

## DONOR UPDATE ON UNHCR COVID-19 RESPONSE IN COLOMBIA - #2



*UNHCR staff help set up 30 Refugee Housing Units (RHUs) at the Erasmo Meoz Public Hospital in Cucuta to serve as care areas for COVID-19 positive patients.*

### CURRENT CONTEXT RELATED TO COVID-19 AND GOVERNMENT MEASURES

The Colombian Ministry of Health confirmed **1,065 cases of COVID-19** as of Wednesday 1 April, in 26 of the country's 32 departments, with Bogota concentrating the highest number of people infected (472 confirmed cases). In Colombia, a total of 17 individuals have died from COVID-19 and 39 cases have recovered. So far, no infected case is reported among Venezuelan refugees and migrants. Colombia is currently under mandatory preventive isolation, as mandated by presidential Decree 457, lasting until 12:00 am on Monday 13 April.

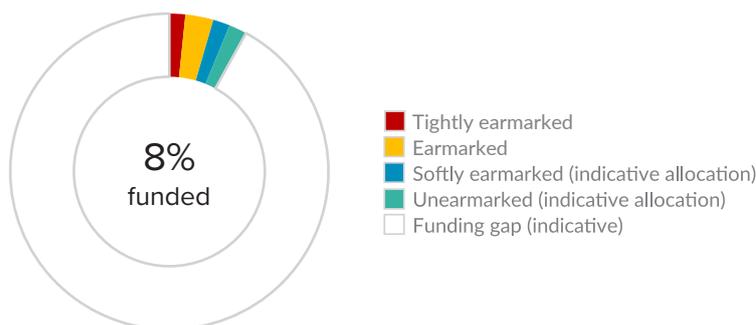
On 31 March, the Ministry of Health announced that **Colombia is entering the mitigation phase**, as more than 10% of the total confirmed cases do not have an epidemiological link. The Ministry of

Education issued a Ministerial order through which distance learning at all educational levels was extended until end of May 2020.

UNHCR Colombia continues to provide assistance to Venezuelan refugees and migrants, Colombian returnees, IDPs and host communities. A list of essential UNHCR personnel has been compiled for further clearance with the Office of the President as foreseen under provision 14 of decree 457 regarding freedom of movement of accredited diplomatic missions strictly authorized for emergency response to the COVID-19 crisis.

There have been reports of **demonstrations of Venezuelan refugees and migrants** in various cities in Colombia, like Bogota, Cucuta and

**\$81.5 million**  
 UNHCR's financial requirements 2020



Bucaramanga where hundreds of participants solicited the authorities' support for complying with the mandatory quarantine, including food and shelter.

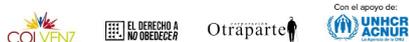
Furthermore, some reports have informed of an **increased number of evictions of Venezuelans** who can no longer afford to pay for their accommodation and are now living on the streets in various major cities like Cali, Medellín, and Bogota, but also in border areas such as Pasto where the number of Venezuelans living on the streets significantly increased as well as in Putumayo.

Social media reports of Venezuelans looting supermarkets in search for food led to several manifestations of xenophobia, including Venezuelans wishing to buy food being blocked from entering certain supermarkets.



**Rita, médica venezolana**  
 Especialista en medicina interna

"Como médica internista atiendo a los adultos mayores de Medellín, para cuidarlos y protegerlos en esta situación de emergencia del Covid-19."



*This xenophobia prevention initiative highlights the work of Venezuelan medical professionals in Medellín.*

areas where the government has a limited presence and where **irregular armed groups are active**, as reported in Tumaco (Nariño) where the measures undertaken by the municipal administration in response to COVID-19 have provoked demonstrations, domestic robberies and increased extortion schemes by irregular armed groups. The state's limited response in providing basic services, food security as well as scarcity of basic products and a weak health sector are all contributing to a context where irregular armed groups can end up regulating the public space and imposing quarantine in areas they control.

**Dissemination of false information on social media platforms** regarding cash or food being provided by UN Agencies has led to gatherings of small groups of Venezuelans in front of the various UNHCR offices and reported disturbances. The UNHCR Information and Orientation Centers (PAO in Spanish) network has undertaken various information campaigns counteracting the false information, in coordination with other members of the Interagency Group on Mixed Migration Flows (GIFMM) (a list of members can be viewed [here](#)).

The National Liberation Army (ELN) declared a ceasefire for the month of April as a gesture to the Colombian population facing COVID-19 in a statement posted on its website and inspired by the UN Secretary General António Guterres' appeal for a global ceasefire.

On the border with Venezuela, the international bridges in Arauca and Cucuta remain closed. Informal crossing points are closely monitored by the Colombian navy. Border closure is also enforced by the ELN which is restricting any informal movements across the river.

There are concerns over potential civil unrest in

The first case of COVID-19 among the indigenous

community (a *colon*, or non-indigenous partner of a Yukpa woman) was confirmed on 25 March among the Yukpa indigenous community in Cucuta. The 250 members of the cross-border Yukpa indigenous community of El Escobal were placed in immediate isolation for further treatment and testing by local authorities. UNHCR is closely monitoring the situation and is concerned with the potential spread of COVID-19 among the other cross-border indigenous communities such as Wayuu, Skiyani and Amorua who are already facing dire protection needs: undernourishment, lack of access to water, unhealthy conditions and other health issues such as HIV, diabetes, tuberculosis.

The border with Ecuador remains closed with Venezuelan refugees and migrants entering Colombian territory through informal crossings and a well-established network of traffickers. Pictures of bulldozers destroying roads along the border and of army controls are being circulated to dissuade the population from crossing, the local authorities being concerned with Ecuador as the country that has the highest number of COVID-19 cases per capita in Latin America as well as increasing number of deaths.

## UNHCR'S RESPONSE TO COVID-19, INCLUDING REPRIORITIZATION

UNHCR continues to support the local, regional and national authorities in their response to COVID-19 in close collaboration and coordination with PAHO (Pan American Health Organization) and other humanitarian organizations.



*In Riohacha, UNHCR is working with the Mayor's Office, the Governor's Office and humanitarian partners to strengthen prevention and response measures at the Casa del Abuelo Foundation, where older adults and vulnerable Venezuelan population are housed.*

## Health and Hygiene

UNHCR in Riohacha sponsored the hiring of a Regional Coordinator for the COVID-19 situation within the Departmental Health Secretariat, and of a driver to carry out community health monitoring. In Cucuta, UNHCR signed an agreement with the Departmental Institute of Health to outfit an isolation space for 40 patients, including Venezuelan refugees and migrants. UNHCR also signed an agreement with the Secretariat of Health to ensure the hiring of 11 doctors in order to respond to the current medical staff shortage in the department. Furthermore, the UNHCR-supported primary health care facility, *Las Margaritas* reopened in Cucuta, providing medical services to the inhabitants of Villa del Rosario.

UNHCR in Mocoa donated a mechanical ventilator, a fetal monitor, a defibrillator, a monitor of vital signs and an electrocardiograph device to Orito Hospital in Putumayo.



*UNHCR in Mocoa donated a monitor of vital signs, a defibrillator and an electrocardiograph device to support the health response at the San Miguel Hospital in Putumayo.*

## Protection

UNHCR (with coordination through GIFMM) made available 42 telephone lines to address queries of Venezuelan refugees and migrants, Colombian returnees and IDPs about protection routes, access to education, health, nationality and other services (available [here](#)).

Between March 16-27, UNHCR's ongoing remote registration in PRIMES (its registration, identity management and case management tool) via telephone registered 937 receptions/4,128 individuals of which 69% women, 29% men, 2% unspecified. The most common specific needs identified during this reception process were legal and physical protection needs (338), serious medical condition (118), child at risk (91), single parent (64) woman at risk (48) and others.

The UNHCR-supported Local Ombudspersons (*Personeria*) Protection Network along the Venezuelan border has offered legal orientation to 106 Venezuelan refugees and migrants and Colombian returnees via 4 telephone lines during the last week, consultations being mainly on access to the health system and food. In addition, the Communication with Communities (CwC) taskforce held a virtual consultation with 13 Venezuelan organizations during which the focus group communicated their identified needs, capacities and priorities for the COVID-19 response.

### Food Security and Nutrition

UNHCR Arauca together with WFP and local authorities has identified 5,000 vulnerable people in the department for food kit distribution to be conducted this week. UNHCR Barranquilla is providing food supplies to 47 Venezuelans hosted in a hostel during the quarantine, including children, pregnant women and one adult with disabilities.



*In Medellín, UNHCR staff unpack baby kits which will be distributed to Venezuelan refugees and migrants via its local partner, Famicove.*

### Cash-Based Interventions

In addition to increasing funds to its national CBI partner Pastoral Social to provide emergency cash to Venezuelan refugees and migrants, UNHCR signed an agreement with implementing partner CISP for emergency cash for Venezuelan refugees and migrants living on the street in Arauca. UNHCR is coordinating the cash scale-up closely with WFP especially in the border areas, given that WFP aims to provide cash/vouchers to tens of thousands of its community kitchen beneficiaries over the coming weeks and months due to the COVID-related closure of community kitchens. In Antioquia, in addition to its ongoing cash programmes, UNHCR is setting up a small pilot with a mobile money platform, in coordination with members of the cash working group. In Bogota and Soacha, a new emergency cash programme through partner FAMIG is starting this week and will benefit up to 700 Venezuelan and vulnerable host community families.



*30 Refugee Housing Units (RHUs) were set up at the Erasmo Meoz Public Hospital in Cucuta to serve as care areas for COVID-19 positive patients.*

### Shelter, NFI, and WASH

UNHCR Cucuta in cooperation with the National Unit for Disaster Risk Management provided 30 Refugee Housing Units (RHUs) to the Erasmo Meoz Public Hospital to serve as care areas for COVID-19 positive patients and 4 RHUs to the San Juan de Dios Hospital in Pamplona to establish observation and isolation spaces for potential COVID-19 cases. At the Integrated Assistance Center (CAI) in Maicao, UNHCR set up 53 RHUs to serve as potential isolation area for any possible future suspicious or positive cases among the 400 refugees and migrants currently living in the Centre. UNHCR furthermore donated another 25 RHUs to the Maicao hospital to enhance its capacity. UNHCR is in coordination with the local authorities in other departments to provide additional RHUs, in coordination with the national government.

In Barranquilla, arrangements in the temporary shelter in Malambo supported by UNHCR have been adjusted to a maximum capacity of 24 people, with an isolation area, to allow the shelter to remain open in accordance with Government standards.



*At the San José de Maicao Hospital and the CAI in La Guajira, UNHCR continues to provide RHUs.*

### **COVID-19 impact on situations of internal displacements and confinements**

UNHCR continues to monitor four regions facing ongoing situations of internal displacements and confinements which require attention by authorities: Chocó (Alto Baudó, Litoral del San Juan), Cauca (Guapi, Argelia), Nariño (Tumaco, Roberto Payán), Norte de Santander (Catatumbo). The Government's Victim's Unit was able to access the community and provide humanitarian assistance only in Alto Baudo, while the rest of communities remain with very limited assistance. UNHCR as co-leader of the Protection Cluster with NRC is advocating to make more visible the double impact of displacement and COVID-19 as well as the allocation of additional resources to enable local Protection Clusters to offer complementary humanitarian assistance as a provider of last resort in situations where government response is lacking.

### **UNHCR'S PREPAREDNESS AND RESPONSE PRIORITIES**

To better respond to the unprecedented challenge posed by this pandemic, UNHCR declared COVID-19 a **Level 2 Emergency as per its internal policy on 25 March**, activating emergency procurement procedures, simplified partner selection processes and giving country teams maximum flexibility in providing assistance.

### **Coronavirus emergency appeal: UNHCR's preparedness and response plan**

The UN Secretary-General and Emergency Relief Coordinator recently launched the COVID-19 Global Humanitarian Response Plan (GHRP) on 25 March, seeking \$1.99 billion for 9 months and which includes the financial requirements for UNHCR at global level, available [here](#).

UNHCR at the global level recently revised its initial appeal for its COVID-19 response, which is available [here](#). **UNHCR is now seeking USD 255 million for its response over the next nine months.** This amount is fully coordinated with and included in the above-mentioned Global Humanitarian Response Plan (GHRP). The USD 255 million also includes the USD 33 million in UNHCR's initial appeal, launched on 10 March. This document provides more substance and detail on the activities and budgets that have gone into the OCHA-led GHRP, which was designed to be a high-level, inter-agency document outlining a global humanitarian response. It also provides breakdowns of the \$255 million by country and by sector of activity, including USD 5.16 million appeal for UNHCR Colombia. Activities covered by the appeal – and already underway – include life-saving interventions across a number of sectors: Procurement of medical supplies and personal protective equipment; establishing shelter and other quarantine arrangements, providing multi-purpose cash grants to vulnerable persons of concern; upgrading water, sanitation and hygiene; and health services; emergency shelter; communications with communities; and adapting registration, protection case management and other protection programmes to the changing circumstances.

Prioritized activities respond to Government requests for support and are coordinated through existing interagency structures, namely the Humanitarian Country Team (in which UNHCR leads the Protection Cluster) as well as Interagency Group for Mixed Migration Flows co-led by UNHCR and IOM.

**UNHCR Colombia is currently appealing for USD 5.16 million for its COVID-19 response, with the following priorities:**

### Public Health

- Additional health-related human resources in border areas, especially public health surveillance as well as additional personnel to strengthen internal technical capacity (50 staff for health authorities; 2 UNHCR staff).
- Personal Protection Equipment (PPE) for health personnel to complement government procurement (at least 12,000 kits).
- Medical equipment for identification of new cases for Level 1 facilities and treatment options for Level 2 and 3 facilities (i.e. beds, ventilators, testing equipment).
- Infrastructure modifications (preparation, adaptation and/ expansion) to prevent, treat and/or mitigate public health risks (i.e. handwashing stations).
- Establishment of new emergency spaces for local health authorities (including Refugee Housing Units as isolation spaces for detected cases).
- Transportation and logistical support (i.e. support for transportation of patients at the humanitarian corridor; transport support of personnel to the border).

### WASH & Shelter/Core Relief Items

- Cleaning materials for health centers, shelters as well as medical waste management and support with funeral expenses.
- NFI / Hygiene kits (27,000 kits).
- WASH activities focusing on water storage, water points, latrines at informal settlements, as well as additional technical staff in border area.

### Cash-Based Interventions

- Scale-up of multipurpose cash assistance to address emergency shelter and basic needs of individuals at heightened risk (at least 2,000 cases), involving Venezuelans and vulnerable host communities.



### Coronavirus emergency appeal UNHCR's preparedness and response plan (REVISED)



UNHCR is appealing for USD 255 million on the global level to combat COVID-19, including USD 5.16 million for Colombia.

### UNHCR's response in Colombia is possible thanks to the contribution of private donors and:

Canada, Central Emergency Response Fund (CERF), Denmark, European Union, Germany, Japan, Republic of Korea, KOICA, Luxembourg, Netherlands, Norway, Sweden, Switzerland, UN Human Security Trust Fund (UN HSTF), UN Peacebuilding Fund, Switzerland, United Kingdom and United States.

2 April 2020  
Bogota, Colombia