



GLOBAL HRP COVID-19

INFORMATION UPDATE
20 APRIL 2020

Global Humanitarian Response Plan: Financial update



The [Global Humanitarian Response Plan \(GHRP\)](#) for COVID-19 launched on 25 March seeks \$2.01 billion over a period of nine months (April – December). The plan is a joint effort by members of the Inter-Agency Standing Committee (IASC), including UN, other international organizations and NGO consortiums.

The first update of the GHRP is scheduled for release on 7 May. Humanitarian Country Teams, Inter-Cluster Coordination Groups and Clusters are currently working together to update their operations and activities, reprogramming whenever possible, identifying possible new requirements to respond to the first consequences of COVID-19, and preparing for possible outbreaks. The update will include more recent information for the current set of countries, as well as a set of additional countries. The GHRP will continue to be updated on a periodic basis, regularly capturing country-level monitoring of the needs and response.

The scale of this crisis requires an unprecedented level of solidarity across the international community. As of 20 April, funding of more than \$602 million had been reported for the activities of the GHRP, with significant additional donor announcements also made. An additional \$147.2 million has been reported for activities or countries that are either not in the plan (e.g. for the Red Cross/Red Crescent Movement Appeal) or for which details have not yet been provided.

In the wake of the collapse of commercial aviation, an extra \$350 million is required by WFP to scale up transport and logistics services – the vital backbone of response - for humanitarian organisations’ staff and supplies. In an [urgent call to fund the global emergency supply system to fight COVID-19](#) published 20 April, Mark Lowcock, Emergency Relief Coordinator, and leaders of the world’s largest humanitarian organizations reiterated the urgency of fast and generous funding. “In this race against an invisible enemy, all countries must fight back, but not all begin from the same starting line. In countries where the world’s most vulnerable need humanitarian aid and supplies to beat back the pandemic, cancelled flights and disrupted supply routes hit disproportionately hard. It is in everyone’s interest to stop the virus from spreading unchecked, destroying lives and economies, and continuing to circle around the world.”

For the latest figures on GHRP funding and other coordinated response plan funding, visit the [Financial Tracking Service \(FTS\)](#).

Abridged versions of the GHRP are available in [Arabic](#), [Chinese](#), [English](#), [French](#) and [Spanish](#). Regular updates will be issued. A dedicated COVID-19 space has been created on the [OCHA website](#). For further information on COVID-19 activities, guidance and reports, visit the [Inter-Agency Standing Committee \(IASC\)](#) website, [HDX](#), [Humanitarian Insight](#), [Humanitarian Response Info](#) and [Relief Web](#).

Global Humanitarian Overview: Financial update



Initial donor support for the GHRP – including of flexible and unearmarked funds - has been strong, however, funding cannot be diverted from the existing humanitarian and refugee operations in the [Global Humanitarian Overview 2020](#). One hundred million people

worldwide require lifesaving assistance and protection as set forth in the [GHO](#) launched last December and updated on a regular basis.

¹ The GHRP requirements and funding are part of the Global Humanitarian Overview.



The UN acknowledges the generous contributions of donors who provide unearmarked or core funding to humanitarian partners, the Central Emergency Response Fund (CERF) and Country-based Pooled Funds (CBPF). For more information on interim IASC key messages on flexible funding in relation to the COVID-19 crisis, [see here](#).



Pooled funds allocations and announcements

TOTAL ALLOCATIONS (US\$)

\$163.4M

CERF ALLOCATIONS (US\$)

\$95.0M

CBPFs ALLOCATIONS (US\$)

\$68.4M

The Central Emergency Response Fund (CERF) and Country based Pooled Funds (CBPF) are important tools in the fight against COVID-19. They have allocated a combined \$163.4 million to support at least 34 countries. These allocations will save lives by scaling up preparedness and prevention, stopping the transmission of the virus, and mitigating the impacts of the pandemic in vulnerable countries.

CERF has made three announcements totaling \$95 million. The first allocation of \$15 million was made on 27 February to UNICEF and WHO to help contain the spread of the virus. The second announcement of \$60 million – one of the fund’s largest-ever allocations - was made on 25 March to nine UN agencies to kickstart the Global Humanitarian Response Plan. A third allocation of \$20 million on 9 April supports the immediate implementation of critical supply chain activities, including humanitarian passenger transport and medivac services.

CBPFs are supporting efforts to fight the pandemic through emergency allocations and reprogramming preexisting projects.

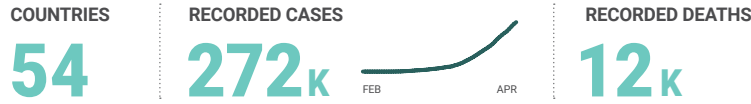
As of 20 April, eleven CBPFs have allocated a total of \$68.4 million in response to COVID-19. In Afghanistan, CAR, DRC, Lebanon, Myanmar, occupied Palestinian territory, Sudan, Syria, Jordan, Ukraine, CBPFs are providing timely and flexible funding to UN Agencies (WHO, UNICEF and others) and NGOs to deliver a holistic response to humanitarian needs related and compounded by the pandemic. In particular, CBPFs are supporting preparedness, community engagement, access to emergency health care and the delivery of essential services to people affected by the pandemic.

CBPFs have issued [new guidance](#) due to the impact of the pandemic on the working environment and current operations. This guidance outlines how CBPFs can respond with greater flexibility through simplifications in the current funding arrangements, yet with the required accountability over the use of funds.

COUNTRY	CBPF ALLOCATIONS	CERF ALLOCATIONS	TOTAL ALLOCATIONS	COUNTRY	CBPF ALLOCATIONS	CERF ALLOCATIONS	TOTAL ALLOCATIONS
Global	-	\$43.2 M	\$43.2 M	Lebanon	\$0.5 M	\$2.1 M	\$2.6 M
Afghanistan	\$11.5 M	\$2.4 M	\$13.9 M	Libya	-	\$2.0 M	\$2.0 M
Bolivia	-	\$0.1 M	\$0.1 M	Mali	-	\$1.7 M	\$1.7 M
Brazil	-	\$0.2 M	\$0.2 M	Myanmar	\$2.2 M	\$1.2 M	\$3.4 M
Burkina Faso	-	\$4.1 M	\$4.1 M	Niger	-	\$1.7 M	\$1.7 M
Burundi	-	\$1.7 M	\$1.7 M	Nigeria	-	\$1.9 M	\$1.9 M
CAR	\$5.0 M	\$1.8 M	\$6.8 M	oPt	\$6.2 M	\$0.9 M	\$7.1 M
Chad	-	\$1.9 M	\$1.9 M	Pakistan	-	\$1.3 M	\$1.3 M
Colombia	-	\$0.2 M	\$0.2 M	Peru	-	\$0.1 M	\$0.1 M
Djibouti	-	\$0.2 M	\$0.2 M	Somalia	-	\$2.6 M	\$2.6 M
DPR Korea	-	\$0.9 M	\$0.9 M	South Sudan	-	\$1.4 M	\$1.4 M
DRC	\$10.0 M	-	\$10.0 M	Sudan	\$1.0 M	\$3.4 M	\$4.4 M
Ecuador	-	\$0.1 M	\$0.1 M	Syria	\$23.0 M	\$1.8 M	\$24.8 M
Ethiopia	-	\$1.0 M	\$1.0 M	Syria cross-border	\$6.8 M	-	\$6.8 M
Haiti	-	\$2.9 M	\$2.9 M	Tanzania	-	\$0.4 M	\$0.4 M
Iran	-	\$2.8 M	\$2.8 M	Turkey	-	\$0.4 M	\$0.4 M
Iraq	-	\$0.7 M	\$0.7 M	Ukraine	\$2.0 M	\$0.9 M	\$2.9 M
Jordan	\$0.3 M	\$2.4 M	\$2.7 M	Uzbekistan	-	\$0.2 M	\$0.2 M
				Venezuela	-	\$4.0 M	\$4.0 M



Global Humanitarian Response Plan: Operational update



Guided by the GHRP framework and humanitarian principles, humanitarian organizations continue to deliver assistance and provide protection services to the most vulnerable people in communities affected by crisis, including displaced persons, older people, people with disabilities, women and girls.

However, humanitarian operations in some locations have become more constrained as the measures to control COVID-19 are compounded with pre-existing constraints related to security, armed conflict, bureaucratic impediments, sanctions and counterterrorism measures.

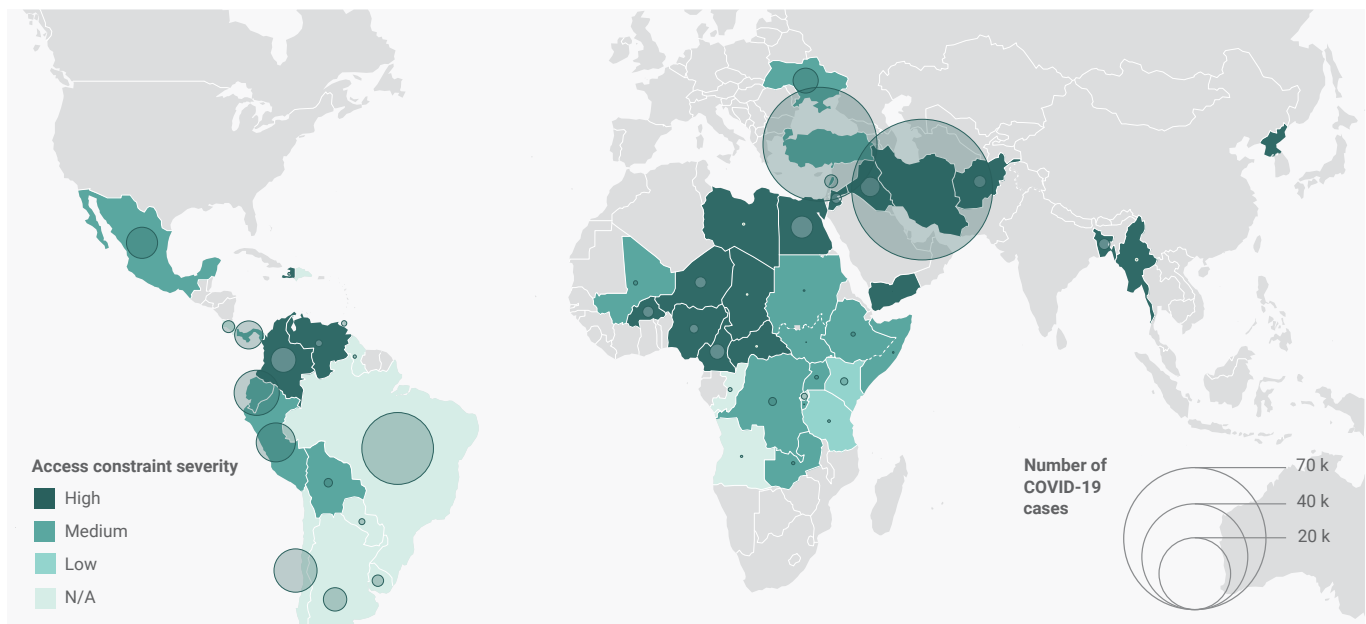
The most significant impact has been on the entry of humanitarian personnel to a given country, or between countries. A number of countries have imposed tight restrictions on international flights and travelers. Visa issuance has been temporarily halted in many countries as well.

The decrease in commercial international flights and quarantine measures and congestion at some seaports have also had an impact on the entry of relief items into some countries. Fortunately, government-imposed restrictions on the entry of goods are currently less severe than those on the entry of people, with a number of countries still allowing cargo movements, albeit with delays.

Restrictions on movements within a country by road or air are also challenging humanitarian operations, however in a number of countries, authorities are working closely with humanitarian organizations to facilitate the continuity of relief operations. Restrictions on large crowds or groups of people gathering are also delaying operations. For example, 117 million children may be impacted by the interruption of measles vaccination campaigns in 34 countries.

Humanitarian actors are committed to achieving the objectives set forth in the GHRP and have adapted their operational modalities. For example, food and cash distributions in most locations have been adjusted to take social distancing measures into account. In Afghanistan, Burkina Faso and Haiti, steps are being taken to protect beneficiaries at distribution sites by setting up hand-washing stations and by facilitating social distancing during distributions. In Niger, humanitarian partners are promoting a joint delivery model, whereby multi-sectoral projects will be delivered by one agency/partner. In Bangladesh and other countries, partners are advancing food distributions and providing double or triple rations, and they are piloting contactless biometrics to reduce the risk of COVID-19 transmission in the delivery of cash-based interventions. Due to school closures, over 154 million children in eight countries are being supported with distance/home-based learning.

Constraints on Humanitarian Access



Source: OCHA and WHO, as of 19 April 2020



Thematic focus: Gender



The gendered implications of the COVID-19 health emergency have been prioritized from the onset of the COVID-19 response. Gender norms and pre-existing inequalities disproportionately impact women and girls in emergencies, including health emergencies.

Gender, together with other factors including age, sexual orientation and identity, ethnicity, disability, education, employment, and geographical location may intersect to further compound individual experiences in emergencies.

Crises can deepen the risks of gender-based violence (GBV) for women and girls, especially when family and community protections have broken down or been strained. In particular, quarantine measures may exacerbate the incidence of domestic violence/ intimate partner violence as victims are confined with their abusers.

Humanitarian partners are focusing on three key ways to advance gender equality and empower women and girls during COVID-19 pandemic:

- Undertake robust gender analysis to inform the response and make sure impacts on women and girls are fully incorporated into response planning.
- Recognise the exposure to domestic violence and other forms of GBV, and prioritise mitigation, response and prevention.
- Promote women's meaningful participation in humanitarian decision making.

The IASC has published the [Interim Guidance: Gender Alert for COVID-19 Outbreak](#) to spotlight the gendered dimensions of COVID-19, and guide humanitarians on the integration of gender perspectives in

humanitarian preparedness and programming during the pandemic. The Gender Alert is translated into Spanish and French and it is available online. A series of webinars have been organised that will focus on key ways humanitarian actors can operationalize the Gender Alert to strengthen humanitarian interventions.

The Gender Alert was also used to inform the [UN Secretary General's Policy Brief on COVID19 – Impact on Women](#), an important report that stresses that “immediate steps are needed to ensure that COVID-19 does not reverse the gender equality progress achieved in recent decades”, and it is therefore critical that we act appropriately and respond, prevent and mitigate to the gendered implications and risks of COVID-19.

Other efforts to align messaging have been undertaken by several partners. UN Women has launched a [data hub](#) providing key gender data as it relates to COVID-19, and CARE and International Rescue Committee have conducted a [Global Rapid Gender Analysis](#) on COVID-19 to support humanitarian programming.

The Gender Based Violence Area of Responsibility (GBV AOR) has been active in developing resources on GBV and COVID-19, including convening [weekly thematic webinars](#). UNFPA and UNICEF have also developed and disseminated [advocacy and tip sheets](#) on GBV mitigation and response that identify key, sector-specific GBV risks, along with recommendations on how to mitigate these risks.

The updated GHRP to be issued in May will include an increased focus on gender, mental health, older persons, and persons living with disabilities.