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2022 TRINIDAD AND TOBAGO

INTERAGENCY PARTICIPATORY ASSESSMENT



Inter-Agency Coordination
Platform for Refugees and
Migrants from Venezuela

With gratitude to the partners contributing to this report: Archdiocesan Ministry for Migrants and Refugees (AMMR), Danish Refugee Council (DRC), Family Planning Association Trinidad and Tobago (FPATT), International Organization for Migration (IOM), La Casita Hispanic Cultural Centre, Living Water Community (LWC), Moruga Poverty Reduction Center (MPRC), Pan American Development Foundation (PADF), United Nations High Commissioner for Refugees (UNHCR), United Nations Human Settlements Program (UN-Habitat), United Nations Population Fund (UNFPA), United Nations Population Funds (UNFPA), United Nations World Food Program (WFP)

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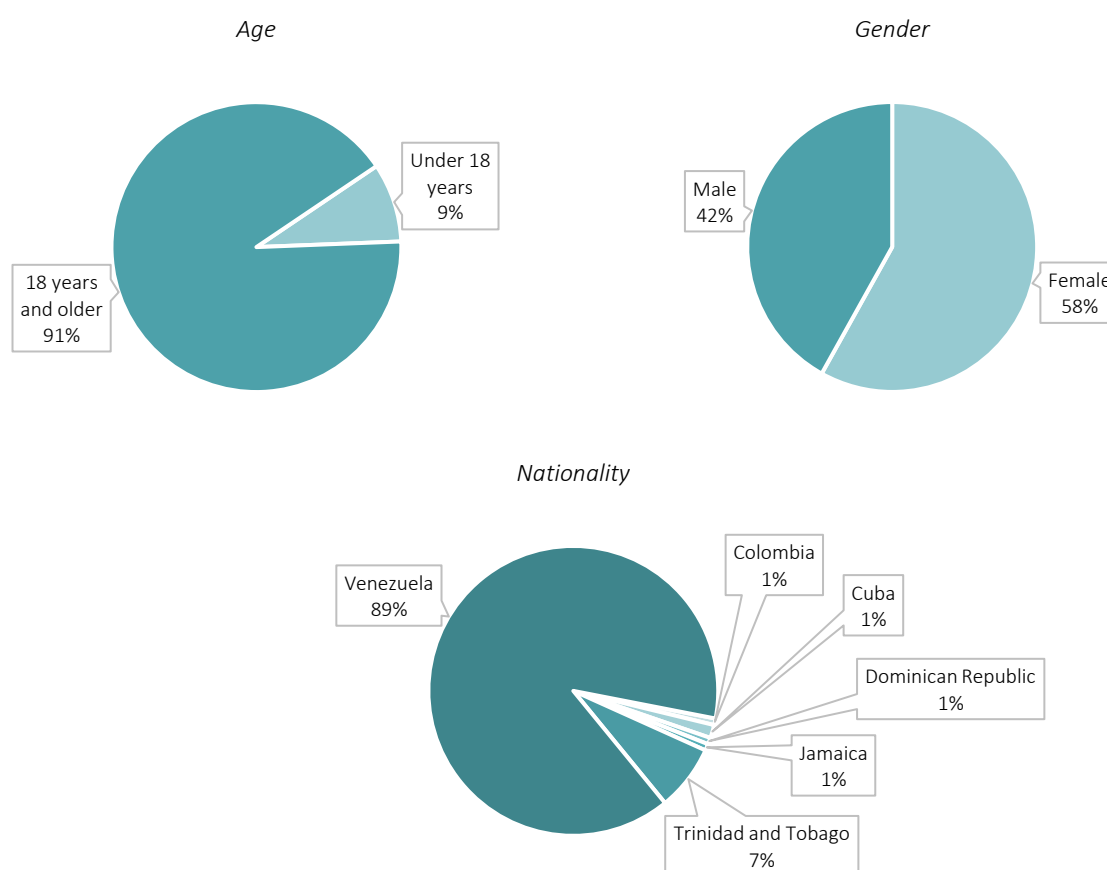
Introduction¹

Participatory Assessments (PAs) aim to build partnerships with affected people by promoting meaningful participation through structured dialogue. PAs engage diverse actors to gather information on key protection risks and their underlying causes, as well as community capacities to address these issues and proposed solutions. While PAs do not offer analysis based on statistical representation, their consultative nature offers insight for governmental and humanitarian partners to design appropriate protection interventions incorporating the views and desires of the affected population. This dialogue additionally promotes communities to act collectively to enhance their protection, thereby strengthening the rights and community-based approaches.

In May 2022, Response for Venezuelan (R4V)² and other partners met with asylum seekers, refugees, migrants, and host community members across Trinidad and Tobago (TTO) to identify their concerns and recommendations related to five themes: safety and security, health and psychosocial support (PSS), livelihoods and food security, communication with communities (CwC), and integration.

This report reflects the views of 136 participants from 16 focus group discussions (FGDs). Venezuelan, Cuban, Colombian, Dominican, Jamaican, and Trinbagonian individuals participated. Diversity was further upheld through consulting participants of various ages (8-70 years old), gender, and socioeconomic backgrounds – as seen in Figure 1 below.

Figure 1: FGD Participant Demographics



¹ NOTE: This report represents views of Focus Group Discussion participants (i.e., refugees, migrants, and host community members) and not necessarily those of the R4V platform.

² "The Interagency Coordination Platform for Refugees and Migrants (R4V) is made up by nearly 200 organizations (including UN Agencies, civil society, faith-based organizations, and NGOs, among others) that coordinate their efforts under Venezuela's Refugee and Migrant Response Plan (RMRP) in 17 countries in Latin America and the Caribbean." Available at: <https://www.r4v.info/en>.

Context

TTO hosts 34,100 Venezuelans according to R4V estimates³, and more than 22,000 asylum seekers and refugees are registered with UNHCR⁴. Since many Venezuelans enter TTO irregularly through over 50 entry points and via risky sea voyages at the hands of human traffickers and smugglers, total numbers are likely higher.

TTO acceded to the 1951 Convention relating to the Status of Refugees and its 1967 Protocol in November 2000. The Government has not developed corresponding domestic legislation, thus “asylum-seekers and refugees remain subject to the provisions of the 1976 Immigration Act”⁵, which does not guarantee *non-refoulement*. Further, the Government extended the validity of registration conducted for 16,500 Venezuelans in 2019 through a re-registration of approximately 14,000 individuals in 2021 but has not implemented similar initiatives since for other Venezuelans nor for asylum seekers and refugees of the 37 other nationalities registered with UNHCR.

Key Findings

Following are the primary concerns raised by FGD participants:

Detention and deportation were frequently raised risks, and result in refugees and migrants of all ages living in fear. Most linked this concern with restricted access to TTO-issued documentation and their experience with UNHCR-issued documents not being uniformly recognized by local authorities and thereby, not offering adequate protection.

Irregular status and limited access to documentation are cross-cutting obstacles that prevent refugees and migrants from accessing services and enjoying their rights. Participants reported having limited information about requirements for obtaining documents; others stated some documents are not recognized by local authorities or civil society. The TTO-issued work permit is seen as the only document effectively guaranteeing access to rights, including work.

Exposure to crime, violence, and other safety issues is widespread, and particularly affects refugee and migrant women in the form of sexual harassment and abuse. Participants’ lack of confidence in the police is a main factor contributing to individuals not seeking protective services.

Obstacles to accessing healthcare include xenophobia, language, and unequal application of TTO health laws; participants also noted medication is often cost-prohibitive.

Limited safe job opportunities cause most refugees and migrants to work informally without employment contracts that would afford legal protection. Many work extended hours without fair pay and face discrimination or harassment, but do not report for fear of reprisal or deportation.

Exclusion from education results in refugee and migrant children not accessing the same opportunities as their peers and limits interaction with local children; it also prevents some parents from working.

Food insecurity is common and linked to unstable income and to the high cost of living. Most reported having to change dietary habits or reduce meals to meet other basic needs, like rent and electricity.

Insufficient access to information about rights and services is caused by many factors including language, not having electronic devices, and the absence of child-friendly messaging.

Inadequate local integration endures because of xenophobia and language barriers, causing many refugees and migrants to feel like outsiders. Still, integration levels vary depending on location.

³ RMRP 2022 Trinidad and Tobago. R4V Platform. Available at:

<https://www.r4v.info/sites/default/files/2022-02/2%20Pager%202022%20TRINIDAD%20AND%20TOBAGO.pdf>.

⁴ Trinidad and Tobago, Fact Sheet, March-April 2022. UNHCR.

Available at: <https://reliefweb.int/report/trinidad-and-tobago/unhcr-trinidad-tobago-fact-sheet-march-april-2022>.

⁵ International Protection in Trinidad and Tobago. UNHCR. Available at:

<https://help.unhcr.org/trinidadandtobago/about-trinidad-and-tobago/international-protection-in-trinidad-and-tobago/>

Safety and Security

During Journey

Dangerous journey: Participants noted the travel by boat to TTO is itself perilous.

Detention: Refugees and migrants face a risk of detention during flight. A female participant shared she and her family were detained, had their documents confiscated, and had to pay a fine; UNHCR supported her with a lawyer, and she was provided an interpreter during immigration procedures.

Exploitation: Participants noted that women are at higher risk of exploitation during the journey.

GBV

Most female participants shared feeling that TTO is not a safe place for women regardless of nationality.

Exposure and incidents: Female participants stated public transport, especially taxis, are unsafe. Women and girls are exposed to sexual harassment while walking on the streets, including by police officers. Women also receive unsolicited sex proposals from employers. Incidents ranging from micro-aggressions to femicides were noted.

Police response: Female participants shared the view that there is a lack of effective response when GBV incidents are reported to the authorities. Some stated that police disregard survivors, telling them that domestic violence is “a family matter.” Participants added that police do not attend to complaints without an interpreter or NGO supporting the survivor.

Detention and Deportation

Participants reported having a constant fear of detention and deportation. Adult participants shared feeling they are at high risk of detention or deportation while working to meet their basic needs.

Documentation: Undocumented refugees and migrants are more at risk, but participants shared that certain documents (e.g., UNHCR-issued documents for refugees) at times provide little protection because immigration authorities and the police do not often view them as valid; it was stated the only protective document for refugees and migrants is the TTO-issued work permit.

Legal aid: Participants reported there is limited information about legal aid and/or *pro bono* lawyers are not available to support refugees and migrants with criminal or immigration-related matters.

Documentation

Refugee and migrant participants reported having difficulty accessing adequate documentation.

Venezuelan passport: Some refugees and migrants' Venezuelan passports were confiscated by TTO immigration authorities; other participants shared they never had a passport in Venezuela. Many participants noted not knowing how to request a passport while in TTO, while others indicated it is costly to get or renew their passport at the Venezuelan embassy. Some added that the Venezuelan passport is not a widely accepted form of identification in TTO.

UNHCR-issued documents: Participants shared that UNHCR documents are not as well respected as the TTO work permit; specifically, UNHCR documents are often not accepted by the police or employers.

TTO passport: Female refugee and migrant participants reported they would like to get passports for their children born in TTO, but heard the process is costly and/or burdensome.

Impact: Participants shared that lack of documentation results in refugees and migrants living in fear and having severely limited access to education, banking, housing, and employment.

Birth Registration

TTO births: Female participants reported that many babies born in TTO are not registered because parents do not receive the needed document at the hospital, they are not aware of their child's right to be registered in TTO, and/or they do not know the registration process. Participants also noted that when parents attempt to get birth certificates for their children, authorities ask for additional identification documents for the mother; this requires going to the Venezuelan embassy and paying a fee, which most families cannot afford. Participants shared that owing to this, the result is that they cannot obtain documentation proving that their children have TTO citizenship.

Venezuelan births: Some refugee and migrant parents do not have birth certificates for their children born in Venezuela. This prevents these children from accessing needed vaccinations, as the *cédula* does not suffice and parents cannot afford the additional documentation issued by the Venezuelan embassy.

Crime and Violence

Participants shared that insecurity increased during and after the COVID-19 pandemic. Refugees and migrants have become a target, with women being the most vulnerable and affected. A few participants, particularly those residing in Moruga, noted feeling safe from crime.

Drugs: Participants reported there being open drug use in public places and within homes. Youth participants shared feeling insecure while being out alone because they are often offered drugs.

Crime: Theft, extortion, and kidnapping are reportedly prevalent. Participants shared refugees and migrants are robbed because they are paid in cash and are unable to open bank accounts. Child participants stated being afraid because of the increasing insecurity where they live, with some reporting hearing gunshots daily in their neighborhoods. One child gave the example that their family was robbed in Venezuela and that the perpetrators recognized them in TTO.

Response: Participants shared obstacles to accessing public safety services like language (e.g., police lacking personnel who can receive reports in Spanish), Venezuelans being afraid of deportation when going to file a police report, and UNHCR-issued documents not being accepted by the authorities. Some participants reported a lack of police response when refugees and migrants face violence even if there is evidence, witnesses, or medical reports; this extends to cases of violence against children.

Community Capacities

- Adult and adolescent females moving in pairs or groups, keeping in constant communication with family/friends while taking public transport, and using geolocation features on phones
- Fostering a stronger sense of community, including through checking on neighbors' safety
- Establishing neighborhood watch groups that can report incidents
- Venezuelan lawyers helping share information on rights and laws among refugees and migrants

Recommendations

- Conduct intercultural and sensitivity trainings for police officers
- Create material for males to understand what it means when a female says “no”
- Disseminate information on police locations and services, including related to GBV
- Strengthen information, procedures, and services for GBV survivors
- Establish safe shelters for female GBV survivors
- Conduct workshops on rights and obligations for refugees, migrants, and the host community
- Offer self-defense classes for men and women
- Create a Spanish hotline to respond to incidents affecting refugees and migrants
- Establish means of digital payment or safe cash storage to prevent refugees and migrants becoming targets of theft

Health and Psychosocial Support

Access

Some participants reported having access to healthcare in Tobago because their *cédula* and UNHCR-issued documentation are accepted, and they can communicate with Cuban doctors. However, most participants in Trinidad stated they lack access; host community participants added that laws are not applied consistently for refugees and migrants who should have access to primary healthcare and that access instead depends on the interpretation of the law by the individual healthcare worker, as well as his/her language skills and willingness to help.

Information: Some participants shared they do not know how the TTO healthcare system operates. For instance, no participants in one FGD knew how to access emergency medical services. Many participants shared not being aware of any PSS services available to refugees and migrants but agreed that there is a great need for this support.

Discrimination: Many participants reported facing discriminatory behavior and practices by staff at public health facilities. This results in some being denied access to needed services solely due to migratory status, nationality, or ethnicity. Participants in one FGD noted feeling they are “constantly perceived as second-class” individuals. Participants noted health staff skipping over Venezuelans who are first in line to attend to others. Mothers shared services are denied to even infants, toddlers, and children due to xenophobia. Some participants added they are not willing to seek medical care at public facilities or even some operated by non-governmental organizations because they want to avoid discrimination and because medical and administrative staff lack empathy. Host community participants noted that there is differential treatment depending on country of origin.

Language: Participants stated language is a significant barrier to accessing healthcare. Many are unable to communicate with medical staff at health centers, and this is aggravated by doctors using technical terms and facilities not having interpretation services. Even participants who had otherwise positive experiences at health centers in Tobago reported that language was an obstacle.

Cost: Participants noted medications were cost-prohibitive for many refugees and migrants, while others were unable to complete the prescribed dose due to lack of income.

Fear of detention: Some participants stated being afraid to go to public health centers because they believe they might be detained.

Quality

Participants reported concerns about the quality of medical care at public health facilities.

Delays: Participants shared that public health processes are slow, namely that getting appointments is difficult and wait times at facilities are long; some recognized these issues also affect the host community. One participant noted having to wait two days for emergency assistance.

Partial treatment: Participants stated there is limited treatment or follow-up even in cases where individuals have documented history of a chronic illness. It was shared that medical staff provide temporary solutions and patients are informed there is no need to return for additional services.

Alleged malpractice: One participant shared an incident of a woman who had a cesarean section and later faced serious complications when her stitches loosened.

Community Capacities

- Using translation applications to communicate with health staff
- Supporting other refugees and migrants with needed interpretation at public health facilities
- Helping other refugees and migrants financially during medical emergencies

Recommendations

- Advocate for issuance of a government circular to all health service providers instructing on laws related to the provision healthcare to refugees and migrants
- Provide language and refugee rights trainings to healthcare personnel
- Advocate with public and private institutions for affordable exams, medications, and treatments
- Establish group PSS services to provide emotional support and improve overall mental health
- Conduct sexual and reproductive health outreach, including on family planning
- Facilitate birth registration process (e.g., organizations supporting refugees and migrants)
- Establish a Catholic hospital to provide more affordable healthcare services

Livelihoods and Food Security

Employment

Most refugee and migrant participants not registered with the government shared having difficulty finding jobs, although the experience is generally more positive in Tobago compared to Trinidad.

Access: Participants reported informal job opportunities exist largely in bars, restaurants, supermarkets, cleaning, childcare, agriculture, and construction. Most learn of vacancies through personal contacts or approaching employers. Refugees and migrants reported not knowing English is a disadvantage when looking for jobs and that previous work experience or qualifications are not recognized. Female refugee and migrant participants shared having more difficulty finding employment than males (e.g., one female participant shared that she has professional qualifications, but is overlooked because of her gender); this is aggravated because of a lack of affordable childcare. Still, some male participants stated that both men and women have the same opportunities.

Abuse and discrimination: Participants reported employers do not issue contracts, provide leave, or offer any other benefits (e.g., life insurance, medical insurance). Employers often do not supply the needed protective equipment like helmets, gloves, and boots. Participants shared that employers are often verbally abusive towards refugees and migrants, deny payment, and/or dismiss them without warning. Others noted that refugee and migrant employees often work longer hours, yet are paid less than local co-workers; additionally, if a local is absent then a refugee/migrant employee is expected to

cover the absence in addition to completing his/her normal duties. Participants also stated that children working are paid even less. Venezuelan women are particularly disrespected at work, which may be rooted in the stereotyping of Latin American women engaging in sex work. Cuban participants noted that employers tend to prefer hiring Venezuelans over Cubans.

Legal protection: Some participants reported not knowing their rights related to employment, while others stated wanting to have access to a lawyer for advice because refugees and migrants who complain about working conditions are often fired.

Vocational Training

Participants noted there are limited to no opportunities for refugees and migrants to learn new skills because they cannot afford to pay for vocational training (e.g., in computers and sewing).

Small Businesses

Some refugee and migrant participants shared they have been trying to start small businesses, mostly related to food and tailoring, but the process is difficult due to a lack of access to documentation, technical support, start-up capital, and safe locations to set up. Others shared it is hard to open private or business bank accounts; participants noted each bank has its own rules, and there is a lot of bureaucracy and background checks. Lack of access to banking also creates challenges for refugee and migrant entrepreneurs seeking loans.

Remittances

Participants reported many refugees and migrants are working multiple jobs to earn enough to send small sums of money to relatives in Venezuela.

Rent

Most participants shared that living conditions are poor because they cannot afford to pay rent. Many have accumulated debt with their landlords, as they cannot pay the full month's rent.

Food

Most refugee and migrant participants noted having been forced to change food habits due to rising prices, which they acknowledged also affects the host community. Participants reported having to choose cheaper options and/or reduce the number of meals to pay for other necessities like rent and utilities; others sold household items to purchase food. Participants shared that food support from humanitarian organizations is limited and unreliable.

Community Capacities

- Working multiple jobs to pay for necessities
- Sharing job openings with other refugees and migrants, including via WhatsApp and Facebook
- Supporting other refugees and migrants with childcare to allow them to work
- Possessing professional qualifications and degrees
- Having the drive to start small businesses

Recommendations

- Advocate to establish labor laws in favor of refugees and migrants who are supporting the local economy (e.g., recognizing academic and professional qualifications, improving working conditions, establishing means for reporting violations supported by legal representation)
- Conduct labor rights trainings for employers (e.g., minimum wage, sick leave, exploitation)
- Offer English-language classes, including online
- Provide vocational training, capacity building, and material support to help refugees and migrants start small businesses (including specialized programs to empower women)
- Help refugees and migrants to register small businesses and open corresponding bank accounts
- Advocate to allow refugees and migrants to obtain driving permits, which would facilitate easier and safer movement to work (as well as during emergencies and for recreation)
- Provide an affordable space for selling handmade and artisanal goods (e.g., like “Mama Latina” in Peru)
- Establish community agricultural programs to encourage produce sales and lower the cost of food
- Create temporary shelters for homeless refugees and migrants

Communication with Communities

Communication Channels

Participants reported the most common forms of communication used by refugees and migrants are WhatsApp and to a lesser degree, email. Young people shared that while they sometimes access social media platforms (e.g., Instagram, Facebook), they do not have mobile phones; therefore, they receive most information through their parents.

Information about Services

Participants reported it is difficult to access UNHCR-related information, as many refugees and migrants do not visit the UNHCR Help website. Female and male youth participants stated they often lack access to information – including about available services, programs, and youth activities. Child participants shared they do not understand communication from humanitarian organizations because it is normally in English, so they discuss further with their parents for clarification. Most participants were not aware of any programs or humanitarian organizations supporting refugees and migrants in Tobago.

Bilateral Communication

Participants indicated that humanitarian agencies’ response to emails and WhatsApp messages is slow.

Community Capacities

- Sharing information verbally and via social media with other refugees and migrants, including regarding available services

Recommendations

- Publish more informative video and audio materials
- Create child-friendly material, including in simplified Spanish, that can be shared via parents or other channels to which children and youth have access
- Share information with youth refugees and migrants on how to connect with their peers
- Offer English classes so information exchange becomes easier
- Create a public platform in Spanish to share updated information on all services available

Integration

Participants of all ages shared facing barriers to integration in TTO – with the experience being largely better in Tobago and Arima than in other parts of Trinidad, such as Chaguanas. Some noted positive interactions with neighbors and children becoming more socialized with locals through sports.

Legal Status

Participants indicated that in their view, the main obstacle to integration is the lack of legal status in TTO, which prevents access in many spheres including banking and education.

Language

Refugee and migrant participants reported being mistreated because they do not speak English. Children noted it is difficult to engage with their local peers during sports, but that they try to communicate via translation applications. Host community participants shared that the inability of many refugees and migrants to communicate in English generates mistrust with locals; many Venezuelans cannot fully articulate who they are, why they came to TTO, and what their intentions are.

Education

Children reported wanting to study with local children in public schools and to have similar opportunities as their peers. They shared online classes are not as effective and that at times they cannot connect because their parents are not at home, and they forget their access code.

Xenophobia

Refugee and migrant participants reported widespread discrimination, with some stating they feel there are more people against Venezuelans than helping them. Female and male youth participants shared that some host community parents in their neighborhoods prevent their children from interacting with refugee and migrant children. Host community participants indicated that discrimination is rooted in many locals believing Venezuelan males are criminals or Venezuelan females are sex workers. A male host community participant opined that refugees and migrants “already have a hard life, we should not make it harder for them...[Individuals] who leave TTO to work or study are often celebrated...you cannot expect a certain level of kindness if you do not give it to other people.”

Security

Youth participants noted that integration is hindered by refugees and migrants being afraid to participate in recreational activities due to general insecurity.

Poverty

Youth participants indicated it is difficult for them to interact with locals socially because their families lack disposable income to spend on movies or other recreational activities.

Community Capacities

- Establishing language exchange for adults and children (i.e., refugees/migrants – including Venezuelan teachers – and host community members teaching each other English and Spanish)
- Using translation applications to communicate
- Learning about and adapting to the TTO culture

Recommendations

- Advocate for TTO policies to facilitate integration
- Launch an anti-discrimination campaign to tackle misinformation about refugees and migrants
- Include refugee and migrant children in the national education system
- Integrate anti-xenophobia messaging into the TTO education curriculum
- Hold events where refugees/migrants and the host community can share their cultures and cuisines regularly
- Develop sports teams (e.g., football, volleyball) mixing refugees/migrants and the host community
- Foster child/youth integration (e.g., via sports, bilingual library, in-person education)
- Provide free English classes
- Create a community garden accessible to youth, older persons, and families from refugees/migrants and the host community
- Establish community centers where everyone can share their voices, opinions, and ideas