

## **GUIDANCE FOR SHELTER CLUSTER ACTIVITIES IN YEMEN DURING THE PERIOD OF COVID19 PANDEMIC**

### **1. RECOMMENDATIONS ON DISTRIBUTION**

This guidance is compiled with a few elements immediately available. It was prepared for field partners as prevention measures and to reduce exposure to COVID19 transmission between beneficiaries and/or from Beneficiaries to Humanitarian workers.

This document could not substitute more detailed guidance's which could be released in the future. The guideline is not superseding any of the decrees enforced, and it is just an orientation in case if a distribution is feasible.

The recommendations on distribution are articulated around two main components, a) sensitization and awareness b) procedure for distribution.

### **2. SENSITIZATION AND AWARENESS ON COVID19**

#### **2.1 General information**

Coronavirus disease (COVID-19) is an infectious disease caused by a new virus. The disease causes respiratory illness (like the flu) with symptoms such as a cough, fever, and in severe cases, difficulty breathing. Most people who become infected experience mild illness and recover, but it can be more severe for others.

-WHO website-

- ✓ COVID 19 is a respiratory disease.
- ✓ Key prevention is based on basic advice, wash your hand, avoid touching your eyes, nose and mouth.
- ✓ Prevention and awareness reduce exposure to contamination.

#### **2.2 Key messages for COVID19 prevention**

You can protect yourself by washing your hands frequently, avoiding touching your face, and avoiding close contact (1 meter or 3 feet) with people who are unwell. Avoidance of touching your eyes, nose, and mouth with your hand will reduce the potential entry point of the virus to your body.

Practice respiratory hygiene. This means covering your mouth and nose with your bent elbow or tissue when you cough or sneeze. Then dispose of the used tissue immediately.

Stay home if you feel unwell. If you have a fever, cough and difficulty breathing, seek medical attention, and call in advance.

#### **2.3 Exposure during implementation**

In terms of contamination, two main types of exposure exist, which present significant differences. The Humanitarian workers to Humanitarian Workers and Humanitarian Workers to Beneficiaries are not going to be considered in this document based on the assumption that Humanitarian Workers shall be fully aware of the disease and closely monitoring their health.

**Beneficiaries to Beneficiaries** is probably the higher risk in term of exposure mainly because they are not fully aware and may not have access to recommendations. Furthermore, in terms of regular distribution, the density of a crowd could represent a multiplier factor in terms of exposure. Further in the document, recommendations on how to organize a safer queue will be provided.

**Beneficiary transmission to Humanitarian Workers** presents less of a threat as if the awareness of Humanitarian Workers of prevention measures is satisfied. Furthermore, during the organization of distribution, including, if necessary, crowd flow control, the Humanitarian Workers will undertake an exemplary role in sharing recommendations on prevention measures and enforcing hand washing policies.

## 2.4 Resources, emergency number, and training programs

Leaflets, videos, and guidance documents are available in the Shelter Cluster website <sup>1</sup>.

Guidance and Emergency numbers<sup>2</sup>:

اللجنة الوطنية العليا للطوارئ  
للمواجهة كـ كورونا كوفيد - 19  
Supreme National Emergency  
Committee for Coronavirus Covid-19

وزارة الصحة العامة والسكان

**غرفة عمليات الطوارئ المركزية بوزارة الصحة**  
للعامة والسكان وغرف عمليات الطوارئ بالمحافظات

<b>محافظه سقطرى</b>	<b>محافظه عدن</b>
05/660160	02/358260 02/358259 02/354913
<b>محافظه لحج</b>	<b>محافظه أبين</b>
02/503653	02/606361
<b>محافظه الضالع</b>	<b>محافظه شبوة</b>
02/433689	05/201005 05/201008
<b>محافظه تعز</b>	<b>حضرموت الوادي</b>
04/212355	05/441462 05/441461
<b>محافظه مأرب</b>	<b>حضرموت الساحل</b>
06/302223 06/303664	05/303498 05/317499
<b>محافظه المهرة</b>	
05/611360 05/611361	

**كيفية الوقاية من فيروس كورونا**

- اغسل يديك بالماء والصابون باستمرار في كل الأوقات
- غط فمك وأنفك بذراعك أثناء العطاس أو السعال ولا تيمسح في الأماكن العامة
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- عزل المصابين بنزلات البرد في المنزل وتجنب مخالطتهم
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<sup>1</sup> <https://www.sheltercluster.org/yemen/library/covid19-resource-center-mrkz-lmrj-lkwfyd-19>

& <https://www.sheltercluster.org/response/covid-19-and-shelter> (GSC)

<sup>2</sup> More emergency numbers will be updated in the Shelter Cluster website at

<https://www.sheltercluster.org/yemen/library/covid19-resource-center-mrkz-lmrj-lkwfyd-19>

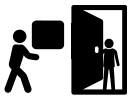
#### Recommended Training Programmes:

- Emerging respiratory viruses, including COVID-19: methods for detection, prevention, response, and control. (English<sup>3</sup>, Arabic<sup>4</sup>)
- Essentials for the prevention and control of the virus (English<sup>5</sup>, Arabic<sup>6</sup>)
- ePROTECT Respiratory Infections (English<sup>7</sup>, Arabic<sup>8</sup>)
- Online Psychological First Aid training for COVID-19 (English<sup>9</sup>, Arabic<sup>10</sup>)
- Coronavirus Disease (COVID-19) Resources in disasterready.org (English<sup>11</sup>, Arabic<sup>12</sup>)

### 3. PROCEDURE FOR DISTRIBUTION

#### 3.1 Strategic choice to approach distribution

- It is critical to reduce at maximum the time spent for the distribution thereby decreasing the exposure to potential contamination. Therefore, **targeted door to door distribution should be prioritized** wherever and whenever it is possible. Traditional distribution where numerous beneficiaries are queuing is to be considered only as a last resort. If a case of COVID19 is officially reported in the area of concern, only door to door distribution should proceed. Under an exceptional circumstance requiring lifesaving distribution, a traditional distribution may still occur only if the hazard will cause a more direct fatality than exposing the population to COVID19 .



✓ **Targeted & door to door distribution should be prioritized.**

✓ **Consider Regular distribution (queuing) as last resort and on exceptional circumstances.**

✓ **Increase time for the mobilization prior to any distributions: a good preparation mitigates risks and exposures.**

- All staff participating in distribution are strongly encouraged to watch the sensitization video<sup>13</sup> prepared by WHO/health cluster and/or to attend a briefing on COVID19.

#### 3.2 Increase mobilization prior to the distribution.

- For door to door or traditional distribution, the first step should be to increase the mobilization and the awareness to risk before the distribution. Beneficiaries should be properly informed on COVID19 but also on the distribution modality – when, what, where, and how.
- Identify potential symptoms among beneficiaries, such as coughing. Using precautionary principles, serve these beneficiaries the day before the distribution with a door to door distribution.

<sup>3</sup> <https://openwho.org/courses/introduction-to-ncov>

<sup>4</sup> <https://openwho.org/courses/introduction-to-COVID-19-AR>

<sup>5</sup> <https://www.bioforce.org/stopcovid19/en/>

<sup>6</sup> <https://www.bioforce.org/stopcovid19/ar/>

<sup>7</sup> <https://openwho.org/courses/eprotect-acute-respiratory-infections>

<sup>8</sup> <https://openwho.org/courses/eprotect-acute-respiratory-infections-AR>

<sup>9</sup> <https://pscentre.org/?resource=online-pfa-training-for-covid-19>

<sup>10</sup> <https://pscentre.org/?resource=online-pfa-training-for-covid-19-arabic>

<sup>11</sup> <https://ready.csod.com/ui/lms-learner-playlist/PlaylistDetails?playlistId=d2cb8c3a-82c0-41a0-b24e-4ca0ab98b80b>

<sup>12</sup> <https://ready.csod.com/GlobalSearch/search.aspx?s=1&q=COVID%20ARABIC>

<sup>13</sup> <https://www.who.int/emergencies/diseases/novel-coronavirus-2019/advice-for-public/videos>



- All kits should be pre-assembled in the warehouse and if kits must be adapted for specific needs of a family<sup>14</sup>, the specific kits should be easily identifiable with a label or a number to avoid unnecessary time-consuming operation at the distribution place.
- Persons of concern such as the elderly or presenting specific vulnerability or facing challenges in mobility should be fully identified. They should be reachable by phone. They should be assisted only with a door to door distribution.
- Preferably in the hours before the distribution, contractors and the beneficiaries shall be contacted<sup>15</sup> by phone or by SMS confirming the distribution time and the place.
- A dedicated contact number for a call center or distribution team member shall be identified to enable potentially unwell beneficiaries to communicate that they will be not present.
- It is important to avoid unnecessary movements/transportation of goods or staff.
- Beneficiaries should be informed that only one household member should be present at the distribution point. In the case of a large family, extra family members mobilized to transport goods should be agreed in advance with the community mobilizer.
- The household representative should be informed to maintain an arm length distance (1.5 meters) and to avoid any physical contact with other beneficiaries and humanitarian workers.
- Summarize key messages in a leaflet with text or drawing also detailing sequences of the distribution. Distribute the leaflet in the day(s) before the distribution during the community mobilizer's visit. Allow beneficiaries to ask questions and familiarize themselves with the procedure.
- If a tumultuous environment is foreseen<sup>16</sup>, double the number of staff dedicated to crowd control.
- For larger families and mattress distribution, identify volunteers or extra staff who may help the household representative to bring the goods back home.
- Community mobilizers could distribute hard to falsify disposable tokens to ensure that the distribution reaches the targeted beneficiaries and prevent fraud. The token shall be disposable to avoid contamination, and they should be destroyed after collection.
- Program wise, these extra measures represent a significant increase in the distribution cost (up to 25%).

- ✓ Use the distribution to inform beneficiaries about COVID19.
- ✓ Distribute leaflet during the beneficiary identification phase.
- ✓ Set up a feedback mechanism or call centres to allow changes in plan.
- ✓ Don't proceed with distribution if you are not fully prepared or if your staff are sick or not sufficient

#### FOR REGULAR DISTRIBUTION

- ✓ 1 household member to be present during the distribution.
- ✓ Double the team for crowd and flow control.
- ✓ Use token system for better control.

<sup>14</sup> Large family, or half kits, or specific number of mattresses for example. Kits could be wrapped up with a plastic cling film similar to airport.

<sup>15</sup> Directly or through 3<sup>rd</sup> party.

<sup>16</sup> Neighborhood well known for gathering quickly large and active crowd.

### 3.3 Reinforced staffing and measures during the distribution

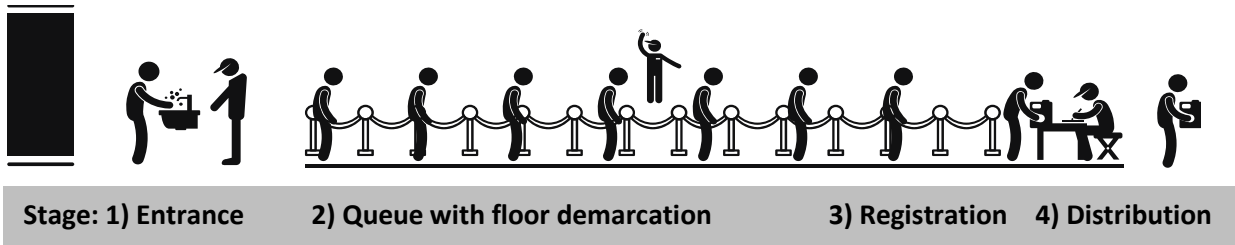
- Distributing in hazardous environments requires extra precaution on an individual level and also requires strengthening the team.
- On an individual level, all staff at risk of exposure to COVID19 should be in good health, voluntarily endorsing the distribution tasks, and properly informed and trained. Team leaders should constantly monitor the general health of their team, ready to address any suspicions of contamination.
- Distribution staff (community mobilizers or others) are strongly encouraged to wash their hands regularly.


#### FOR REGULAR DISTRIBUTION


- ✓ Volunteers to assist large family or people with mobility impairment.
- ✓ Staff could show example in handwashing and sharing good practices.
- ✓ Brief properly all the staff, particularly crowd control managers.

### 3.4 Regular distribution protocol

- It is strongly recommended wherever possible to use a staged queuing in order to avoid the concentration of people during the distribution. The principle is simple with stage 1 queue entry, stage 2 queue control, stage 3 registration, stage 4 good delivery. The model presented is an ideal model, but trying to adhere to these principles will contribute to the risk mitigation to COVID19 exposure.



 **STAGE 1:** A handwashing station is recommended at the entry point. Soap and sufficient water <sup>17</sup>should be available. Preferably, staff should stand nearby, welcome beneficiaries, answer questions, verify tokens, and explain the staged queuing principle. Some banners and awareness materials could also be displayed there. If people of concern are accumulating near the entrance, the welcoming staff could ask them to wait in a dispersed manner.


 **STAGE 2:** The queue for registration should be spaced between beneficiaries with at least 1.5 meters. An alternative is to set in advance some moveable flags distanced by 1.5 or 2 meters to indicate to beneficiaries where they should stand. Several setups are feasible using lines or chairs with a demarcation circle. Once a person in the queue is going to the registration table, all beneficiaries are moving to another flag, and one new beneficiary is entering the queue from the entry/hand wash station.


<sup>17</sup> Ratio of liters required for 10 people.



**STAGE 2:** The queue controller is a staff in charge to verify and give instructions in the queue. If he/she identifies an individual coughing or presenting symptoms, he/she could extract the person from the queue and arrange stage 4 and 5 of the distribution in parallel.

Once the items are received he/she will be encouraged to escort the beneficiary to the exit and give him/her a paper mask (optional). A megaphone for announcements could be useful particularly for a large queue.

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**STAGE 3,** Beneficiaries registration: This is similar to regular distribution with the caveat that the registration officer should maintain 1.5 meters from the beneficiaries. A table or a distance between 2 chairs should be enough to respect the space. If a table is set up, it is important to use antiseptic spray (or bleach solution) to clean the table regularly. Tokens could be stamped for control. Color code for special kits could also be controlled and used.
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**STAGE 4,** A dozen of meters from the registration table, the area for the reception of items should be cleared of people. Beneficiaries will exchange their stamped token for the goods. If items are properly packed and labeled, the reception of items should be fast enough. If for any reason the delivery of items is taking more time, those responsible for the delivery of items should inform the registration table to hold for a while. If heavier goods such as mattresses are distributed, some extra staff volunteers will stand nearby to help the beneficiaries to transport their goods to their vehicle or their place (if not too far).



#### 4. ANNEX: EXAMPLES OF CROWD CONTROL WITH SOCIAL DISTANCING

There are two possibilities to organize a queue. One using chairs (which might need to be disinfected on a very regular basis) in a center of a demarcation circle, the other using a demarcation circle or line drawn on the floor.



Standing Queue with floor demarcation -

Credit Photo *Nasser Abdulkareem, NRC Yemen 2020*



Seating Queue with floor demarcation -

Credit Photo *Mohammed Adal, YGUSWP 2020*

