

May 2020



Delivery of Tents and Educational Posters for the Prevention of COVID-19 in the Public Network MiRed IPS. Barranquilla, Atlántico.

CONTEXT

As of May 1, 2020, the country's epidemiological situation for COVID-19 showed 7,006 cases and 214 deaths in 26 departments, 5 districts and 222 municipalities. By the end of the month, there were 29,383 cases and 939 deaths, representing a significant increase and a geographical distribution that had spread to 31 departments, 5 districts and 399 municipalities.

The increase in cases may be related to the country's diagnostic response capacity, which went from processing 557 samples per day in March of this year to an average of 2,769 samples per day in April and 7,171 samples per day in May. Other aspects that may be relevant to transmission dynamics were the reactivation of various commercial sectors, the disruption of public order, protests and increased recruitment of children and youth by armed groups. The foregoing has led national and local authorities to decree an orange alert and curfews and establish binational agreements with Brazil (supervision of informal steps and exchange of information) and Peru

(recording of the evolution of COVID-19 and establishment of an action plan). On May 28, Decree 749 was issued, by which mandatory preventive isolation was extended until July 1, 2020.

The International Organization for Migration (IOM) established the Global Strategic Plan for Preparedness and Response to COVID-19, aligned with the WHO Response Plan, to support Member States in responding to this emergency. The Migration and Health (M&S) program technically and operationally adapted the actions of four projects, making the intervention lines more flexible to the extent and urgency of needs derived from the COVID-19 emergency. It is an exercise in innovation in the approach to health access in the context of human mobility and peacebuilding:

1. Institutional and community strengthening to support the health response plan for the Venezuelan migrant population and host communities, financed by the Office of U.S. Foreign Disaster Assistance (OFDA) in 13 departments and 24 municipalities.
2. Community Stabilization and Health Care Program, financed by the United States Agency for International Development (USAID) in 13 departments and 24 municipalities.
3. Strengthening Community Health Surveillance and Evaluation of Epidemic Diseases, financed by the Centers for Disease Control and Prevention (CDC) in Soacha, Cundinamarca.
4. Health for Peace - Powering Communities, financed by the United Nations Multi-Donor Fund (MPTF) in 26 municipalities where the Territorial Spaces for Training and Reincorporation (ETCR) are located.

The IOM, through its Migration and Health (M&S) Program, activated a national crisis management team, led by the COVID-19 and 13 interdisciplinary territorial teams, comprising 52 professionals who are experts in public health, epidemiology, nursing, psychology, social work, and information systems, as well as 58 community health workers who provide support to the territorial health authorities and local hospitals for the care of the migrant population and host communities. Additionally, the program activated a team of 26 nursing professionals who support the response in the country's dispersed rural communities, including ETCRs.



Delivery of PPE in ESE Level I. San José del Guaviare, Guaviare.

The following are the seven structuring axes of action, including the activities carried out under each one, which guide IOM's response through the Migration and Health (M&S) Program:



COORDINATION AND ALLIANCES

- Technical support to territorial entities in the **development of actions** in mental health, sexual and reproductive health, health education for the prevention of COVID-19 in pregnant women, and updating of health routes aimed at the migrant population in times of COVID-19.
- Identification of highly vulnerable, migrant families from Venezuela, characterization of their needs, and creation of strategic alliances for the management of humanitarian aid. Support was given for the delivery of medicines and food aid to users with chronic diseases in Bogotá and Soacha, with different organizations such as: the Norwegian Council for Refugees in Bogotá and the Jesuit Refugee Service.
- Coordination with PAHO / WHO to plan activities to promote mental health and care of human resources that serve the migrant population in health posts in Santa Marta and Santander, during the COVID-19 emergency.
- Coordination with local public entities such as the Ombudsman, the Chamber of Commerce, ICBF, Profamilia, and others for the referral and attention of specific cases.
- Participation in inter-institutional coordination spaces, with the premise of adapting the response to the COVID-19 emergency given the specific needs and contexts of each territory.
- Participation of the territorial teams in the Interagency Group on Mixed Migration Flows (GIFMM) at the local level for the coordination and development of the contingency plan by COVID-19, as well as in the health cluster led by MSPS and PAHO / WHO at the national level.
- The M&S Program has coordinated its response with the IOM's Emergency and Stabilization (E&E) program to enhance the impact of the response through the synergy of teams from field programs for care in shelters and humanitarian tents.



Mental Health in the Time of COVID-19. Cartagena, Bolívar.



RISK COMMUNICATION AND COMMUNITY PARTICIPATION

- **Information, Education and Communication (IEC)** activities in COVID-19 preventive measures, management of respiratory symptoms, identification of warning signs, mental health (management of emotions, psychological first aid), violence prevention, sexual and reproductive health care (STI prevention, condom delivery) in communities, shelters, accommodations, and border crossings prioritized by local health secretaries. There were also IEC strategies targeting migrant street vendors and street dwellers. **Posters were delivered** to promote health information for COVID-19 prevention and management.
- **Strengthening community capacities** through the pedagogical capsule Prevention Today, We Take Care of Our Future aimed at young Venezuelan migrants in the Atlantic.
- Enrollment and development of the **Preparation for Maternity and Paternity course during the times of COVID-19** in Barranquilla, Soledad-Atlántico and Cartagena. Additionally, educational activities were carried out with pregnant mothers on the prevention of COVID-19.
- Preparation of a methodological guide on mental health and psychological counseling for long periods of time at home in the COVID-19, including counseling and **psychosocial approaches** through phone calls to people identified by community leaders.
- Holding talks with community leaders and teachers about warning signs to identify cases of gender violence, taking into account the possible increase in cases of violence against women during preventive isolation due to the pandemic.
- Strengthening of the community surveillance network by recharging mobile phones to leaders in the different territories, which facilitate educational processes and IEC activities.



Breastfeeding in Times of COVID-19. Cartagena, Bolívar.

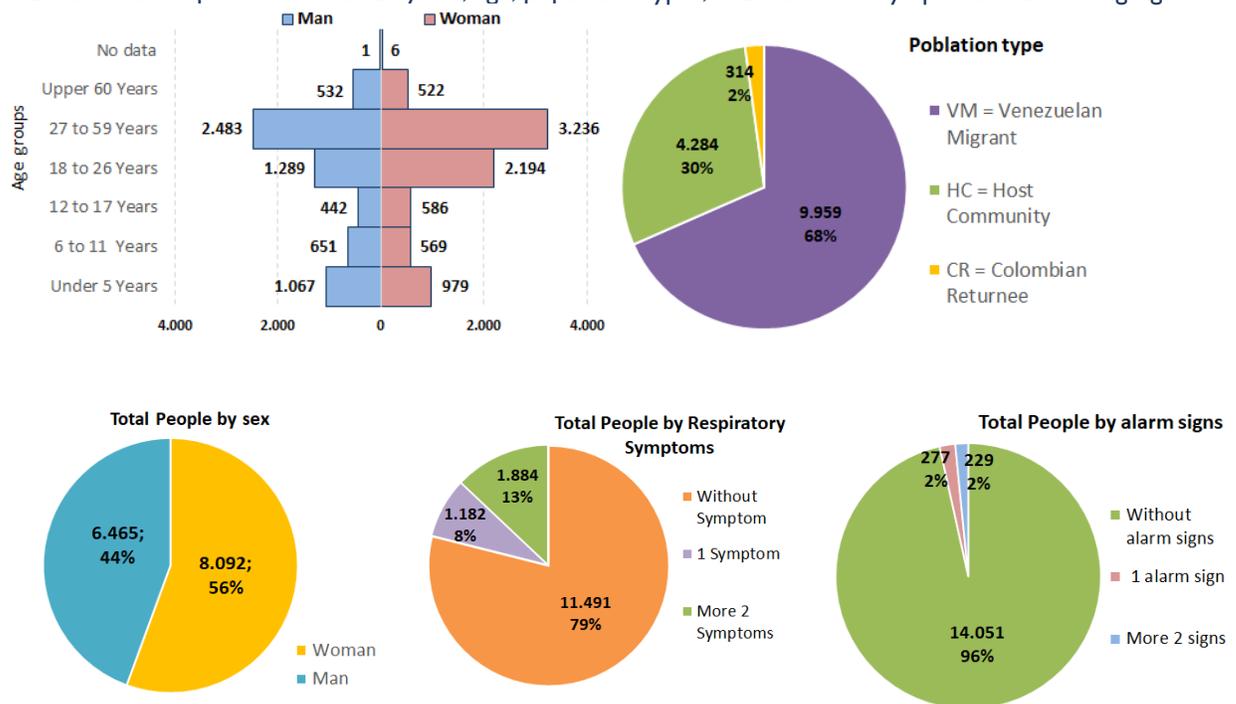
- Difusion of 15-second videos with the strategy “I take care of myself and how do you take care of yourself?” where the same community makes its prevention videos and these are distributed via different social networks in La Guajira.
- Dissemination through social networks of the telephone directories for health and psychosocial care and hotlines for COVID-19 health emergencies.
- In the Health for Peace project, from March to May, 450 activities have been carried out to support the response to the COVID-19 situation in rural areas and in ETCR. Of these, 61% are IEC actions for the prevention of COVID-19 infection such as hand washing workshops, cough hygiene, use of personal protection equipment, and delivery of posters with recommendations.



SURVEILLANCE

In coordination with the health secretaries, the search strategies for respiratory symptoms were defined in order to prioritize and strengthen the mechanisms for promotion and prevention of COVID-19 in the migrant population. Between March 13 and May 31, 2020, **14,557 screenings of respiratory symptoms** were carried out in different areas of the community and through telephone calls to homes. Of the screened people, 348 (2.4%) were referred to medical evaluation and the rest were provided with pedagogical measures of prevention and care at home. The distribution of the total number of people screened is presented in figure 1.

Figure 1. Distribution of persons screened by sex, age, population types, and number of symptoms and warning signs.



- Support of field **epidemiological investigations** and studies of probable or confirmed cases of COVID-19 in the territories and daily follow-up of contacts via telephone.
- Accompaniment and monitoring of the training and / or strengthening of **Community Health Surveillance Networks** to respond to preventive measures by COVID-19, notification of public health events of interest and channeling to health services in their communities through the identification and induction of new leaders,

educational activities via video conferences, one-to-one telephone calls, and sending of a communications by WhatsApp groups in Bello-Antioquia, Barranquilla, Soledad-Atlántico, Cartagena, Maicao-La Guajira, and others.

- Carrying out of a video conference on **community-based public health surveillance** to strengthen leaders with the participation of the Maicao **Without Borders** and the Riohacha **Leaders in Action** community networks.
- **Identification of health care needs, channeling and follow-up** of cases for prenatal control, general medical consultation, vaccination, etc. through telephone calls to the leaders in settlements to **identify people with needs related to basic hygiene and sanitation** and requiring timely care to improve their health and well-being.



Respiratory Symptom Screening, Ipiales, Nariño.

- Support to the departmental, district and / or municipal health secretaries and local public hospitals in the collection and processing of **data** in platforms and information systems, **filtering of information** and preparation of **reports, infographics, and epidemiological bulletins** for the analysis of the health situation in the context of the pandemic.

- Participation in the municipal **COVE** or **risk analysis rooms**, field epidemiological investigations of positive cases of COVID-19 and analysis of the public health events of interest with the highest incidence in the migrant population.

- Starting in June, territorial teams of epidemiologists, nurses and community health workers will be hired in the 26 municipalities where ETCRs are located, which will support epidemiological surveillance activities, IEC strategies, and the formation of community surveillance networks to respond to the situation of COVID-19 in rural and dispersed rural areas.

- Hiring of human resources for response actions in hostels and accommodations; application of the diagnostic and risk identification instrument; elaboration of the institutional response plan in the shelters; support in the implementation of this plan; socialization and monitoring of cough etiquette, cleaning and disinfection, and handwashing protocols; screening and activation of the route to the respiratory symptoms.



POINTS OF ENTRY - POE

Arauca:

- Delivery of personal protection equipment for health institutions (San Lorenzo de Arauca Hospital, San Antonio de Tame Hospital and San Vicente de Arauca Hospital) and the Special Administrative Health Unit of Arauca, as well as the delivery of potable water filters for distribution in the municipality of Arauca.
- Delivery of tents at the San Lorenzo de Arauca Hospital, ESE Jaime Alvarado y Castilla, UAESA and San Vicente de Arauca Hospital.

- Coordination with the Arauca sectional National Police for educational work in Tuberculosis (TB) and prevention measures in COVID - 19 among the private population being released.



Delivery of PPE at the Sanlorenzo Hospital. Arauquita, Arauca.

Norte de Santander:

- Call center support for the Departmental Institute of Health of Norte de Santander, including receiving calls and providing information and education about COVID-19.
- Implementation support for the migrant care contingency plan at ESE Jorge Cristo Sahium and Imsalud. In addition, the migrant care plan was shared with Cúcuta municipality, where leaders had been prioritized in order to confirm the health surveillance network.
- Virtual adaptation of the psychoprophylactic course for Cúcuta, Tibú and Villa del Rosario.
- Support of the delivery of tents to public hospitals, ESE Eduardo Meoz University Hospital (1), ESE Imsalud (3) and ESE Jorge Cristo Sahium Hospital (4), to strengthen contingency measures against the pandemic.
- Technical support of referrals for infections associated with health care at the Departmental Institute of Health and Secretary of Health of Cúcuta for characterization and establishment of transmission chains, development of actions, strengthening of PPE use among health personnel in cases of COVID-19.
- Visit to prioritized IPS to strengthen the infection control component, compliance and contingency plan improvements (Clínica Medical Duarte, Clínica San José, ESE Eduardo Meoz University Hospital).
- Technical support for the prevention of COVID-19 cases in vulnerable populations, including the penitentiary and prison center.

La Guajira:

- Realization of the virtual conference course Prevention of Gender Violence in Emergencies, developed by the IOM and GENFAMI to address the challenges of GBV prevention due to mixed migration flows and confinement situations in Colombia, as well such as comprehensive health care for victims of sexual violence within the framework of COVID-19 in Riohacha and Maicao.
- Design of a methodological guide on the prevention of domestic violence during the health emergency by COVID-19, aimed at leaders, given their increase in violence against women.
- Production of a promotional video How to make a face mask at home aimed at the leaders of the community health networks Without Borders of Riohacha, and Leaders in action of Maicao, for its implementation and reproduction on social networks such as Whatsapp, Instagram and Facebook.
- Redesign of a recreational informational strategy through video with community leaders in order to strengthen isolation, at-home care, handmade mask making, and hand washing in the covid-19 era for Wayuu communities and disclosure by the leaders in Riohacha.
- Coordination with the vaccination program of the Nuestra Señora de los Remedios Hospital in Riohacha to carry out the vaccination day and manage completion of vaccination schedules for 28 children and 7 adults.
- Contracting of hospital services in prioritized municipalities: Hospital San José de Maicao, Hospital Nuestra Señora del perpetuo Socorro, Hospital San Rafael de San Juan del Cesar and Hospital Nuestra Señora de los Remedios de Riohacha.
- Strengthening of triage: delivery of 11 tents of 6 x 3 meters to the hospitals of Maicao, Riohacha, Uribia and San Juan del Cesar, delivery of 1,000 surgical gowns and 1,000 monogoggles to the Hospitals and Secretaries of Health of the prioritized municipalities, and delivery of 5 infrared thermometers to the Departmental Health Secretary, to the Municipal Health Secretaries of Riohacha and Maicao, for use at entry points (i.e. terminals, ports, and airports).



NATIONAL LABORATORY SYSTEM

- Accompaniment of the territorial health secretariats in the follow-up of taking samples, sending them to the laboratory and receiving the results.
- Management of transfer and sampling for COVID-19 among people living on the street in Barranquilla.
- Equipment for laboratories and hospitals with personal protection equipment such as masks, Tyvek suits and thermometers.



PREVENTION AND CONTROL OF INFECTIONS

- Coordination with local authorities to carry out actions in response to the emergency at the community, institutional and ETCR levels, both in person and virtually, in order to prevent COVID-19 infection and also correct the use of Sawyer water filters.
- Institutional support for tents and temporary shelters to facilitate screening of COVID-19 symptoms in these spaces, pedagogy and risk communication in support of response plan implementation.
- Coordination with the TECHO strategy in Antioquia, in charge of temporary shelters for the street population in response to the COVID-19 contingency plan (education, health care, technical support, delivery of PPE, among others).
- Visits to Aspencipo shelters in Bogotá where sensitization was carried out to the families of the Emberá indigenous community about hand washing, periodic sanitation, vaccination and cough etiquette.



LOGISTICS, PURCHASING AND SUPPLY MANAGEMENT



Delivery of PPE, tents and educational posters to the Secretariat of Health. Soledad, Atlántico.

- Purchase and distribution of critical supplies for the protection of human resources in health, described in Table I.
- Logistics support for the delivery of 1,400 water filters in the 23 municipalities of the OFDA project and the 26 municipalities of the MPTF project.
- Delivery of 1,100 hygiene and hygiene kits for the care of newborns and pregnant women, as well as personal protection items and food aid to vulnerable families, street vendors and Venezuelan migrants.
- Support with transportation to the teams on the ground in the departments of Antioquia, Valle del Cauca, Nariño, Norte de Santander, La Guajira, Magdalena, Bolívar, Cauca, Putumayo, Arauca, Atlántico and Cundinamarca that carry out screening actions in accommodations and that support the implementation of handwashing, respiratory hygiene, cough management, and surface disinfection protocols.
- Delivery of insulin to patients identified in Bogotá under an education, information, and verification exercise for the proper use of the medication.

Table I. Supplies for the COVID-19 response

Supply	Number of units	Number of municipalities	Status
Surgical Masks (units)	197.000	57	Delivered
Laser Thermometers (units)	130	57	Delivered
Monogoggles (units)	6.250	57	Delivered
Glycerinated alcohol (liters)	1.164	53	Delivered
Batas antifluidos desechables (units)	17.000	57	Delivered
Tents 4x4 (units)	30	8	Delivered
Tents 6x3 (units)	29	6	Delivered
Tents 6x6 (units)	7	4	Delivered
Tents 9x3 (units)	2	2	Delivered
Informational posters (On cough management, coronavirus and hand washing) (units)	36.000	43	Delivered
Tyvek suits (units)	5.500	13	Delivered
Caps	25.000	1	Delivered
Leggings	21.800	1	Delivered
Masks	600	1	Delivered
INS: Sample shipping costs	500	8	Requested



Workshop learning to live together. Ipiales, Nariño.



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