

**NGO Statement
International Protection**

Thank you Chair,

This statement is delivered on behalf of a wide range of NGOs.

As the world struggles with COVID-19 and despite the Secretary General's call for a global ceasefire, conflicts and persecutions in recent months continue to displace millions of people in search of sanctuary.

Each State has the responsibility to protect public health and may temporarily close its borders to limit the spread of COVID-19, provided this respect the right to lodge an asylum claim. Practices in over 90 countries demonstrate that it is possible to provide access while implementing infectious control measures. Yet, we witness major **restrictions of asylum**. For example, 72 countries completely deny access to asylum seekers thus violating the *non-refoulement* principle and commitments under the 1951 Convention. We urge all States to uphold their obligations under international law.

NGOs also worry about further risks of erosion of internationally recognised asylum procedures, particularly through externalisation of border controls, which can leave asylum seekers vulnerable to physical and psychological harm.

Furthermore, we concur with UNHCR's concerns about legislative developments such as in Hungary, where a new asylum procedure requires asylum seekers to first obtain a permission to travel to Hungary to claim asylum. This may lead to violations of *non-refoulement*, refugee law and European Human Rights instruments. We urge Hungary to reconsider this law and bring its procedures back in line with legal standards.

The recent EU proposal for a Pact on Migration and Asylum is also of concern. While we welcome the focus on solidarity, we fear the proposed system may reduce predictable responsibility-sharing. Flexibility for negotiations amongst States may also lead to more deterrence, externalisation and returns. We call on EU Member States to work towards meaningful and predictable solidarity mechanisms.

Despite commitment made by States in 2017 resettlement figures have declined in past years, with only nearly 12,000 persons resettled in 2020 so far. This is too little given the current needs. We commend States that relaunched their programmes in the pandemic and call to expedite remote resettlement processing. We also urge everyone to work towards achieving the Three-Year Strategy's vision, with benefits for 3 million refugees by 2028.

Turning to specific **humanitarian and protection issues**, we note that before the pandemic, the situation was already harrowing in most protracted crises. COVID-19 has exacerbated the loss of livelihoods, resulting in deteriorating living standards, access to food, WASH, and services, and increased protection risks. Negative coping strategies escalate, including early marriages, child labour and selling of sex. Access to food is a major problem, with refugees often resorting to lower quality food or possibly facing famine.

As the pandemic is testing national capacities, displaced populations are struggling to **access health services** due to high costs, administrative hurdles, movements restrictions, discrimination, and incapacitated facilities. Access to reproductive health services, including antenatal care, is of particular

concern. Moreover, in some cases displaced persons face the threat of arbitrary arrests and restrictions on movements in and out of camps, all limiting their access to services.

Globally COVID-related restrictions resulted in escalating **Gender-Based Violence** against women and girls. Limitations of movements and stress caused by economic insecurity are major compounding factors driving sexual and physical violence. Victims are often stuck in confinement with perpetrators. We also notice increasing reports of sale of sex as a financial coping strategy.

Reports also point to increasing **Child Protection** issues, ranging from various forms of violence, early marriages, or family separation. Negative coping mechanisms abound, including forced labour and reduced food consumption, potentially impacting child development.

Social exclusion, stigmatisation, discrimination, and xenophobia are on the rise, including for LGBTQI individuals. Returnees are also sometimes suspected of bringing the virus to their places of origin.

Psychological trauma, stress and anxiety is increasing due to social isolation and COVID-related insecurity, economic stress, and poor information. All this results in increasing mental health issues, suicide and self-harm. **Older people** and **Persons with disabilities** face a disproportionate impact, often suffering from extreme isolation and hampered access to services.

Limited access to legal assistance is particularly worrying and linked to lack of identity documentation. This intensifies protection risks and restricts freedom of movement, access to services and assistance, and exposure to violence and abuse, while marriages and new births may not be registered. Lack of documentation also exacerbates **irregular access to Housing Land and Property security**, exposing many people to eviction and exploitative relationships with landlords.

Obviously, COVID-19 represented an added challenge for NGOs, which had to adapt to ensure continuity of service, while safeguarding and protecting their staff.

In particular, NGOs adjusted protection activities to:

- Shift **individual case management** to remote modalities, using technology and sometimes making access to services available 24/7.
- develop **Mental Health and Psychosocial Support** through remote individual counselling, helplines and media messaging.
- assisting to shift **income generation** activities to support disadvantaged groups, for example towards producing protective masks.
- Maintaining **protection monitoring** through technology, with adapted questions designed to understand the multi-sectoral impact of restrictive measures, needs and changes in vulnerabilities.

Moreover, evidence suggests that cash and vouchers are strong and flexible tools to achieve child protection, address GBV, housing, land and property rights, MHPSS, and other protection outcomes, particularly in the pandemic context.

In this context, NGOs stress that **additional funding support is needed** if we are to avoid long-term devastating impacts. However, only 33% of the funding requirement have been secured for COVID-19 specific protection work outlined in the GHRP. We urge donors to address the funding shortfalls, both current and pre-existing.

We also remind States of their GRF commitments to develop more inclusive national policies, particularly national and local-level health response plans, social protection schemes and increased access to livelihoods for displaced populations.

Finally, we highlight that COVID-19 compounded challenges linked to **humanitarian access and bureaucratic impediments**. We also urge States to consider humanitarian exceptions when imposing counter-terrorism measures and sanctions, so as to avoid unintended impacts on humanitarian situations.

For detailed statement, visit icvanetwork.org. Thank you.