



RMRP FUNDING REQUIREMENT

45.6 M


CONFIRMED COVID-19 CASES AMONG THE GENERAL POPULATION*

1,947


CONFIRMED COVID-19 DEATHS AMONG THE GENERAL POPULATION*

94

Situation

This report provides updated information on the COVID-19 situation in the Caribbean, and the needs of refugees and migrants from Venezuela in light of the pandemic. This document presents the main government measures to stem the spread of COVID-19 and the response of R4V partners.

- The **COVID-19 pandemic reached the Caribbean** in March 2020, and the outbreak is expected to increase further over the coming weeks, with refugees and migrants and host communities at heightened risk. As of April 1, a total of 1,452 COVID-19 cases¹ and 65 fatalities² were confirmed in Aruba, Curaçao, the Dominican Republic, Guyana, and Trinidad and Tobago. **Local transmission is being reported in most countries.**
- The number of Venezuelans that have been tested positive for COVID-19 in the Caribbean is unknown, but at least **two cases** have been recorded in the Dominican Republic. There is a limited test kit supply in some of the countries, limited availability of isolation facilities, ventilators and personal protective equipments, and health services may become overwhelmed if the number of COVID-19 cases continue to rise.
- As a response to the pandemic, Caribbean Governments have implemented a series of measures to **contain, mitigate and prevent the spread of the novel coronavirus** and **mitigate the financial and economic impacts** of the COVID-19 pandemic in their countries.
- In **Aruba**, the Government has [restricted](#) entry to all travelers, including Aruba residents, effective 21 March³. The Government has issued a “shelter in place” order through April 20, effective March 29. People cannot leave their homes, except for essential functions. Additionally, a mandatory country-wide [curfew](#) is in effect from 9:00pm to 6:00am, and violators of the curfew can be fined. Schools are closed until 20 April. The government has also set up a free-of-charge [COVID-19 hotline](#), which is available in Spanish, released a [fiscal emergency plan](#) to facilitate the recovery of the economy, and introduced an [emergency social assistance fund](#) for nationals and legal residents.
- In **Curaçao**, the Government has [issued](#) a “shelter in place” order through 12 April. People cannot leave their homes, except for essential functions. Additionally, a [curfew](#) is in effect from 9:00pm to 6:00am, and violators of the curfew can be fined. Curaçao has [restricted](#) entry to all travelers, including legal residents, effective March 30, and is restricting traffic circulation by assigning circulation days based on license plate numbers. All maritime traffic is prohibited to enter Curaçao, with few exceptions. The government has also set up a COVID-19 hotline, which is available in Spanish.
- In the **Dominican Republic**, the Government has [closed](#) the borders for an initial period of 15 days, effective 19 March. A national curfew is in effect from 5:00pm to 6:00am from 20 March until 3 April. Public transportation has been suspended, limiting mobility in urban areas. Events and public gatherings are also suspended. The government has established a hotline to provide information on the novel coronavirus, and is working to expand access to COVID-19 tests through partnerships with private laboratories. Various [labour](#) and [social security](#) measures have been established to support formal and informal workers, and vulnerable families. These measures will likely not

¹ 64 in [Aruba](#); 11 in [Curacao](#); 23 in [Guyana](#); 1,745 in the [Dominican Republic](#); 104 in [Trinidad and Tobago](#)

² One in [Curacao](#); four in [Guyana](#); 82 in the [Dominican Republic](#); seven in [Trinidad and Tobago](#).

³ The border between Venezuela and Aruba and Curacao was closed prior to the present situation, since early 2019, and has not been reopened. Additionally, a visa for Venezuelans was implemented as of 1 April 2020.

benefit most Venezuelans in the Dominican Republic, as the majority of them face difficulties in regularizing their status in the country, and are consequently undocumented.

- In **Guyana**, the Government has [closed](#) the airspace to all international arrivals from 19 March to 1 May, with exceptions for medevac flights, cargo flights, technical stops, and special authorized flights. A [Public Health Ordinance](#) was issued granting the Ministry of Public Health authority to take a number of measures, including mandatory quarantine. The Government has received a donation of 700 diagnostic screening tests and 400 diagnostic confirmatory test kits from the Pan-American Health Organization and set up four quarantine sites. A [COVID-19 hotline](#) in English has also been set up.
- In **Trinidad and Tobago**, the Government [implemented](#) “stay at home” measures for the non-essential labour force from midnight 29 March until 15 April. Effective 22 March, the government announced the indefinite closure of its borders to all international flights, while schools and universities are closed until 20 April. In addition, visas for foreign nationals are currently suspended for an indefinite period of time. A COVID-19 hotline in English staffed with doctors have been set up. The government has also put in place various [financial and economic measures](#) to provide income, food, and rental fee support to nationals and permanent residents that have been financially affected by the COVID-19 pandemic, and, consequently, most Venezuelans will not benefit from these measures.

Needs and gaps analysis

- Refugees and migrants from Venezuela and host communities are at heightened risk as the COVID-19 pandemic spreads in the Caribbean. The outbreak of COVID-19 has prompted changes related to regimes for international movement and border management and risks affecting attitudes towards non-nationals. **Entry restrictions** implemented in the context of the COVID-19 pandemic coupled with previous measures such as the introduction of visa requirements for Venezuelans in most countries of the region has impacted the ability of refugees and migrants from Venezuela to regularly enter and stay in Caribbean countries. This situation will likely lead to increased **irregular border crossings** and greater **risks at sea** as Venezuelans increasingly recur to dangerous boat journeys in order to reach safety in the Caribbean. For instance, on 18 March, **a boat traveling from Venezuela sank** in the territorial waters of Aruba. Only four people are confirmed to be alive and are in Venezuela, while 18 of the 22 persons on board are considered to be missing. Colombian authorities have discovered three bodies on the coasts of La Guajira, in the Gulf of Venezuela, who could be linked to this incident, but their identities have not yet been confirmed. Without protection safeguards in place, international restriction of movement may also increase the **risk of denial of access to territory** for Venezuelans seeking asylum, leading to cases of **potential refoulement**.
- While the borders of Venezuela with neighboring countries have been closed to contain the spread of COVID-19, authorities from Venezuela and Guyana lack the capacity to monitor large stretches of the border given many blind/unofficial points of entry. In this context, the number of Venezuelans arriving in Guyana is likely to increase as well as risks associated to **smuggling and human trafficking**. The COVID-19 pandemic in Guyana is compounded by political instability, a weak health-care system and limited infrastructure, particularly in border and remote areas. Aggravating factors include limited access to water, lack of sanitation facilities and infrastructure, and limited presence of government authorities to enforce prevention and restrictive measures in remote areas.
- **Venezuelans have access to public primary health care** in the **Dominican Republic, Guyana, and Trinidad and Tobago**, although challenges persist due to language barriers in non-Spanish speaking countries, lack of health care facilities in rural and remote areas, and financial costs related to transportation. Venezuelans do not have access to the national health systems in Aruba and Curaçao, but the **Aruba** government has indicated that all individuals on the island, including those without a regular status, will have access to COVID-19 related care.
- As a significant number of Venezuelans remain in an **irregular situation** in the Caribbean, refugees and migrants without regular status **may refrain from reporting their health conditions** and access needed treatment due to fear of detection and being reported to immigration authorities. Furthermore, **many Venezuelans live in close quarters**

and share facilities like bathrooms, which does not allow for self-quarantine and social isolation measures. As the pandemic increases **pressure over health care systems** and decreases the treatment of other pathologies, including preventive services, persons with pre-existing illnesses are likely to face increasing obstacles in accessing treatment, adding to the challenges that existed prior to the pandemic. **Increased movement restrictions** due to COVID-19 may also **aggravate access to health care** and other forms of assistance.

- The COVID-19 pandemic will also have a significant **bearing on the economy of Caribbean countries** as most of them are heavily dependent on tourism. In this context, **refugees and migrants from Venezuela are disproportionately affected by loss of income** as most of them work in the informal labor market with no access to social protection systems, leaving them unable to rely on the government response offered to nationals. Preventive measures such as nationwide lockdowns greatly influence their ability to secure a basic living as they work in low-income jobs, which cannot be done remotely. Many sectors that employ Venezuelans (i.e. construction, leisure and tourism) have also been halted due to the pandemic, leading to the loss of jobs.
- As Venezuelans have very **limited savings and limited access to banking services or credit**, they cannot afford to be unemployed for significant periods of time. Those who are struggling to meet their basic needs (notably shelter, food and healthcare), may ignore prevention measures imposed by governments and **seek to bypass movement restrictions**. This situation makes them more susceptible to fall ill with COVID-19, affecting other members of their family, including those already vulnerable, and engage in **negative coping strategies** such as child labor and forced prostitution. Loss of livelihoods also make Venezuelans more **vulnerable to labor and sexual exploitation, and human trafficking**.
- **Excessive pressure on health systems and public essential services**, as well as secondary effects on the **economy and mobility**, and other factors, can also lead to **social discontent and tensions** as the effects of the COVID-19 pandemic heavily impact nationals as well as Venezuelans, who will have to compete in an already burdened labour market.
- Moreover, **gender-based intimate partner violence** is also expected to increase due to the quarantine coupled with disruption of some support services. The COVID-19 outbreak may also affect the **mental health and wellbeing** of Venezuelans and nationals due to isolation as well as concerns about other issues related to the pandemic, including physical safety, source of income, as well as concerns for family members.

Response

- National Platforms are supporting **preparedness and response plans** developed to contain the spread of the COVID-19 in the Caribbean. R4V partners are re-assessing their program criticality to deprioritize activities that require contact and outreach and are not life saving, such as workshops and trainings.
- R4V partners are adapting the **delivery of emergency assistance** (prioritizing food, hygiene kits, non-food items, and shelter support) and **psycho-social support and medical assistance** for the most vulnerable refugees and migrants from Venezuela, while also **reducing social contact** (through the use of remote interviews, cash-based interventions, and vouchers).
- **Communication with communities** has also been strengthened to increase awareness about the novel coronavirus as well as prevention measures. The Platforms are reverting to **online modalities for communication with communities and interventions** in compliance with government measures to contain the spread of COVID-19 and reduce exposure of staff and beneficiaries, while ensuring confidentiality, and consent to share information. Partners are also coordinating messages about COVID-19 sent to Venezuelans to avoid duplication and ensure that they are factual and useful.
- Additionally, R4V partners are activating their **communication networks** among stakeholders to share and receive information and to **identify volunteers who can support those most in need** with purchase and delivery of core items.

- Partners are also advocating for the inclusion of **refugees and migrants from Venezuela in the national responses** of Caribbean countries to COVID-19, including prevention, testing, and treatment, as well as social protection schemes. Inclusion will help to protect the rights of refugees and migrants from Venezuela, and also to protect public health and the spread of COVID-19 in the Caribbean.

Response gaps and challenges

- **Lack of funding** for the overall Venezuela response is a key challenge, while **additional aid** will be required to address the **additional needs from the COVID-19 outbreak** while sustaining the ongoing operations from the Regional Refugee and Migrant Response Plan (RMRP). Despite actions taken so far, gaps include **lack of availability of hygiene items** (i.e. masks, hand sanitizers) in most local markets, **movement restrictions** due to mandatory quarantine that limit the response, **limited kits for testing** and **health system capacity** for persons in need of isolation, challenges to conduct **outreach** to Venezuelans in remote and rural areas due to movement restrictions and connectivity, and **lack of access to medical and specialized care** for undocumented population.