



Save the Children



Health Needs in Lima and Trujillo, Peru

FINAL REPORT

March 2020

Report

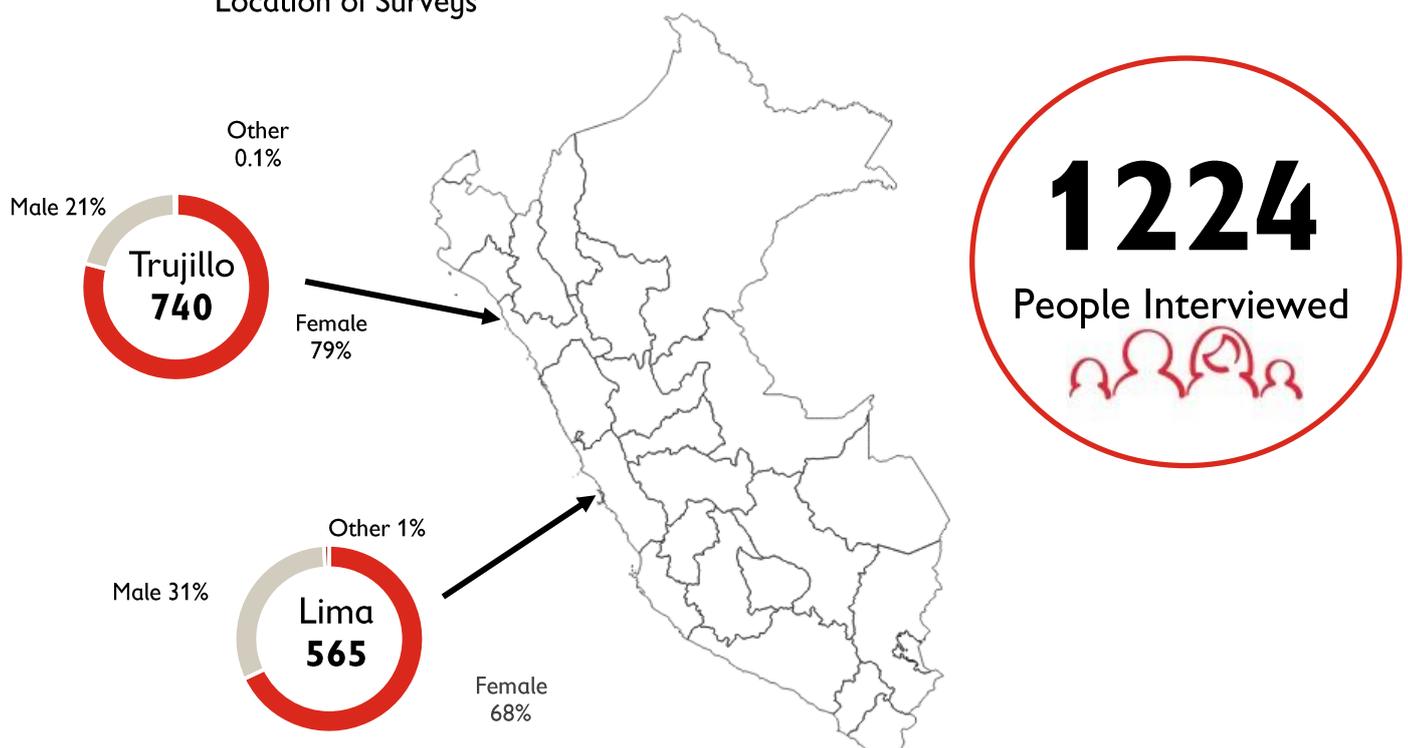
Since 2015, 800,000 thousands of Venezuelans have fled to Peru in search of food security, safety, and medicines. Many of these migrants lack the financial resources to secure all of their needs. The goal of this evaluation was to assess the level of need for Venezuelan migrants living in Lima or Trujillo Peru. This survey was conducted in February 2020 and aimed to capture the diverse set of needs of vulnerable and marginalized groups: adolescents, women who are pregnant or lactating, people living with a disability, people living with HIV/AIDS, and people living with a disability.

Health interventions in Peru must focus on integration, improving health promotion and disease prevention outcomes, guarantee access to quality health care and services and coordination in order to be successful. The report finds that the barriers Venezuelans face within the Peruvian health system must be addressed:

- Current government interventions do not cover basic health care of migrant / refugee adolescents and additionally the sexual reproductive health coverage offered is only partially accessed.
- A national policy to provide Breast Milk Substitute (BMS) free of charge through the National Health Insurance for HIV mothers exists. However, in the case of Venezuelan mothers, their NHI only covers them for the first 41 postpartum; after 41 days, lactating mothers stop having access to free public health services, consequently being denied access to BMS.
- Public mental health and psychosocial services are not free and require a substantial waiting time for appointments. All vulnerable groups are likely to require mental health and/or psychosocial services at varying degrees. In 2018, the Peru Government introduced a policy and national plan on community-based mental health care. The Venezuelan population would benefit in their inclusion.
- Peruvian social protection insurance schemes only apply for specific vulnerable groups who are eligible based on a socioeconomic survey often placing Venezuelan migrants at a disadvantage. This means that refugees / migrants have disproportionate expenditure due to lack of purchasing power, for health needs covers a huge range of issues, e.g. costs of drugs, accommodation, transport, food.

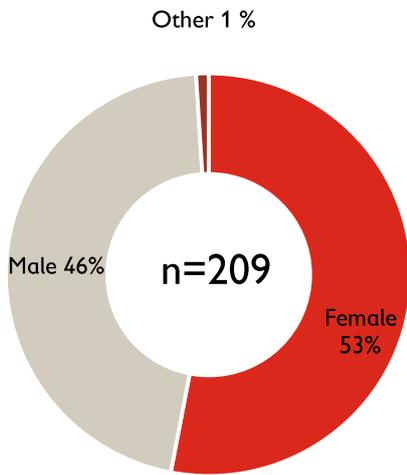
Peru

Location of Surveys



Report

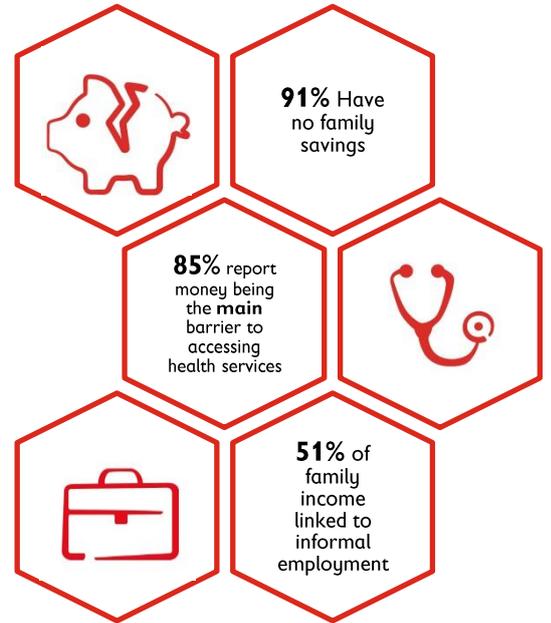
Vulnerability Profile: Adolescents



97% Of Adolescents surveyed reported living in Peru between 1 and 36 months.

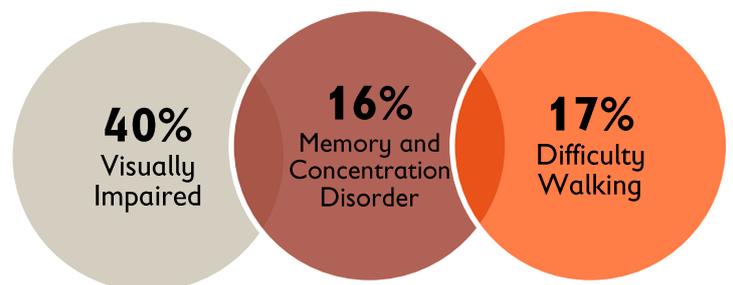
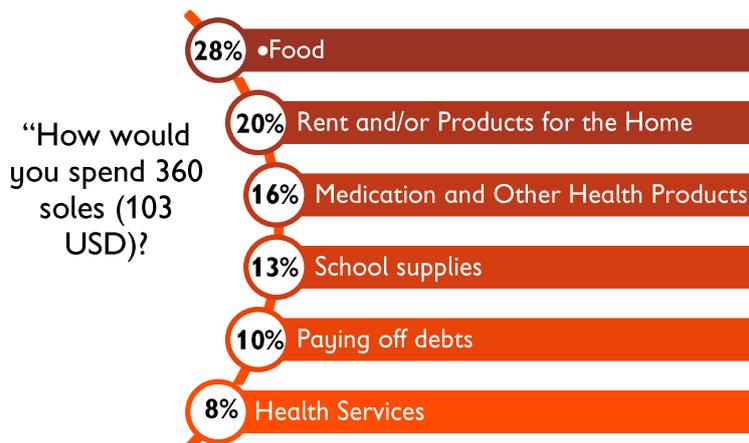
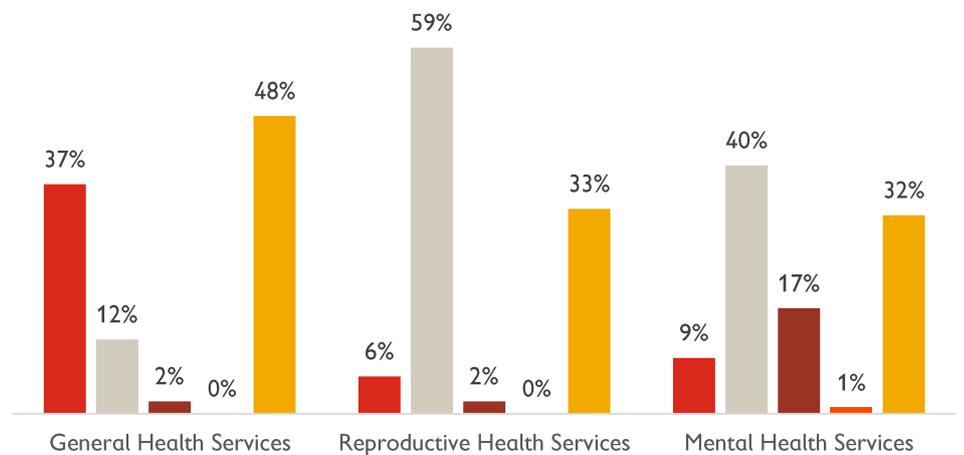
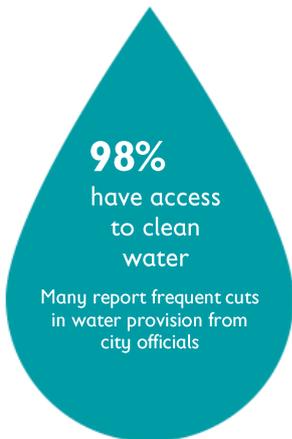
74% reside in single family homes. **23%** in multifamily housing. **9%** Are unaccompanied minors

42% have parents who reached secondary level education, **28%** university level



Perferred Type of Assistance

■ Provisions of Direct Service ■ Money ■ Donation of Goods ■ Voucher ■ I Don't Need Help



Report

Vulnerability Profile: Pregnant and Lactating Women (P&LW)

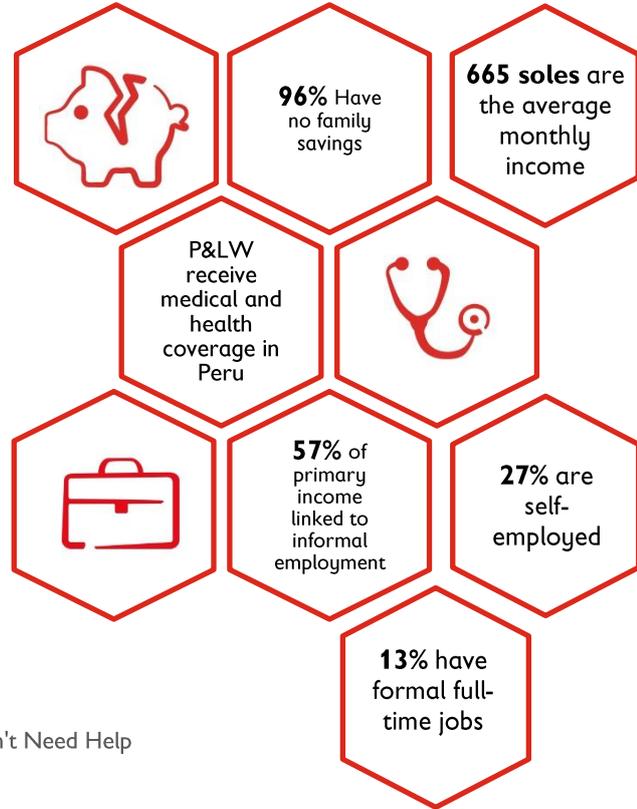


97% Of P&LW surveyed reported living in Peru between 1 and 36 months.

70% reside in single family homes. **27%** in multifamily housing.

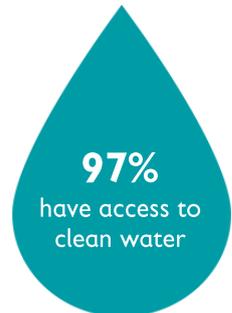
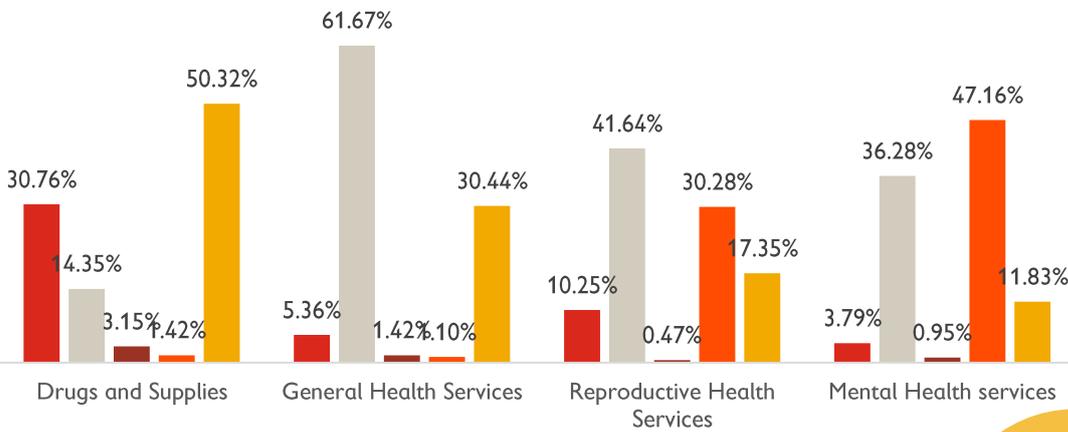
55% have reached secondary level education, **23%** university level

64% report the biggest barrier to healthcare is cost

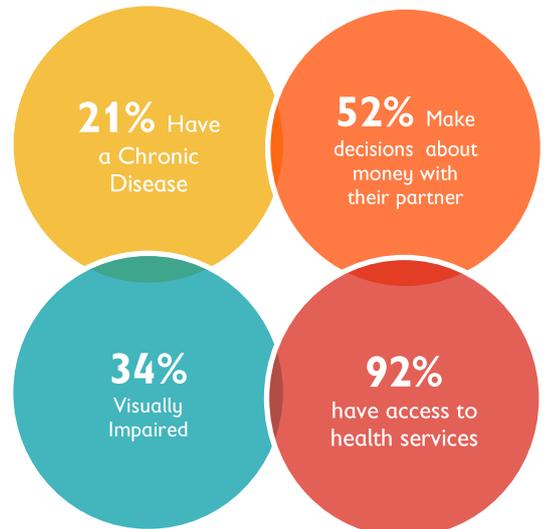
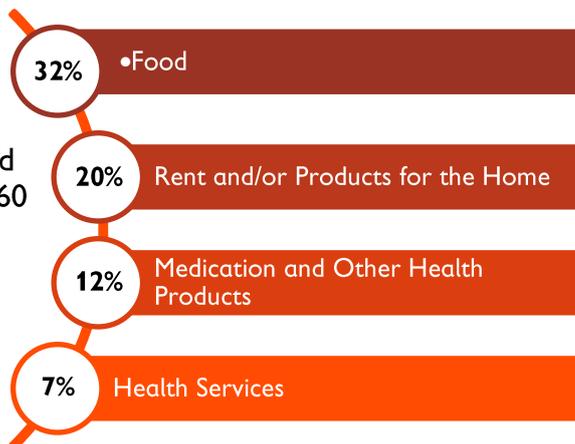


Preferred Type of Assistance

■ Direct Provision of Services ■ Money ■ Donation of Goods ■ Voucher ■ I Don't Need Help



“How would you spend 360 soles (103 USD)?”



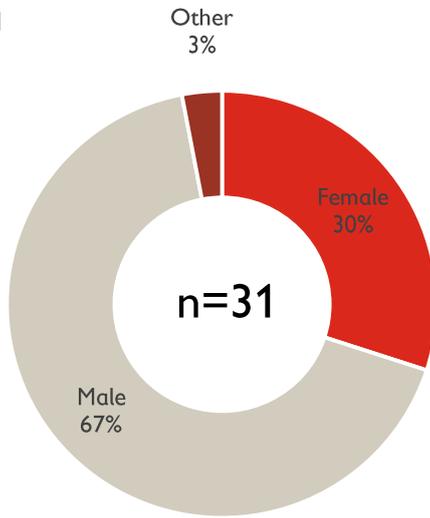
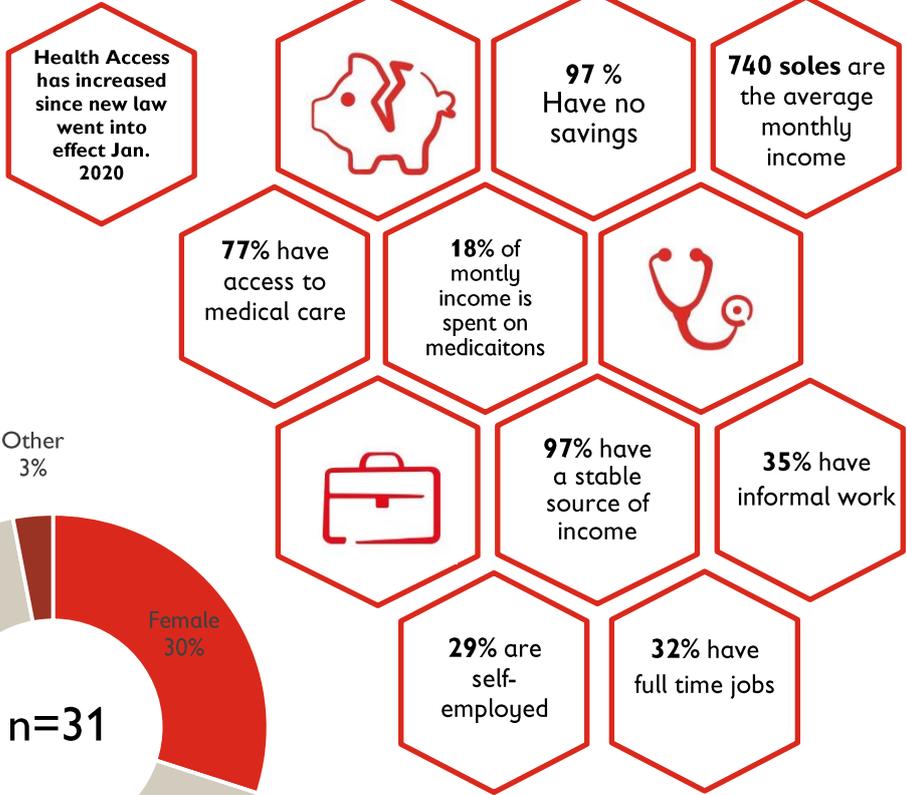
Report

Vulnerability Profile: People Living with HIV/AIDS

Barriers to Care:

Many respondents have reported gaps after arriving in Venezuela, and prior to January 2020, they did not have access to the healthcare system. Respondents state delays in ambulatory appointments interferes with the procurement of antiretrovirals and tests related to HIV. Despite receiving quality care from professionals, Venezuelans living with HIV fear social stigmatization.

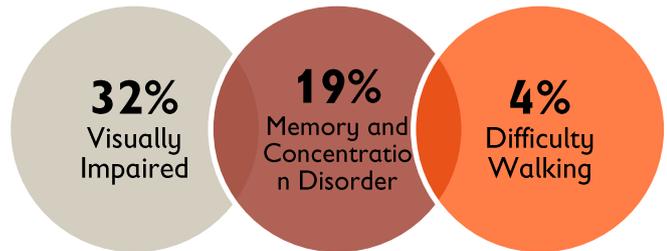
LGBTQI in a focus group discussed their desires to completely express their sexuality with peace of mind, access jobs, and to socially integrate with Peruvians



“How would you spend 360 soles (103 USD)?”

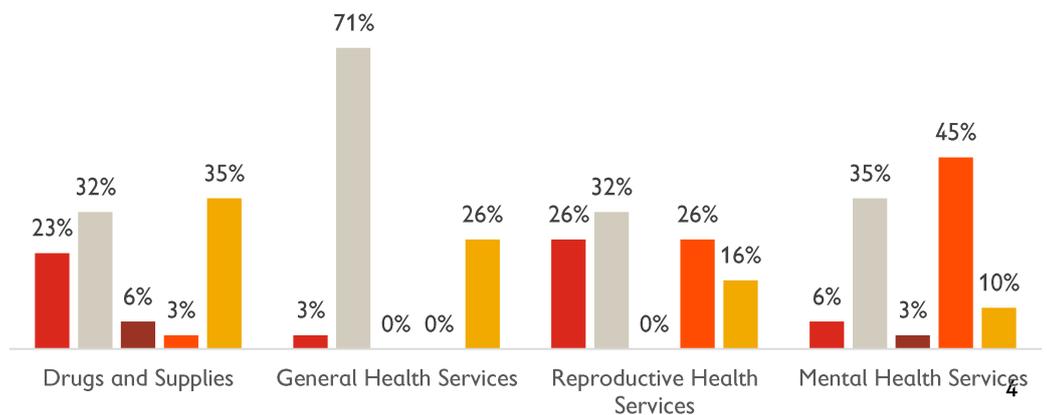
In Trujillo, 53% stated they would spend it on health issues or medication

17% in Lima would spend on health issues and medications



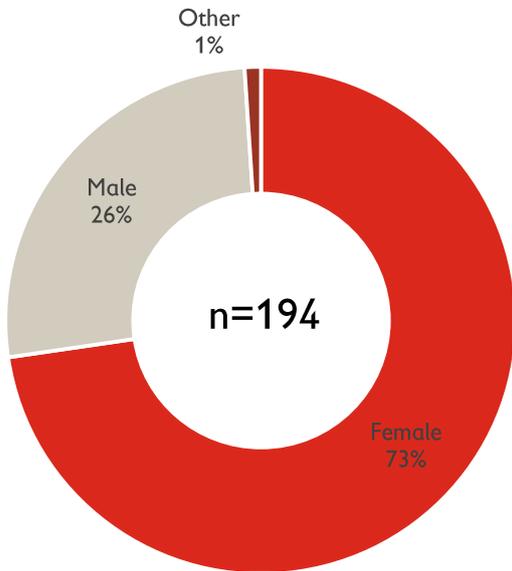
Preferred Type of Assistance

■ Provision of direct services ■ Money ■ Donations of goods ■ Voucher ■ I don't need any help



Report

Vulnerability Profile: People Living with a Disability



96% Of People with disabilities surveyed reported living in Peru between 1 and 36 months.

72% Reside in single family homes. **22%** In multifamily housing.

62% Have reached secondary level education, **22%** Reached university level

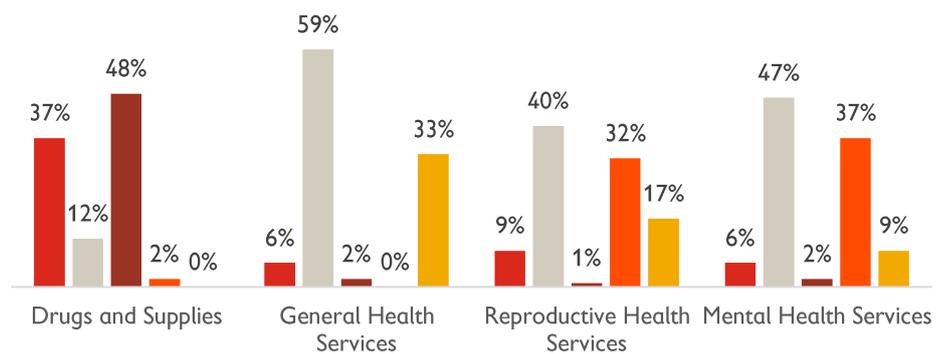


Only 80% have WASH needs met

Hygiene/sanitation facilities and services is a priority for the next 3 months for respondents

Perferred Type of Assistance

■ Provision of Direct Services ■ Money ■ Voucher ■ Donations of Goods ■ I Don't Need Help



“How would you spend 360 soles (103 USD)?”

