RECOMMENDATIONS FOR ADJUSTING LONG-TERM SHELTER INTERVENTIONS IN THE CONTEXT OF THE COVID19 OUTBREAK

As of 26 March 2020¹

As the Novel Coronavirus (COVID-19) continues to spread in an unpredictable manner it presents a growing risk to partners, staff and beneficiaries during shelter repair and rehabilitation.

This document aims to provide guidance during shelter repair and rehabilitation to minimize the risk of exposure of personnel, partners and beneficiaries. Adjustments should be in line with instructions provided by the World Health Organization and Ministry of Health.

RECOMMENDED ACTIONS

1. Assess the priority and urgency of the needs
   - Balance the humanitarian needs with safety of partners, staff and beneficiaries. Sector partners on the ground are best placed to understand the need, but we also do want to avoid pressuring PoC
   - Minimize the works to include only the prioritized/urgent cases as long as restrictions on movements and gatherings are still in place.

2. Plan and organize shelter interventions in advance
   - Coordinate with local authorities on their plans for: giving approvals, prioritized projects, monitoring and supervision of shelter activities in order to adjust project timelines.
   - For less urgent projects, the partner can use the current period to finalize the necessary preparations such as: submitting requests for approvals, coordination with donors, preparing the agreements, drafting BoQs and procuring materials.
   - This period can also be used for area-based/neighborhood level assessments to help plan projects related to communal infrastructure.
   - Organize awareness sessions for the contractors and laborers on the preventive measures as indicated by the Ministry of Health and WHO; including handwashing, respiratory hygiene and sterilization.
   - Prioritize the wash component of shelter repair to ensure targeted families have sufficient access to water and sanitation.

3. Communicate with beneficiaries in advance of work
   - For all coordination and communication, use alternative modalities e.g. phone calls, SMS or online means to avoid unnecessary social contact and gathering.
   - When contacting beneficiaries, provide the necessary awareness on the current situation, prevention measures, and steps laborers will take in advance.
   - Also make sure to guide beneficiaries on the precautionary measures they can take to ensure safety of laborers.
   - Provide beneficiaries the option to opt-out of repairs/rehabs explaining the work can be conducted at a later date and will not jeopardize their assistance.
   - For activities that demand direct interaction with beneficiaries (e.g. interviews for post-intervention monitoring), consider using alternate modalities such as phone interviews.

¹ These guidelines were developed based on guidance from WFP regarding food distributions and the Syria Health Sector lead by WHO.
4. Do not allow crowding at the project site
   - When identifying the prioritized cases and projects, always avoid close social contact and crowded places.
   - Encourage both beneficiaries and laborers to follow social distancing guidelines; if possible, conduct work when there are less people in the shelter.
   - If the implementation is done directly by the partner, try to rely on local laborers and supplies as much as possible to minimize length movements across different communities.
   - If the implementation is done through contractors, try to find a local contractor in order to minimize movements across different communities.

5. Consider hygiene and sanitation measures
   - Make sure that sanitization measures are in place for laborers, including that they have the right personal PPE (masks, gloves, etc.), have access to handwashing facilities with adequate soap and/or gel, and practice appropriate hygiene practices.
   - As much as possible, have the monitoring done through online communication means.

KEY LINKS TO INFECTION PREVENTION AND CONTROL