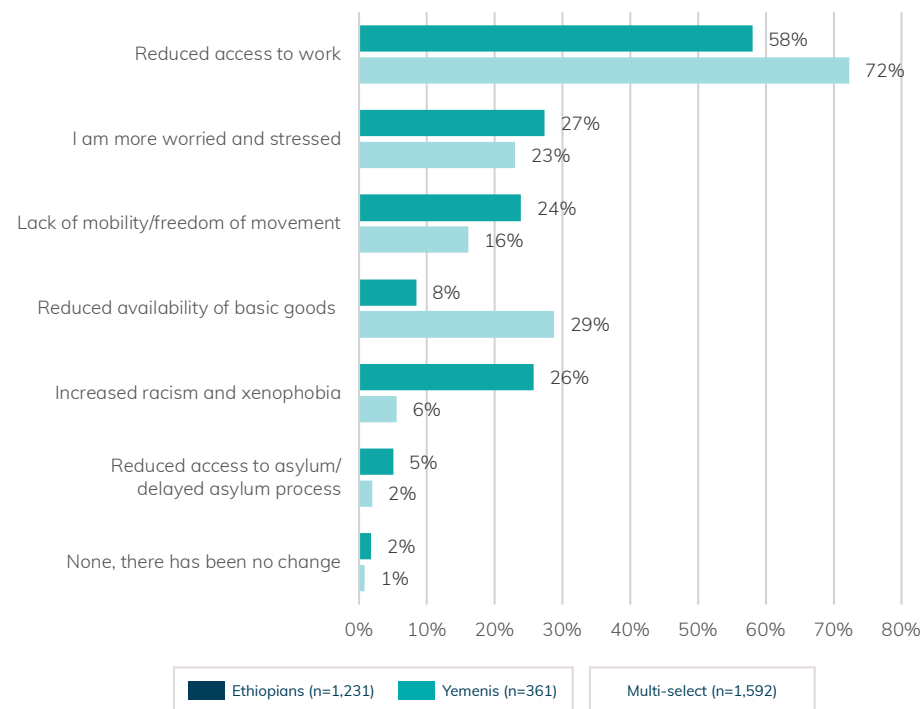
COVID-19 related income loss has increased vulnerability of respondents

Refugees and migrants continue to feel the economic impacts of the pandemic on their daily lives. At the end of December 2020, the majority of respondents (61%) reported that there was less access to work, far outweighing all other concerns (Figure 4).

While COVID-19 movement restrictions have largely been eased in the region, they continue to impact the numbers of refugees and migrants that are able to successfully complete journeys. 7% of respondents report that they can no longer afford their journeys.

39% further cite difficulties moving around Somaliland, while 37% report difficulties crossing borders. Despite the challenges, 64% mention their intentions to migrate remain the same.

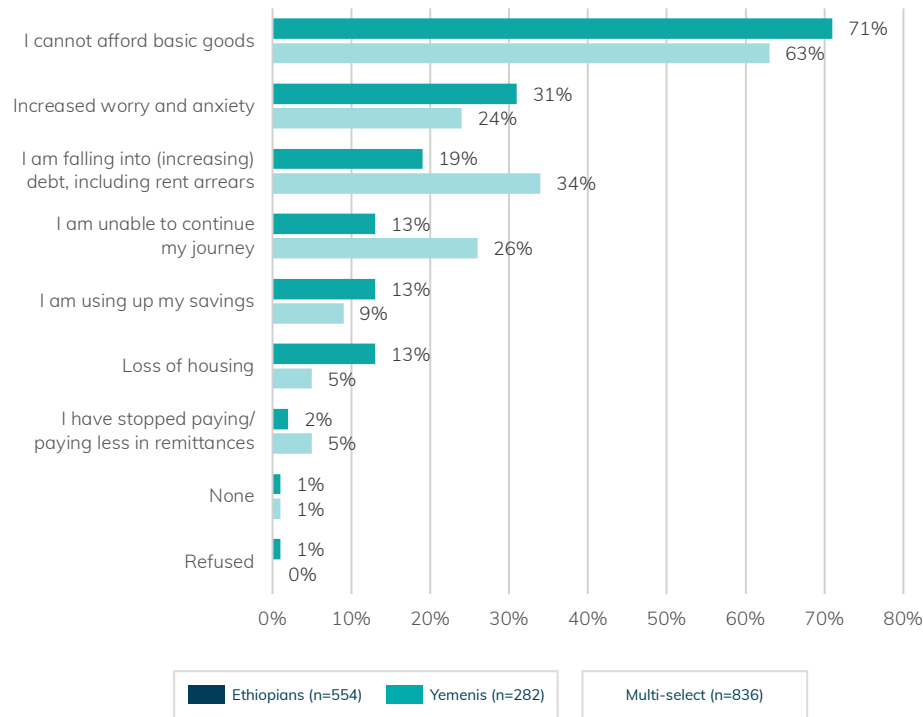
Figure 4. What impacts has COVID-19 had on your day-to-day life?



52% of respondents said that they had lost income since the onset of the pandemic. Among these respondents (n=836), 86% said that they had lost work since the onset of the pandemic, and 29% said that they no longer received financial support from their family. The loss of income has had direct consequences for the vulnerability of refugees and migrants (Figure 5). The majority of those interviewed (68%) reported that they were unable to afford basic goods.

The data also suggests that respondents may be depleting their assets or using negative coping mechanisms. 25% of respondents indicated that they were falling into debt, 11% stated that they were using up their savings. 10% of respondents also indicate that they have lost housing since the onset of the pandemic.

Figure 5. What impact has the loss of income had?



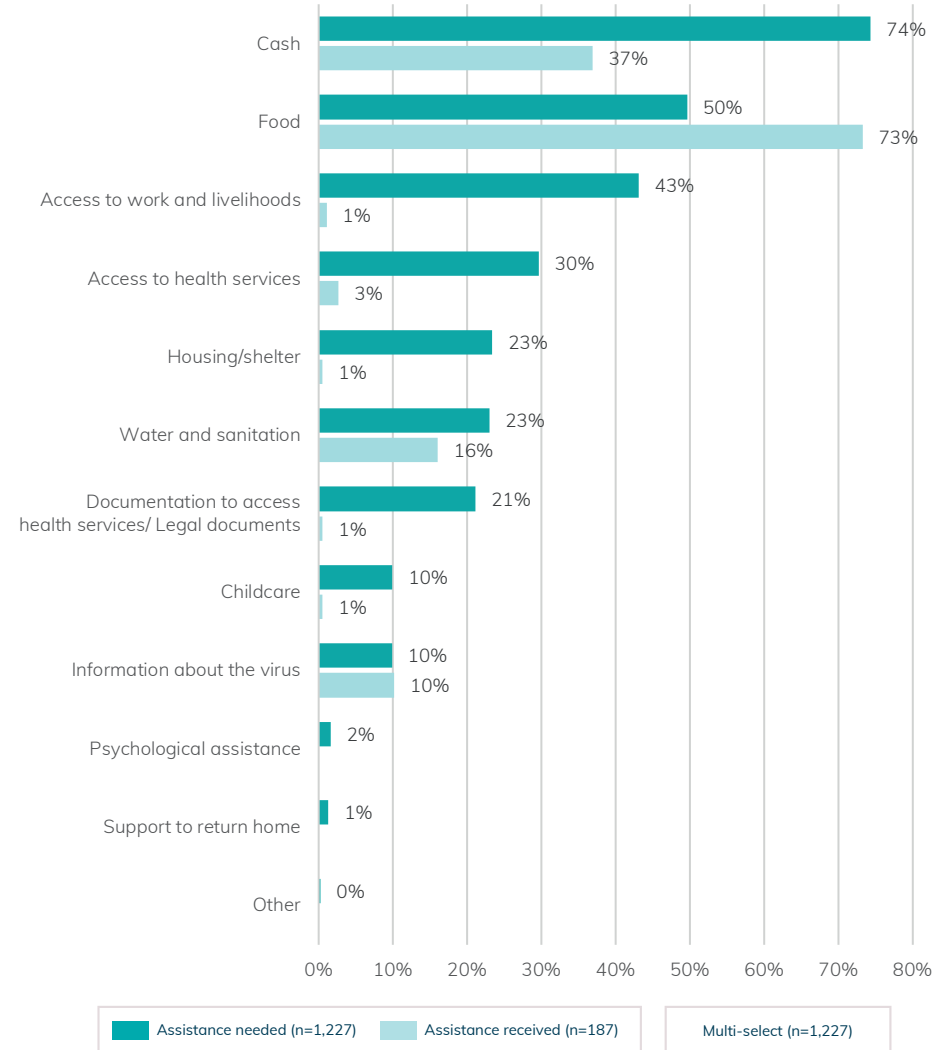
Needs continue to far exceed available assistance for respondents

77% of respondents said that they need help since the pandemic began. However, only 12% received assistance. The most frequently reported needs were cash (74%), food (50%) and access to work and livelihoods (43%).

Respondents' perceptions about their ability to access health services were extremely low. Only 20% of respondents said they would be able to access health services in the event they had coronavirus symptoms, and a similar 21% said they would be able to access health services if they had any other urgent health needs. However, it is important to note that perceptions about access were higher among Yemeni respondents (42% and 42% respectively), than Ethiopian respondents (13% and 14% respectively). Partners operating in Somaliland suggest that refugees and asylum seekers can access free health services in Somaliland, but that migrants must pay to access health services, and may

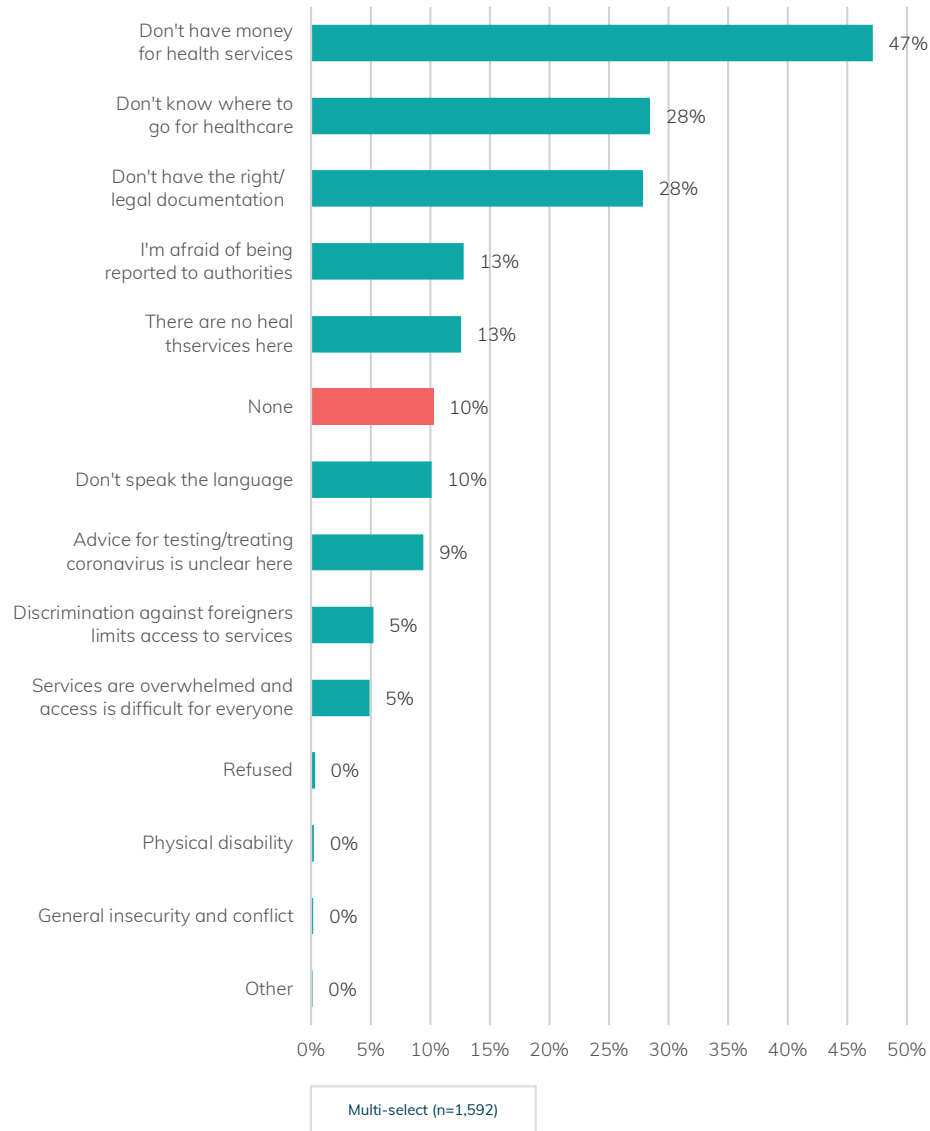
explain the difference between responses from Yemeni respondents (prima facie refugee status) and Ethiopians (largely migrants).

Figure 6. Assistance needed v assistance received



Almost all respondents noted (n=1,406) barriers to accessing health services. The most frequently cited barriers include, not having enough money to pay for services (47%), not knowing where to go for health care (28%) and not having the documentation to access services (28%).

Figure 7. What are the barriers to accessing healthcare?



Voices of people on the move

"Although the lives of migrants are difficult, it is more difficult because of coronavirus. It was hard to get a job before but now, no one will hire us. They discriminate against you saying you are spreading the virus."

Ethiopian woman in Wajaale

"I used to work as a shopkeeper and used the profit I earned to meet my needs. But now, due to COVID-19, my work reduced."

Ethiopian man in Berbera

"Because of the fear and restrictions as a result of the pandemic, jobs were limited. It made it difficult to access basic needs."

Yemeni man in Hargeisa

"When I was in Ethiopia, I had been sick with the flu for a month. Sometimes I believe it was coronavirus but I never got tested."

Ethiopian man in Burao



4Mi & COVID-19

The [Mixed Migration Monitoring Mechanism Initiative \(4Mi\)](#) is the Mixed Migration Centre's flagship primary data collection system, an innovative approach that helps fill knowledge gaps, and inform policy and response regarding the nature of mixed migratory movements. Normally, the recruitment of respondents and interviews take place face-to-face. Due to the COVID-19 pandemic, face-to-face recruitment and data collection has been suspended in all countries.

MMC has responded to the COVID-19 crisis by changing the data it collects and the way it collects it. Respondents are recruited through a number of remote or third-party mechanisms; sampling is through a mixture of purposive and snowball approaches. A new survey focuses on the impact of COVID-19 on refugees and migrants, and the surveys are administered by telephone, by the 4Mi monitors in West Africa, East Africa, North Africa, Asia and Latin America. Findings derived from the surveyed sample should not be used to make inferences about the total population of refugees and migrants, as the sample is not representative. The switch to remote recruitment and data collection results in additional potential bias and risks, which cannot be completely avoided. Further measures have been put in place to check and – to the extent possible – control for bias and to protect personal data. See more 4Mi analysis and details on methodology at www.mixedmigration.org/4mi

This document includes activities implemented with the financial assistance of the UN High Commissioner for Refugees (UNHCR). The views expressed herein should not be taken, in any way, to reflect the official opinion of UNHCR.