

Situation Report Template

Situation Report 2 Coronavirus – Kiribati 31 March 2020

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Part 1: The Overall Situation

- **Areas that have been affected?**

To date, there have been no cases of COVID-19 confirmed in the Kiribati, however communities throughout the country are aware of the threat of this virus and are starting to think about ways they can prevent the spread when/if it arrives in their country.

ChildFund Kiribati works in in Betio, located in the country's capital, South Tarawa. These communities have been participating in awareness-raising activities delivered by Betio City Council and with the support of the Red Cross, UNICEF, and ChildFund Kiribati. Such activities have included dissemination of information on improved sanitation and hygiene practices, and the importance of handwashing and social distancing.

- **What services or infrastructure have been affected?**

The Government of Kiribati has now placed the country on Alert Level 2. This level is issued when a person is under investigation (person meets symptoms and travel history). The response actions are: (1) Awareness to all levels of the public at large; (2) Gatherings are not encouraged (at this time the number of people that constitute a gathering has not been defined); (3) Physical spacing between people is 2 meters.

In addition to these response actions, the Government has moved to close schools and education institutions. Domestic flights have also been curtailed to some Outer Islands.

- **Any relevant background information about areas affected?**

The Government of Kiribati has implemented strict border controls, whereby no person can enter Kiribati if they have been in a country with a confirmed case of COVID-19 in the past 14 days. To date, there has not been one confirmed case of COVID-19 in the country and the government's key prevention strategy has been to stop people from affected countries entering Kiribati.

Disease outbreak has always been a major risk to Kiribati's communities. For families in South Tarawa, cramped living conditions, poor access to healthy food, water, and sanitation, and limited healthcare facilities means that disease can spread quickly. With a lack of resources and an overburdened health system, as well as high rates of non-communicable diseases (diabetes, heart disease, and lung disease), Kiribati is not equipped to cope with a major epidemic.

Recent statistics show that approximately 22 percent of Kiribati's population lives beneath the "basic needs" poverty line. Many I-Kiribati people live in unregulated housing without access to clean water, sanitation or other basic hygiene utilities.

Kiribati also has a high rate of Tuberculosis (TB) and Diabetes. The country has an estimated TB incidence of 349 per 100,000, in 2018, and an estimated prevalence of diabetes in adults aged 25–64 years of 29%.

At this time, Kiribati does not have the equipment required to test for COVID-19.

- **Total number of people impacted: number of adults? Children? and women? Disabled people?**
There are no confirmed cases of COVID-19 in Kiribati, at this stage. Airline passengers from the last international flight arrived 12 days ago are still being monitored. Reports suggest that it is likely that no one in this group has been infected, although there is no testing available in Kiribati.

As schools and educational facilities are closing, however, families and children are starting to be impacted. At this time, there is no at-home education support and it will be challenging for many caregivers to support their children's education in the home. With children being out of school, this means that they will often be unsupervised, which raises a number of child protection issues that must be monitored.

- **What actions have the government taken?**
 - To date, the border remains closed to international services. There has been no announcement as to when flights will resume. With borders closed, it will mean that supplies will not be able to reach Kiribati by air.
 - The Government has been broadcasting messages about hygiene, handwashing, and social distancing on radio and texts via Vodafone. This Government is also planning to erect billboards but has not announced the locations yet. Communication materials are being printed, which the ChildFund Kiribati team will distribute in the Betio communities and beyond.

Part 2: The Situation in Areas Where ChildFund Kiribati Works

- **What issues are children, families and communities in these areas facing? (closed schools, home confinement / isolation, food shortages, safety concerns, health issues, etc.)**
Schools and educational facilities were closed from Monday 30 March onwards. At this time, there is no at-home educational support and it is often difficult for parents and caregivers to support their children's education in the home. Not only will children miss out on learning and progressing their education during this time but there are also a number of child protection issues that arise. For instance, with no schools open children are largely unsupervised, which can place them in vulnerable or dangerous situations.

Kiribati also has one of the highest rates of intimate partner violence in the Asia Pacific Region (Asia and the Pacific SDG Progress Report 2020). Therefore, as the situation intensifies in Kiribati

it is likely that rates of gender-based violence will increase, which puts women and their children at risk.

ChildFund Kiribati actively shares information about child safeguarding and child protection with the Betio communities, and will include it in their awareness raising activities.

- **Child protection risks caused by coronavirus? (for example mental health problems, psychological distress, domestic violence, elder care, child labor)**

In stakeholder coordination meetings, ChildFund Kiribati has raised the matter of the risk to children, particularly in relation to neglect, distress and family disruption. As discussed above, there is concern that as children are now not at school, they will be largely unsupervised and miss out on their education.

As this situation evolves in Kiribati, ChildFund will work within government coordination mechanisms to ensure children's psychosocial needs are considered in any COVID-19 response activities.

- **How many of our household beneficiaries are affected?**

No households have been infected by COVID-19 at this time.

Part 3: ChildFund Kiribati's Preparation, Response and/or Recovery action

- **Planned, desired or ongoing response action – inside or outside current operational areas?**

On Friday 27 March, ChildFund Kiribati attended a coordination meeting and workshop with key stakeholders led by the Betio Town Council (BTC). The meeting was an opportunity to discuss preventative activities with BTC, Red Cross, and community representatives, including the distribution of hygiene kits, hygiene and handwashing materials, and awareness raising activities. The workshop then provided training for BTC, Red Cross, community representatives and ChildFund staff.

An awareness program, led by BTC and supported by these stakeholders was rolled out on Monday 30 March. The plan is for five mororos (group meetings) to be held everyday, over eight days (excluding the weekend).

The first day, Monday 30 March, the team successfully delivered five mororos, which 451 people attended. The team estimate that each day they will engage 300 people through this activity. It was noted that many women attended these mororos, along with children.

Prior to these mororo events, on the sudden announcement of closure of education and training institutions, the ChildFund Kiribati team quickly mobilized to provide awareness to Kiribati Institute of Technology (KIT) students on Friday, 27 March before KIT was closed. The number of attendees at this event was 144 (63 males/ 81 females).

The ChildFund team will also be distributing hygiene kits to households that have been participating in the MFAT-funded Positive Places to Live project. This project has been running for over three-years and there are now approximately 1700 participating households. The team are also planning to distribute hygiene kits to an additional 500 households. Therefore, the team plan to reach a total of 2200 households. It is estimated that there are eight people in each household, so this activity will reach approximately 17,600 people.

ChildFund Kiribati has also met with UNICEF's risk communication consultant, WHO and Ministry of Health and Ministry Service (MHMS) to discuss the intention of creating a cohort of volunteers to assist with awareness prevention in South Tarawa and the Outer Islands. Volunteers are to be recruited and then be given one day's training. Logistics are still to be determined. ChildFund has offered the participation of ChildFund casual staff to participate in awareness in South Tarawa as well as Betio.

Who are we partnering or collaborating with to provide our action?

As mentioned, ChildFund Kiribati's partners include Betio Town Council, Ministry of Health and Medical Services (MHMS), Office of the President, WHO, UNICEF, Red Cross and ChildFund New Zealand.

- **What kind of activities or interventions are being provided by Government, WHO, Red Cross, UNICEF, other?**

The Government of Kiribati has raised the Alert Level to 2, the Ministry of Health and Medical services has issued a helpline number, should anyone suspect they or their family member has contracted COVID-19. The Government are also continuing to implement strict border controls.

As mentioned above, ChildFund Kiribati is coordinating with stakeholders, including Betio Town Council, UNICEF, Red Cross, and WHO to deliver awareness raising activities.

- **What support does Government or communities need?**

Considerable. In the event of an outbreak, the hospital in South Tarawa, the country's capital, is desperately short of equipment and supplies.

There is now a sense of urgency among stakeholders to educate communities on improved hygiene, handwashing and social distance practices before heavier restrictions are placed on people's movement. While Kiribati is still at Level 2 Alert, this provides an opportunity to disseminate information and hygiene kits, but needs it be done expeditiously.

- **How is ChildFund linked with coordination structures: NDMO? Office of the President? MoH? MoE? Other NGOs? Cluster groups? Other?**

- The coordinated effort between stakeholders in Betio has resulted in the rollout of the awareness campaign, which started on Monday 30 March.
- The Government has recently established a Health Emergency Operations Centre, which is led by Ministry of Health and Medical Services, UNICEF and WHO. This group meets three times a week. ChildFund has advocated that civil society organizations should also be included in meetings at appropriate times.

- It is believed that the Office of the President will share a national COVID-19 plan soon.

- **Next steps**
 - ChildFund Kiribati will continue awareness raising activities in Betio. As mentioned, these activities started on Monday 30 March and will continue until Wednesday 8 April, eight days in total.
 - The ChildFund Kiribati team will distribute hygiene kits to 2200 households. This activity will commence in the coming days.
 - ChildFund will continue to support Betio City Council and work with Ministry of Health and Medical Services, WHO and Red Cross in the planning and rollout of the awareness campaign with a particular emphasis on prevention.
 - Working with UNICEF and WHO on scaling up the awareness campaign in South Tarawa.

Part 4. Below Sections for Internal Use Only

- Give information about ChildFund’s current projects

Project N°	Not affected	Low/medium incidence (ej. activities in suspended schools/communities, with the possibility of extension)	High Incidence	Expected response (if relevant)
Positive Places to Live	N/A			ChildFund’s work is subject to Alert Levels. Lockdown (Level 3) will mean a suspension in activities.

- Are there any advocacy and communication actions being undertaken?

Refer to questions above. CF Kiribati is being instrumental in advocating for action both in terms of coordination of key stakeholders in Betio and for the Government to respond with the dissemination of IEC materials

- Number of estimated cases of infection in the communities where we s have projects (if available)

None at this stage.

- Possible sources of funding

We are working of existing funding. The project can absorb COVID-19 activities within its current budget.

- Provide information about possible sources of funding for preparedness or response activities?

Donor	Projects	Amount (Euro)	Requested? (Y/N)	Confirmed? (Y/N)

- Budget

- Outline if there is any need of changes in project budgets? Or any extra budget needed? Not necessary at this stage.

- Media/Communications

- Facebook? Social media? Government communications? Making use of Facebook and social media.

- **Programme support needed or requested from HO – whether onsite or remote.**
Forwarding useful IEC materials; information about current responses and practices in under-resourced and poor countries.

- **Staffing and Security**
 - **Which staff are continuing working?**
All staff

 - **Who is managing the preparation activities and response?**
Country Director, Program Manager and Operations Manager

 - **Safety and security risks?**
The office premises are safe and secure.

 - **Safety and security mitigation plans?**
If there is civil unrest or Level 3 imposed, the office will be closed. The Management Group will communicate electronically and/or off-premises.