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COLOMBIAN RED CROSS  
IPIALES MUNICIPAL UNIT

## OVERVIEW

The COVID-19<sup>1</sup> pandemic has no precedent in recent history. It is both a health and a humanitarian crisis that is affecting the lives, health and livelihoods of people around the world. The possible impact of COVID-19 on the world's most vulnerable people, who are already affected by displacement, conflicts, natural disasters and climate change, makes it the most urgent threat of our time.

The global impact of COVID-19 has already been considerable and represents the most serious threat to global health from a respiratory virus since the 1918 influenza pandemic. Furthermore, it has a high and proven potential to cause catastrophic impacts on health systems and loss of life, as well as profound socio-economic consequences, even in the most advanced economies and in well-resourced health systems. Secondary health systems impacts can be expected to reduce access to health care for millions of people, and the socio-economic effects of the pandemic will be felt across all communities. The most vulnerable will suffer first, most and longest.

The International Federation of Red Cross and Red Crescent's (IFRC) response to COVID-19 is primarily operationalized through the January 31, 2020<sup>2</sup> Emergency Appeal. Nonetheless, the IFRC in America has taken actions to guarantee its current operations and programs, also taking specific measures with National Societies that implement activities related to the population in

<sup>1</sup>On March 11, 2020 the [World Health Organization characterized COVID-19 as a pandemic](#).

<sup>2</sup>[Emergency Appeal MDR00005](#) / March 26, 2020 [Revision](#)



a situation of human mobility throughout the region, because they are within the groups potentially vulnerable to the immediate effects of the pandemic, as well as to medium and long-term effects.<sup>3</sup>

This document summarily presents an update on the actions carried out by the National Societies and the impacts of COVID-19 on the implementation of emergency and medium to long-term programs<sup>4</sup> on migration in Latin America and the Caribbean in conjunction with the IFRC to date.

## ARGENTINA

Following the recommendations of the authorities and the 260/2020 Decree, the health emergency promulgated by Law No. 27,541<sup>5</sup> is extended, ordering the health authority to suspend the entry of foreign persons into the territory causing a total closure of the borders, for which the Argentine Red Cross activated a **Contingency Plan for the human mobility response**<sup>6</sup>. In addition, the 97/2020 Decree for "Preventive and Mandatory Social Isolation" has provided for the obligatory quarantine in the national territory to extend from 03/21/2020 to 03/31/2020 (inclusive), with Red Cross personnel being exempt from said measure.

The humanitarian response of the Argentine Red Cross for migrants at the border depends on entering the national territory, which is affected during the term of the measures against COVID-19, activities that involve food, temporary accommodation, delivery of Non-Food Items (NFI) and humanitarian transport (considering that the number of applicants will eventually be reduced by border control measures). For this, the Argentine Red Cross has committed to:

- Frequent border crossings to monitor the assistance and protection needs of migrants and refugees who have been denied access to the territory;
- Strengthen ties and maintain close communications regarding the steps with immigration authorities and security personnel, ensuring advocacy and protection;
- Use all available tools to notify, inform and communicate to migrants who go through the different pass points, in order to mitigate risks of rejection at borders and stranding situations.

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<sup>3</sup>Business Continuity Plan

<sup>4</sup> Currently IFRC implement 4 emergency response operation focus on people on the move (DREF-Guatemala, Colombia EA, Regional EA, Venezuela EA), and Monarch Butterfly Program in Guatemala, Honduras, El Salvador, Colombia, Venezuela and Peru).

<sup>5</sup><https://www.boletinoficial.gob.ar/suplementos/2020031401NS.pdf>

<sup>6</sup> Source: Argentine Red Cross "National Program for Human Mobility Contingency Plan: Pandemic COVID-19".



In order to guarantee the safety of volunteers and the general population, keeping the focus on the needs of the migrant population, virtual channels are enabled to answer queries and reschedule and / or set personal interview dates after March 31.

The channels for attending consultations and monitoring the migrant population are:

- **Email: [migraciones@cuzroja.org.ar](mailto:migraciones@cuzroja.org.ar)**
- **WhatsApp: +54 9 11 5753-2615**
- **Attention line: +54 9 11 3190-9827**

For the lines that contemplate emergency situations and extreme necessity it is guaranteed:

- Advice, documentation consultations, protection situations, among other levels of access to information. They will be able to consult and obtain immediate response through virtual channels;
- People with accommodation needs (population that has just arrived in Argentina), will be able to consult the virtual media and an interview will be scheduled on a specific day and time, under guidelines;
- The Restoring Family Links (RFL) program, the specific needs related to "missing" requests will be handled online, the interviews for filling out the forms will be carried out by telephone and will be signed by the staff of the Argentine Red Cross who followed the call; for the extremely urgent need for connectivity services, the manner, day, time and branch / headquarters must be coordinated through virtual channels.

## BRAZIL

Brazil has closed the borders and has taken other restrictive measures in accordance with Law No. 13,979 of February 6, 2020, which set the actions that will be taken in order to face the public health emergency resulting from the coronavirus<sup>7</sup>.

The operation of the International Federation of Red Cross and Red Crescent is carried out with the support of the International Committee of the Red Cross and Red Crescent (ICRC) in the states of Roraima and Amazonas. The COVID-19 response has impacted the construction of water services in Boa Vista, due to delays as the government has taken measures that limit "non-essential" economic activities in the State of Roraima.

RFL activities are being adapted according to the continuity plan that the ICRC are being prepared in Boa Vista. Services are expected to decline due to both the closure of the border and the protection measures that the ICRC and the state security forces are implementing.

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<sup>7</sup><http://www.itamaraty.gov.br/es/>



Considering that RFL activities are essential in this scenario, the ICRC will continue to offer services in Boa Vista shelters with additional protection measures and distribution of hygiene kits.

In Manaus, First Aid services are working, however, the procurement of materials has been delayed by the current isolation measures. There is a possibility that the ICRC may temporarily suspend RFL services.

## CHILE

On March 18, 2020, the government of Chile decreed the state of Constitutional Exception for Catastrophe throughout the national territory. The borders have been closed, allowing only nationals and residents to enter. To date, no official information has been collected on the migrant population in Chile. Nonetheless, among all the vulnerabilities that were already affecting people in a situation of human mobility prior to the COVID-19 outbreak, as well as in other countries in the Region, the limitations that they may have regarding mobility within the country or in case of return, and informal crossings, are a cause of concern due to the current restrictions and the potential, short term implementation of city or region closings.

The response plan proposed by the IFRC Country Office together with the project's Chilean Red Cross seeks to provide continuity to this assistance.<sup>8</sup> The cities of intervention are Santiago de Chile, Antofagasta, Iquique and Arica.

Given the complexity of the scenario of the response to COVID-19, the activities of: **i)** prevention continue with the development of material, implementation of the communication strategy and awareness of self-care regarding COVID-19; **ii)** distribution of humanitarian aid, in particular the distribution of food, shelter and hygiene kits to women, men, boys and girls with due precautions and protection.

RFL activities; psychosocial support; hydration and safe water; and training; will be temporarily suspended.

## COLOMBIA

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<sup>8</sup>Source: IFRC Chile Office - Chilean Red Cross "Contingency Plan - Population Mobility Project".



Since March 14, the National Government closed the Colombian border with Venezuela, in order to contain the spread of the COVID19 virus. For now, the measure is expected to continue until May 30. The other land borders were closed since March 16, 2020, in coordination with Ecuador, Brazil and Peru.<sup>9</sup> From March 23, the entry of international flights to Colombia was suspended for 30 days.<sup>10</sup> The National Government issued the Decree 457, for compliance with the Mandatory Preventive Isolation of 19 days throughout the Colombian territory from Wednesday, March 25 to April 13, 2020.<sup>11</sup> In light of modified priorities and national restrictions due to the health emergency, the National Society of the Colombian Red Cross (CRC) maintains its extensive migration operation with the following adjustments:

#### Activities to be continued

- Health care and assistance (with the delivery of personal protective equipment to the CRC personnel, and adjustments to entry mechanisms into the system, improvements in waiting rooms, increased measures for disinfection of equipment and common use surfaces) with 80% reduced flows;
- Health and hygiene promotion and disease prevention (key messages, including protection components) on a smaller scale (individual coverage) and dissemination of hand washing (including soap, antibacterial gels deliveries);
- COVID-19 medical and psychological channels for communities, employees and volunteers;
- Dissemination of the “stay at home campaign” (community communication and strengthening of community outreach networks);
- Deliveries of emergency humanitarian aid (market kits, shelter kits) as well as strengthening key migration branches, with deliveries of emergency kits;
- Cash transfers to vulnerable and migrant populations;



<sup>9</sup><https://id.presidencia.gov.co/Paginas/prensa/2020/Presidente-Duque-anuncia-cierre-coordinado-de-fronteras-con-Brasil-Peru-Ecuador-para-enfrentar-pandemia-coronavirus-200316.aspx>

<sup>10</sup><https://id.presidencia.gov.co/Paginas/prensa/2020/Por-un-periodo-30-dias-suspender-ingreso-viajeros-internacionales-Colombia-Presidente-Duque-200319.aspx>

<sup>11</sup><https://id.presidencia.gov.co/Paginas/prensa/2020/Gobierno-Nacional-expide-Decreto-457-mediante-el-cual-imparten-instrucciones-para-cumplimiento-Aislamiento-Preventiv-200323.aspx>



- Institutional articulation, towards the complementary response and capacity building for containment / prevention.

#### Activities temporarily suspended

- Community sessions in order to avoid crowds of people;
- Actions in sheltering and recreational spaces, and reorientation of the teams focused on these activities.

## EL SALVADOR

On March 14, El Salvador declared a state of emergency with a duration of 30 days, to deal with COVID-19. From that date all Salvadoran nationals who entered the country by air from countries that presented cases of COVID-19, have been quarantined for 30 days. Despite these measures, the first case of COVID-19 was confirmed on Wednesday, March 18. Therefore, the closing of shopping centers was ordered, and a sanitary cordon was established in Metapan, Municipality of Santa Ana in which the first case was registered. Since March 17, Mexico and the United States have been asked to stop the deportation processes. On March 21st, a general household quarantine was decreed for 30 days in order to contain the outbreak, allowing only one person per family to go out to purchase food, medicine and basic supplies. Exceptions are established for employees of public transport, the media, the public administration, food producing companies and food distribution services. According to the Ministry of the Interior, approximately 2,000 people are quarantined in 50 authorized containment centers.

The Ministry of Foreign Affairs has created the Operations Center for Remote Consular Assistance in the face of the COVID-19 pandemic, where care will be provided to Salvadorans (migrants) or people who are in different countries abroad without being able to return to El Salvador or their countries of residence. On March 24, the first flight of Salvadorans returning from the United States in the municipality of Comalapa was received. This information was confirmed by the Office of Migrant Services and ICE. Returning migrants are being quarantined at the Comprehensive Care Center for Migrants (CAIM by its Spanish acronym). As of March 26, El Salvador had 13 active cases of COVID-19.

The Salvadoran Red Cross along with the Federation and other Movement partners, currently provide psychosocial support assistance through radiotelephony, focusing its activities on



following up on cases of displaced persons that the NS already attends through its Psychosocial Support Unit. Likewise, from the area of social inclusion, the involvement of migrants and displaced persons is sought in all response activities on COVID-19. As part of the response to COVID-19, adjustments have been made in the strategy, continuing with activities of:

#### Activities to be continued

- Primary health services through relief teams in quarantine shelters;
- Psychosocial support, which is provided by means of telecommunication and by way of scheduled appointments to the email [apoyoemocional@cruzrojasal.org.sv](mailto:apoyoemocional@cruzrojasal.org.sv)
- Online hygiene promotion, sending constant information to key actors within the internally displaced communities.

#### Activities temporarily suspended

- Community activities carried out in the migrant and return host communities.
- Tutorials for school success and vocational plans for children and youth at risk of forced migration;
- Training workshops with communities (training and entrepreneurship workshops within the framework of the Friendly Neighborhoods methodology);
- Training for volunteers and staff (pedagogical mediation workshop, introductory course on migration from the Movement's perspective;
- Health fairs;
- Distribution of hygiene kits at "Casa del migrante".<sup>12</sup>

## GUATEMALA

On March 13, the first case of COVID-19 in Guatemala was confirmed. Since that date, the Guatemalan government through the institutions in charge of the contingency facing COVID-19, created a series of restrictions, among them the closure of borders for a broad group of nationalities, allowing entry to Guatemalan residents only. In the midst of the state of emergency, a curfew of 4:00 a.m. was decreed. At 4:00 p.m., academic activities were suspended at all levels and the entire population was quarantined. As of March 23, two flights have been

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<sup>12</sup> Temporary shelter for migrants from the Human Mobility Pastoral and the Escalabrini order.



sent to the United States with all US citizens who were still in Guatemala, mainly tourists. The return processes of Guatemalans detained at the borders of Mexico and the United States have resumed, the protection and monitoring measures for returnees are minimal or almost nil. The return by land has been prioritized, before the return by air, the shelters such as migrant's houses remain closed and the returned adult migrants are being taken to a States' provisional space where they will remain in quarantine.

Guatemalan Red Cross in conjunction with the Federation have implemented several actions aligned with National Society's Action Plan to include migrants and people on the move. Actions such as prevention and preparation processes for branches that serve migrants, and actions aimed at migrants in particular, such as:



#### Activities to be continued

- First aid and pre-hospital care at the “Nuestras Raíces Quetzaltenango” return center for migrant children.
- Delivery of hygiene kits for returned children (at return center);
- Distribution of hygiene kits for migrants in transit, with hygiene promotion messages and information on COVID19;



- Distribution of personal protection equipment and cleaning kits for return centers' staff and volunteers as well as for the branches that are on the migratory route and those service posts for migrants in transit;
- Hygiene promotion with key messages to the population and messages on hand washing;
- Self-care information and key messages for returned migrant children and adolescents.

#### Activities temporarily suspended

- Community activities carried out in the migrant and return host communities;
- Tutorials for school success and vocational plans for children and youth at risk of forced migration;
- Non-essential training workshops with communities;
- Training for volunteers and staff (Gender Protection and Inclusion, Sexual Violence Based on Gender, Migration, Security in Crisis of Population Mobility, Pedagogical Mediation, Reestablishment of Contacts Between Family Members);
- Health fairs;
- Distribution of hygiene and water kits for consumption in transit.

## GUYANA

The measures taken by the Government in Guyana are in line with trends in the region. Several areas of Guyana have intensified their operations in response to the appearance of the virus since the first confirmed case in the country was reported. Specifically, regions three, four, seven, and eight have taken measures to safeguard the health of residents in those regions. The Guyana Red Cross will continue to hygiene promotion and to distribute hygiene items along with close coordination with the Georgetown Ministry of Health. In addition, it is planned to increase support for the migrant population but also for the host community, especially in health prevention issues.

## HONDURAS

As of March 26, 52 cases of COVID-19<sup>13</sup> have been confirmed. On March 16, the Honduran government decreed a permanent curfew with some restrictions for the provision of basic

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<sup>13</sup> <http://www.cepredenac.org/index.php/COVID-19>



supplies and necessities. Through a government statement on March 15, the president reported that the State of Emergency includes the closure of land and air borders. Starting on March 17, the Honduran government asked Mexico and the United States to stop the flights and buses of returned migrants.<sup>14</sup> Currently, return by air has continued in recent days, receiving mainly returns by air at “La Lima” Care Center for Returned Migrants (CAMR by its Spanish acronym) and returned migrant children at the Belen Care Center for Children and Migrant families by land. The Omoa Returned Migrant Care Center (CAMR by its Spanish acronym), which is administered by the Honduran Red Cross, will not be receiving returnee populations, since the State will seek to shelter returnees in other types of centers where they can be quarantined. Social unrest, discrimination and stigma are some of the main problems that returned migrants face.

Within the framework of the National Society's action plan and with the support of the Federation, lines of action in favor of migrants were prioritized in the following activities:

#### Activities to be continued

- Provision of hygiene kits for returned migrants, at the different return points, by both air and land;
- Distribution of personal protective equipment and cleaning kits for volunteers and return centers' staff;
- Hygiene promotion in return centers, such as at the Belen Care Center for Children and Migrant families;
- Messages on the prevention of COVID-19 and messages for the displaced and returned population through *social media* with community leaders and teacher networks in the target communities.

#### Activities temporarily suspended

- Community activities such as meetings with community leaders to reinforce inclusion and cohesion. Schools for parents where issues related to SGBV are discussed, and Migrapoly games that take place in host communities and with migrants, including returned migrants;
- Tutorials for school success and vocational plans for children and youth at risk of forced migration;

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<sup>14</sup><https://bit.ly/39v1gTJ>



- Training workshops with communities (training for management skills and empowerment for community leaders);
- Training for volunteers and staff in Pedagogical mediation, SGBV, Migrapoly);
- Health fairs;
- Distribution of hygiene kits at the Return Center.

## ECUADOR

Ecuador declared a state of emergency in the country<sup>15</sup> that includes the closing of borders, and a curfew. These measures have had an impact on the migrant population at the northern and southern borders, particularly with the closure of the Binational Border Assistance Center (CEBAF by its acronym in Spanish) where people are in a vulnerable situation due to lack of accommodation, access to health, food safety and protection in general. At the moment there are no specific measures to deal with this situation.

In this context, the Ecuadorian Red Cross has drawn up guidelines for actions in Human Mobility.<sup>16</sup> Almost all activities in support of migrants were suspended. For the moment, volunteers will not be mobilized and the hired humanitarian personnel who can give answers will do so based on the context of the national level as in each province - city.

The distribution of nutritional kits continues the northern and southern borders, due to the extreme situation of vulnerability that their closure has generated, and the distribution of kits in shelters, dining rooms or other spaces where needs are identified continues.

In addition, work is underway to activate telephone lines to provide information to the entire population, including people on migratory move.

Fixed service points have been temporary closed and mobile care will be guaranteed with all security measures for the care of specific vulnerable cases. In addition, the Cash Transfer Program is suspended.

## PANAMA

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<sup>15</sup><https://www.presidencia.gob.ec/el-presidente-lenin-moreno-decreta-estado-de-excepcion-para-evitar-la-propagacion-del-COVID-19/>

<sup>16</sup>Source: Ecuadorian Red Cross "Human Mobility Action Guidelines - March, 17, 2020."



On March 17, 2020, the borders with Costa Rica were closed and the border with Colombia closed on March 16, 2020, including the maritime areas. Due to the suspension of the agreement with Costa Rica for controlled passage, and upon notification from the Panamanian authorities regarding the impossibility for containing the migratory flow, and the 2,600 extra-regional people who, to March 24, remain at the border, the General Directorate of Migration and Immigration, together with the National Electoral Council and the Ministry of Health, have determined to define a specific entry process for these migrants. This has led to a change in the care model. In this regard, reinforcing the personal protection measures the Panamanian Red Cross, in coordination with the International Federation, maintains its actions as follows.

#### Activities to be continued

- Primary health services with a team of doctors, nurses and breastfeeding technicians for the migrant population in La Peñita, Darien;
- Safe water distribution, sanitation and hygiene promotion with key messages to the population and reinforcing messages on hand washing;
- Distribution of hygiene kits, baby kits, play material.



#### Activities temporarily suspended

- Restoring Family Links (RFL);
- Psychosocial Support;
- Non-essentials trainings.

## PERU



In Peru, the Supreme Decree No. 044-2020-PCM declared a State of National Emergency with borders closures and movement restrictions<sup>17</sup>. The "State of Emergency" is a constitutional mechanism in which some constitutional freedoms are restricted, such as free transit, assembly and inviolability of domicile, putting the national police and armed forces in charge of public security.

In this situation, the Lima IFRC office prepared a plan to ensure the response to the needs of migrants in the country<sup>18</sup>.

#### Situation on the activities of the Migration Program

Since February, communication pieces focused on the prevention of COVID-19 transmission through correct handwashing have been prepared and disseminated, which have been broadcasted by the Andean Region's National Societies, as well as by partners of the Movement in Peru.

Given the advance of COVID-19, from the first week of March the decision was made to suspend itinerant medical sessions and social inclusion activities, which in the short term included a Regional Meeting of Social Circus and Training Workshops for artistic organizations with which we have been working.

Likewise, due to the declaration of a State of Emergency, attention service was suspended at the Tumbes' Binational Border Service Centers (CBAF by its Spanish acronym), given the decrease in the flow of migrants and refugees at this point. In the case of the fixed post in Lima, the eventual demand was being assigned to the Polyclinic of the Peruvian Red Cross of the Lima Branch, however. It operated until March 18, due to the provisions of the Supreme Decree where it is stated that only category III health centers will be operated onwards (urgencies and emergencies).

The attention at the fixed posts of Lima and CEBAF Tumbes will continue to be suspended during the state of emergency, while the community and social inclusion sessions will until a new risk assessment determines the relevance of its implementation.

#### Situation on the activities of the Migration Program

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<sup>17</sup><https://www.gob.pe/institucion/pcm/normas-legales/462244-046-2020-pcm>

<sup>18</sup>Source: IFRC Country Cluster Support Teams of Lima, Program Office - "Migration and Social Inclusion Program in Peru." *Situational status COVID-19 Pandemic - March 18, 2020* .



Although the Migration and Social Inclusion Program has activities temporarily suspended, the adequacy of its intervention strategy is being advanced, especially considering that a large number of migrants and refugees in Peru, in urban areas, with jobs in the informal sector, supposes their exclusion from the government's measures of social protection announced by the Government of Peru<sup>19</sup>. Among the alternatives that are being worked on are:

- Single cash transfer for up to 400 vulnerable migrant and refugee families, who cannot be covered by other government support. To be applied in the City of Lima;
- Planning for the delivery of hygiene kits for vulnerable migrant families in the city of Lima;
- Remote emotional support care for humanitarian organizations. Continued leadership in the line of self-care is given to the intervening party;
- Implementation of a WhatsApp Business line for the dissemination and information about COVID-19. This information will be provided by health professionals, and that will help the 113 line managed by Peru. In addition, it is planned to continue with this line for health orientations to the community, and in the future, to guide/accompany the Monetary Transfer Program: Here is the link to connect to the line <https://bit.ly/LineaCRojaPe>
- Dissemination of COVID-19 propagation prevention messages through the Movement's social networks and External Partners. You can see some messages at the following link: [https://ifrcorgmy.sharepoint.com/:f/g/personal/daniel\\_rejas\\_ifrc\\_org/Eo1l87PBjbpErGr\\_BWiNjk0BIRvsDp0VCZo3crD1ybe\\_6Q?e=9GuQ7H](https://ifrcorgmy.sharepoint.com/:f/g/personal/daniel_rejas_ifrc_org/Eo1l87PBjbpErGr_BWiNjk0BIRvsDp0VCZo3crD1ybe_6Q?e=9GuQ7H)

**Tienes dudas o preguntas sobre el Coronavirus?**



**Contacta la línea de información de la Cruz Roja:**

 **+51 953 746 543**  
<https://bit.ly/LineaCRojaPe>  
Lun-Dom de 8am a 6pm

Un equipo con profesionales de salud estará a disposición para información verdadera, para una correcta orientación y así resolver dudas y rumores.

 Esta no es una línea de consultas medicas o descartes. Atenderemos mensajes te texto y audio.

## TRINIDAD AND TOBAGO

Trinidad and Tobago Red Cross will continue to implement activities for people in migration. In particular, the actions will focus on the activation of the "mobile health clinic" providing the migrant and hosting communities messages of communication about the risks. In addition, a virtual line will be activated to meet the informational needs of migrants and the community. Surveys and monitoring will be conducted to assess the needs and vulnerabilities of migrant communities affected by COVID19. Distribution of hygiene kits, the Monetary Transfer Program will also follow. Conversely, xenophobia awareness-raising activities will be suspended.

<sup>19</sup><https://elperuano.pe/noticia-gobierno-otorgara-un-bono-s-380-a-cada-familia-vulnerable-93123.aspx>



## URUGUAY

The Government of Uruguay declared a state of national health emergency, from March 13, 2020, in the face of the COVID-19 pandemic. From Tuesday, March 17, the Government decided to close the totality of land, waterways and air borders with Argentina. Citizens and residents of Uruguay, transport of goods to Argentina and humanitarian aid<sup>20</sup> are exempt.

Regarding the impact of COVID-19 on the operation in Uruguay, the Uruguayan Red Cross will continue with the following activities:

- The monetary transfer program is kept active using protection mechanisms;
- Uruguayan Red Cross will continue to provide dinner to migrants with daily delivery of food, tending to only one person per family, and thus avoiding a concentration of people at headquarters;
- A health vulnerability assessment is underway;
- Information material;
- Delivery of personal hygiene kits to reinforce hand washing;
- Development of a contingency plan in coordination with the State.

## VENEZUELA

The National Government has decreed “State of Alarm” on March 13, 2020, and social quarantine since March 17, 2020. The Ministry of Health has developed a National Plan for the Prevention and Containment of Coronavirus in 4 components: a) Epidemiological and laboratory surveillance, b) Entry points, c) Clinical-epidemiological case management and d) Communication and social mobilization. The Rafael Rangel National Institute of Hygiene (INHRR by its Spanish acronym) has been appointed as a national reference laboratory. 45 sentinel health centers have been designated nationwide, and a call-center for public care has been established.

### Red Cross actions in Venezuela

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<sup>20</sup>[https://medios.presidencia.gub.uy/legal/2020/decretos/03/cons\\_min\\_18.pdf](https://medios.presidencia.gub.uy/legal/2020/decretos/03/cons_min_18.pdf)



The Venezuelan Red Cross has developed a Contingency Plan to respond to COVID-19 based on 4 pillars: Risk Communications and Health Promotion; 2) Psychosocial support; 3) Epidemiological surveillance 4) Primary health care. In addition, a component of Water, Sanitation and Hygiene Promotion has been integrated.

Under the agreement between the International Federation of Red Cross and Red Crescent, the Government and the assistance roadmap with the Ministry of Health, the Federation maintains coordination for delivery of medical supplies and medicines in response to the Health Emergency Call (Emergency Appeal [MDRVE004](#)).

As part of the response to the socio-economic crisis in Venezuela in the border states of Apure, Zulia, Tachira, Bolivar and the Capital District, health promotion activities have been strengthened. In addition, within the framework of the Monarch Butterfly Program, efforts have been focused on:

- Distribution of masks and medical supplies;
- Monitoring the elderly, both at home and in care centers;
- Psychosocial support talks, as well as support for those who provide support (staff and volunteers);
- Prevention recommendations for COVID-19;
- Educational promotion and prevention sessions.

Finally, in coordination with the Popular Power Health Ministry State Units, the sectional border states have coordinated the enablement of mobile lines to relieve hospitals in the region.

Updated 03/31/2020

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