



RMRP 2020

FOR REFUGEES AND MIGRANTS FROM VENEZUELA

REFUGEE AND MIGRANT
RESPONSE PLAN 2020

JANUARY - DECEMBER 2020

R4V
RESPONSE FOR
VENEZUELANOS
Coordination Platform for
Refugees and Migrants
from Venezuela

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FOREWORD

By Eduardo Stein

Some 14 months have passed since I took my role as UNHCR and IOM Joint Special Representative for Refugees and Migrants from Venezuela. During this time, I have been able to visit Argentina, Brazil, Chile, Colombia, Ecuador, Guyana, Panama, Peru, Trinidad and Tobago. There, I witnessed dramatic human situations, including at several critical border points, of this relentless flight from one of the richest countries in natural resources in Latin America. I have been most moved by the immense solidarity shown by the governments of the host countries in Latin America and the Caribbean in their efforts to offer a strong welcome and integration of the refugees and migrants from Venezuela in a coordinated manner, as well as by the dedication of public servants and people from civil society, faith-based organizations, donor organizations, international financial organizations and UN Agencies. The combined efforts of all these different entities have been extraordinary and reflect a common culture of solidarity and generosity, especially among host communities in the receiving countries which have opened their homes and social contacts for those in need.

The Latin American and Caribbean region remains confronted with an unprecedented refugee and migrant situation, the impact of which reaches across much of the hemisphere. For the coming year, it is projected that the total number of Venezuelan refugees and migrants worldwide will increase from 4.5 million in October 2019 to 6.5 million in December 2020, nearly 85% of whom will be found in the region. In addition to this figure there are pendular movements of millions of people who have to cross borders to meet basic needs, persons in transit, as well as returnees from Venezuela to their countries of origin.

There are no clear prospects that this massive population outflow will cease any time soon and, as clearly highlighted by the UN High Commissioner for Human Rights, of particular concern are the increasing numbers of refugees and migrants in situations of heightened vulnerability. The ongoing issues

include serious risks for exploitation and abuse, particularly gender-based violence, as well as family separation, most notably for unaccompanied and separated children. The situation of the *caminantes* is particularly worrisome given the long distances and range of protection risks for persons crossing large parts of the continent. In the face of increasing levels of xenophobia, the needs of the refugee and migrant population are even more pronounced as prospects for local integration face additional social and cultural hurdles. These elements show the need for access to territory and documentation, regular stay arrangements and the risks associated with irregular movements, including but not limited to human trafficking and smuggling.

The support of the Regional Interagency Coordination Platform to ensure a common humanitarian cooperation framework for assistance to the refugees and migrants from Venezuela and the international solidarity demonstrated throughout 2019 was inspiring and hopefully it will be further strengthened in 2020. Despite all the progress achieved, governments in receiving countries are under immense pressures. The efforts and resources required to address immediate and longer-term needs often take multiple forms and operate in parallel, ranging from stresses on public services and budgets to negative public opinion and attitudes towards the Venezuelan population, including an increase in incidents of xenophobia and discrimination.

As a result, as seen in several parts of the region, new or revised entry requirements for Venezuelan refugees and migrants have been recently introduced in response to these pressures. States have the right – and indeed an obligation to their citizens – to manage access to their territories according to their national frameworks and laws, and in a manner consistent with their international commitments, it is important to note that in practice, national access requirements are difficult for Venezuelans to achieve due to a lack of documentation. This increases the likelihood



that many of them can take irregular routes and be prone to the subsequent vulnerabilities associated with irregular movements and status, as well as increased pressure on other countries in the region, most notably Colombia.

In light of this situation, there is a clear plea to address, together with the impact of the crisis in the region, the humanitarian situation in Venezuela as a matter of priority, since both dimensions are essentially interlinked. A principled humanitarian assistance, free from political goals and consideration remains crucial in order to maintain the provision of assistance to vulnerable populations. To face so many challenges, a concerted push on multiple fronts, both in the context of the Quito Process and the humanitarian response in the regional Refugee and Migrant Response Plan (RMRP), with the cooperation of the Regional Interagency Coordination Platform, remain as important as ever.

Within the framework of the 2019 RMRP, across 16 countries, more than 1 million persons had been reached with assistance and services until October 2019. This represented almost 46% of the total target beneficiaries for the year, a result commensurate with the 48% funding for the same period. The operational response has also been bolstered by the efforts of civil society and other actors to accompany, assist and provide services to more than 100,000 persons per month through the regional networks developed by faith-based organizations, the Red Cross Movement other national and international entities. For the purposes of influencing public opinion among host communities, and to combat xenophobia, regional and national campaigns have been launched, having reached an audience of more than 75 million.

The net effect of these efforts helps to ensure the effective access to basic rights and services, including health, education and employment, in many parts of the region.

But it is essential now that the focus remains on what lies ahead. For 2020, the requirements under this response plan will

be USD 1.35 billion to target 2.47 million refugees and migrants from Venezuela in destination, 378,000 in pendular situation, 264,000 returnees and 877,000 host community members across 17 countries, through some 137 appealing partners.

There is a wide range of immediate and ongoing humanitarian and development needs in key sectors, from health to education or legal counselling which require a continued and scaled-up response. And in the region, there are many good practices already in place, but they require further international support and continued efforts to strengthen strategic and operational coordination. The 2020 RMRP will address those increasing needs through a multi-sector, coordinated, and consultative process, which will provide flexible, practical and protection-sensitive arrangements, in coordination with governments in the region, as required to mitigate risks for refugees and migrants and the secondary impact on neighboring countries.

Throughout the Americas, greater consideration of, and investment in, the communities hosting refugees and migrants, many of which have their own pre-existing needs as well as vulnerable populations, will continue. The response to refugees and migrants from Venezuela represents a clear case of the need for both immediate and longer-term planning, partnerships and response operating in parallel and drawing upon all partners from the humanitarian, development, public and private sectors.

No receiving country can manage the current crisis on its own and the outflows of refugees and migrants are not limited to territorial boundaries or official border points. Only through a coordinated and harmonized approach will it be possible to effectively address the scale of needs, which continue to increase and evolve as the current crisis continues. To this end, the Regional Refugee and Migrant Response Plan for 2020 represents a key element around which collective efforts should be mobilized and further consolidated.

Eduardo Stein

Joint Special Representative for
Venezuelan refugees and migrants



REGIONAL



REGIONAL RMRP AT A GLANCE

POPULATION PROJECTION 2020

PEOPLE IN NEED

VENEZ. IN DESTINATION | VENEZ. PENDULAR | RETURNEES
5.54 M | **2.09 M** | **0.68 M**

VENEZ. IN DESTINATION | VENEZ. PENDULAR | RETURNEES | HOST COMMUNITY
3.82 M | **0.50 M** | **0.35 M** | **1.49 M**



PEOPLE TARGETED

VENEZ. IN DESTINATION **2.47 M** | VENEZ. PENDULAR **0.38 M** | RETURNEES **0.26 M** | HOST COMMUNITY **0.88 M**

FINANCIAL REQUIREMENTS

\$ 1.35 B

RMRP PARTNERS

137

COLOMBIA



2020 POP. PROJECTION
2.40 M | **2.09 M** | **0.68 M** | -

PIN
1.77 M | **0.50 M** | **0.35 M** | **0.60 M**

TARGET
1.33 M | **0.38 M** | **0.26 M** | **0.31 M**

Venez. in Destination | Venez. pendular | Returnees | Host Community

FUNDING **739.2** | PARTNER **59**

BRAZIL*



2020 POP. PROJECTION
361 K

PIN
289 K

TARGET
216 K

FUNDING
\$ 88.2 M

PARTNER
29

ECUADOR*



2020 POP. PROJECTION
659 K

PIN
468 K

TARGET
316 K

FUNDING
\$ 199.3 M

PARTNER
36

CENTRAL AMERICA & MEXICO*



2020 POP. PROJECTION
283 K

PIN
117 K

TARGET
47 K

FUNDING
\$ 14.8 M

PARTNER
8

PERU*



2020 POP. PROJECTION
978 K

PIN
617 K

TARGET
235 K

FUNDING
136.5 M

PARTNER
28

THE CARIBBEAN*



2020 POP. PROJECTION
150 K

PIN
124 K

TARGET
71 K

FUNDING
45.6 M

PARTNER
22

CHILE*



2020 POP. PROJECTION
472 K

PIN
295 K

TARGET
145 K

FUNDING
31.5 M

PARTNER
17

THE SOUTHERN CONE*



2020 POP. PROJECTION
236 K

PIN
148 K

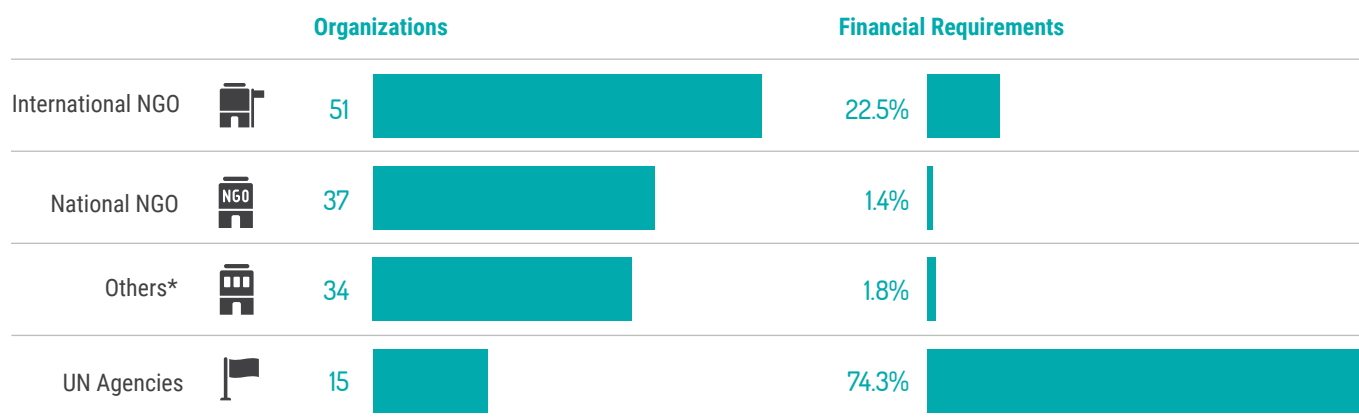
TARGET
114 K

FUNDING
31.3 M

PARTNER
34

*The figure of People in Need and People Targeted does not include host communities

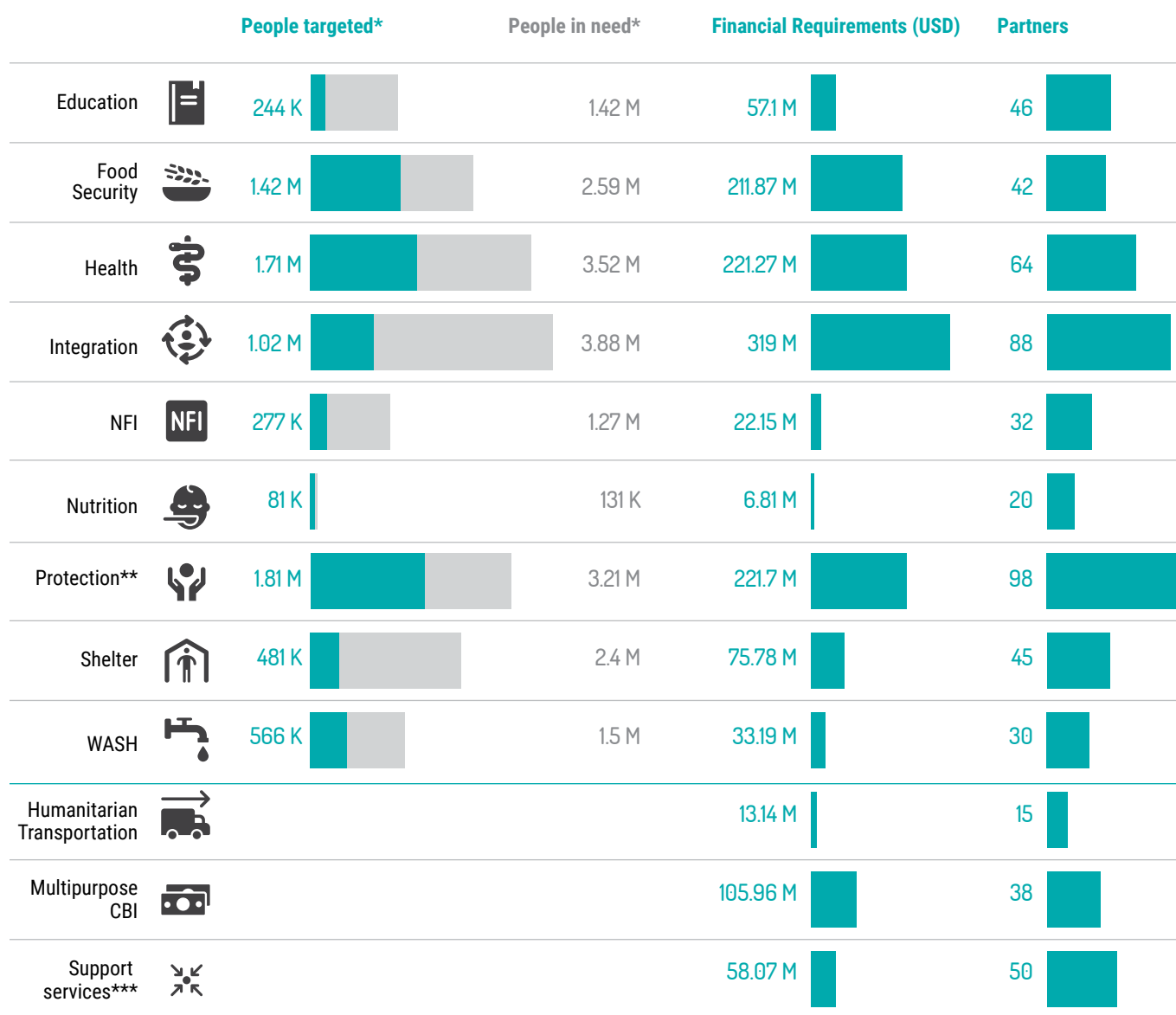
NUMBER AND FINANCIAL REQUIREMENTS BY ORGANIZATION TYPE



*Other include Red Cross movement, academia and faith based organizations.

The list of organizations and RMRP partners only includes appealing organizations under the RMRP. Many of these organizations collaborate with implementing partners to carry out RMRP activities.

POPULATION IN NEED AND TARGET, FINANCIAL REQUIREMENTS AND NUMBER OF PARTNERS BY SECTOR



*The figure of People in Need and People Targeted does not include host communities | ** Includes GBV, Child Protection, Human Trafficking & Smuggling

*** Communication, Coordination, Information Management and Fundraising

BACKGROUND AND CONTEXT

The Regional Refugee and Migrant Response Plan (hereinafter 'RMRP' or 'the Plan') for Refugees and Migrants from Venezuela was first launched in 2019 as a response to the large-scale population movements registered in Latin America and the Caribbean as a result of the political, socio-economic and human rights situation in the Bolivarian Republic of Venezuela (hereinafter Venezuela). As of October 2019, more than 4.5 million refugees and migrants from Venezuela are outside their country of origin, with 3.7 million in the region alone. As per current trends, it is estimated that the number of refugees and migrants from Venezuela included in government official figures in countries across Latin America and the Caribbean, will reach up to 5.5 million by the end of 2020, a noteworthy increase from the 140,000 in 2015.

Countries in Latin America and the Caribbean have demonstrated continuous solidarity and generosity towards Venezuelans, with many of them maintaining an open-border policy and some even adjusting their legislations to meet the needs of the refugees and migrants. By October 2019, government efforts resulted in more than two million residencies issued to Venezuelans, while more than 630,000 have been registered as asylum seekers or recognized as refugees. In several countries, additional exercises to register and regularize the status of undocumented refugees and migrants from Venezuela are underway.

Despite the efforts of receiving countries, this unprecedented influx has placed immense pressures on governments and host communities. These pressures often take multiple forms and operate in parallel, ranging from stresses on public services and budgets to negative public opinions and attitudes towards the Venezuelan population, including an increase in expressions of xenophobia and social rejection. During 2019, new or revised entry requirements for refugees and migrants from Venezuela have been introduced by several governments impacting the ability of refugees and migrants to regularly enter and stay the concerned countries. Following the introduction of these visa requirements by various countries in mid-2019, irregular border crossings have significantly risen, with government figures therefore not capturing the actual presence of refugees and migrants in those countries.

In this context, an increasing number of refugees and migrants from Venezuelan remain in irregular situations for reasons that include lack of documentation, administrative procedures and access restrictions, long waiting periods and high application fees for visas, among others. Venezuelans who are not able to access a regular status have become more vulnerable to all forms of exploitation and abuse, violence and discrimination, smuggling and trafficking and negative coping mechanisms.

In 2020, the RMRP will complement and strengthen the national responses and the regional efforts of governments to respond to the increasing flows of refugees and migrants from Venezuela in the 17 countries⁰¹ that form the Plan. The needs detected in transit and destination countries mainly include emergency humanitarian needs, including access to basic services; protection needs, including predictable regular status, documentation and information on access and availability of services and rights; and socio-economic integration needs, including access to the labour market, social and cultural integration and the recognition of academic degrees, titles and skills in host countries.

The 2020 response to the outflow of refugees and migrants requires partners to involve a longer-term, planned approach, still focused on ensuring immediate assistance and protection of new arrivals, but also considering activities that intend to bridge the nexus between a humanitarian emergency response and the longer-term perspective to build resilience at the individual beneficiary level as well as at institutional level.

In this context, this Plan is the result of field-driven planning, bringing together 137 appealing organizations, in consultation with host governments, civil society and faith-based organizations, local communities, donors, as well as the refugees and migrants themselves with common objective of addressing the overarching humanitarian, protection and socio-economic integration needs of refugees and migrants from Venezuela.

THE QUITO PROCESS:

Considering the multinational and multidimensional nature of these movements, the host governments have sought solutions to specific regional challenges through the Quito Process. This is a State-led initiative to promote consensus and dialogue between countries receiving Venezuelan refugees and migrants in Latin America and the Caribbean.

In September 2018, 11 States signed onto the Declaration of Quito on Human Mobility of Venezuelan Citizens in the Region and regional participation has expanded over the subsequent rounds of meetings (November 2018; April & July 2019). Specifically, the Quito Plan of Action (Quito II) and the Road Map of the Buenos Aires Chapter (Quito IV) outline the harmonization of specific measures for the response to the refugee and migrant crisis.

⁰¹ Countries in Latin America and the Caribbean involved in this RMRP include Argentina, Aruba, Bolivia, Brazil, Chile, Colombia, Costa Rica, Curaçao, Ecuador, the Dominican Republic, Guyana, Mexico, Panama, Paraguay, Peru, Trinidad and Tobago, and Uruguay

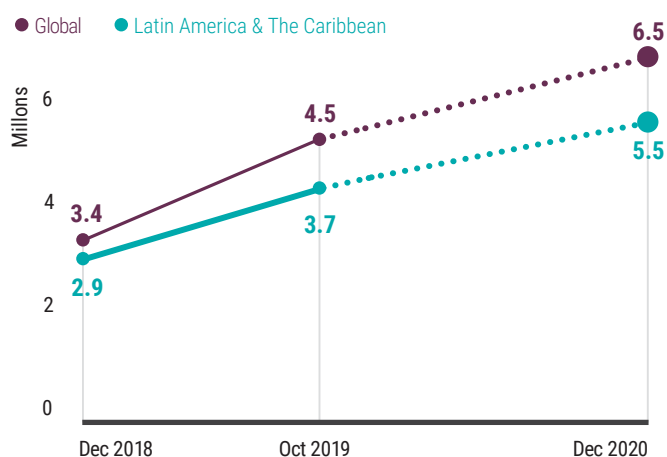
REGIONAL RESPONSE STRATEGY

The Regional Refugee and Migrant Response Plan for 2020 serves to collate the comprehensive response to refugees⁰², migrants, stateless persons, third-country nationals, and returnees from Venezuela, irrespective of their migratory or asylum status in the respective host country. As such, it addresses the needs of those undertaking pendular movements, those in transit to other countries, as well as those in a country of destination, without discrimination. In addition, the RMRP addresses the needs of impacted host populations. The needs of the different population groups are reflected in each country/sub-regional chapter of the RMRP.

Throughout 2019, the outflow of refugees and migrants from Venezuela continued. In about mid-2019, several states in the region began to implement visa (new or renewed) requirements for entry which has resulted in changes to the general planning assumptions for 2020. This may result in refugees and migrants undertaking new and potentially more risk-prone routes to irregularly transit or access destination countries and coping strategies to access basic services, seek protection and livelihood opportunities.

By December 2020, it is estimated that there will be approximately 5.5 million refugees and migrants from Venezuela in the different countries of intended destination in the region. Relatedly, there will likely be a substantial increase in those undertaking pendular movements, primarily between Venezuela and Colombia. Around 4.2 million Venezuelans have a Border Mobility Card (TMF, by its Spanish acronym), issued by Colombian authorities to allow for temporary stay in Colombia.

Population projection in destination



Efforts to quantify and target the response for the diverse population groups and their needs reflected in this Plan have been challenging for RMRP partners and national authorities. This has largely been due to the high degree of mobility and sheer scale of the outflow in the last few years. The groups referenced in this Plan and for whom people in need and target estimations were derived, include:

- In-destination: Individuals who have left their usual place of residence with the intention to remain in a host country.
- Pendular movements: temporary and usually repeated population movements, which may represent a movement pattern between Venezuela and another country.
- Returnees: individuals who have left Venezuela and return to their country of origin.
- In-transit: individuals that have left Venezuela and are transiting through a country prior to entering their intended country of destination.
- Host community: a population in a country of intended destination that share the same geographical location with refugees and migrants from Venezuela and/or are in need of access to the same services.

In addition to the diverse trajectories being undertaken by refugees and migrants from Venezuela throughout the region, there is an increasing recognition that the number of people in an irregular situation might rise in 2020 and this will be a primary concern for National and Sub-regional Inter-Agency Coordination Platforms (“hereinafter National Platforms” and “Sub-regional Platforms”). Efforts on the part of national authorities and RMRP partners to quantify and understand their needs continue despite the often-invisible nature of these groups. For the purposes of RMRP planning, irregular movements are comprised of two broad categories:

1. Those who have not entered a host country through regular border points. This population may not have the required documentation or resources to do so.
2. Those who entered a country through regular means and their regular status has been impacted due to various factors that may include but are not limited to expired visas or permits.

Both these groups are at increased risk of human trafficking, smuggling and face other protection-related risks.

Some 3.82 million individuals in destination, 500,000 in pendular situations and 350,000 returnees will be in need of assistance in 2020.

This estimate of people in need (PiN) includes those in destination, those undertaking pendular movements, and returnees. Of these, 2.47 million in destination, 380,000 in pendular situations and 260,000 returnees are directly targeted by this Plan. In addition, it is also estimated that almost 900,000 host community members will be targeted with some form of assistance, including particularly vulnerable host community members. RMRP partners analyzed their operational and outreach capacities to estimate targets based on a realistic assessment for scaling up the response in 2020.

Over 400,000 refugees and migrants in-transit will be targeted for assistance in 2020, the majority along the Andean Corridor (Chile, Colombia, Ecuador and Peru). Those in-transit are

⁰² For the purposes of this document, any reference to “refugees” shall be read to include asylum-seekers.

presented apart as they will eventually form part of in-destination, pendular or returnee population groups in host countries. This population, and especially the most vulnerable among them, will require assistance and protection throughout their journey. Therefore, a projection of this population, at country level, will be added to a countries' planning figures and targets when relevant.

The population projections, estimations of PiN and targets were calculated country by country, based on analyses of needs, collected through various assessments and data sources, including government-led exercises. They were validated during dedicated workshops by all partners and where possible, with government authorities.

The various population groups included in this Plan reflect the diversity of movements and types of assistance required. These population groups provide an overview for planning purposes. However, for the purposes of RMRP 2020, appealing partners were engaged in substantive discussions on the diverse needs of vulnerable groups. These may include women, children, elderly, indigenous and Lesbian, Gay, Bisexual, Transgender and Intersex (LGBTI) communities, who face considerable risks while on the move and in host countries.

Host governments involved in the Quito Process have identified and will work towards developing a common information system as a key output to ensure that the diverse population groups and individual needs are recorded, and protection safeguards are put in place. Such an integrated system would allow for improved delivery of assistance by providing access to disaggregated data and the ability to analyze trends over time and between countries.

PLANNING ASSUMPTIONS IN 2020

During 2019, and despite the continuous outflow from Venezuela, policy changes, as well as other factors, resulted in changes to overall population projections and planning assumptions for 2020. In the second half of the year, along the Andean Corridor, a decrease in the number of entries of refugees and migrants into Ecuador, Peru and Chile was noted following the introduction of new or renewed entry requirements. Some RMRP partners observed an increase in the number of irregular entries along some borders and transiting along dangerous routes.

This Plan envisages that the majority of refugees and migrants from Venezuela will continue to arrive in Colombia, with an increased proportion of them remaining in the country. When compared to 2019, the rate of regular entries into Ecuador, Peru, Chile and to a lesser extent to countries of the Southern Cone may decrease following the new entry requirements. Brazil will continue to receive a substantial number of refugees and migrants and the Caribbean, Central America and Mexico will also see a continuous number of arrivals, either directly or through secondary movements. Some key assumptions for RMRP 2020 include:

- Refugee and migrant outflows from Venezuela will continue in 2020 albeit with fluctuations at different times of the year;
- The number of people undertaking pendular movements will increase, however many may remain in host countries for longer periods;
- States sharing a common border with Venezuela will largely continue to allow refugees and migrants from Venezuela access to their territories, provide access to regularization mechanisms and, in line with the principle of non-refoulement, will continue providing access to asylum;
- States will continue their efforts to provide pathways for residency and regular stay, generally without restrictions, nor limitations to access basic services. However, in some states, documentation requirements and high application fees may hinder access to regular stay;
- Countries will require continued institutional strengthening considering overstretched services and capacities due to the scale of current and foreseen arrivals;
- Numbers of asylum-seekers will continue to increase albeit with variations in application across countries. Some states will apply the expanded regional refugee definition of the 1984 Cartagena Declaration on Refugees, while others will apply the refugee definition of the 1951 Convention relating to the Status of Refugees and its 1967 Protocol;
- The number of Venezuelans in an irregular situation will continue to rise and thus create barriers to accessing rights and services in receiving countries;
- The needs and different aspects of vulnerabilities of refugees and migrants from Venezuela, not only as a result of the relevant status, will evolve in 2020. Joint assessments with RMRP partners and authorities will be scaled-up;
- Overstretched national capacities, as well as the economic and political difficulties in some host countries may adversely affect refugees and migrants from Venezuela;
- Women and girls will continue to be disproportionately affected in this crisis, especially in terms of risks of Gender-Based Violence (GBV) and human trafficking;
- Registration and profiling systems will be instituted and/or strengthened, and supported;
- The ability of refugees and migrants to return to Venezuela on a permanent basis is not envisaged in the short or medium term;
- More States will continue to recognize growing risks of statelessness and, in conjunction with RMRP partners, take political and legislative steps to prevent and reduce these risks;
- States will continue to address discrimination and xenophobia, including through awareness campaigns, strengthened media relations and outreach, and social media activity.

International protection considerations, according to the refugee criteria contained in the 1951 Convention and its 1967 Protocol and the 1984 Cartagena Declaration, have

become apparent for an increasing proportion of those leaving Venezuela. Moreover, the situation also affects refugees and migrants in Venezuela, many of whom are returning to their country of origin, as well as third-country nationals living in Venezuela, stateless persons, and host communities.

CENTRALITY OF PROTECTION

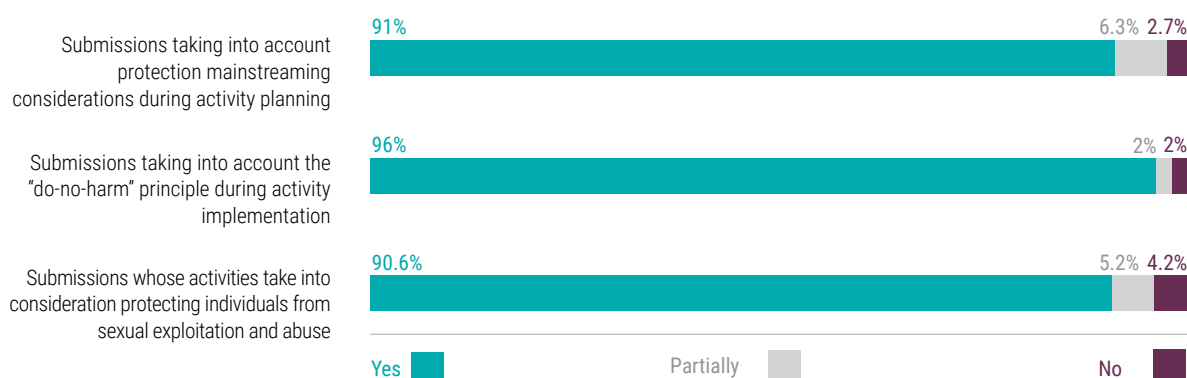
The precarious conditions that refugees and migrants from Venezuela face while transiting across the region or after reaching their country of destination make them vulnerable to protection risks, including gender-based violence, human trafficking, smuggling and other forms of exploitation and/ or abuse. The lack of access to documentation also leaves them susceptible to incidents of detention and denial of basic services such as medical care.

Centrality of protection is an integral part of the RMRP in 2020, promoted at all stages of the RMRP’s planning cycle, with all activities aiming to support people in need with full respect for the rights of the individual. All interventions will aim to promote and ensure the safety, dignity and rights of the affected populations, and reduce or mitigate exposure to additional risks, applying the “do-no-harm” principle. To this end, the Regional Inter-Agency Coordination Platform for Refugees and Migrants from Venezuela (hereinafter “the Regional Platform”) will take concrete steps to ensure that each sector integrates protection-related components, such as a protection risks analysis of the specific needs of different population groups, barriers to people’s access to assistance, the need to address inequalities or protection threats (i.e. violence, exploitation, deprivation, or neglect), ensuring the safety and dignity of affected people.

As part of its commitment to enabling a protective environment for refugees and migrants from Venezuela, the Regional Platform will continue to raise awareness on humanitarian and protection issues faced by refugees and migrants from Venezuela, monitors and mitigates/addresses protection risks, and undertakes access analysis and security risk management. The objective will be to empower refugee and migrant communities, families and individuals on how to address protection concerns, build partnerships with all key actors, and strengthen operational capacity to respond, particularly of national and local partners.

The vulnerability of the refugees and migrants from Venezuela and the limited access to assistance and protection services, due to their high mobility, exacerbate the risk of sexual exploitation and abuse and sexual harassment at the workplace. Effective and integrated complaint and referral mechanisms at national, regional and cross-border level are therefore required to prevent these types of violence and respond to the needs of victims in a timely manner. Under the umbrella of the Protection sector, a regional toolkit for the Protection against Sexual Exploitation and Abuse (PSEA) and Sexual Harassment and an Inter-Agency Community-based complaint and referral mechanism were developed and launched in 2019. The Regional Platform is fully committed to the implementation and further expansion of these procedures to ensure access to protection for refugees and migrants from Venezuela and accountability of perpetrators.

Percentage of RMRP submissions including Centrality of Protection:



ACCOUNTABILITY TO AFFECTED POPULATIONS

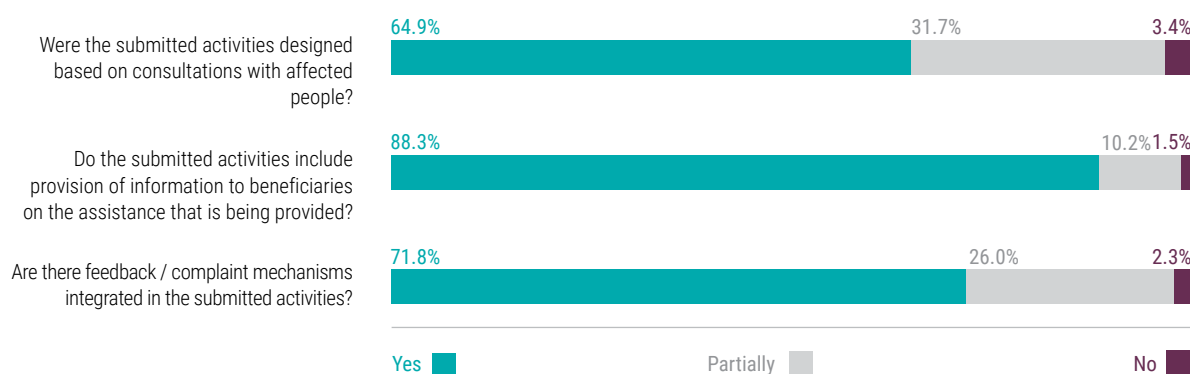
Putting people at the centre of the humanitarian and development actions and strengthening Accountability to Affected Populations (AAP) in need are priorities for the regional response under the RMRP in 2020.

The systemwide approach on AAP ensures that all RMRP partners commit to including AAP as a key aspect of their response, guaranteeing ownership of the response to affected populations by considering their perspectives, priorities and needs at all stages of the RMRP, including the design, implementation, monitoring and reporting phases.

In the framework of this Plan, among the 137 appealing organizations, almost two thirds designed their activities based on consultations with affected people.

Moreover, the RMRP ensures that partners measure the adequacy of their interventions and that they can address any concerns and/or complaints in a timely and adequate manner through the inclusion of activities that improve communication and two-way information sharing, as well as more meaningful participation of host community members and refugees and migrants from Venezuela. In this regard, 66 per cent of the partners completely integrated feedback and complaint mechanisms in their planned activities and almost 24 per cent did so partially.

Some of the feedback and complaint mechanisms adopted under the RMRP include the provision of support to the implementing agencies in adopting Codes of Conduct and AAP principles to be promoted among local actors; trainings of regional responders on PSEA and Codes of Conduct; the design, validation and implementation of a training of trainers (ToT) package on AAP, targeting members of national and sub-regional platforms; and the documentation of AAP and Communication with Communities-Communication for Development (CwC/C4D) best practices and lessons learned in priority countries to make them available for Platform participants.



CAPACITY BUILDING AND SUPPORT

The capacity building efforts under this RMRP will be informed by the capacity needs identified by the sectors, as well as through direct requests by partners, host governments and as agreed through multilateral fora, for example through the Quito Process. To this end, RMRP actors will explore ways to undertake coordinated capacity building of national and local partners by pooling resources, joint planning, and sharing knowledge and specialized skills.

Overarchingly, capacity building efforts will be strengthened, along with partnerships and coordination, to reinforce the skills and technical capabilities and competences of host government institutions and authorities, as well as of partners (including civil society and faith-based organizations, the private sector and members of the community) to respond to the humanitarian, protection and socio-economic integration needs of refugees and migrants from Venezuela and affected host communities.

Therefore, and in order to support and complement the efforts of host governments, including their institutions and authorities, to address the needs of refugees and migrants, a particular focus of the capacity building activities of RMRP actors will be on:

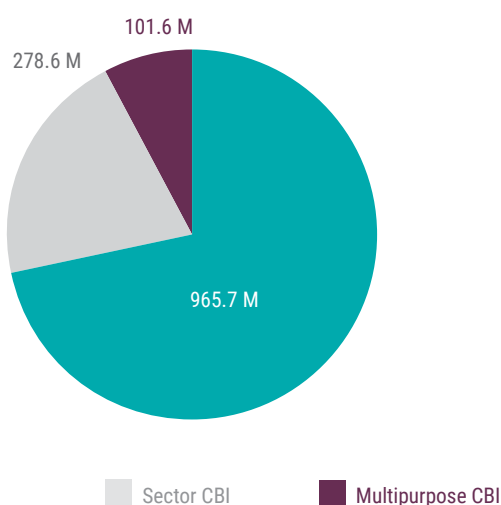
- Technical and financial support to increase the capacities of the national migration authorities and national refugee commissions (CONARES, by their Spanish acronym) on registration, regularization documentation, asylum; as well as on the recognition of studies/titles.
- Technical support and specialized workshops on child protection and how to best respond to cases of gender-based violence, exploitation, abuse and transnational crimes such as, human trafficking and smuggling.
- Contingency preparedness and response capacities of national and local authorities, especially in the Andean Region.

Additional sector-specific capacity building efforts will be implemented in the areas of education, health, protection and integration, among others, pursuant to commitments under the Quito Plan of Action⁰³ to improve concerned host governments' expertise in responding in large-scale mobility contexts, especially in terms of management, gender- and age- sensitive approaches, interculturality and the development of protocols and standard operating procedures (SOPs). Also, infrastructure capacities will be improved and/or established, especially in border areas and settlements with high concentrations of refugees and migrants from Venezuela.

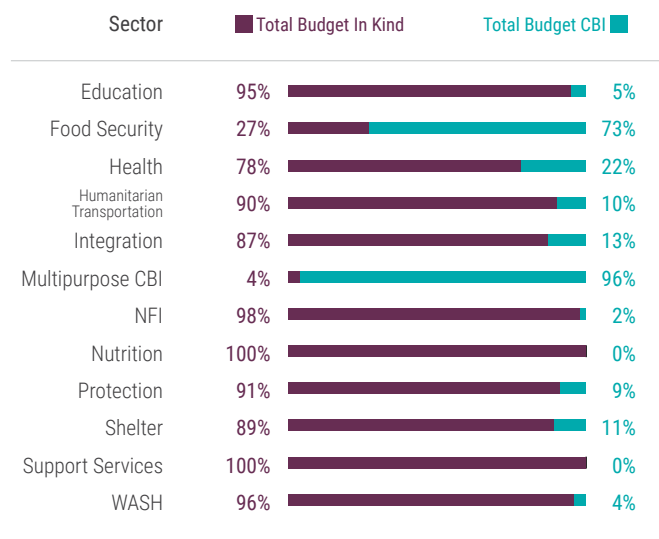
⁰³ See hereto: Quito Plan of Action, Commitment 3.2.1.b on establishing initiatives aimed at favouring the Venezuelan population in the areas of health, education, work, access to justice and recognition of prior learning.

RESPONSE MODALITIES: CASH-BASED INTERVENTIONS

In 2020, an estimated USD 380 million in assistance is expected to be disbursed through Cash-Based Interventions (CBI) as per the current RMRP planning (28 per cent of the total financial requirement of the RMRP). CBI continues to be recognised as one of the most significant areas of innovation in humanitarian assistance, with huge potential to meet more needs, more efficiently and more effectively. Many humanitarian actors across the region have made public commitments to increase its use under this Plan through the distribution of cash or vouchers in support of sectorial interventions, and to a lesser extent through Multi-Purpose Cash (MPC) grants that aim to cover the basic needs of refugee and migrant populations.



RMRP partners and host governments across the region recognize that the profile of refugees and migrants from Venezuela is increasingly more vulnerable; requiring assistance across multiple sectors, particularly Food Security and Nutrition, Health, Education, Shelter, Water, Sanitation and Hygiene (WASH) and Protection, as well as Socio-Economic Integration. In this evolving context, multi-purpose cash assistance is often considered as the most cost-efficient and cost-effective way to meet multiple needs of these crisis-affected populations, offering a maximum degree of choice, flexibility and dignity, while contributing to the local economies of host countries. However, in order to facilitate the implementation of effective and large-scale multi-purpose cash assistance programmes across this region, National/Sub-regional Platforms and RMRP partners implementing CBI interventions need to engage in increased levels of coordination, among themselves and with the relevant governmental entities within the impacted countries. They also require additional technical support in the design, implementation, monitoring and evaluation of these types of interventions as well as in the establishment of all response processes related to this assistance modality.



In order to ensure greater levels of complementarity and coherence between the multiple sectorial CBI interventions considered under the RMRP, and to facilitate the scale-up of effective multi-purpose cash assistance in the region, the Regional Platform recognized the need to create a Regional Working Group on CBI, which aims to support national/sub-regional platforms as well as existing cash working groups at country-level. However, additional financial and technical resources are required in order to strengthen coordination and collaboration between RMRP partners, and to provide advocacy related and technical support to national/sub-regional platforms, governments and other stakeholders on the use, tools, design, implementation and monitoring and evaluation of multi-purpose cash assistance.

Thus, the main priorities and response strategies will focus on the provision of guidance to harmonize a common understanding of multi-purpose cash and how it can maximize efficiencies, addressing the basic needs of refugees and migrants from Venezuela, and complementing other interventions, including through quantification of basic needs (Minimum Expenditure Basket - MEB) through an informed multi-sectoral approach and market assessment tools, identification and use of specific criteria for the transfer value calculation and the application of certain payment modalities/mechanisms more appropriate to the different countries' context.

Additionally, it is fundamental for all stakeholders implementing or supporting CBI to have a clear idea of the planned, on-going, and executed cash transfer programmes. Therefore, it is prioritized to rely on a geographical mapping of multi-purpose programming responses in the region including design and operational programme features, as well as assess the gaps and opportunities to define technical assistance needs. This mapping will be complemented by the collecting and documentation of existing targeting methodologies and approaches used by the national platforms related to multi-purpose CBI in order to provide support through harmonization initiatives.

The promotion of knowledge sharing and exchange of information on operational and technical aspects of multi-purpose cash assistance through regional events, webinars,

information management materials, sharing of lessons learned and best practices, and promotion of common key messages for community engagement and accountability are integrated in the Regional Working Group on CBI as a strategic line of action, fostering local networks for the exchange of key information and peer-to-peer support on common challenges.

The use of multi-purpose cash assistance for refugees and migrants from Venezuela through national social protection systems is the ultimate goal for any cash-based intervention, fostering engagement of government partners with the national and sub-regional platforms for the inclusion of these vulnerable groups as part of their population, along with host communities, and providing assistance according to needs, not to status and nationality.

HUMANITARIAN-DEVELOPMENT NEXUS

This regional Refugee and Migrant Response Plan is based on the common understanding of a multitude of actors that are pursuing humanitarian and development objectives in parallel to comprehensively and sustainably respond to the broad range of needs of refugees and migrants from Venezuela, as well as affected host communities. In adhering to the concept of the Humanitarian-Development Nexus, the RMRP aims to address severe and critical humanitarian needs, while activities targeting structural and economic challenges in affected Latin American and Caribbean countries as a result of the outflow of up to 5.5 million refugees and migrants from Venezuela, will be addressed by development-oriented assistance.

To enable complementarity between humanitarian action and development support, the Regional, Sub-regional and National Platforms will increase their joint efforts to explore ways for humanitarian and development partners to better coordinate assistance. This approach is in line with the UN Secretary-General's Agenda for Humanity, the UN Development System Reform, the Grand Bargain global commitments and the principles of the New Way of Working, calling for collective and coherent support to reduce people's needs and vulnerabilities, based on comparative advantages of 137 humanitarian and development RMRP actors across the region.

AGE AND GENDER

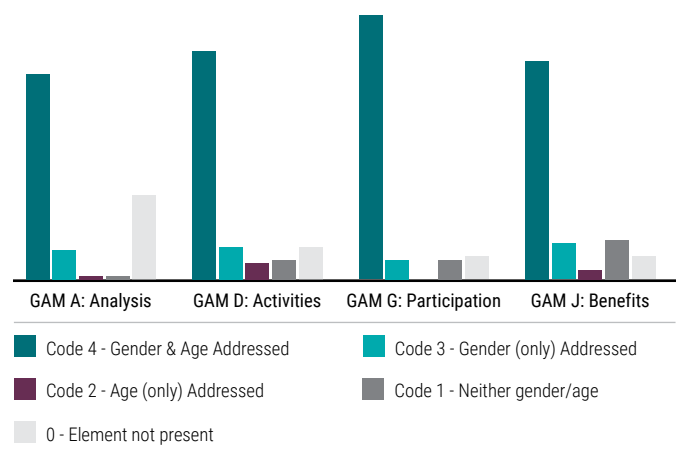
Given the scale of the movements of refugees and migrants from Venezuela and their differentiated impact on gender and age groups, especially women, girls and boys, the Regional Platform encourages partners to integrate age and gender considerations as key components in all phases of the response. Available RMRP 2020 Inter-Agency Standing Committee (IASC) Gender with Age Marker (GAM)⁰⁴ data

demonstrates the response actors' considerable attention to gender- and age-related issues. Yet, while strong capacities of RMRP actors exist to ensure gender and age-sensitive programming, strengthening capacities of less experienced partners across the region will be a priority in 2020.

In the planning phase, 80 per cent of appealing organizations submissions included the Gender with Age Marker, 99 per cent of them reflected their commitment to gender and age inclusion as an essential part of programming for women, girls, men, boys and LGBTI persons. Most of the submissions (94%) aim to mainstream gender equality, while 68 per cent plan to respond to both gender and age differences (Code 4), 11 per cent intend to address gender but not age (Code 3), and 21 per cent appear unlikely to be gender or age responsive (Codes 2, 1, 0).

The GAM examines four program elements in project design: analysis, activities, participation and benefits. In all of these areas, more than two thirds of organizations intend to address both gender and age differences. For 39 per cent of organizations, their context analysis is based on needs; about 35 per cent say they consider needs, social/gender roles and dynamics; and 26 per cent have not yet completed an analysis. Over one third of the appealing organizations demonstrate a good analysis of gender and/or age inequality, comparing conditions or barriers for different groups.

Gender & Age in Key Action Elements (Codes) RMRP 2020 Design Phase



How the affected population participates differs widely among partners' responses. While 23 per cent of submissions state that affected people will be involved in all aspects of project management, the majority of activities involve beneficiaries in assessing needs (77%), several expect them to be involved in activity design (58%) and/or assistance delivery (56%), and some 35 per cent involve beneficiaries in activity review and revision.

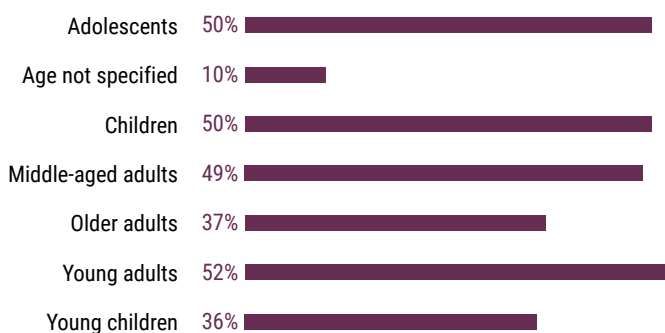
⁰⁴ 137 appealing organizations filled in 275 GAM proposals. However, some organizations did not finish successfully the GAM due to factors such as, for example, not to submit the form after they got the code and the reference number, which evidence organizations' capacities should be strengthened in this matter. Some of the appealing organizations submitted the GAM proposals both by one or more countries and at the regional level at the same time.

Who Participates? RMRP 2020 Planning Phase

Gender



Age



ENVIRONMENT

Incorporating an environmental perspective into the assessment of humanitarian and development needs and the design and delivery of the response limits the generation of new disaster risks caused by environmental degradation and its impact, mitigates the risk of conflict with local communities and supports partners to better implement the 'do-no-harm' principle. The environmental impacts of the refugee and migrant from Venezuela outflow in Latin America and the Caribbean are varied and complicated. Much depends on whether the country shares a border with Venezuela, or it tends to be a transit or destination country, where people are concentrated within the country and the kind of response developed.

There is a link between environmental factors and xenophobic or discriminative incidents, as some sought to justify them through various narratives, including a perceived impact of the situation on the environment - pollution, environmental degradation or the supposed strain on environmental health and sanitation services. The response itself has contributed to some of these factors, for example, through the widespread distribution of materials and food with large volumes of packaging, problematic water and sanitation systems and insufficient energy and fuel solutions for refugees and migrants.

Integrating environmental considerations into regional actions is challenging for many partners, since they often have more of an advocacy or support focus, impeding partners to identify tangible actions with environmental benefits.

However, many regional activities seek to monitor conflict risks arising from environmental concerns. The education sector is one of the sectors which most consistently incorporates an environmental perspective, integrating environmental education into other education and sensitisation activities.

Given the diversity of contexts and response activities in the different countries and across the 289 submissions by RMRP partners across the region, further human resources will be required in affected countries to scale up environmental support.

PARTNERSHIP AND COORDINATION

FROM **95** TO **137** PARTNERS

Significant response capacities and resources are being deployed across the region, foremost by the affected Latin American and Caribbean governments, leading at national levels and seeking common solutions at the regional level, most notably through the Quito Process as the main regional intergovernmental forum concerning the impact of the outflows of refugees and migrants from Venezuela across the region. Such efforts are also supported by the international community.

The Regional Refugee and Migrant Response Plan 2020 is intended to complement the interventions of national and local government authorities, supporting them to fulfil their responsibilities by investing in areas where specific assistance and expertise is required, or where the governments' own response capacities are overwhelmed.

This Plan is therefore developed and to be implemented in line with the 19 September 2016 New York Declaration for Refugees and Migrants (New York Declaration). In this document, it was stated that the protection of refugees and migrants, and support for the countries that shelter them, are a shared international responsibility – to be borne equitably and predictably. As a result, activities under the RMRP bridge the nexus between a humanitarian emergency response and the longer-term perspective to build resilience at the individual beneficiary level as well as at the institutional level.

In 2020, the RMRP is the result of field-driven planning, bringing together 137 appealing organizations, in consultation with host governments, civil society and faith-based organizations, local communities, donors, as well as the refugees and migrants themselves.

The coordination mechanism for such a largescale response combines the respective mandated responsibilities and expertise of local governments, United Nations (UN) Agencies, international and national Non-Governmental Organizations (NGOs), civil society and faith-based organizations to ensure

robust humanitarian, protection and integration responses to the needs of refugees and migrants from Venezuela, as well as of impacted host communities. It also ensures that humanitarian and human rights, refugee conventions and laws, the “do no harm” principle are upheld by all actors.

Drawing on experiences from other mixed refugee-migrant displacement situations around the world, the coordination at regional level between partners is convened by the International Organization for Migration (IOM) and the United Nations High Commissioner for Refugees (UNHCR), and managed through an inclusive, accountable and overarching Regional Platform which steers and monitors the operational response in support of refugees and migrants from Venezuela who have left and continue to leave the country, seeking access to basic rights and services, protection, as well as self-reliance and socio-economic integration.

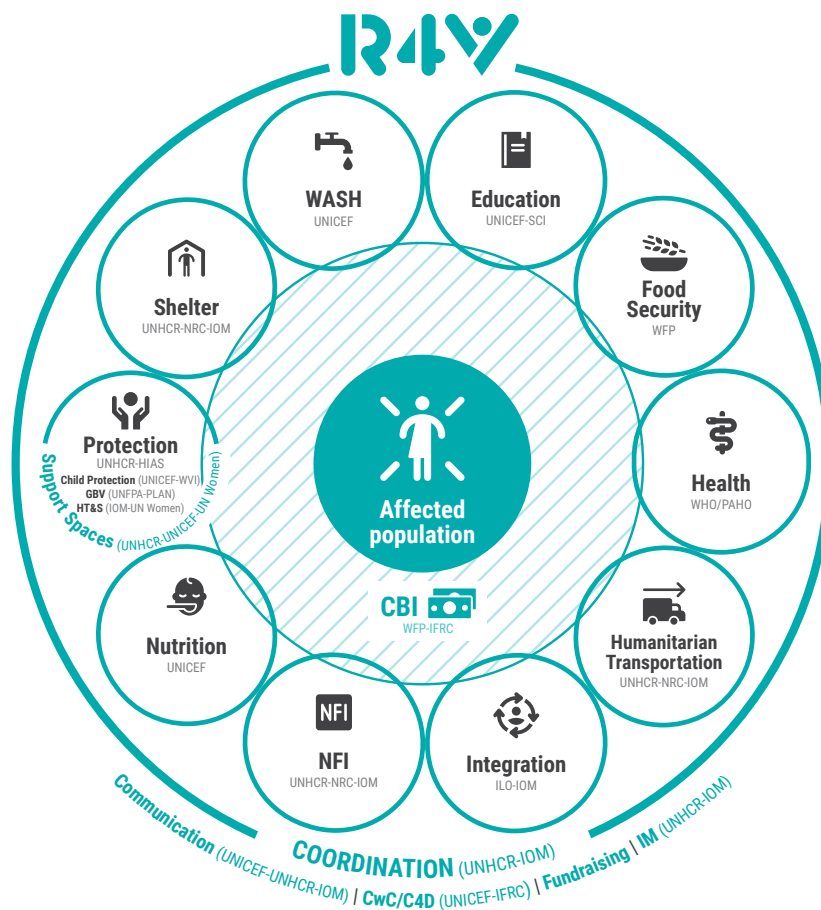
At national and sub-regional levels, the Regional Platform is complemented by local coordination mechanisms (National and Sub-regional Platforms), in close collaboration with host governments. Dedicated National and Sub-regional Platforms, charged with the operational coordination and implementation of the RMRP, are in place in Brazil, Chile, Colombia, Ecuador and Peru - at the national levels - and in the Caribbean, Central America & Mexico and Southern Cone - at sub-regional levels. Their configuration is based on each situational context and the operational capacities of governments and RMRP partners, taking into account existing coordination structures.

Details on country specific coordination arrangements, operational updates and responses, analysis on movements and other related matters are available on the R4V web portal and country-level subsites (<https://r4v.info>).

To ensure that the humanitarian, protection and integration needs of refugees and migrants from Venezuela and of impacted host communities are identified, planned for and met, sector groups focusing on education, food security, health, humanitarian transport, integration, non-food items (NFI), nutrition, protection (including child protection, gender-based violence and human trafficking and smuggling), shelter and WASH are established at regional and national/sub-regional levels⁰⁵. A comprehensive monitoring and reporting framework is part of the RMRP, and will report on progress per country, disaggregating target populations by age and gender.

By participating in this Plan, organizations commit to engaging in Regional, Sub-regional and National coordination mechanisms, adhering to agreed standards, and reporting on their achievements and on funds received through the RMRP framework. Monitoring and reporting procedures are agreed in consultation between the regional, sub-regional and national levels, and resulting data is published on the R4V web portal, while continuously updated financial information is available on the website of United Nations Office for the Coordination of Humanitarian Affairs (OCHA) Financial Tracking System (FTS). (<https://fts.unocha.org/appeals/726/summary>).

Regional sector structure RMRP 2020



*These are all of the active sectors under the RMRP. Sector lead organizations only represent regional-level leadership.

**Fundraising leadership to be confirmed.

05 They are complemented by working groups on multisectoral cash-based interventions, inter-sectoral coordination, information management, communication and fundraising.

EDUCATION



*The figure of People in Need and People Targeted does not include host communities

PEOPLE IN NEED*

1.42 M

PEOPLE TARGETED*

0.24 M

FINANCIAL REQUIREMENTS

\$ 57.1 M

PARTNERS

45

Regional dynamics / Needs

Most of the governments in the region are working towards identifying solutions and responding to the education needs of vulnerable refugees, migrants and host communities impacted by the crisis in Venezuela, including registration systems and documentation of refugees and migrants from Venezuela, and coordinated work through the Quito Process. For the most part, refugees and migrants from Venezuela in the region have been extended access to formal education systems. It is important to note that at the regional level as outlined in the Roadmap of the Buenos Aires Chapter of the Quito Process, the governments are working towards establishment of a working group that will focus on best practices on academic title recognition and seek regional harmonization. A good example in the region has been the Government of Argentina's simplification of title validation as well as provision of preferential treatment to Venezuelan nationals in administrative procedures for recognition of prior obligatory education. However, there are still challenges in the region relating to the recognition of prior learning, including administrative ones as related to accreditation, certification and validation processes; documentation requirements, including regular migratory status in the country; instances of discrimination and xenophobia, as well as a lack of financial means, which continue to impede broad and regular access. In parallel, and despite efforts of national governments, ministries of education of impacted host countries face numerous challenges, including providing the required facilities and teachers and flexible educational models to accommodate refugee and migrant children.

Scope of the response

The regional Education sector will focus its response on supporting refugee and migrant children and adolescents, refugee and migrant children and adolescents with specific and diverse needs who due to disability, ethnicity, or acute vulnerability require special attention with their education needs, are of particular concern to the regional Education sector. The response of the Education Sector will also have university students and graduates who need their existing qualifications recognized, validated and accredited in order to continue with their academic studies and secure employment as a priority. The Regional Education Sector (RES) will provide support to the ministries of education across the region to address challenges related to scale responses. These include

scale-relevant protocols, guidelines and resources on inclusion of children and adolescents from Venezuela in national education systems, and how to ensure that the response to the influx situation contributes to system strengthening so that local children and youth also benefit. The Regional Education Sector will continue supporting the ministries to operationalize their protocols on accreditation, certification and validation, including close collaboration with Convenio Andres Bello and Central American Educational and Cultural Coordination of Central American Integration System (CECC/SICA) in recognition, validation and accreditation of studies for refugees and migrants from Venezuela in the region. The RES will also continue supporting the efforts of the Quito Process in ensuring the access to education to migrants and refugees. Additionally, partners will provide technical assistance to the statistical units of the ministries of education to systematically collect and incorporate data on refugee and migrant children into education management information systems, and to improve school records systems. The RES will also continue its work at policy levels, in policy dialogue meetings with government officials from the region on key areas of common interest, such as protocols to ensure and regularize the access of migrant and refugee children, with particular attention to girls, and equivalency, recognition and validation.

Response strategies and priorities

- Support will be provided to ministries of education to strengthen sector coordination at national and local level, especially in border areas and in areas where refugees and migrants are settling.
- An information and communication package will be developed to inform families from Venezuela about the process of inclusion and regularization in the various national education systems.
- Regional guidelines, tools and teacher trainings will be developed for education actors (including for school directors and teachers) on the inclusion of refugee and migrant children and adolescents into national education systems, and strategies will be developed to support the ministries of education to strengthen teacher capacities in supporting refugee and migrant students as well as those with particular needs.

- Mechanisms will be identified to facilitate and support the flexibilization, certification, equivalency process, recognition, and transfer of academic achievements from the country of origin to the host country system.
- Support will be provided for development of education protocols to ensure access of children to national education systems.
- Technical assistance on gender equality and empowerment will be provided to strengthen gender mainstreaming within the education sector response.
- Guidelines and technical assistance will be developed for countries to strengthen their capacity to provide early childhood development services for young refugee and migrant children, and establish coordination mechanisms.
- A regional study on the integration of children from Venezuela into the school system in receiving countries.
- Regional mapping of non-formal educational and vocational opportunities for out-of-school Venezuelan adolescents in receiving countries.

FOOD SECURITY



*The figure of People in Need and People Targeted does not include host communities

PEOPLE IN NEED*

2.59 M

PEOPLE TARGETED*

1.42 M

FINANCIAL REQUIREMENTS

\$ 211.87 M

PARTNERS

41

Regional dynamics / Needs

As the flight and outflows of refugees and migrants from Venezuela persists, and with increasing challenges for refugees and migrants from Venezuela to enter some of the countries in the region, the majority of the refugee and migrant population in need of food assistance in 2020 will continue to be in Colombia. Key food vulnerabilities are mainly found along the border areas, particularly in Colombia, Ecuador and Peru, and to a lesser extent in Chile and Argentina. For 2020, planned food security related activities in the region will include the distribution of hot meals and food kits for caminantes and/or those in transit, as well as capacity-building on farming techniques for refugees and migrants from Venezuela and affected host communities in rural areas. Food insecurity has increased from 2018 to 2019, a trend which is expected to continue in 2020⁰⁶. This is, for example, the case for refugees and migrants crossing into Peru in 2019, where 24 per cent reported not having consumed any food the day before, compared to 15 per cent having reported so in 2018⁰⁷.

Scope of the response

Food security sectors at the national/sub-regional levels will activate, where deemed required based on the needs of refugees and migrants in each specific country. Colombia, Ecuador and Peru, the three countries which present the largest food insecurity in the region, will be considered as a priority for support from the regional point of view due to the distinct dynamics within each of them (people in transit, people engaged in pendular movements, people in destination, people living in the streets or in shelters) and the diverse assistance modalities which they require. Food security responses in 2020 are expected in Brazil, the Caribbean, Central America, Chile, Colombia, Peru and the Southern Cone.

Some of the most acute needs across the region are presented by refugees and migrants living in shelters, in the streets and among those having just arrived at a host/transit country. Refugees and migrants engaged in pendular movements between Venezuela and Colombia will continue to require consistent access to food and nutritional support as a life-saving activity. Many refugees and migrants from Venezuela are affected by the quantity, quality and portion size of their meals, in some cases spending days without

eating. Reports show that the first weeks in a host country are the most difficult for people to access food, with food insecurity rates slightly decreasing as people remain in one location⁰⁸. There are not enough Support Spaces, particularly along borders, for vulnerable people to receive meals and nutritional support. Overall, there is a need to generate approaches based on evidence as, in many of the countries in the region, there is a lack of primary data on food security rates of refugees and migrants from Venezuela.

Response strategies and priorities

At the regional level, coordination and programme information management will identify gaps to ensure harmonized planning, monitoring and reporting, and close collaboration with national sectors. The regional Food Security sector will gather relevant data from national-level sectors; provide information management support, as well as monitoring and reporting cohesion; and organize regional workshops for national and regional focal points on topics such as the methodology of food security assessments and on the progress of the response.

The regional Food Security sector will also support national sectors' resource-mobilization and advocacy efforts for food security activities. Inter-sectorial coordination will also be crucial to promote a comprehensive food security response involving aspects from WASH, Protection, Nutrition and other sectors, as relevant. The sector will support with relevant guidelines on gender and Accountability to Affected Populations (AAP), promoting the collection and analysis of disaggregated data when feasible.

National and sub-regional Food Security sectors will support partners to improve their capacity to assist refugees and migrants to access nutritious food. Priority populations are those with the highest rates of food insecurity, most of whom are found in shelters and border areas. Sector activities include cash-based assistance, support with agricultural inputs, packed meals (kits), creating awareness on healthy nutritional habits, capacity-building on sustainable farming techniques.

06 Based on "The Migration Pulse: Venezuelan migrants in Colombia, Ecuador and Peru" - <https://docs.wfp.org/api/documents/WFP-0000107159/download/>

07 Based on a 2019 remote food security assessment led by food security partners in Peru.

08 Based on WFP EFSAs in Colombia (September 2019) and Ecuador (April 2019). Main findings highlighted in "The Migration Pulse: Venezuelan migrants in Colombia, Ecuador and Peru"

HEALTH



*The figure of People in Need and People Targeted does not include host communities

PEOPLE IN NEED*

3.52 M

PEOPLE TARGETED*

1.71 M

FINANCIAL REQUIREMENTS

\$ 221.27 M

PARTNERS

64

Regional dynamics / Needs

Throughout 2019, countries in Latin America and the Caribbean have witnessed a growing number of refugees and migrants from Venezuela reaching their territories with increasing health needs, be it at border areas (especially for the over four million of Venezuelans engaged in pendular movements at the border with Colombia), or in urban centres that host higher concentrations of refugees and migrants. The health system in Venezuela has needs and limitations, so many with ailments leave looking for better access to medical treatment and medicines in other places. Their situation worsens because they are frequently impacted by the journeys, many times walking across several transit countries (caminantes), before reaching a destination. Of particular concern remain groups of migrants and refugees with specific needs, including pregnant and lactating women, children, elderly, persons with reduced mobility, persons with HIV/AIDS⁰⁹, and the LGBTI community.

Driven by many of the above, and facing common situations, at a regional intergovernmental level, countries engaged in the Quito Process have initiated some common activities in the field of health, including with a focus on assistance to persons with HIV/AIDS and the introduction of a common regional vaccination card, supported by RMRP partners at the regional level.

The regional Health Sector has identified several needs related to the health needs of refugees and migrants from Venezuela, as well as their host communities. It is of particular concern the sustainability of actions being implemented by countries to respond to (a) emergency health care, accidental injuries, acute infections such as respiratory infections and diarrhoea, increased prevalence of infectious diseases such as measles, diphtheria, malaria, skin infections, hypothermia/burns; (b) communicable, vector-borne diseases and HIV/AIDS-Sexually transmitted infections (STIs); (c) interruption of treatment and care for non-communicable diseases like tuberculosis, cardiovascular events, diabetes and hypertension; (d) maternal, new-born and child health, sexual and reproductive health, pregnancy and delivery-related complications; (e) nutrition disorders especially in children under five, pregnant and lactating women and elderly; and (f) drug abuse, alcoholism, exposure to violence, and psychosocial disorders.

Additionally, institutional arrangements to provide access to comprehensive and high-quality health services are highly needed, including (a) the elimination of barriers of access health services in the countries of destination and during transit, due to cultural, gender, age and language or bureaucratic reasons (incl. documentation and status requirements); (b) provide direct primary health services when/ if needed by filling the medical gaps, without intending to replace existing delivery of health services and medical supply chain mechanisms; (c) addressing the high cost of healthcare services, specially of specialized health services, as well as the overcome the lack of capacity to affiliate with local financing plans especially for women, adolescents, girls, boys and people with disabilities; and (d) close collaboration to improve health services in border areas to protect the refugee and migrant population, especially women, girls, children and adolescents, considering gender, age and diversity approaches, during transit through borders.

Inter-sectorial and development of multi-country partnerships, networks and frameworks for refugees and migrants to be included in the policy design and implementation processes to address social determinants of health considering gender, age and diversity dimensions. Promoting refugees' and migrants' rights to have the same level of services as the host population, such as access to adequate healthcare, including sexual and reproductive health.

Scope of the response

The focus of the Health Sector response will be on refugees and migrants from Venezuela with unattended health needs, either in transit or hosted in countries in Latin America and the Caribbean, and especially in countries bearing the heaviest burden. Its actions will be centred on (a) ensuring access to public health for refugees and migrants from Venezuela; (b) mitigate challenges faced by national health systems related to the outflow, and (c) the promotion and protection of refugees and migrants health throughout their routes.

Response strategies and priorities

- Short-term emergency and medium and long-term actions will be linked to integrate the different health needs of refugee and migrant populations, ensuring sustainability, and with gender, age and diversity approaches.
- Cooperation and coordination among all RMRP actors will be strengthened as well as with national healthcare providers to support the implementation of action stated in Buenos Aires Chapter of the Quito Process Roadmap.
- Follow-up, monitoring and support to countries' efforts to address the health needs of refugees and migrants, including a comprehensive analysis of the implemented actions with multi-sectoral, gender, age and diversity considerations, so to ensure access to health services without discrimination. This includes access to comprehensive health services, with a rights, gender and culturally sensitive approach, general vaccination coverage, surveillance of communicable and non-communicable diseases, vector-borne diseases, outbreak response, as well as communication with communities and social and behavior change communication aimed at fighting xenophobia, stigma and all types of discrimination.
- Strengthening of partnerships, networks and multi-country frameworks to understand, promote and protect the health of refugees and migrants and their integration in the host communities, through joint actions and multisectoral public health policies. The mentioned policies and actions must consider the impact among women, girls, boys, LGBTI people, survivors of gender-based violence (GBV), and indigenous and afro-descendant communities. Furthermore, trans-sectoral, multi-country and inter-agency coordination and collaboration mechanisms need to be coordinated to achieve those goals. This includes strengthening of the community response in health promotion and health education, aimed at reducing risks and promoting the empowerment and active participation of the host community during health responses.
- Technical and operational cooperation specialized in health through direct support to relevant authorities of host countries and organizations implementing preventive and protective health care actions for refugees and migrants from Venezuela, including the coordination, management and information exchange (disaggregated by sex and age). Moreover, through an assessment of regional needs, considering the gender and age dimensions, a prioritization of efforts for the planning of gender sensitive responses, and the allocation of resources with a comprehensive and regional vision of short, medium and long term.

INTEGRATION



*The figure of People in Need and People Targeted does not include host communities

PEOPLE IN NEED*

3.88 M

PEOPLE TARGETED*

1.02 M

FINANCIAL REQUIREMENTS

\$ 319 M

PARTNERS

87

Regional dynamics / Needs

The socio-economic situation of refugees and migrants from Venezuela across the region demonstrates the need for an enhanced focus on longer-term solutions, linking displacement with concrete employment and training opportunities that lead to decent work and region-wide policies in order to achieve successful integration of refugees and migrants into host communities. This will enhance the abilities of host communities to harness the added value of the newly arrived populations to the benefit of local economies, in the labour market and in the areas of culture and education. While each country is contextually unique, both in terms of their economies and labour markets, human development indices and language, the overarching challenges arising from the high numbers of refugees and migrants are similar. The objective of the regional Integration sector is to ensure a positive balance between receiving communities and refugees and migrants.

Some of the economies of the region have been under internal pressure, with increasing popular demands for employment and social reform. In countries where informal economies are dominant, skills, professional and academic degrees of refugee and migrant workers have been underutilized as a result of difficulties in meeting national requirements to recognize foreign training and degrees. The labour integration of women on equal terms with men has been affected by their engagement mainly in informal services sectors and the absence or insufficiency of care services for children to facilitate refugee and migrant women's regular access to work. Public employment services are largely ill-equipped to serve, guide and place refugees and migrants from Venezuela within the national labour markets. Employers are largely unaware of hiring procedures for refugees and migrants from Venezuela and refugee and migrant workers are unaware of their rights and how to enforce them. The lack of identity documents and the time required to regulate migratory status and asylum have also had a direct impact on access to work leading to increased engagement in informal economies as an immediate way to improve livelihoods. These challenges, among others, coupled with language barriers in some non-Spanish speaking countries, have limited the potential of governments and other actors to facilitate the local integration of refugees and migrants from Venezuela.

An example of the complementarity of the Regional Platform is the Labour Mobility Platform and its working group. Other complementary examples include the Labour Mobility Information Card and Information, Reception, Orientation, Reception and Assistance Centres, as well as the collection and dissemination of information related to labour markets and income generating opportunities.

In 2020, there is a need to develop strategies that promote the formalization of employment and employment opportunities in locations other than large cities, in order to respond to unmet demands by local communities. As an additional alternative, the promotion of entrepreneurship opportunities accompanied by business and financial services are being tested as empowering tools.

Agile procedures and requirements for the certification and recognition of prior learning and professional titles/degrees are required across the region in order for refugees and migrants from Venezuela to access professional labour markets based on their actual training and competencies.

An additional identified need lies in labour rights' awareness and information dissemination among refugees, migrants and host communities. In addition, information on enforcement mechanisms is needed to avoid and reduce exploitation and decent work deficits.

Scope of the response

Priorities of the regional Integration Sector are to strengthen the response articulated at the sub-regional/national levels in their socio-economic and cultural integration efforts, ensuring coherence and consistency of approaches and interventions.

The promotion of decent work alternatives is a priority for the regional Integration sector. This means access to productive employment that generates a fair income, that security is enjoyed in the workplace, social protection for families, freedom to express their opinions, to organize and participate in decisions that affect their lives and with equal opportunities and treatment for women and men. As many labour markets have high informal economies, the strengthening of public employment services is a priority. This is done through technical assistance to developing employability routes,

financial and technical cooperation to improve digital platforms to understand supply and demand, as well as through stronger alliances with local governments, the private sector and workers' organizations.

The identification of value chains and the analysis of productive sectors where businesses are created, accompanied by the creation and / or strengthening of services, business advice and financial services, are ways to promote alternatives to informal markets. In order to benefit both the local population and refugees and migrants, it is necessary to develop technical assistance to facilitate the transition from informal to formal markets, according to the context of each country; to promote the creation of social protection networks and to strengthen and / or develop policies to promote micro, small and medium enterprises.

The participatory construction of labour policies and their link with migration and vocational training policies, require the promotion of social dialogues through the participation of employers and employees, so to create improved work opportunities and conditions.

The development of communication strategies on the rights of refugee and migrant workers, that incorporate gender perspectives, highlighting the added value for societies to integrate refugees and migrants in local communities and livelihoods, and the dissemination of anti-xenophobia campaigns will be strategic goals of the regional Integration Sector. This will be accompanied by sensitization campaigns for labour rights for refugees and migrants, the prevention of sexual and labour exploitation, harassment and gender-based violence, the prevention of child labour and gender equality and Women's Empowerment Principles will also need to be developed and/or strengthened.

Response strategies and priorities

- Enhance linkages between migration/asylum and employment policies, in order for delays in the provision of documentation do not adversely affect labour insertion, access to public services and social inclusion;
- Carrying out studies to characterize the employment profile of refugees and migrants and market studies;
- Developing alliances with the private sector to identify employment opportunities for refugees and migrants;
- Strengthening of public employment services to better capture job offers and to ensure the inclusion of refugees and migrants in their programs;
- Participation of representative organizations of workers and employers in the discussion of labour migration policies;
- Information on labour rights and social protection rights for refugees and migrants;
- Dissemination of information to employers about hiring requirements for refugees and migrants and ethical hiring;
- Prevention of child labour, which in turn requires the formalization of employment and the strengthening of labour inspection services;
- Development and/or strengthening of policies and programs to promote entrepreneurship and business services;
- Streamlining procedures and reducing costs for the certification of previous learning and the homologation of titles;
- Enhance access to social protection for refugees and migrants, for which the introduction of a minimum social protection level is required;
- Empowering the authorities and local civil society by strengthening their capacity to manage potential new influxes and combating xenophobia.

NUTRITION



*The figure of People in Need and People Targeted does not include host communities

PEOPLE IN NEED*

131 K

PEOPLE TARGETED*

81 K

FINANCIAL REQUIREMENTS

\$ 6.81 M

PARTNERS

20

Regional dynamics / Needs

While some countries in the region, such as Colombia, Ecuador, Peru, Brazil and Guyana have a strong involvement in nutrition interventions targeting vulnerable groups in the regional response to the nutritional needs of refugees and migrants Venezuela, in others, nutritional interventions will require greater prioritization, in order to ensure that the needs of the most nutritionally vulnerable groups (in particular children under two, and pregnant and lactating women) are met. These groups have critical nutrition needs due to their condition, including rapid growth and development of unborn children, infants and young children. Meeting these needs is critical to prevent undernutrition and risks of death.

Overall in many of the region's countries there is a lack of primary data on the nutritional status of refugees and migrants from Venezuela. The lack of available and adequate health and nutrition services can manifest itself in increased risks of nutrition issues going unnoticed and unattended. Similarly, the lack of access to sufficient food, safe drinking water and sanitation facilities, which have also been identified as important gaps, impact the nutrition situation of refugees and migrants. These needs are of particular concern to groups of vulnerable refugees and migrants.

Scope of the response

The most nutritionally vulnerable groups that are of concern to the regional Nutrition sector are children under five, in particular children under two, and pregnant and lactating women. Resulting nutrition interventions at country levels will have two priorities: (a) prevent the deterioration of the nutritional status of vulnerable groups; and (b) manage identified cases of undernutrition, through ensuring access to nutrition services for refugee and migrant populations and affected host communities. In addition, the Regional Nutrition Sector will provide technical support under the RMRP through: (a) providing technical support for the implementation, monitoring and reporting of response activities across the region, including nutrition situation analysis and monitoring, implementation and monitoring of nutrition actions, support to national/local coordination; (b) facilitating knowledge-sharing and exchange of country experiences and learning from each other and documenting key programmatic data, in particular lessons learnt and best practices; and (c) supporting emergency

preparedness and response planning as requested and needed, thus contributing to reducing risk and vulnerabilities.

Response strategies and priorities

In this context, the regional Nutrition Sector will collaborate with national and sub-regional nutrition groups and actors in order to enhance the nutrition response through dedicated strategies for refugees and migrants in transit, as well as those having reached their destination as follows:

- Key nutrition response strategies for refugee and migrant populations on the move/in transit:
 - › Rapid nutrition assessments of the refugee and migrant populations to identify vulnerable groups needing support to prevent undernutrition and identify cases of undernutrition (acute malnutrition and anaemia) to be referred to adequate care.
 - › Provision of ready-to-use supplementary foods (RUSF) to children on the move aged 6-59 months to prevent acute malnutrition, and micronutrient tablets (iron/folic acid) to pregnant and lactating women to prevent micronutrient deficiencies.
 - › Provision of information to population on the move regarding adequate infant and young child feeding practices and maternal nutrition.
 - › Provision of mechanisms of information, communication and feedback to refugee and migrant populations on the move regarding adequate infant and young child feeding practices and maternal nutrition, through initiatives and tools such as those implemented by the Communication with Communities and Communication for Development working group.
- Key nutrition response strategies with refugee and migrant populations in destination:
 - › Rapid nutrition assessments of the refugee and migrant populations to identify vulnerable groups needing support to prevent undernutrition and identify cases of undernutrition (acute malnutrition and anaemia) to be referred to adequate care.

- › Support to efforts led by ministries of health and partners to prevent and treat undernutrition by (a) supporting adequate infant and young child feeding practices in shelters/transit centres, including counselling from a qualified health professional; (b) supporting setting up temporal safe spaces for mothers and children to breastfeed and receive support from qualified personnel and peers; (c) providing information to refugee and migrant populations regarding adequate infant and young child feeding practices and maternal nutrition; (d) providing multiple micronutrient powders to prevent micronutrient deficiencies in children 6 -59 months, (prioritizing 6-23 months) fortify food prepared for these children when appropriate complementary foods are not adequate; (e) providing daily micronutrient tablets (including iron/folic acid) to pregnant and lactating women; (f) ensuring availability of supplies to treat acute malnutrition, such as supplementary and therapeutic food for use by local health services, extramural health teams and partners; (g) strengthening capacity of local partners and authorities in affected areas to support infant and young child feeding practices and /or to identify, refer and treat cases of acute malnutrition.
- Efforts will be made to raise awareness on risks arising from untargeted distributions of breastmilk substitutes, milk products, and bottles, which can undermine breastfeeding practices and include heightened risk of diarrhoea, malnutrition and even death when these are used without the resources and support needed in situations where potable water and hygiene may be scarce (sufficient infant formula, clean water, support for preparation and hygiene elements).
- Linkages with food security interventions will be encouraged to ensure prioritization of families with children under five and to ensure that access to food that is suitable for complementary feeding for children over six months, utensils for food preparation, storage and feeding, such as communal kitchen in settlements. Linkages with Water, Sanitation and Hygiene (WASH) interventions will also be needed to ensure access to clean water for drinking, washing hands and soap, and access to sanitation facilities.

PROTECTION



*The figure of People in Need and People Targeted does not include host communities

PEOPLE IN NEED*

3.21 M

PEOPLE TARGETED*

1.81 M

FINANCIAL REQUIREMENTS

\$ 221.7 M

PARTNERS

97

Regional dynamics / Needs

Throughout 2019, regional Protection actors witnessed a significant increase, both in terms of reach and programmatic scope. Yet, a substantial number of refugees and migrants from Venezuela remain in an irregular situation and are vulnerable to several forms of exploitation and/or abuse, violence, and discrimination as well as to other protection concerns and risks.

National protection systems in the region are solid and functional. However, the unprecedented scale of the population outflows, and the diversity of destinations are leaving national capacities overstretched and host communities saturated. As a result, the quality and quantity of services is often inadequate to meet the magnitude of needs.

Like in other situations of high human mobility and displacement, particular groups such women, girls, boys and Lesbian, Gay, Bisexual, Transgender and Intersex (LGBTI) persons, elderly, people with disabilities, afro-descendants, and indigenous people are particularly vulnerable to family separation, gender-based violence (GBV), human trafficking and other forms of abuse and/or exploitation. Other major protection risks include child recruitment by armed forces/illegal armed groups, early pregnancy, survival sex, statelessness, detention and limited access to basic goods and services, including access to information, access to documentation or regularization, which further exacerbates protection risks.

Scope of the response

In line with the National Platforms', governments' priorities and identified needs, the regional Protection sector will aim at supporting the prevention, identification, referral, and provision of assistance and protection services to persons with specific needs, children (including unaccompanied and separated children), women at risk, GBV survivors, LGBTI persons, persons with disabilities, victims of human trafficking (VoT) and other forms of abuse and/or exploitation.

Response strategies and priorities

- The regional Protection sector will develop a wide range of normative frameworks to strengthen protection monitoring and assessment of needs related to protection while enhancing the prevention and mitigation of protection risks.

- The Protection sector will support the inclusion of key protection elements in national response/contingency plans with regards to access to territory, registration and documentation, regularization, asylum systems, border monitoring, community outreach, child protection, including access to birth registration and confirmation of nationality, GBV, assistance to victims or persons at risk of human trafficking, and identification/referrals of persons with specific needs.
- Capitalizing on the achievements of the previous year, the sector will provide technical assistance and quality assurance for effective, equitable and dignified access to services tailored to the needs of particular at-risk groups and emphasizing age, gender and diversity (AGD) principles.
- The sector will also improve the standardization of processes and tools for effective and comprehensive case management. This will include improving the quality of the integrated package of services and referrals within Support Spaces through the provision of capacity building and guidance, while ensuring harmonized minimum operational standards among the network.
- The expansion of the Support Spaces Network throughout the region and consolidation of the existing structures in transit and urban areas will continue to be supported in 2020 by the Regional and National platforms.
- Strengthening capacities at regional, national and local levels of key protection stake holders and frontline actors will be prioritized. The sector will develop capacity building toolkits and training packages to support systems and policies ensuring that protection space is guaranteed and the provision of adequate and quality services to vulnerable refugees and migrants from Venezuela is enhanced. This will include, among others, the promotion of training and awareness-raising activities regarding access to territory, regularization procedures, asylum systems, and documentation.
- Under the Quito Process, the regional Protection sector will support regional coordination for reception, assistance, protection and integration of Venezuelan refugees and migrants as well as the provision of technical support to thematic proposals prioritized by host countries in the region.
- Communicating with Communities (CwC), Communication for Development (C4D) and increasing accountability will be at the core of the sector's response. The regional

sector will coordinate regional CwC tools to enhance refugees and migrants' awareness of their rights and responsibilities, available services, as well as to gather feedback on protection risks, coping mechanisms, and response priorities. In addition, a regional capacity building tool for community outreach volunteers and for enabling the establishment of community-based structures will play a pivotal role within the sector's plan to ensure improved engagement and communication flow within both host and refugee and migrant populations.

- The regional sector will continue to pursue the promotion and strengthening of regional civil society and ombudsman networks as well as the empowerment of community groups, through extensive human resource capacity building and regional meetings. Advocacy initiatives with Regional Networks will also be sought to enhance the protective environment of persons with disabilities, LGBTI individuals and persons living with HIV, among others.

CHILD PROTECTION

Priority needs

Venezuelan refugee and migrant children and adolescents face many challenges in transit and at destination, often because many of them have limited options to move through safe pathways and have limited access to basic services. In contexts of displacement, children are often disproportionately affected by their gender, age, ethnicity and disability, among others. They are highly vulnerable and often encounter different forms of violence, abuse, neglect, including recruitment by armed groups, labour and sexual exploitation and are at heightened risk of GBV, human trafficking, smuggling and/or discrimination. Especially girls and boys, are particularly vulnerable to the risks associated with the lack of documentation, family separation, extortion, fraud, harassment, intimidation and sexual violence. Unaccompanied and separated children (UASC) face even greater risks of abuse and exploitation and challenges to access the national child protection systems for basic services, including higher risks of being institutionalized and deprived of their liberty.

Response strategies and priorities

At regional level, in addition to strategic coordination, the Child Protection sub-sector will support national platforms to ensure that appropriate systems and high quality, coordinated and age appropriate health, protection, psychosocial and justice services are available and sensitive to the needs of refugee and migrant children and adolescents, through the following interventions:

- Capacity building within National Platforms for the authorities, civil society and humanitarian actors to strengthen the inclusion of refugee and migrant children in national child protection systems
- Support and advocacy at regional and national level to put in place regional and national guidelines, national legislation on reception and integration, public policies, child protection systems and public services.
- Provision of specialized support¹⁰ to National Platforms and authorities to assist unaccompanied children and adolescents, avoiding the institutionalization and promoting family-based solutions.
- Generation, collection, analysis and dissemination of data to help improve systematic data collection and analysis at national level on child protection needs, including information disaggregated by age and gender to generate evidence for development policies, programme design and advocacy.
- Support and advocate at the national and regional levels for the improvement of information diffusion on rights and procedures to regularization of migratory status and asylum aimed at children and adolescents.

GENDER-BASED VIOLENCE

Priority needs

Limited access to economic opportunities, changes in family composition and gender roles access barriers to social assistance and increased discrimination and xenophobia have created a situation of special need and vulnerability for women and girls, in addition to those particular needs of men

10 Including support for family reunification.

and boys. These include risks of being subjected to physical and sexual violence at the hands of their intimate partner, the threat of sexual assault and harassment in transit routes, sites and accommodation premises and falling prey to false work arrangements that result in forced sex work, among others. In addition, people with diverse gender identities and sexual orientations are at the receiving end of physical, sexual attacks and other heinous acts of violence intended as 'punishment'. Although GBV is pervasive, it is grossly underreported. Refugee and migrant survivors continue to suffer in silence due to the inherent shame they experience as a result of the violence and the inescapable fear of being deported. In addition, the lack of information as to where to seek help and protection, the lack of knowledge about their rights and the limited availability of gender sensitive services in host countries are all deterrent factors which impede to attain a conducive environment for survivors to recover from the effects of violence.

Response strategies and priorities

In 2020, initiatives at the regional level will be geared to provide technical guidance to host governments and humanitarian organizations to implement strategies that aim to save lives, enhance the protective environment for refugee and migrant women, girls, boys and men (including indigenous and afro-descendants) and LGBTI persons at risk while strengthening the prevention, mitigation and response to GBV. This will be done through:

- › Development and implementation along with States and community-based actors of cross border SOPs to ensure survivors receive adequate and safe care along the transit routes. The regional strategy will include support to the national coordination groups in the process of design, validation, roll out and monitoring of Standard Operating Procedures (SOPs) and operationalization of cross border coordination mechanisms, including cross-border referrals and transfers through the Regional Safe Spaces and Support Spaces Networks.
- › Capacity building of state, non-state and other GBV front line actors to provide response services with improved standardization processes and tools: Regional initiatives will prioritize capacity development activities designed to strengthen the core competencies of GBV responders in providing case management and survivor-centred care. In order to ensure adolescent GBV survivors receive services that are child-friendly and gender-sensitive and that the best interests of the child prevails, linkages between GBV and child protection referral pathways will be strengthened.
- › Training and in-kind support will be given to national and local primary and reproductive health actors to develop and apply SOPs to serve sexual violence survivors, enhance the quality and expand the geographical coverage of rights-based integrated GBV and Sexual and Reproductive Health (SRH) services like Clinical Management of Rape, treatment of sexually transmitted infections (STIs) and other Minimal Initial Service Package components.
- › Ensure accessibility to quality GBV services through the strengthening of regional, country wide and local entry points for survivors to seek help: The regional strategy will prioritize and promote close collaboration between governments and community-based organizations to roll out information campaigns with clear information on how and where to access case management and lifesaving medical, safety and other multisectoral services. Women friendly spaces will continue playing a major role on disseminating information on GBV services, and forging ties of trust and empathy with peers and service providers with the objective of promoting a conducive and safe environment to break the lid of silence while seeking individualized support.
- › Support national actors to prevent and provide more and better alternatives to survival sex: Regional actors will provide support to national counterparts to enhance women's access to services that enable them to recover from the effects of GBV and to address the root causes of survival sex and forced sex work through economic empowerment. This will be done through the provision of material assistance, medical and psychosocial care, better designed cash-based interventions, tailored income generating opportunities and the integration of survival sex prevention strategies into livelihood programs.

HUMAN TRAFFICKING AND SMUGGLING

Priority needs

Venezuelan refugees and migrants are particularly vulnerable to human trafficking¹¹ and smuggling criminal networks at transit and destination countries. The precariousness of the routes, the means of transportation, the lack of regular migratory status and lack of access to rights and services have been identified as critical factors that increase the protection risks and vulnerability, especially for women and girls but also men and boys, and groups such as LGBTI persons. Consequently, protection systems at the national and sub-national level are seriously demanded. Dedicated discussions on trafficking¹² among countries participating in the Quito Process highlighted the specific challenges of addressing trafficking of refugees and migrants from Venezuela and agreed to cooperate in the implementation of specific actions in the areas of prevention, protection and prosecution. One of the main actions is to create a mechanism at the regional level that can facilitate and standardize the process of assisted voluntary entry and residence (permanent or temporary) of VoTs to third countries.

Response strategies and priorities

- The main regional response strategies will include the establishment of a Regional Coordination Mechanism for intra-regional coordination amongst Counter-Trafficking (CT) National Taskforces; the development of a Regional Action Plan and SOPs for the protection and assistance to victims of human trafficking; the design of a regional campaign to prevent human trafficking and smuggling; an assessment in Central America and the Caribbean on incidence and prevalence of human trafficking and the establishment of a Regional Assistance Fund for VoTs and vulnerable refugees and migrants.
- At regional level, the Human Trafficking and Smuggling sub-sector will support national platforms to assist governments in developing and implementing national and cross borders CT and counter-smuggling (CS) SOPs; strengthening the institutional response for potential VoTs and vulnerable refugees and migrants; identify the routes, patterns and new ways to recruit victims and exploit victims; design campaigns to prevent human trafficking and smuggling; update systematically information and analysis of human trafficking and smuggling trends, routes, and data, etc; the provision of funding for the support of specialized shelters for VoTs and direct assistance to VoTs as well as vulnerable refugees and migrants, among others. Through the National and Sub-regional Coordination Platforms, all the activities will be coordinated with the Governmental National Taskforces.

11 IOM Displacement Tracking Matrix (DTM) (2019), Rounds in South America, Central America and Caribbean countries

12 The event "Regional Technical Meeting of National Taskforces against Trafficking in Persons: Human Mobility Approach" was held in Buenos Aires, Argentina, between October 2 - 3, 2019. For more information please refer to the document: "Technical recommendations for addressing human trafficking".

SHELTER / NFI / HUMANITARIAN TRANSPORTATION



*The figure of People in Need and People Targeted does not include host communities

PEOPLE IN NEED*

2.73 M

PEOPLE TARGETED*

538 K

FINANCIAL REQUIREMENTS

\$ 111.08 M

PARTNERS

58

Regional dynamics / Needs

Latin America and the Caribbean countries have seen increasing numbers of Venezuelans in need of life-saving assistance such as temporary shelter, non-food items (NFI) and humanitarian transportation. The lack of resources with which refugees and migrants sometimes arrive to countries impacted by the outflows makes them more vulnerable to risks of exploitation, abuse and negative coping mechanisms to cover their basic needs. In addition to the needs of the transiting or newly arrived population, it is important to highlight that refugees and migrants with intent to stay are also in need of longer-term shelter and settlement solutions and essential household items as part of the integration process in their countries of destination.

The introduction of visa requirements in some countries across the region has led to an increase pressure on local infrastructure and capacities, especially in border areas, where refugees and migrants wait for hours or even days, to be able to cross the border, and those without a regular status are more vulnerable to transnational crimes such as human trafficking and smuggling. In this regard, national partners have defined actions to support the Governments with the provision of temporary accommodation and life-saving non-food items for the newly arrived and most vulnerable population. Improved access to quality and sufficient short-term shelter solutions (collective and individual) at arrival, transit and exit areas is a primary need for refugees and migrants from Venezuela. The most common problems encountered by refugees and migrants from Venezuela in destination areas include a lack of affordable rental accommodation in close proximity to livelihoods options, substandard housing conditions, risk of eviction, discrimination, lack of bargaining power due to their irregular situation leading to abuse by landlords, high prices of basic services and conflict with neighbours¹³. In the case of existing collective temporary shelters, people stay in overcrowded spaces, and the constructions are in substandard conditions, with a lack of hardware assets, gender and ethnicity-sensitive designs and without adequate Water, Sanitation and Hygiene (WASH) solutions. Other accommodation options include hotels or shared rooms in

private apartments. However, refugees and migrants may not be able to afford these services or in substandard conditions and they could be exposed to protection risks (especially children, young, women, people with disabilities and elderly, among others). Additionally, in some cases, owners of accommodations from host communities are in a situation of equal or greater vulnerability than the refugees and migrants, considering existing national poverty rates in host countries. As for NFIs, people in transit especially lack access to relevant and quality live-saving NFIs including essential household items, adequate clothing and protection-focused items such as whistles, lamps and padlocks, among others¹⁴.

RMRP partners in Colombia, Ecuador, Peru, Brazil, Mexico and the Southern Cone have also defined the need to provide humanitarian transportation support for refugees and migrants from Venezuela. Humanitarian transportation assistance will be provided from border to border, enabling Venezuelans to continue their journey towards their country of destination (mainly in the Andean region), and from border areas to main/destination cities, where refugees and migrants from Venezuela can access social services or process applications for regularization (mainly in Brazil, Southern Cone and Mexico), thereby also supporting their integration. The in-transit population of refugees and migrants from Venezuela, by definition, intend to travel towards a final destination, be it due to reasons of family reunification or the socioeconomic conditions in the destination country. The need for humanitarian transport is prominent where refugees and migrants intend to travel across borders and through more than one country, such as in the Andean corridor, where many wish to migrate from the border with Colombia in Rumichaca to the border of Ecuador with Peru in Huaquillas¹⁵. Humanitarian Transport is needed due to a lack of financial resources and the risks associated with traveling by foot or by public transport over long distances.

The regional Shelter sector recognises the changing context of the refugees and migrants in Latin America and the Caribbean. Outflow of refugees and migrants are continuing and, while emergency humanitarian needs continue in terms of shelter, NFI and humanitarian transportation, especially in border

¹³ RMRP partners (2019), Joint-Needs Analysis

¹⁴ Norwegian Refugee Council, Prioritization of Element Exercise According to an internal prioritization of elements exercise developed by the Norwegian Refugee Council

¹⁵ Protocolo De Activación De Transporte Humanitario, Flujos Migratorios, Venezuela - Ecuador, OIM Ecuador

areas, refugee and migrant needs are becoming more medium and long term. People are moving more towards urban centres and find themselves in precarious situations due to a lack of resources and networks within host communities. Therefore, mid-term solutions need to be strengthened in order to create accommodation options for those exiting emergency shelters. Primary interventions for mid-term solutions are rental schemes. For people seeking to settle and integrate into host communities, adequate transitional or permanent shelters are needed. Most of the affected population suffer obstacles in accessing adequate housing and durable solutions in preferred destination areas, largely urban centres. Regarding public services and infrastructure, an area-based approach to settlement infrastructure is needed to promote social cohesion and integration through strategic urban planning interventions that benefit refugees, migrants and host communities, reducing the propensity for xenophobia.

Scope of the response

The scope of the regional Shelter/NFI/Humanitarian Transportation sector covers immediate life-saving humanitarian assistance, especially required for new arrivals in host countries and in border areas for population in transit, as well as support to those with medium to long-term shelter needs, with a view to support the integration of refugees and migrants in destination countries. Host communities will also be targeted in shelter initiatives especially in urban centres through the implementation of area-based interventions, infrastructure upgrades and activities which aim to benefit entire communities, and vulnerable host community members will also be targeted for NFI distribution by essential household items such as kitchen sets, mattresses, bedding and mosquito nets. The intended effect of these interventions is also to promote peaceful coexistence among refugees, migrants and host communities.

With regards to humanitarian transportation, the most vulnerable individuals or groups will be identified for assistance, as well as those in need of accompaniment, such as single-parent households, pregnant and lactating women, families with young children, unaccompanied and separated children (UASC), elderly and people with disabilities. These initiatives aim to provide assistance through safe and dignified transport for individuals or groups who are going, either temporarily or permanently, to a place of destination or urban areas where they can access vital goods and services, including

regularization procedures. The regional sector interventions will also consider environmental impact; considering the material nature of these interventions, measures will be taken to ensure use and distribution of materials and their maintenance is within environmental standards.

Response strategies and priorities

- The regional Shelter response will provide access to adequate, safe and dignified shelter solutions to refugees and migrants from Venezuela. In addition to improving mid-term solutions, longer-term solutions will be developed.
- The role of humanitarian partners in the region working in the shelter and settlement sector will be oriented towards technical capacity development and advocacy in the promotion of rights to housing and the regularization of informal settlements – housing, land and property. This concerns the support of area-based interventions where entire communities are targeted rather than individuals, reaching not only refugees and migrants but also host communities. This type of assistance will include improvements in services and infrastructure, benefitting the whole community.
- Partners will also work on the improvement of existing and new construction of emergency shelter response at entry, transit and exit areas. This will consist of strengthening gender and ethnicity-sensitive shelters approaches by the identification of protection risks through consultation processes and performance of mitigation measures such as lighting of common areas, provision of private spaces for menstrual and personal hygiene, and constructions adapted to the social-cultural and ethnic of the place of origin. Sector partners will also ensure that no specific groups are left outside of eligibility criteria, especially if these groups are vulnerable.
- In terms of NFI response, life-saving non-food items distribution will be prioritized for people in transit or newcomers to host communities. The primary approach for NFIs is to distribute items according to assessed needs. These NFIs will be adapted to weather and local conditions and should include blankets, appropriate quality clothing, footwear, solar protection, backpacks, documentation protectors, among others. For people willing to integrate or resettled on host communities, essential household items assistance supports restoring and maintaining health, dignity and safety and the undertaking of daily domestic activities in

and around the new home. This activity will include sufficient and appropriate quality clothing, sufficient and appropriate quality sleeping and kitchen kits. NFI interventions will not only encompass household items but also items related to hygiene, sanitation, such as hygiene and menstrual hygiene kits, and education, including uniforms and stationary., making inter-sectoral coordination a key priority.

- › For humanitarian transportation, priority profiles will be identified in areas of mobile human population concentration. This intervention will be carried out through sector partners and through agreements with major airlines and bus companies. Humanitarian transport will be either provided in kind, through cash-based interventions (CBI) or financial coverage of transportation units, on a voluntary basis. Additionally, prior to the departure of refugees and migrants from Venezuela onto buses, information on rights and access to services is provided. Humanitarian transportation partners will work together with integration partners and relocation programmes, whereby refugees and migrants are transported voluntarily to different regions of a given country which may be better suited for their integration.

WASH



*The figure of People in Need and People Targeted does not include host communities

PEOPLE IN NEED* 

1.5 M

PEOPLE TARGETED* 

0.57 M

FINANCIAL REQUIREMENTS 

\$ 33.19 M

PARTNERS 

30

Regional dynamics / Needs

Owing to the continued outflow of refugees and migrants from Venezuela, Water, Sanitation and Hygiene (WASH) services across the region have been affected and their capacities substantively weakened - also since they were not designed to satisfy the increased demand in terms of quantity, quality and specific needs. Despite enhanced efforts in 2018 and 2019 to improve WASH services, they remain inadequate, non-accessible or insufficient to ensure safe and continuous provision of quality and quantity services.

Based on its ongoing collaboration with WASH actors at country level, the regional WASH Sector has observed that refugee and migrant women and children and host communities are seriously affected by a lack of access to safe water, sanitation and hygiene services at community and institutional levels. Across the region, vulnerable refugees and migrants, as well as host communities need to access to safe, sufficient and affordable drinking water, basic sanitation and hygiene (including Menstrual Hygiene Management) to ensure dignity and satisfy essential and specific needs. Inversely, national authorities need to ensure that the refugees' and migrants' rights to access to safe water, sanitation and hygiene in communities and in institutions delivering services, such as health care facilities, schools and learning spaces, migrant centers, border points, feeding kitchens, and terminals, among others, are maintained.

In places where services are provided such as healthcare facilities, schools, and support spaces, access to safe water, sanitation and hygiene is a key factor to contribute to health, education and protection outcomes. In health centers that are overwhelmed with the increased demand, the public health risk increases where WASH services are not adequate. Also, in schools, ensure WASH standards at learning spaces is a key factor to contribute to avoid absenteeism. In public spaces, such as markets and terminals free access to sanitation, handwashing points and drinking water contribute to ensure public health. Risk communication is also needed in terms of public health, including key WASH aspects as hygiene, handwashing, food handling, prevention of vector-borne diseases, among others.

While WASH assistance has been reinforced, important challenges remain to better address the affected populations' WASH needs in addressing response gaps across the region, as well as when developing tailored responses to the specific needs of children, adolescents, persons with disabilities, women, and LGBTI persons, including through existing public services and institutions.

Scope of the sector response

It is estimated that 1.65 million refugees and migrants from Venezuela and host community members are in need of WASH assistance across the region in 2020. Of these, the regional WASH response will target 620,000 individuals (including host communities). In addition to refugees and migrants from Venezuela, the response will target affected host communities in meeting their WASH needs, especially in areas most impacted by the outflow of refugees and migrants. Programmatically, the regional WASH sector will focus on the following response priorities, while highlighting that all WASH services need to be inclusive, free of discrimination, safe and adapted to the specific needs of vulnerable population taking into account specific needs of vulnerable individuals.

The regional WASH sector will ensure WASH humanitarian assistance for vulnerable population and will contribute to ensure that vulnerable refugees, migrants and host communities' access to safe water points for drinking, cooking and hygiene, adequate and safe sanitation facilities and information to satisfy the immediate needs on water, hygiene and sanitation, all in settlements, specific service delivery points and along the displacement routes. Additionally, the sector will ensure WASH services at institutional level and will contribute to ensure that migrants, refugees and host communities' access adequate WASH services in key places such as migrant border points, shelters, schools, learning spaces, Support Spaces, health centers and feeding areas. Further, the regional WASH sector will Ensure WASH services at community level, by contribute to improve safe water, sanitation and hygiene access in settlements and communities, considering migrants, refugees and host communities demands and needs, under a resilient focus.

Response strategies and priorities

- Support coordination of the response, ensuring technical assistance and quality assurance for WASH activities and their contributions to other sectors, such as Health, Education, Nutrition, Food Security and Protection, including Child Protection and Gender-Based Violence (GBV). This includes contribution for inter-country WASH coordination, inter-sectoral coordination and support to sectoral responses.
- Support coordination at national and sub-regional level, through capacity building and technical assistance, and connecting

WASH coordination groups from national and sub-regional coordination platforms and from other relevant sectors.

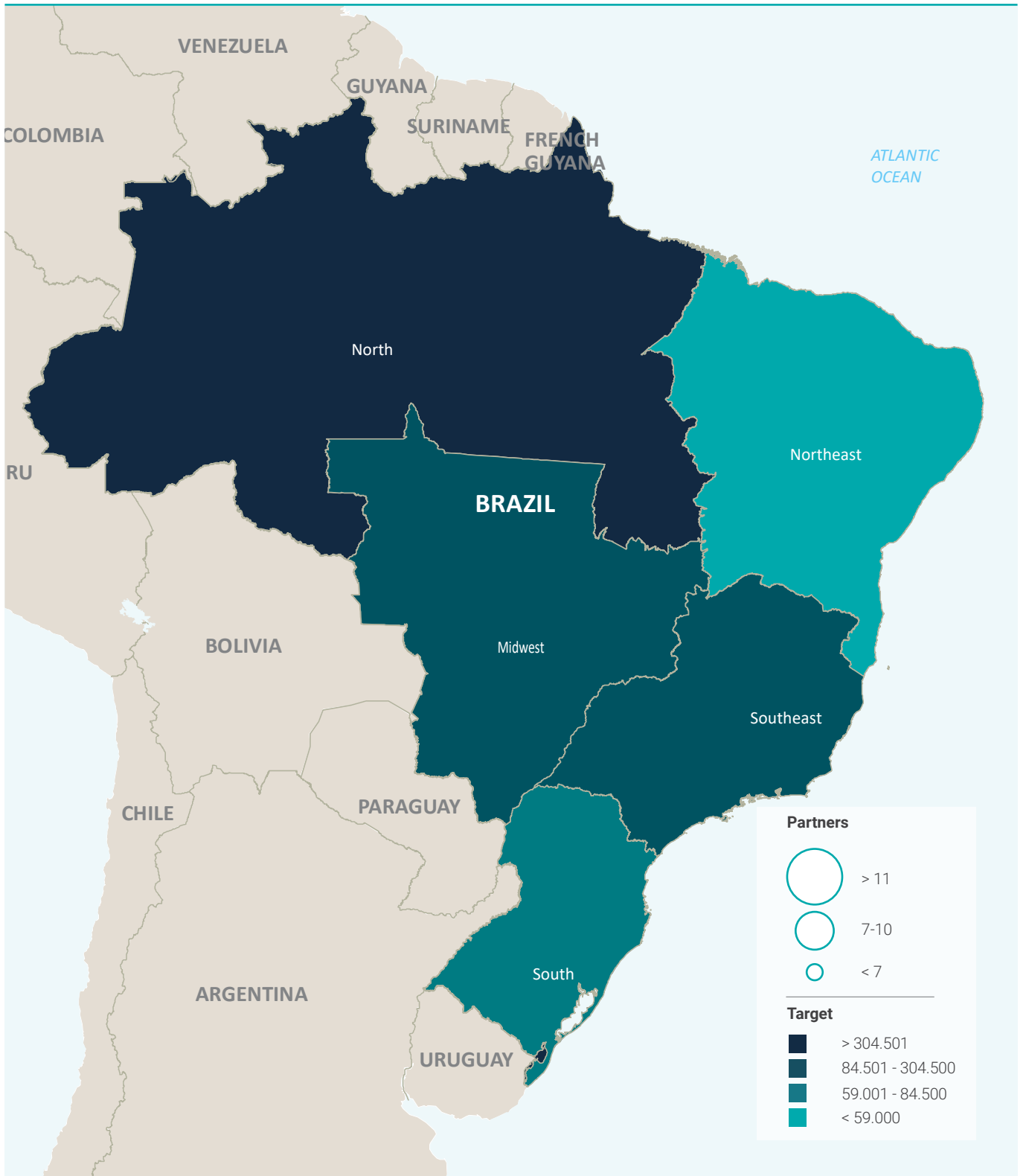
- Advocacy at regional level and support at national/sub-regional level to ensure that WASH priorities and needs are identified, addressed and coordinated with other sectors.
- Support inter-country and regional initiatives, studies, surveys, and research, among others, to understand specific WASH needs and to inform governmental plans and strategies, along displacement the routes and in settlements and services; ensuring accountability to affected populations, while being sensitive to disabilities, diversities and age/gender considerations.
- Contribute to ensure that the overall WASH response combines humanitarian and resilient approaches according to needs, vulnerabilities and capacities.
- Support inter-country and regional initiatives as risk communication, promotion and prevention and surveillance of water-borne diseases, etc.
- Support the Accountability to Affected Population (AAP) of WASH responses as a key component to ensure quality humanitarian and resilient responses in the area of WASH. This includes specific mechanisms to ensure women and girls participation, people with disabilities, indigenous groups, among others, and participatory needs assessments and planning.
- Enhance sectoral information and knowledge management, including quality assurance for WASH information at regional level, disaggregated by sex and age.
- Promote and support multi-country and regional systematization, documentation and lessons learned initiatives to inform plan, strategies and regional and national capacity building plans.
- Provide specific technical guidance through the elaboration of specific WASH guidelines, including on the humanitarian-development nexus and gender equality.
- Promote the elaboration and implementation of communication for development strategies, including methodologies and tools, to enable knowledge and behavioral changes around the adoption of key WASH practices.

BRAZIL











BRAZIL

POPULATION PROJECTION 2020	PEOPLE IN NEED*	PEOPLE TARGETED*	FINANCIAL REQUIREMENTS	RMRP PARTNERS
VENEZ. IN DESTINATION 361 K	289 K	216 K	\$88.2 M	29
HOST COMMUNITY --	110 K	70 K		
























NUMBER AND FINANCIAL REQUIREMENTS BY ORGANIZATION TYPE

		Organizations		Financial Requirements
International NGO		5		17.4%
National NGO		5		0.9%
Others*		10		5.1%
UN Agencies		9		76.6%

*Other include Red Cross movement, academia, civil society and faith-based organizations.

The list of organizations and RMRP partners only includes appealing organizations under the RMRP. Many of these organizations collaborate with implementing partners to carry out RMRP activities.

POPULATION IN NEED AND TARGET, FINANCIAL REQUIREMENTS AND NUMBER OF PARTNERS BY SECTOR

		People targeted*		People in need*	Financial Requirements (USD)	Partners
Education		32 K		65 K	5.56 M	9
Food Security		20 K		54 K	2.03 M	10
Health		90 K		253 K	5.84 M	10
Integration		78 K		180 K	15.28 M	23
NFI		136 K		216 K	4.3 M	11
Nutrition		22 K		36 K	1.22 M	2
Protection**		216 K		289 K	20.04 M	20
Shelter		83 K		108 K	15.3 M	13
WASH		90 K		108 K	5.31 M	6
Humanitarian Transportation					7.22 M	4
Multipurpose CBI					2.28 M	6
Support Services***					3.84 M	7

*The figure of People in Need and People Targeted does not include host communities | ** Includes GBV, Child Protection, Human Trafficking & Smuggling

*** Communication, Coordination, Information Management and Fundraising

COUNTRY OVERVIEW

As the crisis in Venezuela continues, Brazil has seen a significant outflow of refugees and migrants from Venezuela crossing primarily into the northern states of the country. Since 2017, more than 454,800 Venezuelans have arrived in Brazil¹⁶. Among these, approximately 269,800 have since left the country¹⁷. As of July 2019, 111,607 active asylum requests from Venezuelan individuals were recorded, and there were 87,342 Venezuelans who applied for temporary residency permit¹⁸. Between January and July of 2019, an average of 600/18,000 Venezuelan refugees and migrants entered Brazil daily and monthly, respectively¹⁹, many in dire need of humanitarian assistance. The primary point of entry for refugees and migrants from Venezuela into Brazil is in the northern state of Roraima, through the border city of Pacaraima, with the majority of refugees and migrants continuing on to the state capital of Boa Vista²⁰. The state of Roraima is geographically isolated from the rest of Brazil by the Amazon rainforest, making spontaneous onward movements difficult and costly. The state has the lowest per capita income in the country and few economic opportunities available, leaving few possibilities for income generation and local integration.

The Brazilian Government remains committed to supporting refugees and migrants from Venezuela through its Operation Welcome (*Operação Acolhida* in Portuguese), focused on the northern states of Roraima and Amazonas but also considering an expansion in other areas of the country, where reception services, including registration, documentation, shelter, health and other services are provided jointly with RMRP partners to new arrivals, and from where the government is operating its Interiorization (*Interiorização* in Portuguese) programme to ease the pressure on the Roraima and Amazonas areas (internal resettlement to other parts of the country). As of August of 2019, an estimated 14,643²¹ refugees and migrants were relocated under the various modalities of the Interiorization scheme. The programme currently comprises a network of almost 300 recipient or destination cities across 24 Brazilian states and the Federal District²² and maintains an active engagement with local government and civil society groups in each destination.

Since April 2018, some 88,500 refugees and migrants have been registered at the Reception and Documentation Centres in Roraima. Women represent 46 per cent of those registered, whereas children and adolescent refugees and migrants from Venezuela have increased over the last twelve months from 21 to 36 per cent.

Summary findings of joint needs assessments and analysis

Available information²³ of refugee and migrant households in the Pacaraima and Boa Vista (Roraima state) and Manaus (Amazonas) highlighted that near to all those surveyed reported urgent unmet needs. Those could not be met by overwhelmed local service providers, and which were compounded increasing tensions with host communities as a result of host fatigue and an already precarious socio-economic situation in these states. Additionally, the assessment indicates that the primary needs of these populations are the following:

- Access to services: Between 17–28 per cent of surveyed households (based on the different populations/locations surveyed) face challenges accessing services, such as social programmes for financial aid, legal services, day care and psychosocial support, mainly due to language barriers, missing documentation, lack of transportation and lack of local capacities.
- WASH: While many thousands of refugees and migrants have resorted to formal and informal shelters, with frequently sub-standard WASH and privacy conditions, many thousands more are estimated to be living in sub-standard, overcrowded or precarious rental accommodations. For these persons, the main issues faced are leakages, inadequate WASH facilities, and overcrowding. In indigenous shelters and informal settlements, WASH issues are particularly acute, often leading to health problems. Additionally, the prevalent lack of formal rental contracts exposes the tenants to risks of arbitrary evictions, confiscation, exploitation and abuse.
- Education: Among the identified barriers to education services are lack of available slots as a result of overcrowding, documentation requirements and the distance and unavailable transportation from/to schools.
- Health: Considering the poor socio-economic conditions in the surveyed states, the available health services have been under a considerable pressure. Particularly poor health conditions were observed on the part of indigenous populations, which are critical for children, and often exacerbated by poor WASH conditions, cultural differences and language barriers.
- Integration: In the majority of surveyed households, at least one person was found engaging in some form of income generation, particularly when living with host communities. Language barriers, documentation requirements, resulting from misinformation on labour rights, recognition of academic credentials, among others, discrimination, xenophobia and transportation costs, were stated as the

16 Brazil Federal Police (July 2019). Available at <http://www.pf.gov.br/servicos-pf/imigracao/estatisticas>

17 Ibid

18 Ibid

19 Ibid

20 Brazil Federal Police (July 2019); UNHCR (August 2019), ProGres V4; IOM (2018-2019), Displacement Tracking Matrix (DTM).

21 IOM (August 2019), Estratégia de Interiorização dos Venezuelanos: Relatório de movimentos assistidos..

22 Ministry of Citizenship, (August 2019), 24 States and the Federal District

23 UNHCR-Reach (July 2019), Socio-economic and vulnerability profiling exercise.

greatest obstacles to accessing livelihoods. Coordination among different states and absorption capacity of reception cities remain among the challenges to the continuity of relocation, while local civil society networks must continue to be leveraged to facilitate the integration process.

The resulting lack of access to basic goods and services result in negative coping mechanisms and protection risks, including accrual of debts, begging, labour exploitation, child labour, discrimination, human trafficking, survival sex, sexual exploitation and abuse, gender-based violence (GBV), health problems and malnutrition, among others²⁴.

RESPONSE STRATEGY

Country-specific planning scenario

In the first half of 2019, no significant differences in the outflow dynamics were observed. The RMRP 2020 planning is based on the assumption that the current trends in key situational parameters will remain steady throughout the year, with a possibility of a slight increase in flows. While making efforts to receive refugees and migrants from Venezuela, the increasing fatigue of Latin American and Caribbean states hosting Venezuelans has been noted. Furthermore, recently imposed restrictions on access to territories in neighbouring countries may have an impact on Brazil, through new corridors and/or changed flow dynamics.

Based thereon, assumptions are that refugees and migrants from Venezuela will continue to arrive in Brazil, with daily entries fluctuating between 600 and 800 individuals. In addition, a vast majority of individuals will continue to enter Brazil through the border city of Pacaraima and will initially establish themselves in northern cities. It is also anticipated that the Brazilian government will continue to support the response for refugees and migrants from Venezuelan but directing its focus and increasing the implementation of the internal relocation scheme to reduce the burden in northern states and to ensure the promotion of medium-term solution for refugees and migrants from Venezuela. Recently imposed restrictions on access to territory in neighbouring countries, mainly through administrative measures such as visa and documentary requirements, and a generalized risk of the implementation of more restrictive policies in the future, may have an impact on the rate of arrivals of refugees and migrants from Venezuela to Brazil.

As a result, it is estimated that by end-2020, some 360,762 refugees and migrants from Venezuela will reside in Brazil²⁵, while more than 500 municipalities are expected to be involved in the response for refugees and migrants from Venezuela across the country.

Scope of the response

Based on the scenario planning for 2020 and the conducted needs analysis, the response in Brazil envisages the implementation of coordinated activities for refugees and migrants considering the country as their destination, and for impacted host communities. The response will have four main strategic objectives:

- Complement and strengthen the Government response on documentation, shelter, and internal relocation.
- Provide and improve effective access to basic goods and services.
- Strengthen prevention, mitigation and response to protection risks and access to rights, in particular, of those with vulnerability and specific needs.
- Enhance opportunities for socio-economic integration, including access to formal employment and entrepreneurship, access to housing, education and health.

The Plan seeks to foster peaceful coexistence and social cohesion between refugees and migrants and host communities through community dialogues, advocacy and awareness campaigns, highlighting the positive impact of the presence of refugees and migrants from Venezuela on the economy and preventing discrimination and xenophobia. The emphasis is on inclusion, solidarity and respect for diversity and rights, with the overall Brazilian population, journalists, academics and decision-makers, as the target audience.

The response will ensure that host communities, including the Brazilian indigenous communities living in border areas also receive assistance through non-food items (NFIs), food and health and benefit from income-generation activities.

In addition, RMRP partners will enhance their cooperation with local and national institutions to ensure the provision of basic services to refugees and migrants and support the elaboration of policies aimed at strengthening their reception and integration in the country. And as part of their efforts to mobilize the private sector in support of the socio-economic integration of refugees and migrants, partners will increase their number of workshops, where policy-makers and entrepreneurs can discuss the hiring processes and the long-term benefits – expertise and knowledge - of the foreign workers.

Prioritization approach

The criteria used to prioritize activities for 2020 have focused on the most critical needs and vulnerabilities as well as on identified response gaps, the mitigation of risks and relocation processes towards self-reliance and local integration. Integrated approaches, including joint programming, have been developed as key elements of a successful prioritization and cost-efficient response

²⁴ UNHCR, UNICEF (July- September 2019) Joint Assessments in Manaus and Belem.

²⁵ With estimated gender disaggregation of 58 per cent men and 42 per cent women.

The planned activities include gender, age and diversity approaches, which are fundamental to ensuring that activities respond to the specific needs of the population. In this context, children, those unaccompanied or separated, pregnant women, elderly, people with disabilities, the Lesbian, Gay, Bisexual, Transgender and Intersex (LGBTI) community, the indigenous communities, among others, who face specific risks, barriers and discrimination will be prioritized.

The response will focus on the most affected areas, including Amazonas and Roraima states, as well as the cities where the refugees and migrants have been and will be relocated to. Of the 198,949 documentation requests processed for refugees and migrants from Venezuela²⁶, the largest number was registered in Pacaraima and Boa Vista (Roraima), followed by Manaus²⁷ (Amazonas). Manaus is the only city in Brazil that can be reached from Boa Vista by land, whereas for onward travel it is necessary to travel by river or air. Given this, Manaus has been a primary point of arrival for Venezuelans, who make the trajectory from Pacaraima to Boa Vista and on to Manaus. Estimates indicate that there are at least 15,000 Venezuelans in Manaus²⁸. From Manaus, a small but significant number of arrivals to the State of Para have been noted, primarily indigenous persons, who arrive via a four-day boat trip on the Amazon River.

Estimates indicate that there are around 800 Venezuelans in Belém, out of which 600 are indigenous Venezuelans of the ethnic group Warao. In addition to Belém, there are at least another eleven municipalities in the state of Pará receiving Venezuelans, both indigenous and non-indigenous²⁹.

Beside the northern areas, the 24 states where the voluntary internal relocation programme has been implemented will constitute the areas of intervention of the RMRP in Brazil, complementing government programmes and response efforts. Interior relocation areas include Brasília, Rio de Janeiro, Sao Paulo and other locations in the south and northeast of the country.

Supporting government registration and documentation activities, especially in the border areas of Roraima state, continues to be central to ensure access to rights and as best practice.

Profiling of refugees and migrants from Venezuela, especially those living outside of shelters, those internally relocated and of indigenous populations will be a priority, while shelter and NFI assistance will be provided to those with the most urgent emergency needs and to the most vulnerable. Owing to the overstretched nature of public services and identified needs, education and health services for refugees and migrants from Venezuela, especially for those facing access barriers remain paramount. The same applies to the intensified focus on integration, social cohesion and capacity support activities, in a complementary manner with the internal relocation objective of the Government.

Response principles

Accountability to Affected Populations (AAP), centrality of protection, age/gender and environment

Improvements will be made in the field of protection mainstreaming, including through the development and/or implementation of inter-agency minimum standards guidelines, sector-specific checklists and tools, trainings, and donor guidance. Moreover, response principles such as accountability to affected populations, age, gender and diversity mainstreaming, and environment mainstreaming have been taken into consideration into sector strategies and throughout the RMRP planning cycle. However, greater efforts will be made to ensure their effective implementation in 2020 through improvement of data collection actions and tools. In the preparation for the RMRP 2020, additional concrete tools have been created to ensure a gender perspective is taken into consideration and capacity building opportunities will be offered to allow practitioners to monitor and evaluate the process and the impact of having mainstreamed protection and gender on the affected population, having ensured centrality of protection in all the programme cycle steps. Accountability to Affected Populations (AAP) will be also ensure through constant involvement and consultation of refugees and migrants from Venezuela via participatory assessments and profiling that will continue to be carried out in 2020. Furthermore, the response in Brazil has adopted an innovative approach for mainstreaming environmental considerations in its response, with positive results in 2019 and that will be effectively implemented in 2020. Its approach not only works as a link between the emergency response and development but also seeks to mitigate the negative impacts caused by mixed refugee-migrant flows and by the response projects themselves that may affect public health, the local infrastructure, the relationship with host communities and long-term resilience. Recognizing the environment as a cross-cutting issue, it also seeks opportunities to generate positive impacts through articulation between different sectors. Building partnerships and developing projects and initiatives in a range of topics – from waste management to reforestation, from agriculture to labour market insertion – it aims to benefit host communities and the public sector, enabling greater social and economic integration of the refugees and migrants.

Environment

The results of RMRP partners' self-assessment on environmental mainstreaming suggests that while some efforts remain necessary for all sectors to identify and mitigate their environmental impacts, especially in the areas of shelter (mostly related to waste management), NFI and CBI. In parallel, possibilities for mainstreaming environmental considerations through improved technical solutions, environmental education and the anticipation of environmental risks have been identified, especially by WASH actors. Brazil's internal relocation programme

26 Brazil Federal Police (July 2019)

27 Ibid

28 RMRP Partners (August 2019), Humanitarian organizations' consultations with local authorities.

29 UNICEF (September 2019), Assessments from UNICEF Office in Para'.

presents many opportunities for environmental mainstreaming. This should consider both the impacts of transportation and on the cities receiving multi-scale groups, as well as the opportunities to incorporate refugees and migrants into “green jobs” related to environment, waste management, ecotourism or similar, thereby promoting durable solutions and sustainable development through response and integration activities. In this context, environmental risks linked to potentially illegal income generation activities will need to be assessed. Brazilian indigenous communities hosting indigenous people from Venezuela require particular assistance in agricultural practices to be able to integrate sustainably the populations that they are receiving, reducing internal conflicts and supporting nutritional security.

Comprehensive feedback and referral mechanisms will be strengthened as well. The response will ensure that persons with specific needs have equal access to assistance and have the opportunity to participate in community self-management and decision-making. Increased emphasis throughout the response community on the Centrality of Protection, AAP and age, gender and diversity mainstreaming in humanitarian action and more outcome-oriented and results-based approaches, including collective outcomes is an aim of all actors involved in the response. A lens of a whole-of system approach to protection for a comprehensive reduction of risk typically requires more than one sector to contribute to protection outcomes. So integrated approaches and actions are envisaged and promoted. To ensure the broader response community is grounded in solid situational awareness, partners will deepen protection analysis, considering the range of options available to address problems, together with non-humanitarian actors resulting in strengthened analysis. Partners will endeavour to ensure that a solutions strategy is people-centred and follows an age, gender and diversity approach, engaging women, men, girls and boys in designing and delivering programmes.

A good gender analysis allows organizations to better tailor their activities in order to enhance gender-sensitive response. Considering this, 19 out of the 29 appealing organizations completed the Inter-Agency Standing Committee’s (IASC) Gender with Age Marker (GAM) survey during the RMRP 2020 planning phase. Results showed that 66 per cent of them aim to mainstream gender equality, 47 per cent plan to respond to both gender and age differences (Code 4) and 16 per cent of the organizations intend to address gender but not age in the RMRP. Regarding gender analysis, 16 per cent of the appealing organizations demonstrate being able to conduct a good analysis, 5 per cent a limited analysis and 79 per cent have not yet, or not included an analysis of gender and/or age inequality, comparing conditions or barriers for different groups in the context.

RESPONSE TO INDIGENOUS SPECIFIC NEEDS

As of July 2019, there were approximately 4,654 indigenous refugees and migrants from Venezuela in Brazil³⁰, concentrated in the northern states of Roraima, Amazonas and Para and it is expected that numbers will continue to grow in 2020³¹. Most of this population is of Warao ethnicity, representing at least 81 per cent, followed by Pemon Taurepan (17%) and the Eñepa (2%).

The indigenous Warao population face the greatest challenges to integration and meeting their most basic needs. The nomadic culture of the group makes planning more complex as they are in constant movement across Brazil. There is a lack of a long-term strategy for shelter exit and self-reliance respective of their cultural patterns. In addition, a large proportion of this population lives outside of shelters and in very vulnerable conditions. These circumstances require a broader engagement from the response community, with concerted attention to cultural, gender and age specificities, while supporting capacity building of local authorities and shelter management in community-based protection, communication with communities (CwC) and enhancing intercultural dialogue especially on health³² education³³ and WASH and strengthening protection risks, prevention and assistance³⁴.

In order to respond to the needs of these populations, RMRP partners in Brazil aim to:

- Provide an adequate and immediate emergency response (health, nutrition, shelter, non-food items and food) to indigenous Venezuelans arriving, with an emphasis on improvement of shelter conditions and public health response to address preventable diseases.
- Complement shelter exit-strategies to guarantee effective local integration, ensure resilience and self-sufficiency in the host cities, as well as safe spaces.
- Strengthening communication with communities, ensuring that policy planning and programming takes into account indigenous people’s participation and interests and promote self-determination, while supporting community-based protection with a culturally specific approach and a focus on preventing discrimination, GBV, trafficking in persons and child protection

30 UNHCR (July 2019), Approximate data collected in Brazil.

31 SIOM (2019), Legal Aspects of Assisting Venezuelan Indigenous Migrants in Brazil,.

32 Portaria do Ministério da Saúde nº 254, de 31 de janeiro de 2002 (DOU nº 26 - Seção 1, p. 46 a 49, de 6 de fevereiro de 2002).

33 Lei de Diretrizes e Bases da Educação Nacional (Lei nº 9.394).

34 Law nº 8.742 (7 December 1993)

EDUCATION



PEOPLE IN NEED 

65 K

PEOPLE TARGETED 

32 K

FINANCIAL REQUIREMENTS 

\$5.56 M

PARTNERS 

9

Priority Needs

In the context of increasing population movements, significant challenges arise both in access to education as well as in ensuring educational continuity for children and adolescents on the move in all areas, including the border states of Roraima and Amazonas, as well as in relocation cities. In the three main reception cities in the north of Brazil, significant proportions of refugee and migrant households report having children not enrolled in school.

Children and adolescents face significant barriers to accessing pre-schooling and formal schooling due the lack of information on educational rights and the capacity of the public education sector in host communities to absorb them. In this context, indigenous children and adolescents face particular challenges to meeting their educational needs. The most recent data for Roraima and Amazonas states indicates that 12,646 refugee and migrant children and adolescents are currently enrolled in formal education in both states³⁵. More information and assessments are needed to understand gender disparities and other vulnerabilities that hinder access to education. For refugee and migrant children and adolescents who access formal schooling, the main gap is to achieve learning outcomes and skills expected for their assigned school grades. The Education Sector will engage different stakeholders to fill these gaps, promote peaceful coexistence and build bridges between non-formal and formal education services.

Response Strategy

The scope of the Education sector will be the support the integration of refugee and migrant children and adolescents in formal education and provide non-formal education as part of the integration process, mainly in Amazonas and Roraima states but also as part of the relocation and integration processes across Brazil. This translates into the following response: Provision of non-formal education programmes for refugee and migrant children and adolescents in and outside shelters when children cannot access to formal education due to timing or the lack of available space, among others, mainly in Roraima and Manaus states. Educational activities are provided in Temporary Learning Centres (TLS)³⁶, shelters and public spaces such as streets, bus stations, public squares, schools, etc.

Strengthen local capacities to adequately respond to the educational demands and needs of refugee and migrant children

and adolescents through the development and implementation of trainings for local authorities, civil servants, school managers and teachers on refugee and migrant children and adolescents' rights and educational needs, including providing technical support to local education authorities for curriculum modifications. These activities will also strengthen the capacity of host communities across the country to facilitate access to formal education following relocation.

The Education sector will focus its response on assessing the major educational challenges and adequately delivering non-formal education programmes, as well promoting the capacity development of the public education sector in the municipal and state levels to adequately absorb refugee and migrant children and adolescents in formal schooling.

The provision of non-formal education for refugee and migrant children and adolescents in and outside of shelters will be integrated with gender-sensitive psychosocial support, as well as activities for the response, prevention and protection against violence. This approach offers a tailored multi-disciplinary programme, jointly designed and executed by educators, teachers, psychologists and social assistants. Activities are jointly programmed between the Education and Child Protection sectors and include continuous trainings and capacity building on harmonized practices for educational and protection activities.

The Education sector will also support the relocation and integration process by providing adequate information to refugee and migrant children, adolescents and their families related to their rights and the education system in host communities. The sector will contribute, when appropriate, for health-related programming, with vaccination campaigns and other informative activities in schools.

³⁵ Municipal and States education secretariats, (August 2019).

³⁶ Temporary Learning Spaces in Roraima and Amazonas are currently named "Espaços de Educação, Proteção Contra a Violência e do Apoio Psicossocial para Crianças e Adolescentes Migrantes e Refugiados (EPAPs)"

FOOD DISTRIBUTION



PEOPLE IN NEED 

54 K

PEOPLE TARGETED 

20 K

FINANCIAL REQUIREMENTS 

\$2.03 M

PARTNERS 

10

Priority Needs

Recent outflows of refugees and migrants from Venezuela are increasingly vulnerable and food distribution is essential as an emergency priority, especially for those in vulnerable conditions. This is a particular challenge at the border for indigenous Pemon communities and persons living in the streets. In April 2019, refugees and migrants reported food security as their second main priority³⁷ and an assessment³⁸ in late 2018 revealed that for people in the streets in Boa Vista, Pacaraima and 11 municipalities in Roraima, 33 per cent lacked access to food. Therefore, increased food distribution is urgently needed. The 20,000 packed meals, also known as *marmitas*, distributed by the Government in Boa Vista and Pacaraima on a daily basis are not nearly enough to meet the nutritional requirements of this continued outflow. The distributions are primarily received by people living in shelters, with any excess distributed to people in the streets, while local faith-based organizations also provide limited food support on an ad-hoc basis. Given this need, there are incidences of severe cases of malnutrition, especially among children and indigenous populations. In Manaus, there are additional needs for the approximately 2,000 people living in the street as well as individuals that will be relocated to transitional shelters in other cities throughout Brazil. In addition, it is estimated that in 2020, approximately 24,000 refugees and migrants from Venezuela will be relocated and 72 per cent of them will be in need of food assistance.

Response Strategy

The scope of the sector will be on continuing to provide food assistance to refugees and migrants living in the streets in Roraima and Amazonas states and to those relocated through the internal relocation program to the following states: São Paulo, Porto Velho, Brasília, Tubarão, São José, Curitiba and Colombo.

- Provide food to complement daily intake for vulnerable refugees and migrants living in the streets, spontaneous settlements, rented houses and indigenous communities in Roraima and Amazonas states and those relocated to other states.
- Support Venezuelan indigenous populations living in Brazilian Pemon communities in Roraima state with agricultural inputs (seeds, fertilizers, tools) to promote long-term food security, while providing in-kind food distribution.
- Distribution of cooked meals will be carried out for the most vulnerable refugees and migrants living in the streets of Roraima and Amazonas, including indigenous communities. In addition, refugees and migrants in spontaneous settlements and rented accommodation will be targeted to receive food through cash-based assistance or food baskets. The Pemon indigenous communities in Brazil will be provided with agricultural tools, seeds and fertilizers to increase their production capacity in order to meet the basic food requirements of Venezuelan arrivals.
- In coordination with the Protection sector, profiling and targeting of vulnerable beneficiaries for assistance will be conducted for the provision of food items.

HEALTH



PEOPLE IN NEED 

253 K

PEOPLE TARGETED 

90 K

FINANCIAL REQUIREMENTS 

\$5.84 M

PARTNERS

10

Priority Needs

In Brazil, the public health system, (Sistema Único de Saúde - SUS), generally provides universal access to the population

without discrimination. However, in the current context local health services have faced increased demands for care, far

37 IOM (April 2019), Displacement Tracking Matrix (DTM) in Brazil.

38 IOM (October 2019), Displacement Tracking Matrix (DTM) in Brazil

exceeding local capacities, particularly in the state of Roraima, where local health systems were already stretched before the influx of refugee and migrant arrivals. At the Advanced Care Post (Posto de Atendimento Avançado in Portuguese) on the border in Roraima, there is capacity for emergency medical care, patient isolation and vaccination³⁹. However, due to the flow of arrivals and resulting demands, the support provided is not sufficient to meet health needs. The need is particularly acute for pregnant women, given local health capacities and 68 per cent of refugees and migrants from Venezuela respondents stated that they did not have access to reproductive health services during the last year, while 7 per cent reported that they suffer from a chronic health condition.⁴⁰ In a recent assessment, a small number of refugees and migrants reported having one or more members of their household with physical or mental disabilities, but less than half of them reported receiving proper care at the time of the data collection, showing a gap in the adequate treatment and attention for this demographic profile⁴¹.

A comprehensive health situation analysis is needed to define the sector response in order to strengthen local public health capacities and also to intervene in emergency health situations. The analysis will provide an in-depth needs assessment and identify key stakeholders, resources, gaps and emergency response needs in Roraima, Amazonas and other regions with a high concentration of Venezuelan refugees and migrants in vulnerable conditions, while also considering the needs of host communities. It will analyze key official data on access and coverage of health services and interventions -especially primary healthcare-, epidemiological data, secondary data and the availability of health professionals, among others.

Response Strategy

The health sector will incorporate approaches based on health equity, gender and ethnic equality and right to health, under a framework of shared responsibility among national and subnational levels of governments, institutions and authorities. The response aims to support the integration of the health needs of refugees and migrants from Venezuela into national health policies, strategies and programmes to access to health for refugees and migrants, as well as that of host communities, bridging the short-term emergency response with medium to long-term actions. The Health sector will carry out capacity development, facilitate access to public services and provide in-kind support as appropriate, targeting the most vulnerable and persons in need of emergency healthcare, with particular attention to the differentiated needs of indigenous populations. The Health Sector will therefore focus on:

- Strengthening health surveillance, information management and monitoring.
- Improving universal access to health services, both access and coverage, for refugees, migrants and the host population,

with a focus on immunization, reproductive, maternal and child health and serious and chronic illnesses, with particular attention to the most vulnerable groups, such as indigenous people, pregnant women and adolescents, children under five, LGBTI population, persons with disabilities, including refugees and migrants living in the streets.

- Promoting access to mental healthcare and psychosocial support, in collaboration with protection actors.
- In order to strengthen health surveillance, information management and monitoring, assessments will be carried out to identify health needs of Venezuelans and host communities, as well as health systems gaps to respond to these needs, including specific and common gaps related to access and coverage in communities. Based on the identification of health needs, support will be provided to improve the epidemiological surveillance and information management capacities of local governments and national health surveillance and systems in order to better capture the health status and needs of Venezuelan refugees and migrants.
- Health workforce training and capacity building will be provided, tailored to situations of displacement, including tailored capacity building on mental health and psychosocial support.
- Partners will coordinate with Government actors to incorporate refugee and migrant needs into the national immunization schedule and promote strategies to improve access to sexual and reproductive, maternal and child healthcare and care for persons with serious and chronic illnesses.
- Direct support will be provided both for preventative and reactive care. Prevention and control interventions will be implemented, including short term and longer-term responses for the management of communicable diseases, non-communicable diseases, mental health and risk factors, recognizing the importance of integrated interventions based on the different needs of refugees and migrants and considering key determinants of health, such as age, gender, education, cultural sensitivity, and the nature of the trauma.
- Mobile health units will be deployed to provide basic health services, with a focus on people living in the streets or occupations in Roraima. Community champions and community-based mutual support groups will be established to promote mental health.

Considering the context of the refugee and migrant flow and processes of integration and relocation of refugees and migrants, the Health Sector response strategy will be coordinated with different government entities and at all levels (federal, state and municipal), as well as with other relevant sectors. To facilitate access to primary healthcare, case identification will be coordinated with the shelter, protection and integration sectors.

39 Inter-Agency Coordination Platform (2019), RMRP Brazil Chapter Mid-Year Report..

40 IOM (April 2019), Displacement Tracking Matrix (DTM) in Brazil; UNAIDS (2019), Joint Mission Report in Brazil. https://brazil.iom.int/sites/default/files/Publications/OIM%20Brasil%20-%20DTM_Junho.pdf

41 UNHCR-Reach (July 2019), Socio-economic and vulnerability profiling exercise.

INTEGRATION AND RELOCATION



PEOPLE IN NEED 

180 K

PEOPLE TARGETED 

78 K

FINANCIAL REQUIREMENTS 

\$15.28 M

PARTNERS 

23

Priority Needs

Despite the high level of formal education amongst refugees and migrants from Venezuela, many report a lack of economic opportunities in Roraima⁴². 60 per cent of the refugees and migrants now in Brazil were employed or working independently in Venezuela, while in Roraima, 60 per cent are unemployed, 33 per cent self-employed and only 6 per cent regularly employed⁴³. Among the 6 per cent employed, 72 per cent did not have an employment contract, illustrating the prevalence of informal job opportunities. In addition, 76 per cent of households reported having at least one member working, mainly in informal odd jobs, and 71 per cent report being unaware of their labour rights⁴⁴. Nevertheless, Government data⁴⁵ showed that 37,224 special labour permits were issued for refugees and migrants from Venezuela in 2018 (38 per cent for women), while 26,641 were issued in 2019, 20,806 of which in Roraima alone. In 2019, 7,848 refugees and migrants from Venezuela accessed formal jobs, the majority in the southern and south-eastern regions of the country, where there is a concentration of industry. Because of the scarcity of livelihoods opportunities in the north of Brazil, voluntary internal relocation is key in linking the humanitarian response with the long-term sustainable socio-economic and labour market integration of refugees and migrants from Venezuela in Brazil. The lack of sufficient sex- and age-disaggregated data poses additional challenges for an integration and relocation strategy that equally benefits women, men, boys and girls.

As of August 2019, 14,643 refugees and migrants from Venezuela⁴⁶ have been internally relocated through different modalities (42% women) to the 24 Brazilian states and the Federal District. For refugees and migrants from Venezuela living in the state of Roraima, day-care for small children is effectively inexistent, while 55 per cent of school-aged children are not attending school and 26 per cent of households are in need of healthcare but unable to access it. This reality generates particular challenges for women's local integration. In addition, relocation gives rise to integration needs in all destination cities. To ensure long-term sustainable integration, relocation and socioeconomic inclusion activities must prevent and respond to specific challenges, risks, needs and dynamics related to age, gender and diversity (AGD), including people with disabilities and indigenous populations.

Response Strategy

The focus of integration support by RMRP partners will be throughout the five macro-regions⁴⁷ of Brazil: North, Northeast, Central-West, Southeast, South.

- **Voluntary internal relocation:** To strengthen the national strategy of the Interiorization programme and the internal relocation programme in an organized and sustainable manner. Relocation will be facilitated through diverse interventions, all from an AGD-approach. To facilitate initial relocation in an informed and voluntary manner, logistics support, including air and ground transportation, medical assessments, transit assistance, cash-based interventions and pre-departure orientation will be provided. Increased support will be provided to strengthen the Transit Hub in Manaus. The relocation process will be supported through strengthening registration systems and information on relocation flows. Assistance for the initial settlement in the destination city will be provided, including CBI. Partners will work to strengthen the capacity of host states, municipalities and civil society organizations (CSOs) to receive relocation fluxes, including building up shelter exit strategies. Advocacy will be carried out with CSOs, the private sector and local, state and Federal Governments to identify new opportunities for relocation and socio-economic integration for women and men, girls and boys, taking into consideration beneficiaries' medical needs and health service capacities in host cities. Feedback mechanisms will be put in place to monitor and evaluate outcomes to ensure AAP.
- **Economic integration:** To facilitate equal access of women and men from Venezuela to formal employment and entrepreneurship, enhance access to livelihoods opportunities, financial services, diploma revalidation and recognition of certificates, in all regions. In order to promote socioeconomic integration, partners will develop labour market assessments, socioeconomic and vocational profiles of refugees and migrants from Venezuela and produce AGD-disaggregated data and evidence-based recommendations for employment strategies. RMRP partners will develop a database to connect jobseekers to potential opportunities and strengthen civil society capacity for the job placement

42 IOM (April 2019), Displacement Tracking Matrix (DTM) in Brazil

43 UNHCR-Reach (July 2019), Socio-economic and vulnerability profiling exercise.

44 Reach (November 2018), Report on Venezuelan migration in northern Brazil (http://www.reachresourcecentre.info/system/files/resource-documents/reach_bra_report_ina_venezuelan_migration_northern_brazil_november_2018_en.pdf)

45 See OBMIGRA Annual Report 2019. Available at: <https://portaldeimigracao.mj.gov.br/pt/dados/relatorios-a>

46 IOM (April - August 2019), Relocation Report in Brazil.

47 Brazilian Institute of Geography and Statistics (IBGE) and the Federal Constitution of Brazil.

of Venezuelan men and women. Simultaneously, partners will strengthen links with the private sector to advocate for the employment of refugees and migrants, promoting awareness, corporate social responsibility, ethical recruitment and financial inclusion. Governments at all levels will be engaged to prevent and respond to labour exploitation, including in the context of domestic work and human trafficking/smuggling in persons. Partners will also support labour insertion activities for refugees and migrants that include curriculum development, interview preparation, job placements, support to access to Portuguese classes, vocational trainings and promoting access to entrepreneurship, self-employment and other potential income generating activities. All activities will be carried out with a view to address the specific obstacles faced by women and partners will advocate for free and affordable childcare, care for people with disabilities, elderly and people with medical conditions, as well as promote equal distribution of care activities between men and women. Tailored assessments and strategies will be developed for indigenous populations

- **Social integration:** To facilitate equal access of women and men from Venezuela, girls and boys to rights and services that support their inclusion, including access to housing, health, education, culture, social assistance and local systems to guarantee the protection of rights, in all regions. In order to facilitate social integration, partners will ensure that target populations meaningfully participate and influence the humanitarian and solution-oriented response and have access to information on rights and services. A mapping of public services and programmes and development of AGD-responsive referral pathways in destination states and municipalities will include public and

private housing, health, educational and social assistance and protection networks and local support services. Partners will assess policies and identify good practices to provide evidence-based support for enhanced governance and coordination, including local coordinating mechanisms such as municipal and state level committees and networks of CSOs. Partners will also develop Support Spaces, peer-to-peer support and solidarity networks through participatory methodologies and community projects for coexistence with host communities. Partners will leverage digital inclusion activities to provide post-arrival support, including CBI and access to documentation. AGD-sensitive capacity development activities and trainings will be provided to all humanitarian actors. Communication initiatives, including a national campaign to address xenophobia and discrimination, will disseminate messages of the fundamental human rights of refugees and migrants and peaceful coexistence. Partners will also support cultural activities and sports activities with a particular social cohesion focus.

The Integration sector will work closely with protection to produce AGD sensitive materials on refugees' and migrants' rights and access to public services, including innovation and digital inclusion activities; to promote safe employment and to address labour exploitation and human trafficking; and to mainstream protection needs in all parts of the voluntary relocation process. With the Health and Education sectors, partners will promote access to healthcare, education, childcare, care for people with disabilities, elderly and people with medical conditions. Campaigns to address xenophobia and discrimination will be developed alongside the Communications Working Group.

NUTRITION



PEOPLE IN NEED 

36 K

PEOPLE TARGETED 

22 K

FINANCIAL REQUIREMENTS 

\$1.22 M

PARTNERS 

2

Priority Needs

The health and nutritional status of newly arriving refugees and migrants from Venezuela is increasingly worsening, putting great pressure on the Brazilian health system. In Boa Vista, 37 per cent of refugee and migrant from Venezuela households do not have a dependable or consistent income⁴⁸, which hampers access to a quality and balanced diet. Food is

the second or third priority need expressed by refugees and migrants also in Pacaraima and Manaus⁴⁹. An anthropometric evaluation conducted in nine shelters located in Boa Vista and Pacaraima, including two indigenous shelters, showed that pregnant adolescent girls are the group at highest risk of poor nutrition and health⁵⁰ while there were significant

48 UNHCR/REACH (July 2019). Situation Overview: Profiles of Venezuelan Persons of Concern in Boa Vista, Roraima State.

49 UNHCR-Reach (August 2019), Socio-economic and vulnerability profiling exercise.

50 UNICEF (June 2019). Anthropometric Profiling.

proportions of children showing signs of malnutrition, with higher rates of stunting among indigenous compared to the non-indigenous. The anthropometric evaluation of pregnant women conducted in six shelters⁵¹ shows that 19 per cent of women to be underweight, with an even higher rate among pregnant adolescent girls. The access of pregnant women to iron and folic acid supplementation was also evaluated, in which only 11 per cent and 19 per cent had access to these, respectively. Among all children evaluated, 7.7 per cent had low weight-for-age and 19.7 per cent were classified as stunted. There were significant differences between the indigenous and non-indigenous population, in which for the first group, 10.6 per cent of children had low weight-for-age, and 36.6 per cent were classified as stunted, followed by 6.9 per cent and 15 per cent respectively for non-indigenous children.

Response Strategy

The Nutrition sector response will target refugees and migrants from Venezuela with a particular focus on women and children in Pacaraima, Boa Vista (Roraima), Manaus (Amazonas) and the main destinations of the internal relocation programme, to prevent and treat the occurrence of malnutrition. Outside of shelters, activities will be scaled up to reach populations in private dwellings or living in a street situation.

In response to this situation, the Nutrition sector will focus around the following nutrition priorities:

- Prevention of stunting, wasting and micronutrient deficiencies in the refugee and migrant population from Venezuela in and outside of shelters, with particular focus on children under five and indigenous populations. Systems for nutritional assessment and surveillance will be established or reinforced to identify the type, degree and extent of malnutrition, those most at risk and the appropriate response. The prevention of stunting, wasting and micronutrient deficiencies in children under five will be achieved through support to caregivers, as well as to pregnant and lactating women to practice optimal infant and young child feeding (IYCF). Parent/caregiver groups will also be organized for those with children under five years old. An action plan for the nutritional recovery of children with moderate and acute malnutrition will be established. Provision of food to the most vulnerable families through cash-based intervention will complement these efforts when appropriate.

- Reinforcement of maternal nutritional intake and prevention of anaemia, especially in pregnant adolescents. In order to reinforce maternal nutrition, quality anthropometric evaluations and nutritional status monitoring of pregnant women inside and outside of shelters will be carried out, complemented by referrals to health services for prenatal care. Iron and folic acid supplementation for pregnant women and adolescents will be promoted as well as the protection of non-pregnant adolescent girls from anaemia. Pregnant and lactating women will be supported to practice optimal infant and young child feeding (IYCF), while pregnant women's groups will be organized to improve their knowledge on their rights, good health and nutrition. Lastly, informative materials will be produced and distributed to prevent malnutrition during pregnancy and promote wellbeing.

Strengthening of the local public health system and nutrition facilities. The strengthening of the local public health system will be achieved through support and training to basic health units and workers. Specifically, the creation of reference and counter-reference flows for the treatment and recovery of children with severe malnutrition, and pregnant women will be promoted. Special support will be provided to Basic Health Units who provide care to children and pregnant women with malnutrition. Health, nutrition and education professionals and social workers will be trained to promote proper nutrition among children under 5 and pregnant Venezuelan and Brazilian women. Lastly, local health managers will be supported to strengthen food provision and nutrition activities. Nutrition activities will be tightly integrated with Child Protection sector programming in the detection and referral of cases of violence and psychosocial support as well as addressing negative coping mechanisms, such as early marriage or transactional sex, induced by poor nutrition. Intersectionality with Health sector will address potential underlying causes of malnutrition. WASH complementarity will reduce diarrhoea morbidity through proper water and sanitation in health structures and in households, particularly in those with children. A Communication for Development (C4D) approach will also use focus group discussions, material distribution, mass information and workshops to promote behavioural change.

PROTECTION



PEOPLE IN NEED 

289 K

PEOPLE TARGETED 

216 K

FINANCIAL REQUIREMENTS 

\$20.04 M

PARTNERS 

20

Priority Needs

Refugees and migrants from Venezuela entering Brazil face a range of protection risks associated with their displacement. Incidents of discrimination, violence and exploitation coupled with limited livelihoods opportunities⁵² challenge resilience abilities and may lead to risky and negative coping mechanisms, such as begging, domestic violence, exploitation, engagement with criminal activities or survival sex. With a growing demand for assistance, local protection networks are overstretched, affecting timely identification, response and monitoring of protection cases. Mechanisms to identify and mitigate risks of exploitation and trafficking/smuggling in persons are weak and there is a lack of safe community and family-based care arrangements for unaccompanied and separated children, resulting in over-reliance on institutional care. Critical gaps in knowledge of rights and services amongst refugees and migrants also remain⁵³.

The effects of displacement are further heightened for groups or persons in more vulnerable situations, including unaccompanied and separated children (UASC), GBV survivors, victims of human trafficking, LGBTI persons at risk, persons with serious medical conditions, vulnerable indigenous people and elderly. Refugees and migrants in border cities and those relocated to other parts of the country are vulnerable to GBV, human trafficking and forced labour. Domestic workers, primarily women and girls, are subjected to exploitative situations, rape and sexual assault. LGBTI persons are at risk of violence due to their sexual orientation or gender identity, including sexual assault, trafficking networks for sexual exploitation and survival sex. HIV/AIDS⁵⁴ and other sexually transmitted infections (STIs), early and unwanted pregnancies, and ostracism by family and communities are concerns reported by service providers. Human trafficking and other forms of modern slavery are becoming more frequent, as refugees and migrants from Venezuela living in Brazil are being recruited for labour exploitation in Roraima and other states in Brazil⁵⁵. Despite the fact that these situations are exacerbated in humanitarian contexts⁵⁶, they tend to be underreported, making it difficult to respond adequately⁵⁷.

Despite the registration and documentation centres set up by authorities, the growing number of refugees and migrants from Venezuela entering the country has surpassed the capacity of national authorities to issue documentation to all new arrivals in a timely manner. Pre-documentation support, including counselling, and preparation of documentation needed, and counselling for migratory regularization and access to asylum in Brazil by RMRP partners remains a critical preparatory step for refugees and migrants from Venezuela regularizing their status in the country. This support was provided for more 90,000 refugees and migrants in 2018 and the demand increases each year, with support needed for renewal processes for asylum-seekers after one year and residents after two years.

In addition, comprehensive mapping and strengthening of services in Local Protection Networks in the 24 Brazilian states and the Federal District that are receiving refugees and migrants through the various modalities of voluntary internal relocation is still needed.

Response Strategy

RMRP partners will continue to strengthen the protection risks prevention, mitigation and response capacity of the Government of Brazil for refugees and migrants from Venezuela by implementing a wide range of age, gender and diversity-sensitive activities for addressing the protection needs of the most vulnerable refugees and migrants from Venezuela in Roraima, Amazonas and other states with the highest concentration of refugees and migrants, namely relocation states, while prioritizing co-existence with host communities. In so doing, the sector will focus on:

- Support the provision of legal assistance, specialized protection services, alternative care arrangements and capacity building of authorities and relevant stakeholders to adequately prevent and respond to protection needs.
- Strengthen the identification, support, referral and monitoring of refugees and migrants from Venezuela in need of protection assistance through multi-stakeholder

52 UNHCR-Reach Report: Situation Overview: Venezuelan asylum seekers and migrants living outside of shelters, Manaus, Boa Vista and Pacaraima city, November 2018, as well as socio-economic and vulnerability profiling exercise, July 2019.

53 ^{ibid}: The majority of participants indicated a low level of awareness of existing legal services and institutions to be accessed in case of violated rights.

54 Human immunodeficiency virus infection and acquired immune deficiency syndrome.

55 Department of State (June 2019), Trafficking in Person Report, available at <https://www.state.gov/wp-content/uploads/2019/06/2019-Trafficking-in-Persons-Report.pdf>

56 UNHCR-Reach (July 2019), Socio-economic and vulnerability profiling exercise.

57 ^{ibid}

mechanisms, standard operating procedures (SOPs) and common case management tools.

- Continue supporting registration and regularization of status (regularization, temporary residency permits and renewals, asylum) and facilitating the issuance of documentation by authorities for access to basic public services.
- Enhance the dissemination of culturally relevant information, the effective use of two-way-communication and community-based protection work to support refugees and migrants from Venezuela with informed decision making in all matters affecting their lives, including throughout internal relocation, with a focus on prevention and mitigation of violence, exploitation and abuse and enhancing peaceful coexistence.

Given the considerable number of people in need and the wide range of protection needs requiring specialized interventions, especially for GBV, child protection and human trafficking in persons, an adequate response requires enhanced coordination and complementarity of services between government stakeholders and humanitarian services.

RMRP partners will prioritize the presence at the border to receive refugees and migrants from Venezuela, monitor protection risks, and undertake interventions for vulnerable cases. Pre-documentation support and advice in Documentation Centres in Pacaraima, Boa Vista and Manaus, as well as family tracing, reestablishment of family links and recovery and delivery of personal documents will continue. Improved standardization of process and tools for protection case management and maximization of the use of the Support Spaces and Regional Safe Spaces Networks will be key will be important priorities to facilitate the identification, referral and management of individual cases in a coordinated manner. Specialized support will be provided to unaccompanied children and adolescents, including by

facilitating family reunification and availing community and family based alternative care arrangements, mainly in Manaus, Boa Vista and Pacaraima. Specific actions will be designed for the prevention of and response to GBV, sexual exploitation and abuse (SEA), human trafficking/smuggling in persons and other forms of violence. Non-formal education, and child protection services for children and adolescents will be provided through integrated interventions in fixed and mobile spaces.

Community-based initiatives will continue through the strengthening of networks such as Outreach Volunteers, Community Committees and other community-based structures, and the establishment of a community-based complaint mechanism at the municipal, state and federal levels. Capacity building will be a key element in the response through the provision of technical advice and assistance with the aim of building public policies, including for the enhancement of women's rights and empowerment. Assistance through Cash-Based Interventions (CBIs) will be prioritized for the most vulnerable refugees and migrants from Venezuela with acute protection needs.

Within Protection sector, RMRP partners, together with local institutions and authorities and community representatives work together to mainstream protection prevention and response, strengthen capacities and enhancing advocacy interventions to maximize effectiveness and joint efforts, including in fundraising. Enhancing protection screening prior and throughout Interiorization to ensure proper follow-up for special needs and mitigate risks. Concerted efforts will be made to ensure protection mainstreaming in other sectors of the humanitarian response, from planning, implementation to monitoring through specialized training to authorities and different stakeholders with efforts to report disaggregated data by age, gender and diversity, including indigenous communities.

SHELTER / NON FOOD ITEMS



	PEOPLE IN NEED	PEOPLE TARGETED	FINANCIAL REQUIREMENTS	PARTNERS
	108 K	83 K	\$15.3 M	13
	216 K	136 K	\$4.3 M	11

Priority Needs

In Brazil, United Nations (UN) agencies, Non-Governmental Organizations (NGOs), faith-based organizations and academia support the Government's efforts to provide shelter and NFIs

in the border states of Roraima and Amazonas, where the majority of refugees and migrants from Venezuela arrive,

frequently in vulnerable conditions and in urgent need of humanitarian assistance.

As of August 2019, approximately 7,000 refugees and migrants from Venezuela (including indigenous persons) were accommodated in 13 shelters in Boa Vista and Pacaraima, with about 2,000 more in 15 shelters in other northern cities such as Belém, Santarém and Manaus. Indigenous shelters are overpopulated and not well aligned to the cultures and traditions of the populations hosted. Despite the Government's voluntary internal relocation programme, there is limited shelter capacity and slow rotation out of shelters. As a result, approximately 4,000 people in Roraima (Boa Vista and Pacaraima) sleep in the open, exposed to extreme weather conditions and protection risks. Refugees and migrants from Venezuela living in rented housing are reported lacking formal rental contracts, relying instead on informal agreements that might result in arbitrary evictions, confiscation, exploitation and abuse. Lack of WASH infrastructure in rented accommodations and spontaneous settlements has been widely reported, contributing to health problems, including skin diseases, breathing conditions and flu⁵⁸. While the largest concentration of persons benefitting from shelter assistance is in the northern State of Roraima, it is important to note that there are approximately 40 shelters in states across five regions also providing assistance as part of the Government's internal relocation programme. There is a need to continue providing emergency shelter assistance for both indigenous and non-indigenous refugees and migrants, while at the same time working on a shelter-exit strategy closely linked to urban out-of-shelter assistance.

Throughout 2019, a variety of NFIs, including mattresses, blankets, hygiene kits, diapers (both baby and geriatric), cleaning materials, kitchen sets, sanitary pads and tarpaulins, were distributed in and outside shelters in Roraima. However, additional needs and gaps continue to arise due to the increasing outflow of refugees and migrants from Venezuela entering Brazil. As of August 2019⁵⁹, 14,643 Venezuelans refugees and migrants from Venezuela were internally relocated, with many in need of additional NFI assistance. Despite the continuing efforts of the government and RMRP partners to provide such assistance, assessments⁶⁰ revealed that for people living in the streets in Boa Vista, Pacaraima and in 11 municipalities in Roraima, approximately 70 per cent were in need of basic NFIs. Given this reality, there is a pressing need to allocate more resources to shelter assistance and to the provision of NFIs for affected populations.

Response Strategy

The provision of shelter and NFI assistance will focus on the areas noted in the above section detailing the corresponding needs, both in terms of geographic focus and thematic interventions.

- Provide culturally adapted emergency shelters in Amazonas and Roraima states for the indigenous and non-indigenous

population, and transitional shelter solutions for those who have been relocated to other states, in the context of continuous arrivals and increasing numbers of vulnerable people in street situations and spontaneous settlements at risk of forced eviction.

- Improve the living conditions of refugees and migrants from Venezuela through the maintenance and upgrade of existing shelter-sites, taking into account risk prevention for specific population groups, including indigenous, LGBTI, single men, women, families, persons with limited mobility.
- Continue the provision of NFIs assistance in and outside of shelters throughout Roraima and Amazonas states as well as in states hosting relocated refugees and migrants from Venezuela. Ensure access to NFIs as part of a relocation kit.
- Preposition in-kind emergency and NFI stocks for contingency planning.

Partners will continue to coordinate with the Government of Brazil to maintain shelter infrastructure as well as manage shelter sites, through community-based organizations, protection referrals and NFI distribution, among other activities. The provision of emergency and transitional shelter solutions will be done in close coordination with the protection sector in order to ensure shelter sites provide adequate conditions for persons with specific needs as well as throughout the shelter allocation process in order to prioritize the most vulnerable. To ensure sustainability of the response, there will be a series of capacity building activities such as Camp Coordination and Camp Management (CCCM) workshops, training of trainers (ToT), capacity building and training of committees mainstreaming a protection approach and the prevention of gender-based violence. Rental cash assistance will also be utilized to address out of shelter needs.

Regarding NFIs, there will be distribution committees ensuring the use of harmonized distribution lists, systems and procedures for NFIs, cash and voucher distribution. More specifically a monthly distribution plan of specific relief items such as mattresses, blankets and/or hammocks will be prepared. There will also be trainings on the processes and techniques to conduct post distribution monitoring (PDM) to ensure that assistance is appropriately targeted and responsive to the needs of refugees and migrants. Partners aim to position an emergency NFI stock for 10,000 individuals.

Throughout the country, Government, UN and NGO partners providing shelter and NFI assistance collaborate on intersectoral issues. Along with the urgent need for shelter and NFI support, the continuing outflow of refugees and migrants from Venezuela into the northern states of Brazil exacerbates protection concerns among vulnerable displaced communities. In coordination with the protection sector, profiling and targeting of vulnerable beneficiaries for assistance will be conducted for shelter allocation and provision of non-food items. In addition to the Protection and WASH sectors, there will be close coordination

58 UNHCR-Reach (July 2019), Socio-economic and vulnerability profiling exercise.

59 IOM (August 2019), Report on Reallocation in Brazil

60 IOM (October 2018), Displacement Tracking Matrix in Brazil

activities with the Integration sector contributing to the general shelter exit strategy. This will include implementation of various activities, including vocational training, language classes, labour

insertion and social integration activities, in order to work towards a more efficient rotation out of shelter and reduce the population living in the streets.

WASH



PEOPLE IN NEED 

108 K

PEOPLE TARGETED 

90 K

FINANCIAL REQUIREMENTS 

\$5.31 M

PARTNERS 

6

Priority Needs

In shelters, infrastructures are still inadequate to cater for the number of hosted people. Open sewers, scarce numbers of water points, insufficient water pressure, clogged toilets and poor maintenance constitute a daily reality and hygiene is scarce. Moreover, weak water installations break easily under heavy use and water spillage is common. Living conditions are worse in the two shelters hosting indigenous groups: Janokoida in Pacaraima and Pintolândia in Boa Vista. Outside of shelters, the situation in dwellings is precarious where, for example, in Boa Vista, 20 per cent of households declare having sanitation issues and 11 per cent living in overcrowded spaces, unsafe structures with lack of running water and/or lack of electricity, especially for female headed households, who comprise 24 per cent of the population⁶¹.

Response Strategy

WASH interventions will primarily be targeted to the northern states of Roraima, Amazonas and Pará for both in and outside shelter populations. To reduce mortality and morbidity related to water and vector borne disease that might weaken or aggravate the nutritional status of women and children, the sector will: provide timely, equitable access to safe water, sanitation and hygiene for refugees and migrants from Venezuela in shelters, outside of shelters and living in the street, including support to municipalities in building resilience and absorbing the increased demand of WASH services.

- Activities in shelters will consist of establishing a maintenance and repair system for WASH infrastructure, while also ensuring safety, security and dignity for women, girls and LGBTI persons.
- A C4D/communication with communities (CwC) campaign on hygiene promotion will be carried out.
- With regard to resilience and institutional support, the WASH sector will also support municipalities in the provision of services in neighbourhoods with high concentrations of refugees and migrants, including the installation of water points and public toilets as well as supporting the provision of adequate WASH facilities in schools, health and public child protection related structures.
- The sector will also support health, water and sanitation municipal authorities in absorbing the increased demand and provide training to health and water or sanitation professionals involved in the response.

The sector intervention will use age and gender disaggregated data on nutritional status, mortality and access to WASH services, to determine profiles that are most at risk of poor nutrition and health. WASH interventions will reach out to schools, health and public child protection related structures, while coordinating closely with the Shelter and NFI sector for infrastructure and its distribution of hygiene items.

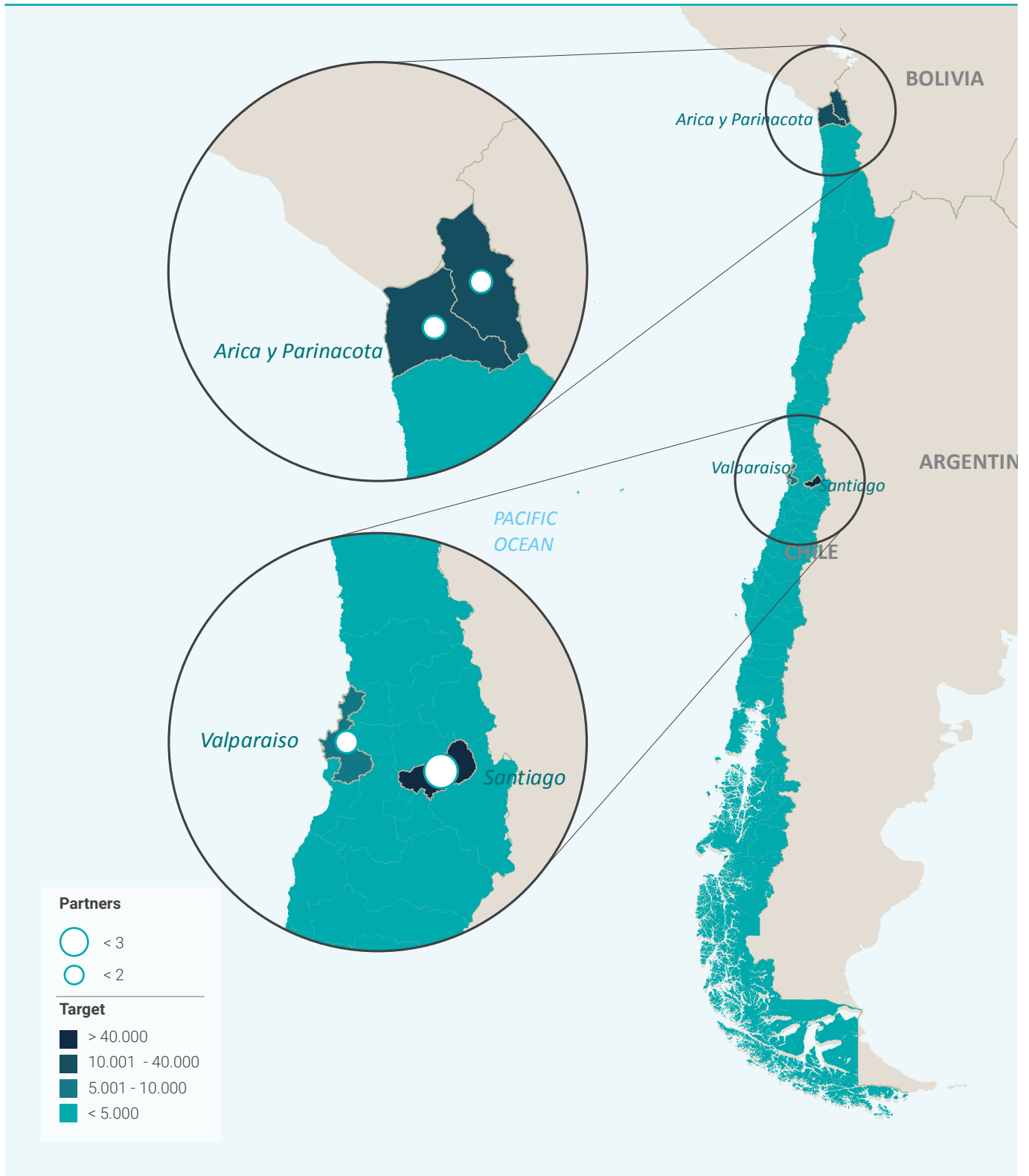
61 REACH/UNHCR (August 2019), Situation Overview: Profiles of Venezuelan Persons of Concern in Boa Vista, Roraima State

CHILE











CHILE

POPULATION PROJECTION 2020	PEOPLE IN NEED*	PEOPLE TARGETED*	FINANCIAL REQUIREMENTS	RMRP PARTNERS
VENEZ. IN DESTINATION 472 K	295 K	145 K	\$31.5 M	17
HOST COMMUNITY --	120 K	109 K		






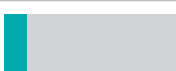














NUMBER AND FINANCIAL REQUIREMENTS BY ORGANIZATION TYPE

		Organizations		Financial Requirements
International NGO		2		3.66%
National NGO		1		0.28%
Others*		6		6.61%
UN Agencies		8		89.45%

*Other include Red Cross movement, academia, civil society and faith-based organizations.

The list of organizations and RMRP partners only includes appealing organizations under the RMRP. Many of these organizations collaborate with implementing partners to carry out RMRP activities.

POPULATION IN NEED AND TARGET, FINANCIAL REQUIREMENTS AND NUMBER OF PARTNERS BY SECTOR

		People targeted*		People in need*		Financial Requirements (USD)		Partners
Education		11 K		149 K		876 K		5
Health		23 K		179 K		280 K		6
Integration		70 K		294 K		20.53 M		12
Multisector**		48 K		211 K		3.54 M		7
Protection***		145 K		283 K		4.69 M		9
Multipurpose CBI						835 K		3
Nutrition						26 K		1
Support services****						699 K		6

*The figure of People in Need and People Targeted does not include host communities | **Shelter/NFI/Food Security/WASH | *** Includes GBV, Child Protection, Human Trafficking & Smuggling
**** Communication, Coordination, Information Management and Fundraising

COUNTRY OVERVIEW

Summary findings of joint needs assessment and analysis

During 2019, with the crisis in Venezuela continuing unabated, Chile witnessed an important rise on the numbers of refugees and migrants from Venezuela arriving in the country, leading to an increase from 288,000 at the end of 2018, to some 371,163 refugees and migrants by June-2019. Chile's Metropolitan Region (Santiago) hosts 73.3 per cent of refugees and migrants from Venezuela. Other notable populations of refugees and migrants from Venezuela are located in Valparaíso (7.2%), Bío Bío (3.2%) and Maule (3.1%). As a result, Chile has become the third-largest host country for refugees and migrants from Venezuela in the region.

While the impact of the arrival and transit of increased numbers of refugees and migrants from Venezuela has been considerable, the Government of Chile has increasingly worked towards identifying solutions and responding to the needs of vulnerable refugees, migrants and host communities impacted directly and indirectly by the crisis in Venezuela. The introduction of a "Democratic Responsibility Visa" in April 2018 was one of the measures that the Government took to manage regular entries and residencies for Venezuelans. In 2019, the possibility of applying for this visa was expanded from Caracas and Puerto Ordaz - previously the only places where refugees and migrants could obtain the visa - to Chilean consulates in all countries. Subsequently, the government also issued "*salvoconductos*" – permissions to entry and stay in exceptional cases.

Nonetheless, the introduction of the Consular Tourist Visa in June 2019 has limited the possibility for refugees and migrants from Venezuela to access territory and benefit from regular status and, as a result, has impacted access to rights and services. Some refugees and migrants from Venezuela are entering irregularly, exposing themselves to risks of human trafficking, smuggling, exploitation and/or abuse, and hindering their access to public services and documentation.

During the first half of 2019, the country has received a more diverse outflow of refugees and migrants from Venezuela, many arriving in vulnerable situations. For example, it has been noted that an increased number of those coming to Chile arrive with families that include pregnant women, children and elderly. There is also concern about cases involving separated or unaccompanied children (UASC) from Venezuela entering the country by irregular means.⁶²

RESPONSE STRATEGY

Planning scenario

The scenario considered when planning for the Refugee and Migrant Response Plan (RMRP) 2020 in Chile includes a potential slight rise in the rate of arrivals based on measures taken by the Government of Chile and by other countries, such as visa and documentation requirements, and border closures, among others, and that the overall migratory policy and asylum requirements to enter the country continue. In addition, an increase in the irregular entries to the country and persons whose migratory status becomes irregular (overstays of tourist visas or regular stay, expired residencies) are expected. The National Inter-Agency Coordination Platform has also considered possible difficulties related to adjusting migratory categories and with obtaining regular status following the potential adoption of the new migration law.

This context in turn may lead to a growing trend towards family reunification and the need for educational inclusion of children and adolescents. Following the trends during 2019, refugees and migrants from Venezuela will continue to settle mainly in the Metropolitan Region (Santiago), with a gradual increase also in the number of refugees and migrants from Venezuela residing in southern Chile and possibly in rural areas. There will continue to be an ongoing diversification of the profiles of the refugee and migrant population that reaches Chile, increasing the population that is at risk and/or presents specific needs, including separated or unaccompanied children and adolescents, elderly, individuals with critical or chronic illnesses, persons with disabilities, individuals living with HIV/AIDS⁶³, pregnant women, members of the Lesbian, Gay, Bisexual, Transgender, Intersex (LGBTI) community, among others.

The risk of negative reactions in local communities towards refugees and migrants from Venezuela is growing, including a fear of saturation/collapse of public services, such as public healthcare services or schools, with a possible increase in tensions in the context of municipal elections and elections of regional governors that will take place in October 2020.

Scope of the response

The strategy of the response will focus on complementing the public policies, developed by the Government, through the implementation of social programs that benefit the population residing in the country, in relation to education, housing, health and inclusion. When necessary, support to refugees and migrants from Venezuela will be provided through direct assistance to the population in need, in coordination with stakeholders and institutions. These interventions will be critical in areas with high percentages of refugee and migrant populations and will include the provision of specialized technical assistance to government and civil society entities.

62 Information gathered during the application of the Protection Monitoring Tool (UNHCR), visits and individual interviews with refugees and migrants from Venezuela.

63 Human Immunodeficiency Virus / Acquired Immunodeficiency Syndrome

All activities will be marked by a gender, age and diversity (AGD) approach. Implementation will respect the centrality of protection principle, as well as ensure Accountability to Affected Populations (AAP), including the incorporation of consultations with affected individuals and opportunities for effective participation. Efforts will be made to promote different forms of community participation that will allow to periodically evaluate the needs and impact of the activities implemented. At the general level, RMRP partners will develop crosscutting strategies such as communications campaigns, information management and fundraising.

Age and Gender

Of the 17 appealing organizations 16 completed the Inter-Agency Standing Committee (IASC) Gender and Age Marker (GAM) in the RMRP 2020 planning phase. 84 per cent of them aim to mainstream gender equality. At present, 63 per cent plan to respond to both gender and age differences (Code 4), and

6 per cent organizations intend to address gender but not age in the RMRP-2020. Regarding to gender analysis, 44 per cent of the appealing organizations demonstrate a good analysis, 12 per cent a limited analysis and 44 per cent have not yet or not included an analysis of gender and/or age inequality, comparing conditions or barriers for different groups in the context. A good gender analysis allows organizations to tailor activities in order to enhance gender-sensitive response.

In Chile, all children have unrestricted access to the education system, irrespective of their migratory status and that of their parents. Some schools have restricted access due to lack of vacancies. The Education sector aims to improve access, permanence and completion of studies for refugee and migrant children in the inclusive formal education system, and to facilitate recognition of refugees' and migrants' certificates and diplomas, which will allow them to continue their studies and access the labour market.

EDUCATION



PEOPLE IN NEED 

151 K

PEOPLE TARGETED 

13 K

FINANCIAL REQUIREMENTS 

\$0.88 M

PARTNERS 

5

Priority needs

Significant progress has been made in terms of access to primary and secondary education through tools such as the Temporary School Identifier, which allows access to primary and secondary levels if the student does not have national identification documents or current residency permits. However, there are still significant challenges related to the availability of enrolment in areas with a high concentration of refugees and migrants from Venezuela, as well as access for higher education in cases involving individuals with irregular migratory status.

Challenges associated with the inclusion of refugee and migrant students from Venezuela in formal education systems have been identified, such as the absence of pedagogical practices that promote intercultural dialogue, the absence of initial and in-service teacher training that allows instructors to address refugee and migrant children's educational needs and the lack of strategies that promote curricular flexibility in contexts of cultural diversity⁶⁴. There are significant hurdles associated with the recognition of completed courses, degrees,

certificates and prior learning. Specifically, there are obstacles to recognizing higher education characterised by lengthy and costly administrative processes.

Response strategy

The Education sector response is focused on providing specialized technical assistance, direct support and comprehensive interventions in schools (providing tools to work in the classroom such as guidelines for the implementation of socio-emotional education and psychosocial support in teaching and learning contexts) and initiatives coordinated with stakeholders and institutions. Geographically, the response is focused on destination territories with a high concentration of Venezuelans such as in northern Chile (Arica and Antofagasta) and the Santiago area. The response priorities of partners from the Education Sector include educational planning; educational inclusion of children within the formal education system; the provision of safe and educational spaces for children; and the recognition of primary, secondary and higher education. In

64 UNESCO (2015). TERCE results report: Learning achievements. Available in Spanish at: <https://unesdoc.unesco.org/ark:/48223/pf0000243532>. Barrios-Valenzuela, LL. & Palou-Julián, B. (2014). Educación intercultural en Chile: la integración del alumnado extranjero en el sistema escolar. Educación y Educadores, 17(3), 405-426. Available in Spanish at: <https://dx.doi.org/10.5294/edu.2014.17.3.1>

particular, the following activities are planned by the Education sector partners for 2020:

- Specialized technical assistance for strengthening the capacities of the Ministry of Education to plan in contexts of large-scale human mobility;
- Creation of protocols for implementing the Regional Convention on the Recognition of Studies, Diplomas and Degrees in Higher Education in Latin America and the Caribbean;
- The implementation of workshops for refugees and migrants from Venezuela to recognize their higher-education studies;
- Support and provide information concerning access to education at the primary, secondary, tertiary and higher education levels;
- The implementation of educational interventions within primary and secondary schools to promote intercultural educational communities;
- Workshops to prepare refugees and migrants from Venezuela for examinations that allow them to work in public and private healthcare systems;
- The creation of an afterschool care centre for children;
- The creation of a network of schools in cities with a high concentration of refugee and migrant children and adolescents, in order to ensure that they enrol and that special scholarships are granted for priority cases.

HEALTH



PEOPLE IN NEED 

192 K

PEOPLE TARGETED 

35 K

FINANCIAL REQUIREMENTS 

\$0.28 M

PARTNERS 

6

Priority needs

The Chilean health system is composed of a mixed system of care composed of a public insurance, Fondo Nacional de Salud (FONASA; Chilean National Health Fund by its Spanish acronym), which is the National Health Fund, assisting low income households, and a private one Instituciones de Salud Previsional (ISAPRE; Pension Health Institutions Spanish acronym) being Pension Health Institutions. Emergency and life-threatening conditions need to be attended by any medical institution, irrespective of status. However, to receive regular healthcare, a person needs to be affiliated to one of these systems. Cases of discrimination or denied attention have been reported, which prevented persons in need, at occasions, to reach the public system for support. According to a study conducted by partners, more than 15 per cent of refugees and migrants from Venezuela living in Chile lack any access to healthcare. Among them, some groups are particularly affected by lack of access to a regular health care system, such as irregular refugees and migrants, children, adolescents and women, in particular during their pregnancy and the elderly.

Other factors that may hinder access to health to refugees and migrants from Venezuela include lack of information on how to access the health system, fear of discrimination, and postponement of healthcare due to other urgent needs.

Healthcare coverage for refugees and migrants from Venezuela is dependent on insurance status, requiring enrolment in the public insurance for informal workers and most refugees and migrants from Venezuela are not enrolled in any plan. However, they still require hospital admissions, especially in cases

of pregnancies, contusions (accidental injuries), digestive diseases, tumours and neoplasia, and respiratory diseases, which are the most common conditions among refugees and migrants from Venezuela. In addition, this population suffers a considerable level of chronic diseases, such as diabetes and hypertension, and shows signs of malnutrition. Mental health issues, drug abuse and Post-Traumatic Stress Disorder (PTSD) have also been common. Preventive medicine, vaccination and reproductive health for refugees and migrants from Venezuela are still unattended. No statistics on the health status and access to services by refugees and migrants from Venezuela are available yet.

Response strategy

In this context, RMRP partners aim to provide technical and financial cooperation to the authorities to strengthen the health response and access to healthcare for refugees and migrants from Venezuela. Additionally, information tools such as leaflets, workshops and talks will be offered to empower the community to understand the right to healthcare and the means to access services. The following activities will be developed at the national and local levels, with a focus on the municipalities with a greater presence of refugees and migrants from Venezuela.

- The actions of the Health sector will focus on promoting initiatives directed at increasing access to healthcare for refugees and migrants from Venezuela, including psychosocial support, guidance and support regarding

access to healthcare, and training community health and hygiene promoters. Based on this approach, the activities will contribute to strengthen the supply of public services; reduce barriers to effective access to healthcare for refugees and migrants from Venezuela; and provide direct assistance to people with health care needs.

- Partners will work on producing and disseminating information on the right to healthcare and to ensure access to health centres.
- Capacity building to strengthen government capacities to reach out to this population is part of the plan. RMRP partners will organize training and awareness raising activities for the promotion and protection of the right to

healthcare and access to services, directed at public officials, civil society organizations and communities themselves.

- RMRP partners will also coordinate to strengthen information systems and develop health status reports and access to healthcare for refugees and migrants from Venezuela.
- The coordination and participation of civil society organizations in the implementation of the Government's Migration and Health Plan of Action will be also conducted during 2020, which includes specific support for training to healthcare personnel and creating statistics regarding care refugees and migrants.

HUMANITARIAN ASSISTANCE (SHELTER, NFI, FOOD SECURITY, WASH)



PEOPLE IN NEED 

211 K

PEOPLE TARGETED 

48 K

FINANCIAL REQUIREMENTS 

\$3.54 M

PARTNERS 

7

Priority needs

According to the information gathered by a qualitative data survey carried out in Arica, Iquique and Antofagasta, there is a lack of shelter for refugees and migrants from Venezuela in both transit and destination locations. Additionally, there is an absence of facilities where refugees and migrants can access safe food, water and adequate nutrition. Finally, refugees and migrants from Venezuela require complementary assistance, including hygiene products, water facilities, latrines and clothing, both in transit and destination locations.

Response strategy

In 2020, this Sector aims to provide shelter, food and NFI support as well as humanitarian transportation assistance to refugees and migrants from Venezuela whenever needed, access to adequate nutritional services, drinking water, sanitation facilities and to promote preventative hygiene services for refugees and migrants from Venezuela.

- In 2020, RMRP partners plan to expand their coverage to cities such as Valparaíso and Concepción, while maintaining their response capacities in critical places, such as border areas, mainly in Arica, Antofagasta and Iquique, and ensuring continuity in the Metropolitan Region. The selection of the locations to target for the interventions is based on the higher concentration of refugees and migrants from Venezuela.

- Based on the needs identified, partners will improve existing shelter facilities and create new ones. New beds, cooking appliances, washing machines and kitchen items will be provided to all centres. In addition, the costs for basic services for shelters such as water, electricity, internet and gas will be covered. Human resources for managing the shelters will be selected and trained. Partners coordinating shelters will gather data systematically on persons hosted, disaggregated by age and gender. Shelters will have spaces for individuals, but also for families. A network on housing support will be in place as soon as feasible.
- Partners in Chile will also provide food kits and Non-Food Items (NFIs), including clothing and winter kits, for those people in need through state agencies or local partners, support spaces and mobile units. Water, Sanitation and Hygiene (WASH) will be secured through mobile units set up in public spaces that provide toilets, showers, potable water and the opportunity to wash clothing.

The planned activities complement services offered by the Government. Partners plan to create an early warning network to monitor and periodically evaluate local capacities, establish a protocol that ensures that efforts are not duplicated, but rather complement other actions.

INTEGRATION



PEOPLE IN NEED 

307 K

PEOPLE TARGETED 

81 K

FINANCIAL REQUIREMENTS 

\$20.53 M

PARTNERS 

12

Priority needs

Successful socio-economic and cultural integration benefits both refugees and migrants from Venezuela in Chile, as well as those communities hosting them. Refugees and migrants from Venezuela without a regular status that would enable access to the formal labour market are often required to take informal jobs, being more vulnerable to labour exploitation, as well as violence, human trafficking, and/or sexual abuse. Additionally, there is a need to strengthen labour intermediation mechanisms, in order to improve the access of refugees and migrants from Venezuela to decent jobs. Refugees and migrants from Venezuela lack a proper knowledge of their labour and trade union rights. There exists a lack of information on the hiring processes of the formal labour market and a need to certify competences and validate professional titles. Finally, given local market dynamics and requirements, refugees and migrants from Venezuela frequently don't have the required entrepreneurship skills and seed capital to start or strengthen their own businesses.

Response strategy

The Integration sector aims to promote and foster the socio-economic integration of refugees and migrants through decent jobs and income-generating opportunities, which are also key to support with remittances the family members that remained in Venezuela.

In 2020, Integration sector partners will:

- Support the recognition process of professional degrees, provide vocational trainings and skill certifications, in cooperation with the National Training and Employment Service (SENCE) and Chile Valora. Trainings will also be provided to employers' and workers' organizations. Advocacy for diploma recognition, the provision of technical, entrepreneurial and vocational courses, will be important activities to promote socio-economic and cultural integration.
- In order to combat signs of discrimination and xenophobia, which have begun to sprout, partners will also include initiatives and campaigns to address xenophobia and discrimination, designed with an age, gender and diversity approach to ensure an effective integration based on community engagement and social cohesion between refugees and migrants from Venezuela and host communities.
- Various initiatives will be designed to enhance access to livelihoods, in the areas of financial services, formal employment, and self-employment, fostering the synergies between labour migration and development.
- Entrepreneurship capacity building and seed capital will be provided to create new businesses or reinforce existing ones. In addition, strategic partnerships with private sector actors will focus on developing entrepreneurship programs for refugees and migrants from Venezuela.
- RMRP partners will promote spaces and job fairs to match labour supply and demand, in coordination with government authorities, municipalities and private sector entities. In this context, these activities will go hand-in-hand with support to members of host communities in all these processes, in order to reduce social tensions and establish constructive engagement between communities.

PROTECTION



PEOPLE IN NEED 

305 K

PEOPLE TARGETED 

166 K

FINANCIAL REQUIREMENTS 

\$4.69 M

PARTNERS 

9

Priority needs

There is an urgent need to strengthen and improve existing information systems so that people who enter the country or wish to do so have current, timely and pertinent information regarding requirements for accessing the territory, the procedure for regularization and asylum procedures, documentation and access to rights in general. Recent changes and updates regarding requirements must be communicated as clearly as possible to refugees and migrants. Human trafficking is one of the most serious violations suffered by migrants and refugees seeking to enter the country. Cases of smuggling, abuse, exploitation and Gender-Based Violence (GBV) are potentially increasing, in particular among those entering in an irregular way. Family separation and a high prevalence of UASC are other common protection concerns.

Joint capacity building of all actors involved in the response, especially those in direct contact with refugees and migrants from Venezuela is another priority. Governmental forces, institutions, organizations, civil society and the communities need to have access to structured capacity building to improve and coordinate a more effective action.









Response strategy

- In the Protection Sector, RMRP partners aim to strengthen access to basic rights by refugees and migrants from Venezuela. In close cooperation with national institutions and the Government, the RMRP partners will seek to improve the conditions of access to the territory and to regularization and documentation; and ensure access to basic needs and fundamental services. All persons at risk presenting specific needs, in particular children, including UASC; elderly people; pregnant and lactating women; LGBTI persons; people with reduced mobility; people living with HIV/AIDS, and others, will receive targeted protection attention and care.
- Physical, digital and online information materials (brochures, links to information pages and sites, and audio-visual material) on entry requirements and regularization procedures, access to asylum and local integration; addresses of offices and support organizations; services available at the border; and locations of support spaces, will be made available and distributed at entry points and places with a high presence of refugees and migrants from Venezuela. A roadmap of the documentation requirements and procedures for the regularization process will be completed in coordination with the corresponding authorities.
- In line with the commitments in the context of the Quito Process, RMRP partners, in coordination with Government authorities, will also focus on initiatives to facilitate regularization and improve asylum mechanisms. This will be achieved through advocacy, capacity building and strengthening of the National Commission for Refugees and the National Migration Authorities. Additionally, support to individual cases will be provided through Legal Aid Centres.
- Partners will strengthen enjoyment of basic rights and access to services by refugees and migrants from Venezuela through community-based interventions. These interventions will be based on an outreach strategy to people in need and their organizations. Using an age, gender and diversity approach, refugees and migrants from Venezuela will have the opportunity to organize their own response projects on livelihood, education, culture and art, in coordination with local partners and institutions.
- A network of partners consisting on institutions, civil society and organizations will coordinate actions to facilitate family reunification, the identification of specific needs, mechanisms to protect children and adolescents, and individuals who have been smuggled or subjected to human trafficking and GBV. Safe shelters will receive UASC and survivors of violence.
- Capacity building and awareness raising will be conducted by partners, that will seek to improve response through coordinated training initiatives and the exchange of best practices between public officers and civil society at the national and local level. In cooperation with the Ministry of Interior, the Protection Sector will promote training and awareness opportunities on human rights, local integration and access to protection services, for operators working with refugees and migrants from Venezuela.
- Outreach strategies, coordination networks, capacity building and awareness raising will be implemented in cities with the largest presence of refugees and migrants from Venezuela, namely: Santiago, Arica, Iquique, Antofagasta and Valparaíso. These activities will expand to other cities in southern Chile (Concepcion, Temuco), where the concentration of refugees and migrants from Venezuela has considerably increased over the past year.

COLOMBIA




























NUMBER AND FINANCIAL REQUIREMENTS BY ORGANIZATION TYPE

		Organizations		Financial Requirements
International NGO		38		27.87%
National NGO		3		0.73%
Others*		7		1.36%
UN Agencies		11		70.04%

*Other include Red Cross movement, academia, civil society and faith-based organizations.

The list of organizations and RMRP partners only includes appealing organizations under the RMRP. Many of these organizations collaborate with implementing partners to carry out RMRP activities.

POPULATION IN NEED AND TARGET, FINANCIAL REQUIREMENTS AND NUMBER OF PARTNERS BY SECTOR

		People targeted*		People in need*		Financial Requirements (USD)		Partners
Education		121 K		696 K		33.44 M		14
Food Security & Nutrition		1.12 M		1.81 M		167.93 M		23
Health		1.43 M		2.26 M		192.19 M		31
Integration		444 K		1.93 M		116.67 M		26
Multisector**		230 K		1.56 M		50.92 M		20
Protection***		737 K		1.73 M		91.04 M		41
WASH		402 K		1.01 M		19.29 M		22
Multipurpose CBI						55.69 M		18
Support Services****						12.05 M		12

*The figure of People in Need and People Targeted does not include host communities | **Shelter/NFI/Humanitarian transportation | *** Includes GBV, Child Protection, Human Trafficking & Smuggling

**** Communication, Coordination, Information Management and Fundraising

COUNTRY OVERVIEW

Summary findings of joint needs assessments and analysis

In 2019, Colombia continued to be the country most impacted by the arrival of refugees and migrants from Venezuela, hosting the largest portion of people. By the end of 2015, Colombia hosted less than 40,000 Venezuelans, a number that has grown more than 3,500%, reaching 1.4 million by August 2019⁶⁵, with an increase of almost 300,000 refugees and migrants in the first seven months of the year. Similarly, in 2019 nearly 500,000 refugees and migrants transited through Colombia towards Ecuador⁶⁶. Additionally, more than half a million Colombian nationals returned from Venezuela by August 2019⁶⁷, which represents an increase from the 350,000 returnees by the end of 2018.

Of the 1.4 million Venezuelans in Colombia, 48% are women and 52% men. Additionally, 676,093 are in regular status: 12% with a visa and 88% with the Special Stay Permit - or PEP (*Permiso Especial de Permanencia*, for its acronym in Spanish), 665,665 are in irregular status, and 66,297 are with a visitor status ("within the period established by the law") with which they cannot legally access work. The impact of the arrival and transit of millions of individuals in less than four years, most of whom arrived in 2018 and 2019, has been considerable, particularly in a country which has historically had low numbers of refugees and migrants, double affectation in certain areas, and limited local capacity in some regions to respond to the needs of those arriving. Refugees and migrants are increasingly settling in communities with structural economic challenges, recurring natural disasters, and increasing pressure on limited resources and services.

Despite increased restrictions on accessing some countries in 2019, Colombia has stood out for maintaining open borders to the Venezuelan population. In November 2018, the Colombian Government reopened registration for the Border Mobility Card (TMF, *Tarjeta de Movilidad Fronteriza*), which allows Venezuelans to enter Colombian border areas for up to seven days in order to obtain basic goods and services. Since then, more than 2.6 million Venezuelans have registered for the TMF, and as a result, over 4.2 million⁶⁸ Venezuelans can enter Colombia regularly, which greatly reduces the risks associated with human trafficking and smuggling or being exposed to risks arising from the presence of illegal armed groups in informal crossing points.

The Special Stay Permit, which is now in its fifth round, remains the most predominant mechanism of regularization in the country, with nearly 600,000⁶⁹ Venezuelans holding a two-

year regular status. This provides full access to education, healthcare, and employment. In June, beneficiaries of the PEP obtained in 2017 could apply for a free renewal for an additional two years. Lastly, between 21 December 2018 and late September 2019, over 340,000⁷⁰ Venezuelans in transit benefited from the Special Transit Permit (PIP-TT, for *Permiso de Ingreso y Permanencia Tránsito Temporal*), which allows regular transit during a 15-day period through Colombia towards other countries, promoting safe and regular mobility and reducing risks associated with walking through unsafe areas of the country or difficult terrain, human trafficking and smuggling. Similarly, the Colombian Government, with the support of interagency Group for Mixed Migration Flows (GIFMM, by its Spanish acronym; being the national coordination platform) members, is also addressing the risk of statelessness for over 27,000 children born in Colombia to Venezuelan parents, granting them Colombian nationality⁷¹.

Since 2018, Colombia has also considerably expanded access to employment and basic services, promoting access to schools for Venezuelan children and progressively increasing access to higher education⁷². Likewise, the health care system has continuously increased its coverage of the Venezuelan population, and emergency healthcare has continued to expand the provision of services to refugees and migrants from Venezuela, with 190,200 emergency medical consultations being registered between January and September 2019, compared to 132,000 beneficiaries in the whole of 2018.

In addition to Venezuelans, hundreds of thousands of Colombians who were residing in Venezuela have returned to Colombia. Colombian returnees also require assistance and support as they settle and seek to re-integrate into new communities, including actions to promote access to employment and livelihoods opportunities. Host communities receiving refugees and migrants, are also affected by the impact on services and resources, particularly in some areas where Venezuelans are settling into, such as informal settlements. The response will also focus on addressing their needs, and many activities will benefit both refugees and migrants and host communities alike.

The GIFMM, composed of 56 members at the national level, has expanded its network of local coordination platforms to cover 11 departments around the country and has established a sectoral structure, seeking to improve response capacity and coordination among actors. The GIFMM has also supported the national and local governments on the progressive

65 Colombia Migration Infographic of Venezuelans in Colombia as of 31 August 2019.

66 Colombia Migration Report No. 128 of Venezuelans in Colombia as of 30 September 2019.

67 Registraduría Nacional del Estado Civil y Registro Unico de Retornados.

68 Colombia Migration Report No. 128 of Venezuelans in Colombia as of 30 September 2019. Between February 2017 and February 2018, 1.6 million Border Mobility Cards were approved. From November 2018 to September 2019, an additional 2.6 million cards have been issued.

69 Colombia Migration Report No. 128 of Venezuelans in Colombia as of 30 September 2019.

70 Colombia Migration Report No. 128 of Venezuelans in Colombia as of 30 September 2019.

71 The Colombian government, through Resolution 8760/2019 (August 5, 2019), and Law No. 1997 (September 16, 2019) decreed "Colombian nationality by birth".

72 The Colombian Institute for Education Evaluation (ICFES) signed the resolution 624 as of 5 of August of 2019, with the aim to facilitated access to higher education for Venezuelan refugees and migrants. In total 1,863 people signed up to take the state tests. Thanks to this resolution, on 11 August Venezuelans with PEPs as well as 1,041 people were able to take the tests with the number establish by the Education authorities.

expansion of services in territories with more limited resources, including Vichada and Guainía, as well as increasing the response in urban areas. During 2019, GIFMM members reached hundreds of thousands of refugees and migrants with access to basic services and assistance as well as protection and integration services.

The considerable advances made by the authorities and GIFMM partners do not detract from the remaining challenges that are likely to increase in 2020 as the number of refugees and migrants increase, their condition upon arrival continues deteriorating, and pressure on local response and capacity continues to mount. Furthermore, the situation of those who face increased risks and vulnerabilities needs to be considered, as well as the needs of host communities. The response will also include a gender, age, and diversity approach, which is fundamental to ensure that activities respond to populations with specific needs. In this context, these include children (especially those who are unaccompanied or separated), pregnant and lactating women, indigenous populations, people without regular status, people affected by human trafficking and survivors of gender-based violence. There is also need for additional data on specific groups that could face specific barriers, such as the elderly, people with disabilities, and the LGBTI community.

Available research confirms that Venezuelans currently arriving to Colombia are in an even more precarious situation, with less access to resources and lower education levels compared to those who left in 2017⁷³. Information collected and analyzed by the GIFMM from 17 departments (which concentrate over 97% of the total Venezuelan population in the country) as well as through regional and national workshops, indicates that among the primary needs of this population are the following, with additional information about every sector in the corresponding sections:

- **Healthcare:** The Colombian healthcare system has progressively expanded its capacity to promote universal coverage for medical emergencies and basic assistance to prioritized populations. Further efforts and resources are needed to propel healthcare provision beyond basic assistance to provision of advanced and regular healthcare. Venezuelans in transit and those without regular status are in a particularly vulnerable situation to health risks, and they face barriers in accessing quality health care.
- **Socio-economic inclusion:** As the Venezuelan population settles in the country, access to the labour market is more important, so a pressing need is to ensure access to sources of decent employment, income generation, or entrepreneurship support. Greater access to labour markets for refugees and migrants will allow for a reduction in the need for assistance, promote social inclusion, facilitate the acquisition of basic goods and services, and boost local economic development.

- **Protection:** Refugees and migrants from Venezuela continue to face protection risks associated with irregular access to territory, particularly in areas with the presence of illegal armed groups, and safe transit, access to documentation and regularization procedures, and the procedure to request refugee status. Other protection concerns, relate to child protection needs, in particular for unaccompanied and separated children, GBV, and risks related to trafficking and smuggling.
- **Education:** Colombia largely ensures free and universal access to basic education for all children, regardless of their migratory status. However, the main needs are related to gaps and barriers that still exist, such as practical barriers related to the irregular status of families; insufficient education infrastructure, spots in school, transport, supplies, and the number of teachers; and limited access to food in these institutions, as well as, in some cases, barriers to obtain certificates, and cases of discrimination and xenophobia.
- **Food security and nutrition:** While many Venezuelans who have settled in the country largely benefitted from far better access to food than they had in Venezuela, populations in transit and those engaged in pendular movements will continue to require consistent access to food and nutritional support as a core life-saving activity. Food insecurity and malnutrition are grave concerns in rural and remote areas, requiring additional long-term support for food production activities that not only help with food security, but also foster self-reliance and access to markets.

In addition to these needs, a large part of the Venezuelans in urban areas are residing in informal settlements, on the streets and overcrowded accommodation that do not meet minimum standards and which could lead to protection risks. There is a small number of temporary accommodation for refugees and migrants and still fewer which attend persons with particular needs, and housing solutions for those who settle outside urban centers are very limited.

Furthermore, the quality of water and solid waste management are challenges in several areas of the country and in host sites. In the informal settlements and in some of the public buildings which are occasionally used as shelters, access to water, hygiene items (including menstrual hygiene items and baby diapers), and quality sanitation (including solid waste management) is of particular concern because essential infrastructure is often absent or overwhelmed, with possible negative impacts to the environment.

Finally, discrimination and xenophobia towards refugees and migrants from Venezuela impact their integration, materialize in violent acts of rejection, and hinder access to social and economic services, all while creating a negative impact on society as a whole.

Keeping in mind the considerable increase of refugees and migrants in Colombia and the depth of their needs, a challenge

in 2019 is raising sufficient funds for the response, which limits the scope and reach of the activities of state institutions and as well as those of GIFMM members. For these reasons, the challenges for 2020, with a projected refugee and migrant population of 3.5 million⁷⁴ in need of humanitarian assistance and social and economic integration, require a greater budgetary effort.

RESPONSE STRATEGY

Planning scenario

Throughout the year and during the 2020 planning process, the GIFMM has consolidated information from authorities and partners as well as consulted with its members to inform the 2020 planning scenarios, the projection of the total number of people in each profile, and the number of people with needs that require attention in each sector. The 2020 planning scenario for Colombia considers that conditions within Venezuela will keep leading to a continued flow of people to Colombia, with an increase in their needs upon their arrival to the country. In addition, the restrictions imposed by other countries will have an impact on the number of those in transit and with intent to stay in Colombia, as well as an increase of those moving onwards irregularly. The restrictions on entry, transit, and residence in some countries will have an impact on Colombia as the main border country and also due to the ease in access to the territory that the Government of Colombia has offered to those people who leave Venezuela.

Considering the current flows and context, it is projected that by the end of 2020, an estimated 2,397,896 refugees and migrants from Venezuela will select Colombia as their country of destination, and an estimated 428,998 people will transit through the country towards other destinations. The number of Venezuelans with a TMF will reach 6.1 million, with an estimated 2,278,000 of them engaging in pendular movement in order to access goods, services, and assistance. In addition to this, it is projected that 679,766 Colombian nationals will have returned from Venezuela by the end of 2020⁷⁵.

According to current needs analysis and expected developments in 2020, it is estimated that 3.5 million people will require one or more types of intervention. This includes 1.7 million Venezuelans with intent to stay, 330,300 in transit, 501,100 engaging in pendular movement, 350,500 Colombian returnees, and over 600,300 Colombians in host communities.

It is foreseen that Colombia will continue providing access to and progressively increase services for the Venezuelan

population; however, the lack of international support for the response could increase fatigue of host communities, leading to discrimination and xenophobia. It will be critical to work for the integration of those Venezuelans with intent to stay, particularly for their access to the labour market if resources are scarce. The increased number of refugees and migrants with multiple needs translates to more refugees and migrants from Venezuela settling in informal settlements in large- and medium-sized cities, which are likely to become a new source of concern. It is expected that income generation opportunities will be promoted and prioritized, as access to work would mitigate the risk of human trafficking, resorting to smugglers for onwards movements, recruitment by groups involved in illegal economies. Those in an irregular status will continue to face greater challenges and risks across the board, and work with host communities should be an integral part of the response's strategy to reduce and avoid discrimination and xenophobia.

Scope of the response

Based on needs analysis and projections for 2020 of the population figures and their needs, the response requires activities that respond to humanitarian, protection, and integration needs for the populations covered by the plan in Colombia: refugees and migrants considering Colombia their country of destination, those in transit and engaged in pendular movement, Colombian returnees, and host communities. The response will also focus on the most-affected areas of the country, prioritizing border areas, urban areas where refugees and migrants have settled, as well as those regions which have received large numbers of refugees and migrants compared to the size of their population or the response capacity of host communities.

The response in Colombia has three main strategic objectives, complementing and coordinating with the State's response:

- Provide and improve effective access to critical goods and services, including strengthening the State's response capacity at the national and local level.
- Increase integration opportunities for the refugee and migrant population, including access to dignified employment, productive resources, and livelihoods.
- Strengthen the prevention and mitigation of protection risks, access to basic services, and provide a response to protection needs.

As a result, in the sectors, partners include programming to respond to immediate humanitarian needs and activities with medium- and long-term impact towards resilience and

74 Projection of People in Need (PIN) to December 2020. This includes refugees and migrants with intent to stay, those in transit and engaging in pendular movement, Colombian returnees, and host communities.

75 The projected number of refugees and migrants is based on a model developed by the DNP/DANE. In this model, a diffusion curve is applied under the assumption that refugees and migrants will continue to enter Colombia, but at a lower rate than that of 2019, and with an increase in the population of those with intention to stay in Colombia. For the population which engages in pendular movement, linear growth was applied (using a reduced rate as compared to 2019) and the percentage of TMF holders in border areas with Venezuela was taken into account. For the population in transit, linear growth was applied with a reduced rate considering the restrictions applied by other countries. For the Colombian returnee population, the model assumes similar displacement patterns as those of the population with intent to stay. The population in need has been defined by sectoral experts and is based on set of indicators measured in the Gran Encuesta Integrada de Hogares (GIEH, DNP/DANE), TMF (Colombia Migration), DTM (IOM, Data collection from March/April 2019), and SISBEN.

income generation, also seeking to avoid actions with a negative impact on the environment. At the sectoral level, this medium- to long-term impact approach requires supporting not only employability or entrepreneurship, but also access to public services, vocational training and higher education, social security networks, and medium- to long-term housing solutions, including rental support through which resources will be injected into host communities.

For 2020, as was done and developed during 2019, the GIFMM members must increase their efforts to ensure that services and assistance can also directly benefit host communities through an area-based approach. The support through community infrastructure services for all individuals regardless of their nationality, such as schools, health centers, and community infrastructure in general, is a powerful strategy for the benefit of all communities. As part of this area-based approach, the Plan proposes activities that promote integration and reduce barriers to labour insertion, supporting the actions outlined in the employability strategy of the government, including promoting access to the temporary work permit (PEPFF - Permiso especial de permanencia para el fomento de la formalización - by its acronym in Spanish), recognition of academic and professional degrees, cooperation with the private sector and access to financial institutions. It also includes activities to support entrepreneurship and income generation, which will in turn facilitate social cohesion and reduce discrimination and xenophobia.

Members also propose activities to respond to immediate humanitarian needs: provision of primary health services, vaccinations, maternal care, sexual and reproductive health, and mental health; access to food (prepared food in communal kitchens, food vouchers, etc.) and prevention of malnutrition, particularly for children five years-old and under; increased access to formal education and to child-protective spaces, including for those in transit; and improved access to potable water, basic sanitation, and hygiene, including in informal settlements and along the routes of those in transit. Members also propose increased emergency shelter options and connectivity in border and transit areas as well as regions that have received less assistance. The plan also includes the provision of humanitarian transport to reduce risks faced by many of those in transit.

The plan also seeks to promote safe and regular access to the territory and transit as well as access to documentation, to migratory regularization processes and procedures to request refugee status established by the national authorities. The plan includes activities to adapt the response to people with protection specific needs. This includes activities related to prevention, strengthening of referral pathways, access to information, and specialized services.

The Cash Working Group (GTM, by its Spanish acronym), which reports to the GIFMM, has developed a Protocol for the implementation of multipurpose transfers as an effort of international cooperation by the organizations to align themselves with the Government's priorities. The Protocol includes lines of coordination and definition of processes,

criteria and strategies aimed at the use of this modality, including the amounts and payments of transfers included in the guidelines issued by the Government in February 2019, and cross-cutting issues.

In the response for 2020, the interventions that consider delivery of multipurpose transfers will seek to create connections with integration initiatives, in support of, or complementing the Government's strategy of income generation for refugees and migrants. This type of intervention is intended to generate a medium- and long-term impact, making a strong link between humanitarian assistance and development, which means the possibility of progressively including conditional transfers (cash for training, for work, or for asset generation), creating effective mechanisms of financial and social inclusion, without leaving behind forms of unconditional assistance for those who need it most. In turn, the monetary transfer modality is incorporated in other activities of the Plan, such as food vouchers, cash for rent, vouchers for medical care, and humanitarian transport. The evolution of the response, as well as the creation of evidence and the analysis of the impact on the ongoing programs, will feed into discussions on how to review and improve interventions that include multipurpose cash transfers, in coordination with government authorities.

Humanitarian development nexus

As more Venezuelans settle in Colombia with the intent to stay, mid- and long-term efforts must include not only humanitarian assistance and socioeconomic insertion strategies for new arrivals or those in transit, but also include support aimed at host communities, strengthening the capacity of national and local institutions such as improved health infrastructure and supplies, support for educational institutions and teachers (supplies, transport, school food, infrastructure, among others), access to housing solutions, improved water and sanitation systems, support for community-based organizations, and trainings on multiple protection areas including prevention of human trafficking, gender-based violence, and international protection, when applicable.

At the same time, supporting policies aimed at improving public services will ensure a long-term impact on host communities. These efforts will promote social cohesion between refugees and migrants from Venezuela and host communities, preventing discrimination and xenophobia. Similarly, efforts specific to income generation for refugees and migrants that intent in Colombia to stay will also enhance self-reliance, reducing the need for humanitarian assistance and increasing benefits to local economies.

Prioritization approach

The above-mentioned activities are based on a prioritization related to needs assessments and inter-sectoral consultations. Partners have included activities in line with set priorities at the sector level as well as geographical priorities. These activities also consider an age, gender, and diversity approach of the population profiles included in the plan. Certain activities in

the plan have been prioritized for the population that intent to stay in Colombia, in particular those activities focused on socioeconomic inclusion and access to education and healthcare systems, and other activities are prioritized for those in transit, for example, in particular people transiting on foot (emergency shelter; food, food kit, and hygiene provision; humanitarian transport; emergency healthcare, and protection interventions for this population).

While it will be necessary to maintain - and in most cases, increase - the scope and scale of the response in the key border departments of Norte de Santander, La Guajira, Arauca and Nariño, GIFMM members will also seek to further expand the provision of services and assistance in:

- Border areas where the response is currently very limited, such as Cesar, Boyacá, Vichada, and Guainía;
- Departments adjacent to the main border zones or along the transit route where the response is extremely limited, including Putumayo, Santander, Casanare, and Meta; and
- Urban contexts maintaining a considerable percentage of the refugee and migrant population, such as Bogotá, Medellín, Bucaramanga, Barranquilla, Cali, Cartagena, and Santa Marta.

Response principles

During the RMRP planning process, GIFMM members benefited from the support of gender and environmental focal points who assisted with the inclusion of their respective approaches in the planning of activities for 2020.

Considerations such as gender, age, and diversity as well as accountability to the affected populations - were included as cross-cutting considerations in the needs assessment (78.6%), activity submission (76.2%), and the majority of organizations (83%) included comprehensive planning in terms of provision of information, feedback mechanisms, and cross-cutting protection. With the expansion and stabilization of activities, partners also will seek to increase consultation and feedback mechanisms to increase accountability in all steps of the response. A key part of protection as cross-cutting in 2020 will be to strengthen prevention and response mechanisms to

sexual exploitation and abuse (PSEA) in each activity and by each organization.

Conversely, 90% of organizations have carried out or plan to carry out activities to identify the environmental impact of their activities in order to adjust their response, particularly in the sectors of Water, Sanitation, and Hygiene, Food Security and Nutrition, and Health. This environmental approach serves as a nexus between the humanitarian response and development, and it seeks to mitigate the negative impacts caused by mixed migration flows and by the humanitarian response projects themselves that may affect, among other things, public health, relations with host communities, and long-term resilience. It also seeks opportunities to create positive impacts through collaboration between different sectors. This brings benefits to host communities and will facilitate associations with the public sector, and in turn will enable greater social and economic integration of persons of interest.

Environment

Colombia is the country in the region with the highest flow of refugees and migrants from Venezuela, and therefore the country that carries one of the greatest environmental burdens. With millions of refugees and migrants either transiting through, or settling-in Colombia, access to shelter, WASH and income generation are the biggest challenges from an environmental point of view.

Some 90% of GIFMM actors already have at least partially carried out or expressed their intention to carry out an assessment of vulnerabilities and environmental sensitivities of intervention areas in planned activities. This will allow them to make adjustments in order to mitigate negative environmental impacts. In particular, the WASH, food, health and food security sectors have incorporated notable mitigation strategies already at the planning stage. Activities through cash-based interventions or in the integration sector still offer additional potential to further develop environmental mainstreaming as in both cases this depends foremost on a proactive identification of opportunities.

EDUCATION



PEOPLE IN NEED 

0.70 M

PEOPLE TARGETED 

0.12 M

FINANCIAL REQUIREMENTS 

\$33.44 M

PARTNERS 

14

Priority needs

In the last few years, Colombia has made significant advances in the implementation of its educational policy. This is reflected

in the constant increase in coverage and lowered barriers to access the formal education system. Nevertheless, there are

still significant challenges in guaranteeing the quality education for all children in the country, particularly when the system faces emergency crises. This is the case of the growing flow of Venezuelan refugee and migrant families, and the consequential increase in the demand for educational services. These needs also vary depending on the specific needs of the level of schooling, of models adapted for specific groups such as indigenous populations, or age groups.

By October 2019, Colombia's formal educational system enrolled more than 198,597⁷⁶ children from Venezuela (approximately 2% of the total number of students). Students are primarily enrolled in Territorial Entities Certified in Education in Bogotá (29,124), Medellín (14,054), Cúcuta (9,779), Norte de Santander (9,504), and Barranquilla (7,947)⁷⁷. This increase in school enrollment in Colombia has increased structural challenges related to access and quality within the education system. Additionally, the lack of information on the returnee population and its visibility creates specific challenges in terms of their integration into the education system.

Similarly, there are barriers to the continuance of refugee and migrant children within the education system, such as the lack of: (1) uniforms and basic materials, (2) school meals in accordance with the nutritional needs of children, (3) school transportation when available spots in schools are far from their place of residence; (4) capacities of the principals, coordinators, and teachers to prevent and manage unique situations such as xenophobia and gender stereotypes; and (5) capacity in schools to efficiently respond to the socio-emotional and learning needs of children as a fundamental factor in the structuring of pedagogical practices.

Response strategy

The members of the GIFMM will promote the implementation of strategic objectives through the provision of educational services, both formal and informal (in order to meet the needs of different population profiles) which directly benefit child refugees, migrants, and returnees as well as children from host communities. Similarly, the Plan focuses on strengthening the institutional capacities of the Ministry of National Education and the Secretaries of Education in the regions with the greatest flow of refugees and migrants in order to improve the effectiveness of the response in terms of coverage and quality of education.

For the education response, three strategic priorities have been identified to respond to the mixed flow of refugees and migrants, with actions differentiated by the type of refugee and migrant population profile:

- Strengthen flexible education models and implement formal education strategies that facilitate children's access to educational services when conditions and contexts make it difficult for them to be included in regular education (for each educational model, pedagogical practice and the learning process is flexible and organized according to the child's situation);

- Support pedagogical and psychosocial strategies, and strengthen both teacher capacities and direct assistance to the socio-emotional recovery of children with the objective of promoting their learning and development; and
- Ensure the delivery of supplies, improve infrastructure, and implement temporary educational spaces (according to the needs of the geographic area, and in consultation with relevant institutions).

There are primary intersectoral needs that require an integrated response with other sectors such as food security and nutrition, WASH, protection and health. These are related to: (1) insufficient and poor-quality infrastructure, especially related to WASH facilities, as well as efforts made to reduce GBV and promote healthy lifestyle habits; (2) monitoring and guaranteeing connection to the Colombian healthcare system; (3) strengthening the nutritional monitoring of each child; and (4) the effective activation of referral routes to the protection sector (according to the situation) as well as the monitoring of identified cases.

These intersectoral needs and response needed have become even more relevant when considering the continuous increase of children transiting through Colombia (150,920)⁷⁸ or the 183,033 considered to be engaging in pendular movement to attend schools in border departments between Colombia and Venezuela. There is also an urgent need for protective spaces that guarantee clear and well-planned pedagogical practices for children in transit. For children engaged in pendular movements, working on school transport and security measures is also critical.

The response of the GIFMM education sector will require a long-term approach that strengthens the institutional framework and enhances the effective inclusion of refugee and migrant children in the Colombian education system. In order to develop its response, the education sector will utilize a combination of modalities, including in-kind, cash, and government capacity building, as follows:

- Delivery of educational services to children and adolescents through flexible learning models.
- Delivery of pedagogical and socioemotional support to children, adolescents and teachers.
- Rehabilitation of schools' infrastructure and provision of temporary educational settings, school supplies, uniforms and/or learning materials.
- Technical assistance to support authorities (Ministry of Education and Local Governments) and communities with the educational response for children from Venezuela, including enrollment management.

76 SIMAT, Ministry of Education of Colombia, 2019

77 Ibid

78 Migración Colombia

FOOD SECURITY AND NUTRITION



PEOPLE IN NEED 

1.81 M

PEOPLE TARGETED 

1.12 M

FINANCIAL REQUIREMENTS 

\$167.93 M

PARTNERS 

23

Priority needs

A large proportion of the refugee and migrant population arriving in Colombia - including those with intention to stay, in transit or engaged in pendular movement - have needs related to Food Security and Nutrition, particularly regarding food assistance and nutritional interventions. This creates a greater demand for food and adequate nutritional intake, particularly considering the arrival of pregnant and lactating women, children under five years-old, and elderly persons. More generally, this demand creates significant challenges related to availability, access, consumption, and quality of food. Much of this population has critical food-related needs, which can be addressed by provision of food (in community kitchens, with vouchers, etc.). However, there is also evidence of needs in rural areas where there is pressure on subsistence farming needing to strengthen rapid agricultural production strategies in order to increase the availability of food for the host population and the population with intent to stay. The priorities of the food security and nutrition sector in the context of refugees and migrants are:

- Enhanced immediate and regular access to food for population in particularly vulnerable situation with the greatest need, adjusting the modality of response according to the geographic context and the specific population (for example, a differential approach based on gender, age or type of refugee and migrant population).
- Prevent all forms of malnutrition in populations in vulnerable situation and ensure the recovery of children under 5 years of age with acute malnutrition.
- Enhance productive and livelihood capacities of refugees, migrants and host communities related to food production and/or commercialization, with an approach that considers the geographical context, resilience and socio-economic inclusion.

Response strategy

The response approach aims at guaranteeing food and nutrition in crisis situations, including different strategies to reduce/eliminate food insecurity, provide nutrition and save lives. The geographical areas of first priority will be the border departments of La Guajira, Norte de Santander, Arauca and Nariño, followed by Atlántico, Magdalena, Bolívar, Cesar, Antioquia and Valle del Cauca. The estimation of people in need and targets for 2020 were based on most recent indicators and evaluations, which identified the population groups in the most vulnerable situation and areas with the greatest needs in terms of food security. Additionally, geographic areas and objectives reached in terms of coverage and impact of the interventions during 2018 and 2019 were analysed in order to replicate and scale up the response in 2020.

The response priorities focus on (a) Enhance immediate and

regular access to food for population in vulnerable situation with the greatest need, adjusting the modality of response according to the geographic context and the specific population (a differential approach); (b) Prevent all forms of malnutrition in population in vulnerable situation and ensure the recovery of children under 5 with acute malnutrition; (c) Enhance the productive and livelihood capacities of the host communities, refugee and migrant populations, with an approach that considers geographical context, resilience and socio-economic inclusion, and which empowers women as agents of change.

Because of the nature of the food security and nutrition sector, a strong coordination with the protection sector is a priority. Strong integration with the health and WASH sectors is also very important, with the ultimate objective of achieving socio-economic inclusion. Cross-cutting issues such gender, age and ethnicity will be considered. Strategies will be developed for community and institutional capacity strengthening, information sharing, education, communication and social mobilization, advocacy at regional and national levels, and to build alliances with government actors and private sector.

The response will involve different modalities which include strategies to respond to the needs of the different profiles of the population (including those with intent to settle in Colombia, those in transit or in pendular movements between Colombia and Venezuela, returnees and host communities). The expertise and experience of the sector's partners will contribute to mitigate the effects generated by the flow of refugees and migrants both for those arriving as well as for the host communities.

The modalities that will be adopted by the actors of the sector include: food assistance through different modalities (cash, vouchers, in-kind, conditional and unconditional transfers); nutritional supplement through delivery of micronutrients in particular to pregnant/lactating women and children under five years of age; prevention and treatment of moderate and severe acute malnutrition in children under five years of age; promotion of healthy eating habits for adequate nutrition; strengthening of the livelihoods and productive capacities of refugees, migrants and host population; and technical assistance for the development of community and institutional capacities for the fast and resilient production of food and delivery of agricultural products. In general, the interventions to be carried out by the different partners will allow to revise and adjust the food items provided to the populations with specific needs such as children under 2 and pregnant women. For the livelihoods and recovery activities and for creation of capacities in the community and institutions, a gender and ethnic sensitive approach will be adopted.

HEALTH

PEOPLE IN NEED 

2.26 M

PEOPLE TARGETED 

1.43 M

FINANCIAL REQUIREMENTS 

\$192.19 M

PARTNERS 

31

Priority needs

One of the most urgent needs for refugees and migrants in Venezuela is access to quality health-care services. As of June 2019, of the total 597,583 people with the Special Stay Permit, only 25,6% (158,829) were affiliated to the national healthcare system (*Sistema General de Seguridad Social en Salud – SGSSS*).

Given the conditions, characteristics and dimensions of the flow of refugees and migrants, there are enormous challenges in public health and humanitarian assistance, required to strengthen the response of medium and high complexity, especially for the population not affiliated to the SGSSS. On the other hand, the continuity of the operation of the public health institutions that are carrying out the response is concerning, considering the budget impact and increase in the demands for chronic disease care.

Response strategy

Taking into account the most pressing needs of the refugee and migrant population identified during 2018-2019, and the resources and response capacity of the country's health system, the main needs to be addressed are as follows:

- Sexual and reproductive health; maternal and perinatal health, teenage pregnancy prevention, prevention, protection measures and treatment of HIV/AIDS, sexually transmitted diseases (STDs), contraception and voluntary safe interruption of pregnancy, and gender-based violence.
- Public health management; outbreak detection and control, infection control, vaccination, public health surveillance at the institutional and community level, risk communication, information management, detection and control of environmental risk factors.
- Identification and treatment of transmittable and non-transmittable diseases; acute diarrheal disease, acute respiratory infection, food and waterborne diseases, malnutrition, measles, diphtheria, vector-transmitted diseases (malaria, dengue) and tuberculosis, diseases related to mental health (transversal to all needs) and chronic diseases (diabetes, hypertension and cancer).

For 2020, interventions are considered a priority in the territories of; North of Santander (Cúcuta, Villa del Rosario, Ocaña), La Guajira (Maicao, Riohacha, San Juan del Cesar), Cesar (Valledupar), Arauca (Arauca, Arauquita, Tame and Saravena), Vichada (Puerto Carreño and Cumaribo), Guainía (Inírida), Nariño (Ipiales, Taminango, Tumaco and Pasto), Putumayo (Puerto Asís, Valle del Guamuez, San Miguel and

Mocoa), Santander (Bucaramanga, Floridablanca), Bolívar (Cartagena), Atlántico (Barranquilla, Soledad), Magdalena (Santa Marta, Ciénaga), Antioquia (Medellín), Córdoba, Boyacá, Caldas, Valle del Cauca (Cali), Casanare (Yopal), Cundinamarca (Soacha) and Bogotá DC. With regards to population groups, in addition to people with specific needs in situation of greatest vulnerability, there are people with communicable diseases and chronic diseases that require a specific response.

Given the amount of needs and the limitations in resources for the response to this crisis, there is a need for an approach based on the humanitarian minimum needs in health, complementing the response of the Colombian State while making progress towards integral health services and lasting solutions, which implies strengthening the social health-care system in the medium term.

A healthcare model should be considered for the refugee and migrant population, taking into account the different needs based on age, gender, ethnicity and migratory status, as well as the demand for healthcare services and minimum standards in service provision.

In this context, the priorities for the response defined by the members of the GIFMM in the health sector, in coordination with the Ministry of Health, are:

- Primary healthcare, including prevention and strengthening of mental healthcare and psychosocial support in all forms of assistance. Prevention and management of acute diarrheal disease, acute respiratory Infections, food and waterborne diseases, malnutrition, measles, diphtheria, tuberculosis and vector-borne diseases.
- Strengthening of comprehensive maternal and perinatal care and provision of sexual and reproductive health services, prevention of unwanted pregnancies, prevention and care of cases of HIV/AIDS and other sexually transmitted diseases, clinical services for gender-based violence survivors and voluntary interruption of pregnancies.
- The expansion of health infrastructure, provision of biomedical equipment, supplies, medicines, vaccines, Information and Communication Technologies (ICT), support with human resources and strengthening of information management and health surveillance, detection and control of outbreaks, as well as community-based health surveillance.

The sector will continue strengthening the articulation of the services offered by the different sectors, for the integral

response to health-related needs of the population. This will help to ensure that the response is articulated and coordinated at the national and territorial level, to guarantee synergies and the strengthening of the response to the needs.

Furthermore, it is key to continue involving the host population in the response, in order to prevent discrimination and xenophobia, with the aim to ensure sustainability of the interventions by strengthening institutions at local level, especially when considering the duration of the crisis.

The response will be carried out through the direct provision of healthcare services by GIFMM members, in particular within early detection and targeted protection interventions, such as:

prenatal control, vaccination, contraception, health information, services of a lower level of complexity (including the services to people with STI/HIV and psychosocial and mental-health issues), and more complex cases of chronic non-communicable diseases. Similarly, public health management will be strengthened, including through support to public health surveillance and planning, institutional strengthening (supplies, equipment, capacities, and human resources), support for assistance to cases of low and medium complexity, as well as the strengthening of collective actions and activities to promote access to the social security system for refugees and migrants with regular status, which will be carried out through GIFMM members and their support to health institutions.

INTEGRATION



PEOPLE IN NEED 

1.93 M

PEOPLE TARGETED 

0.44 M

FINANCIAL REQUIREMENTS 

\$116.67 M

PARTNERS 

26

Priority needs

Immediate assistance is only the first step in a comprehensive response to the refugees and migrants. Access to goods and services that meet the basic needs of refugees and migrants depends, to a large extent, on the recovery and effective use of their abilities to generate sufficient, adequate income based on their age, social and/or work profile, and vocation.

According to the National Administrative Department of Statistics (DANE for its acronym in Spanish), approximately one in five refugees and migrants from Venezuela who are economically active and who had been in Colombia for less than twelve months was unemployed between July 2018 and June 2019. Similarly, according to DANE's Large-scale Comprehensive Household Survey, 93.5% and 94.5% of the Venezuelan population either did not have a written employment contract or did not have social security coverage (including health and pensions), respectively, in the period from July 2018-June 2019. For this reason, income generation under acceptable and decent conditions is an urgent need for the sector.

The second urgent need relates to integration and social cohesion, including campaigns against discrimination and xenophobia, in order to ensure that there are opportunities and resources necessary to participate fully in the economic and social life where they are located and to actively promote peaceful coexistence and the fight against discrimination. Integration strategies should include early response actions and sectoral public policies that take advantage of development opportunities arising from migration, providing opportunities for income generation, provision of services, participation and social protection.

Response strategy

The sector will strongly promote issues of employability, entrepreneurship, financial inclusion, labour formalization and decent work, as well as implement short-term strategies to provide income-generating opportunities for the recovery of life projects, as well as strategies for rapid inclusion into a productive life, including interventions through cash transfers. In order to face the challenge presented by border mobility, including the population engaging in pendular movements, greater weight will be given to strengthening the productive network as well as strengthening the border economy and local development. The prevention of discrimination and xenophobia will also be bolstered as a vital way for all persons to the effectively enjoy a dignified life, which includes not being exploited in the workplace and not being discriminated against on the grounds of sex, gender, ethnicity, age, or nationality.

For the sector response, nine departments were prioritized and divided into two groups. Bogotá, Atlántico, Antioquia, and Valle del Cauca are in the first group as, due to the high number of people arriving from Venezuela, they are the large part of the economic integration needs of the sector. In the second are the border departments of La Guajira, Cesar, Norte de Santander, Arauca, and Vichada which are characterized by a high number of refugees and migrants - whether the population has Colombia as country of destination, is in transit, or engages in pendular movement - and by having more restricted economic conditions and labor markets than those in the first group.

The lines of action that guide the sector's initiatives are:

- Complement the Government of Colombia's Income Generation Strategy for Migrant Populations from Venezuela and Host Communities, which defines 10 prioritized strategies that mainly revolve around employability, entrepreneurship and local economic development.
- Strengthen the employability route of the Public Employment Service, both in its management and placement exercises as well as in the expansion of the complementary offer of services in order to mitigate barriers to labour insertion;
- Promote the management of Special Stay Permits for the Promotion of Formalization (PEPFF by its Spanish acronym) - both in employability and in entrepreneurship -, and the validation of degrees and work experience - two of the greatest difficulties faced by refugees and migrants in their process of labour insertion;
- Support entrepreneurs' access to technical training, seed capital, and existing finance mechanisms (adapted to the specific skills and capacities of different profiles);
- Promote the formalization of labour and dignified work, from coverage to social security in health and pensions, the elimination of child labour, or working conditions inspection; and
- Generate spaces for peaceful coexistence and prevention of discrimination and violence. This includes initiatives of communication campaigns, exercises of participation and active citizenship, in order to strengthen the social cohesion between refugees and migrants and the host communities.

Socio-economic inclusion activities are coordinated with different sectors. With the protection sector, work will be done to reduce exploitation, human trafficking, and child abuse, as well as strengthen resilience capacities. In terms of education, formal recognition of skills and management for the standardization of degrees will take place. With food security and nutrition sector, agricultural-based livelihoods will be promoted. Regarding the health sector, insurance under a subsidized scheme and the harmonization of information systems will occur. With the Cash Working Group (GTM, by its Spanish acronym), work will be done on the conditional transfers modality *cash for work, cash for training, cash for assets* and on-the-job training. The possibilities of strengthening the environmental approach will also be explored, for example through the circular economy (recycling and transformation) or promoting peaceful coexistence (e.g. community actions to mitigate the environmental impact of refugee and migrant arrivals in the most affected territories).

The sector will continue to work closely with the State with the aim of capacity-building and enhancing practices that promote integration. Similarly, in 2020, work on awareness-raising and advocacy with the private sector, civil society, and academia will be furthered, as they are key actors in the inclusion processes. Finally, direct assistance will be provided to the Venezuelan and host populations, both through direct implementation and through cash transfers.

PROTECTION



PEOPLE IN NEED 

1.73 M

PEOPLE TARGETED 

0.74 M

FINANCIAL REQUIREMENTS 

\$91.04 M

PARTNERS 

41

Priority needs

In accordance with the country's situation, considering the discussions with different GIFMM members and State authorities, the Protection sector considers that the primary needs of refugees and migrants are access to regular status, regular access to territory and safe transit, as well as prevention and protection measures for people with specific needs. In this sense, it is estimated that by mid-2019, more than half of the Venezuelans living in the country did not have a regular status to stay in Colombia, and that the rest are in a regular situation or only have a short stay permit - valid for 90 or 180 days - which does not allow them to remain permanently in the country or access the labour market. Although the PEP has benefited nearly 600,000 Venezuelans and has been vital in facilitating their access

to health, education, and other services, new and accessible regularization processes are needed, as well as effective and safe asylum procedures. Similarly, it is necessary to ensure safe access and transit through the national territory, under conditions void of protection risks along the route.

Response strategy

During 2019, the main protection incidents reported were labour exploitation, theft, physical assault and intimidation. Evictions and security concerns in informal settlements where refugees and migrants arrive, as well as risks faced by those entering the territory irregularly. Furthermore, the protection risks (GBV, trafficking, etc.) of specific populations, as mentioned, are central in the planning of the response. These

protection incidents and risks are recurrent in the Colombia-Venezuela border (La Guajira, Norte de Santander, Arauca, Vichada), the main reception locations (Valle del Cauca, Antioquia, Cundinamarca, Atlántico) and the southwestern border (Nariño and Putumayo), and therefore, these departments have been prioritized for the response in 2020.

At the same time, there are other departments - such as Magdalena, Casanare, and Cesar as well as cities such as Santa Marta, Bucaramanga, Valledupar, Cartagena, Yopal, and Popayán - which require attention in the area of protection, and for which the organizations have been encouraged to consider the possibility of expanding their operations. Similarly, it is necessary to reinforce presence at some key points of transit, (specifically for the population who are transiting by foot, such as in Tocancipá, Imués, Taminango, Bochalema, Chinácota, Tunja, and Susa). Therefore, the sector's strategy for 2020 will be to expand the territorial coverage and response capacity in order to close these response gaps.

In line with the above, the following will be the priorities of the Sector:

- In order to optimize and ensure the effective response to these risk scenarios, the general response priorities for 2020 in protection are, access to documentation, regularization, and refugee recognition procedure.
- Strengthen the identification, prevention and mitigation of protection risks and response, including to populations with specific needs.
- Support and strengthen organizational and participatory processes, including community-based protection networks and mechanisms.

The Protection Sector is inherently intersectoral, by virtue of the centrality of protection in all humanitarian response and development support actions. Therefore, the centrality of protection will be reinforced by supporting the actions of the other sectors against specific protection risks for each population profile. In the case of populations in transit and new arrivals in host areas, it is necessary to provide food security, as well as access to water, sanitation, and hygiene, and humanitarian transport to avoid the risks associated with negative survival mechanisms, particularly for women and children. Similarly, it is necessary to ensure that shelters are safe environments, with child friendly spaces as well as effective system of referral to State's care routes for protection cases.

The sector will expand its response to the target population by working closely with institutional protection actors, such as the Colombian Institute of Family Welfare (ICBF, by its Spanish acronym), the Ombudsman's Office, and the Office of the Presidential Adviser on Equality for Women, which will be maintained and deepened in order to achieve a coherent response and strengthen public policies on protection through technical assistance. At the same time, and under

the guidelines of the sector, the expansion and quality of the services provided by members directly to the target population will continue to be promoted. The possibilities of assistance through cash-based interventions for particular populations will continue to be explored with the Cash Working Group depending on the convenience of its use as a protection tool.

CHILD PROTECTION

Priority needs

By June 2019, the ICBF had provided attention to 70,963⁷⁹ Venezuelan children, adolescents and families. The highest concentration in services, in addition to the border departments, are in Atlántico, Bolívar, Antioquia, Cesar, Santander, Magdalena, Cundinamarca, and Bogotá. The Ombudsman's Office's report (with data up until December 2017)⁸⁰ states that 5,197 cases of violence against Venezuelan children have been registered. As of 31 of August 2019, there were 1,641 Venezuelan children under the protection of ICBF, out of which 152 were unaccompanied children.

The first ten cities where refugee and migrant children have received the most attention through ICBF's Administrative Process for the Re-establishment of Rights (PARD, for its Spanish acronym) are Cúcuta, Santa Marta, Zipaquirá, Soledad, Cartagena, Sabanalarga, Barranquilla, Bucaramanga, Maicao, and Riohacha. Similarly, the characterization study carried out by the Ombudsman's Office revealed that violations of children's rights and their families were associated with child labour (either homeless or at risk of homelessness), commercial sexual exploitation, human trafficking, smuggling-related risks, forced begging, malnutrition, and consumption of psychoactive substances.

The ICBF provides care to unaccompanied children as their legal guardian in the country, under their protection modalities, and restoration of family links to separated children. However, the ICBF lacks the capacity to cover the necessities of the entire population requiring attention, especially under flexible modalities or alternative care which are not part of their protection modalities. It is therefore essential to be able to support the Government of Colombia in the creation and/or consolidation of these spaces, the strengthening of assistance processes, and the development of prevention strategies for the protection of refugee and migrant children and their families.

Response strategy

In relation to the programmatic approach, efforts will focus on reducing the risks which children are exposed to in contexts of migration and asylum, directly linking this population within an integral framework their best interests, and the host communities.

79 Data supplied by the Colombian Institute of Family Welfare (ICBF).

80 Ombudsman's Office (2018). Ombudsman's report 2018. Situation of national and foreign children's rights in border departments and municipalities. Institutional actions and omissions. <http://www.defensoria.gov.co/public/pdf/Derechos-ninos-ninas-adolescentes-frontera.pdf>

Regarding the geographical focus, the need to continue promoting work in border areas has been identified, including in new areas due to an ethnic focus and areas with high rates of recruitment and use of children. Specifically, the following areas are proposed for prioritization within the framework of the Migrant and Refugee Children Working Group: Antioquia, Atlántico, Nariño, Putumayo, Santander, Valle del Cauca, and Vichada.

The response priorities for the comprehensive response to refugee and migrant children:

- Continue to support the care and assistance modalities or flexible strategies developed by ICBF or by local authorities - such as Protective Spaces, Institutions that provide care and shelter, alternative care with Venezuelan mothers and caregivers and child friendly spaces, through small infrastructure, provision of supplies, technical support, food, and human resources, among others.
- Develop and/or strengthen training processes designed in partnership with ICBF and processes already piloted in some areas of the country in order to train partners and host communities on issues associated with care and protection routes, legal framework, particularly for unaccompanied children, the Administrative Process for the Re-establishment of Rights (PARD, by its Spanish acronym) and to exchange prevention and care methodologies. Along these lines, it is also necessary to promote knowledge management on issues related to refugees, migration, and children through the design and publication of different communication strategies for development and social mobilization.
- Develop a strategy to strengthen protective environments for refugee and migrant children for the prevention of different forms of violence that occur in migratory contexts, such as human trafficking, and risks associated with smuggling of refugees and migrants, (commercial) sexual exploitation, child labour, and sexual violence.

The modality will be in-kind through technical support, infrastructure, transfer of methodologies and capacity building, as well as through cash-based interventions. Care and prevention strategies for refugee and migrant children and their families will be carried out through direct assistance (in-kind).

HUMAN TRAFFICKING AND SMUGGLING

Priority needs

Refugees and migrants are particularly vulnerable to illicit smuggling as well as human trafficking, including sexual or labour exploitation, forced begging, and forced marriage, among others. The risk increases where people have an irregular status, as they may be forced to work or move throughout the country without any valid documentation.

In this sense, the coordinated actions of the Protection Sector of the GIFMM will initially focus on making human trafficking and smuggling visible, including on the possible risks faced by

smuggled refugees and migrants of becoming potential people affected by human trafficking.

Strengthening the technical competencies of institutions so for them to adequately assist and provide care to those affected, reduce the risks for those who have been smuggled, and improve the regulatory frameworks in institutions which fight against human trafficking and smuggling in the country, is an additional need.

Response strategy

The specific response will have an area-based approach and strengthen the current capacities of local authorities, particularly in border and transit areas. According to the national Decree 1036, which defines the National Strategy to Combat Human Trafficking, efforts should be made to strengthen the response of the Anti-Human Trafficking Municipal and Departmental Committees in order to bolster their services, especially in areas which have weaknesses and where barriers to access services exist, with the aim of providing immediate, comprehensive assistance people at risk.

The response's priorities will aim at gaps in local service providers' capacities. Responding to needs related to case identification, prevention and mitigation of risks associated with these events, healthcare (assessment and treatment), psychosocial support and assessment (identification of specific needs and searching for support networks) and consultations (information within the framework of care routes and, when applicable, routes to seek international protection as well as legal remedies) will be the initial priority.

In addition to strengthening the institutional response for people at risk of human trafficking and the smuggling of refugees and migrants, it is also necessary to create and promote prevention strategies that are specifically targeted towards refugees and migrants (including children) with the aim of increasing the capacity for identification and prevention. This will be done through the implementation of preventative actions as well as campaigns to disseminate information in order to sensitize and provide guidance to the Venezuelan and Colombian population on the issues of human trafficking and smuggling.

Additionally, support and technical assistance for local authorities will also contribute to refining regulatory and institutional frameworks in order to fight these crimes through the creation of action plans, local assistance routes, and the generation of interinstitutional agreements for immediate and long-term assistance, including access to legal and safe livelihoods. Finally, the importance of strengthening knowledge management through situational analysis of the impacts of the situation and capacities should be recognized in order to accelerate the consolidation of the regulatory and institutional framework.

GENDER-BASED VIOLENCE

Priority needs

The situations of refugees and migrants from Venezuela has a differentiated impact, generating higher levels of vulnerability among refugee and migrant boys and girls, adolescents and women, as well as people with diverse sexual orientations and gender identities. Refugee and migrant women and girls, but also men and boys, from Venezuela continue to face risks of gender-based violence, in form of sexual exploitation, survival sex, as well as other forms of violence. Similarly, labour exploitation and other forms of serious violence can lead to severe physical, psychological and/or psychosocial effects or in some cases put the lives of these people at risk.

There are no reliable sources providing information on risks and number of survivors of GBV. Survivors of GBV lack the tools and services to prevent, mitigate and receive a comprehensive response. Furthermore, there is an underreporting of all types of gender-based violence, due to the fear of repercussions. The fear of being identified with irregular migratory status and the risk stigmatization and re-victimization causes survivors to refrain from available services.

Within the framework of GBV, there is a need for tools and greater knowledge of risks, as well as the institutional capacity for a response with varied approaches (particularly ethnic, diverse sexual orientation, gender identity, and age). It is also necessary to work on reducing social tolerance regarding, negative or discriminatory attitudes towards GBV survivors and xenophobic behaviours. Finally, there are limitations in the comprehensive response to GBV, consequently resulting in the inability of refugees and migrants to access protection and justice mechanisms, as well as a sustainable healthcare response.

Response strategy

With regards to the programmatic approach, efforts will focus on reducing the risks faced by the refugee and migrant population as well as the host communities, particularly women and girls, but also concerned men and boys. Work will also be carried out to identify and strengthen the response to acts of violence and to transform existing norms in order to reduce social tolerance of such violence. Regarding the geographical approach, there is an identified need to continue to strengthen the response in border areas, particularly where there is a greater concentration of population with intent to stay and where the availability of services is limited. At the same time strengthening policies, to ensure access to GBV services, especially for survivors with irregular status.

The identified response priorities should be addressed through a comprehensive approach towards refugees and migrants as well as the host communities. These priorities are:

Prevention

- Identification of risks of GBV and establishment of multisectoral prevention strategies for all forms of GBV in prioritized territories.
- Strengthening of information, awareness and prevention actions that guarantee a reduction of social and institutional tolerance of GBV. For this, it is important to incorporate a responsible new masculinity approach, to increase women's autonomy, and for the equal share of caregiving and household chores.
- GBV risk mitigation through economic inclusion, strengthening and articulation of the services provided by humanitarian actors, institutions and communities, through service routes and standard operating protocols for effective intersectoral operation in each municipality. This would also limit the re-victimization and contribute to restoring their confidence in the institutional framework.
- Strengthening of actions for the prevention of sexual exploitation and abuse (PSEA) in humanitarian contexts.

Response

- Increasing the access of GBV survivors and those at risk of GBV, to confidential, comprehensive, safe, non-discriminatory and quality care services, with a focus on the survivor, in accordance with international standards. This includes strengthening the capacity of state institutions, providing case-management services for GBV survivors, psychosocial and mental health support, establishment and strengthening of shelters, foster homes, and/or safe spaces for women, girls and adolescents, emergency and comprehensive health services, access to voluntary interruption of pregnancy, access to dignity kits with emphasis on the management of menstrual health, access to justice and protective measures for women who suffer threats and risk of femicide.
- Providing access to health services with trained and sensitized personnel for the clinical management of rape, equipped with medical supplies such as Post-Exposure Prophylaxis (PEP) kits.

Additionally, the sub-sector has identified the need to articulate its work with other sectors such as Education, WASH, Food Security and Nutrition and Health to increase the impact of risk reduction and strengthen the response capacity, and will prioritize the following activities:

- Strengthening the capacity of national and local entities and institutions.
- Increasing the provision of humanitarian services in terms of comprehensive care and response to GBV survivors.
- Implementing GBV information, awareness raising and prevention strategies.
- Strengthening organizational processes for GBV prevention, mitigation and care at the community level.

WASH



PEOPLE IN NEED 

1.01 M

PEOPLE TARGETED 

0.40 M

FINANCIAL REQUIREMENTS 

\$19.29 M

PARTNERS 

22

Priority needs

The needs within water, sanitation, and hygiene (WASH) focus on the following communities:

- Refugees and migrants with intention to stay in Colombia who are living in informal settlements as well as host communities. A large part of this population group resides in informal settlements or in public spaces with limited access to water, sanitation, and hygiene services, mainly due to little investment in these areas, a situation shared by the host communities. The informal settlements are also characterized by a lack of solid waste management, which causes an increase in vector-borne diseases.
- The population engaging in pendular movement, people in transit, including those transiting on foot (known as *caminantes*), and host communities that are in need of:
 - Attention in service delivery points (health centers, shelters, community kitchens, migration, transit points, public spaces, and formal and informal learning spaces);
 - Safe access to water and basic sanitation services;
 - Promotion of key hygiene practices, handwashing, water treatment for safe consumption;
 - Menstrual hygiene management and specific needs for pregnant and lactating women;
 - Prevention of vector-borne diseases according to the geographic and community context; and
 - Solid waste management.

Access to WASH services are especially important for women, children, and ethnic communities since access to quality services guarantees their safety, dignity, and privacy, including in relation to protection risks. In addition, people with disabilities require that infrastructure and materials promote key hygiene practices that are appropriate to their conditions. The lack of basic sanitation systems and hygiene items is a public health problem in several parts of the country, especially in informal settlements and public places.

Response strategy

For WASH, the actions that will be prioritized in 2020 will be those that have the greatest impact on public health and those that reduce vulnerability to protection risks associated with access to basic services. This means that interventions should, as far as possible, provide services to other sectors, particularly the sectors of health, food security and nutrition, protection, and

education. According to WASH-related needs assessments, the most urgent needs are found within the population transiting on foot, host communities, and the population of those with intent to stay found in informal settlements. For those transiting on foot, the primary need is the increase of quality sites to access WASH services along the route (either to the interior of the country or leading to other countries). The lack of these causes increased risks, such as having to utilize rivers, stagnant water, or in farms or houses located along the way. With regard to people in informal settlements, the main risk is related to public health due to the fact that available water is not always adequate for human consumption.

Geographical prioritization was carried out based on the capacity of the GIFMM members. In the first stage, four priority departments with high population flows were identified: La Guajira, Norte de Santander, Arauca, and Nariño. The second stage comprehends the departments of Cesar, Atlántico, and Magdalena, which have received a refugee and migrant population located in informal settlements, and where gaps in the response persist. The sector has also prioritized the routes utilized by *caminantes* and the routes to mid-sized cities that do not have enough capacity to assist the new demand for WASH services required by the Venezuelan population.

The WASH response will have the following priorities:

- Improve access to safe WASH services in host communities as well as in formal and informal settlements through rehabilitation or construction of infrastructure that provide access to water, portable restrooms, and handwashing stations.
- Improve access to WASH services at service delivery points (health centers, shelters, community kitchens, migration point, transit areas, public spaces, and education spaces).
- Promote key hygiene practices by way of information, delivery of hygiene kits and filters, etc. The interventions will focus on key hygiene practices of handwashing, water treatment for consumption, menstrual hygiene management, solid waste management, human waste management, and vector control.

The WASH response is aimed at saving lives, assisting in the reduction in the prevalence of waterborne diseases, and improving people's security, dignity, and privacy. International and national standards will be used in order to guarantee the quality of interventions. Community participation will play a part in all phases of implementation in order to guarantee that the vision and needs of all are reflected - especially those of children, youth, women, people with disabilities, and the

indigenous population - and also to ensure access to quality services and a differential approach.

WASH actions are aimed at providing services to other sectors, including health, protection, food security and nutrition, and education. Therefore, in 2020, the sector will concentrate on actions primarily focused on community kitchens, health centers, education spaces, safe and child-friendly spaces, and shelters. However, long-term solutions such as the strengthening of water and sanitation systems must become a priority for development and for the equal benefit of host communities.

In order to develop its response, the WASH sector will utilize a combination of modalities, including in-kind, cash, and government capacity building, as follows:

In-kind

- Construction and/or rehabilitation of WASH infrastructure.
- Delivery of filters, supplies, and/or items for safe storage and transportation of water.
- Delivery of hygiene kits for families, individuals, infants, and pregnant women and lactating mothers, as well as for menstrual hygiene management.

In cash

- Vouchers for the purchase of hygiene products.

Capacity building

- Technical assistance to authorities and communities for the operation and maintenance of infrastructure provided, including the development and execution of contingency plans.
- Promotion of key hygiene practices at the community level, located or disseminated at service points.

MULTISECTOR (SHELTER/NFI/HUMANITARIAN TRANSPORTATION)



PEOPLE IN NEED 

1.56 M

PEOPLE TARGETED

0.23 M

FINANCIAL REQUIREMENTS 

\$50.92 M

PARTNERS 

20

Priority needs

Following the local and national workshops and the revision of secondary data, the GIFMM's multisector group, which covers shelter, transport and telecommunications services, has identified three main needs:

- Access to medium-term shelter solutions, in particular providing integral rental support and initiating support activities in order to promote better shelter options as well as access to basic household items.
- Sufficient and quality access to emergency shelter and telecommunications services along the Colombia-Venezuela border as well as in other areas where considerable gaps remain and that have little coverage, in particular the areas with less coverage, including those of arrival (Cesar, Boyacá, Vichada and Guainía), transit (Santander, Casanare and Meta) and exit (Putumayo and to a smaller degree, Nariño).
- Support for safe transport, including access to formal transportation services and necessary items of assistance during transit.

Response strategy

As a result of the national process of needs analysis and consultations with GIFMM's partners, the authorities and communities, the sector will prioritize emergency response in the critical geographic areas of entry, transit and exit from the country.

At the same time, as part of the transition towards a medium-term approach in 2020 the sector will not only be providing emergency assistance – temporary shelters and telecommunications in areas with little coverage – but also support interventions aimed at medium- and longer-term housing solutions, including support for renting in urban areas where a substantial part of the population with needs are concentrated. In addition, efforts will be made to ensure the expansion of services to cover the needs of particular groups of people with limited access, such as LGBTI persons or single men.

The priorities for the response will be:

- Provide safe emergency and short-term shelter and telecommunications for populations who are newly arrived, are in transit or pendular and therefore only stay for a few days in the same location.

- Facilitate medium- and long-term housing solutions in urban areas, including access to safe accommodation through comprehensive rental support.
- Support access to safe transport.

As an inherently multi-sector area, shelter and settlement interventions will need to continue ensuring a multi-sector approach. At the community level, shelter and settlement activities will be connected to the provision of public services, based on the geographical area. This includes households' access to water, sanitation and electricity, linkages to transport services and community-level access to local structures and services, such as schools, health centers, protection services and markets.

For the short-term support to access shelter, telecommunications and transport, the in-kind modality will be provided directly by the partners. This will imply that the sector in 2020 will be able to increase the adaptability of the

response to groups with particular needs, and the access to routes for integral assistance which include referral to specialized services for the accommodated population with specific needs. The rental support and other forms of medium-term assistance in settlements will be implemented through a comprehensive support, including information, guidance to identify safe and adequate options, and rental subsidies within technical assistance for the strengthening of public policy.

In terms of long-term assistance to housing, the interventions of the members of the sector will focus on technical assistance for capacity building and influencing, as well as on initial mapping and piloting.

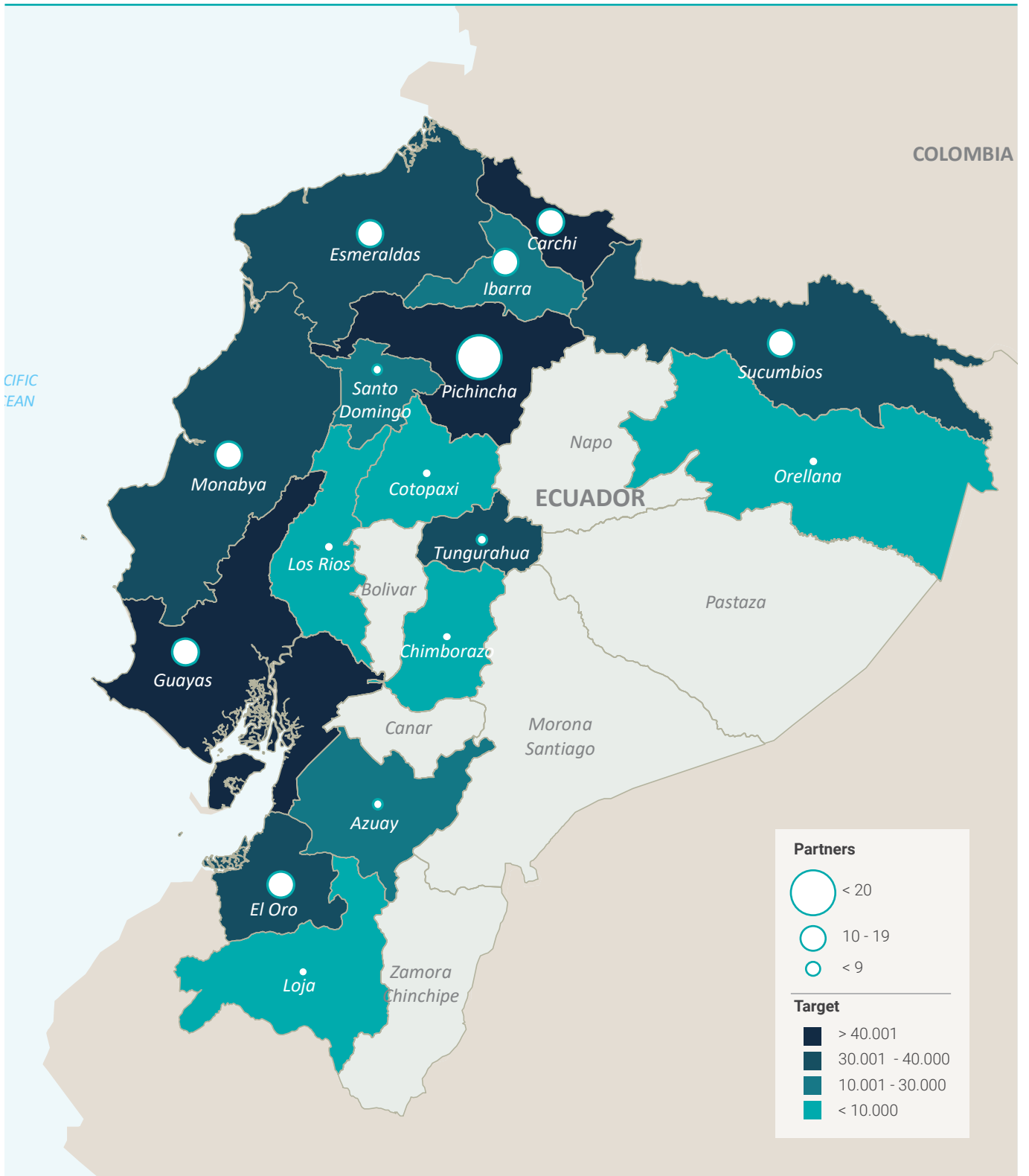
ECUADOR











Photographs are for illustration purposes only and do not necessarily correspond to the country indicated in the text.

ECUADOR

POPULATION PROJECTION 2020	PEOPLE IN NEED*	PEOPLE TARGETED*	FINANCIAL REQUIREMENTS	RMRP PARTNERS
VENEZ. IN DESTINATION 659 K	468 K	316 K	\$199.3 M	36
HOST COMMUNITY --	273 K	185 K		














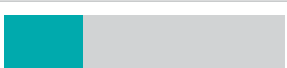






















NUMBER AND FINANCIAL REQUIREMENTS BY ORGANIZATION TYPE

		Organizations		Financial Requirements
International NGO		17		13.7%
National NGO		5		1.1%
Others*		3		1.6%
UN Agencies		11		83.5%

*Other include Red Cross movement, academia, civil society and faith-based organizations.
 The list of organizations and RMRP partners only includes appealing organizations under the RMRP.
 Many of these organizations collaborate with implementing partners to carry out RMRP activities.

POPULATION IN NEED AND TARGET, FINANCIAL REQUIREMENTS AND NUMBER OF PARTNERS BY SECTOR

		People targeted*		People in need*		Financial Requirements (USD)		Partners
Education		59 K		93 K		11.86 M		16
Food Security		233 K		355 K		41.72 M		7
Health		60 K		232 K		2.96 M		15
Humanitarian Transportation		4 K		27 K		639 K		1
Integration		130 K		468 K		62.93 M		25
NFI		32 K		55 K		2.06 M		7
Nutrition		3 K		27 K		383 K		2
Protection**		316 K		342 K		42.5 M		23
Shelter		56 K		122 K		5.89 M		13
WASH		54 K		96 K		3.52 M		8
Multipurpose CBI						18.49 M		10
Support Services***						6.38 M		18

*The figure of People in Need and People Targeted does not include host communities! ** Includes GBV, Child Protection, Human Trafficking & Smuggling
 *** Communication, Coordination, Information Management and Fundraising

COUNTRY OVERVIEW

Between 2016 and mid- 2019, Ecuador maintained an open-doors policy that had allowed more than 1.7 million refugees and migrants from Venezuela to enter the country in a regular manner. Regular entry was possible by producing an identity document issued by the country of origin, as stipulated in the national Law on Human Mobility. However, the issuing of Executive Decree No. 826 on 26 July 2019 and subsequent Ministerial Resolution 000103/2019 triggered a significant policy shift which will influence the operational context in 2020, by establishing the requirement for Venezuelan nationals to obtain an entry visa in order to enter Ecuador. Since the decree entered into force, a significant reduction of regular entries to Ecuador was registered, with an average of 23 daily regular entries recorded during the month of September, compared to an average of over 2,000 throughout the year⁸¹. It is anticipated that this measure will be maintained in 2020 and low numbers of regular entries will continue to be observed. On the other hand, given these new requirements to access the territory and based on previous trends⁸², it is estimated that a significant proportion of refugees and migrants from Venezuela entering Ecuador in 2020 will do so irregularly. As a result, projections for 2020 show a marked decrease compared to 2019, with 273,750 new entries anticipated. This number includes both regular and irregular crossings. Out of this total, it is estimated that about 60 per cent will transit to a third country.

The number of refugees and migrants from Venezuela living in Ecuador is expected to reach 659,000 by the end of 2020, with 109,000 of the 273,750 entering Ecuador expected to settle in the country. A registration and regularization process for refugees and migrants living in Ecuador was established by Executive Decree 826, under several conditions. Refugees and migrants from Venezuela who entered Ecuador regularly before 26 July 2019, and do not hold a criminal record, can present a valid or expired passport, are registered in the migratory registry and, subject to a USD 50 visa application fee, will be able to obtain a two-year residence permit ("*exceptional temporary visa for humanitarian reasons*"). The provisions of Decree 826 also enable refugees and migrants from Venezuela who overstayed their tourist visa to benefit from the regularization process, without having to pay a fine, as long as they fulfil all other criteria. This initiative will therefore benefit an important proportion of refugees and migrants from Venezuela that are already living in Ecuador.

Summary findings of joint needs assessments and analysis

The regularization process initiated by the government constitutes a meaningful initiative to address the situation of refugees and migrants from Venezuela living irregularly in Ecuador. It will contribute to improve their enjoyment of basic rights and access to services. However, the requirements established by the Government, particularly the need to present a passport, will constitute a major challenge for a large majority, who have entered the country with an identity card as they do not possess passports (52 per cent⁸³). This population group will therefore face obstacles to access regularization mechanisms in 2020.

In addition, Decree 826 does not establish exceptions enabling vulnerable profiles, (34 per cent of the population entering Ecuador⁸⁴) to access the territory. Several challenges are therefore expected to persist in 2020 in terms of access to the territory, including for persons in need of international protection. Even if an important reduction of regular entries is anticipated for 2020, it is expected that increased irregular movements across the border will be observed. This trend compounds the protection risks already faced by refugees and migrants from Venezuela, such as unsafe travel conditions, traffic accidents, theft, extortion, harassment and/or exploitation, and especially sexual violence and exploitation, human trafficking and smuggling. Refugees and migrants from Venezuela in an irregular situation might also fear requesting services because of their status, which may in turn generate negative coping mechanisms. Finally, an increase in irregular movements will represent a significant challenge for humanitarian and development actors to be able to identify and reach new arrivals, their needs and their vulnerabilities.

Further, the needs of refugees and migrants from Venezuela settling in Ecuador will become increasingly evident in 2020, given the large number of refugees and migrants who settled in Ecuador in 2019 and the difficulties faced by this population group. In 2019, access to the labour market and, more generally, to socio-economic integration opportunities was one of the major concerns expressed by refugees and migrants from Venezuela, as they try to meet their basic needs and access services⁸⁵. 72 per cent of refugee and migrant households from Venezuela who settled in Ecuador during 2019 do not manage to cover the needs contained in the basic family food basket⁸⁶. The Ecuadorian Constitution guarantees universal access to health and education. However, refugees and migrants face obstacles to access them. It is estimated, for example, that between 25,000 and 35,000 Venezuelan children of school

81 Average of 2,500 daily entries in 2019 - outside the period January 26 - March 26, 2019 during which certified criminal records were required to enter Ecuador (<https://www.ministeriodegobierno.gob.ec/migracion/>).

82 Ibid.

83 IOM (March-June 2019), Displacement Tracking Matrix (DTM) Round 4 and 5 in Ecuador.

84 UNHCR-MIES (April-August 2019), conducted in Cuenca, Guayaquil, Ibarra, Machala, Manta / Portoviejo, Quito and Santo Domingo

85 Ibidem.

86 World Food Programme (WFP), 2019 Vulnerabilidad social, económica y seguridad alimentaria de hogares venezolanos residentes y población que ingresa por vía terrestre

age are currently out of school⁸⁷. Finally, the community-based component of the response will need to be strengthened to foster peaceful coexistence and prevent discriminatory and xenophobic incidents, which constituted a worrying trend observed in 2019. The inclusion of host communities in interventions planned by Refugee and Migrant Response Plan (RMRP) partners will be key to the success of these activities.

RESPONSE STRATEGY

Scope of the Response

Based on the needs assessments carried out for this response plan and on projections for 2020, the response strategy of the GTRM (the Inter-Agency National Coordination Platform, for its Spanish acronym) will focus on the protection and integration needs of all population groups of both people in transit and those settling in Ecuador. The response's priority will be to promote enjoyment of rights and access to services, both through direct and indirect assistance. Indirect assistance will translate into provision of technical assistance, equipment and staff to the authorities for the regularization process and strengthening of the national asylum system, as well as support to mainstreaming human mobility considerations into public policies. Support provided to state institutions will also contribute to the sustainability of the response and will also enable the expansion of the assistance provided by GTRM partners to host communities. Direct assistance will focus on promotion of livelihoods, access to financial services, social cohesion and sustained access to basic services. It will aim to propose innovative solutions to address the challenges caused by irregular movement and stay, amidst a difficult economic context and incidents of discrimination and xenophobia. Integration-related interventions implemented by partners will be coordinated with and pave the ground for development actors to intervene on a longer-term basis. The humanitarian response will continue to be an important component of this Plan, even if in lesser proportions than last year, to meet the needs of refugees and migrants who will continue to transit through Ecuador in 2020. The particular vulnerabilities and protection concerns stemming from irregular movements must be fully considered to ensure that the response prioritizes those that are most in need.

The anticipated reduction of regular entries and flows through Ecuador will require justify GTRM members to increase their presence in those urban centres and/or locations where the largest numbers of refugees and migrants from Venezuela are registered - an operational shift compared with 2019, where the large numbers of arrival required a large humanitarian presence at border areas.

Response Principles

The integration of considerations related to age and gender mainstreaming in the response of GTRM partners, as well as on the promotion of centrality of protection was assessed during the development of this response plan through the completion of related questionnaires by appealing agencies.

Of the 36 appealing organizations for the Ecuador chapter of the RMRP 2020, 33 completed the Inter-Agency Standing Committee (IASC)'s Gender and Age Marker (GAM) for the planning phase. The majority of them (88%) indicated that they intended to promote gender equality mainstreaming, while 79 per cent of them said they would promote the inclusion of both age and gender considerations in their interventions. In terms of centrality of protection, almost all partners (97%) mentioned that they had integrated protection mainstreaming in their planning, as well as the "Do-No-Harm" principle (91%). 86 per cent reported that the activities included in the Plan included activities related to protection against sexual exploitation and abuse (PSEA). Finally, 80 per cent of the interventions included providing information to beneficiaries about the assistance delivered to them.

During 2019, an inter-agency complaint mechanism to prevent and respond to PSEA was elaborated, together with the capacity-building of more than 500 humanitarian workers, as part of a process initiated by the Protection sector. To support the coordination of this initiative among GTRM partners and ensure that mechanisms are in place and function to prevent sexual exploitation and abuse, dedicated resources will be necessary in 2020, in particular at the local level. Finally, in terms of Accountability to Affected Populations (AAP), 80 per cent of respondents indicated that their interventions included providing information to beneficiaries about the assistance delivered to them. However, enjoyment of rights and access to services can be hindered by the lack of timely and accurate information. Lack of information was, for example, identified as one barrier for access to education⁸⁸. As a way to address this gap, activities of the Communication Working Group will first respond to the information needs of the target population, with the delivery of information on access to asylum, regularization mechanisms, access to rights and services and risk prevention. Several modalities will be used, such as social networks, organization of group information sessions or the development of dedicated communication products. During 2020, a key challenge for the Communication Working Group will be to find effective and proactive ways to reach the population, particularly those who enter or live in Ecuador irregularly.

87 UNICEF (2019): Informe de monitoreo de implementación de acciones de inclusión educativa con énfasis en población en población en movilidad humana

88 More than 5 per cent of respondents mentioned "lack of information" among the reasons for non-attendance for the age group of 12-17 years.

Multi-Purpose Cash Transfer

Refugees and migrants from Venezuela face difficulties to meet their basic needs, as they transit to a third country or during in their integration process in Ecuador. Access to food, shelter, health and education is described as particularly challenging. As a result, existing vulnerabilities are further increased and exposure to various protection risks, can be heightened. It might for example increase the resort to negative coping mechanisms that might put the dignity, protection or welfare of refugees and migrants at risk.

According to a study conducted in October 2018 by several organizations⁸⁹, more than 55 per cent of refugees and migrants from Venezuela in Ecuador lack the capacity to generate enough income to cover their basic needs. According to this study, 72 per cent of the refugee and migrant population considers it a priority to generate enough income to cover their basic needs and send remittances to Venezuela⁹⁰. These difficulties in achieving self-reliance derive from limited access to employment and self-employment opportunities (detailed by the socio-economic integration sector). Refugees and migrants from Venezuela remaining irregularly in Ecuador face additional barriers to access social services. For example, social security legislation excludes refugees and migrants due to their nationality and / or their regular status from a series of benefits. Finally, more than 60 per cent of those surveyed indicate that lack of financial resources constitutes an obstacle to continue their journey to a third country or to settle in Ecuador, a process that would require more durable assistance. Multi-purpose cash transfers can help struggling families to cover their basic needs while they search for durable sources of income.

Despite the efforts made, including from RMRP partners, to facilitate access to financial services for refugees and migrants from Venezuela (e.g. opening of bank accounts), the results so far have been limited. Refugees and migrants are still required to present an Ecuadorian Identity Document (ID) or a passport to open a bank account, cash a cheque or collect a payment. Many refugees and migrants from Venezuela are however unable to comply with this requirement as they lack passports, or are unable to renew, legalize or obtain relevant documents.

The provision of multipurpose cash will be prioritized through the following activities: (a) delivery of multi-purpose cash transfers, so that beneficiaries can meet their basic needs, on the basis of strict vulnerability targeting criteria; (b) provision of technical support to strengthen the sectoral and multi-sectoral coordination of this response modality, which is implemented by several RMRP partners.

Given the multi-purpose nature of these cash transfers, beneficiaries will be able to decide freely on how to use this assistance, depending on their immediate needs. This assistance will target both the population in transit as well as refugees and migrants from Venezuela settling in Ecuador and will be delivered to the most vulnerable groups or individuals on the basis of established vulnerability criteria. Individuals facing protection risks (families with children, women travelling alone, pregnant or breastfeeding women, Lesbian, Gay, Bisexual, Transgender, Intersex (LGBTI) population and Gender-Based Violence (GBV) survivors), will be prioritized to receive this assistance, so as to prevent resort to negative coping mechanisms and to support their socio-economic integration.

RMRP partners will establish mechanisms to monitor the use of cash transfers by beneficiaries, to ensure they are adequately used, that they reach those most vulnerable, and that their integration process is supported. Three thematic groups have been established within this sector: a group on beneficiary targeting, aiming to improve coordination and complementarity of existing cash transfer programmes, one working methodology to establish the value of cash transfers so that refugee and migrant families from Venezuela are able to cover their basic transit and installation needs; and a third to work with service providers so as to elaborate financial products tailored to the needs of the target population and which facilitates their financial inclusion.

In 2020, initiatives piloted in the course of 2019 will be refined, with the intention to offer cash transfer options that are more efficient, quicker, safe and dignified and respond to the needs of those most vulnerable. The sector also intends to develop a communication strategy to help clarify what cash-based assistance entails and prevent potential tensions with host communities. Capacity building on cash transfer programmes will also be carried out to improve the understanding and implementation of this response modality.

Cash transfers have a multiplying effect: Cash-assistance delivered to beneficiaries will be injected in local markets, thus boosting economic activity and generating an increased demand. Market analyses and market monitoring will be conducted in locations where cash transfer beneficiaries are concentrated so as to evaluate the impact of this assistance on beneficiaries and on the local economy.

89 Ecuador CCD Multi-Sectorial Needs Assessment - Executive summary (October 2018), Quito.

90 Ibid

EDUCATION



PEOPLE IN NEED 

93 K

PEOPLE TARGETED 

59 K

FINANCIAL REQUIREMENTS 

\$11.86 M

PARTNERS 

16

Priority needs

Access to education for all people is guaranteed without distinction by the Constitution. However, despite legislation guaranteeing access of people on the move (Ministerial Agreement 42 A) barriers continue hindering access to education for refugee and migrant children, and this becomes more evident in the wake of increased arrivals of refugees and migrants from Venezuela throughout 2018 and 2019. According to the Ministry of Education⁹¹, approximately 16,000 children from Venezuela are currently enrolled in the education system. Meanwhile, it is also estimated that between 25,000 and 35,000 Venezuelan children are out of school. For the host community, this figure increases to 250,000⁹².

School attendance of children and adolescents from Venezuela gradually improves during their time of residence in Ecuador, particularly after the first year of residence. However, non-attendance rates remain high, especially for adolescents aged between 12 and 17. According to the results of partner assessments, 39 per cent of interviewees indicated that children aged between five and 11 and with six to twelve months of residence in Ecuador did not attend school. For the same age group, this number comes down to 33 per cent after one year of residence. 59 per cent of respondents indicated that adolescents with between six to twelve months of residence in Ecuador did not attend school, against 38 per cent, for the same age group with more than one year of residence⁹³. This situation exposes children -particularly adolescents- to higher risks of child labour or other forms of exploitation.

The reasons for not attending school are multiple and reflect the various obstacles, in particular the socio-economic challenges, that refugees and migrants from Venezuela encounter during their integration process in Ecuador. Perceived lack of enrolment capacities, educational costs and the need to work. The lack of information on the requirements necessary to access education, both from the part of families or the educational community, constitutes an additional obstacle.

For children and adolescents from Venezuela that are enrolled in the education system, difficulties have been identified in terms of ensuring school attendance, with dropping-out generally related to incidents of discrimination and bullying. This situation may be aggravated further by the limited experience of educational staff on how to deal with children and adolescents in a situation

of human mobility, how to integrate vulnerable groups or how to respond to violence in the school environment. Limited resources of the public education system to respond to the demand is another challenge.

Response strategy

Considering the above scenario, an important component of the response will be implemented in close coordination with the Ministry of Education at national and local levels and the schools themselves, as a way to facilitate and promote access to formal education.

GTRM partners will provide technical assistance to public educational institutions, through the delivery of recreational and educational equipment and materials, including materials specifically tailored for persons with disabilities (content in Braille, sign language, simplified language to facilitate reading). Advocacy initiatives with the Ministry of Education or Ombudsman's Office will be conducted to promote access to education, on the basis of the dispositions of ministerial agreement 42-A⁹⁴. Likewise, coordination with GAD and local councils will be reinforced with the objective of establishing referral pathways within the educational system. Finally, capacities of public servants of the Ministry of Education will be strengthened, to ensure that methodologies promoting access to education are adequately harmonized and implemented. Issues related to the prevention and early detection of cases of xenophobia and discrimination in the school environment and on how to provide psychosocial support will be included. Partners will also advocate for peaceful coexistence with local communities, through initiatives promoting tolerance, peace building, inclusion, participation and full exercise of citizenship.

In addition to initiatives coordinated with public institutions, assistance will be provided to families to facilitate access to and permanence in formal education and access to child development services, without discrimination. Guidance will be provided on a case-by-case basis, and material support (school kits to girls and boys, including school supplies, uniforms, cash transfers) given in order to facilitate the integration of children into the education system and avoid dropping out. Innovative methodologies that include sport, art and culture will be

91 Venezuelan population enrolled in the education system: 15,542 (5,446 on the Coast - 2019-2020 and 10,096 in the Sierra - 2018-2019 (MINEDUC)

92 Administrative record of the Ministry of Education (July 2019 court)

93 UNHCR-MIES Joint Protection Monitoring (April-August 2019) in Cuenca, Guayaquil, Ibarra, Machala, Manta / Portoviejo, Quito and Santo Domingo

94 Published on May 12, 2017.

implemented to promote the smooth inclusion of children. Specialized care will also be provided to out-of-school children.

A dedicated communication strategy and materials will be designed to inform host communities and refugee and migrant families from Venezuela about how to register to access

education. Along the promotion of access to formal education, work will be carried out to strengthen non-formal education processes, with activities aimed at girls, boys, adolescents and young people, to prevent xenophobia and discrimination and promote peaceful conflict resolution

FOOD SECURITY



PEOPLE IN NEED 

355 K

PEOPLE TARGETED 

233 K

FINANCIAL REQUIREMENTS 

\$41.72 M

PARTNERS 

7

Priority needs

According to available information, 30 per cent of the refugee and migrant population from Venezuela, surveyed as they were entering Ecuador through the northern border have a poor food consumption – which reflects extreme or severe food insecurity and a higher risk to develop nutritional diseases. 31 per cent of them present borderline food consumption reflecting a situation of moderate food insecurity. In addition, more than 56 per cent of the surveyed population indicated lacking the necessary resources to buy food, while 63 per cent surveyed at the southern border mentioned they would lack these resources in the coming days. In several cities of Ecuador, 45 per cent indicated having those resources for one to two days only⁹⁵. The newly arrived refugee and migrant population identifies several coping strategies regarding their food consumption, such as reducing the number of daily meals, reducing the size of portions and purchasing cheaper food. Refugees and migrants from Venezuela also bought cheaper food, or resorted to less preferred or lower quality options four to six days of the week preceding the survey and 68 per cent mentioned that they reduced the size of their food intake on four to seven days of the week preceding the survey, while 67 per cent reduced their number of meals on four to seven days during the week preceding the survey. Finally, 25 per cent mentioned that adult refugees and migrants restricted their food intake for the benefit of children on four to seven days during the week preceding the survey⁹⁶.

Available data suggests that Venezuelan households living in Ecuador also face challenges: 72 per cent do not manage to cover their needs as per the basic family basket, 15 per cent live in a situation of extreme poverty and 22 per cent in a situation of poverty, while 55 per cent of surveyed households dedicate more than 40 per cent of their income to their alimentation needs; some and 24 per cent have a diet that is

described as poorly diverse and 53 per cent have a moderately diverse diet. Finally, 48 per cent of refugee and migrant households from Venezuela resort to cheaper, less preferred or low-quality food options most of the time (between four to seven days a week), 57 per cent are in a situation of food insecurity and 40 per cent in a moderate food insecurity situation, facing the risk of falling into severe food insecurity should a difficulty arise⁹⁷.

Food insecurity may be heightened by an increase in irregular movements, as unsafe travel conditions will challenge access to food, and access to livelihoods will be limited for those without legal stay.

Response strategy

Based on the identified needs, the response priorities of the Food Security sector will mainly focus on

- Food Security sector partners will focus on the delivery of food assistance to the various population groups covered by this response plan, through three key response modalities: (a) one-off assistance, with the distribution, in different provinces, of food kits or vouchers to vulnerable refugees and migrants in transit⁹⁸; (b) medium-term food assistance, delivered in 14 provinces, to refugee and migrant families from Venezuela living in Ecuador to cover their food needs while they are able to access livelihoods and reach greater stability. This assistance will be delivered through vouchers or cash transfers; (c) food assistance provided in shelters or community kitchens.
- Partners' response will also include support infrastructures where food is provided, through the rehabilitation, improvement and provision of equipment. This will be

95 IOM (March – June 2019), Displacement Tracking Matrix (DTM), Round 4 and 5.

96 WFP (2019). Social, economic and food security vulnerability of resident Venezuelan households and population entering Ecuador by land.

97 Venezuelan population that settles in Ecuador (less than 1 year of residence), WFP, 2019.

98 Average 2,000 kcal of food.

complemented by the organization of capacity-building workshops for the staff of these institutions on food assistance and nutrition. Food delivery in schools will also be a part of the response.

- During 2020, partners will explore temporary work programmes, through cash-based assistance, aim to promote the social protection of vulnerable groups and allow them to access food. Through community work performed by refugees and migrants from Venezuela, as well as by members of the host communities, these programmes seek to strengthen social cohesion, and to influence positively the perception of people on the move within public opinion.

These interventions will be implemented in coordination with Decentralized Autonomous Governments (GAD)⁹⁹.

The Food Security sector will seek, in collaboration with the Integration sector, to promote a better coordination of all socio-economic integration interventions, bearing in mind the variety of challenges posed by the current socio-economic context, limited employment opportunities, incidents of discrimination and xenophobia and the irregular status of a large proportion of refugees and migrants. The sector will monitor related developments and will be ready to respond to the needs of the most vulnerable families experiencing integration challenges.

HEALTH



PEOPLE IN NEED 

232 K

PEOPLE TARGETED 

60 K

FINANCIAL REQUIREMENTS 

\$2.96 M

PARTNERS 

15

Priority needs

The number of medical services provided to refugees and migrants from Venezuela in Ecuador increased steadily since 2015, leading refugees and migrants to become an important target population for the public health system. According to data from the Ministry of Health, as of April 2019 more than 188,000 healthcare services were provided to Venezuelan citizens in 2018 and more than 129,000 in 2019¹⁰⁰. The conditions treated in priority are the following: acute respiratory infections, tooth cavities, inflammatory pelvic diseases and urinary infections¹⁰¹. The right to health is guaranteed by the Ecuadorian Constitution. Surveyed refugee and migrant households from Venezuela generally describe that their access to health services is “good”, with the vast majority of them indicating that they were able to access a service when they needed to¹⁰². Health centres and public hospitals are the most frequented health institutions¹⁰³.

Within the priority groups that are identified in Ecuador, several are in need of medical attention with, 7 per cent of pregnant women, 14 per cent of breastfeeding women, 10 per cent of people suffering from chronic diseases and 3 per cent of people with reduced mobility¹⁰⁴. 72 per cent of the

surveyed population mentioned that they experienced stress or emotional distress during the year¹⁰⁵. Lack of access to health services in Venezuela creates health needs that are further compounded by physical and/or mental fatigue accumulated during the journey to Ecuador, particularly for “caminantes”. For refugees and migrants from Venezuela who settle in Ecuador, regular access to health services, medicines or specialized treatments can be hindered by insufficient information, particularly on their constitutional right to health. Lack of resources or fear caused by an irregular migration status are other factors impeding access¹⁰⁶. The lack of a regular stay permit will also hinder the capacities of health services to identify and respond to health needs, particularly for children and adolescents in need of vaccination or medical screening. Gaps are already identified in terms of HIV/AIDS¹⁰⁷ treatment access to information on sexual and reproductive health, especially for adolescents, and psychosocial support.

The austerity measures implemented by the Government of Ecuador have resulted in a decrease of health personnel and restructuring at the local level¹⁰⁸, which have in turn impacted on the resources available for health care. This trend could not

99 Gobierno Autónomo Descentralizado (GAD)

100 Information of the Ministry of Public Health (MSP)

101 WFP (2019). Social, economic and food security vulnerability of resident Venezuelan households and population entering Ecuador by land.

102 UNHCR-MIES Joint Protection Monitoring (April-August 2019) in Cuenca, Guayaquil, Ibarra, Machala, Manta / Portoviejo, Quito and Santo Domingo.

103 Ibid.

104 UNHCR-MIES Joint Protection Monitoring (April-August 2019) in Cuenca, Guayaquil, Ibarra, Machala, Manta / Portoviejo, Quito and Santo Domingo. IOM (March-June 2019). Displacement Tracking Matrix in Ecuador, rounds 4 and 5.

105 Ibidem 5

106 Ibidem.

107 Human immunodeficiency virus/ acquired immunodeficiency syndrome

108 Executive Decree No. 135, which establishes austerity rules in public spending

only affect the availability and quality of the services provided to refugees and migrants from Venezuela, as well as to the host population. Decree 826 does not include exceptions that would allow priority groups, such as elderly, people suffering from chronic diseases, pregnant women or people with reduced mobility to access Ecuador.

Response strategy

- Partners of the Health sector will strengthen existing public health capacities, both at the local and national level through the Ministry of Public Health (MSP). This response modality also allows GTRM partners to not only satisfy the health needs of refugees and migrants from Venezuela, but of the host community members as well. The Health sector's support to the MSP will include: 1) delivery of equipment and medicines to health units and centres (rapid HIV-AIDS tests, syphilis, hepatitis B and C tests, drugs and other relevant supplies to treat survivors of sexual violence, emergency sexual and reproductive health kits, improving institutional capacity of delivery care, neonatal and obstetric emergencies and access to contraception; 2) capacity building of health personnel on self-care, sexual and reproductive health, obstetric and neonatal emergencies, diagnosis and treatment of prevalent diseases in children, clinical treatment of sexual violence survivors, family planning, HIV/AIDS, psychosocial support and psychological first aid; data analysis and update of contingency plans. This support will allow health personnel to respond to health needs through the establishment of rapid response teams, mobile care

units and the delivery of free assistance, targeting vulnerable groups in particular.

- GTRM partners will also provide direct assistance as needed. Under this section, partners have identified in priority the provision of free mental health assistance and individual psychosocial support, to both the refugee and migrant population and the host community, as priorities. Mobile teams will be deployed to the field to that end. This attention will prioritize vulnerable groups, such as children and adolescents, persons with disabilities and LGBTI population. The promotion of sexual and reproductive health constitutes another strategic element of the response and will involve awareness-raising workshops; and facilitating access to contraceptive methods, either by direct delivery to the population or through donation to health centres (hormonal contraceptives, male and female condoms). Some interventions will target pregnant women with the provision of information, and the activation of referral and counter-referral mechanisms. Finally, prevention of communicable diseases and promotion of health surveillance, including HIV/AIDS, will be strengthened in 2020 through the organization of communication campaigns, provision of medical care and referral.

Given that identified health needs are both of an emergency and long-term nature, the sector will ensure the linkage between humanitarian and development agendas to guarantee a comprehensive response benefiting all population groups. Reinforcing and / or implementing binational mechanisms of epidemiological control will be key to improve the identification of persons, in particular those travelling irregularly, that present health needs.

HUMANITARIAN TRANSPORTATION



PEOPLE IN NEED 

27 K

PEOPLE TARGETED 

4 K

FINANCIAL REQUIREMENTS 

\$0.64 M

PARTNERS 

1

Priority needs

Thirty-one per cent of the surveyed refugee and migrant population from Venezuela who entered Ecuador in 2019 has indicated that they either travelled on foot or resorted to hitchhiking¹⁰⁹. These unsafe travel conditions increase the exposure to various protection risks, such as smuggling, human trafficking and GBV. They might also lead refugees and migrants from Venezuela to resort to negative coping mechanisms.

Given the need to pay visa-related fees and to obtain a passport, as required by Decree 826 Venezuelan refugees and migrants wishing to enter Ecuador regularly will likely arrive in the country with further strained economic resources. This will limit their ability to access safe transport and might compel them to opt for informal transportation options, or to continue their journey on foot. The majority of refugees and migrants from Venezuela wishing to settle in Ecuador have been doing so mainly in the provinces of Pichincha, Guayas, El Oro and

in cities located in the centre of the country, which implies travelling significant distances (between 200 and 700 km).

A significant proportion of the refugee and migrant population will be in transit to Peru or third countries and will therefore need border-to-border transportation. As per Decree 826, those in transit also need a visa, even if they have obtained visas for other countries. Transit visas have a duration of 10 days. All this will increase the need for fast and safe transportation.

Response strategy

The response strategy of the Humanitarian Transport sector will focus on two main sets of activities

- The provision of border-to-border transportation for refugees and migrants from Venezuela transiting to third countries and who have obtained the necessary visas. Buses will be provided to this specific end;
- Provision of transportation vouchers to refugees and migrants from Venezuela to their final destination city within Ecuador, as well as for persons who currently reside in Ecuador and who might have opted to continue their journey to a third country. In this case, bus tickets to travel to the southern border will be made available.

In both cases, the provision of humanitarian transport will prioritize vulnerable groups, such as people with disabilities, people suffering from chronic or serious diseases, women travelling alone and families.

INTEGRATION



PEOPLE IN NEED 

468 K

PEOPLE TARGETED 

130 K

FINANCIAL REQUIREMENTS 

\$62.93 M

PARTNERS 

25

Priority Needs

Refugees and migrants from Venezuela often face difficulties to meet their basic needs during their integration process in Ecuador. It has also been observed that the socio-economic profile of recent arrivals is lower than those arrived in previous years – they have fewer resources and lower academic qualifications than before. Facilitating access to livelihoods and decent work - through micro-entrepreneurship, linkages with employment opportunities and professional training - is therefore essential to enable the refugee and migrant population from Venezuela to reach an adequate standard of living while in Ecuador.

An important proportion of refugees and migrants from Venezuela is exposed to labour exploitation, human trafficking and other risks associated with informal employment. Lack of regular status, validation of professional qualifications or lack of skills matching the demands of the market compound these challenges. 36 per cent of surveyed refugees and migrants from Venezuela indicate that access to work constitutes their priority need, after the need to cover basic needs. However, the current economic context¹¹⁰, which has led to an increased unemployment (4,6 per cent in 2019¹¹¹) negatively affects the integration of the refugees and migrants from Venezuela in Ecuador. Refugees and migrants find themselves in a very

vulnerable situation in terms of access to work, with 20 per cent of them reportedly unemployed¹¹². Refugees and migrants suffer from additional factors to access socio-economic integration, such as discrimination in the workplace and within the host communities, as reported by 60 per cent of the surveyed population¹¹³. In addition, national authorities have limited capacity to monitor respect for labour legislation. This is further compounded by the fact that companies have a limited knowledge of relevant hiring procedures regarding refugees and migrants. The lack of studies looking at the current labour offer, employability gaps and main skills available within the refugee and migrant population, hinders the development of public integration strategies of refugees and migrants into the labour market. Formal employment options are insufficient, which leads many refugees and migrants from Venezuela to work in the informal sector. Only 5.47 per cent of the Venezuelan population indicate that they have signed some type of employment contract and 88.1 per cent mentioned that their income is below the minimum salary in Ecuador. 15 per cent of the surveyed population reported that they earn less than USD 85 per month¹¹⁴, which places them below the poverty line, a challenge which is also face by members of the host community. The inability to generate

110 According to the IMF, the internal gross product of Ecuador will decrease by 0.5 per cent in 2019 (perspectivas de la Economía Mundial, Oct. 2019)

111 https://www.ecuadorencifras.gob.ec/documentos/webinec/EMPLEO/2019/Junio/Boletin_tecnico_de_empleo_jun19.pdf

112 DTM 4 and 5- IOM

113 MIES-UNHCR Protection Monitoring May- July 2019

114 DTM-OIM Round 4 and 5- IOM and Analysis of the needs of the Venezuelan population in Ecuador- Venezuela Migrating- NRC

decent income exacerbates protection risks, especially for women and girls and young men, exposing them to different forms of exploitation and abuse, such as recruitment by criminal gangs and survival sex: 20 per cent the population responding to a study on women from Venezuela in the northern border of Ecuador reported that they had been forced to engage in sex work, and 33.9 per cent that they had done it out of necessity¹¹⁵. Lack of legal stay constitutes the main hindrance to integrate the labour market. Refugees and migrants from Venezuela who are unable to obtain the required documentation to regularize their status will not be able to access formal employment and will as a result be confined to informal employment.

Access to decent housing is also crucial to facilitate the integration of refugees and migrants from Venezuela in Ecuador. Demand for housing, in particular in areas where greater presence of refugees and migrants from Venezuela is registered, has soared. The limited offer of decent housing combined with the socio-economic vulnerability of refugees and migrants has compelled many of them to live in overcrowded accommodation with limited access to basic services. While 83.1 per cent of refugees and migrants from Venezuela rent their current accommodation, there is no public policy that facilitates or regulates access to housing for refugees and migrants. As a consequence, a majority of refugees and migrants from Venezuela continue to face difficulties, including, discrimination, with 58.2 per cent of the surveyed population mentioning the refusal to rent out to a foreigner as one of the existing obstacles, along with the lack of warrantor (13.7 per cent). Limited rent regulation has led many individuals with limited resources to opt for unsafe housing options, where - in the event of a natural disaster - they would be directly affected.

Xenophobia and discrimination have impeded social cohesion with host communities, and hinder access to adequate housing, medical care and social protection programmes. Ecuadorian communities have demonstrated enormous solidarity with refugees and migrants from Venezuela. However, against a backdrop of strained economic resources within communities, the risk of a further increase in discrimination and xenophobia is pervasive. Xenophobic incidents against refugees and migrants from Venezuela took place in 2019, including during the social protests in October. In this context, the most pressing needs of refugees and migrants must be addressed, as a way to facilitate their integration in the country. Structural discrimination, based on entrenched prejudices and myths combined with factors such as, racism, inequality and sexism are challenges faced by refugees and migrants from Venezuela, but also host communities.

Response strategy

Considering the growing number of refugees and migrants from Venezuela expressing the intention to stay in Ecuador,

integration has become one of the priority focus of intervention, both for GTRM partners and the Government.

- Partners will focus on socio-economic integration, through vocational training and skills development to facilitate access to employment and entrepreneurship. To address challenges related to the real or perceived strain that a large arrival of refugees and migrants has imposed on the livelihoods and employment opportunities of host communities, income-generating interventions targeting refugees and migrants from Venezuela will include individuals from host communities and will be combined with initiatives fostering social cohesion.
- The development of support networks between host communities and Venezuelan nationals and initiatives promoting the participation of local communities, will be encouraged, as a way to prevent discrimination and xenophobia. Market studies and advocacy initiatives targeting the public or the private sectors will further complement these actions.
- Given the rise of unemployment in Ecuador and the increasing number of refugees and migrants from Venezuela with little professional training and academic qualifications, priority will be given to vocational training, to facilitate the development of relevant skills as a way to boost self-employment and micro-entrepreneurships. These interventions will be complemented by financial education and technical assistance, aiming to support kicking-off or scaling up of businesses, for example with the delivery of seed capital to entrepreneurs and facilitating access to credit. Beneficiaries of such activities will be supported for 3 to 6 months to ensure training on book-keeping, obtain business authorizations, and cover legal administrative expenses. Such initiatives and projects, will ensure the participation of both Ecuadorians and Venezuelans.
- Information-gathering on the different socio-economic and professional profiles of the Venezuelan population based in Ecuador will be carried out and complemented by an analysis of the current economic situation and dynamics of the labour market, in order to identify employment needs in the private sector, both in urban and rural areas. This evidence-based information will be used to support targeting for vocational training and other interventions, the identification of employment opportunities, and to facilitate linkages with potential employers and the incorporation of refugees and migrants from Venezuela within the private sector.
- Training on labour rights and obligations will be delivered to a series of stakeholders – private companies, local and national public institutions, as well as refugees and migrants – in order to promote decent working conditions. The objective of these capacity-building activities will also contribute to strengthening governmental protocols to prevent, monitor and respond to labour exploitation and human trafficking, through the elaboration of adequate guidance, protocols and public policy.

- Access to financial services is another way to facilitate and promote access to durable integration solutions. To address these obstacles, community based saving initiatives will be established with private banks and credit unions, with a view to facilitate access to credit, as the inability to access financial services is another key obstacle for the socio-economic integration of Venezuelan refugees and migrants. Not being able to access banking systems due to lack of a financial record in the country and to lack of documentation, hinders access to labour opportunities, professional development and competitiveness, which in turn limits their ability to access housing, afford necessary items for their integration process and decrease their dependence on humanitarian assistance.
- Partners will promote durable integration of refugees and migrants from Venezuela related to access to decent and adequate housing. In coordination with the shelter sector, community-based programmes will be implemented. The purpose of these initiatives will be to identify accommodation that may be available within host communities, may meet basic requirements, even if it may be in need of rehabilitation. Once accommodation has been identified, landlords will receive adequate support to rehabilitate their property and subsequently rent it out to refugees and migrants. Other activities include provision of rental subsidies, cash transfers to facilitate installation and vouchers to purchase basic

items. These activities will also contribute to boost the local economy, which will benefit both locals and refugees and migrants from Venezuela alike, while increasing the offer of safe and dignified housing options.

- Promotion of social cohesion will be strengthened to facilitate the inclusion of refugees and migrants from Venezuela. A series of different activities will foster dialogue and interactions with the host communities, such as awareness-raising workshops addressing discrimination, xenophobia, reproductive sexual health, bullying, recreational activities (through arts and sports), festivals, social events, “mingas” (community activities), etc. Community infrastructure (public parks, recreational spaces, cultural spaces) will benefit from material support so that they can be used for such events. In addition, public information and communication campaigns against discrimination and xenophobia will continue to be implemented in 2020.

Finally, the need to reflect human mobility considerations in public policies, in a cross-cutting fashion, is another way of supporting the integration of refugees and migrants. In particular, mainstreaming of human mobility should be taken into account into public planning, including at the local level. Evidence-based advocacy will be carried out with public institutions to promote the inclusion of refugees and migrants into social protection systems.

NFI



PEOPLE IN NEED

55 K

PEOPLE TARGETED

32 K

FINANCIAL REQUIREMENTS

\$2.06 M

PARTNERS

7

Priority needs

Loss of personal property can be one of the consequences of a displacement situation. Vulnerable refugees and migrants from Venezuela accessing Ecuador generally do so with limited resources. They usually lack basic non-food items that are crucial to allow safe and dignified living conditions, such as blankets, adequate clothing, kitchen utensils, and hygiene items. In addition, people living with disabilities need specific items, such as wheelchairs, canes, batons and hearing aid equipment. These needs for non-food items (NFI) will be continually monitored and reviewed in light of the increasingly vulnerable profiles of the Venezuelan population entering Ecuador

Response strategy

The NFI sector will prioritize the delivery of NFIs to refugees and migrants from Venezuela and members of the host communities, in areas where greater needs are identified, in

particular border areas, temporary shelters and locations where an important presence of Venezuelan population is observed.

- To ensure that the affected population has access to the adequate items enabling them to live in safe and dignified conditions partners will distribute a variety of NFIs, including hygiene products, clothing, travel items or basic household utensils. Such items will be distributed through several modalities: in-kind donation, cash-based interventions or vouchers. Non-food items will be selected based on identified needs. Partners will ensure that beneficiaries of this assistance can participate and positively influence the selection of NFIs, as well as the distribution modalities. Once the distribution list is validated, awareness-raising activities will be organized to ensure that beneficiaries know how to use the distributed items (i.e. water purification tablets, mosquito nets, shelter materials, among others). These sessions will be organized before distribution, at distribution sites.

- Distribution committees will be established to promote the use of harmonized systems and procedures related to NFIs, including elaboration of distribution lists and procedures for cash and / or voucher distribution.
- Capacity-building on post-distribution monitoring will also be conducted, in order to ensure that assistance is properly directed and actually meet the needs of refugees and migrants.

The NFI sector will work in collaboration with the WASH and protection sectors, in particular regarding the identification, selection and distribution of the selected items among the partners. The sector will also closely coordinate with the Shelter and Integration sectors, to ensure that items distributed for housing purposes are adequate, distributed where needs are the highest and facilitate a transition to more durable solutions.

NUTRITION



PEOPLE IN NEED 

27 K

PEOPLE TARGETED 

3 K

FINANCIAL REQUIREMENTS 

\$0.38 M

PARTNERS 

2

Priority needs

Refugees and migrants from Venezuela in Ecuador present several vulnerabilities in terms of food security, which are detailed in the relevant section. Regarding the population transiting through the country or that recently arrived in Ecuador, these vulnerabilities may have been triggered by the difficulties of accessing a diverse diet while in Venezuela and/ or during their journey to Ecuador, which further compound the risk of suffering from nutritional diseases -due to micronutrient deficiency- and generate a deterioration of the nutritional status of children¹¹⁶.

According to the available information, 45 per cent of children from Venezuela under five suffer from anaemia, 20 per cent from chronic malnutrition and 2 per cent from acute malnutrition. In addition, one in three children under two is not breastfed. One family in two does not have enough food to meet the needs of all its members¹¹⁷. Some 40 per cent of pregnant or breastfeeding women entering Ecuador indicate they have not received prenatal care. It is therefore assumed that many of them did not have any access to vitamins or micronutrients.

Within the refugee and migrant populations from Venezuela settling in Ecuador, several obstacles prevent them from maintaining a diverse diet during the first year of residence, in particular precarious housing conditions and high poverty rates. In addition, 53 per cent of households who have spent up to up to one year in Ecuador report having a moderately diverse diet and 24 per cent, a poorly diverse diet¹¹⁸.

Refugees and migrants from Venezuela who recently arrived in Ecuador present urgent nutrition needs. Beyond emergency food assistance, access to health services is also necessary to prevent or tackle nutritional diseases. However, not all refugees

and migrants have access to health care, as detailed in the Health section. The identification of nutrition needs, especially within children and adolescents, will be made difficult by the potential increase of irregular entries in Ecuador in 2020.

Response strategy

- Technical assistance by GTRM partners to the Government on Ecuador on Nutrition will, for example, cover support to national public policy programmes with the objective of improving nutrition indexes among different population groups, refugees and migrants as well as host communities. Most of partners' response will be carried out through the Ministry of Public Health (MSP, by its Spanish acronym).
- In terms of direct assistance, partners will focus on the delivery of nutritional supplements and micronutrients to the most vulnerable children (aged between six and 36 months) so as to prevent the deterioration of their nutritional status, particularly those in transit. Iron and folic acid supplements will be administered to pregnant and breastfeeding women and adolescents, including those from host communities who need them.

The nutrition response requires close coordination with several other operational sectors, especially Food Security, Protection, Health, Water, Sanitation and Hygiene (WASH). Both emergency and longer-term components are necessary to cover immediate needs of newly arrived refugees and migrants and host communities

116 PMA (2019). Social, economic and food security vulnerability of resident Venezuelan households and population entering Ecuador by land.

117 UNICEF (2019). Venezuelan children in human mobility contexts - Nutritional evaluation.

118 SWFP (2019). Social, economic and food security vulnerability of resident Venezuelan households and population entering Ecuador by land.

PROTECTION



PEOPLE IN NEED 

342 K

PEOPLE TARGETED 

316 K

FINANCIAL REQUIREMENTS 

\$42.5 M

PARTNERS 

23

Priority needs

Access to regularization and documentation will be one of the main challenges for many refugees and migrants from Venezuela living in Ecuador. Only some 115,000 had obtained residence permits by end of October 2019. While Decree 826 is a valuable initiative to address the situation of refugees and migrants from Venezuela irregularly staying in the country, the requirement imposed by the Government in order to benefit from this process means no more than 48 per cent of refugees and migrants may benefit from this process. Access to documentation and legalization of documents by the country of origin remains difficult, given the delays and fees requested¹¹⁹. The asylum system in Ecuador has faced an increasing number of asylum applications by Venezuelan nationals, with a monthly average of 1,275 new applications registered in 2019. Refugees and migrants from Venezuela represent more than 70 per cent of the new asylum requests in 2019, and this number could increase in view of the ongoing situation in Venezuela. However, the national asylum system is already under strain, and requires continuous and strengthened technical support. The provisions of Decree 826 constitute being a source of concern, as they may prevent Venezuelans from seeking asylum.

Response strategy

- Promoting access to the territory and providing support to the regularization of refugees and migrants from Venezuela. Mechanisms to ensure border monitoring and the identification of people in need of international protection and access to regular status will be strengthened, to promote access to the territory and prevent potential cases of *refoulement*. Advice, guidance and information will be provided to refugees and migrants regarding access to regularization and asylum and financial assistance will be delivered to those most vulnerable to so that they can obtain or legalise documents and access resident permits.
- Technical and material assistance will be provided to the Government for the regularization process.
- Identification of those in a vulnerable situation, including children, unaccompanied or separated children/adolescents (UASC), women travelling alone, GBV survivors, people living with reduced mobility, elderly, LGBTI individuals and people with chronic or serious diseases and the establishment of

referral mechanisms, including though border monitoring, to specialized services provided by the sub-sectors.

- Providing technical assistance to the authorities, including through capacity-building activities for civil servants, on a variety of protection issues (gender, human rights, and access to services, access to asylum and human mobility, human rights, psychosocial effects of being a refugee, psychological first aid, self-care, as well as GBV prevention).
- Partners will continue to promote protection mainstreaming within other sectors of the response and will provide support and guidance to identify and prevent protection risks.

CHILD PROTECTION

Priority Needs

The Sub-sector will concentrate on cases of at-risk children and adolescents, in particular unaccompanied or separated children. The Government of Ecuador took important steps to improve child protection standards, for example, with the adoption of a dedicated protocol promoting the protection of children in a situation of human mobility¹²⁰. However, the implementation of this tool was suspended when Decree 826 was issued. This development weakens the protection framework for refugee and migrant children, as it restricts their access to the territory, in contradiction with international standards. Given the potential increase of refugees and migrants entering the country irregularly, the situation of young people at-risk is of particular concern. Alternative care mechanisms for unaccompanied adolescents are still lacking while this population group is exposed greater risks of recruitment by criminal networks or to drug use.

Response strategy

- Partners will prioritize identification and referral of children and adolescents at risk, and particularly unaccompanied or separated children, as well as vulnerable families. It will also be ensured that specialized services are delivered in collaboration with national and local authorities, and that access to the territory and family reunification are guaranteed.

119 USD 280 is required for the issuance of a passport.

120 "Procedimiento Especial de Atención a niños, niñas y adolescentes y sus familias en contextos de movilidad humana en Ecuador"

- Partners will aim at improving and adapting specialized shelters and provide services to unaccompanied or separated children in need of alternative care. This will include the provision of equipment, infrastructure improvements and capacity building of personnel in charge of managing these shelters.
- Legal assistance will be delivered, including in Child Friendly Spaces located in border areas or in areas of high concentration of Venezuelans, as well as Support Spaces, which bring together specialized services provided by several organizations.
- Advocacy will be carried out to promote the strengthening of national protection mechanisms for girls, boys and adolescents; for example, with capacity building of civil servants on minimum child protection standards.

GENDER-BASED VIOLENCE

Priority Needs

Refugees and migrants from Venezuela are exposed to serious risks of GBV as they travel to Ecuador, during their stay in the country or transit to another country. Unsafe travel conditions are reported by caminantes who cross the northern border. Women, children, and adolescents have resorted to these unsafe forms of travel. Socio-economic challenges encountered by refugees and migrants from Venezuela during their transit or as they try to settle in the country, combined with the lack of community support networks, are factors that increase the risk of resorting to negative coping mechanisms, such as transactional sex. Young women and girls, the LGBTI population and women and girls with reduced mobility are particularly vulnerable to violence and sexual exploitation.

Despite having a protective legal framework, Ecuador continues to face several challenges to guarantee the protection of women against violence and exploitation, especially refugees and migrants. These include under-reporting of GBV cases, insufficient response from local protection authorities, limited specialized shelter options, limited livelihood opportunities and the added risks inherent to moving irregularly. Fear of retaliation from traffickers and others, a limited knowledge of rights and relevant legislation, and the prevalence of discrimination and stigma are other elements hindering access to protection services for refugees and migrants, especially as many of whom prioritize completing their journey over reporting crimes committed against them.

Response strategy

- Providing direct protection assistance to victims of human trafficking or exploitation, which will include cash assistance to cover their immediate protection and integration needs,

Response strategy

- Identification and referral of GBV survivors to relevant institutions and protection services and provision of dignity kits, through existing Support Spaces or other referral networks. Coordination among the different actors will be strengthened;
- Prevention activities; such as information campaigns on GBV, dissemination of key messages and organization of awareness-raising sessions;
- Information-gathering on cases and elaboration of studies to update information on the risks of exploitation and gender and sexual violence faced by people on the move;
- Work with civil society to the right to freedom from gender-based violence, abuse and exploitation;
- Capacity-building for public officials and local governments and strengthening of women's groups through workshops on sexual and reproductive rights and GBV.

HUMAN TRAFFICKING AND SMUGGLING

Priority Needs

Human trafficking and smuggling are typified as crimes under the Ecuadorian legal framework. More than 300 victims were registered between January 2017 and July 2019, according to the national register of victims of human trafficking and smuggling¹²¹. Refugee and migrant women from Venezuela traveling alone are especially at risk, both in main cities and in border areas. Based on available information, several factors lead to sex work and/or facilitate the capitulation by criminal networks, such as domestic violence, lack of access to education, GBV and poverty¹²².

In terms of labour exploitation, refugees and migrants from Venezuela and in particular children and adolescents, are identified as particularly at risk. Domestic work, street selling, and the agricultural and extractive industries are sectors that present the highest rate of labour exploitation¹²³.

The prosecution and sentencing of trafficking cases is slow, a trend which is explained by a series of different factors: conceptual limitations to define each of the modalities of trafficking and distinguishing it from other crimes, shortage of specialized shelters for victims of trafficking, and the fact that only few partners have specialized resources and capacities to respond to trafficking and GBV issues.

while also having a preventive dimension, as well as psycho-social and legal support;

121 <https://www.eluniverso.com/noticias/2019/07/29/nota/7448052/mas-300-victimas-trata-personas-18-meses>

122 GAD PICHINCHA – OIM (2017), Diagnóstico situacional sobre la trata de personas en la provincia de Pichincha

123 Ibid

- Elaborating and implementing of reporting and referral pathways and protocols regarding trafficking. The creation or reactivation of anti-trafficking mechanisms is also planned;
- Strengthening the capacities of public officials regarding human trafficking issues, together with the provision of technical advice to reinforce public policies;
- In terms of prevention; national information campaigns on human trafficking, aimed at refugees and migrants from Venezuela, as well as host communities, combined with information sessions will be carried out;
- A national study will be conducted on the situation of human trafficking and smuggling, focused on the new dynamics generated by the flows of Venezuelan refugees and migrants.

SHELTER



PEOPLE IN NEED 

122 K

PEOPLE TARGETED 

56 K

FINANCIAL REQUIREMENTS 

\$5.89 M

PARTNERS 

13

Priority Needs

There is a high demand for temporary accommodation from refugees and migrants from Venezuela in Ecuador, due to a combination of factors, such as the continuous arrival, the fact that they generally dispose of limited economic resources and the high vulnerabilities they present. 13 per cent of surveyed refugees and migrants from Venezuela consider accommodation as their main need¹²⁴. Refugees and migrants from Venezuela in transit have limited resources and face a limited offer in terms of safe and dignified temporary shelter arrangements. For those intending to remain in Ecuador, the fact that this assistance is generally provided on a temporary basis (up to 5 days of stay), means that their shelter needs are not adequately covered. As they seek for more durable housing solutions, this population group may opt for shelter options that either jeopardize their integrity or leave in informal settlements. Both population groups – in transit and settling in Ecuador – increasingly resort to the same temporary shelter arrangements, which put the available offer under strain and exposes refugees and migrants to safety, health and protection risks.

Existing temporary shelter options that are either located along the displacement route or in main areas of destination, do not always meet minimum standards of safety, accessibility and dignity. Shelters that meet such requirements are scarce and have limited occupancy capacity. Many of these institutions are also self-managed. Coordination mechanisms allowing the improvement of standards or the creation of protection and referral mechanisms are also lacking.

In addition to the limited reach of the shelter assistance, in some cases, the family unit might be affected by the admissibility criteria established by the institutions providing temporary accommodation. Although protection cases in need of urgent specialized assistance, such as unaccompanied

minors, survivors of GBV, victims of human trafficking, people with mental health needs or with disabilities, continue to be identified, existing shelters do not always have the capacity, the knowledge or the protocols to respond to their needs

RESPONSE STRATEGY

The provision of temporary shelter intends to respond to essential protection and needs of refugees and migrants, from Venezuela as they transit to a third country or settle in Ecuador. The sector will focus on three main areas of intervention: (a) the provision of temporary accommodation to the newly arrived Venezuelan population, as well as to refugees and migrants facing particular vulnerabilities; (b) the improvement of facilities where temporary shelter is provided, in order to adapt them to required standards as well as to the needs of the refugee and migrant population; and (c) building the skills of the personnel in charge of managing temporary shelters, to allow harmonization of practices and an improvement of shelter management.

- Due to increasing needs for longer-term shelter options, partners will seek to expand the number of available options to accommodate refugees and migrants from Venezuela, both in transit and staying in Ecuador. This includes the provision of shelter and of other basic services such as food, water and sanitation services. This assistance will expand beyond border areas to cover areas where greater presence of refugees and migrants from Venezuela is reported and but where limited resources prevent refugees and migrants from accessing temporary accommodation while seeking durable housing solutions. Where temporary shelter provided by existing institutions is not sufficient, partners will resort to hotels and other forms of alternative lodging to cover the needs. Assistance will be provided either directly or through

124 Protection monitoring conducted jointly by UNHCR and the Ministry of Economic and Social Inclusion (MIES).

cash transfers, so that refugees and migrants can identify and access options that best meet their needs.

- Partners will work on the improvement and upgrading of existing facilities, to ensure that they meet the minimum requirements to accommodate refugees and migrants, especially those who are in a situation of vulnerability. The specific needs of various vulnerable profiles such as women travelling alone, GBV survivors, LGBTI persons, and persons with reduced mobility will be taken into account. Where necessary, equipment will also be provided. Partners will also work on strengthening the management capacities of the personnel, as a way to contribute to improved living conditions, and to harmonize existing practices across the sector.

Temporary shelter interventions will be coordinated with other sectors, such as water, sanitation and hygiene (WASH), Health

and Protection, as a way to ensure that facilities meet the minimum living conditions, but also to coordinate delivery of relevant information and ensure appropriate health or protection or other referrals, wherever necessary. Links will also be established with the Integration sector to ensure that refugees and migrants from Venezuela who have the intention to stay in Ecuador and live in temporary accommodation have access to social integration programmes, as well as to housing and livelihoods opportunities. This component of the response will facilitate the implementation of exit strategies from temporary accommodation and allow a transition to more durable housing solutions. This will include delivery of non-food items, cash transfers to cover rent expenses and relevant legal support, in order to contribute to the reduction of installation costs.

WASH



PEOPLE IN NEED 

96 K

PEOPLE TARGETED 

54 K

FINANCIAL REQUIREMENTS 

\$3.52 M

PARTNERS 

8

Priority Needs

Water and sanitation coverage is wide across Ecuador, and a high number of people have access to safe drinking water and sanitation services. However, challenges persist to ensure and maintain the quality and sustainability of these services. Many refugees and migrants from Venezuela live in overcrowded conditions and/or in urban peripheries, where access to regular, quality and sufficient water and sanitation services is not necessarily guaranteed. Given their limited resources, some refugees and migrants also find it difficult to afford these services. These structural challenges also affect host communities.

As they transit through Ecuador, refugees and migrants from Venezuela need to access water regularly. While water is provided and accessible at border points, particularly along the northern border, access to safe drinking water, adequate sanitation and hygiene services can be difficult throughout large sections of their journey through Ecuador. This exposes them to the risk of contracting water-borne diseases and could be life-threatening, especially for children and people living with serious or chronic diseases.

Accessing quality water and adequate sanitation services can also be difficult for refugees and migrants from Venezuela who have settled in Ecuador: 96.9 per cent of those surveyed in areas of greater presence of refugees and migrants from

Venezuela in Ecuador- have access to drinking water and 81.9 per cent to sewage¹²⁵. However, only but 14.8 per cent of them state that sanitation services are similar to those of their country of origin. Only 48.89 per cent have private bathrooms¹²⁶. Having access to decent housing, with quality water and sanitation services, is limited by the socio-economic difficulties faces by refugees and migrants from Venezuela. Limited access to these services can endanger health, especially for children. In municipalities where water and sanitation services were already insufficient, an increased presence of refugees and migrants from Venezuela puts them under further strain. As a result, quality water and sanitation services are more restricted for all population groups and/or do not meet required standards.

The need for water and sanitation has also increased in public facilities, such as institutions providing temporary shelter, schools and health centres. Many shelters for refugees and migrants from Venezuela lack efficient solid waste management systems and/or systems that would enable quality, regular or sufficient access to water. Given the necessity to prevent waterborne diseases, affecting refugees and migrants but also host communities, hygiene promotion and education needs to be further strengthened.

125 IOM (June 2019). Displacement Tracking Matrix (DTM) in Ecuador, Round 5.

126 Ibid

Response strategy

- Partners response will focus on improving the availability of drinking water and sanitation facilities. By contributing to the maintenance or improvement of existing sanitation systems, the response will not only benefit to refugees and migrants from Venezuela but also to communities who host them. Ensuring to respond to the needs of all population groups is a way to reduce competition over access to services and thereby prevent tensions.
- Maintenance and rehabilitation activities will be carried out in a variety of locations, such as schools, health centres, temporary shelters and bus terminals, where there is an increased presence of refugees and migrants from Venezuela
- To respond to the needs of refugees and migrants from Venezuela transiting through Ecuador, hydration points along the route will be set-up and combined with the delivery of bottled water and the installation of water-refill stations so that refugees and migrants can collect drinking water regularly during their journey. Beyond border points, the provision of safe drinking water will also be expanded to urban areas where a greater presence of Venezuelans is registered
- Hygiene promotion activities will be expanded to main cities where refugees and migrants from Venezuela are present. Information and training will be organized in coordination with local governments and competent authorities at the local level. Guides and manuals will be elaborated and distributed in schools, shelters and community spaces, along the dissemination of key messages on hygiene and menstrual hygiene.
- Rehabilitation of community infrastructure and -raising campaigns, aiming to communicate on how to prevent and control vector-borne diseases will be carried out.

PERU



PERU

POPULATION PROJECTION 2020

VENEZ. IN DESTINATION **978 K**

HOST COMMUNITY **--**

PEOPLE IN NEED*

617 K

268 K

PEOPLE TARGETED*

235 K

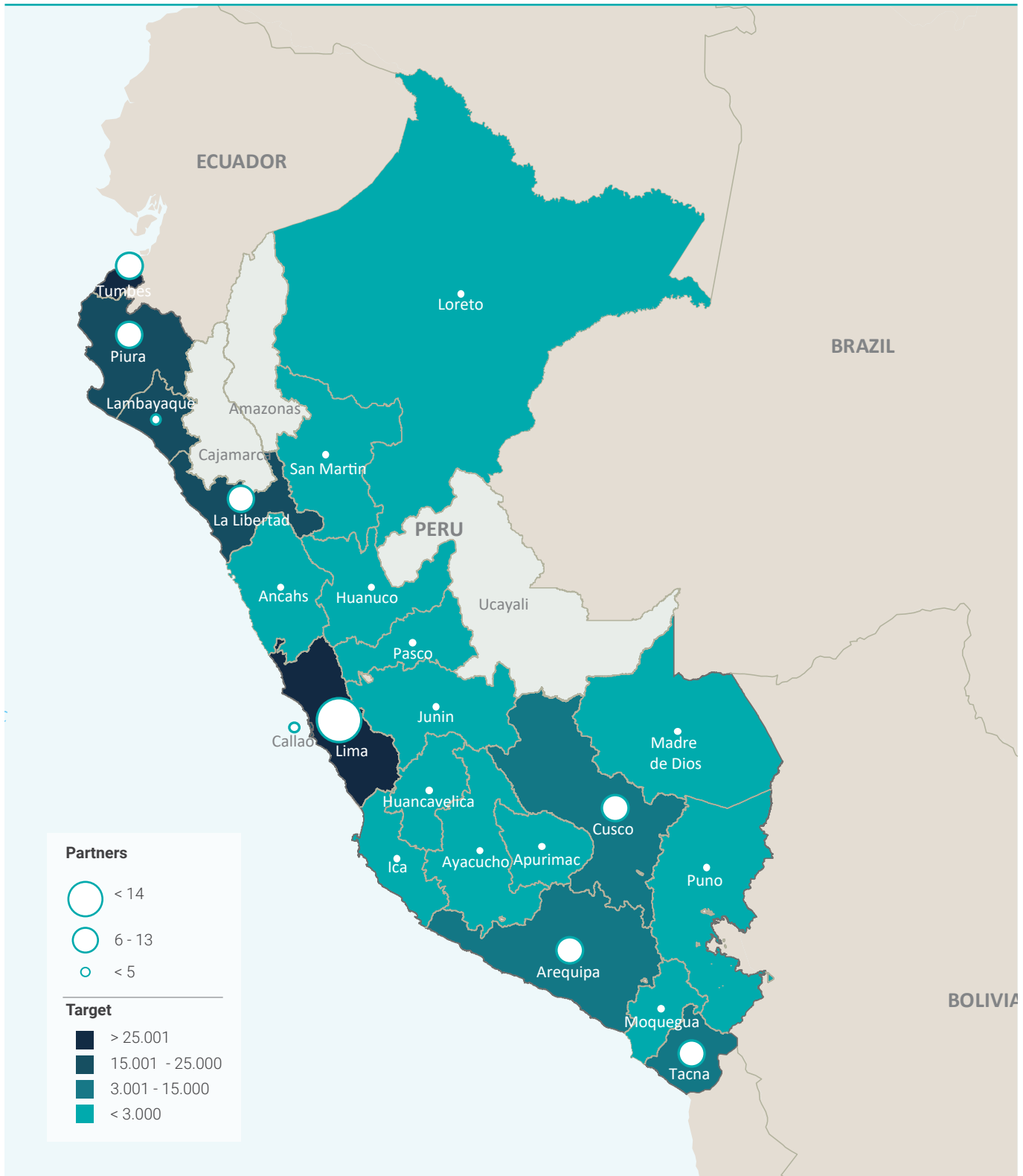
125 K

FINANCIAL REQUIREMENTS









\$136.5

RMRP PARTNERS

28













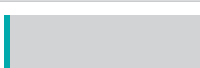

















NUMBER AND FINANCIAL REQUIREMENTS BY ORGANIZATION TYPE

		Organizations		Financial Requirements
International NGO		14		29.1%
National NGO		2		1.0%
Others*		4		1.0%
UN Agencies		8		69.0%

*Other include Red Cross movement, academia, civil society and faith-based organizations.

The list of organizations and RMRP partners only includes appealing organizations under the RMRP. Many of these organizations collaborate with implementing partners to carry out RMRP activities.

POPULATION IN NEED AND TARGET, FINANCIAL REQUIREMENTS AND NUMBER OF PARTNERS BY SECTOR

		People targeted*		People in need*		Financial Requirements (USD)		Partners
Education		11 K		342 K		1.1 M		8
Food Security		9 K		208 K		1.79 M		7
Health		20 K		401 K		4.45 M		11
Integration		111 K		617 K		60.48 M		20
NFI		12 K		431 K		2.27 M		5
Nutrition		28 K		----		389 K		4
Protection**		235 K		268 K		26.12 M		21
Shelter		26 K		208 K		8.28 M		7
WASH		17 K		268 K		4 M		1
Humanitarian Transportation						1.88 M		4
Multipurpose CBI						16.33 M		12
Support Services***						9.44 M		20

*The figure of People in Need and People Targeted does not include host communities | ** Includes GBV, Child Protection, Human Trafficking & Smuggling

*** Communication, Coordination, Information Management and Fundraising

COUNTRY OVERVIEW

The Republic of Peru is the second country of arrival for refugees and migrants from Venezuela worldwide, after Colombia, and is the country with the highest asylum requests by Venezuelan nationals. As of September 2019, more than 866,000 refugees and migrants from Venezuela resided in the country, almost 290,000 of which have requested asylum.

The profile of refugees and migrants from Venezuela arriving in the country has shifted from predominantly single adults to families with young children, with very limited economic resources, as well as high levels of unaccompanied and separated children (UASC). Having travelled, and in some cases walked for weeks to reach Peru, refugees and migrants from Venezuela arrive in need of drinking water and showers, food, medical assistance, humanitarian transportation, shelter, information on regular stay and civil documentation, non-food items (NFI), especially for babies and other vulnerable groups, such as elderly persons, pregnant women, and persons with disabilities.¹²⁷

The scenario of refugees and migrants from Venezuela arriving in Peru shows a particular concern on access to basic services and rights. When settling in the country, refugees and migrants face challenges in accessing regularization mechanisms, including regular residency/stay permits, as well as asylum. In addition, the lack of civil documentation and regularization in the country creates barriers in accessing decent work and dignified livelihoods, placing refugees and migrants from Venezuela at risk of exploitation, abuse, and human trafficking and/or resorting to smugglers for onward movements. This limits the ability of the Venezuelan population to access services such as health, and transportation.

Many refugees and migrants from Venezuela that intend to stay in Peru continue to face problems in sustaining themselves due to obstacles in accessing the job market and housing solutions. Access to livelihoods is limited with refugees and migrants from Venezuela working in the informal sector, frequently with very low wages and exploitative conditions. In addition, 30 per cent tax is applied to all foreigners without distinction during their first year of employment, which creates an additional hurdle for access to formal employment. According to the ENPOVE survey¹²⁸ conducted on the refugee and migrant population from Venezuela, out of the total number of refugees and migrants living in Peru, the need for a job or an income generating activity ranks second-highest, after access to health and followed by education, regularization of stay, housing, food, family reunification and NFIs. More recent assessments¹²⁹ have ranked access to work as the highest priority.

Refugees and migrants from Venezuela living in Peru have limited access to social services as they are required to

hold an identity card, or be in a special vulnerability category provided by migration authorities, in order to benefit from any services. With regards to health, only pregnant women and children under the age of five have access to free public healthcare services. This affects in particular persons with chronic diseases, as well as the elderly and single parents with small children. Mental health cases have increased, and many regions do not have proper medical facilities and specialized doctors to assist them.

Access to education is also affected. According to the ENPOVE, 75 per cent of children between 3 and 5 years old, 54 per cent between six and 11 years old, and 60 per cent between 12 and 16 years old are not attending school.¹³⁰ Lack of civil documentation, limited quotas, high mobility for work and better living conditions, lack of means to pay for books and other school materials, as well as growing discrimination and xenophobia are some of the reasons behind the high percentages of nonattendance.

Based on a Joint Needs Analysis conducted by the GTRM (the National Inter-Agency Coordination Platform in Peru, by its Spanish acronym), the main needs of refugees and migrants from Venezuela are the following:

- **Shelter:** A large part of refugees and migrants from Venezuelans in urban areas are in need of shelter support. They reside in rented accommodation and many others live in informal settlements or congested shelters that do not meet minimum standards and that can lead to protection risks, such as gender-based violence (GBV).
- **Food and Nutrition:** Accessing food and nutritional support, is paramount to saving lives. Existing information on these sectors is limited and requires the generation of more evidence to orient the response on the ground and provide adequate food assistance, in particular to vulnerable populations (pregnant and breastfeeding women, young children, chronically ill) during the first days in the country, and the monitoring results on food and nutritional security.
- **Water, sanitation and hygiene (WASH)** are a major challenge across the country. Access to drinking water, showers, hygiene items (including menstrual hygiene items and baby diapers) and quality sanitation is of particular concern as basic infrastructure is often absent or overwhelmed.
- **Health:** The current health system's legal framework and the lack of sufficient and appropriate public health infrastructures impairs the access to health care. More efforts and resources are needed so that healthcare is available to all refugees and migrants.
- **Education:** Despite foreseeing free universal access to basic education for all children and adolescents regardless of

127 UNHCR Protection Monitoring six months report and Displacement Tracking Matrix Round 6, Round 5 and Round 4 reports.

128 ENPOVE: National Survey on Venezuelan Population in Peru, INEI 2018. It is a representative survey aimed at the Venezuelan population residing in the country, it was conducted in cities with the highest concentration such as Tumbes, Trujillo, Arequipa, Cusco, Lima and Callao.

129 UNHCR (2019) Protection Monitoring six months report in Peru.

130 ENPOVE.

nationality, Peru's education system lacks adequate educational infrastructures and has limited resources and available places, hindering the education of refugee and migrant school-age children. In many cases, refugees and migrants from Venezuela encounter obstacles due to being in an irregular situation. Barriers in obtaining certificates, and cases of discrimination and xenophobia at school are also amongst the obstacles faced by refugees and migrants from Venezuela.

- **Protection:** Refugees and migrants from Venezuela continue to face protection risks associated with access to the territory and safe transit, access to documentation and regularization processes, as well as effective access to the asylum system. In addition, there are population profiles with specific protection needs such as women - including pregnant and lactating women -, children and adolescents, the elderly, people with chronic diseases or disabilities, and the Lesbian, Gay, Bisexual, Transgender and Intersex (LGBTI) population.
- **Integration:** As the refugee and migrant population from Venezuela stabilises in Peru, socio-economic and cultural integration becomes a pressing need. Access to regular and decent work and income generation for refugees and migrants will reduce the need for assistance, promote their integration and facilitate the acquisition of basic goods and access to services, while boosting local economic development.

While trying to cope and respond to the needs of refugees and migrants from Venezuela, national, regional and local institutions are in need of capacity-development support across all sectors. This includes improving their knowledge on the conditions of refugees and migrants at the moment of arrival in the country, as well as supporting the identification and assistance of persons with specific needs. The provision of basic services complying with minimum standards also needs to be addressed. Capacity development of these institutions should serve to improve services and ensure they can address specific cases, for example individuals without passports who are in irregular situations, the recognition of academic titles, or accessing health and education services after requesting a Temporary Residence Permit (PTP, for its acronym in Spanish) or asylum.

To that end, activities undertaken by over 50 partners of the National Platform complement the efforts of the Government of Peru in responding to the needs of Venezuelans and host communities. The GTRM has been expanding its network with local coordination mechanisms throughout the country in order to improve responsiveness and cross-sectorial coordination.

Despite the GTRM's increasing its operational capacities, in 2020, the pressure on public services will increase and local response capacities by institutions will diminish. A strong working relationship with the Peruvian authorities is paramount and will be maintained, in particular with line ministries such as the Ministry of Interior and Ministry of Foreign Affairs (MFA), but also with the Ministry of Development and Social Inclusion (MIDIS), the Ministry of Women and Vulnerable Populations (MIMP), the Ministry of Labor and Promotion of Employment and Municipalities. Partners in Peru will also continue strengthening the Special Commission for Refugees (CEPR) and increase its support to those facing

greater risks and vulnerabilities, including refugees, migrants or host communities.

Country Scenario

The GTRM projects that almost one million refugees and migrants from Venezuela will be living in Peru in 2020. Following a sectorial analysis, based mainly ENPOVE, it is estimated that some 617,000 refugees and migrants from Venezuela as well as 268,000 members of the host community in the country will be in need of some sort of assistance. This assistance ranges from support to access health services to socio-economic inclusion. At the same time, it is essential that interventions also aim at supporting the host community, particularly in areas with large number of arrivals.

For the 2020 Response Plan, partners plan on supporting more than 235,000 refugees and migrants from Venezuela living in Peru and almost 125,000 host community members. An important part of the response will focus on integration, protection and shelter assistance. It must be emphasized that the response on WASH, Nutrition and Food Security is currently limited due to the reduced number of actors working in these sectors.

Due to the large presence of refugees and migrants from Venezuela in Lima (an estimated 75 per cent of the resident population), it is foreseen that a large part of activities will be focused in this city and surrounding areas. At the same time, while flows of regular entries have decreased, the transit regions of Tacna and Tumbes will continue to be an essential part of the response. Lastly, increasing efforts will also be in regions in the north of the country (approximately 10 per cent of the population lives in the departments of La Libertad, Lambayeque and Piura,) and in the south, particularly in the city of Arequipa.

Scope of the response

The Republic of Peru has maintained a generous policy towards refugees and migrants from Venezuela. However, due to the drastic increase of refugees and migrants arriving in Peru during the first semester of 2019 (an average of 1,300 per day), a change in policy came into force with the introduction of a Humanitarian Visa scheme for refugees and migrants from Venezuela, as of 15 June 2019.

Based on the analysis of needs and projections for 2020, the response in Peru requires activities that respond to the humanitarian, protection and integration needs of refugees and migrants from Venezuela and their host communities. The response will prioritize border areas, urban areas where refugees and migrants have settled, as well as those regions that have received a large number of refugees and migrants impacting response capacities of the host communities.

The response plan in Peru aims to:

- Assist the Government in processing documentation for refugees and migrants from Venezuela which enables them to access basic rights and services.
- Enhance and, where applicable, provide effective access to basic goods and services, including to health and education, in a complementary and coordinated way to the Government's response, supporting national and local authorities.
- Increase opportunities for integration of the refugee and migrant population, including decent work and livelihoods.
- Strengthen the prevention and mitigation of protection risks, especially those related to children travelling on their own, gender-based violence, smuggling and trafficking and labour exploitation.

The response includes an age, gender and diversity (AGD) approach, which is essential to ensure that activities respond to the specific needs of the population. In this context, priority populations who face greater and specific needs are, among others, children and adolescents (especially those unaccompanied or separated), pregnant women, elderly, people with disabilities and the LGBTI community.

At sector level, partners are planning both to respond to immediate humanitarian needs and to generate activities promoting resilience and income generation. This approach requires a further robust effort on access to public services, technical training and higher education, social safety nets and housing solutions, including rental support.

In order to provide refugees and migrants the right to choose how they meet their basic needs in a dignified manner, GTRM partners will work towards supporting the host economy and create a better environment for refugees and host communities. Support through community infrastructure services for all, regardless of nationality, such as schools, health centres and community infrastructure in general, will also be paramount to achieving integral social cohesion results.

Partners aim to implement concrete activities towards integration whilst advocating and supporting the government's strategy to pursue an alternative legal pathway to the PTP and to facilitate the recognition of academic and professional degrees. Partners will also provide assistance through cash-based interventions to support entrepreneurship and income generation, which in turn will enable social cohesion and prevent discrimination and xenophobia.

In 2020, aligning with government's priorities in terms of social protection policies, partners consider that the delivery of assistance through cash-based interventions (CBI) will facilitate refugees' and migrants' access to national safety nets by creating connections with integration and income generation initiatives. With this type of intervention, the aim is to promote a rights-based, community-based and participatory approach increasing refugees' and migrant's self-reliance, by combining cash and livelihood interventions.

Prioritization approach

Responses of the RMRP partners in Peru are based on a Joint Needs Analysis prioritization and on intersectoral consultations. Partners have aligned their activities for 2020 according to sectorial and geographical priorities, while considering an age, gender and diversity approach to the profiles of the populations included in the plan. Some activities in the response have been prioritized for more permanent population, in particular those related to socioeconomic inclusion, access to education and health systems, while other activities have been prioritized for the population in transit, such as emergency shelter and accommodation, provision of food and hygiene kits, humanitarian transport, health assistance and tailored protection-related interventions.

Although it will be necessary to maintain and, in most cases, expand the scope and scale of responses in key border areas, including Madre de Dios, Puno, Tacna, and Tumbes, GTRM members are also seeking to expand the provision of services and assistance in urban contexts currently hosting the highest percentage of the refugee and migrant population, such as Arequipa, Callao, Cusco, La Libertad, Lima, and Piura.

Response principles

During the planning process, GTRM partners, in coordination with Government counterparts, ensured that the principles of centrality of protection, gender and environment guided their overall response planning for 2020.

Protection considerations, including gender, age and diversity (GAD), as well as accountability to affected populations (AAP), were included as cross-cutting considerations in the needs analysis (82%) and the submission of activities (88%), and most organizations included comprehensive planning in terms of information provision and feedback mechanisms. Refugees, migrants and host communities will be engaged in the planning and service delivery of this plan. With the expansion of activities, partners are seeking to increase their community-based feedback mechanisms on services supported by inputs from refugees and migrants, including on the behaviours of service providers, for positive and counteractive actions. A key part of protection mainstreaming in 2020 will be to strengthen prevention and response mechanisms to sexual exploitation and abuse (PSEA) in each activity and by each organization, as well as to strengthen their capacity on mainstreaming concepts related to accountability, best practices in targeting and programming with a focus on gender inequities, child protection.

In addition, response partners plan to carry out activities seeking to mitigate the negative impacts caused by the refugee and migrant flows and by the response itself that may affect, inter alia, public health, the relationship with host communities and long-term resilience. A cross-sectorial approach that will benefit the host communities and will ease the relation with the public sector, enabling greater social and economic integration for Venezuelans.

More specifically, as part of the efforts to foster social integration and intercultural cohesion, municipalities will play

a key role by including refugee and migrant's participation through city councils and local committees as well as facilitating a constructive dialogue between host communities, and refugee and migrant communities. Community kitchens managed by the Ministry of Women and Vulnerable Populations (MIMP) and the municipalities have been identified as a potential initiative to enhance peaceful coexistence in complex areas hosting refugee and migrants where tensions could arise. The campaign “#TuCausaEsMiCausa” will continue to promote a favorable environment through community-based initiatives such as micro-theatre, solidarity brigades, and integration through sports, including Venezuelans and Peruvians, while supporting interventions to improve public spaces and recreational activities that generate positive attitudes towards refugee and migrants while improving local conditions of host communities. Close cooperation with the MIMP, the Ministry of Labor and Promotion of Employment and the Ministry of Development

and Social Inclusion (MIDIS) will be upheld to increase social services' networks.

Age and Gender

Of the 28 appealing organizations, 65 per cent completed the Inter-Agency Standing Committee (IASC) Gender and Age Marker (GAM) in the RMRP 2020 planning phase. 88 per cent of them aim to mainstream gender equality: 82 per cent plan to respond to both gender and age differences (Code 4), and 6 per cent organizations intend to address gender but not age in the RMRP 2020. Regarding to gender analysis, 35 per cent of the appealing organizations demonstrate a good analysis, 6 per cent a limited analysis and 59 per cent have not yet or not included an analysis of gender and/or age inequality, comparing conditions or barriers for different groups in the context. A good gender analysis allows organizations to tailor activities in order to enhance gender-sensitive response.

EDUCATION



PEOPLE IN NEED 

442 K

PEOPLE TARGETED 

42 K

FINANCIAL REQUIREMENTS 

\$1.1 M

PARTNERS 

8

Priority needs

School-age refugees and migrant children from Venezuela have difficulties accessing basic education in the Peruvian education system due, in large parts, to their poverty and related vulnerabilities. Associated costs, such as school uniforms, school supplies or parents' associations fees, which are requested by education institutions, further impair access. In 2019, even though more than 42,000 refugee and migrant children from Venezuela were enrolled in Peruvian public schools,¹³¹ 75 per cent of refugees and migrants aged 3 to 5 from Venezuela, 54 per cent of those aged six to 11, and 60 per cent of those aged 12 to 16 years of age do not attend public schools.¹³²

In some places, available slots in public schools are limited. Furthermore, some of those enrolled face difficulties remaining in the educational system due to their precarious situation, discrimination and xenophobia in schools and, in some cases, a curriculum that does not take into account prior knowledge of Venezuelan students.

Recognition and revalidation of degrees and professional qualifications represents a challenge for refugees and migrants from Venezuela. The ENPOVE indicates that 97 per cent of refugees and migrants with full university education have not

validated their degrees, due mainly to limited resources and lack of information about the procedure. This severely impacts opportunities of socio-economic integration, as well as professional or technical education for refugees and migrant adolescents in Peru.

Response strategy

GTRM partners will work in coordination with the Ministry of Education, the sub-national education management units (direcciones regionales de educación (DRE) and unidades de gestión educativa locales (UGEL)), and other institutions in order to develop initiatives aimed at generating evidence-based decision making, facilitating the access to the education system and preventing school violence, in addition to strengthening the capacities of educational communities.

The response will focus on supporting comprehensive initiatives in order to improve learning opportunities, both for refugees and migrants from Venezuela and for affected host communities through the following response priorities:

- Undertake studies about barriers to education, and on the performance of refugee and migrant students.

131 Ministry of Education information system (SIAGE).

132 ENPOVE.

- Support refugee and migrant children and adolescents and their families to access the formal education system and accomplish their education goals.
- Sensitization of education actors. This will include trainings for teachers and teaching assistance, with the aim of making school personnel aware of the growing demand for enrolment of refugees and migrants. Besides, it will strengthen capacities to respond to diversity within classrooms, considering disability incidence and other particular educational needs. It will consider implementing alternative spaces to serve educational needs of refugee and migrant children and adolescents and prepare them to access the formal education system.
- Support to the Ministry of Education through technical assistance to strengthen “SiSeVe” programme against school violence.
- Insertion, permanence and conclusion of studies for refugee and migrant children in Peru. In order to achieve this, partners will conduct activities to support relevant government authorities, including the identification of capacities of educational centres and institutions, and support through community services.
- Trainings are planned for teachers, together with sensitization activities involving families, on the insertion

of refugee and migrant children from Venezuela in the educational system and on strategies to improve learning.

- In-school children, including both refugees and migrants and host community, will be assisted through learning activities and the distribution of school kits.
- Partners will conduct non-formal educational activities, as well as psychosocial support, for children out of school in order to smooth their insertion and permanence in public schools.

The Education Sector requires a close link with the Child Protection Sub-sector, particularly considering children and adolescents in irregular situation. In addition, given that higher education (recognition and validation of degrees) is related to employability, it will ensure joint coordination with the Integration Sector.

Government authorities, such as the Ministry of Education and the sub-national education units (DRE and UGEL), will be supported in order to develop specific response strategies. This will include a focus on the inclusion of out of school children. Lastly, partners will support refugees and migrants from Venezuela living in Peru in the process of validation of their academic degrees. This will include working with the Ministry of Education and providing information, as well as follow-up, throughout the entire process.

FOOD SECURITY



PEOPLE IN NEED 

386 K

PEOPLE TARGETED 

9 K

FINANCIAL REQUIREMENTS 

\$1.79 M

PARTNERS 

7

Priority needs

Based on the ENPOVE, 21 per cent of food needs for refugees and migrants from Venezuela in Peru are not met. Vulnerabilities are particularly for persons in transit: An assessment by partners in 2019 in Tumbes, showed that 69 per cent of Venezuelans did not have access to food.¹³³ Almost 30 per cent of refugees and migrants from Venezuela also reportedly have access to less than three meals per day.¹³⁴

In order to access social services in Peru, refugees and migrants from Venezuela require an identity document and need to prove their lack of resources through the Household Focalization System (SISFOH, by its acronym in Spanish). Owing to unavailable documentation or irregular entry, this is largely unavailable to refugees and migrants from Venezuela. For those meeting these requirements, access to the Integral

Health Insurance (SIS, by its acronym in Spanish), is limited to pregnant women, children under five while school-aged children who obtain a school registration can access the national school feeding programme.

Response strategy

Partners in the response will aim at improving the refugees and migrants' capacity to access nutritious food, especially for those who live in shelters. Likewise, in coordination with the Ministry of Health and universities, it will foster rapid assessments in order to increase knowledge and monitor the food security situation, incidence and prevalence. Direct food assistance will be provided primarily in the cities of Tacna and Tumbes, as well as (on a more limited basis) in the regions

133 DTM, Ronda 5.

134 Protection Monitoring, Six months report.

of Arequipa, Cusco, La Libertad, Lambayeque, and Lima. The following are the Food Security sector's response priorities:

- Generate an evidence-based approach to nutrition and food security, through regular monitoring of vulnerable population's food situation in the country. This will contribute to decision making of relevant actors in the response.
- Provide food as part of the humanitarian assistance to refugees and migrants from Venezuela, especially focused on vulnerable populations (pregnant and breastfeeding women, young children, chronically ill) during the first days in the country, and the monitoring results on food and nutritional security.
- Improve the organization and operation of communal spaces such as community kitchens within shelters for refugees and migrants. Implement new community kitchens in strategic areas with a high presence of vulnerable refugees and migrants.
- Develop government institutions' capacity linked to the Ministry of Social Inclusion and Development (MIDIS) and to the Ministry of Health, which implement social programmes and the Comprehensive Health Insurance (SIS), respectively. These interventions will aim at determining necessary documents to access social programmes, identifying valid modalities for effective attention (tailored for refugees and migrants), reforming internal regulations to allow the

attention of the most vulnerable refugees and migrants, and establishing an information exchange mechanism with regard to protection and social services.

- Partners will also continue operating food distributions in the Binational Assistance Centre (CEBAF) and are planning to support community comedores or social programs to ensure access for vulnerable refugees and migrants.

Within the context of a multisector approach, efforts will be made to deepen partnerships with other sectors, consequently strengthening cross-sector synergies, particularly with Integration (livelihoods) in order to tackle limited access to food due to economic reasons, and with Health and Nutrition to address anaemia and malnutrition. GTRM partners will coordinate with government actors, particularly with MIDIS, MINSA, Ministry of Labour, Ministry of Women and Vulnerable Populations, and local governments.

The sector response will use direct humanitarian assistance for the most vulnerable refugees and migrant families living in shelters. Assistance through cash-based interventions will be evaluated in order to support vulnerable refugees and migrants directly. Additionally, partners will work to increase and improve information on the nutritional situation in the country through monitoring mechanisms.

HEALTH



PEOPLE IN NEED 

618 K

PEOPLE TARGETED 

71 K

FINANCIAL REQUIREMENTS 

\$4.45 M

PARTNERS 

11

Priority needs

Some refugees and migrants from Venezuela remain without the required documentation to stay regularly in the country, limiting their access to basic rights, including health services. Even with a regular stay permit, many Venezuelans struggle to access medical services due to lack of information or assistance in navigating the health system.

Among groups in vulnerable situations (particularly pregnant women, children under five, people living with HIV/AIDS and family planning for women in fertile age) who have temporary or limited access to health services in the national health system, only holders of the foreign identity card, have access to the public health system – this applies to some 10 per cent of the refugees and migrants from Venezuela in Peru.

The joint needs analysis conducted by the GTRM shows that medical assistance for refugees and migrants in Peru is a priority as amongst pressing needs. According to the ENPOVE,

71 per cent of Venezuelans are in need of medical support, and 78 per cent of those with chronic illnesses are not receiving treatment. Financial barriers, in addition to discrimination showed by among health providers, limit refugees' and migrants' access to health services, exposing especially those with serious medical conditions such as chronic diseases, disabilities and mental health conditions.

Moreover, capacities of the public health system to cover the comprehensive requirements are insufficient. Primary healthcare providers at local levels have limited resources and face difficulties in promoting community health strategies, including sexual and reproductive health services.

Response strategy

The comprehensive response would aim to ensure full access for refugees and migrants from Venezuela, to the public health

system, for primary, secondary and tertiary health care, through a coordinated advocacy strategy among humanitarian and development actors and providing the necessary support to the Ministry of Health to strengthen the national health system. Taking into consideration priority health needs, resources and response capacities of the national health system, the response priorities are:

Strengthening the information strategy on access to free services currently available, with a special focus on pregnant women and women of fertile age for sexual and reproductive health services; children under five years old; people living with HIV/AIDS for screening and antiretroviral (ARV) treatment; and, tuberculosis and clinical care for victims of GBV.

- Strengthening and coordinating an advocacy strategy among humanitarian and development actors to expand access to public health services for refugees and migrants. This includes the recognition of the PTP as a document that allows applying for access to one of the insurance schemes of the Ministry of Health.
- Facilitate access to public health services for refugees and migrants with infectious and non-infectious diseases as well as mental health problems and chronic diseases.
- Strengthening partnerships with government health providers to address key health care challenges, including service provision and resource requirements.

- Local health care systems will be supported to treat those with chronic medical conditions and prevent the outbreak of infectious diseases.
- In shelters and at the entry and exit points, support will be provided for sexual and reproductive care, including clinical management of rape. Refugees and migrants from Venezuela, both newly arrived and already residing, will be provided with information on available services.

Specific assistance will be provided through monetary support (CBI) to people with urgent health needs to access treatment of their critical health problems. Partners will also provide support and assistance to people living with HIV/AIDS to eliminate barriers in accessing ARV treatment, as well as empowerment, guidance and liaison with sexual and reproductive health services to people engaged in sex work. Support the response capacity of public health facilities that offer services to refugees and migrants will be also provided.

Working closely with the Ministry of Health will allow the GTRM Health Sector to coordinate towards stronger and more effective access to basic health care for refugees and migrants, and reinforce advocacy with relevant health entities, namely the SIS and SUSALUD. In addition, the Health Sector will liaise with the GTRM Communications Working Group for more and improved dissemination and sensitization campaigns in line with institutional communications offices and refugees and migrants from Venezuela.

HUMANITARIAN TRANSPORTATION



PEOPLE IN NEED 

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PEOPLE TARGETED 

—

FINANCIAL REQUIREMENTS 

\$1.88 M

PARTNERS 

4

Priority needs

GTRM members have identified a shift in trends, where refugees and migrants from Venezuela increasingly opt for new final destinations in Peru outside of Lima, while some are only transiting in Peru. Considering that limited economic resources is transversal across all sectors, humanitarian transportation is needed in order to cover high costs involved in accessing formal transportation. There is a large informal sector that affects the transport sector. There is evidence that some transport companies expose passengers to scams during the journey, or that people who have paid their tickets to a destination where taken to a different city.

In addition, the new entry requirements for Peru have had a direct effect on the needs and access to humanitarian transport. This current context exposes the most vulnerable population especially those trying to enter Peru irregularly,

given that due to the lack of regular status, they cannot access to safe and formal transportation. Many companies of formal transport require an entry stamp to be able to carry people. Without such stamp, refugees and migrants are exposed to informal and frequently less secure forms of transportation, or resort to walking along the roads, hitchhiking, which in turn exposes them to protection and security risks.

Response strategy

Humanitarian transport will primarily focus on newly arrived individuals in the border areas of Tacna and Tumbes (between border points and city centres). At the same time, interprovincial transport will also be provided to and from the cities of Arequipa, Cusco, Lima and Puno. In view of

the aforementioned needs, the response in humanitarian transportation will focus on:

- Providing humanitarian transportation to refugees and migrants from Venezuela in vulnerable conditions. Support for humanitarian transport will need to be ensured especially in transit locations such as Tumbes and Tacna. It will focus on both local as well as interprovincial transportation to Peru's major cities, and particularly to Lima. While most transportation will be done by the partners themselves, assistance will be also provided through cash-based assistance when feasible.
- Providing key information to refugees and migrants on the risks of using informal transportation and information on companies and costs of transportation.
- Developing campaigns for the prevention of risks related to informal transportation, including human trafficking.

- Providing sensitization sessions to transport companies in order to improve the treatment of refugees and migrants from Venezuela.
- Improving complaints and feedback mechanisms among transport companies.

Humanitarian transportation response partners in Peru, will ensure common work with protection partners regarding the risks arising from human trafficking or resorting to smugglers for onward movements. Additionally, actors working in this sector will ensure a collaboration with the Ministry of Transportation and Communications, the Superintendence of Land Transportation of People, Cargo and Goods (SUTRAN by its acronyms in Spanish) in the main cities of departure, transit and destination, and at the National Superintendence of Customs and Tax Administration (SUNAT) responsible for customs supervision of the main border points.

INTEGRATION



PEOPLE IN NEED 

885 K

PEOPLE TARGETED 

170 K

FINANCIAL REQUIREMENTS 

\$60.48 M

PARTNERS 

20

The Integration Sector comprises two sub-sectors: Livelihoods and Decent Work, and Cultural Inclusion and Social Cohesion.

LIVELIHOODS AND DECENT WORK

Priority needs

Recent studies on the situation of refugees and migrants from Venezuela in Peru show that in the case of integration, the three main identified difficulties to generate decent livelihoods were: (a) Lack of access to documentation and information, including information on legal and fiscal proceedings, labour rights and access to healthcare. Only 2 per cent of refugees and migrants from Venezuela accessed institutional help¹³⁵; (b) Limited access to labour and entrepreneurship services, as well as lack of awareness by local businesses on how to integrate refugees and migrants; (c) Refugees and migrants face very high levels of informality (approx. 90 per cent), infringement of labour rights, including discrimination (almost 36%¹³⁶) and have a higher risk of becoming victims of crimes including human trafficking in persons and exploitation.

Response strategy

- The priority needs revolve around structural issues in Peru. Needs require a multi sectoral approach as much of the strategy involves articulation between businesses, public institutions, international agencies and non-governmental organizations. This will allow partners and local authorities to create common intervention strategies for the inclusion of refugees and migrants in local labour markets through dependent work, entrepreneurship and self-employment by generating joint employability and entrepreneurship's routes. In turn, these routes will strengthen local services of employment, the overall market's environment and related supporting functions, so as to ease the access of refugees and migrants to Business Development Services (BDS). Partners response will be based on the identified key needs, and focus on the following elements:
- Increase access to information and documentation: This will involve the systematization of information on national rights' compliance and regularization mechanisms for refugees and migrants from Venezuela to boost national information systems with updated and accurate information on Information Centres led by GTRM partners. In order to achieve this, it will be necessary to strengthen the work

135 ENPOVE.

136 ENPOVE.

of public institutions at both national and local levels and improve partner capabilities to deliver accurate and updated data, as well as promoting joint government spaces for integral services for the integration of refugees and migrants in the country.

- Increase reach of, and access to, services for decent work and livelihoods: Partners in the response will foster the generation and implementation of joint employability and entrepreneurship routes to close gaps for the access of refugees and migrants from Venezuela to employment services, Business Development Services (BDS) and financial services, to ease their insertion in local labour markets. This will also include the provision of technical support to public and private services, in order to ease the insertion of refugees and migrants in local labour markets. Livelihoods represent the largest share of interventions under the Integration Sector and includes the efforts of most partners in Peru. In order to improve the access to the labour market in the country, numerous activities are planned for 2020. Partners will focus on training activities towards entrepreneurship, including financial education and awareness raising on how to access financial products. Access to capital such as loans will be also included, particularly in order to pay for the validation of technical and professional degrees. Other activities will include the implementation of a graduation approach, employability programs, experience sharing and workshops. This will also include a focus on gender and the empowerment of women (from all communities) in the labour market and through self-employment.
- Increase compliance of labour and socioeconomic rights: Partners in the response will promote joint advocacy and technical assistance to public and private institutions in order to introduce refugees' and migrants' rights on labour inspection protocols, normative and management frameworks and national and sub national policies and programmes. This will focus on capacity building for the inclusion of refugees' and migrants' socio-economic rights on policy frameworks and public and private sector normative and management structures.
- Within the context of a multisector approach, partners in the response will ensure joint work with other sectors, particularly Protection, Education, Health and Shelter in a development framework. The GTRM will also foster joint responses among partners currently working on integration, based on a mapping of areas and types of interventions so as to generate relevant synergies. At the same time, partners will promote the active participation of State counterparts in meetings and activities on the ground.
- Enterprises will also be supported through awareness-raising activities on the inclusion of refugees and migrants and self-employment will be boosted through the provision of seed capital for entrepreneurs. Entrepreneurship centres will instruct how to develop business ideas or strengthen existing initiatives by learning about the Peruvian market. Private partners will be essential, together with the State, to support services for the development of businesses.

Lastly, partners will work with the Ministry of Labor and Employment Promotion for the insertion of refugees and migrants from Venezuela through dependent work and entrepreneurship based on evidence accumulated through market studies. Knowledge transfer will also be ensured to Economic Development Units of local governments and other actors in key districts.

CULTURAL INTEGRATION AND SOCIAL COHESION

Priority Needs

Under this sub-sector, the GTRM's joint needs analysis has identified three main challenges: (a) Structural discrimination, classism and exclusion; (b) Limited local integration policies, particularly at local levels; and (c) Unfamiliarity and lack of knowledge about other cultures. There is an urgent need to address discrimination and disinformation, as well as media sensationalism from a structural perspective to prevent human rights abuses. In addition to these issues, there are structural problems including a prevalence of machismo/misogyny, classism and racism in the country, impede the process of integration of refugees and migrants and make them invisible in public policies.

Response Strategy

In order to address existing needs, partners will focus on developing a close relationship between Peruvian and Venezuelan communities. This includes strengthening Communication with Communities (CwC), mass communication strategies, community networks, empowerment in human rights, and promoting active citizenship. In this framework, the GTRM has implemented a common communication campaign titled #TuCausaEsMiCausa, involving national, international and Venezuelan organizations in joint activities together with local communities. Partners will ensure a wide range of activities fostering integration between refugees and migrants and the host community, particularly in connection to the #TuCausaEsMiCausa campaign. These will include awareness-raising around diversity and complementarity and the prevention of xenophobia and discrimination. Cultural activities among communities will include sports, art, gastronomy music and the improvement of public spaces. Communication campaigns will involve local networks to promote integration, empathy and solidarity:

- Prevent discrimination, xenophobia and other forms of violence towards migrants and refugees. This will be achieved through mass communication campaigns, communication strategies with communities and informative talks.
- Promote local public policies that include migrants and refugees as part of their target population. Among other activities, this will focus, on providing trainings for public officials and technical assistance for local authorities.

- Promote community integration with active participation of migrants, refugees and host population. Community integration will be promoted through the organization of tailored events bringing together Venezuelan and Peruvian communities, including fairs, as well as community, sporting and other cultural events.
- Community volunteering will be also ensured, including through street educations (of all ages, including adolescents, and from all communities) to promote the development of common activities in public spaces. It will be essential to ensure the inclusion of community- and faith-based

organizations in these activities, as well as local authorities, municipalities, schools, the private sector and civil society.

Like in the case of livelihoods and decent work, cultural integration and social cohesion relate to structural problems. A multisector approach considering both individual and collective goals will increase the impact of interventions and improve the cost-efficiency of activities. The value of this subsector is in its link with other sectors of the GTRM: particularly, among others, communication, protection and education, which will be strategic partners in the field.

NFI



PEOPLE IN NEED 

608 K

PEOPLE TARGETED 

19 K

FINANCIAL REQUIREMENTS 

\$2.27 M

PARTNERS 

5

Priority needs

Refugees and migrants from Venezuela require additional support in terms of non-food items. This applies to those newly arriving in Peru, people in transit who need support in order to cover their basic needs until they reach their destination, and to those who wish to remain in Peru. In the ENPOVE, 12 per cent of refugees and migrants from Venezuela living in Peru reported needs in non-food items. From a development perspective, it is relevant to also note that a large number of Venezuelans do not have access to basic household or cooking items such as refrigerators (87%), iron (82%) and blenders (69 %).

Response strategy

Direct emergency assistance through NFIs will target particularly persons in the border areas of Tacna and Tumbes, to ensure the distribution of basic items to newly arriving vulnerable individuals and to persons in transit. Support will also be provided in Arequipa, Cusco, Lima and Puno. The following three main priorities were identified for the response:

- Provision of NFI assistance to newly arrived vulnerable refugees and migrants. Included in this response is the maintenance of an adequate contingency stock to respond to cases of increased influx. Partners will continue to provide winterization support, particularly blankets for refugees and migrants and affected host community members. Refugees and migrants from Venezuela in destination and affected host community individuals will also receive household items such as clothing and cooking sets.
- Ensure NFI assistance to refugees and migrants in transit. Their limited or lack of resources since they left Venezuela

is further hampered by the long journey when reaching Peru and during transit.

- Enhance and focus NFI support in the main settlement areas. There is a progressive increase in the vulnerability of refugees and migrants from Venezuela already in the country that require further focus and stronger support in non-food items assistance,

In the case of NFI support, the response will focus exclusively on in-kind assistance to address all population groups where assistance through cash-based interventions (CBI) is not an option. A multi-purpose cash assistance will be coordinated through the GTRM CBI sub-group. NFI assistance to persons in transit will consist mainly of kits containing different items, including hygiene, water and basic food items. Furthermore, linkages with the WASH sector are important and required namely to access hygiene and dignity kits.

NUTRITION



PEOPLE IN NEED 

59 K

PEOPLE TARGETED 

32 K

FINANCIAL REQUIREMENTS 

\$0.39 M

PARTNERS 

4

Priority needs

Limited financial resources negatively impact nutrition levels of refugees and migrants from Venezuela in Peru, particularly among children. According to GTRM partners, children under five at the CEBAF in Tumbes presented acute malnutrition (3%), chronic malnutrition (18%), and anaemia (30%). Only 14 per cent of registered refugee and migrant boys and girls under two consumed adequate food rations.¹³⁷ Overall, refugees and migrants from Venezuela show little nutritional education. Even though existing data indicates anaemia levels are lower than the national average, refugees and migrants are exposed to a greater vulnerability to anaemia due to limited resources and access to social services. In relation to child feeding practices, it presents a reduced level of food frequency intake and dietary habits, and consuming iron supplements.

Regarding structural issues, the availability of nutritional education in Peru is limited. In addition to limited access to the SIS and nutritional information, there is insufficient access to medical supervision to meet nutritional requirements, particularly for refugee and migrant women of childbearing age and adolescents.

Response strategy

- The sector response will focus on generating updated and verified information in order to help decision making but also to involve beneficiaries in the management of their own nutrition health skills and nutrition knowledge. Likewise, health and government sectors will adopt strategies to improve adequate access to nutritious food and iron supplements, key practices in food, hygiene and maternal and child health care and access to health services and

social programmes. The response priorities will be focused on three key aspects:

- Generate an evidence-based approach. Partners will involve primary healthcare centres and state health officers in order to obtain data, processing and analysing the refugees and migrants from Venezuela nutritional situation. It will imply to use common tools for collecting field data within healthcare centres, but also to foster nutritional assessments focused on refugees and migrants from Venezuela. Partners will also develop strategies to improve nutrition health skills in relation to refugees and migrants, dealing with geographical dispersion and difficult accessibility. Lastly, focus will be given to pregnant and puerperal women, as well as children under five, in terms of evaluation, supplementary nutrition, and nutrition counselling.
- Partners will consider strengthening healthcare centres to develop nutrition campaigns among refugees and migrants, and to advocate for health public policies. The nutrition sector requires a comprehensive and joint action with public sector, international agencies, civil society organisations, and refugees and migrants.
- Partners will also focus on providing assistance to refugee and migrant children and pregnant or lactating mothers, in transit or residing in the country. To ensure this, partners will disseminate relevant information through community agents and distribute information material for beneficiaries on the prevention of malnutrition. Workshops will be organised for refugees and migrants residing in Peru. Partners will also support for new and existing centres promoting health and child development.

PROTECTION



PEOPLE IN NEED 

430 K

PEOPLE TARGETED 

298 K

FINANCIAL REQUIREMENTS 

\$26.12 M

PARTNERS 

21

Priority needs

PTP, which enabled refugees and migrants from Venezuela to stay in Peru regularly, were suspended in October 2018. The introduction of more restrictive policies on access to a regular status and asylum, as of June 2019, and the related rise of people in an irregular situation, pose significant challenges to maintaining safe access to the territory, registration and documentation.

Simultaneously, the asylum system is overstretched with over 300,000 pending asylum claims, which limits its ability to respond to the needs of asylum seekers, issue them with documentation and ensure a timely decision. Asylum seekers outside of Lima are at a particular disadvantage due to the centralization of the asylum system in the capital. In addition, the introduction of deportations of refugees and migrants from Venezuela in irregular situations or of those who concealed their criminal records when applying for regular stay permits do not include proper safeguards. In view of frequent changes, there is an increased need for continuously updated information provided to refugees and migrants from Venezuela on available regularization pathways in Peru.

Regarding community-based protection the main challenge lies in the lack of organized spaces where the refugee and migrant community can meet and engage with host communities, and where common activities can be organized. Enhancing the use of community-based protection mechanisms with a view to preventing and responding to protection concerns such as GBV is thus a priority.

Response strategy

- The response strategy will focus on supporting registration and documentation measures, both through available migratory measures and the asylum procedure. This will involve advocacy, the provision of technical support to the Government and the provision of legal orientation to the refugee and migrant population. Partners will provide legal orientation through different orientation centres and offices in Lima, Arequipa, Madre de Dios, Lambayeque, Piura, Tacna, La Libertad, Cusco, Puno and Ica. At the same time, they will continue providing legal orientation to newly arrived persons in Tumbes.
- Partners will ensure assistance through Support Spaces with a strong emphasis on vulnerable refugee and migrant communities living in districts of Lima. The regions of Lambayeque, Piura, Arequipa, Puno and La Libertad will also be supported. Additionally, interventions to strengthen refugee

and migrant community groups will take place in several locations nationally, and particularly in Lambayeque and Lima.

- To respond to the identified priority needs, advocacy to facilitate access to regularization and to asylum for refugees and migrants from Venezuela in Peru will be provided.
- Capacity development and technical assistance will be provided to all involved actors, such as the Special Commission for Refugees (CEPR for its acronym in Spanish), the Migrations' Superintendence and the Foreigner Police. The CEPR's registration system will continue to be strengthened and decentralized to issue documentation to Venezuelan asylum seekers in a timely manner. Refugees and migrants will access legal orientation and assistance through different partners. Resources will focus into identifying particularly vulnerable persons to advocate for the prioritization of their cases. Border monitoring will continue in 2020.
- Priority activities to implement include the identification of spaces, jointly with relevant municipalities, that allow outreach to the population and the implementation of orientation- and leisure activities for the refugee, migrant and the host communities.
- Refugees and migrants from Venezuela will receive assistance at border points to support them in accessing asylum or regular status. This will include orientation services for persons with specific needs directly implemented in centres across the country, and particularly in Lima. Partners will work on the identification of community focal points to disseminate relevant information to refugees and migrants on legal assistance.
- Community volunteers will be trained for this purpose namely on human rights, psychosocial support, needs, identification and referral mechanisms. In this process, ensuring the participation of both communities will be key to develop and strengthen community mechanisms towards the prevention of violence. Simultaneously, civil society organisations will be supported directly through trainings and workshops. National meetings of local organizations will be encouraged to harmonize action plans towards refugees and migrants.

The response will include direct support to institutions such as the CEPR and the Superintendence of Migration. Partners will also support the Ombudsman, as well as local functionaries and members of local protection systems, to promote access to services, particularly in border areas. Partners will work to

support community and faith-based organizations, as well as grassroots initiatives, towards the protection and integration of refugees, migrants and the host community.

CHILD PROTECTION

Priority needs

There is a strong need to strengthen the child protection mechanisms for both refugees and migrants from Venezuela as well as for affected Peruvian children. According to the GTRM joint needs analysis, the arrival of Venezuelan refugee and migrant children in Peru with specific protection concerns, including documentation and those of UASC, have posed specific challenges to the national child protection system which already struggled with a lack of resources, infrastructure and capacities. With a view to responding to more specific needs of refugee and migrant children there is an additional need to clarify procedures, responsibilities and referral pathways amongst different institutions to ensure efficient and effective protection responses. Children in an irregular situation are particularly vulnerable.

Response strategy

- The response strategy will focus on strengthening available state child protection services and complementing them where needed. Partners will focus on complementing available state child protection services by implementing additional programmes to identify refugee and migrant children at risk, assist them and their families and refer them to state services where appropriate.
- Capacity development strategies will be implemented with both relevant state institutions, NGOs and affected host communities. The full implementation of a foster family scheme, as envisaged by the Peruvian government, will be another priority.
- Technical assistance will be provided to the creation of a child protection protocol containing minimum standards and referral pathways for children in situations of human mobility. Special attention will be paid to children in an irregular situations and children at risk of statelessness.
- Psychosocial support will be also ensured, particularly for children exposed to, or at risk of, violence.

Geographically, activities will focus on Lima, Arequipa, Cusco and Tumbes. Partners will ensure the establishment of safe spaces, including Child-Friendly Spaces, in and outside of shelters as well as care services in community spaces. These spaces will also focus on sport and other activities, with the participation of parents.

Refugee and migrant adults will also be sensitized on Child Protection and referral to Protection services. With regards to support and capacity development to institutional actors, partners will ensure support to the Ministry of Women and Vulnerable Populations (MIMP, for its Spanish acronym) and

its Special Protection Units for the reception of UASC. Partners will also work with municipal offices for the Protection of Children and Adolescents (DEMUNA, for its Spanish acronym) and other local institutions.

GENDER-BASED VIOLENCE (GBV)

Priority needs

Refugees and migrants from Venezuela face a heightened risk of being subject to GBV due to different factors such as increased vulnerability, lack of support networks and information on available services. This risk is amplified for those in irregular situations. Public spaces and the workplace have been identified as posing particular threats. Priority needs in the area of GBV are the lack of access to prevention and response services, including through information on available services, and the low quality of available services. Finally, there is a need to raise awareness on the unacceptability of GBV.

Response strategy

- The response of the RMRP partners will focus on strengthening access to and the quality of available state services. Partners will work to both improve the assistance provided to survivors as well as ensure appropriate communication and awareness of GBV. In this context, partners will ensure the identification and timely referral of GBV cases, in collaboration with municipalities, entrepreneurs, educational institutions, communication media, community-based organizations, as well as youth groups and community promoters. Partners will also support the establishment and management of shelters for GBV survivors, and the implementation of PSEA strategies in existing shelters and safe spaces.
- Partners response in relation to GBV will also focus on advocacy to grant access to services on equal footing with national GBV survivors and trainings for public institutions and communities on rights and standards.
- Prevention activities with youth promoters and community leaders will continue to be implemented and public services will be complemented by additional programmes which identify survivors, provide assistance and orientation on access to public services, and strengthen their support network and integration. Prevention activities and support in the identification and referrals of individual cases will focus on Lima, Tumbes, Arequipa, Cusco, Tacna and Piura.
- Available services will be properly mapped, and information material will be produced and distributed. Campaigns to stop sexual harassment in public places and workspaces will be also implemented.
- Communication strategies, including workshops, fairs and home visits, will be held to share information on prevention, referral pathways and services to respond to GBV, including the prevention and response to harassment in the streets.

Key spaces, such as residencies, schools, neighbourhoods and communities, as well as transit locations, will be also identified for these purposes. Partners will also provide interventions on masculinity with adolescents and adults of both refugee, migrant and host communities.

- Advocacy will be carried out with relevant state institutions at the national and regional levels.
- Work with local institutions will support existing Emergency Women Centres (CEM, for its Spanish acronym), including through the elaboration of Standard Operating Procedures (SOPs) and the provision of equipment. Partners will also assist educational institutions and other government entities to raise awareness on the importance of GBV and vulnerabilities due to displacement.

HUMAN TRAFFICKING IN PERSONS AND SMUGGLING

Priority needs

According to the Peruvian Prosecutor's Office, there were no migrants or refugees from Venezuela identified as human trafficking victims until 2018, when more than 70 cases (including cases of sexual exploitation, labour exploitation, and domestic exploitation) were reported. Limited information is available on smuggling of refugees and migrants. According to the Ombudsman office, this is due to the acute difficulties during the investigation process, including weak assistance and lack of protocols. High mobility, country entry restrictions, and the vulnerability of refugees and migrants from Venezuela, are factors that increase the risk of human trafficking or resorting to smugglers for onward movements. In this context, the priority needs are: providing timely information as well as early identification of trafficking victims in order to prevent offences. Additionally, it is important to improve the capacity of key actors dealing with trafficking and smuggling penal processes at local, regional and national levels, regarding a protection approach for refugees and migrants from Venezuela. Finally, it is required to foster protection and integration assistance for victims of trafficking.

Response strategy

The Sub-sector response will focus on four basic main points: prevention, criminal-law treatment, protection and integration of trafficking victims, and capacity of relevant actors. The response will involve and strengthen the capacities of local, regional, and national government, as well as the key actors in areas with high presence of refugees and migrants from Venezuela.

The response priorities will be based on the identified key needs, and focused on:

- Developing and supporting anti-trafficking prevention campaigns. It will include the distribution of information materials, as well as workshops and roundtables in order to strengthen technical capacities around these offences. Partners will also provide training, capacity building and

equipment to staff and shelters specialized on the prevention of trafficking and smuggling in persons and implement prevention campaigns. Capacity development campaigns will also focus on public authorities, at both national and local levels, to strengthen existing protection mechanisms.

- Generating awareness on the prevalence of human trafficking and smuggling to the target population through studies or assessments on the matter. Risk indicators will be included within the reports generated by partners.
- Improving the infrastructure and the management of specialized shelters for trafficking victims, emphasizing refugees and migrants. It will be aimed at strengthening the capacity of the Ministry of Women and Vulnerable Populations (MIMP), promoting productive entrepreneurship and educational programmes for trafficking victims. Besides, it will include advocacy for access to regularization of human trafficking victims.

The Protection Sector will liaise with other Sectors such as Basic Needs, Education, Integration and Health - for example through the provision of trainings - to make sure that protection approaches and standards are mainstreamed into these activities and that due consideration is given to groups of refugees and migrants with specific needs, such as children, persons with disabilities or the elderly. The Protection Sector's work on civil documentation and regularization of refugees' and migrants' status' will be key when it comes to supporting the efforts related to local integration and mitigating protection risks. Specific support will also be provided in analysing protection-related obstacles related to local integration as well developing strategies to overcome them. Strengthened case management for protection cases will necessarily involve linking up with actors and institutions working on integration, education, basic needs and health. The Sub-sector of Human Trafficking and Smuggling in Persons will ensure joint work with the Integration sector in order to establish pathways towards the integration of trafficking victims in Peru; with the Basic Needs Working Group so as to improve the assistance to vulnerable refugees and migrants, particularly as part of the provision of shelter and humanitarian transportation services. Finally, this subsector will ensure joint work with Communication and Information Management Working Group in order to developing prevention activities and generating relevant information. The topic of public spaces to promote interactions between different communities involves both community-based protection as well as cultural inclusion and social cohesion, under the Integration Sector. Children in irregular situations face considerable barriers in order to access the public-school system, which will require a strong connection with the Education Sector.

SHELTER

PEOPLE IN NEED 

434 K

PEOPLE TARGETED 

26 K

FINANCIAL REQUIREMENTS 

\$8.28 M

PARTNERS 

7

Priority needs

Refugees and migrants from Venezuela need access to temporary shelter solutions along the route to their destination. However, based on a joint needs analysis exercise conducted with GTRM partners, refugees and migrants from Venezuela have been identified as having scarce financial resources and a limited offer of safe and decent temporary shelter. In Peru, specialized temporary shelters for critical protection profiles are also very limited and need further coordination to improve the care of refugees and migrants from Venezuela in a comprehensive manner. Furthermore, the lack of an integrated policy aimed at urban development, combined with low resources and in some cases irregular status, affect the access to decent housing for refugees and migrants, as well as the host community, leading to the most vulnerable people living in precarious homes and in overcrowded conditions.

At the same time, housing represents an important demand in Peru. According to the ENPOVE, almost 95 per cent of refugees and migrants from Venezuelan in Peru rent housing. For this population, quality housing solutions are often unavailable: the results of the ENPOVE indicate that more than 62 per cent of refugees and migrants from Venezuela live in one-room private homes, almost 28 per cent of the families are conformed by three members, and more than 27 per cent by four or more people. In addition, 26 per cent of Venezuelans indicate that they have no access to water in their homes and almost 29 per cent indicate that they do not have hygiene facilities. This results in them settling in unsafe places, subject to overcrowding with limited access to water and decent hygienic services.

Response strategy

Considering the aforementioned needs, and with state programs supporting shelter solutions, mostly reserved for the local population, the response will focus on urban areas in the country, particularly in Arequipa, Cusco, La Libertad, Lambayeque, Lima, Puno, Tacna and Tumbes. To increase the availability of dignified shelters, the Shelter Sector response will prioritize (a) increase of the number of decent accommodations (temporary and housing solutions) for those in transit and in destination; (b) improvement of existing temporary shelters and housing infrastructures and their adequacy; (c) Improvement of temporary shelters' management capacity, including mainstreaming of age, gender and diversity as well as protection of persons with specific needs. To address challenges arising from the limited temporary shelter and housing options available to

refugees and migrants from Venezuela in transit as well as in destination, Partners will implement the following activities:

Coordination at national and sub-national levels to establish standardized procedures for the management of temporary shelters.

Developing guidance procedures for compliance with minimum standards for temporary shelters.

Strengthening capacities through workshops in order to improve the coordination and management of shelters that involve humanitarian partners responding in temporary accommodation, hotel owners, and others who receive refugees and migrants from Venezuela.

Collecting information on the conditions of temporary shelters in transit and final destinations that support the immediate protection response and comply with minimum standards.

Strengthening government capacities in shelter management, including Disaster Risk Management for emergency situations, with emphasis on refugees and migrants.

Advocacy with national authorities to promote access to improved housing conditions for both: affected host communities and refugees and migrants.

Share information on access to housing to orient refugees and migrants settling in Peru on what to consider when accessing housing.

The Shelter Sector will ensure coordination and work between relevant basic needs, health and protection partners to improve the quality of regular and specialized shelters. Additionally, Sector partners will work jointly with the national and local authorities that implement the regulations in the sector, such as the Ministry of Housing, Local and regional governments, the National Institute of Civil Defence (INDECI by its acronyms in Spanish), the Ministry of Women and Vulnerable Populations (MIMP), which manages the residential care centres (CAR), and shelters for vulnerable populations such as children and adolescents.

WASH



PEOPLE IN NEED 

416 K

PEOPLE TARGETED 

67 K

FINANCIAL REQUIREMENTS 

\$4 M

PARTNERS 

1

Priority needs

Access to WASH is of particular need in Peru, due to a national structural problem which affects both host communities and Venezuelan refugees and migrants. The increased number of users places further stress on already strained WASH facilities operating in public services such as schools and health centres or private temporary shelters, leading to a rise in operational and maintenance costs.

As a result, also refugees and migrants have limited access to water and sanitation, especially in urban and outskirt areas. In addition, the socio-economic profile, newly arrived refugees and migrants, and the limited access to sustainable livelihoods, affect the limited access safe water, sanitation and hygiene services. The need to provide access to water and sanitation in temporary shelters and other public buildings, such as schools or healthcare centres catering to refugees and migrants has considerably increased. Partners have underlined that many shelters do not have efficient solid waste management systems or adequate water quality monitoring systems. Finally, education in WASH needs to be strengthened.

Response strategy

The response to WASH will benefit both the Venezuelan population and affected host communities, particularly in shared public structures (schools and health centres). This response will also focus on strengthening hosting capacities along with hygiene practices in temporary shelters. The response will contribute to healthy, safe and secure environments tackling, among others, solid waste management. It will also enable children, regardless of their nationality, to become agents of change for improving water, sanitation and hygiene practices in their families and communities. The sector proposes for 2020 a substantial switch in the focus from CEBAF / Tumbes to a wider national intervention, targeting all major cities along the Northern Peruvian coastline, from Tumbes to Lima, being the ones hosting the highest numbers of Venezuelan refugees and migrants (Chiclayo, Northern Lima, Piura, Trujillo and Tumbes). The action will benefit all users, regardless of their nationality, in public schools, health centres and temporary shelters situated in the above-mentioned cities. The institutions targeted will be identified through the joint work of the Basic Needs, Health, and Education Sectors operating within the national GTRM, together with its local focal points, through the commonly agreed criteria. The sector also foresees wherever refugees and migrants (incl. and survivors).

While adapting to the specific context, size and purposes of the institutions targeted, as well as considering an integrated WASH approach, the sector identifies the following as three top priorities:

- Availability and storage capacity of water resources.
- Solid Waste system management, including Biological waste
- Accessible, sufficient and clean toilets separated by gender and taking into consideration the needs of people with disabilities (PWD). In the case of temporary shelters, showers as well.

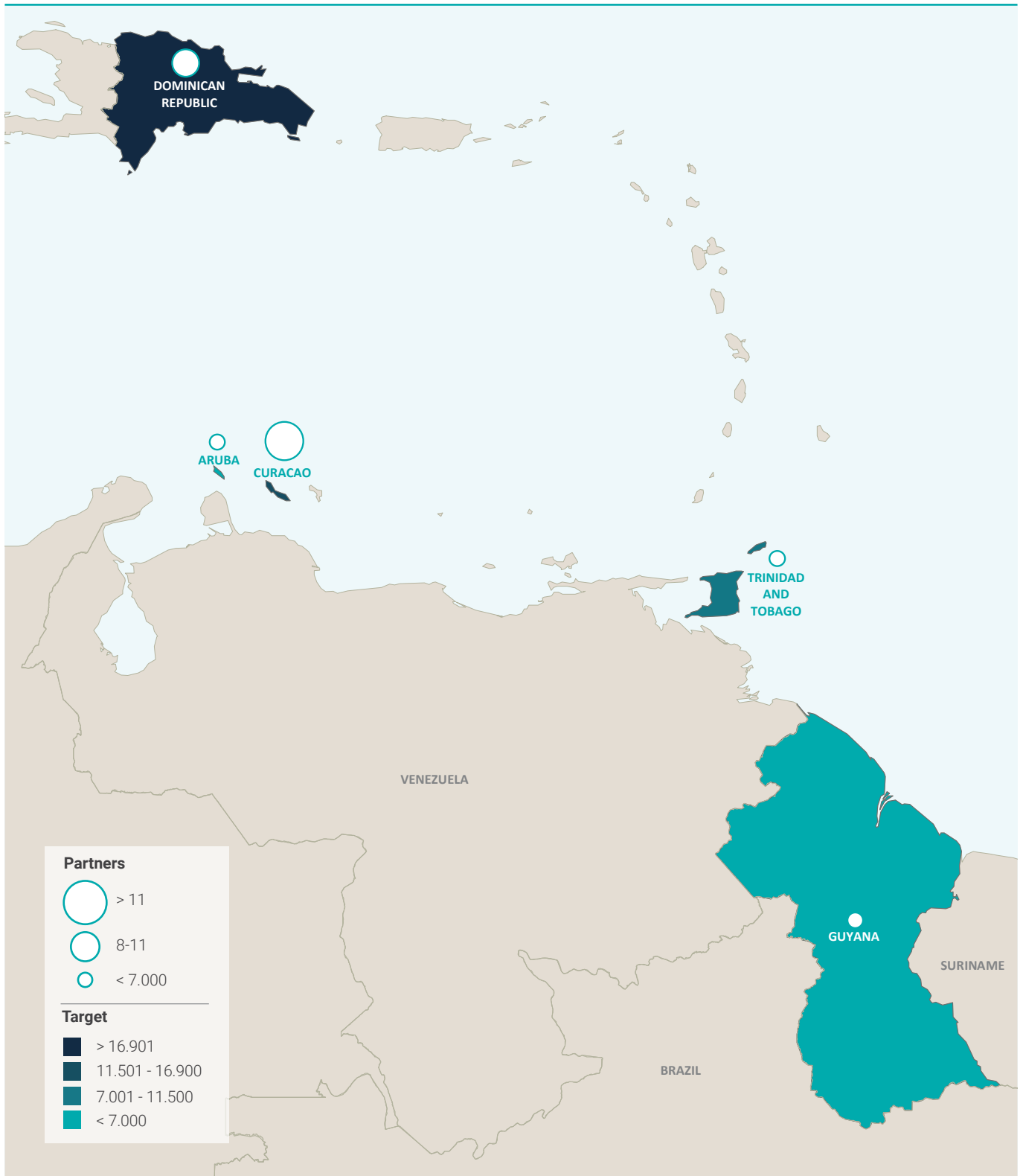
The sector will closely coordinate with government agencies and the Shelter, Health and Education sectors. A bottom-up approach in the planning, monitoring and evaluation of each intervention will foster empowerment of the institutions, committees and employees alike, increasing, together with the adoption of durable and sustainable solutions (e.g. in terms of safe drinking water, the installation of filters instead of provision of bottled water). Due to the limited number of actors active in WASH, the response will focus primarily in the northern coast area between Tumbes and La Libertad, and in the city of Lima. In all regions, WASH support will focus on ensuring the provision of water and showers in public structures. It should also be mentioned that, while the WASH response is limited, the distribution of drinking water is, in many cases, conducted through kits composed of both food and non-food items. In this case, kits are grouped under the NFI sector.

CARIBBEAN

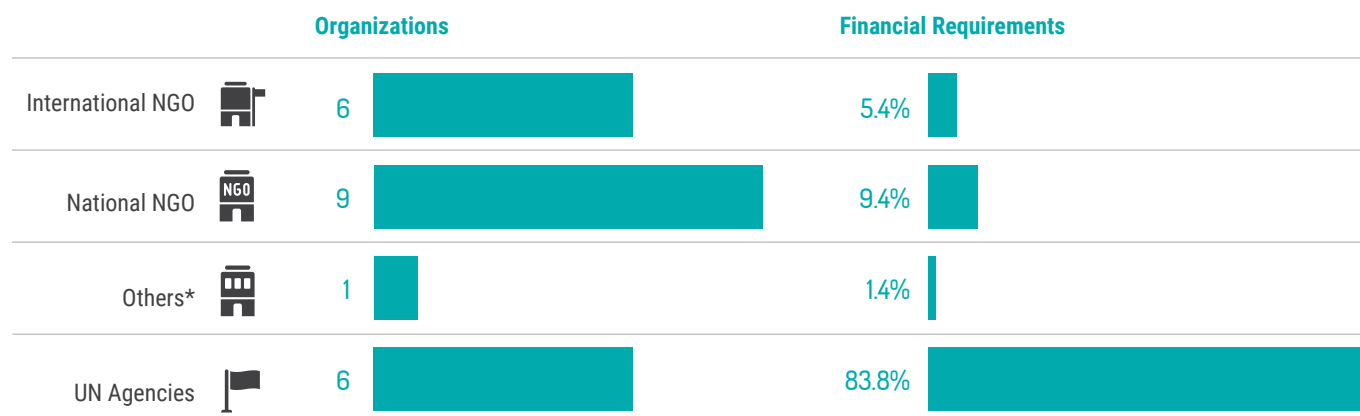


CARIBBEAN

POPULATION PROJECTION 2020	PEOPLE IN NEED*	PEOPLE TARGETED*	FINANCIAL REQUIREMENTS	RMRP PARTNERS
VENEZ. IN DESTINATION 150 K	124 K	71 K	\$45.6 M	22
HOST COMMUNITY --	66 K	51 K		



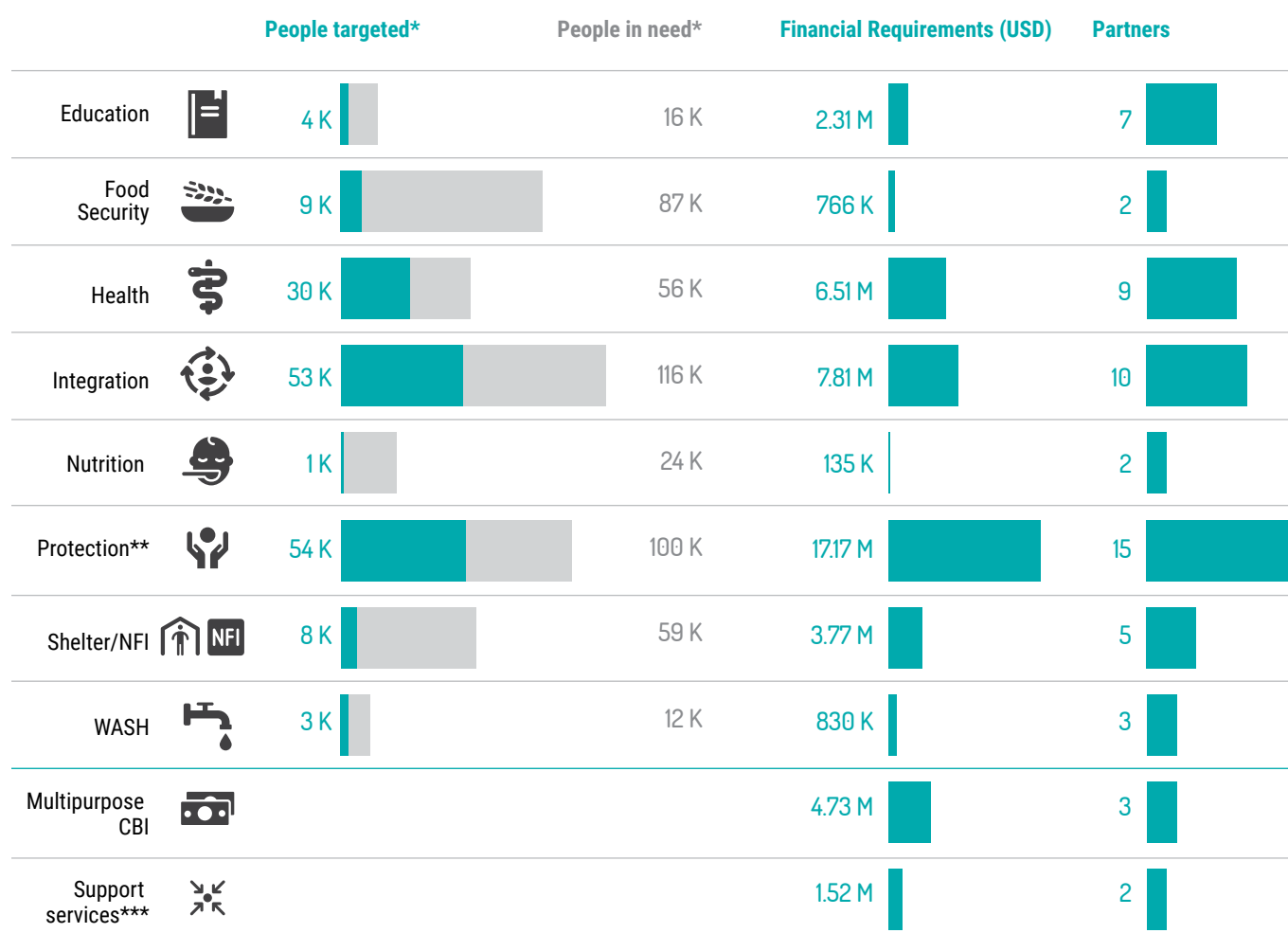
NUMBER AND FINANCIAL REQUIREMENTS BY ORGANIZATION TYPE



*Other include Red Cross movement, academia, civil society and faith-based organizations.

The list of organizations and RMRP partners only includes appealing organizations under the RMRP. Many of these organizations collaborate with implementing partners to carry out RMRP activities.

POPULATION IN NEED AND TARGET, FINANCIAL REQUIREMENTS AND NUMBER OF PARTNERS BY SECTOR



*The figure of People in Need and People Targeted does not include host communities | ** Includes GBV, Child Protection, Human Trafficking & Smuggling

*** Communication, Coordination, Information Management and Fundraising

SUB-REGIONAL OVERVIEW

Summary findings of joint needs assessment and analysis

In recent years, five countries in the Caribbean have been hosting growing numbers of refugees and migrants from Venezuela: Aruba, Curaçao, the Dominican Republic, Guyana, and Trinidad and Tobago. The deteriorating situation in Venezuela has also led to significant numbers of Guyanese and Guyanese descendants to return from Venezuela.¹³⁸ Overall, it is estimated that there are approximately 100,000 refugees and migrants from Venezuela in the Caribbean sub-region as of September 2019.

Caribbean countries have adopted diverse approaches to respond to the outflow from Venezuela, influenced by their different geographic, linguistic, and socio-economic backgrounds. In light of concerns about the growing number of refugees and migrants from Venezuela arriving in the Caribbean, some countries have introduced restrictions for refugees and migrants from Venezuela to access their territories - such as introducing visa requirements or temporarily closing their borders with Venezuela.

Requirements for existing migratory and regularization pathways are often difficult for refugees and migrants from Venezuela to meet and access to alternative pathways that take into consideration the specific situation of people arriving from Venezuela remains limited across the region. This in turn has led to increasing numbers of refugees and migrants from Venezuelan irregularly, entering Caribbean countries, often risking their lives through dangerous boat journeys and being exposed to risks of human trafficking and/or smuggling. In the first half of 2019, at least 80 persons lost their lives at sea while trying to reach the Caribbean.¹³⁹ Many people who entered regularly are unable to extend their stay and often find themselves in an irregular migratory situation.

Faced with these challenges, governments in the sub-region have increasingly worked towards identifying solutions and responding to the needs of vulnerable refugees, migrants and host communities impacted by the crisis in Venezuela and two of the countries in the sub-region have undertaken or set up systems for the registration and documentation of refugees and migrants from Venezuela.¹⁴⁰ The Government of Guyana has established a continuous registration system through which refugees and migrants are granted renewable, three-month stay permits upon entry into Guyana and is working on expanding outreach of registration and documentation activities. In June 2019, the Government of Trinidad and Tobago conducted a two-week registration exercise with the objective to register refugees and migrants from Venezuela present in the country, including those who entered irregularly or overstayed, and grant them permission to work for up to one year.

These initiatives have been complemented by an increased engagement of national and local authorities in regional and national fora dedicated to responding to the outflows from Venezuela in a coordinated manner. In particular, Guyana and the Dominican Republic¹⁴¹ engaged to the Quito Process in 2019, reinforcing cooperation between countries of transit and destination for refugees and migrants from Venezuela and identifying actions to be taken to respond to the needs of refugees and migrants. Several Caribbean countries have increased their engagement and coordination with RMRP partners and, notably, the Government of Guyana set up an ad hoc coordination mechanism to facilitate the joint response of the government, civil society and international community to address the needs of refugees and migrants from Venezuela and returning Guyanese, as well as host communities.

Access to asylum remains limited across the Caribbean, mainly due to gaps in the regulatory framework and the capacity of asylum systems. Instances of deportation or non-admission, without access to an asylum procedure or a protection screening were reported across the Caribbean sub-region with the exception of Guyana, and detention of refugees and migrants from Venezuela, including asylum-seekers, frequently for long period without judicial review also remains a concern, with partners in the sub-region having limited or no access to immigration detention facilities.

Refugees and migrants from Venezuela who are in an irregular migratory situation face greater protection threats and risks and are at heightened risk of exploitation and abuse. As vulnerabilities grow, they also become more susceptible to resorting to negative coping mechanisms, including survival sex, especially for women. This is exacerbated by the fact that there is an overall need to strengthen programming and services available to prevent and address gender-based violence (GBV) and to counter human trafficking across the sub-region, requiring close collaboration between national governments and other actors.

In many instances, refugees and migrants from Venezuelan in the Caribbean have the right to access public primary healthcare, and formal education. Language, administrative and financial barriers remain. Additionally, more restrictions exist with regard to access to specialised medical services and tertiary education. Considering the small size or limited absorption capacity of the concerned Caribbean countries, the increasing numbers of refugees and migrants from Venezuela has had an impact on their host communities and put pressure on public services. Strains on national systems have been

138 UNHCR-IOM (April 2018), Joint Fact-Finding and Border-Monitoring Mission Report; Government of Guyana (February 2019), Inter-Ministerial and Inter-Agency Field Assessment Mission Report to Region 1, Guyana

139 Inter-Agency Sub-Regional Coordination Platform (April and May 2019), Situation report of April and May 2019.

140 Ibid.

141 The Governments of Guyana and the Dominican Republic participated in the 4th International Technical Meeting of the Quito Process, which took place in Buenos Aires on 4 and 5 July, and signed both the Quito IV Declaration and Roadmap adopted during the meeting.

particularly evident in Guyana, where border and remote areas often lack the infrastructure necessary to receive refugees and migrants from Venezuela and returning Guyanese entering the country. Limited availability of resources in these areas also affects access to sufficient food and nutrition, safe drinking water, and sanitation facilities, which are among the most pressing gaps reported in Guyana and are equally affecting host communities. This is compounded by restrictions in place that prevent refugees and migrants located in the border areas from traveling into the more populated coastal regions, where there are better services and opportunities for accessing income-generating activities.

Access to safe shelter and adequate housing is another widespread need in Guyana, whereas in other Caribbean countries some challenges remain due to limited availability of emergency shelters, the high cost of renting, and administrative barriers that prevent refugees and migrants from concluding lease agreements. This particularly affects persons with specific needs, such as survivors of GBV and victims of human trafficking, among others.

The level of self-reliance of refugee and migrants communities and their engagement in the planning, delivery and monitoring of the response varies among Caribbean countries. The need to enhance accountability and communication with refugees and migrants from Venezuela through outreach, feedback mechanisms and provision of information on services and rights have been identified as a priority need across the sub-region.

Receiving communities are also under increased strain. The sudden increase in the Venezuelan population, with cultural and language barriers and in the absence of extensive social cohesion programmes, has led to the emergence of discrimination and xenophobia. Local integration is also impacted by the lack of regular status of many refugees and migrants from Venezuela, and the consequent lack of access to the right to work. Those with work permits often do not find employment commensurate with their skill-level as they face challenges in having their academic and professional credentials from Venezuela recognised by host countries. Improving access to dignified work and livelihoods opportunities was therefore recognised as a gap across the sub-region, as well as the need to further promote social cohesion and support local communities receiving refugees and migrants from Venezuela. In some Caribbean countries that are experiencing shortages of specific skills in the labour market, there are also opportunities for increased engagement with the private sector to jointly address these gaps.

RESPONSE STRATEGY

Country-specific planning scenario

It is expected that the outflows of refugees and migrants from Venezuela to all Caribbean countries will continue, with an estimated 149,900 refugees and migrants from Venezuelan present in the five Caribbean countries by end of 2020. Among them, it is estimated that 124,000 refugees and migrants from Venezuela will be in need of assistance, along with 66,100 persons from host communities in the sub-region. Some onward movements between Caribbean countries may also continue to be seen, thus further increasing human trafficking and smuggling risks. Boat incidents of refugees and migrants from Venezuela trying to reach Aruba, Curaçao, Guyana and Trinidad and Tobago will continue to occur and may increase throughout 2020.

Engagement of national and local authorities in the response to the outflows of refugees and migrants from Venezuela will continue and existing partnerships and coordination mechanisms will be strengthened. Access to regularization mechanisms and asylum will improve, but remain limited, as countries in the sub-region build the capacity of their regularization and asylum systems. Given the latest arrival trends in 2019 and the challenges that refugees and migrants from Venezuela are facing in extending their regular stay, it is expected that many refugees and migrants will be staying in the sub-region with an irregular status. This will lead to increased vulnerabilities and heightened risks of exploitation and abuse among the refugees and migrants population, particularly affecting women, children and persons with specific needs, who will increasingly resort to negative coping mechanisms. Access to livelihoods in host countries will remain among the main gaps resulting from the lack of documentation, including work permits, and language barriers.

Scope of the response

For 2020, 22 UN agencies and NGOs will work together with host Governments in the Caribbean to respond to the needs of refugees, migrants and host communities impacted by the outflows from Venezuela, overall targeting 71,400 refugees and migrants from Venezuela and 50,700 persons from the host community. The response in the Caribbean sub-region will focus on three main areas of intervention:

- Provide and improve safe and dignified access to essential goods and critical services in synergy with sustainable development assistance.
- Enhance the prevention and mitigation of protection risks, and respond to protection needs through supporting the protective environment in affected countries.
- Increase resilience and integration opportunities.

This will be achieved through advocacy, capacity building, provision of direct assistance and community-based interventions. Programmes will encompass several sectors including Shelter, Non-food items (NFI), Nutrition, Food Security, Water, Sanitation and Hygiene (WASH), Health, Education, Protection and Integration. Vulnerable individuals

within the host communities who meet prioritization criteria will be included in the delivery of emergency services and assistance, with a view to promoting peaceful coexistence between refugees and migrants from Venezuela and the Caribbean host communities.

The documentation of refugees and migrants from Venezuela and the regularization of their status will be among the key priorities for the response strategy for 2020, as it enhances protection from risks of abuse and/or exploitation as well as refoulement, and often facilitates access to essential services, including health and education. To this end, advocacy and capacity building will be conducted to ensure that refugees and migrants from Venezuela are received and treated in a protection-sensitive manner. Partners will also work with national authorities and service providers to improve the assistance of persons with specific needs, including survivors of Gender-Based Violence (GBV), victims of human trafficking (VoT) and unaccompanied and separated children (UASC). This will be achieved by improving safe identification and referral pathways in the five countries.

Building upon existing services, and in close consultation with governments, focus will also be on strengthening access to health and education through capacity building and awareness raising. Specific support will be given to vulnerable families who need financial support to access health services and education. For 2020, assistance through cash-based interventions (CBI) will be reprioritized to benefit more families and to cover more sectors of intervention with the use of multi-purpose cash (MPC) grants in Aruba, Curaçao, the Dominican Republic, Guyana and Trinidad and Tobago.

Improving access to livelihoods and supporting integration will be another key component of the plan in the Caribbean sub-region in 2020. Refugees and migrants in the sub-region face obstacles with regard to socio-economic integration arising from issues such as the lack of documentation, language barriers and the lack of recognition of professional certificates and diplomas from Venezuela. Continuing to build partnerships with the private sector and advocate with governments will be essential to improve access to job opportunities for refugees and migrants from Venezuela as well as to enhance working conditions. Further efforts will be made to address and prevent xenophobia in the sub-region through large-scale or community-based campaigns. This will be complemented by the organization of social activities and community-based projects involving both the host communities and refugees and migrants from Venezuela to promote peaceful coexistence.

Prioritization approach

While advocacy and capacity building for the authorities are meant to improve the wellbeing of the entire population from Venezuela in the sub-region, limited financial resources for the response has resulted in the prioritization of assistance programmes to target the most vulnerable refugees and migrants from Venezuela and members of the host communities.

The most vulnerable include those without regular status who are at risk of detention, refoulement, GBV, abuse and/or exploitation. People with particular vulnerabilities, including single parents, unaccompanied and separated children, people at risk or survivors of GBV, people living with a physical or mental disability, as well as victims of human trafficking are also targeted as a priority. These populations are prioritized in particular for psychosocial support, cash-based assistance, non-food items and shelter assistance.

Response principles (AAP, centrality of protection, gender)

Protection is at the centre of the response in the Caribbean sub-region. Advocacy and support for the registration and documentation of new arrivals, the regularization of refugees and migrants, and the conducting of refugee status determination, contribute to improving the living situation of refugees and migrants from Venezuela in host countries and allow them to access essential services, including health and education in public infrastructures. As a result, strengthening the protection of refugees and migrants will contribute to helping them access basic services as well as livelihoods in their host country.

The centrality of protection for the response also translates into the prioritization of assistance based on vulnerability criteria and the planning of interventions that take into consideration age, gender and diversity, through the involvement of beneficiaries of diverse profile and background throughout the planning cycle. Direct assistance, such as non-food items and shelter, as well as cash-based interventions, will target people with heightened protection risks and specific needs, such as for instance survivors of GBV and VoTs. Overall, of the 22 appealing organizations in the Caribbean, 74 per cent completed the Inter-Agency Standing Committee (IASC) Gender and Age Marker (GAM) in the planning phase. At present, 63 per cent of them aim to mainstream gender equality: 47 per cent plan to respond to both gender and age differences, and 16 per cent organizations intend to address gender but not age in 2020.

Self-reliance and community engagement will be promoted across sectors. For 2020, increased efforts will be placed on conducting multi-sectoral and sectoral participatory needs assessments that will help steer the response at country level. Methodologies that promote participation of impacted communities, such as focus groups discussions and key informant interviews, will be utilised to engage refugees and migrants from Venezuela of different ages, genders and with diverse specific needs to help identify gaps in order to collectively develop solutions. Partners in the Caribbean will also engage communities to enhance accountability to and communication with refugees and migrants from Venezuela through outreach, the establishment and strengthening of feedback mechanisms and provision of information on services and rights.

Environment

Amongst the Caribbean countries, RMRP partners in Guyana has made the most significant strides in addressing the environmental dimensions of the situation and the environmental impacts and potential opportunities of response activities. While, overall, some challenges remain in incorporating environmental considerations into protection responses, especially in addressing potential conflict risks

arising from environmental factors, additional focus will be made in enhancing the incorporation of environmental considerations in the areas of integration, which could include livelihoods activities related to natural resource management, or making use of environmental activities as a way to promote social integration of refugees and migrants from Venezuela into host communities.

EDUCATION



PEOPLE IN NEED 

20 K

PEOPLE TARGETED 

4 K

FINANCIAL REQUIREMENTS 

\$2.31 M

PARTNERS 

7

Priority Needs

Children from Venezuela and youth face challenges in accessing education across the Caribbean sub-region, especially in non-Spanish speaking countries such as Aruba, Curaçao, Guyana and Trinidad & Tobago. Even in countries where refugee and migrant children from Venezuela have official access to public primary and secondary schools, there are administrative, financial and language barriers that often prevent access to education in practice.¹⁴² For instance, the price of school supplies, uniforms and transportation often discourages families to enrol their children in schools in Aruba, Curaçao and Guyana. Parents often lack awareness on enrolment procedures and, particularly in Guyana, schools lack the capacity to accommodate the increasing needs due to the outflows of refugees and migrants from Venezuela and returning Guyanese.¹⁴³ Many teachers also lack capacity in working with second-language learners and supporting language integration of students. Schools settings would also benefit from increased capacity in sensitive approaches to teaching students with special education needs and strategies for promoting protection from sexual exploitation and abuse.¹⁴⁴ In Trinidad and Tobago, children who cannot access student permits do not have access to formal education. While there are no official figures, it is estimated that this affects the majority of refugee and migrant children and youth from Venezuela in Trinidad and Tobago.¹⁴⁵ With regards to tertiary education, lack of recognition of Venezuelan diplomas, lack of access to universities for refugees and migrants from Venezuela without regular status and

language barriers often hinder refugees and migrants' enrolment throughout the sub-region.¹⁴⁶

Response Strategy

Access to primary and secondary education is a key priority area of intervention across the Caribbean sub-region, particularly in Aruba, Curaçao, Guyana and Trinidad & Tobago. In 2020, RMRP partners plan to target 3,900 children and youth from Venezuela and 325 members of host communities. The strategic approach to promote education for refugees and migrants from Venezuela aims at supporting governments to provide access to public formal education in a way that allows for the meaningful integration of Venezuelan children and youth into the education system. It is envisaged that this approach will help develop and enhance national systems, while emergency-oriented, humanitarian assistance will be limited to covering immediate gaps.

Partners will focus their interventions on working with relevant government authorities to strengthen the capacity of primary and secondary schools and teachers to receive refugee and migrant children and youth from Venezuela, bridge language and administrative barriers, and support vulnerable families in enrolling their children in school. Where children have no access to the national education infrastructure, alternatives for accredited learning will be supported.

¹⁴² UNHCR (June 2019), Needs assessment on ESL in Region 1, Guyana; Civil Defence Commission (February 2019), Data gathering and field assessment mission in Region 1, Guyana; IOM (November-December 2018), Displacement Tracking Matrix Round 3, Flow Monitoring of the Venezuelan Population In Guyana, Guyana; v Inter-Agency Coordination Sub-Regional Platform in Guyana (April 2019), Inter-Agency rapid Gender-Based Violence Assessment Report in Guyana

¹⁴³ UNHCR (June 2019), Needs assessment on ESL in Region 1, Guyana

¹⁴⁴ Ibid

¹⁴⁵ Refugees International, Forced into Illegality: Venezuelan Refugees and Migrants in Trinidad and Tobago, January 2019, Trinidad and Tobago.

¹⁴⁶ E.g. UNHCR, Findings from Participatory Assessments with Population of Concern in Trinidad and Tobago, August 2018, Trinidad and Tobago.

Access to tertiary education will be promoted by advocating for recognition of degrees from Venezuela and for the elimination of existing administrative barriers, such as the requirement of some Caribbean countries to have a residency to access universities.

In Guyana, Aruba and Curaçao, where children from Venezuela have access to formal education, partners will work with the authorities to develop approaches to support language integration for students in public schools. In Guyana, this will take the form of capacity building for teachers on teaching techniques to non-native English speakers. In Aruba, for the school year 2020/2021, the authorities will be offering Dutch language classes for Spanish speaking students, which will allow children from Venezuela to better integrate in the public education system. In the meantime, partners will establish after-school remedial classes and educational programmes for refugee and migrant children. After-school language classes in Dutch and Papiamentu and remedial classes will also be established in Curaçao, where dialogue with authorities on how to further improve access to education will continue.

In Aruba and Curaçao, material assistance as well as counselling will be also provided to the most vulnerable Venezuelan families who wish to enrol their children in schools. This will help address some of the financial barriers that prevent children from attending school due to the cost of transportation and school supplies.

In Guyana, where the capacity of schools is limited, especially in remote areas, partners will work with government actors to rehabilitate schools and expand their capacity to absorb a higher number of students in areas with a high concentration of refugees and migrants from Venezuela. In light of the vulnerability of both

host communities and refugees and migrants from Venezuela in many remote areas of Guyana, partners will also support the expansion of school feeding programmes benefitting both Venezuelan, Guyanese and indigenous children to mitigate malnutrition risks. Trainings for teachers and school staff on protection from sexual exploitation and abuse (PSEA) will also be organized, in the context of activities aiming at mitigating GBV.

In Trinidad and Tobago, partners will continue to support and strengthen alternative access to accredited learning through the blended learning programme Equal Place, while advocacy with the authorities to promote access of refugee and migrant children to primary and secondary schools will continue. Equal Place, launched for the academic year 2019/2020, combines two e-learning platforms with regular face-to-face sessions with teachers. It is available to children from Venezuela, as well as children from the host communities, who do not have access to formal education. In 2020, the enrolment capacity of the programme will be expanded through the establishment of additional learning spaces and provision of additional equipment. Awareness campaigns to inform families of this opportunity and to sensitize them on the importance of children's education will also be conducted.

Through school programmes and after-school activities, partners will work towards promoting peaceful coexistence among the communities and combatting xenophobic behaviour, particularly in school settings. Advocacy for the recognition of Venezuelan academic degrees and certifications and educational opportunities for adults will also contribute to the integration of refugees and migrants from Venezuela in the Caribbean.

FOOD SECURITY / NUTRITION / WASH



	PEOPLE IN NEED	PEOPLE TARGETED	FINANCIAL REQUIREMENTS	PARTNERS
	98 K	10 K	\$0.77 M	2
	29 K	1 K	\$0.14 M	2
	17 K	6 K	\$0.83 M	3

Priority Needs¹⁴⁷

The lack of access to sufficient food and nutrition,¹⁴⁸ safe drinking water and sanitation facilities¹⁴⁹ has been

identified as an important gap in Guyana, particularly in remote and border regions. Generally, lack of data on

147 These sectoral needs were only identified as such in Guyana, whereas specific food security concerns were noted under Protection in Aruba, Curaçao, Dominican Republic and Trinidad and Tobago, whereas in Trinidad and Tobago, nutrition needs were noted under the health sector.

148 E.g. Civil Defence Commission, Data gathering and field assessment mission in Region 1, February 2019, Guyana.

149 See, among others, Civil Defence Commission, Data gathering and field assessment mission in Region 1, February 2019, Guyana; PAHO, Report from the Workshop and visit to Mabaruma sub-region, April 2019, Guyana; R4V, Inter-Agency rapid Gender-Based Violence Assessment

the country-wide needs and the strain on government capacities in these areas are among the main challenges, which also impede the formulation of a national strategy. Given the limited availability of core WASH items in remote areas and their high price, many Venezuelan refugees and migrants, as well as returning Guyanese, cannot afford them and depend on humanitarian assistance. Access to drinking water is among the top challenges as well as some of the population's limited knowledge of some hygiene and sanitation practices, including food decontamination and use of some essential WASH items. In many remote areas in Guyana, logistical challenges to procure and transport food has also resulted in limited supplies being available to the population, including refugees and migrants from Venezuela. Limited access to land for farming and to produce food makes it difficult for partners to develop a longer-term food access strategy. Lack of awareness on healthy nutritional habits and lack of access to nutrient-dense food in areas of displacement result in many refugees and migrants from Venezuela suffering from malnutrition. This particularly affects children and pregnant women.

Response Strategy

In 2020, partners will conduct food distribution for refugees and migrants from Venezuela with a focus on the most vulnerable, including among the host community.

For refugees and migrants living in agricultural areas, capacity building will be conducted on sustainable farming techniques, including for the host community, with the aim of promoting self-sufficiency and local integration.

Food security interventions will be complemented with awareness raising on healthy nutritional habits coordinated with the Ministry of Health. A Nutrition-in-Emergency Coordination platform will be established to facilitate information sharing among partners.

To combat the lack of knowledge of available nutrition services in affected areas, information on front-line nutrition services and entitlements for targeted populations, including in Spanish and indigenous languages, will be disseminated.

The provision of water testing, water storage, treatment supplies and guidance at household-level will be a key action to increase access to potable water in affected regions.

Assessments and consultations with refugee and migrant, as well as with host communities will continue throughout the year, to ensure that interventions are addressing the most urgent needs. Consultation with relevant government authorities will be ensured through existing coordination structures, which will also support the identification of synergies between Nutrition, Health, Child Protection and Education actors

HEALTH



PEOPLE IN NEED 

66 K

PEOPLE TARGETED 

32 K

FINANCIAL REQUIREMENTS 

\$6.51 M

PARTNERS 

9

Priority Needs

Considering that many refugees and migrants from Venezuela in the Caribbean do not have regular status, their needs are often not captured by public health assessments conducted by host countries. Therefore, there is an overall lack of accurate and reliable data on access to health and the health condition of refugees and migrants from Venezuela.

For the most part, refugees and migrants have access to emergency and primary health services, although important needs persist with secondary and tertiary health care, particularly with regard to specialised services, including reproductive health and psychosocial support. Challenges

to access health care include language barriers, lack of knowledge of the services available, strains on existing public health systems, lack of availability of services in remote areas and inability of refugees and migrants to afford the cost of medical interventions.¹⁵⁰ These barriers particularly affect persons with chronic diseases, persons with physical and mental disabilities, and other persons with specific needs, including persons resorting to negative coping mechanisms, such as survival sex.

Refugees and migrants from Venezuela, in particular those with an irregular migratory status, are also often not able

Report in Guyana, April 2019, Guyana.

150 Guyana Civil Defence Commission (February 2019), Data gathering and field assessment mission in Region 1.; Inter-Agency Coordination Sub-Regional Platform in Guyana(April 2019), Inter-Agency rapid Gender-Based Violence Assessment Report in Guyana.; Refugees International (January 2019), Forced into Illegality: Venezuelan Refugees and Migrants in Trinidad and Tobago, Trinidad and Tobago; UNHCR (June 2019), Protection Monitoring - Venezuela Situation, Dominican Republic; Amnesty International (January 2019), Detained and Deported: Venezuelans denied protection In Curaçao, Curaçao.

to benefit from immunization campaigns.¹⁵¹ Children are particularly affected as many of them left Venezuela before receiving essential vaccinations. Refugees and migrants from Venezuela also report the need to purchase medications to send to family members in their country of origin,¹⁵² which has put a strain on the capacity of some local health providers. Overall, refugees and migrants lack of access to basic health information,¹⁵³ including on family planning, sexual and reproductive health (SHR) and pre-natal care. For children, there is a need for more information on vaccination and paediatric care, and for adolescents, on sexual and reproductive health. More information is also needed relating to health services available and appropriate to survivors of GBV and members of the LGBTI community.

Response Strategy

- Promoting access to health is a priority across all five countries of the Caribbean sub-region. Overall, activities will aim to address the needs of 29,600 refugees and migrants from Venezuela and 2,410 members from the host communities. The response in the Caribbean will focus on three main areas of intervention: building the capacity of public national health systems to provide services to the population in need; increasing awareness of Venezuelans on existing health services; and improving access to mental health.
- In all five targeted Caribbean countries, partners will map existing health services available to refugees and migrants from Venezuela to inform awareness-raising activities that will be organized during the course of 2020.
- Information campaigns on health will target the population at large as well as persons with specific needs. Campaigns will focus on health services, healthy behaviours, as well as more specific topics such as vaccinations, sexual and reproductive health, pre-natal and post-natal care. In this regard, collaboration between Health, Protection and Education actors will be essential, particularly on reproductive health, to ensure that prevention messages on family planning and risks related to sexually transmitted diseases can be shared in schools and among vulnerable groups.
- RMRP partners will also work in close collaboration with relevant governmental actors, with a view to enhancing the capacity of national health institutions and service providers to respond to the needs of the population, including refugees and migrants from Venezuela. This will include provision of technical and financial support to health institutions as well as building the capacity of existing health workers.
- Where gaps in the national health systems are identified, such as mental health services, partners will support concrete, short-term interventions to strengthen access to health services for vulnerable Venezuelan refugees and migrants. These may include cash-based initiatives to support access to life-saving medical interventions, or direct provision of services for mental health, emergency care and treatment for chronic conditions. Partners will also closely work with Protection actors to ensure that protection-sensitive health services are available to persons with specific needs, survivors of GBV and victims of trafficking.

INTEGRATION



PEOPLE IN NEED 

175 K

PEOPLE TARGETED 

100 K

FINANCIAL REQUIREMENTS 

\$7.81 M

PARTNERS 

10

Priority Needs

In the Caribbean, local integration is primarily impacted by the lack of regular migratory status of the majority of the refugee and migrant population from Venezuela, coupled with language barriers in non-Spanish speaking countries. This impedes their access to the formal labour market, financial systems

and, in some cases, higher education, thus exposing refugees and migrants from Venezuela to abuse and/or exploitation.¹⁵⁴ For refugees and migrants with a regular status, access to work permits can be a challenging process which often deters them from seeking a permit. At the same time, many

151 PAHO (April 2019), Report from the Workshop and visit to Mabaruma sub-region, Guyana; Civil Defence Commission (February 2019), Data gathering and field assessment mission in Region 1, Guyana; Refugees International (January 2019), Forced into Illegality: Venezuelan Refugees and Migrants in Trinidad and Tobago, Trinidad and Tobago.

152 Inter-Agency Coordination Sub-Regional Platform in Guyana (April 2019), Inter-Agency rapid Gender-Based Violence Assessment Report in Guyana

153 Ibid.

154 See, among others, Living Water Community, Survey Report on Living Conditions, July 2019, Trinidad and Tobago; UNHCR, Needs assessment on ESL in Region 1, June 2019, Guyana; Civil Defence Commission, Data gathering and field assessment mission in Region 1, February 2019, Guyana; R4V, Inter-Agency rapid Gender-Based Violence Assessment Report in Guyana, April 2019, Guyana; IOM, Monitoreo de flujos de población venezolana en República Dominicana, December 2018, Dominican Republic; Refugees International, Hidden and afraid: Venezuelans without status or protection on the Dutch Caribbean island of Curaçao, April 2019, Curaçao.

potential employers, particularly in the Dominican Republic, lack knowledge on the process to sponsor work visas for refugees and migrants from Venezuela who could otherwise be employed. Lack of recognition of degrees and professional certificates from Venezuela also prevents refugees and migrants from accessing formal jobs corresponding to their skills.¹⁵⁵ Lack of knowledge of local regulations for formally registering new businesses with the relevant authorities is another barrier which limits the potential for entrepreneurial activities to facilitate the local integration of the Venezuelan population.

Episodes of xenophobia have been observed across the Caribbean, with different levels of intensity and frequency. The sudden increase in the refugee and migrant population, with the real or perceived competition within the labour market and cultural and language barriers, and with the absence of robust social cohesion programmes, has exposed refugees and migrants from Venezuela to xenophobic acts, including in schools and at the workplace.¹⁵⁶

Response Strategy

Programmes to promote integration and foster peaceful coexistence will be carried out across all five Caribbean countries in 2020, targeting 52,600 refugees and migrants from Venezuela and 47,000 members of the host communities.

- Priority will be placed on promoting access to decent livelihoods opportunities and combating xenophobia. Advocacy with the authorities on access to work permits and easing of the procedures for formalizing existing employment arrangements will be at the core of the integration programme for 2020. While a priority across the sub-region, the nature and extent of livelihoods projects will vary among Caribbean countries, depending on local realities.
- In Aruba and Curaçao, activities will include an assessment of the labour market and mapping of skills among Venezuelans in relation to the formal labour market, as well as provision of assistance for the recognition of professional degrees and skills. In Guyana, income-generating activities will be established and gradually expanded for Venezuelans and the host community to help strengthen their self-reliance. Survivors of GBV or people at risk will be among the main targets for these programmes. Markets assessments will also take place both in the Dominican Republic and Trinidad and Tobago, where extensive livelihoods programmes are envisaged. This will inform the provision of vocational training and, for Trinidad and Tobago, language programmes to improve the employability of Venezuelans and address skill gaps in these countries.
- Partners will advocate for inclusion of accreditation of Venezuelan diplomas and professional skills and increased flexibility to strengthen financial inclusion of the Venezuelan population. This will be complemented by advocacy with the

private sector to foster livelihoods opportunities for refugees and migrants and to promote ethical work practices. In

- Trinidad and Tobago, efforts to combat exploitation in the workspace will encompass the roll out of the International Recruitment Integrity System (IRIS), which allows voluntary certification of employers who engage in ethical practices against potential exploitation.
- In cooperation with the relevant government authorities, in the Dominican Republic, partners will promote dissemination of information among employers on the process for sponsoring work visas. Among refugees and migrants, partners will disseminate information on the processes to formalize new businesses and banking services, such as requirements to open a bank account, and how to apply for loans. Job fairs and other mechanisms will be put in place to facilitate contact between refugees and migrants from Venezuela and potential employers. Refugees and migrants from Venezuela wishing to start entrepreneurial activities will also be supported through coaching and small-scale financial support. Similarly, in Trinidad and Tobago, a study will be launched in consultation with the authorities on the feasibility of micro-financing to support economic activities conducted by refugees and migrants from Venezuela.
- Campaigns to prevent and combat xenophobia and stigma will be implemented in coordination with the authorities in all five Caribbean countries. This will be complemented by the organisation of social activities involving both the host and Venezuelan communities to promote peaceful coexistence.

The integration strategy described above will be carried out in complementarity with planned protection interventions, in particular advocacy for the regularization and documentation of refugees and migrants from Venezuela. There will also be complementarity between anti-xenophobia campaigns conducted by integration actors and educational after-school interventions. Partners will also ensure that the response to integration needs is development-oriented and that a view towards sustainability is maintained. Interventions will be conducted in collaboration with the private sector, government institutions, and civil society organizations, with a view to ensuring a long-term and cohesive approach. The realization of a market assessment in Trinidad and Tobago and the Dominican Republic will inform actions and ensure responsiveness to actual needs and opportunities within the local context, thereby ensuring that the insertion of Venezuelans into the labour market contributes to development.

155 See, among others, UNHCR, Findings from Participatory Assessments with Population of Concern in Trinidad and Tobago, August 2018, Trinidad and Tobago; Refugees International, Hidden and afraid: Venezuelans without status or protection on the Dutch Caribbean island of Curaçao, April 2019, Curaçao.

156 See, among others, Refugees International, Hidden and afraid: Venezuelans without status or protection on the Dutch Caribbean island of Curaçao, April 2019, Curaçao; UNHCR, Findings from Participatory Assessments with Population of Concern in Trinidad and Tobago, August 2018, Trinidad and Tobago.

PROTECTION



PEOPLE IN NEED 

120 K

PEOPLE TARGETED 

60 K

FINANCIAL REQUIREMENTS 

\$17.17 M

PARTNERS 

15

Priority Needs

The lack of or limited regularization processes that take into consideration the specific situation of refugees and migrants from Venezuela results in many people who entered regularly as tourists or on business now finding themselves in situations where they are unable to extend their stay and falling into irregular status.¹⁵⁷ Shrinking regular routes out of Venezuela to the Caribbean also have resulted in many refugees and migrants from Venezuela entering Caribbean countries irregularly, often undertaking dangerous boat journeys operated by smugglers and human traffickers. This situation puts refugees and migrants, especially women and children, at risk of human trafficking, GBV, exploitation and/or abuse. Deaths at sea were also reported for refugees and migrants from Venezuela on their way to Trinidad and Tobago and Curaçao in 2019.¹⁵⁸ Furthermore, given the absence of, or nascent asylum systems and lack of asylum legislation in many Caribbean countries, those in need of international protection do not always have access to asylum procedures. This has resulted in deportations, including some cases of refoulement being observed in 2018 and 2019.

Due to lack of regular migratory status, refugees and migrants from Venezuela face greater protection threats and risks, including detention and exploitation, and may have limited access to public services. As vulnerabilities grow, they also become more susceptible to resorting to negative coping mechanisms, including survival sex for many women and adolescent girls.¹⁵⁹ Human trafficking networks continue to operate in the sub-region,¹⁶⁰ and GBV remains a concern across the Caribbean.¹⁶¹ However, VoT, survivors of GBV, and other persons in circumstances of extreme vulnerability, including unaccompanied and separated children,¹⁶² often lack access to specific services, including psychosocial support, legal aid, emergency livelihoods, and temporary housing. Lack of regular status also prevents some refugees and migrants from Venezuela, including VoT and survivors of GBV, to report incidents to the authorities due to real or perceived fear of arrest, detention and deportation. In Guyana, access to justice

is also limited in remote and border areas, where courts do not have regular sessions. Appropriate housing is another challenge faced by refugees and migrants from Venezuela, due to rental costs and requirements, lack of financial resources and documentation. Access to clear and reliable information on access to documentation and basic rights needs to be improved across all Caribbean countries.

Response Strategy

In 2020, Caribbean partners will prioritize interventions that aim to improve the situation of refugees and migrants from Venezuela, by strengthening the response to GBV and child protection, as well as increasingly support authorities to counter human trafficking. Overall, partners aim to target 53,900 refugees and migrants from Venezuela and 5,960 members of the host communities with protection interventions.

- In light of its implications on all aspects of life, great focus will be placed on promoting access to regularisation and asylum procedures for refugees and migrants from Venezuela. This will be achieved through advocacy, capacity building of relevant authorities, and support to individual cases on access to asylum and regularization through legal aid. This will be complemented by continued advocacy and provision of technical support to host governments to establish or strengthen asylum systems. Increased access to regularization mechanisms and asylum will in turn mitigate the risk of arrest, detention and deportation, and decrease vulnerability to exploitation and abuse.
- In 2020, partners will also increase their responses to prevent, mitigate and address GBV, as well as respond to the needs of persons with specific needs and VoT across all five Caribbean countries. This will be achieved by working with relevant authorities, service providers and refugee and migrant communities to strengthen safe identification and referral pathways through capacity building and provision of direct support. Advocacy will also aim at developing legal

157 Civil Defence Commission (February 2019), Data gathering and field assessment mission in Region 1, Guyana; Refugees International (April 2019), Hidden and afraid: Venezuelans without status or protection on the Dutch Caribbean island of Curaçao.

158 Inter-Agency Coordination Sub-regional Platform, Situation report April-May 2019; Refugees International (January 2019), Forced into Illegality: Venezuelan Refugees and Migrants in Trinidad and Tobago, Trinidad and Tobago.

159 UNHCR (June 2019), Needs assessment on ESL in Region 1, Guyana.

160 US Department of State (June 2019), Trafficking in Persons Report,

161 See, among others, Inter-Agency Coordination Sub-national Platform (April 2019), Inter-Agency rapid Gender-Based Violence Assessment Report in Guyana, Guyana; UNHCR (August 2018), Findings from Participatory Assessments with Population of Concern in Trinidad and Tobago, Trinidad and Tobago; Comité Coordinador de la Diáspora Venezolana en RD (May 2018), Situación Personas Venezolanas en República Dominicana, Dominican Republic.

162 EUNICEF (August 2019), Migration Flows in Latin America and the Caribbean.

frameworks on human trafficking and procedures to provide tailored assistance to victims. Trainings will be conducted for law enforcement officials, judges and magistrates on reporting, investigating and prosecuting cases of human trafficking. The capacity of existing emergency temporary shelters for victims of trafficking and persons at risk or survivors of GBV will be expanded, and additional ones will be established.

- Access to justice will be promoted, including for survivors and persons at risk of GBV, through the establishment or strengthening of legal aid, including legal awareness, counselling, assistance and representation.
- Increased focus will be placed on child protection. In countries where this is not yet in place, developing a protocol to safeguard the protection of Venezuelan children together with the authorities will be a priority. Capacity building on child protection for the authorities and humanitarian actors will also be conducted to ensure that Venezuelan children receive specific care at the onset of their arrival and reception. Where gaps have been identified, technical and financial support will be provided to the host governments to expand their child protection services and better respond to the needs of children and youth from Venezuela and the host community. Child friendly spaces will be expanded in Trinidad and Tobago.

- Across the sub-region, increased efforts will focus on communication with communities (CwC) and promoting a community-based approach that fosters community engagement and self-reliance. A coordinated communication strategy will be pursued in several Caribbean countries to share relevant information with the refugee and migrant population and ensure consistent messaging, while taking into consideration the different needs of men, women, boys and girls as well as those of persons with specific needs.
- Multi-purpose cash-based interventions will be introduced or strengthened to provide the most vulnerable Venezuelans with financial support to mitigate exploitation and human trafficking risks and gradually build their resilience. Multi-purpose cash-based assistance will also help support GBV survivors and medical emergencies.

Through this protection approach, Caribbean partners will seek to utilize existing services, and to support the government in strengthening the public service system, where gaps have been jointly identified, thus ensuring longer-term sustainability. Targeted basic service provision will be provided in complementarity with host governments, and on a temporary basis. Addressing barriers in acquiring regular status will also positively impact the efforts of partners in other sectors, as it will address one of the existing barriers to accessing basic rights, including medical care, education and adequate living standards.

SHELTER/NFI



PEOPLE IN NEED 

67 K

PEOPLE TARGETED 

10 K

FINANCIAL REQUIREMENTS 

\$3.77 M

PARTNERS 

5

Priority Needs

Most of the refugees and migrants from Venezuela arrived in the Caribbean with no or limited assets. As their access to livelihoods opportunities in host countries is limited, many do not have the resources to buy essential relief items. In some remote regions, such as some border areas in Guyana, availability of essential non-food items is also limited.¹⁶³

Access to adequate housing for refugees and migrants from Venezuela is another essential need.¹⁶⁴ Lack of documentation and financial resources often pushes refugees and migrants to accept living in substandard accommodations, including collective home arrangements, which could present increased risks related to GBV and children protection.¹⁶⁵ The need for adequate housing

is even more crucial for victims of human trafficking and survivors of GBV who need specific forms of assistance.

Response Strategy

Interventions to promote access to adequate accommodations and ensure that vulnerable families have access to essential relief items will target 7,500 refugees and migrants from Venezuela and 2,073 persons from the host community. Particular focus will be placed on promoting access to adequate housing and core relief items in Guyana, where the greatest needs have been identified.

¹⁶³ Civil Defence Commission (February 2019), Data gathering and field assessment mission in Region 1, Guyana.

¹⁶⁴ Ibid

¹⁶⁵ UNHCR (June 2019), Needs assessment on ESL in Region 1, June 2019, Guyana; Inter-Agency Coordination Sub-Regional Platform (April 2019), Inter-Agency rapid Gender-Based Violence Assessment Report in Guyana, Guyana; Living Water Community (July 2019), Survey Report on Living Conditions, Trinidad and Tobago; UNHCR (August 2018), Findings from Participatory Assessments with Population of Concern in Trinidad and Tobago, Trinidad and Tobago.

- Housing assistance in the Caribbean will focus on two priority areas: first, increasing resources provided to the most vulnerable individuals to allow them to find adequate and dignified accommodation; and second, continue to provide safe housing for people with specific protection concerns, including people at risk and survivors of GBV, and victims of human trafficking. To achieve this, the capacity of temporary and emergency shelter will be expanded to be able to host additional vulnerable people and assistance through cash-based interventions will continue in complementarity.
- Partners in the Caribbean will ensure that vulnerable families, especially new arrivals, have access to essential non-food items, including blankets, sleeping mats, hygiene kits and baby kits. Non-food items will continue to be provided in kind in Guyana and, to a more limited extent, in Aruba and Curaçao.
- Multi-purpose cash programmes, including in support to access to non-food items, will be conducted in all five Caribbean countries.

The provision of temporary housing, NFI as well as the provision of cash will be made based on common protection vulnerability and socio-economic criteria, jointly agreed by partners on the basis of national and local realities. The assistance will therefore depend on data collected through assessments, consultations with targeted communities, protection monitoring and individual registration of refugees and migrants and will require collaboration with actors engaged in protection activities. Similarly, the relevance of the assistance will be monitored regularly through consultations with refugees and migrants from Venezuela. Coordination with WASH actors will be essential to determine the relevant non-food items to be distributed to vulnerable refugees and migrants from Venezuela, in particular the content of the hygiene and baby kits.

CENTRAL AMERICA & MEXICO



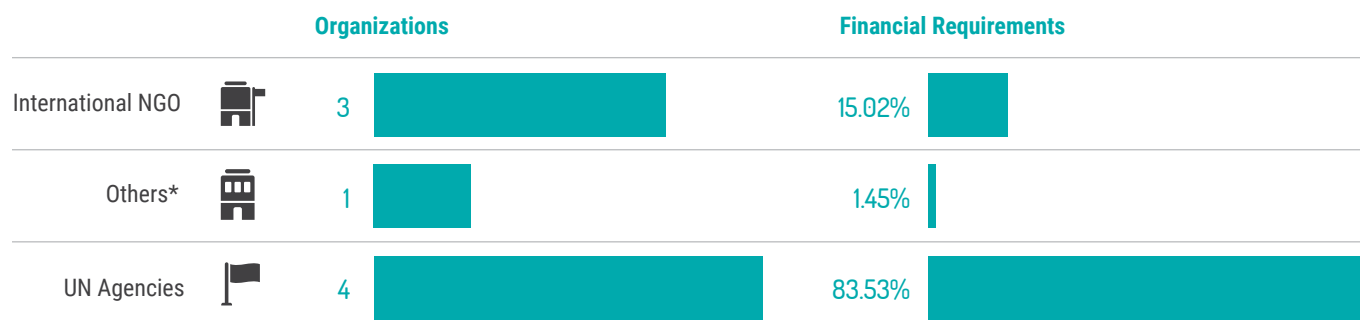
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CENTRAL AMERICA & MEXICO

POPULATION PROJECTION 2020	PEOPLE IN NEED*	PEOPLE TARGETED*	FINANCIAL REQUIREMENTS	RMRP PARTNERS
VENEZ. IN DESTINATION 283 K	117 K	47 K	\$14.8 M	8
HOST COMMUNITY --	25 K	4 K		



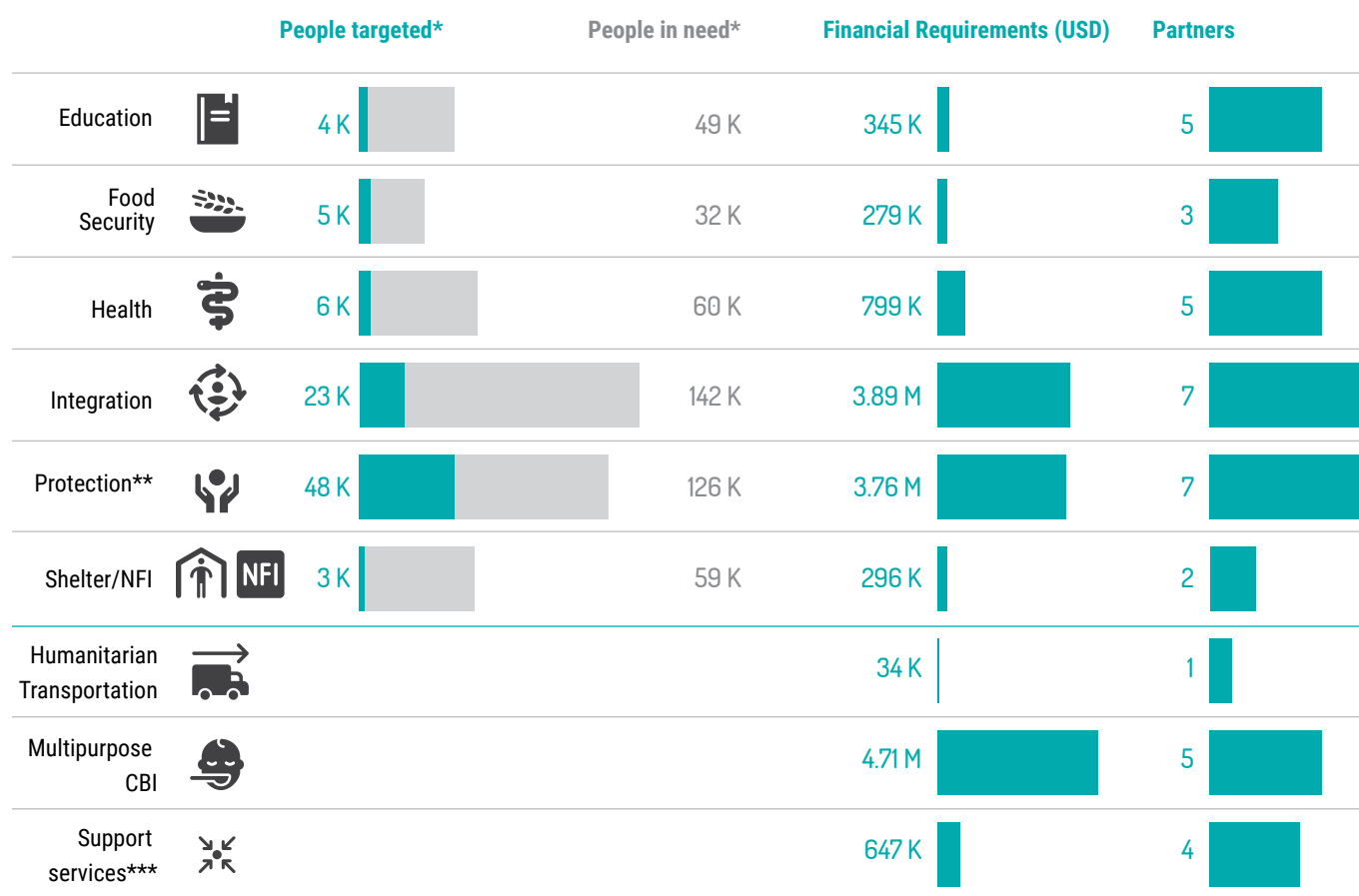
NUMBER AND FINANCIAL REQUIREMENTS BY ORGANIZATION TYPE



*Other include Red Cross movement, academia, civil society and faith-based organizations.

The list of organizations and RMRP partners only includes appealing organizations under the RMRP. Many of these organizations collaborate with implementing partners to carry out RMRP activities.

POPULATION IN NEED AND TARGET, FINANCIAL REQUIREMENTS AND NUMBER OF PARTNERS BY SECTOR



*The figure of People in Need and People Targeted does not include host communities | ** Includes GBV, Child Protection, Human Trafficking & Smuggling

*** Communication, Coordination, Information Management and Fundraising

COUNTRY/SUB-REGIONAL OVERVIEW

Summary findings of joint needs assessment and analysis

The countries of the Central American & Mexico sub-region (Costa Rica, Mexico and Panama) have been exposed to multiple displacement dynamics, including refugees and migrants from El Salvador, Guatemala, Honduras, and Nicaragua, as well as from Venezuela. According to official figures, about 195,000 refugees and migrants resided in the sub-region as of October 2019. This figure is expected to reach up to 283,000 by the end of 2020.

Amidst these sub-regional dynamics, the increasingly vulnerable profiles of arriving refugees and migrants from Venezuela exert additional pressure on strained national infrastructures, as demonstrated by delays in processing claims for migratory regularization and asylum requests, as well as gaps in the provision of reception, documentation, basic needs and services, and the availability of local integration opportunities.

The above notwithstanding, some countries covered under the Central America and Mexico chapter have maintained their open-door policy for refugees and migrants from Venezuela, as they increasingly see these countries as countries of destination. To achieve this, current challenges faced by refugees and migrants from Venezuela in the sub-region, such as information on available services, access to basic rights and documentation, as well as integration opportunities to combat increasing xenophobic attitudes, require addressing.

Costa Rica offers a positive legal framework for refugees and migrants, providing opportunities to access social services and the labour market. There has been a steady increase of refugees and migrants from Venezuela entering Costa Rica since the beginning of the crisis, and this outflow coupled with an increase of Nicaraguans since April 2018 has overwhelmed national systems, resulting in a significant backlog to obtain documentation. Despite the Government's best efforts to efficiently handle cases, refugees and migrants from Venezuela sometimes wait between six to nine months to be able to formalize their request to the Migration Authorities. This large backlog and the long waiting times have inhibited refugees and migrants from Venezuela access to social services and to the labour market, exposing them to greater vulnerability and exploitation. Although Costa Rica is not a primary destination country for this population, due to its location, the country size and hosting of other refugee and migrant populations has a great impact on its capacity to address the increasing protection needs resulting in gaps faced by the population. The profile of refugees and migrants from Venezuela in Costa Rica is increasingly more vulnerable due to individuals arriving with limited resources given the deteriorating crisis in Venezuela. A socio-economic evaluation conducted in the country reported that 85 per cent face specific needs due to experiencing chronic illnesses, being single-parent households, pregnant or

lactating women, having physical or mental disabilities, and the existence of illiteracy among adults¹⁶⁶.

From 2015 to late June 2019, there were a total of 16,360 requests for migratory regularization in Costa Rica, of which 34 per cent were approved. For the same time period, there were 6,949 asylum requests, with three per cent approved. The burden on the national system is demonstrated by the delay in processing claims.

From February to September 2019, partners conducted joint participatory needs assessments with refugees and migrants from Venezuela in Mexico in different locations in the country, including Mexico City, Cancún, Playa del Carmen, Querétaro, Aguascalientes and Puebla, where most part of the refugees and migrants are concentrated. Main findings confirm persistent and critical gaps related to different sectors, including access to territory, documentation, basic needs such as access to shelter and health services, psychosocial support (PSS), Non-Food Items (NFIs), and socio-economic integration.

Despite the introduction of entry restrictions, the number of refugees and migrants from Venezuela in Panama has continued to increase in the last year. In June 2019, the new government decided to revoke the executive decrees that regulated the extraordinary regularization processes, through which a large number of refugees and migrants from Venezuela had obtained a temporary stay permit in Panama; as well as developed a new comprehensive migration policy, which has generated anxiety and uncertainty among the refugee and migrant population. Pursuant to Decree No. 612 of 22 October 2018, an 'Office of Humanitarian Affairs for Venezuelan Residents' was created, to address requests for family reunification for humanitarian purposes and family unification.

Also, xenophobic attitudes are on the rise as a direct result of the discussions on the migratory reform. Although these largely target foreigners in general, refugees and migrants from Venezuela have been mentioned in particular due to their increase in numbers during the last years. As of September 2019, the refugee and migrant population from Venezuela had the highest number of regularizations at the National Immigration Service in Panama, and they are the nationality with the second highest number of asylum applications at the National Office for refugee Attention (ONPAR). Young people between the ages of 16 and 21 have mostly expressed a general lack of knowledge and information about regularization processes and access to the asylum procedures. In general, there is a gap in access to basic rights due to the challenges in obtaining formal employment, coupled with the general stress caused by xenophobic tendencies, a situation that hinders their local integration.

RESPONSE STRATEGY

Country scenario

The response in Costa Rica for 2020 is based on a scenario similar as in 2019, consisting in the majority of refugees and migrants from Venezuelan traveling by air and entering through regular border points with Panama. Given the mode of travel, no unforeseen and significant influx is expected. However, it is expected that refugees and migrants arrive in Costa Rica with more limited resources and requiring increased humanitarian support to meet their basic needs. Costa Rica has an established legal framework that provides universal and free access to education and health care for children, universal health care for pregnant women, and universal HIV¹⁶⁷ antiretroviral treatment and medication. However, there are challenges in ensuring that these policies are implemented uniformly.

While in Mexico, the regularization and asylum procedures are expected to improve, the number of refugees and migrants from Venezuela will most likely increase. Although the Panamanian government has established specific entry limitations, such as a visa requirement, the number of refugees and migrants from Venezuela has increased in 2019 and is expected to continue increasing during 2020. The planned activities are focused on strengthening mechanisms to facilitate access to health, education, employability and obtaining documentation. As well as, promoting local integration through the development of social cohesion activities between the refugees and migrants and the local population. Lack of access to information is one of the central issues, as it hampers the effective access to basic rights and documentation. Therefore, the response will have a specific focus on issues related to documentation, regularization, access to the asylum system, Gender-Based Violence (GBV) prevention and response, and psychosocial support. Assistance through multipurpose cash (MPC) grants are prioritized with a focus on fulfilling the most basic needs for food and housing, as these being the main gaps highlighted by consulted population. Access to livelihoods and socio-economic integration will be promoted through community-based interventions, labour insertion and income-generating activities targeting refugees and migrants in the country.

Scope of the response

The geographic scope of activities targeting refugees and migrants from Venezuela in Costa Rica is focused on the metropolitan area of San Jose, which hosts the majority of the population, and targets protection and integration activities. This includes support to the Government through infrastructure, capacity building, and human resources to process regularization and asylum requests and documentation of refugees and migrants from Venezuela in Costa Rica. Integration activities are also prioritized to ensure that individuals have the tools to access the labour market and that small businesses/entrepreneurships are equipped

with the right models to be brought to scale and documented. Other activities planned respond to helping the most vulnerable meet basic needs through Cash-Based Interventions (CBI), emergency shelter, and NFIs. In Mexico, the scope of the response will be focused on refugees and migrants from Venezuela who see Mexico as a destination country rather than a transit country. Based on the joint assessments, those populations are mainly concentrated in Mexico City, and in the States of Quintana Roo (Cancún, Playa del Carmen), Querétaro, Aguascalientes and Puebla. Most of the refugees and migrants from Venezuela are concentrated in the Provinces of Panama and Panama Oeste, especially in the more urban environments of these provinces. This means that the majority of the planned interventions are focused on Panama City, Chorrera and Arraijan; while other interventions such as institutional strengthening and public information campaigns are nationwide.

At the programmatic level, one of the priorities will be responding to specific protection risks and enhancing the overall protection environment of host countries, ensuring access to territory, access to documentation, avoid deportations and promote integration. To achieve this, information for refugees and migrants on regularization and asylum procedures will be provided, legal services and representation expanded, capacity of government counterparts enhanced, and regular border monitoring conducted.

Another priority will be increasing the use of CBI to respond to basic needs of most vulnerable or at-risk individuals and groups, with emphasis on food and shelter. Targeted CBI will also be provided for livelihood initiatives, to obtain documentation, including work permits for refugees and asylum seekers admitted to the procedure, and to support education and health related costs. In addition, enhancing refugees' and migrants' self-reliance and economic integration will be another priority, through the expansion of entrepreneurship and labour placement programs. Peaceful co-existence and social integration will continue to be a priority in all three countries, through the continuation and expansion of anti-xenophobia and discrimination campaigns and targeted social cohesion activities in prioritized host communities.

Prioritization approach

The activities planned in the sub-region are proposed based on a prioritization approach, which highlight protection, integration, access to the territory and health as key needs for refugees and migrants from Venezuela in Central America and Mexico. To achieve this goal, information on documentation and regularization and asylum procedures will be strengthened and consolidated. Capacities of governments counterparts will be strengthened and expanded. Furthermore, community-based responses will be prioritized to promote peaceful coexistence

and social cohesion. Partners will establish referrals systems to ensure individuals can access different services based on needs. Through participatory assessments, refugees and migrants from Venezuela in Costa Rica, Mexico and Panama will be able to provide feedback on key needs and identified opportunities to fulfil the response gaps.

Fostering private sector engagement will be key in the medium and long-term strategy for integration and partners will continue their active engagement with key stakeholders to expand its network of private supporters. For expanding the durable solutions and integration component of the strategy, it is expected to expand the existing networks of employers, chambers of commerce and other relevant actors.

Response principles (AAP, centrality of protection, gender)

Planned activities will follow a gender and age sensitive approach. To the extent possible, planning used disaggregated figures to plan the target population. These include a lens for specific needs, understanding that women may face heightened vulnerability in this context. Programs also seek to ensure visibility of individuals facing specific needs, such as persons with disabilities. Each agency participating in the sub-regional chapter is familiar with GBV protocols and develops specific steps to address these cases. In Mexico, strengthening case management institutions and specialized services for women and the Lesbian, Gay, Bisexual, Transgender, Intersex (LGBTI) population will be promoted, as this population group is often targeted by GBV, sexual exploitation, harassment, abuse and/or discrimination. Furthermore, considering the current priorities on community empowerment related to the promotion of effective engagement, there is still a need to focus on identification and

support of community initiatives and entities for protection and solutions planning. The implementation of participatory assessments, regular focal group discussions, collective exchanges, community forums and Communicating with Community (CwC) initiatives remain a priority.

In Panama, a specific action plan aimed at operationalizing the Age, Gender and Diversity (AGD) approach will be prioritized. The action plan foresees activities and has specific objectives on strengthening Accountability to Affected Populations (AAP), implement a CwC strategy, enhance the feedback and complaint mechanism, ensure full compliance with Protection against Sexual Exploitation and Abuse (PSEA) standards and promote gender equality.

Gender and Age Marker (GAM)

In the planning phase, 94 per cent of the appealing organizations completed the Inter-Agency Standing Committee (IASC) Gender with Age Marker (GAM). 93 per cent of them reflected their commitment to gender and age inclusion as an essential part of programming for women, girls, men, boys and LGBTI persons. Most of the proposals (67%) plan to respond to both gender and age differences (Code 4), and 6 per cent intend to address gender but not age (Code 3), and 27 per cent appear unlikely to be gender or age responsive (Codes 2, 1, 0). Regarding to gender analysis, 40 per cent of the appealing organizations demonstrate a good analysis, 27 per cent a limited analysis and 33 per cent have not yet or not included an analysis of gender and/or age inequality, comparing conditions or barriers for different groups in the context. A good gender analysis allows organizations to tailor activities in order to enhance gender-sensitive response.

MULTIPURPOSE CBI



PEOPLE IN NEED 

—

PEOPLE TARGETED 

—

FINANCIAL REQUIREMENTS 

\$4.71 M

PARTNERS 

5

In Mexico, although many refugees and migrants from Venezuela are highly qualified and possess transferable skills which allow them to cover most of their needs, and can count on stronger support networks, the majority still require humanitarian assistance to meet their basic needs, including food, water, shelter and basic domestic/hygiene items. Refugees and migrants from Venezuela who choose to remain and seek regular status or asylum in Mexico may have long waiting times that might last several months, increasing their vulnerability. Increase in requests for documentation has overstretched the capacity of the national system, causing

further delays. Therefore, without access to employment, refugees and migrants from Venezuela are likely to adopt negative coping mechanisms, such as begging, sex work, child labor or working in precarious, unsafe and exploitative conditions; or even abandon their asylum or regularization procedures, in order to seek opportunities elsewhere, including through illegal or exploitative work.

While Costa Rica's legal framework provides refugees and migrants from Venezuela with the necessary documentation to access the social welfare system, and subsequently, the labor market, the significant increase in regularization and asylum

requests has overstretched the capacity of the national system, causing delays of approximately six to nine months. In the case of asylum seekers, once documentation is issued, they must wait an additional three months before they can obtain a work permit, increasing the vulnerability of these persons.

In Panama, equally, the lack of regular documentation and long periods to obtain a regular status or refugee recognition in the country, leaves persons in vulnerable situations. This combined with high living costs, leads to refugees' and migrants' from Venezuela becoming reliant on humanitarian assistance and support, channeled through CBI.

To respond to the immediate needs of the most vulnerable refugees and migrants from Venezuela, partners will provide multi-purpose cash grants to selected refugee and migrant families and individuals. The aim is to assist them in meeting their basic needs, such as shelter and food, in the three countries. The cash transfer amount will be based on an adjusted Minimum Expenditure Basket (MEB), as established by the Government, and covers the three-month period required for the documentation procedures to be completed. Sectoral top up-grants, in association with other technical sectors will also be provided so that the responses are tailored to the needs of the most vulnerable refugees and migrants from Venezuela. The modality will be through e-wallets or debit cards.

EDUCATION



PEOPLE IN NEED 

49 K

PEOPLE TARGETED 

4 K

FINANCIAL REQUIREMENTS 

\$0.35 M

PARTNERS 

5

Priority Needs

Refugees and migrants from Venezuela arriving in Mexico are largely well qualified, with most holding high school or university degrees. The ability for them to continue their studies or revalidate their academic degrees is a priority for successful integration. Furthermore, priorities for the families during the local integration process is to ensure that children have access to primary and secondary education.

Costa Rica offers free primary and secondary education to all minors regardless of nationality. Nevertheless, Venezuelans in the county face challenges in validating diplomas to access higher education and incidents where this policy is not uniformly applied. For minors, parents do not always have their children's prior school documentation, which makes entering the educational system challenging.

In Panama, the lack of information available to refugees and migrants from Venezuela about the procedures for integrating in the school system is a specific issue which will be targeted through the Plan. Also, officials of the Ministry of Education will be trained on the application of the National Executive Decree 1225, which contains the roadmap to access the education system for migrants, refugees and asylum seekers in the country. The implementation of a school leveling test for refugees and migrants to facilitate their enrollment according to the school grade they attended will be prioritized.

Response Strategy

Refugee and migrant children and adolescents pursuing higher education in Mexico, and refugees and migrants from Venezuela working informally in the sub-region will be the priority under this sector.

- For 2020, partners will continue and expand communication campaigns on the procedures to revalidate the academic degrees, and continue with its advocacy efforts, the sensitization of communities, as well as capacity building of service providers, in order to improve access to education for refugees and migrants from Venezuela.
- Partners in the sub-region will provide information sessions to refugees and migrants from Venezuela on accessing education systems and will also provide training to national education institutions. Interventions are planned to provide educational kits to the most vulnerable, in coordination with the NFI sector.
- A broader coverage and better information dissemination on institutions providing support will be carried out.
- Voluntary relocation of refugee and migrant families to local integration spaces in the northern part of the country will improve access to education. Through the relocation scheme, 100 per cent of school aged children who relocate to Saltillo, Guadalajara, Monterrey and Aguascalientes will be supported to enroll in schools. With an emphasis on specific needs, partners will establish partnerships with private schools in order to ensure that children with exceptional performance can access a more ambitious curriculum, while referring children with disabilities to specialized institutions.

Families with school-aged children will be supported with MXN 1,000 per semester through a sectorial cash grant disbursed through the CBI working group.

- In Panama, partners will focus on promoting access to available information on the processes of validation of diplomas and access to the educational system; advocating for the creation of a census of school capacities for

integrating refugees and migrants from Venezuela by area; facilitating the economic integration of families in view of access to education; and the creation of childcare services.

- Social cohesion and integration of refugees and migrants from Venezuela in schools will be enhanced through a campaign to prevent bullying.

FOOD SECURITY



PEOPLE IN NEED 

32 K

PEOPLE TARGETED 

5 K

FINANCIAL REQUIREMENTS 

\$0.28 M

PARTNERS 

3

Priority Needs

Costa Rica is an upper-middle-income country, with costs that may not be manageable by all refugees and migrants from Venezuela arriving and residing in the country. In a socio-economic evaluation with family groups, 51 per cent expressed having restricted the quantity of food consumed per day in order to survive and 49 per cent noted adapting the quality of food consumed (more than one survival strategies could be chosen)¹⁶⁸.

In Panama, difficulties related to access to food have also been identified. A study on the situation of migrants and refugees from Venezuela in Panama indicates that refugees and migrants from Venezuela need to reduce housing costs and food costs to subsist in Panama and to be able to send remittances to their relatives. Likewise, partners report often receiving many requests for food assistance.

Response Strategy

- Interventions by the Food Security sector partners to address the immediate needs of the most vulnerable refugees and migrants from Venezuela will be strengthened through humanitarian assistance programmes and income-generating activities, including the delivery of cash assistance.
- In Panama, multipurpose CBI will be combined with information campaigns on nutrition, focused on ensuring adequate, sufficient and nutritious food. Nutritional counselling programs disaggregated by age and gender will be organized.

HEALTH



PEOPLE IN NEED 

60 K

PEOPLE TARGETED 

6 K

FINANCIAL REQUIREMENTS 

\$0.8 M

PARTNERS 

5

Priority Needs

In Mexico, the cancelation of public health services, such as Seguro Popular, will increase the number of people without access to medical services and treatments. Until an alternative

is created, refugees and migrants from Venezuela only have the option to resort to private healthcare providers.

While minors and pregnant and lactating mothers have access to free healthcare in Costa Rica, a significant portion of the refugee and migrant population is without adequate healthcare coverage. According to assessments conducted, 14 per cent of refugees and migrants from Venezuela suffer one or more chronic diseases such as hypertension, hyperthyroidism, diabetes, thyroid disorders and cancer; while another 18 per cent require daily or regular medication¹⁶⁹. Similarly, 37 per cent of the people surveyed do not seek medical assistance because they do not have insurance¹⁷⁰. Individuals with sufficient financial means can pay for a health insurance. However, many do not have this option. People with low or no income, elderly people, children and women are highly vulnerable, which might hinder the treatment of diseases.

In Panama, specific concerns are linked to the problems of accessing treatments for chronic diseases, the lack of disaggregated epidemiological data for migrants and refugees, the lack of information about the health services available for refugees and migrants from Venezuela, the coverage of the women's care program, and access to mental health programs.

Response Strategy

The provision of health assistance to the most vulnerable is a priority in the sub-region, especially treatments of longer periods which are the most difficult to access for refugees and migrants from Venezuela, without creating parallel systems.

- RMRP partners in all countries in the sub-region will provide health brigades to offer services to those not affiliated

with the national social security system, including monthly dental brigades.

- Partners will also propose sessions on sexual and reproductive health as well as mental and psychosocial support (MHPSS). In Mexico, partners will also expand the implementation of psychosocial support activities to reach populations in remote locations and assistance with coping mechanisms. In Panama, partners will continue working with the Ministry of Health to promote psychosocial support to migrants and refugees from Venezuela and the creation of a mental health referral system.
- RMRP partners in Mexico will need to seek alternatives with the Government to ensure access to health services, in life-threatening situations as a minimum.
- In Mexico, partners will also continue with the provision of direct health assistance, including medical services, medication and health treatments for those in vulnerable conditions.

In Panama, the response will focus on addressing the lack of information or awareness about available health services, including free vaccinations as well as to ensure vulnerable cases affected by mental health problems and/or chronic illness have access to treatments and medication required. Partners will work on building the capacity for migrant and refugee care within the services for women's care and care for children and adolescents. Assistance through multipurpose cash programs will benefit migrants and refugees in need of specific treatments and/or medications, and will prioritize chronically ill refugees and migrants, children under 12, as well as pregnant and lactating women.

INTEGRATION



PEOPLE IN NEED 

142 K

PEOPLE TARGETED 

23 K

FINANCIAL REQUIREMENTS 

\$3.89 M

PARTNERS 

7

Priority Needs

Mexico offers a favourable legal framework for the inclusion of refugees and migrants in public services and their local integration, both in socio-economic and in terms of their regular status. Venezuelans recognized as refugees are issued a permanent residence card, a social security number, and a population registration number (CURP); which provide access to public services. Refugees and migrants from Venezuela, regardless of their status, are entitled to access to basic education, while regular migrants and refugees enjoy the right to work. Access to nationality is a possibility after two years

of permanent residence. However, there is still a need for integration within host communities and to ensure refugees and migrants can access the labour market and banking system.

The Costa Rican legal framework provides refugees and migrants opportunities to integrate into the host community through access to the labour market and social services. However, the current backlog in processing asylum claims has resulted in delays. Obtaining work permits can require between six to nine months. Social and economic integration

169 IOM (2018) Displacement Tracking Matrix (DTM) in Costa Rica.

170 Ibidem

of refugees and migrants from Venezuela in Costa Rica is a priority for 2020. Based on data collected in the country in 2018, 55 per cent of refugees and migrants from Venezuela have a university degree while 48 per cent are unemployed¹⁷¹. A further socio-economic evaluation noted that of 160 family groups that have some sort of income, 44 per cent have occasional income and 42 per cent have regular income¹⁷². Activities under this sector will promote the creation and strengthening of small businesses.

In Panama, most concerns are linked to the regularization of documentation for labour market insertion and income generation activities; difficulties in accessing training and skills development programs; obstacles to accessing banking and financial services; limited alliances with the private sector; lack of updated information; and some xenophobic incidents towards refugees and migrants from Venezuela.

Response Strategy

To facilitate the integration of refugees and migrants from Venezuela into their Costa Rican host communities, partners will continue to provide trainings to develop and strengthen business models. This will be complemented by seed capital for entrepreneurs, as well as participation in job fairs. Other employability courses are planned for refugees and migrants from Venezuela to help facilitate socio-economic integration. In parallel, campaigns and other events will be carried out to promote social cohesion and combat discrimination and xenophobia, encouraging a peaceful coexistence.

Very dynamic economies in states in Mexico such as Coahuila, Jalisco, Querétaro, Mexico City and Baja California complement the favorable legal framework in Mexico. Chambers of commerce report thousands of vacancies and are willing to cooperate with partners in order to facilitate job placement.

In 2020, social cohesion activities, including the promotion of spaces for refugees and migrant entrepreneurs, vocational training and support of small business in accessing the labour market will continue and will be expanded in Mexico. Campaigns against xenophobia in the workplace, vocational training and support of small business initiatives will be priorities for 2020. A local integration profiling of the refugee and migrant from Venezuela population in Quintana Roo will be finalized. Based on its outcomes, refugees and migrants from Venezuela will be enrolled in a needs-based case management system, which depending on the specificities of

the case, could include relocation support. For the promotion of social cohesion, partners will focus on extending the coverage of social cohesion initiatives which will aim to support entrepreneurs while also promoting integration among host communities, refugees and migrants from Venezuela in different locations in Mexico.

In the terms of promoting social cohesion in Panama, partners will focus on the expansion of a nationwide awareness campaign (*#SomosLoMismo*); sensitization activities in different provinces and communities; awareness-raising interventions in schools; and the training of social communicators and influencers in implementing sensitization campaigns.

In 2020, refugees and migrants from Venezuela will be supported for local integration in Chiapas, Tabasco, Quintana Roo, Nuevo Leon and Baja California (Mexico). Support of self-reliance and livelihoods will continue, and further upscale of local integration programs in Monterrey, Mexico City and Cancun are planned. Local integration support includes establishing functioning and efficient referral pathways for job placement, with an emphasis on formal employment, access to education (primary, secondary and tertiary), inclusion in the public health system and financial inclusion.

As regards the promotion of livelihoods in Panama, partners will carry out information sessions with institutions and communities; support for the development of training and skills development programmes; promote the inclusion of the situation of refugees and migrants from Venezuela in Corporate Social Responsibility programs; promote job fairs and information meetings with the private sector; provide support to Venezuelan associations and self-support groups; provide accompaniment in the opening of bank accounts and expand credit and seed capital programs for entrepreneurs; promote spaces for financial education; establish workplace harassment prevention measures and promote the inclusion of women in the labour force.

In Panama, documentation needs will be responded to, ensuring access to the formal labor market, and targeted entrepreneurship and labor placement programs, building upon currently initiatives which have had concrete positive outcomes (i.e. *Talento sin Fronteras*). Enhanced information and sensitization campaigns will help in the reduction and prevention of discrimination and xenophobia episodes against refugees and migrants from Venezuela.

171 DTM, IOM 2018

172 CBI Socio-economic Evaluation, UNHCR, 2019

PROTECTION



PEOPLE IN NEED 

126 K

PEOPLE TARGETED 

48 K

FINANCIAL REQUIREMENTS 

\$3.76 M

PARTNERS 

7

Priority Needs

In Mexico, access to documentation, regularization and access to information on asylum procedures, legal representation, and access to the justice system for refugees and migrants from Venezuela continue to be insufficient and inadequate - especially for those in immigration detention. Access to the territory continues to be undermined by border control measures and a systematic detention policy. This has become increasingly complex, further limiting access to a regular status or asylum and creating situations of refoulement. Even though a substantial part of the refugees and migrants from Venezuela have obtained documentation allowing them to stay, many are still in need of regular status. The lack of documentation in Mexico, in particular, create serious risks of sexual exploitation, abuse, violence and discrimination for refugees and migrants from Venezuela.

In Panama, the main identified needs in the area of protection include the lack of documentation that prevents access to basic services and assistance and increases protection risks; the risk of immigration detention, deportation and expulsion of persons without regular status or proper documentation; and the lack of identification of and information about GBV and trafficking cases. In Costa Rica, priority needs in protection include assistance and guidance to promote access to territory, documentation, regularization and legal assistance.

Response Strategy

- In Mexico, migration services at airports continues to be a concern for refugees and migrants from Venezuela in Mexico. Most reported refoulement cases have been Venezuelans rejected at security checkpoints at the airports of Mexico City, Cancún and Monterrey. Efforts will be focused on ensuring access to so-called "sterile zones" as well as to strengthening authorities' technical capacities to provide access to regularization and refer asylum applications to COMAR. Additionally, collaboration with the National Commission on Human Rights (CNDH) will be fundamental to ensure that refugees and migrants from Venezuela have access to legal aid.
- In Costa Rica, assistance is largely focused on the metropolitan area of San Jose where most refugees and migrants from Venezuela reside, with monitoring and capacity building sessions to other parts of the country. In Panama, the majority of the planned protection interventions will focus on Panama City, Chorrera and Arraijan; while other interventions, namely institutional strengthening, will be nationwide.
- Partners in all countries will focus their response on providing assistance for regularization and ensuring access to the asylum system. Refugees and migrants from Venezuela will be provided with information on requirements for entry into Mexico, Costa Rica and Panama.
- In parallel, partners will continue to work with the migration authorities, providing support for infrastructure, capacity building and technical assistance. Producing and disseminating mass information on regularization and asylum procedures will continue in 2020. Furthermore, strengthening the capacities of legal service providers will also be a priority with training and technical guidance. Training and awareness-raising sessions for public officials, security agencies and other bodies will also be organized, with a specific focus on the strengthening of local authorities.
- The expansion of local lawyers' networks providing legal assistance will be pursued, by supporting lawyers and/or paralegal positions within Non-Governmental Organizations (NGOs), shelters and clinics.
- Considering the persistent risks and the gaps identified by LGBTI persons, such as the lack of community networks and limited opportunities for specialized professional development as factors affecting their security; supporting community interventions and networks to respond to these gaps will continue in 2020.
- The response to GBV and exploitation against Venezuelan women and LGBTI persons will be focused on their need to continue developing individual capacities in academic and professional settings, and on recovery processes.
- In 2020, partners in Mexico will continue to sensitize the population in order to ensure access to documentation. A sectorial cash grant, covering transportation costs associated with the application, will serve as incentive for recognized refugees to apply for relevant documentation. This effort will be complemented with advocacy interventions to ensure that the National Migration Institute issues documentation within a reasonable timeframe.

CHILD PROTECTION

Priority Needs

In Costa Rica, in response to identified needs, partners provide technical support to the Government to address the protection needs of separated and unaccompanied children (UASC). In Panama there is a need to strengthen protection mechanisms for refugees and migrant children and adolescents. Available evidence points to the fact that most of refugees and migrants from Venezuela are unfamiliar or do not trust such institutions.

Response Strategy

- Partners will continue to support in the revision of the Tripartite Commission and to update the national 'Protocol for the Comprehensive Care of Minors with International Protection Needs', a process that has facilitated the review of early identification and referral pathways of cases in Costa Rica. Until April 2018, the support in Costa Rica was largely focused on refugee and migrants from Venezuela, but the scope has expanded due to the outflows of Nicaraguans.
- RMRP partners will support the Government of Costa Rica on early identification and reference of UASC cases; specifically, the Migration Authority and the National Board for Minors.
- In Panama, the response will be focused on disseminating information on child protection institutions and services available for refugee and migrant families from Venezuela, both directly and through organizations that provide assistance. The development of a protocol for the protection of refugee and migrant children and enhancing the implementation of the protocol for refugee children and adolescents are key priorities, as well as strengthening technical capacities of national children and adolescent's protection institutions.

GENDER-BASED VIOLENCE

Priority Needs

Planning of activities in Costa Rica and Panama takes into account that GBV is a protection issue that largely affects women and children. In contexts of displacement, this is a heightened concern. To appropriately respond to cases of GBV, there is a need to ensure partners are familiar with identifying cases of GBV and ensuring strong referral pathways and adequate safe spaces. Likewise, prevention activities are needed and planned in collaboration with partner agencies and academia; these promote the rights of refugee and migrant women, children, LGBTI, and elderly. In Panama, some women reported feeling particularly vulnerable to abuse and exploitation when accessing labour markets. Their fear of reporting, compounded with the limited information they possess regarding their rights and available services, contribute in increasing GBV incidents. In this regard,

one of the priorities will be to enhance the capacities of authorities to address GBV. Regarding the LGBTI population, focus group discussions permitted to identify protection concerns regarding their access to regularization and asylum procedures. More specifically, the persons interviewed expressed their concern of the lack of LGBTI-sensitive services provided by local authorities, especially regarding transgender women. In Mexico, focus group discussions showed GBV as a major issue, with women and girls being targeted in schools and workplaces¹⁷³.

Response Strategy

- Partners will continue to provide information on GBV prevention and response, with a focus on sexual and reproductive rights. Each partner in Costa Rica will continue to be trained in GBV prevention and response and has established protocols for handling cases, following the protocol for handling GBV cases, with informational events on GBV prevention and response, along with sexual and reproductive rights.
- In Mexico, the mapping of services and authorities which address specific needs of refugees and migrants from Venezuela in eight cities with highest populations of these groups will be continued and the information will be further disseminated. The focus of these GBV services are raising awareness of critical prevention routes and access to justice for survivors.
- The GBV response actors in Mexico will also conduct research into, and generating material on, the prevention of workplace harassment for women from Venezuela, also directed to refugees, migrants and host community members.
- In the case of Panama, the response will focus on the coordination with local authorities, the development of an identification and referral protocol for GBV survivors, the development of jointly analysed GBV trends and on common initiatives. The GBV sub-sector will ensure that relevant data related to GBV is collected and analysed in an ethical and safe manner, in order to inform programmatic development and advocacy. As main outputs, the working group will develop a referral pathway, a protocol for the identification, referral and response to GBV cases, information materials to raise awareness on contributing factors, prevention, consequences and services, an inter-agency Standard Operating Procedures (SOPs) on PSEA, capacity building interventions to local authorities and raise the general quality of services provided by partners with the adoption of specific tools and guidelines.
- One of the strategic priorities of Protection partners will be to strengthen institutional commitment to a multi sectoral approach to preventing and responding to GBV. Similarly, efforts will be made to promote sensitivity and responses to issues related to GBV, through training activities for stakeholders, sectors and functional areas.

TRAFFICKING & SMUGGLING

Priority needs

To ensure that the risk of human trafficking and smuggling in Costa Rica, Mexico and Panama is mitigated, partners are committed to raising awareness about national guidelines and procedures. In Panama in 2018, of all the victims of human trafficking, 26 per cent were refugees and migrants from Venezuela, mainly women. In Costa Rica, the development of necessary response mechanisms to respond will be prioritized.

Response Strategy

- A coordinated approach is already in place with Government institutions to ensure that victims of trafficking or smuggling receive necessary support. Partners will continue working

with the National Coalition Against Illicit Trafficking of Persons (CONATT) in Costa Rica to ensure communication channels are open to notify counterparts, to respond to accounts of trafficking and smuggling. These mechanisms also provide space for exploring the most adequate solutions to ensure the individual is protected.

- In Panama, it is necessary to continue strengthening the work of the National Commission to implement the national plan against trafficking in persons and strengthen the official entities to identify and prosecute cases of smuggling of refugees and migrants.

SHELTER / NFI



PEOPLE IN NEED

59 K

PEOPLE TARGETED

3 K

FINANCIAL REQUIREMENTS

\$0.3 M

PARTNERS

2

Priority Needs

The high cost of housing in Costa Rica and barriers to the labour market due to lack of documentation or work permits also impede access to housing. Shelters in Mexico are overpopulated and do not have enough resources to properly respond. Shelters mostly offer temporary stay, while insufficient staff, inadequate spaces, poor hygiene conditions and limited food are the main gaps. Most refugees and migrants from Venezuela prefer to stay in the cities where they arrive and do not seek to move within the country.

In Panama, some risks have been identified in terms of GBV and violence against children due to overcrowding. Other risks are linked to irregular lease contracts that leading to possible exploitation and abuse of the refugees and migrants. Additionally, the precarious living conditions of refugees and migrants from Venezuela is a concern. It is important to mention that accommodation is one of the priority needs for humanitarian assistance in Panama.

When refugees and migrants from Venezuela leave their country, they leave behind their livelihoods, their possessions and their sources of income. Therefore, ensuring that the living conditions of the refugee and migrant population are dignified is a priority need.

Response Strategy

- Based on the assessments conducted, one identified priority for RMRP partners will be the provision of safe and decent accommodation spaces. Interventions will be coordinated between the agencies to avoid overlaps and duplications. In emergency cases, such as deportation, partners will offer short-term accommodation in hostels when refugees and migrants from Venezuela do not have a place to stay or the financial means to afford it. In 2020, partners in Panama will also continue providing accommodation for homeless refugees and migrants from Venezuela in shelters.
- Partners will also offer a part of the rent for a determinate period (e.g. maximum of three months) to refugees and migrants from Venezuela with low economic resources.
- In Panama, responding to significant shelter gaps relies largely on measures to enhance protection and integration of refugees and migrants from Venezuela, including documentation and work permits, as well as on strengthening capacities of national and local authorities to enforce legislation on rental agreements and prices, and disseminate information to refugees and migrants.
- Besides providing assistance through multipurpose cash grants, including amounts to cover housing costs (prioritizing female heads of households), partners in Panama will advocate with the Ministry of Housing for the regularization of leases; provide support for improving access to housing through sharing available information on costs, landlord's

rights, among others; and expand the coverage of shelters and secure spaces for specific needs and services.

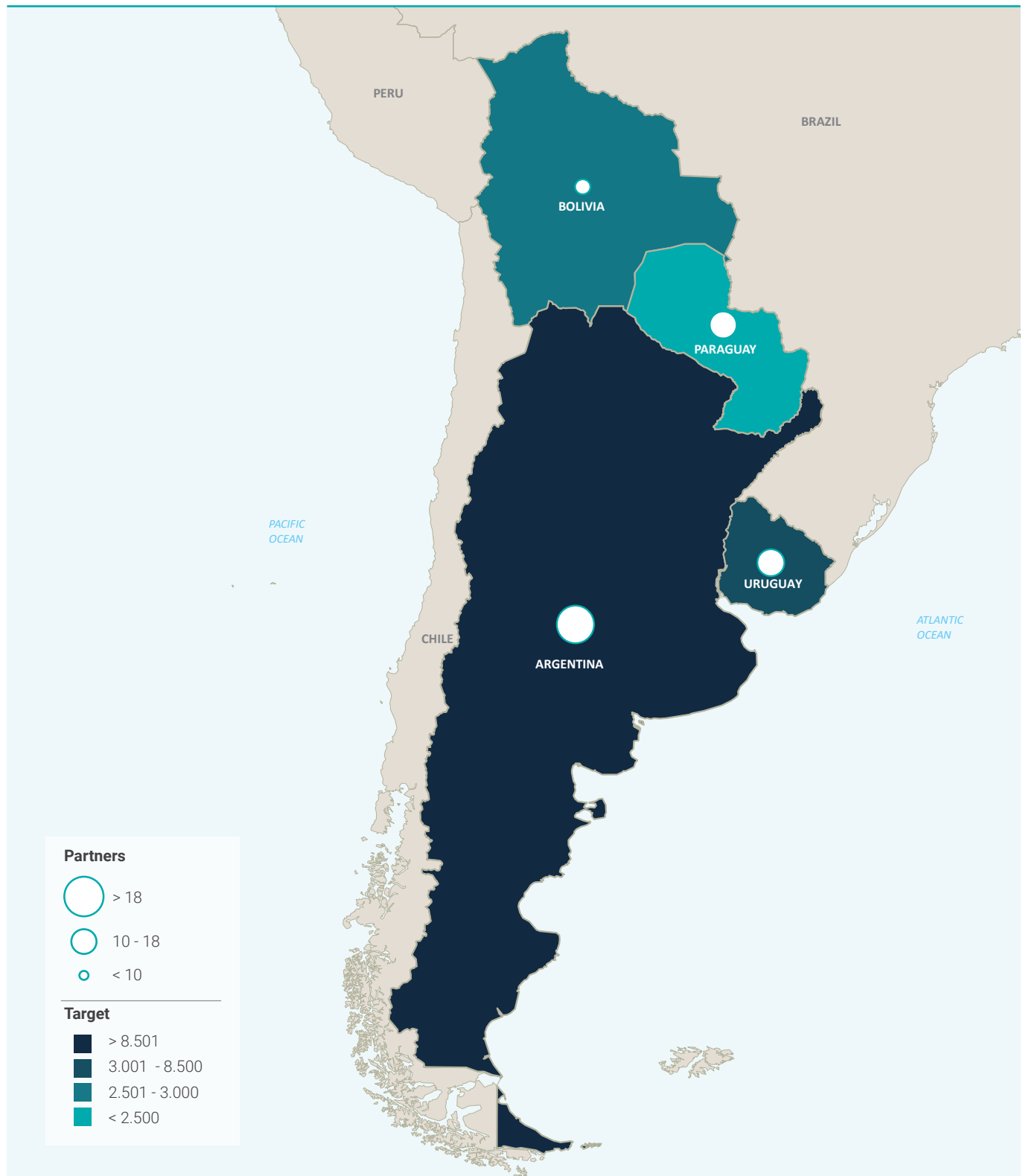
- Regarding NFIs, the response in the sub-region will assist the most vulnerable refugees and migrants from Venezuela with items other than food, such as hygienic kits, clothes, essential household items to cover their basic needs.

SOUTHERN CONE















SOUTHERN CONE

POPULATION PROJECTION 2020	PEOPLE IN NEED*	PEOPLE TARGETED*	FINANCIAL REQUIREMENTS	RMRP PARTNERS
VENEZ. IN DESTINATION 236 K	148 K	114 K	\$31.3 M	34
HOST COMMUNITY --	27 K	25 K		





























NUMBER AND FINANCIAL REQUIREMENTS BY ORGANIZATION TYPE

	Organizations	Financial Requirements
International NGO 	2 	2.2% 
National NGO 	13 	15.0% 
Others* 	8 	8.4% 
UN Agencies 	11 	74.4% 

*Other include Red Cross movement, academia, civil society and faith-based organizations.

The list of organizations and RMRP partners only includes appealing organizations under the RMRP. Many of these organizations collaborate with implementing partners to carry out RMRP activities.

POPULATION IN NEED AND TARGET, FINANCIAL REQUIREMENTS AND NUMBER OF PARTNERS BY SECTOR

	People targeted*	People in need*	Financial Requirements (USD)	Partners
Education 	4 K 	14 K	478 K 	10 
Health 	64 K 	96 K	1.93 M 	13 
Integration 	137 K 	175 K	11.04 M 	22 
Multisector** 	37 K 	83 K	6.09 M 	14 
Protection*** 	65 K 	111 K	6.78 M 	22 
Multipurpose CBI 			2.39 M 	6 
Support services**** 			2.6 M 	12 

*The figure of People in Need and People Targeted does not include host communities | **Shelter/NFI/Humanitarian Transportation/Food Security/Nutrition/WASH | *** Includes GBV, Child Protection, Human Trafficking & Smuggling | **** Communication, Coordination, Information Management and Fundraising

COUNTRY / SUB-REGION OVERVIEW

Since 2017, Argentina, Bolivia, Paraguay and Uruguay experienced a gradual increase in the number of arrivals of refugees and migrants from Venezuela. However, in the first half of 2019, the number of arrivals intensified, increasing by at least 17 per cent, compared to the figure at the end of 2018.

The four countries of the Southern Cone¹⁷⁴ chapter in the Refugee and Migrant Response Plan (RMRP) are characterized by maintaining open-door policies towards the reception and permanence of refugees and migrants from Venezuela in their territories, particularly in Argentina, that concentrates more than 85 per cent of the refugees and migrants from Venezuela in the Southern Cone chapter. According to official Government figures, it is estimated that more than 167,000 refugees and migrants from Venezuela resided in the four countries by September 2019¹⁷⁵. By end-2020, the total population figure is expected to reach more than 236,000, with more than 202,000 people in Argentina, 18,000 in Uruguay, 9,500 in Bolivia and 6,500 in Paraguay. According to various studies, the gender distribution of refugees and migrants from Venezuela in the Southern Cone is approximately 50 per cent women and 50 per cent men. In terms of age, the majority are young or very young (between 20 and 40 years old).

In the Southern Cone, refugees and migrants from Venezuela have benefited from public policies and agreements allowing them to regularize their situation. Until August 2019, more than 188,000 residence permits¹⁷⁶ were granted to refugees and migrants from Venezuela and approximately 2,647 asylum applications¹⁷⁷ were submitted. However, it is observed that the national offices in charge of managing regular access to territory, registration, regularization and asylum are overstretched by the increasing outflows, resulting in delays in the processing of cases and in the delivery of documentation that is indispensable for the access of refugees and migrants to basic services and for their integration into host communities. Governments have repeatedly expressed the need to strengthen their capacities in the face of continuous outflows, requesting the support of the international community. These requests have been made in specialized fora concerning the mobility of Venezuelans, such as the Quito Process, as well as the Specialized Migration Forum, or the National Commissions for Refugees' Meeting (within the MERCOSUR framework).

As for the population profiles, the situation faced by refugees and migrants before leaving Venezuela and throughout their journey across the region has led the Southern Cone countries to face an increase in the number of arrivals by land. Therefore, it has been identified that by 2020, this population will require an increase in the response of emergency assistance, including humanitarian transport, especially from border areas to urban

areas, temporary accommodation for the groups in most vulnerable situations, food assistance, non-food items for new arrivals, basic healthcare, and assistance to ensure access to water and sanitation systems in the peripheral areas.

Similarly, despite the fact that, in general terms, the legislations of the Southern Cone countries provide for universal and free access to public health and education services (with greater scope and coverage in the cases of Argentina and Uruguay), refugees and migrants from Venezuela arriving in the sub-region face barriers to access formal education, vaccinations and specialized services, including sexual and reproductive health. This is compounded by the already strained public service capacities and insufficient infrastructure, especially in certain urban settlements and rural areas.

Policies and/or programs to enhance the integration of refugees and migrants from Venezuela have been developed in the Southern Cone, including for the recognition and revalidation of primary, secondary and tertiary education degrees, training programs for employment, schemes to favour self-employment, among others. However, limited access to formal jobs and other income and livelihoods generation activities as well as financial services, informality in the labour market, non-recognition of qualifications and socio-economic difficulties of the host communities hinder the integration process.

The receiving communities of the four countries have shown a positive attitude towards the arrival and stay of the refugee and migrant population from Venezuela. Xenophobic or discriminatory attitudes have been the exception, both in the concrete interaction of populations in daily life and in the majority public discourse. However, the continuity or even the proportional increase in the numbers of people arriving in these countries, together with national socio-economic difficulties that some countries are experiencing, could lead for 2020 to increased xenophobic attitudes and discrimination towards Venezuelans and a deterioration of the integration capacities and the overall positive narrative.

Despite notable advances in 2019, significant gaps persist in terms of systematically generating strategic information on trends, characteristics and needs of the refugees and migrants in the Southern Cone. This gap is even more noticeable when referring to information that addresses the population from a differential approach, disaggregating the needs according to age, gender and diversity.

174 For the purposes of this document, Argentina, Bolivia, Paraguay and Uruguay have been considered as Southern Cone countries

175 According to information published in the [R4Vinfo](#) webpage and the data on migratory balance provided by the National Directorate of Migration of Bolivia

176 According to national authorities, including the National Directorate of Migration (DNM) of Argentina, the Ministry of Government in Bolivia, the General Directorate of Migration (DGM) of Paraguay and the Ministry of Foreign Affairs (MRREE) and the Ministry of Interior of Uruguay.

177 According to the figures provided by the National Commissions for Refugees of the countries of the chapter

RESPONSE STRATEGY

Planning Scenario

While other countries in the region introduced entry requirements for refugees and migrants from Venezuela, the four countries of the Southern Cone are expected to maintain, as a whole, their current trends of policies towards refugees and migrants from Venezuela throughout 2020.

However, a key element to take into account in the prospective analysis is that three of the four countries of the Chapter (Argentina, Bolivia and Uruguay) face national elections in October 2019, which may lead to continuity, or to changes in the current administrations, and subsequent implications on the respective national public policies. No express restrictive positions have been formulated by the political campaigns, but this continues to be an element of uncertainty when characterizing the context that will exist in the Southern Cone in 2020. Additionally, the particularities of each country that could affect the flows of refugees and migrants from Venezuela will be considered, including the delicate socio-economic situation in Argentina, high living costs in Uruguay, and the public narrative of the situation of Venezuela in Bolivia, which could negatively impact the decision of refugees and migrants to settle in the country and their ability to integrate into the society.

As noted, overstretched capacities to process timely regularizations and asylum claims may both generate difficulties to access basic services, but could also increase the number of persons in irregular situations.

Scope of the response

The partners of the Sub-regional Inter-Agency Coordination Platform for the Southern Cone will work together with governments to respond to the needs of refugees and migrants from Venezuela in terms of humanitarian, protection and short- and medium-term development assistance in the four below sectors identified as priorities in the undertaken needs analysis:

- Education and Integration
- Health: including sexual and reproductive health and mental health
- Humanitarian emergency assistance: Food security / Nutrition / Shelter / Humanitarian transportation / Non-food items (NFI) / Water hygiene and sanitation (WASH)
- Protection: including child protection, gender-based violence (GBV) and human trafficking and smuggling

The response will be focused on advocacy, capacity building and technical support to governments; improvement and/or development of new response infrastructures; and, direct assistance to beneficiaries in each of the sectors described above, taking into account the dimensions of gender, age and interculturality.

The strengthening of networks and mechanisms to provide reliable and up-to-date information and guidance to the refugee

and migrant population from Venezuela continues to be a cross-cutting challenge in the different lines of action, despite the progress that has been achieved in the response in 2019.

The recent changes that have been observed in the trajectories that refugees and migrants from Venezuela transit before arriving at the Southern Cone, resulting from the modifications of the migratory policies and access restrictions imposed by several countries, generate new challenges and test the capacities of the actors involved in the response, who must adapt accordingly. In this context, the strengthening of the articulation and cooperation between the partners of the Sub-regional Platform and the concerned governments will continue to be key in 2020.

Finally, the partners in the Sub-regional Platform will work to increase and/or strengthen systematic data collection on the trends, characteristics and needs of the refugees and migrants from Venezuela across all sectors, based on a differentiated approach.

Prioritization approach

The prioritization of the target population planned to be reached in 2020 was carried out based on the sectoral and intersectoral needs defined by RMRP partners in joint needs analysis workshops.

In the case of the sectors that refer to humanitarian assistance and health, assistance will be prioritized to women, men, girls and boys in the most vulnerable conditions, such as newly arrived refugees and migrants or living on the streets. Special emphasis will be placed on comprehensive assistance to women, Lesbian, Gay, Bisexual, Transgender, Intersex (LGBTI) people, children and adolescents, who represent the population most vulnerable to exploitation and abuse, including human trafficking and smuggling and gender-based violence.

In terms of integration, support to refugees and migrants of working age will be prioritized, with a special emphasis on the socio-economic integration of women. Children and adolescents who are part of refugee and migrant families with a greater degree of vulnerability are also a priority. Elderly population will also be supported to specialized interventions.

Principles of response (AAP, centrality of protection, gender)

In relation to the integration of age and gender considerations in the Southern Cone chapter, a large number of organizations (84 %) of the four countries have planned the direct or indirect objective of promoting gender equality transversally in the response during the implementation and monitoring of their activities. Additionally, 68 per cent of organizations are planning a gender and age sensitive response. This will be achieved through the generation of information disaggregated by sex, gender, age and diversity and the development of gender-specific analyzes that can feed partners' approaches.



The Southern Cone response incorporates a protection-centric approach that was widely adopted from the beginning of the process, from the moment of analysing the needs, to the specific formulation of the activities; going through the definition of objectives, groupings of sectors and the prioritization of actions. However, there are still important tasks to be carried out to strengthen the transversal approach to protection in all sectors and in each activity, especially

taking into consideration the coordination required for the implementation stage.

Regarding the participation of the refugee and migrant population from Venezuela in the Southern Cone, needs assessment contributed a significant amount of quantitative and/or qualitative data that highlighted the visions and needs of the affected population¹⁷⁸.

INTEGRATION / EDUCATION



PEOPLE IN NEED 	PEOPLE TARGETED 	FINANCIAL REQUIREMENTS 	PARTNERS 
 175 K	137 K	\$11.04 M	22
 14 K	4 K	\$0.48 M	10

Priority needs

Refugees and migrants from Venezuela who seek to establish themselves in any of the countries that form the Southern Cone have the right to request different types of migratory regularization solutions as well as asylum, based on regional regulations related to MERCOSUR (Argentina and Uruguay) and national legislations (Bolivia and Paraguay). These residences or statutes, generally enable their holders to work and/or develop other income and livelihood generation activities.

Additionally, the governments of the Southern Cone countries have worked on the development of various initiatives for the integration of refugees and migrants from Venezuela into their countries, including programs to facilitate the recognition and revalidation of primary, secondary and tertiary academic diplomas¹⁷⁹; the creation of the National Financial Inclusion Strategy in Argentina, which, among other things, aims to improve access to savings accounts and credits, with an emphasis on vulnerable populations such as refugees and migrants¹⁸⁰; collaboration programs between agencies with competence in labour, social, educational and sanitary matters, in order to direct the outflows of Venezuelans to cities or regions where their capacities are required. In Uruguay, for instance, since 2008 a rights-based migration policy is in place, promoting the social and labour inclusion of refugees and

migrants on equal terms with the local community¹⁸¹; similar measures have been implemented in Paraguay.

Despite the initiatives that exist for refugees and migrants from Venezuela to integrate within their host communities, access to the financial system, formal employment and entrepreneurship opportunities, remain limited due to the socio-economic and, sometimes, political contexts in many Southern Cone countries. For example, some of the public policies linked to socio-economic inclusion establish a range of access restrictions for refugees and migrants.

In many cases it is observed that refugees and migrants from Venezuela that arrive to the Southern Cone have a high level of qualification, while most of the job opportunities available are in areas or sectors where lower qualifications are required.

Regarding the employment of refugees and migrants from Venezuela, the data extracted by partners in different monitoring exercises carried out throughout 2019 reflect that approximately 44 per cent of Venezuelans employed in the Southern Cone are working in the informal sector, of which 60 per cent are women¹⁸², and that about 28 per cent are unemployed¹⁸³, including 43 per cent of women¹⁸⁴.

178 Including the Protection Monitoring exercises conducted by UNHCR; the various components of mobility monitoring, flow monitoring, records and surveys carried out by IOM through the Displacement Tracking Matrix (DTM); among other studies by public entities or platform partners that addressed specific areas and participatory diagnoses and/or focus groups conducted in the four countries

179 Mercosur Study (Revalidation of diplomas). <https://www.mercosur.int/ciudadanos/estudiar/>

180 Presidency of the Argentine Nation. National Financial Inclusion Strategy. 2019.

181 Ministry of Foreign Affairs of Uruguay. Law No. 18,25. <https://legislativo.parlamento.gub.uy/temporales/leytemp7091191.htm>. (January 17, 2008)

182 Op. cit. 11

183 Data extracted from the UNHCR Protection Monitoring conducted in Córdoba in June 2019 and the IOM DTM carried out in Asunción in July 2019

184 Op. cit. 11

In terms of education, while the Southern Cone states maintain free and universal access to the public primary and secondary education, some challenges are observed, such as the lack of available slots in schools in certain urban locations, or delays in those cases in which there is no documentation to confirm the educational level reached before arriving in these countries.

In this sense, the partners that form the Sub-regional Platform of the Southern Cone project that, approximately 63 per cent of refugees and migrants from Venezuela that will be in the sub-region in 2020 will have needs in terms of integration and education.

Limited access to formal jobs and other livelihood and income generation activities is one of the most pressing needs in the sub-region, due to lack or delays in obtaining required documentation, informality of the labour market, and, in particular in the case of Argentina, the recent economic challenges which impact the labour market as a whole. In several monitoring exercises conducted in the Southern Cone countries, refugees and migrants from Venezuela stated that their most pressing need is for income generation solutions¹⁸⁵. In this regard, it is important to highlight that a greater unemployment is observed among women and that the majority of women employed are in the informal sector¹⁸⁶.

In most of the countries that form the Southern Cone, access to primary and secondary education is free for Venezuelan refugees and migrants having a regular status. However, the delay in the documentation processes and the lack of information, generate difficulties in accessing educational services. Additionally, difficulties in accessing formal education for children and adolescents has been observed among partners in the sub-region. Especially for lack of documentation, misinformation, barriers concerning the accreditation of educational levels, or discrimination. In monitoring exercises carried out in April 2019, it was found that of the total number of refugees and migrants from Venezuela who needed referrals to specialized services, 41 per cent requested assistance in accessing education services¹⁸⁷.

Difficulties in processing recognitions or revalidations of academic degrees and recognition of professional skills have also been found. The majority of refugees and migrants arriving from Venezuela to the Southern Cone have high levels of education, having at least undergraduate and secondary education¹⁸⁸. However, they find obstacles in their integration by not being able to validate their diplomas.

Response Strategy

- Partners in the Southern Cone will coordinate with governments and advocate for the promotion of access to education for children and adolescents regardless of their migratory status.

- Partners will also deliver trainings to teachers; develop awareness campaigns on migration and asylum at the school level; and, provide direct support to Venezuelan families for the inclusion of children in the educational system, including accompaniment in the process and the coverage of expenses (uniforms, school supplies, among others).
- Partners will also support refugees and migrants from Venezuela in the processes of recognition or revalidation of qualifications and recognition of skills, through the establishment of alliances with public institutions for training specific profiles in accordance with the needs of each country and for the recognition of titles obtained abroad; and the coverage of the expenses involved in the validation procedures.
- Regarding access to employment, partners will promote the development of labour inclusion policies and programs together with State counterparts at national and local levels; and, develop and strengthen employment exchanges that benefit migrants, refugees and members of the host community.
- Together with the private sector, partners will work in integration opportunities for refugees and migrants from Venezuela and workshops will be held to sensitize members of this sector in good practices for hiring people in human mobility. Trainings and workshops on labour orientation that allow refugees and migrants, women and men, to prepare adequately for the labour insertion, knowing about their rights and duties as workers, will also be developed. Lastly, partners will also work with local governments in regional strategies such as Solidarity Cities.
- In addition to the insertion of refugees and migrants from Venezuela in the formal labour market, support will be given to refugees and migrants for accessing the financial system and the development of micro enterprises. The assistance will be carried out through coordination and awareness mechanisms of financial institutions and government entities; trainings and workshops on business plan development, including women; provision of seed capital; and, finally, information and technical assistance to refugees and migrants.
- As socio-cultural integration is essential for the integral development of refugees and migrants from Venezuela in their host communities, partners have determined the importance of including actions for this purpose, among which are: cultural shows and fairs, awareness workshops and social events that allow cohesion between migrants, refugees and members of the host community.
- Partners will also develop campaigns against xenophobia and discrimination, mainly through social networks and printed information material, in order to maintain the positive image that Venezuelans have in the host communities in the Southern Cone.

185 Based on IOM's DTM carried out in Asunción (July 2019), Montevideo (December 2018) and Buenos Aires (December 2018); and UNHCR's Protection Monitoring conducted in Córdoba (June 2019) and Buenos Aires (April 2019)

186 IOM. Survey of Monitoring the Venezuelan Population of Argentina. December 2018

187 Op. cit. 4

188 Op. cit. 6

HEALTH

PEOPLE IN NEED 

96 K

PEOPLE TARGETED 

64 K

FINANCIAL REQUIREMENTS 

\$1.93 M

PARTNERS 

12

Priority needs

The countries that are part of the Southern Cone chapter provide for free and universal access to public health, without distinction on status or nationality. Nonetheless, the four countries have very different healthcare systems, as well as different prevention and primary care policies. Likewise, the capacities and available infrastructure differ considerably, not only between the different countries, with Argentina and Uruguay having in place systems with greater coverage and infrastructure, but also within the national territories of each country¹⁸⁹.

The above notwithstanding, there are in some Southern Cone administrative and practical barriers that impede access to health services in certain countries, for example for those who do not meet all the documentation requirements to regularize their stay. Concretely, Argentina has recently implemented laws and practices at sub-national level that, varying in scope, restrict access to health services for refugees and migrants who are in the process of regularizing their stay or who are in an irregular situation.

The needs assessments and analyses have determined that refugees and migrants from Venezuela face difficulties in accessing health services, including sexual and reproductive health, due to strained capacities, insufficient infrastructure and lack of information about the availability of the services available by area and the requirements to access them. This adds to the complications they face in accessing certain health interventions or complex procedures due to administrative barriers and lack of resources and the barriers to access vaccination services.

Additionally, there is a lack of awareness, prevention and attention services related to mental health problems, especially considering the experiences of refugees and migrants from Venezuela and the complex processes of integration into their countries of destination; and of sexual and reproductive health and gender-based violence, particularly for refugee and migrant women, girls, boys, adolescents and the Lesbian, Gay, Transgender, Bisexual, Intersex (LGTBI) population.

The lack of access to prevention, mitigation and responses to HIV/AIDS¹⁹⁰ or other sexually transmitted infections (STIs), including testing and information dissemination is also a key issue to be addressed by partners in 2020.

Finally, as a transversal need in the sector, it has been identified that there is a deficiency in the access to strategic information and epidemiological surveillance.

In accordance with the aforementioned needs and risks, partners in the four countries of the Southern Cone project that in 2020, approximately 35 per cent of refugees and migrants from Venezuela in the sub-region will have health assistance needs.

Response Strategy

- Partners will increase access to health benefits for refugee and migrants by adapting and strengthening health programs and interventions, to provide a comprehensive response. Particularly in matters of integral health; mental health and problematic substance use; and sexual and reproductive health, including prenatal control and prevention of mother-to-child transmission of HIV/AIDS and STIs, considering the dimensions of gender, age and interculturality. Actions to prevent and control tuberculosis and other communicable diseases, including vaccine preventable diseases, will also take place.
- Partners will disseminate information on the legal and administrative regulations concerning the right to access health services and access to health benefits for Venezuelan refugees and migrants, including information differentiated according to gender, age and sexual diversity.
- In terms of supporting the national health systems, partners will develop capacities and competencies among local health personnel for the provision of care services with a focus on rights, gender and cultural relevance to the refugee and migrant population, while also strengthening the generation of strategic information and the epidemiological surveillance systems that allow for the planning and the implementation of policies based on evidence and disaggregation of data according to gender and age.
- RMRP partners will also strengthen the dimensions of intercultural care and sexual diversity of health services of all kinds, in the four countries, with the aim of addressing more adequately the particular needs of the refugees and migrants from Venezuela, according to their care practices and habits.

189 IOM (2019). Study on access to social services of migrants in the Argentine Republic (pp. 18). [http://argentina.iom.int/co/sites/default/files/publicaciones/Acceso per cent20a per cent20servicios per cent20sociales.pdf](http://argentina.iom.int/co/sites/default/files/publicaciones/Acceso%20a%20servicios%20sociales.pdf)

190 Human immunodeficiency virus, acquired immunodeficiency syndrome

FOOD SECURITY / NUTRITION / SHELTER / HUMANITARIAN TRANSPORTATION / NON-FOOD ITEMS / WATER, HYGIENE AND SANITATION



PEOPLE IN NEED 

83 K

PEOPLE TARGETED 

37 K

FINANCIAL REQUIREMENTS 

\$6.09 M

PARTNERS 

14

Priority needs

The Southern Cone countries face an increase in the number of refugees and migrants from Venezuela, including land arrivals, who arrive with high levels of vulnerability and lack resources that would allow them to autonomously respond to their basic needs.

The governments of the Southern Cone have generally been forthcoming in responding to the humanitarian needs of refugees and migrants from Venezuela. However, the lack of data to determine the magnitude of the needs and their differentiation by affected populations; the limited infrastructure in border areas that cannot cope with the growing influx; and, the strained national capacities to respond to short- and long-term needs, especially in terms of food and shelter, require the support of RMRP partners. Similarly, civil society networks and faith-based organizations in the Southern Cone that traditionally respond to humanitarian needs have seen, in many cases, their capacities overwhelmed to respond to the increasing needs of the refugees and migrants from Venezuela.

The work that partners have been doing throughout the Southern Cone during 2019 has confirmed the need to provide food assistance to the most vulnerable refugees and migrants from Venezuela, especially new arrivals; and, nutritional support to women, girls and boys, including pregnant women and infants who arrive in a state of malnutrition, especially in the border areas. Monitoring exercises carried out in April and July 2019 found that the needs for referrals to food assistance services for refugees and migrants were consistently among the top five needs^{191,192}.

The lack of resources with which refugees and migrants from Venezuela reach the Southern Cone hinders their ability to access safe accommodation facilities and 13 per cent of surveyed refugees and migrants who declared having had a problem during the route from Venezuela to the Southern Cone had difficulties finding accommodation¹⁹³. In addition to the needs for temporary accommodation, refugees and migrants from Venezuela have expressed the need for support to access long-term accommodations, especially due to the high rental costs that characterize capital cities, and the documentation required by home-owners.

Additionally, refugees and migrants from Venezuela are exposed to various climatic differences throughout the region. When they reach the Southern Cone, due to the low temperatures to which they are exposed during the winter, they are frequently without adequate protection from the elements.

Also, the increase in land arrivals of refugees and migrants from Venezuela to the Southern Cone, which some monitoring exercises show to exceed air arrivals, with 59 per cent to 41 per cent¹⁹⁴, has required that partners provide assistance with humanitarian transport to Venezuelans in situations of greater vulnerability.

Due to the long journeys, refugees and migrants arrive in the border areas of the different countries that make up the Southern Cone with few to no resources.

Taking into consideration all of the above, partners in the Southern Cone have projected that approximately 34 per cent of the refugees and migrants from Venezuela will require humanitarian assistance through the provision of humanitarian transportation, especially from border areas to urban areas; temporary accommodation for the most vulnerable groups, such as pregnant and lactating women, infants, the disabled, the elderly, women heads of household and families with children; and/or food assistance and non-food items for new arrivals and homeless people. The partners also confirmed the need to support governments with the establishment and/or improvement of water and sewage networks in peripheral neighbourhoods and informal settlements with a high presence of refugees and migrants from Venezuela.

Response Strategy

Food Security and Nutrition

- Partners will provide food assistance to the most vulnerable refugees and migrants from Venezuela, with special attention to new arrivals in the targeted countries. Assistance will be provided through two different modalities: (1) cash, vouchers or other forms of cash-based interventions for beneficiaries to purchase their own food and; (2) provision of in-kind food rations, non-perishable food and hot meals.

191 UNHCR (April 2019), Protection Monitoring in Buenos Aires. Argentina.

192 UNHCR (June 2019), Protection Monitoring in Córdoba, Argentina.

193 IOM (July 2019), Displacement Tracking Matrix in Paraguay.

194 IOM (2019). Study on access to social services of migrants in the Argentine Republic (pp. 18).

<http://argentina.iom.int/co/sites/default/files/publicaciones/Acceso%20a%20servicios%20sociales.pdf>

- Nutrition assistance, will be provided based on nutritional assessments of affected girls, boys, men and women, including pregnant and lactating ones, in order to provide an adequate nutritional supplement. These interventions will be carried out in coordination with the medical authorities of the different countries, who will support the partners in the determination of the best nutritional support to be given to women, men, girls and boys, taking into account the dimensions of gender, age and interculturality.

Shelter

Partners will provide support to refugees and migrants from Venezuela with two types of temporary accommodation: individual short-term accommodation in hostels or hotels and collective housing in strengthened or newly established centres. In the latter, additional services such as food, information and guidance on available services, psychosocial support with a gender and age focus, among others, will be provided. Assistance will be focused in urban areas where there is a greater concentration of Venezuelan population.

Humanitarian Transportation

Partners have identified as a priority for 2020, the provision of transportation assistance from border areas to nearby shelters or urban centres, where they can carry out their regularization procedures and access to other types of services, such as health or education.

Non-food items

Partners will provide refugees and migrants from Venezuela with non-food items, including, clothing and child care kits, among others, to help them adapt to the new conditions. Hygiene kits and sanitary supplies will also be provided with an age and gender specific approach. The partners will take into consideration the specific needs of populations in situations of greater vulnerability, such as girls, boys, women and elderly women and men, when providing non-food items.

Water, sanitation and hygiene

Services will be provided in shelters, orientation spaces and more remote places where refugees and migrants reside through the establishment of laundry and bathing services. This will improve the sanitation conditions of refugees, migrants and members of the host community.

PROTECTION



PEOPLE IN NEED 

111 K

PEOPLE TARGETED 

65 K

FINANCIAL REQUIREMENTS 

\$6.78 M

PARTNERS 

22

Priority needs

The countries of the Southern Cone are characterized by having flexible and continuous regularization and asylum policies in response to the refugee and migrant flows that have reached the sub-region, despite the escalation of the number of arrivals. However, this increase has generated challenges in the response, both in terms of regular access to the territory, as well as in the processing and regularization procedures and asylum applications and the consequent provision of documentation.

Beyond the general orientation of public policy, public capacities to respond to a continuous and, in some cases, incremental number of arrivals of refugees and migrants from Venezuela have demonstrated the need to increase public national capacities to respond comprehensively and timely to asylum applications or regularization, particularly in border areas and based on the differentiated needs of the population.

The increase of arrivals by land to the Southern Cone, in many cases after extensive travel periods in conditions of risk to personal integrity, emphasizes the need to strengthen the mechanisms for providing information and guidance on processes of regularization and documentation, asylum application mechanisms, prevention of

human trafficking, smuggling and GBV, as well as social programs and services available.

The growing vulnerability observed among refugees and migrants from Venezuela who arrived in Southern Cone countries during 2019 is estimated to continue in 2020, leading to greater risks of GBV, sexual and labour exploitation, survival sex and human trafficking. Additionally, there is the risk of refugees and migrants falling into trafficking networks to overcome the growing difficulties and restrictions on the routes to the Southern Cone, and therefore, to strengthen the articulation and cooperation between partners of National Platforms and national authorities, as well as networking at the sub-regional level to efficiently address transnational crimes is needed. In this regard, there is also a need to strengthen and/or establish referral and/or response mechanisms for the protection of girls, boys, adolescents, women and the LGBTI community.

Based in the aforementioned, the partners in the four countries of the Southern Cone project that, for 2020, approximately 41 per cent of refugees and migrants from Venezuela in the sub-region will face protection needs.

Response Strategy

Partners response will be based on strengthening and/or developing coordinated mechanisms for the provision of information, guidance and advice to refugees and migrants from Venezuela, in particular to facilitate access to regularization, asylum, documentation, effective access to basic rights, access to social services, and response and/or protection mechanisms for children, women and LGBTI people.

Partners will also work to strengthen the States' capacities and coordination mechanisms, in particular regarding regularization mechanisms, asylum procedures, provision of documentation, social policies and response and/or protection mechanisms for children, adolescents, women

and LGBTI people. Strengthen existing institutional and community mechanisms to work on the prevention and assistance to victims of trafficking and/or exploitation and on the prosecution of transnational organized crimes.

Campaigns to prevent human trafficking/smuggling and GBV will be developed and direct assistance to victims (or potential victims) of human trafficking/smuggling and survivors of gender-based violence will be provided.

Partners in the four countries will increase their presence and response capacities in border areas to respond to all the needs identified.

ANNEXES

ABBREVIATIONS AND ACRONYMS

AAP	Accountability to Affected Populations	DEMUNA	La Defensoría Municipal del Niño y Adolescente, Spanish acronym for Municipal Offices for the Protection of Children and Adolescents	MERCOSUR	Southern Common Market	SDGs	Sustainable Development Goals
AGD	Age, Gender and Diversity	DRE	Dirección Regional de Educación	MFA	Ministry of Foreign Affairs	SEA	Sexual Exploitation and Abuse
ARV	Antiretroviral	ENPOVE	Encuesta dirigida a la población venezolana que reside en el país, Spanish acronym for Survey directed to the Venezuelan population who reside in the country	MIDIS	Ministry of Development and Social Inclusion	SGSSS	Sistema General de Seguridad Social en Salud, Spanish acronym for General System of Social Security in Health
C4D	Communication for Development	FONASA	Fondo nacional de salud, Spanish acronym for National Health Fund	MIMP	Ministry of Women and Vulnerable Populations	SIS	Sistema Integral de Salud, Spanish acronym for Integral Health Insurance
CAR	Centros de Atención Residencial, Spanish acronym for Residential Care Centres	GAM	Gender and Age Marker	MINSA	Ministry of Health	SISFOH	Sistema de Focalización de Hogares, Spanish acronym for Household Focalization System
CBI	Cash-Based Intervention	GBV	Gender-Based Violence	NGO	Non-Governmental Organization	SOP	Standard Operating Procedure
CCCM	Camp Coordination and Camp Management	GIFMM	Grupo Interagencial para los Flujos Migratorios Mixtos, Spanish acronym for Interagency Mixed Migration Flows Group	NFIs	Non-Food Items	SRH	Sexual and Reproductive Health
CEBAF	Binational Assistance Centre	GTM	Grupo de Trabajo de Monedas, Spanish acronym for Cash Working Group	OCHA	Office for the Coordination of Humanitarian Affairs	STD	Sexually Transmitted Disease
CECC/ SICA	Central American Educational and Cultural Coordination of Central American Integration System	GTRM	Grupo de Trabajo sobre Refugiados y Migrantes, the National Platform in Peru	ONPAR	Oficina Nacional para la Atención de los Refugiados, Spanish acronym for the National Office for the Care of Refugees	STI	Sexually Transmitted Infection
CEM	Centros de Emergencia para Mujeres, Spanish acronym for Emergency Centres for Women	HH	Households	PARD	Administrative Process for the Re-establishment of Rights	SUNAT	La Superintendencia Nacional de Aduanas y de Administración Tributaria, Spanish acronym for Supervisory Agency for Customs
CEPR	Comisión Especial Para Refugiados, Spanish acronym for Special Commission for Refugees	HIV/AIDS	Human Immunodeficiency Virus/Acquired Immune Deficiency Syndrome	PDM	Post-Distribution Monitoring	SUS	Sistema Único de Saúde, Portuguese acronym for the Single Health System
CNDH	Comisión Nacional de Derechos Humanos, Spanish acronym for the National Commission on Human Rights	IASC	Inter-Agency Standing Committee	PEP	Post-Exposure Prophylaxis	SUSALUD	La Superintendencia Nacional de Salud, Spanish acronym for National Health Supervisory Agency
COMAR	Comisión Mexicana de Ayuda a Refugiados, Spanish acronym for Mexican Commission for Support to Refugees	ICBF	Instituto Colombiano de Bienestar Familiar, Spanish acronym for Colombian Institute of Family Welfare	PEPF	Permiso Especial de Permanencia, Spanish acronym for Special Stay Permit	SUTRAN	Superintendencia de Transporte Terrestre de Personas, Carga y Mercancías, Spanish acronym for Supervisory Agency for Persons, Cargo and Goods Road Transport
CONARES	Comisión Nacional de Refugiados, Spanish acronym for National Commission for Refugees	ICT	Information and Communication Technologies	PETT	Permiso Especial Temporal de Trabajo, Spanish acronym for temporary work permit	TB	Tuberculosis
CONATT	Coalición Nacional contra el Tráfico Ilícito de Migrantes y la Trata de Personas, Spanish acronym for National Coalition Against Illicit Trafficking of Persons	INDECI	Instituto Nacional para el Defenso Civil, Spanish acronym for National Institute of Civil Defense	PIN	People in Need	TLS	Temporary Learning Spaces
CoP	Centrality of Protection	IOM	International Organization for Migration	PIP-TT	Permiso de Ingreso y Permanencia de Tránsito Temporal, Spanish acronym for Special Transit Permit	TMF	Tarjeta de Movilidad Fronteriza, Spanish acronym for Border Mobility Card
CS	Counter-Smuggling	IRIS	International Recruitment Integrity System	PSEA	Prevention of Sexual Exploitation and Abuse	ToT	Training of Teachers
CSOs	Civil Society Organizations	ISAPRE	Las Instituciones de Salud Previsional, private health insurance system in Peru	PTP	Permiso Temporal de Permanencia, Spanish acronym for Temporary Residence Permit in Peru	UASC	Unaccompanied and Separated Children
CT	Counter-Trafficking	IYCF	Infant and Young Child Feeding	PTSD	Post-Traumatic Stress Disorder	UGEL	Unidades de Gestión Educativa Locales
CURP	Population registration number	LBGTI	Lesbian, Gay, Bisexual, Transgender and Intersex	PWD	People with Disabilities	UN	United Nations
CwC	Communicating with Communities	MEB	Minimum Expenditure Basket	RMRP	Refugee and Migrant Response Plan	UNHCR	United Nations High Commissioner for Refugees
DANE	Departamento Administrativo Nacional de Estadísticas, Spanish acronym for National Administrative Department of Statistics			RUSF	Ready-to-use Supplementary Foods	VoT	Victims of Trafficking
						WASH	Water, Sanitation and Hygiene

FINANCIAL REQUIREMENTS BY COUNTRY, SECTOR AND ORGANIZATION (USD)

Organization	Education	Food Security	Health	Humanitarian Transportation	Integration	Multipurpose CBI	NFI	Nutrition	Protection	Shelter	Support Services	WASH	Grand Total
Regional	\$1,129,100		\$6,307,438		\$20,356,510	\$498,789		\$505,440	\$9,614,952	\$152,205	\$20,890,288	\$205,200	\$59,659,922
ACAPS											\$750,000		\$750,000
Danish Refugee Council (DRC)											\$600,000		\$600,000
Hebrew Immigrant Aid Society (HIAS)								\$35,000			\$60,000		\$95,000
IMMAP											\$1,070,000		\$1,070,000
International Labour Organization (ILO)					\$3,930,000						\$340,000		\$4,270,000
International Organization for Migration (IOM)			\$2,118,998		\$15,336,010				\$3,221,465	\$135,205	\$7,179,792		\$27,991,470
Latin American Network of Non-Governmental Organizations of Persons with Disabilities and their Families (RIADIS)	\$90,000		\$1,500,000		\$60,000				\$332,000	\$17,000	\$168,000		\$2,167,000
Panamerican Health Organization/World Health Organization (PAHO/WHO)			\$88,600								\$155,000		\$243,600
Plan International	\$60,000								\$30,000		\$50,000		\$140,000
IMPACT Initiatives (REACH)					\$99,500						\$1,000,000		\$1,000,000
RET International	\$69,500								\$216,000				\$385,000
Save the Children International (SCI)	\$165,000										\$82,000		\$247,000
United Nations Children's Fund (UNICEF)	\$291,600		\$591,840		\$351,000	\$162,000		\$505,440	\$1,323,000		\$3,737,880	\$205,200	\$7,167,960
United Nations Development Programme (UNDP)					\$22,000				\$20,000				\$42,000
United Nations Educational, Scientific and Cultural Organization (UNESCO)	\$250,000				\$160,000								\$410,000
United Nations Entity for Gender Equality and the Empowerment of Women (UNWOMEN)	\$3,000				\$28,000				\$34,000		\$24,000		\$89,000
United Nations High Commissioner for Refugees (UNHCR)									\$1,957,764		\$3,795,049		\$6,005,602
United Nations Office of the High Commissioner for Human Rights (OHCHR)									\$1,485,156				\$1,485,156
United Nations Population Fund (UNFPA)			\$323,000						\$640,567		\$424,567		\$1,388,134
Joint United Nations Programme on HIV/AIDS (UNAIDS)			\$1,685,000		\$370,000								\$2,055,000
World Food Programme (WFP)											\$1,174,000		\$1,174,000
World Vision	\$200,000					\$84,000			\$320,000		\$280,000		\$884,000

Organization	Education	Food Security	Health	Humanitarian Transportation	Integration	Multipurpose CBI	NFI	Nutrition	Protection	Shelter	Support Services	WASH	Grand Total
Brazil	\$5,559,791	\$2,026,941	\$5,838,758	\$7,216,526	\$15,284,068	\$2,279,894	\$4,298,364	\$1,215,000	\$20,042,498	\$15,296,311	\$3,836,860	\$5,313,853	\$86,208,864
Adventist Development and Relief Agency (ADRA)			\$120,000		\$3,500,000				\$500,000			\$200,000	\$4,320,000
Vale de Benção Educational and Charitable Association (AEBVB)		\$6,500			\$800		\$2,500		\$7,300	\$7,300		\$1,200	\$25,600
Charitable and Cultural Association Amigos do Noivo	\$750	\$6,300			\$300		\$3,750		\$150	\$6,000			\$17,250
AVSI Foundation	\$1,500,000				\$180,000		\$600,000	\$330,000	\$1,800,553	\$750,000	\$200,000	\$1,373,652	\$6,734,205
Caritas Brazil	\$127,000				\$25,000							\$1,000,001	\$1,152,001
Caritas Rio de Janeiro		\$49,847	\$24,443		\$54,499				\$28,654				\$157,443
Caritas São Paulo		\$30,000	\$6,300		\$10,500		\$36,000		\$12,000				\$94,800
Caritas Switzerland	\$75,759	\$12,490		\$166,166	\$132,242	\$365,517	\$309,714		\$1,195,554	\$188,073			\$2,445,515
Centre for Migration and Human Rights		\$60,500			\$5,500				\$7,700				\$73,700
Center for Migration and Human Rights of the Diocese of Roraima	\$10,000	\$6,600			\$29,421		\$4,400		\$-				\$50,421
Center for Integrated Studies and Programs for Sustainable Development (CIEDS)					\$640,808								\$640,808
Institute for Migration and Human Rights (IMDH)					\$20,000		\$10,000						\$30,000
Nice Institute					\$15,000		\$2,000		\$1,100	\$42,000			\$60,100
International Organization for Migration (IOM)		\$1,850,000	\$1,100,000	\$7,000,000	\$3,727,000		\$700,000		\$2,560,000	\$1,081,000	\$750,000	\$200,000	\$18,968,000
Jesuit Service for Migrants and Refugees (JSMR)				\$49,000	\$124,194	\$31,250			\$87,285	\$87,655			\$379,384
LGBT+ Movement Brazil		\$2,300	\$25,200		\$20,700	\$5,800			\$13,100	\$6,600			\$73,700
Missão Paz										\$82,620			\$82,620
Panamerican Health Organization/World Health Organization (PAHO/WHO)			\$922,000										\$922,000
IMPACT Initiatives (REACH)											\$600,000		\$600,000
SOS Children's Villages									\$881,503				\$881,503
Guarulhos Human Rights Defense Center (GDDH)	\$962	\$2,404	\$820	\$1,360					\$721	\$4,200	\$16,921		\$27,388
United Nations Children's Fund (UNICEF)	\$2,500,000		\$2,480,000		\$1,490,000			\$885,000	\$3,000,000		\$853,000	\$2,539,000	\$13,747,000
United Nations Development Programme (UNDP)					\$130,000								\$130,000
United Nations Educational, Scientific and Cultural Organization (UNESCO)	\$1,230,000		\$220,000		\$800,000								\$2,250,000
United Nations Entity for Gender Equality and the Empowerment of Women (UNWOMEN)					\$774,280	\$164,284			\$232,950				\$1,171,514
United Nations High Commissioner for Refugees (UNHCR)					\$2,000,000	\$1,550,000	\$2,600,000		\$8,014,693	\$10,050,000	\$1,356,039		\$25,570,732
United Nations Office for Project Services (UNOPS)										\$2,150,000			\$2,150,000
United Nations Population Fund (UNFPA)			\$939,995		\$3,000		\$30,000		\$1,590,336		\$60,900		\$2,624,231
World Vision	\$115,320				\$1,600,824	\$163,043			\$108,899	\$840,863			\$2,828,949

Organization	Education	Food Security	Health	Humanitarian Transportation	Integration	Multipurpose CBI	NFI	Nutrition	Protection	Shelter	Support Services	WASH	Grand Total
Chile	\$876,177	\$576,039	\$280,351		\$20,527,051	\$834,923	\$702,468	\$26,000	\$4,688,557	\$2,250,405	\$698,847	\$7,000	\$31,467,818
Adventist Development and Relief Agency (ADRA)	\$101,000	\$20,000						\$26,000	\$298,500	\$87,000		\$7,000	\$539,500
Inmigrante Feliz Association	\$1,000		\$3,800		\$14,400				\$70,000				\$89,200
Caritas Chile					\$276,000								\$276,000
Trabajo para un Hermano Foundation					\$137,700								\$137,700
International Federation of the Red Cross (IFRC)			\$72,200		\$27,000	\$88,300	\$240,000		\$153,414				\$580,914
International Labour Organization (ILO)					\$206,500								\$206,500
International Organization for Migration (IOM)	\$616,625	\$462,468	\$87,780		\$17,119,954		\$462,468		\$850,586	\$277,481	\$325,000		\$20,202,362
Jesuit Migrant Service (JMS)	\$77,552				\$128,642					\$34,352	\$65,262		\$305,808
Panamerican Health Organization/World Health Organization (PAHO/WHO)			\$46,000										\$46,000
Scalabrini International Migration Network					\$335,299				\$94,682		\$101,000		\$550,981
Social Assistance Foundation of the Christian Churches (FASIC)		\$33,571	\$48,571		\$78,569				\$65,714		\$21,428		\$247,853
United Nations Children's Fund (UNICEF)					\$160,000				\$10,000		\$1,000		\$171,000
United Nations Educational, Scientific and Cultural Organization (UNESCO)	\$80,000												\$80,000
United Nations High Commissioner for Refugees (UNHCR)					\$1,677,987	\$659,623			\$2,985,661	\$1,851,572	\$185,157		\$7,360,000
Joint United Nations Programme on HIV/AIDS (UNAIDS)			\$22,000										\$22,000
World Food Programme (WFP)		\$60,000											\$60,000
World Vision					\$365,000	\$87,000			\$160,000				\$612,000

Organization	Education	Food Security	Health	Humanitarian Transportation	Integration	Multipurpose CBI	NFI	Nutrition	Protection	Shelter	Support Services	WASH	Grand Total
Colombia	\$33,436,907	\$163,949,613	\$192,187,765	\$2,783,783	\$116,668,991	\$55,691,151	\$9,978,079	\$3,977,520	\$91,036,065	\$38,162,063	\$12,048,254	\$19,289,803	\$739,209,993
ACTED		\$89,311				\$2,927,800	\$160,000					\$105,700	\$3,282,811
Action against Hunger		\$106,737	\$1,867,353		\$1,369,865	\$8,558,458		\$1,467,574			\$-	\$952,100	\$14,322,087
Adventist Development and Relief Agency (ADRA)			\$3,676,792									\$823,208	\$4,500,000
AID FOR AIDS			\$204,000										\$204,000
AIDS Healthcare Foundation (AHF)			\$14,154,675										\$14,154,675
Americares Foundation			\$6,745,433						\$1,020,000				\$7,765,433
Development Support Association - APOYAR					\$329,000				\$723,000			\$189,000	\$1,241,000
Bethany Christian Services			\$142,875						\$743,525			\$202,400	\$1,088,800
Blumont		\$922,773			\$581,832				\$568,763				\$2,073,368
Caritas Germany		\$119,058							\$70,781	\$81,995		\$16,800	\$288,634
Caritas Switzerland	\$43,350	\$27,069	\$550,000	\$66,200	\$268,700	\$185,300	\$71,400		\$433,780	\$175,400		\$72,140	\$1,343,339
International Committee for the Development of People (CISP)					\$80,000							\$430,000	\$1,060,000
Danish Refugee Council (DRC)					\$2,290,000	\$7,100,000		\$50,000	\$3,750,000	\$2,250,000		\$1,850,000	\$17,240,000
Diakonie Katastrophenhilfe			\$1,700,000			\$340,000			\$1,500,000				\$1,890,000
Doctors of the World									\$340,000		\$30,000		\$2,070,000
Halu Bienestar Humano Foundation (HALU)			\$180,000									\$900,000	\$1,080,000
Jesuit Refugee Service Foundation Colombia	\$60,145	\$303,627	\$186,218	\$85,580	\$261,240		\$78,663		\$116,890	\$177,727	\$55,115		\$1,325,205
Heartland Alliance International (HAI)			\$628,000						\$552,000				\$1,180,000
Hebrew Immigrant Aid Society (HIAS)					\$396,315				\$357,042				\$753,357
Project Hope			\$2,441,000		\$465,000			\$305,000	\$530,000				\$3,741,000
Humanity & Inclusion			\$714,000		\$279,000				\$128,400				\$1,121,400
IMMAP											\$1,850,000		\$1,850,000
International Labour Organization (ILO)	\$869,734				\$487,139				\$314,000				\$6,055,123
International Organization for Migration (IOM)	\$8,325,415	\$3,033,333	\$31,312,296	\$2,137,003	\$39,745,714	\$2,359,033	\$4,057,165	\$487,389	\$23,468,082	\$17,692,745	\$5,267,857		\$137,886,032
International Rescue Committee (IRC)	\$650,000		\$4,570,000		\$1,950,000	\$4,905,390			\$2,714,000				\$14,789,390
INTERSOS			\$336,000						\$929,200				\$1,265,200
"The Israel Forum for International Humanitarian Aid (IsraAID)"									\$310,000				\$310,000
Jesuit Refugee Service (JRS)					\$110,000	\$60,000			\$85,000	\$120,000			\$375,000
Lutheran World Federation		\$118,200			\$119,040		\$30,000		\$104,067			\$58,500	\$429,807
Malteser International			\$1,661,165		\$573,581		\$300,545	\$582,000	\$46,767	\$591,200		\$250,000	\$4,005,258

Organization		Education	Food Security	Health	Humanitarian Transportation	Integration	Multipurpose CBI	NFI	Nutrition	Protection	Shelter	Support Services	WASH	Grand Total
Colombia		\$33,436,907	\$163,949,613	\$192,187,765	\$2,783,783	\$116,668,991	\$55,691,151	\$9,978,079	\$3,977,520	\$91,036,065	\$38,162,063	\$12,048,254	\$19,289,803	\$739,209,993
Mercy Corps				\$		\$3,000,000	\$12,900,000			\$3,000,000				\$18,900,000
Norwegian Refugee Council (NRC)	\$4870,083					\$16,126,000	\$1,446,559	\$624,573		\$1,663,587	\$589,220			\$25,320,022
Organización Fuerza Internacional de Capellanía DDHH y DIH OFICA ICC	\$132,900	\$322,500	\$89,028		\$562,411			\$756,000	\$359,000	\$758,603		\$31,390	\$865,000	\$3,876,832
OXFAM		\$187,200			\$225,000		\$148,200			\$151,200			\$298,000	\$1,009,600
Panamerican Health Organization/World Health Organization (PAHO/WHO)			\$102,540,250											\$102,540,250
Panamerican Development Foundation (FUPAD)		\$1,650,000		\$11,200,000		\$2,444,000				\$1,664,000				\$6,958,000
Plan International	\$1,605,084									\$2,762,000				\$4,367,084
Premiere Urgence International and Solidarites International (PUJ-SI)		\$400,000	\$500,000	\$100,000				\$200,000	\$200,000	\$200,000	\$1,000,000		\$600,000	\$3,000,000
Profamilia Asociation		\$200,000	\$2,386,356							\$320,000		\$145,000		\$3,051,356
IMPACT Initiatives (REACH)												\$1,713,000		\$1,713,000
Red Cross Colombia				\$10,000	\$10,000	\$400,000	\$87,500		\$34,000	\$1,650,000		\$1,200,000	\$2,717,000	\$6,098,500
Samaritan's Purse							\$635,733				\$487,509			\$1,123,242
Save the Children International (SCI)	\$7,673,087		\$3,010,000			\$5,566,000	\$5,469,713			\$1,595,000			\$360,000	\$23,673,800
SOS Children's Villages	\$220,000	\$225,000		\$160,000						\$610,000	\$710,000		\$375,000	\$2,300,000
Tearfund			\$39,600				\$105,000		\$49,000					\$193,600
TECHO											\$1,460,000	\$92,000		\$1,552,000
Terre des Hommes Foundation Lausanne										\$1,737,000				\$1,737,000
Terre des Hommes Italy	\$661,850		\$260,250							\$120,000			\$1,486,358	\$2,528,458
United Nations Children's Fund (UNICEF)	\$4,328,199		\$1,034,967			\$56,800			\$443,557	\$4,111,611			\$4,238,597	\$14,213,731
United Nations Development Programme (UNDP)						\$18,797,000								\$18,797,000
United Nations Entity for Gender Equality and the Empowerment of Women (UNWOMEN)			\$2,100,000			\$1,000,000				\$555,000				\$3,655,000
United Nations Food and Agricultural Organization (FAO)			\$6,000,000											\$6,000,000
United Nations High Commissioner for Refugees (UNHCR)	\$3,897,060			\$3,534,539		\$15,026,104	\$3,500,000	\$3,264,001		\$24,941,999	\$10,662,267	\$1,526,792	\$1,600,000	\$67,952,762
United Nations Office on Drugs and Crime (UNODC)										\$900,000				\$900,000
United Nations Population Fund (UNFPA)				\$4,062,968						\$5,896,767		\$137,100		\$10,096,835
War Child										\$638,000				\$638,000
World Food Programme (WFP)		\$149,584,804					\$72,000							\$149,656,804
World Vision	\$100,000		\$360,000				\$4,026,198			\$620,000				\$5,106,198
Zionist Organization of America (ZOA)		\$660,000					\$1,500,000				\$500,000		\$900,000	\$3,560,000

Organization		Education	Food Security	Health	Humanitarian Transportation	Integration	Multipurpose CBI	NFI	Nutrition	Protection	Shelter	Support Services	WASH	Grand Total
Ecuador		\$11,860,883	\$41,720,551	\$2,965,072	\$638,790	\$62,932,621	\$18,494,475	\$2,059,950	\$382,615	\$42,499,424	\$5,889,179	\$6,380,747	\$3,524,839	\$199,347,146
ActionAid			\$37,868			\$13,577				\$7,700		\$123,338		\$182,482
Adventist Development and Relief Agency (ADRA)		\$143,500		\$72,000		\$327,000	\$100,000			\$1,248,000	\$500,000		\$96,098	\$2,486,598
AVSI Foundation		\$300,000				\$134,000					\$350,000			\$784,000
CARE				\$80,000		\$65,000	\$1,999,999	\$400,000		\$674,002	\$75,000		\$23,000	\$3,317,001
ChildFund International		\$48,800				\$53,700				\$53,700				\$102,500
International Committee for the Development of People (CISP)		\$35,203	\$14,862	\$32,161		\$92,094		\$14,861		\$14,799		\$2,973	\$16,161	\$223,114
ConQuito						\$32,094					\$220,000			\$32,094
COOPI - International Cooperation Foundation						\$790,000	\$275,000						\$30,000	\$1,315,000
Kirimina Corporation				\$173,753										\$173,753
Diálogo Diverso				\$77,998		\$24,999	\$24,999			\$54,950		\$30,000		\$212,946
Alas de Colibrí Foundation				\$36,300		\$2,000				\$223,500	\$14,400			\$276,200
Foundation of the Americas (FUDELA)		\$154,913		\$138,000		\$599,941				\$128,438	\$511,890	\$22,838		\$1,556,020
Hebrew Immigrant Aid Society (HIAS)				\$517,049		\$1,792,609	\$141,446			\$655,824	\$42,500	\$98,761		\$3,248,190
iMMAP												\$1,000,000		\$1,000,000
International Labour Organization (ILO)						\$712,556						\$50,001		\$762,557
International Organization for Migration (IOM)		\$4,710,039		\$373,831	\$638,790	\$38,714,379	\$3,176,563	\$428,000		\$11,377,127	\$1,719,178	\$2,441,489	\$573,080	\$64,152,476
Jesuit Refugee Service (JRS)		\$84,000	\$47,500	\$36,000		\$711,600		\$288,000		\$457,600	\$112,080	\$71,200		\$1,807,980
Latin American Network of Non-Governmental Organizations of Persons with Disabilities and their Families (RIADIS)		\$16,500				\$8,000				\$552,975	\$4,150	\$28,000		\$609,625
Norwegian Refugee Council (NRC)		\$908,800				\$1,090,000	\$323,500	\$300,000		\$7,227,758	\$950,000		\$300,000	\$11,000,058
Organization of Ibero-American States for Education, Science and Culture (OEI)		\$71,597								\$25,000				\$96,597
Panamerican Health Organization/World Health Organization (PAHO/WHO)				\$175,000								\$60,000		\$235,000
Plan International				\$60,000		\$770,000				\$340,000		\$80,000		\$1,250,000
IMPACT Initiatives (REACH)												\$150,000		\$150,000
Red Cross Ecuador		\$60,400	\$165,000	\$234,980		\$90,625	\$8,000	\$111,600		\$155,500		\$70,820		\$896,925
RET International		\$208,000								\$20,000			\$48,500	\$276,500
Scalabrini International Migration Network		\$66,000				\$300,000					\$130,000	\$22,400		\$518,400
SOS Children's Villages						\$200,000				\$531,080				\$731,080
United Nations Children's Fund (UNICEF)		\$4,004,000		\$506,000		\$2,560,000			\$204,000	\$3,952,994		\$425,000	\$2,438,000	\$14,089,994
United Nations Development Programme (UNDP)						\$535,000								\$535,000
United Nations Educational, Scientific and Cultural Organization (UNESCO)		\$197,193				\$960,004				\$300,000				\$197,193
United Nations Entity for Gender Equality and the Empowerment of Women (UNWOMEN)														\$1,260,004
United Nations Food and Agricultural Organization (FAO)			\$30,385			\$384,944			\$178,615					\$593,944
United Nations High Commissioner for Refugees (UNHCR)		\$951,938				\$12,022,198	\$9,623,741	\$517,489		\$14,141,608	\$1,259,982	\$1,673,928		\$40,190,884
United Nations Population Fund (UNFPA)				\$450,000						\$200,750		\$30,000		\$680,750
World Food Programme (WFP)			\$40,969,311				\$2,821,227							\$43,790,538
World Vision			\$455,625							\$156,120				\$611,745

Organization		Education	Food Security	Health	Humanitarian Transportation	Integration	Multipurpose CBI	NFI	Nutrition	Protection	Shelter	Support Services	WASH	Grand Total
Peru		\$1,103,110	\$1,789,504	\$4,451,242	\$1,875,000	\$60,480,959	\$16,329,535	\$2,269,052	\$388,580	\$26,115,200	\$8,280,859	\$9,442,415	\$4,000,005	\$136,525,462
Action against Hunger			\$90,889	\$117,281		\$245,540	\$255,584		\$388,580	\$341,506	\$39,069	\$77,693		\$1,167,562
ActionAid						\$1,950,000	\$46,000			\$22,000				\$68,000
Adventist Development and Relief Agency (ADRA)		\$594,360	\$556,934			\$1,950,000				\$1,291,211				\$4,332,505
CCEFIRO Association		\$50,000		\$100,000		\$30,000				\$110,000		\$210,000		\$500,000
AVSI Foundation						\$167,000				\$35,000		\$57,000		\$259,000
Caritas Peru			\$122,301			\$33,038	\$197,659		\$58,038	\$144,513	\$35,929	\$1,981		\$593,409
Caritas Switzerland					\$25,000			\$30,000		\$82,000	\$280,000			\$417,000
Center for Studies and Solidarity with Latin America (CESAL)		\$55,250	\$-	\$79,844		\$166,803	\$35,294	\$35,294	\$35,010	\$163,480		\$12,000		\$582,975
COOPI - International Cooperation Foundation					\$300,000	\$267,500	\$200,000			\$606,000		\$1,250	\$4,000,005	\$5,374,755
Civil Society Forum on Health (ForoSalud)				\$600,000								\$192,000		\$792,000
Hebrew Immigrant Aid Society (HIAS)						\$634,106	\$232,852			\$449,505				\$1,316,463
iMMAP										\$40,000		\$1,000,000		\$1,000,000
International Labour Organization (ILO)						\$1,387,000								\$1,427,000
International Organization for Migration (IOM)			\$580,000	\$1,200,000	\$1,400,000	\$15,490,000	\$750,000	\$500,000		\$2,390,000	\$6,800,000	\$4,400,000		\$33,510,000
Panamerican Health Organization/World Health Organization (PAHO/WHO)				\$1,165,000								\$110,000		\$1,275,000
Pastoral of Human Mobility - Peruvian Episcopal Conference						\$1,695				\$83,605		\$6,570		\$91,870
Plan International		\$73,500	\$25,500			\$112,800	\$217,500	\$50,000		\$414,350		\$33,000		\$926,650
IMPACT Initiatives (REACH)												\$150,000		\$150,000
RET International		\$60,000	\$64,000		\$150,000	\$530,100	\$448,000			\$248,000	\$200,000			\$1,700,100
Save the Children International (SCI)		\$-					\$6,359,000		\$262,500	\$251,000		\$100,000		\$6,972,500
Scalabrini International Migration Network						\$31,090	\$29,797			\$23,180	\$180,317	\$8,000		\$272,384
TECHO		\$68,000				\$65,000								\$133,000
United Nations Children's Fund (UNICEF)		\$262,000		\$154,000		\$101,748				\$973,000		\$368,500		\$1,859,248
United Nations Development Programme (UNDP)						\$18,100,000								\$18,100,000
United Nations High Commissioner for Refugees (UNHCR)				\$570,000		\$6,168,092	\$7,557,849	\$1,663,758		\$16,567,195	\$745,544	\$2,329,965		\$35,592,403
United Nations Population Fund (UNFPA)				\$418,960		\$12,100				\$1,205,900		\$109,600		\$1,746,560
World Food Programme (WFP)			\$375,380									\$269,751		\$645,131
World Vision				\$20,657		\$14,987,347			\$33,032	\$673,755		\$5,156		\$15,719,947

Organization	Education	Food Security	Health	Humanitarian Transportation	Integration	Multipurpose CBI	NFI	Nutrition	Protection	Shelter	Support Services	WASH	Grand Total
Central America	\$345,374	\$278,862	\$798,794	\$34,250	\$3,889,468	\$4,712,367	\$9,750		\$3,757,932	\$286,450	\$646,900		\$14,760,147
Hebrew Immigrant Aid Society (HIAS)					\$385,000	\$160,000			\$951,200				\$1,496,200
International Organization for Migration (IOM)	\$120,550	\$179,250	\$686,100	\$34,250	\$1,757,950	\$95,900	\$9,750		\$1,395,800	\$273,850	\$544,900		\$5,098,300
Norwegian Refugee Council (NRC)					\$130,000	\$40,000			\$300,000				\$470,000
Panamerican Health Organization/World Health Organization (PAHO/WHO)			\$25,000								\$10,000		\$35,000
Red Cross Panama	\$11,506	\$93,612	\$15,006		\$38,918				\$54,268				\$213,310
RET International	\$8,500	\$6,000	\$11,000		\$34,500	\$174,348			\$4,000	\$12,600			\$250,948
United Nations Children's Fund (UNICEF)	\$50,000				\$180,000				\$110,000		\$60,000		\$400,000
United Nations High Commissioner for Refugees (UNHCR)	\$154,818		\$61,688		\$1,363,100	\$4,242,119			\$942,664		\$32,000		\$6,796,389

Organization	Education	Food Security	Health	Humanitarian Transportation	Integration	Multipurpose CBI	NFI	Nutrition	Protection	Shelter	Support Services	WASH	Grand Total
Southern Cone	\$478,385	\$767,108	\$1,944,557	\$590,753	\$11,041,610	\$2,439,424	\$1,190,622	\$176,200	\$6,780,403	\$3,341,470	\$2,611,556	\$20,934	\$31,383,022
100% Diversidad y Derechos									\$62,400				\$62,400
Adventist Development and Relief Agency (ADRA)			\$8,780	\$19,480	\$170,320		\$49,635					\$12,000	\$260,215
Argentine Catholic Migration Commission Foundation (FCCAM)					\$8,500								\$8,500
Civil Association El Paso									\$22,000				\$22,000
Caritas Bolivia	\$13,000		\$32,000	\$20,000	\$30,000		\$10,000	\$20,000	\$15,000	\$12,000	\$3,000		\$155,000
Caritas Switzerland	\$91,503		\$144,200	\$86,023	\$219,500	\$156,324	\$98,594	\$79,500	\$251,941	\$150,872		\$8,934	\$1,287,391
Catholic University of Uruguay (UCU)	\$5,424				\$5,424				\$24,544		\$2,345		\$37,737
Venezuelan Civil Association in Paraguay	\$120,000			\$1,000	\$66,000				\$69,000	\$40,000			\$296,000
Argentine Commission for Refugees and Migrants (CAREF)									\$42,000		\$40,000		\$82,000
Fundación Húésped			\$45,000										\$45,000
Manos Abiertas Foundation		\$6,130			\$4,950				\$2,500	\$8,210			\$21,790
SES Foundation					\$3,000,000								\$3,000,000
Idas y Vueltas Association			\$5,200		\$38,000				\$18,000	\$24,000	\$3,000		\$88,200
International Labour Organization (ILO)					\$45,000								\$45,000
International Organization for Migration (IOM)	\$120,000	\$485,000	\$801,600	\$329,250	\$4,518,700	\$325,000	\$315,550	\$49,700	\$1,894,932	\$1,102,050	\$1,140,100		\$11,081,882
Jesuit Migrant Service (JMS)	\$6,508	\$146,978			\$428,448								\$581,934
Manos Venegayvas Association	\$6,450	\$54,000			\$70,580	\$24,000	\$175,650		\$4,000	\$280,400	\$21,800		\$636,880
Red con Migrantes y Refugiados	\$6,500	\$10,000			\$43,000		\$10,000		\$46,000	\$10,500	\$4,500		\$130,500
Migrants, Refugees and Argentine Social Entrepreneurs (MIRARES)					\$11,000								\$11,000
Panamerican Health Organization/World Health Organization (PAHO/WHO)			\$266,000										\$266,000
Red Cross Argentina		\$65,000	\$66,000	\$135,000	\$12,000		\$30,000			\$157,000	\$5,000		\$470,000
Red Cross Paraguay			\$15,000			\$50,000			\$5,000		\$8,000		\$78,000
Semillas para la Democracia	\$74,000				\$159,000			\$27,000					\$260,000
United Nations Children's Fund (UNICEF)	\$35,000				\$30,000				\$55,000		\$37,000		\$157,000
United Nations Development Programme (UNDP)									\$65,000		\$215,000		\$280,000
United Nations Educational, Scientific and Cultural Organization (UNESCO)					\$15,000								\$15,000
United Nations Entity for Gender Equality and the Empowerment of Women (UNWOMEN)					\$9,000				\$5,000				\$14,000
United Nations High Commissioner for Refugees (UNHCR)					\$2,139,188	\$1,871,100	\$480,000		\$3,703,371	\$1,481,794	\$1,131,811		\$10,807,264
United Nations Office of the High Commissioner for Human Rights (OHCHR)									\$21,500				\$21,500
United Nations Population Fund (UNFPA)			\$375,500						\$183,000				\$558,500
Joint United Nations Programme on HIV/AIDS (UNAIDS)			\$46,000						\$100,000				\$46,000
University of Buenos Aires (UBA)									\$9,000				\$100,000
UruYene					\$18,000	\$13,000			\$9,000				\$40,000
World Vision			\$139,277				\$21,193		\$181,215	\$74,644			\$416,329



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