



Immigration Officers conducting biometric registration in Imbotero, Region 1, Guyana in November, 2019. UNHCR/ Suenanica de Rozario



REFUGEES AND
MIGRANTS IN THE
SUBREGION*
150,000



PEOPLE REACHED
WITH SOME FORM OF
ASSISTANCE**
14,943



FUNDED: \$17.47 MILLION

REQUIREMENT: \$ 46.36 MILLION



1. Overview

In the fourth year of the Venezuelan crisis, which has affected over 5.1 million refugees and migrants globally, the number of Venezuelans fleeing their country as refugees and migrants continued to grow. As of December 2019, 113,500 Venezuelans had sought protection, basic rights and essential services in the Caribbean. From this rapidly increasing figure, an estimated 17,000 settled in **Aruba**, 17,000 in **Curaçao**, 114,500 in the **Dominican Republic**, 23,300 in **Guyana** and 24,000 in **Trinidad and Tobago**¹. Partners estimate that by the end of 2020 over 194,600 Venezuelans and people from host communities will be in need of assistance in the Caribbean.

In some of these small countries, this situation has further strained already stretched services, raising concerns and integration challenges. In 2019, the island of [Aruba hosted the world's largest number of Venezuelans displaced abroad](#) relative to its population (1 in 6) while **Curaçao** hosted third largest proportion of Venezuelan refugees and migrants, with 1 in 10 persons. As Caribbean R4V countries adopt different approaches to respond to the influx, some have imposed visa requirements², putting

¹ <https://r4v.info/en/situations/platform/location/7493>

² In Curaçao, the reduced the number of flights in 2019, made very difficult to access the territory. In late 2019, Aruba and Curaçao also announced the implementation of a visa requirement. In March 2020, "due to the COVID-19 outbreak, the implementation of the visa requirement for Venezuelans scheduled

additional strains for Venezuelans in need of international protection to access territory.

As a result of these restrictions, many have been forced to resort to dangerous boat travels and are exposed to human trafficking and smuggling risks, as well as risks at sea, which have taken the lives of many people, while others have gone missing. Additionally, many Venezuelans in the sub-region have arrived with tourist visas and were left with few options to obtain a residency or work permit, having no access to basic services or employment, thereby leaving them particularly vulnerable to trafficking, abuse and exploitation³.

With the report of the first cases of Covid-19 in the sub-region in March 2020 and the subsequent closure of borders, lockdown, curfews and restrictions, the situation of Venezuelans has become

to start on 1 April was postponed until further notice. Venezuelans remain visa exempted for all Caribbean islands of the Kingdom of the Netherlands, though they are affected by the border closures". Aruba & Curaçao Situation Report, April 2020.

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increasingly dire, as many have lost their livelihoods, face eviction, food insecurity and exacerbated protection risks that were already present in many sub-regional countries. By June 2020 Aruba, Curaçao, Trinidad and Tobago and Guyana had only 3, 4, 130 and 248 confirmed cases of Covid-19 respectively but the Dominican Republic already noted a spike, reaching a total of 31,816 cases by 30 June. Countries reopened certain business sectors and reduced curfew hours while maintaining physical distancing protocols and movement restrictions were partially lifted in all countries.

Since the start of the crisis, these lockdowns and confinement measures resulted in severe hardship for host populations, refugees and migrants, causing a sudden loss of income and

undermining their capacity to meet basic needs. This situation left refugees and migrants with heightened health and protection risks such as evictions and exposure to exploitation and violence, including gender-based violence (GBV). Mental distress caused by isolation, restrictions of movements and socioeconomic difficulties were also noted to be on the rise. In light of this dramatic change of context, national platforms developed preparedness and response plans to contain the spread of the Covid-19 in the Caribbean. They also adapted the delivery of emergency assistance (food assistance, hygiene kits, non-food items and shelter support) and psychosocial support while minimizing direct contact using remote interviews, cash-based interventions (CBI) and vouchers.

2. Needs analysis

As an increasing number of Venezuelans continue to arrive in the Caribbean with few resources to meet their basic needs, the Covid-19 context poses further challenges to their vulnerabilities. According to the Caribbean Covid-19 Food Security and Livelihoods Impact Survey published by CARICOM in April 2020, the pandemic has had far-reaching impacts on how people earn a living and meet critical needs. Half of the respondents indicated they had faced a change in income, owing mainly to job loss or reduced salary and businesses being affected by curfews and closures. Seventy-three percent of the interviewed business owners, individuals engaged in casual labour or petty trade indicated that their ability to carry out their livelihoods had been affected in the two weeks prior to the interview. Although refugees and migrants were not among respondents, the widespread disruption of livelihoods undoubtedly impacted Venezuelans as most of them are engaged in the informal labor market. They do not benefit from social safety nets and are hence highly exposed to the changes of context.

By the end of 2019, growing needs in the Caribbean sub-region were identified as mainly access to territory, access to asylum and regularization, including alternative legal pathways. While the Government implemented an immigration pathway allowing Venezuelans to legally stay in **Guyana**, permits do not allow for work rights, exposing refugees and migrants to exploitation and abuse. With the objective of obtaining first-hand data on specific thematic areas and guidance for planning, programming and advocacy, partners conducted an Inter-Agency Participatory Assessments across the sub-region. In **Aruba** and **Curaçao**, R4V participatory assessments were conducted during February and March, prior to the implementation of the stay-at-home measures, prompted by the Covid-19 pandemic. Through focus group discussions and semi-structured interviews, the views, feedback and experiences of 42 Venezuelans in **Aruba** and 66 in **Curaçao** were shared directly with R4V partners.

Both exercises in **Aruba** and **Curaçao** underscored that lack of

legal status is the main root cause of protection concerns for Venezuelans; as it causes ripple effects on all aspects of refugee and migrants' daily lives and prevents them from accessing rights such as access to national health systems or justice. Moreover, it is an obstacle towards durable integration. According to the reports,¹ Venezuelans in **Aruba** and **Curaçao** are exposed to risks of exploitation, abuse and rights violations. They are nevertheless reluctant to lodge complaints with the authorities because they fear detention and deportation due to their irregular status. In **Curaçao**, Venezuelans also cited inadequate housing, social isolation and family separation as sources of concern, while in **Aruba**, most Venezuelans work in the informal sector and are concerned about unpredictability of income and the lack of possibilities for family reunification.

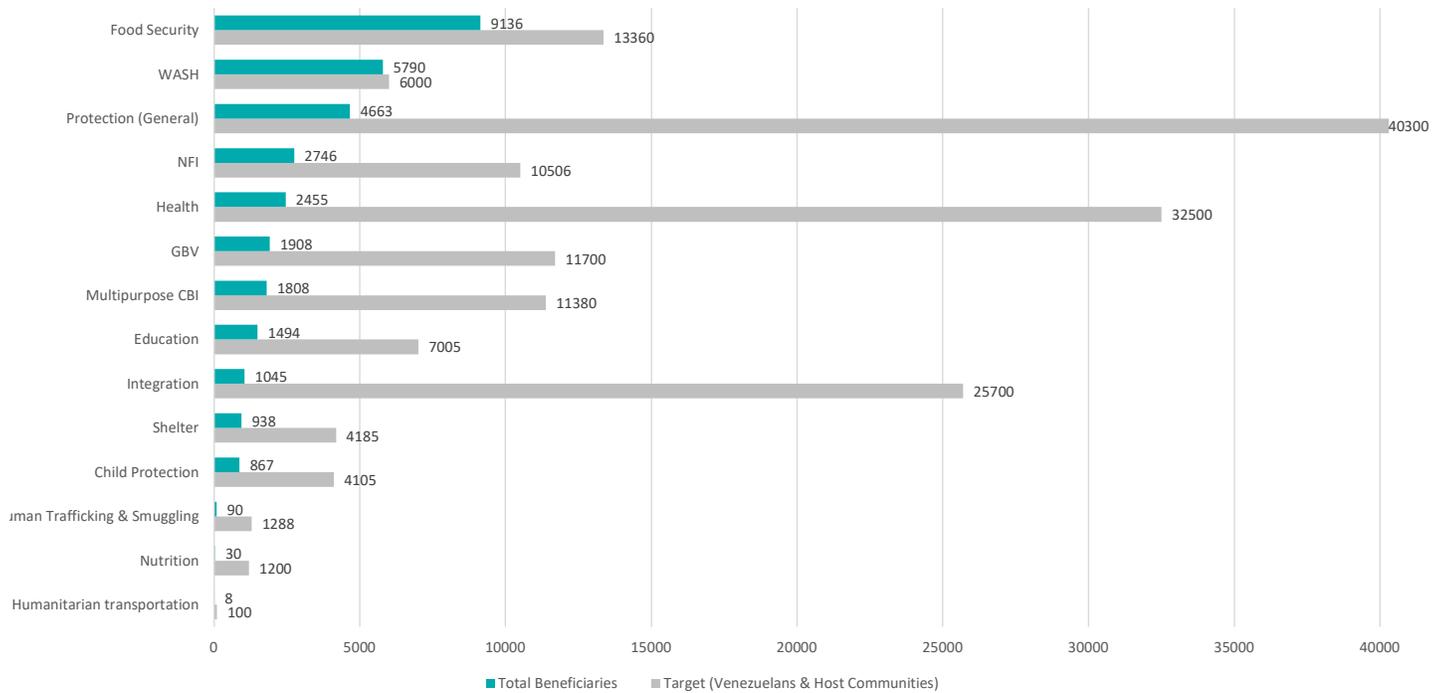
In addition to participatory assessments, the Americas Protection Monitoring Tool² was piloted in the Dominican Republic between August 2019 to March 2020. Main findings indicated that 34% out of the 759 people interviewed had specific needs, 49% had no residence permit or legal status and 46% had a tourist visa. Additionally, 74 refugees and migrants highlighted in 250 interviews, that 60% had suffered incidents such as robbery or theft, intimidation, kidnapping, physical violence or sexual harassment among others. Out of this number, 2.82% reported having experienced sexual harassment. On a positive note, 80% of the 759 respondents had children attending school and 45% of

1 Internal assessments in Aruba and Curaçao

2 UNHCR Protection Monitoring Report

“ **In the Dominican Republic, 80% of the 759 protection survey respondents had children attending school and 45% of the interviewed had tertiary education or had attended university** ”

Beneficiaries vs Targets by Sector



PEOPLE REACHED IN THE CARIBBEAN SUB-REGION THROUGH ACTIVITIES CARRIED OUT BETWEEN JANUARY AND JUNE 2020



Guyana, production of traditional hammocks by Venezuelan indigenous Warao.

3 .Response

a. Education

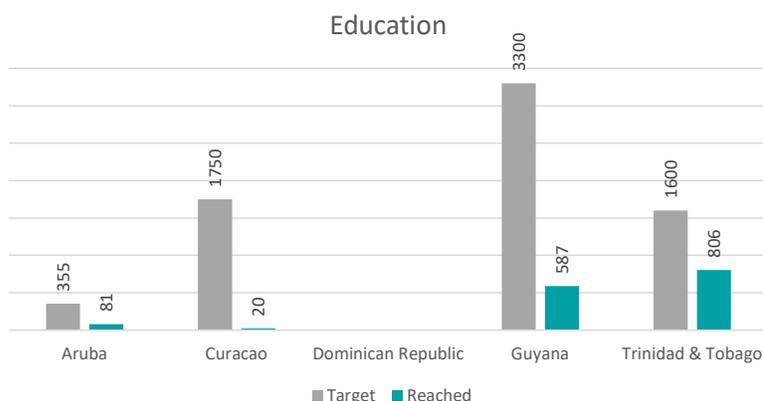
With the exception of the **Dominican Republic**, where refugee and migrant children have the right to access education and speak the local language, education is a key area of intervention in the subregion, particularly in **Trinidad and Tobago**, where Venezuelan children do not have access to the national school system. Most pressing challenges across the sub-region are language and cultural barriers, the high costs of school supplies (stationary, textbooks, uniforms, transportation and meals) or parents’ lack of awareness on available programmes. Additionally, many teachers also face lack of experience and training in working with second language learners, or children suffering from Post-Traumatic Stress Disorder (PTSD), as well as in countering xenophobia, sprouting in the form of bullying. In all five countries there is a lack of recognition of secondary and tertiary education diplomas and thus access to university remains limited. Additionally, in many cases unregistered children do not obtain accredited diplomas.

In **Aruba and Curaçao**, children have access to primary and secondary schools but are required to provide mandatory school insurance, and in the case of **Aruba**, a “local guarantor”. In both islands, classes are conducted in Dutch, Papiamentu and English for **Curaçao**. In **Trinidad and Tobago**, foreigners must provide student permits to attend schools which is not available for many children due to the irregular status of their parent(s). In Guyana, since the influx of Venezuelans started in 2018, the already stretched school system has become saturated, with the added particularity that many Venezuelan refugee and migrant children in **Guyana** are indigenous. Thanks to R4V support, national capacity of public schools is being enhanced by improving existing infrastructure, providing resources, and training of teachers to

work on cultural integration, second language learners techniques and provide assistance to children with Post Traumatic Stress Disorder.

The unanticipated closure of schools during the lockdown caused by the Covid-19 pandemic has further affected access to education for this population that has limited access to online modalities of the programmes due to gaps in technology and unavailability of consistent power supplies, internet connection and devices. In **Trinidad & Tobago**, there has been an increase of 37% in the demand for online education services. Such needs were met for Venezuelan children through an R4V supported educational scheme called Equal Place. Physical learning spaces had to close and Equal Place shifted from a blended format to a fully online scheme. To bridge the digital gap, R4V partners in **Trinidad & Tobago** provided tablets for the “Equal Place” education programme benefiting 848 Venezuelan children in the first semester of 2020. In parallel, the R4V partners continued to advocate for the inclusion of Venezuelan refugee and migrant children into the national school system.

In **Aruba**, following reports of an increase in the number of children awaiting the opening of additional Dutch language support classes (called “Prisma” classes) partners advocated for access to education for refugee and migrant children with the Department of Public Schools and the Director of the Catholic School System (SKOA). In this framework, an Education working group was established under the R4V National Platform to ensure that Venezuelan children and youth have access to education, diploma validation and certification of their studies at the end of their schooling.



EDUCATION BACKGROUND NOTES

Even in countries where official access is granted for public primary and secondary schooling, Venezuelan children and youth face administrative, financial, language and cultural barriers to quality education and limitations on accessing tertiary education not to mention the occasional xenophobia which has translated into cases of bullying at school.

b. Health

As access to medical services constitutes a challenge in their country of origin, there is a high number of Venezuelans in need of health care¹. However, access to national health systems in the Caribbean is challenging. Although refugees and migrants can access primary health care in the **Dominican Republic, Guyana and Trinidad and Tobago**, in practice, Venezuelans face lack of resources, information, language and administrative barriers or, irregular status and consequent fear of detention or deportation. Venezuelans do not have access to the national health systems in **Aruba and Curaçao**. Nevertheless, thanks to R4V advocacy efforts, **Aruba, Dominican Republic, Guyana and Trinidad and Tobago** agreed that all persons, including refugees and migrants without a regular situation would have access to Covid-19 testing and related treatment.

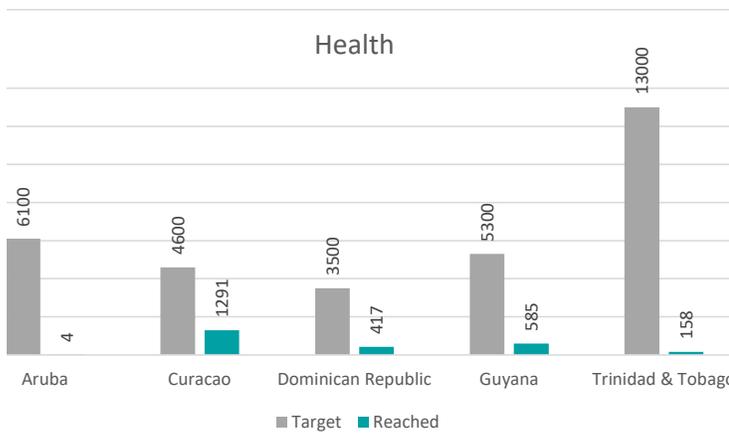
Since health systems in receiving countries are overstretched, subregional R4V partners generally focused on supporting and building stronger health systems, prioritizing specialized care such as sexual and reproductive health services and treatment for chronic conditions. In **Curaçao**, access to health is supported by one local clinic serving the unregistered Venezuelan population opened with the support of one R4V partner. Between January and June 2020, 2669 consultations were conducted for undocumented refugees and migrants, who were unable to access medical provisions through the national health insurance system. The clinic offers primary, reproductive, prenatal and maternity care, as it provides contraceptives and HIV and diabetes care. Additionally, the staff of the clinic was trained to perform Covid-19 testing. In **Trinidad and Tobago**, RMRP partners rolled out a mobile clinic programme providing access to sexual and reproductive health to Venezuelan refugees and migrants, particularly to remote communities. Partners also implemented

virtual mental health support with the introduction of a hotline and telehealth service that was met with a very positive response. In-person clinic services for refugees and migrants resumed in June on an appointment basis, two days per week, as the rest of the week remote modalities are available.

Adding to the challenges that existed prior to the pandemic, lockdown and movement restrictions have aggravated the difficulties in accessing health care and assistance and has contributed to increased needs. Furthermore, given the wide loss of livelihoods caused by the pandemic and the need to share accommodations, refugees and migrants have been unable to self-quarantine and follow physical distancing measures, which resulted in mental distress and increased exposure to infectious diseases (including Covid-19). In parallel to advocacy efforts, partners were forced to adjust their health activities to the new context and scaled up remote psychological support and emergency health interventions. With the objective of enhancing governmental response to the Covid-19, an R4V partner donated 48 Refugee Housing Units (RHU) to the **Guyanese** Ministry of Public Health, 13 RHU to the authorities of **Aruba and Curaçao** and 25 RHU to the authorities of the **Dominican Republic**, who transformed them into medical and quarantine facilities by June. Additionally, partners donated personal protection equipment (PPE) such as masks and gloves to protect against infection and to improve the availability of key supplies.

“*In Curaçao, undocumented refugees and migrants who were unable to access medical provisions through the national health insurance system received 2669 consultations between January and June 2020.*”

¹ A total of 436 calls were received by one partner from January to March and 189 from April to June.



Health journeys in Dominican Republic

c. Protection

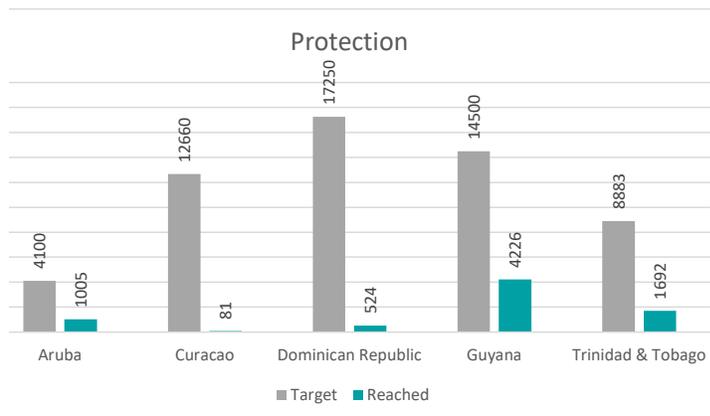
With the irruption of the Covid-19 pandemic, the protection environment in the Caribbean dramatically deteriorated. Prior to the pandemic, refugees and migrants from Venezuela in the sub-region already faced limitations in access to asylum and regularization pathways. Issues of detention and deportation for violating immigration regulations were worrisome. Due to the lack of regular status and documentation, access to essential services and to formal livelihoods was also extremely limited. The risks of trafficking and sexual/labor exploitation ran high, and trafficking networks in the country of origin increased due to limited legal entry pathways. At the start of the pandemic, given the exceptional and unprecedented situation, some positive developments were noted. In **Trinidad and Tobago**, authorities extended work and stay permits until December 2020 for Venezuelans who had registered in July 2019 registration exercise while authorities of the **Dominican Republic**¹, Aruba and Curaçao scaled back on immigration controls and temporarily suspended deportations.

Nevertheless, the Covid-19 pandemic made access to territory more dangerous, and the resulting loss of livelihoods exacerbated protection risks and the vulnerability of Venezuelan refugees and migrants. This increased their dependency on limited humanitarian aid. Many became in urgent need of shelter, food, and basic goods, while some were also confronted with homelessness and forced evictions, or the threat/risk of eviction. The most vulnerable, such as unaccompanied and separated children (UASC) and single mothers became more at risk of exploitation, abuse and more prone to accepting exploitative labour arrangements that put their health and wellbeing at risk.

¹ The government of the Dominican Republic announced a temporary suspension of deportation and immigration detention for the duration of the State of Emergency

Additionally, during the lockdown in **Trinidad and Tobago**, there was a significant increase of the demand for Psychosocial services, which was provided for more than 2,700 refugees and migrants from January to June.

Some refugees and migrants considered the option of returning to Venezuela and only had irregular means available to undertake their travel. R4V partners in **Trinidad & Tobago** reported that movements to and from Venezuela continued to happen after the outbreak of COVID-19 and the closure of borders. On January, 25 Venezuelans were deported from Trinidad and Tobago and the deportations of 32 Venezuelans, rescued from their sinking vessel when attempting to enter the country, were confirmed at a media briefing in May, indicative of the strict stance of the Government vis a vis irregular entry. R4V partners have followed up on the cases with the national government and expressed their concerns regarding deportation of individuals who may have been in need of international protection.



Venezuelan Waroe community receiving their government registration certificates in Yarakita, Region 1, Guyana, December, 2019 © Cecilie Becker-Christensen Saenz Guerrero

In **Aruba**, about 400 Venezuelans registered in April for voluntary return to Venezuela on the Aruban Department of Integration and Management of Foreigners' website (DIMAS), but Venezuelan authorities did not grant permission for two return flights to take off. The Government of Venezuela (GoV) also requested all passengers be tested for COVID-19 before being put on the passenger manifest. The delays were met with protests in front of the Venezuelan consulate in mid-June. Aruban authorities informed that the cost of 300 USD would be borne by passengers and that a re-entry ban with a duration depending on the time spent undocumented would apply. By mid 2020, R4V partners were not been facilitating returns, nor actively assisting with facilitated returns at this stage.

The pandemic represented a setback for some protection activities such as border monitoring and community-based initiatives, which had to be scaled down. Conversely, Communications with Communities was stepped up. It rapidly adjusted to remote modalities and allowed key government communications to reach the general public, after messages were translated into Spanish. This kept the Venezuelan community informed of public advisories related to COVID-19. In **Guyana**, efforts were also made to reach Venezuelan indigenous communities with translations into Warao language.

Other activities such as registration for assistance with partners, the provision of legal advice, case management, advocacy and capacity development continued, often through remote modalities. From January to June 2020, partners across the region delivered protection interventions to almost 5,000 refugees

and migrants and members of the host community. In Trinidad and Tobago, strategic registration activities and Refugee Status Determination continued to be implemented by one partner through in-person and remote modalities. From January to June, the R4V partner pre-registered 11,809 Venezuelan refugees and migrants in Trinidad and Tobago and provided them with relevant information and counselling; 2,000 individuals within this group underwent another in-depth registration interview by an R4V partner. Out of these people, 248 had specific needs, mostly children at risk, serious medical conditions and specific legal situations. In **Guyana**, Government-led registration efforts of Venezuelans were conducted through a partner's innovative tool. The system, set up in February 2020, collects key data including biometric information from refugees and migrants, issuing a renewable entry permit valid for three months¹. Although registration remains on hold since the outbreak of the pandemic, over 2,000 Venezuelan refugees and migrants were registered in 2020.

In **Aruba**, R4V partners assisted with the digitalization of data from asylum applications of over 600 applicants, feeding into a database that will benefit evidence-based planning for Government and partners. As an emergency response to the increasing risks of homelessness for Venezuelans, partners in Aruba provided shelter support for 941 refugees and migrants while in the other Caribbean R4V countries, legal advice was provided to refugees and migrants at risk of eviction.

¹ <https://www.unhcr.org/en-us/news/stories/2020/2/5e4b144e4/guyana-pioneers-use-of-advanced-technology-to-help-venezuelans.html>

VENEZUELANES REGISTERED BY MONTH IN TRINIDAD AND TOBAGO FROM 1 AUGUST 2019 TO 30 JUNE 2020



Additionally, in order to respond to emerging needs caused by the COVID-19-induced disruption of livelihoods, and to mitigate protection risks, R4V partners in the Caribbean sub-region provided food assistance to over 9,100 people, WASH interventions to almost 5,800 people and Non-Food Items (including feminine hygiene and baby kits) to more than 2,700 beneficiaries.

d. GBV sub sector

As evident from related calls to hotlines operated by R4V partners in **Trinidad and Tobago**, the COVID-19 pandemic has led to a presumed rise of intimate partner violence¹. The crumbling of the informal labour market and closing of other businesses, combined with the vast majority of Venezuelans in the Caribbean lacking legal status, has furthermore led to indications that Venezuelan women and girls have increasingly resorted to survival sex/forced sex work, relationships with local men causing financial dependency and/or in the undue expectation to regularize their status etc.). In **Guyana**, sex workers, who were working in different remote mining areas that were affected by lock-down measures, were forced to move to other areas to maintain livelihoods.

As a response, R4V partners provided information, prevention and response services related to GBV to almost 1,900 refugees and migrants and members of the host community during the first semester of 2020, and 54 individuals were trained on GBV prevention and response across the region. Partners in **Trinidad and Tobago** provided counselling services and psychosocial support to 455 survivors of GBV.

In June alone, one partner distributed more than 1,500 condoms to sex workers and provided remote information and sensitization sessions for 190 sex workers in **Guyana**. Moreover, partners in **Trinidad and Tobago** facilitated public outreach and focus group discussions through social media which addressed topics of rape, domestic violence and incest, reaching more than 1,300 people. Health services for survivors and people at risk of GBV were delivered through Telehealth, a partner's static clinic in Port of Spain and a community-based migrant clinic in the remote village of Icaos. In **Aruba**, partners delivered capacity building on Mental Health and Psycho Social Support (MHPSS) and GBV for 16 frontline service providers in March and February, whereas in the Dominican Republic, partners were designing GBV-specific training for humanitarian workers to be held in July. Additionally, 43 R4V partners' staff members in **Aruba and Curaçao** were trained in Protection from Sexual Exploitation and Abuse (PSEA), the code of conduct and its core values.

Furthermore, direct support through multi-purpose cash-based interventions was scaled up across the sub-region, to cover the needs of the most vulnerable refugees and migrants from Venezuela. In total, 1,637 people received CBI from January to June 2020, in the form of credit cards, vouchers, e-vouchers and cash.

“ *In June alone, one partner distributed more than 1,500 condoms to sex workers and provided remote information and sensitization sessions for 190 sex workers in Guyana.* ”



Venezuelan Women producing cloth masks as part of an income generating project between a partner and CDC

¹ http://www.gobierno.aw/actualidad/noticia_47171/item/gobernador-a-bishita-fundacion-pa-hende-muhe-den-dificultad_49627.html

e. Trafficking in Persons sub sector

Human trafficking networks continue to operate in the sub-region, but the context of the pandemic affected the modus operandi of traffickers. This led them to switch locations and to use less conspicuous modalities, thus making the identification of victims more challenging. Additionally, heightened vulnerabilities caused by COVID-19 increased exposure to the risk of trafficking¹.

In parallel, the presence of COVID-19 has prompted humanitarian actors to prioritize emergencies and lifesaving activities. In doing so, reduced resources became available to support the sustainability of counter trafficking mechanisms, at least in the initial phase of the pandemic. Some services were maintained thanks to telemedicine and remote communications, and from January to June, 90 Venezuelan refugees and migrants were reached with information, sensitization and services.

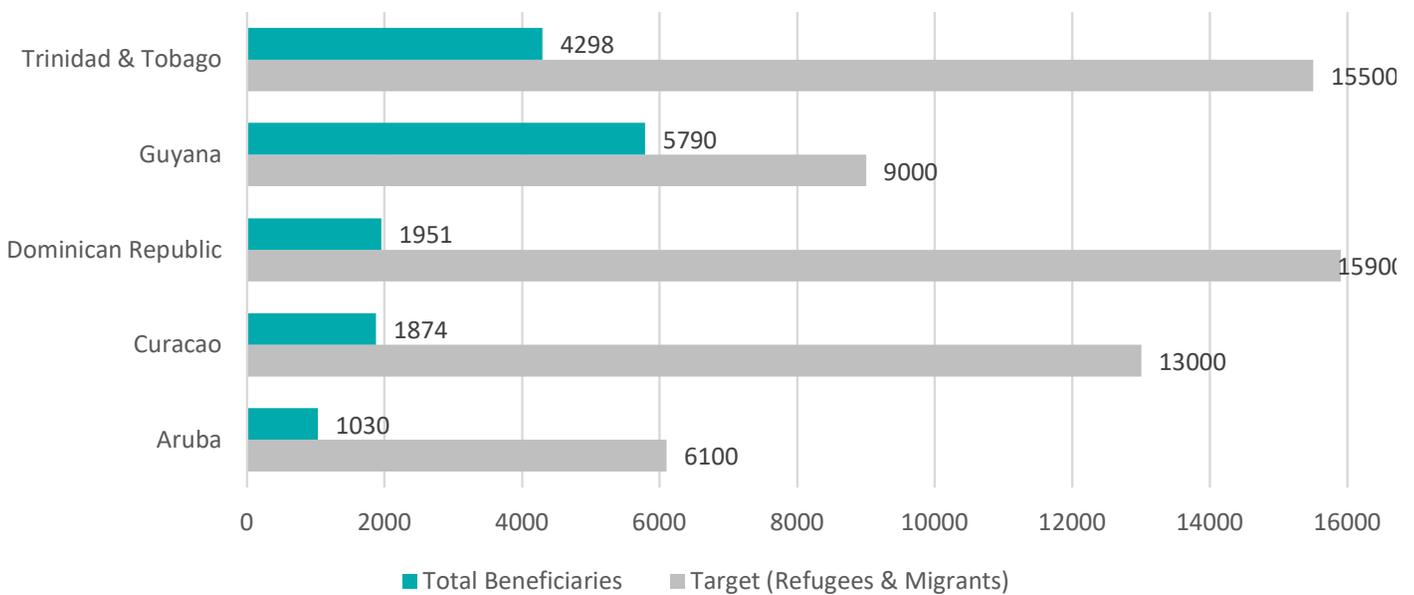
In **Curaçao**, partners provided trainings on TIP and smuggling to the authorities and local NGOs. Additionally, R4V platform partners contributed to the establishment of SOPs, which will be validated and launched during the second semester of 2020.

In **Trinidad and Tobago**, this included the distribution of COVID-19 NFI Packages and Food assistance. In June, given the COVID-19 restrictions, partners provided psychosocial interventions via videocalls or in the event of internet connectivity limitations, via phone calls. This was a success, since affected population feel more secure with remote counselling and need not travel for sessions.

“ Given the COVID-19 restrictions, partners provided psychosocial interventions via videocalls or in the event of internet connectivity limitations, via phone calls. ”

¹ Venezuelans' Vulnerability to Exploitation, Trafficking and Discrimination, Central America and the Caribbean, July 2019, DTM, The UN Migration Agency (IOM).

Beneficiaries vs Targets by Country



e. Integration

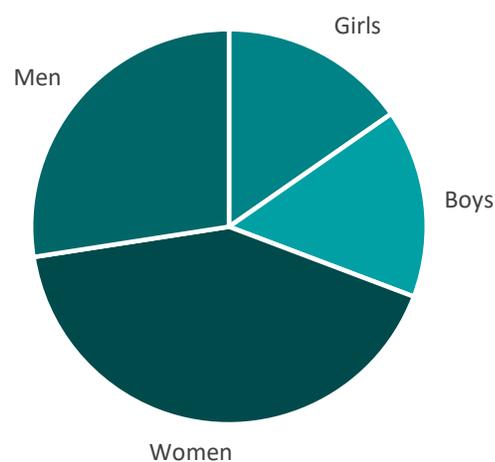
Due to a series of adverse factors including **irregular status, lack of alternative legal pathways to regularization, limited access to essential services and language barriers**, the prospective for integration for Venezuelans in the Caribbean sub-region are very challenging. The perception that Venezuelans represent a high number relative to the host population, puts additional strain on public resources and does not contribute to a smooth integration process. The COVID-19 pandemic has made the context even more unfavourable, increasing socioeconomic precarity for Venezuelan refugees and migrants and undermining social cohesion.

In light of this situation, R4V partners have made efforts to foster integration activities. On the one hand, they have supported socioeconomic integration by **fostering livelihoods and advocating for easier access to work permits and to services, recognition of diplomas and professional skills and inclusion into the local work market**. Capacity strengthening was also supported, in particular through **English as a Second Language courses**. On the other hand, R4V has promoted social cohesion in order to curb xenophobia and discrimination by conducting **sensitization campaigns** that encourage peaceful coexistence, by highlighting the contributions of refugees and migrants and by fighting stereotypes of Venezuelans.

From January to June 2020, more than 1,000 Venezuelan refugees and migrants and members from the host community were reached with activities that support integration in the Caribbean. Examples of integration activities include the provision of classes of English as a Second Language, the support of **hammock weaving** performed by Venezuelan and Guyanese Warao Women and the production of **cloth face masks** by vulnerable individuals (single parents, sex workers, etc.) who had had their regular sources of income disrupted due to the pandemic.

In **Guyana**, the latter is happening in collaboration with the Civil Defense Commission. In the **Dominican Republic**, partners conducted a market assessment that showed the skills and expertise Venezuelans bring to the country, and how this could contribute to national development. In June, a mask business involving Venezuelans and local population started with the support from NGOs and local governments in the **Dominican Republic**. Additionally, thanks to a joint initiative by R4V and the Office of National Immigration, a [video clip featuring Dominican singer Xiomara Fortuna](#), in Spanish was released on social media on May 13. The song Sácale Lo Pie is an Afro Caribbean tune that promotes stay at home measures and solidarity during the pandemic.

Beneficiaries by Age and Gender



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In this adverse context, **World Refugee Day** was celebrated on 20 June throughout the Caribbean to highlight the needs and difficulties faced by this population and showcase how refugees and migrants positively contribute to host countries. R4V Partners hosted events, mainly virtual, throughout the sub-region, aimed at fostering solidarity with refugees and migrants and reducing xenophobia. Some events were shown on the United Nations Information Centre social media platforms and garnered significant positive press coverage.



World Refugee Day 2020, photo © HIAS

4. Coordination

To promote the coordination of RMRP activities, and with the aim of ensuring the recognition and protection of refugees and migrants, and jointly delivering an effective and efficient humanitarian response, the sub-regional interagency coordination platform is composed of 5 national platforms. The platform has a total of **25 appealing partners, 12 in Curaçao, 8 in Dominican Republic, 6 in Guyana, 6 in Aruba and 6 in Trinidad and Tobago.**

The National Coordination Platforms bring together UNCT member organizations and various governmental, non-governmental, and international organizations of the civil society or other international cooperation bodies. The sub-regional platform provides guidance and support to national R4V coordination during the monthly core team and ad-hoc meetings, regular email communications and trainings.

Throughout January to June, the Sub-regional platform continued carrying out **advocacy interventions** with meetings with authorities happening across the Caribbean at different levels. Three meetings were held with Curaçao authorities, 10 with the authorities of Aruba and 10 meetings were carried out with platform members at the subregional level. To that end, and to address the need for greater inclusion in national protection systems during the pandemic, [advocacy messages](#) were updated. To strengthen and facilitate the reporting mechanism, an Activity Info site was launched and implemented, complemented by training sessions for users of the site. Partners can now provide monthly information on the activities carried out in an immediate and centralized way.

Additional coordination was established at the sectorial and sub sectorial levels, with new working groups set up in the national platforms. In **Guyana**, new GBV and TIP working groups were established while in **Aruba** and **Curaçao** new working groups in CWC were created. In **Trinidad and Tobago**, the Terms of Reference (ToRs) for an education working group were created, and the detention subgroup was set up under the protection working group. In **Aruba**, there were further efforts to coordinate work to counter xenophobia and to support education and alternative pathways to legal status.

Additionally, a new GBV sub-regional coordination mechanism for the Caribbean was established and coordination gaps between GBV and TIP sub-sectors were detected. To bridge them, a subregional GBV strategy will be developed based on mapping exercises carried out. A **GBV training** was held in March in Panama for the focal points on coordination mechanisms with 13 participants from partner organizations in the sub-region. Further coordination efforts were carried out with the regional sectors and subsectors of Protection, GBV and TIP, and the sub-regional platform.

As part of these efforts, the **Guyana** national platform was included in discussions about the situation of **indigenous refugees and migrants** at the regional level, along with R4V colleagues of Colombia and Brazil. Two mappings of GBV services started in Guyana, one geographical carried out by UNHCR on immediate assistance to survivors in field locations and another one made by UNFPA in collaboration with the Ministry of Human Services and Social Security. Both will be continuously updated.

New partnerships were also established across the sub-region, with UNODC in a diagnosis phase to implement their trafficking initiative **TRACK4TIP, in four of the five countries**. A round of introductory meetings and needs assessments were carried out so far. Additionally, to complement the **Global Humanitarian Response Plan of Covid 19** and with the objective of maintaining the RMRP's relevance for the needs of refugees and migrants from Venezuela, as well as affected host communities, the Regional Inter-Agency Coordination Platform activated a **critical revision of all operations in the region**.



Guyana - Chinchorros production May 2020.

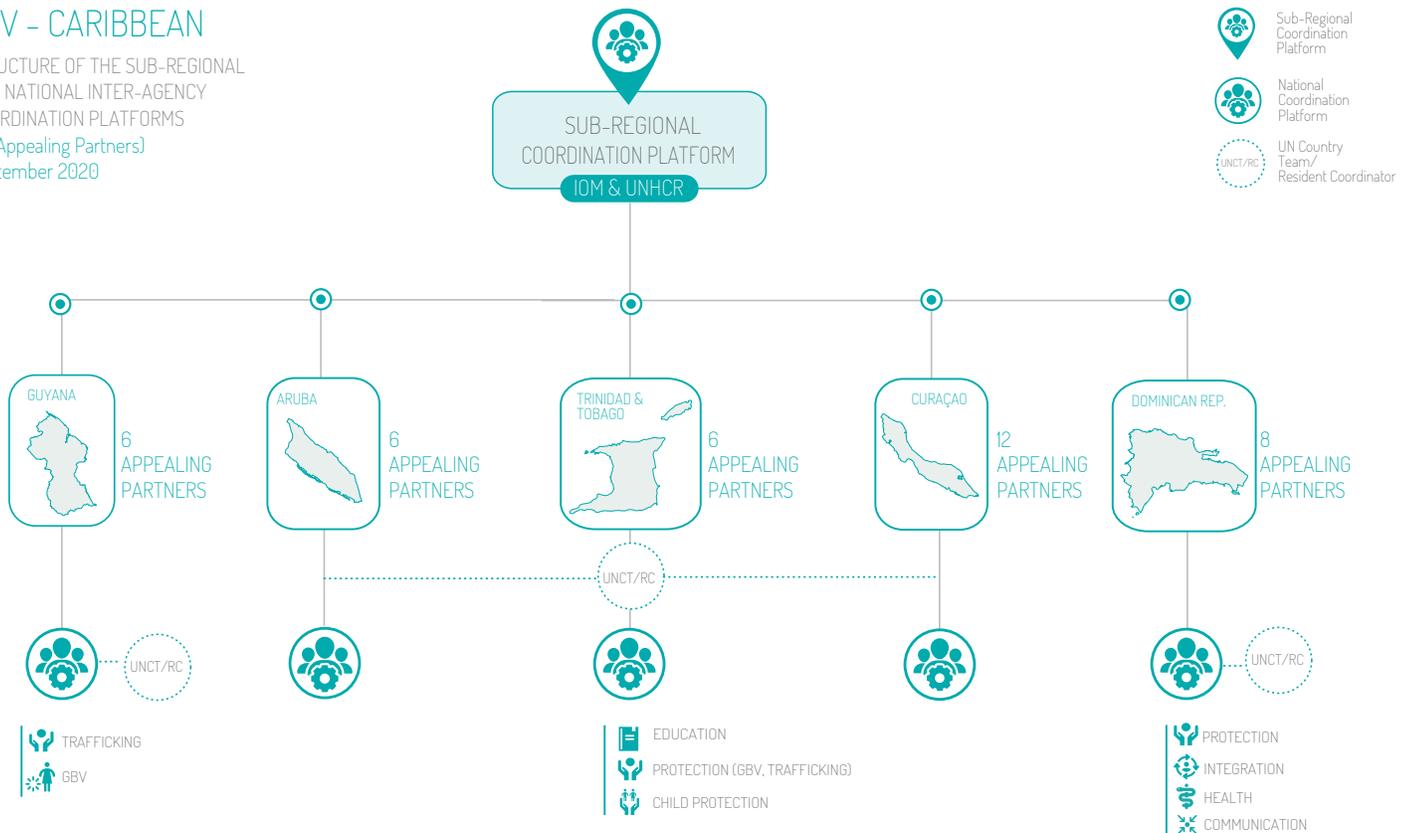
The sub-regional platform engaged in the support process of the **COVID-19 revision process** to prioritize essential protection and life-saving actions in the Caribbean. Following a survey conducted with partners and a compilation of lessons learned, the review process was done in consultation with key R4V partners from the outset and in coordination with the regional and national levels. Thanks to the strong leadership by National/Sub-regional Platforms and Regional Sector Leads, the Revised Plan was finalized prior to the International Donors Conference hosted on 26 May by the Government of Spain and the European Union with

the support of UNHCR and IOM. This online pledging conference addressed the donor community and confirmed their committed support in the search of solutions for refugees and migrants from Venezuela in the region.

Furthermore, to provide a regional perspective of the situation of refugees and migrants in the Caribbean, monthly Situation Reports per country were substituted by one **Caribbean Situation Report and a Monthly Summary of Activities for Guyana**. Weekly COVID-19, Trafficking in Persons and Integration updates were also produced to keep abreast of situational developments.

R4V - CARIBBEAN

STRUCTURE OF THE SUB-REGIONAL AND NATIONAL INTER-AGENCY COORDINATION PLATFORMS
(25 Appealing Partners)
September 2020



Appealing Organizations:

Adventist Development and Relief Agency (ADRA), Bolivarian Society of Curaçao, Caritas Willemstad, Colonia Foundation of Venezuelans in the Dominican Republic, Famia Plana, Fundacion pa Hende Muhe den Dificultad, Globalize Radio, Heartland Alliance International, HIAS, Human Rights Caribbean Foundation, ILO, IOM, Panamerican Health Organization/World Health Organization, Salú pa Tur, Stima Foundation, UNICEF, UNHCR, UNFPA, VenAruba Solidaria, VenEuropa, Venex Curacao Foundation, Stichting Slachtofferhulp Curaçao, Family Planning Association of Trinidad and Tobago

5. Challenges and Unmet Needs

Venezuelan refugees and migrants continue to encounter challenges in the sub-region, such as the **lack of regularization pathways, limited access to asylum and the consequent exposure of undocumented individuals to trafficking, abuse and exploitation.** Many Venezuelans already lived without a regular status before the outbreak of the pandemic which has hindered their ability to access rights, public services and formal livelihoods as well as increase their self-reliance and independence.

To add to this already worrisome situation, during the first quarter of 2020, the COVID-19 pandemic considerably increased the **vulnerability** of Venezuelan refugees and migrants in the five countries of the sub-region, as it impacted the economy and public health of the host countries. The shutdown of the subregional economies caused a brutal impact on the livelihoods of refugees and migrants and of host population, since **movement restrictions** impeded the continuation of informal livelihoods, where most refugees and migrants were employed. As a consequence, there was an increase in the number of people in need of humanitarian assistance, but refugees and migrants with non-residency status were **left out of institutional assistance schemes** and lived in uncertainty during the phases of back and forth between the lockdown and the reopening of economies.

As an example, in **Trinidad and Tobago**, the total number of cash applications in the first half of 2020 (8,450) exceeded the

total number of applications received in 2019 (5,791). A total of 1,199 households received cash grants for humanitarian assistance, taking into consideration both the multipurpose cash and emergency food relief response. Due to **lack of resources and increased needs**, 83% of vulnerable refugees and migrants requesting CBI in Trinidad and Tobago, could not be assisted.

While public health regulations and movement restriction measures continued, partners had to quickly **adjust to implementing remote work modalities** to ensure limited physical interaction with refugees and migrants. Areas such as telemedicine and communications have made giant leaps thanks to technological support. Nevertheless, logistical challenges to provide assistance in remote areas remain, such as in Guyana's mining areas and in border areas where indigenous refugees and migrants live among indigenous communities.

In 2020, only 24% of the budgetary requirements were reached in the Caribbean and there was a **funding gap of 75%**. Limited funding prevents the Sub-regional platform and its partners from responding to immediate humanitarian needs, drastically reducing the number of people to whom partners can provide assistance. Underfunding undermines efforts to foster durable solutions. Partners were therefore obliged to prioritize beneficiaries through a needs-based approach to provide assistance to the most vulnerable, leaving many in need of assistance out.



Distribution of chinchoros to families that arrived by canoe from Venezuela - May 2020

6. The Way Forward

The Sub-regional Platform will continue **advocating for the inclusion** of Venezuelan refugees and migrants in the national response plans, for access to testing and treatment, as well as essential services and assistance, the adoption of **measures to regularize stays and the suspension of evictions**. Moreover, partners will continue to advocate for inclusion of refugees and migrants in national Social Protection mechanisms. To address the effects of the crisis and build on resilience of affected refugees and migrants in the five countries, R4V partners will **prioritize the delivery of life-saving assistance**, such as CBI, food and NFI distribution, medical aid, psycho-social support, shelter emergency assistance and protection interventions. Support for GBV prevention and response, case management and registration in **Guyana and Trinidad and Tobago** will remain a priority.

In **Aruba, the Dominican Republic, Guyana and Trinidad and Tobago**, Multipurpose Cash Grants will be further increased, allowing recipients to meet their most pressing needs. To guarantee food distribution, partners will reach out to local food banks to establish durable cooperation schemes and will ensure

the delivery of standardized food packages. Finally, R4V partners will focus on resuming education activities as soon as COVID-19 social distancing measures are lifted. In **Trinidad and Tobago**, with Child Friendly Spaces temporarily closed, R4V partners will keep ensuring that Venezuelan children continue to have access to education through the [Equal Place](#) Program. In **Guyana**, shelter, livelihoods and food security will be prioritised.

Additionally, **in preparation of the 2021 RMRP planning process** that will be published in December 2020, National Platforms will start discussions of population figures with national governments as early as June and will organize the **RMRP planning workshops** to instruct partners on the RMRP 2021 process and to come up with the PIN, Population Figures, narrative (objectives, context, challenges) as well as priorities for 2021. The sub-regional platform will support this process by providing detailed explanations about the process, producing the templates and liaising among the regional and national platforms. The RMRP online workshops will be conducted in all 5 countries along with supplementary sessions on activity submissions and indicators.

Next steps and priorities will include:

- Improve structure and operationalization of the coordination platforms and sector working groups/ sub-regional protection sector coordination.
- Contingency planning in all five countries including for Covid-19 (done but in need of revision in Aruba, Trinidad and Tobago and Guyana) to ensure readiness of partners and resilience for refugees and migrants, adapting to new normal.
- Guidance to national platforms (i.e. sharing of best practices), increasing regional buy-in for the R4V platform (Regional WGs, platforms etc.).
- Monitor the 2020 RMRP response and develop the 2021 RMRP.
- Develop a protection and GBV Venezuela Situation strategy and strengthen inter-agency responses.
- Increase monitoring and advocacy related to access to territory, asylum and alternative legal pathways for entry and stay, and key protection concerns (i.e. deportations/detentions and access to justice).
- Provide capacity building of appealing and operational partners in protection, reporting, information management, coordination and program.
- Strengthen national institutions and the capacity of public services, advocating for the inclusion of Venezuelan refugees and migrants.

Find out more

www.R4V.info



**PARTNERS IN THE RESPONSE ARE
GRATEFUL FOR THE CONTRIBUTIONS OF:**



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