

A multiagency assessment on health and education was conducted in **Guyana**. Vaccination and health coverage details were assessed and registered for **1,066 migrants/refugees**, 47% of whom were children and infants. The assessment revealed that only about 17% of the children registered were attending school in Region 1. The coping capacity of most schools in this Region is under significant strain.

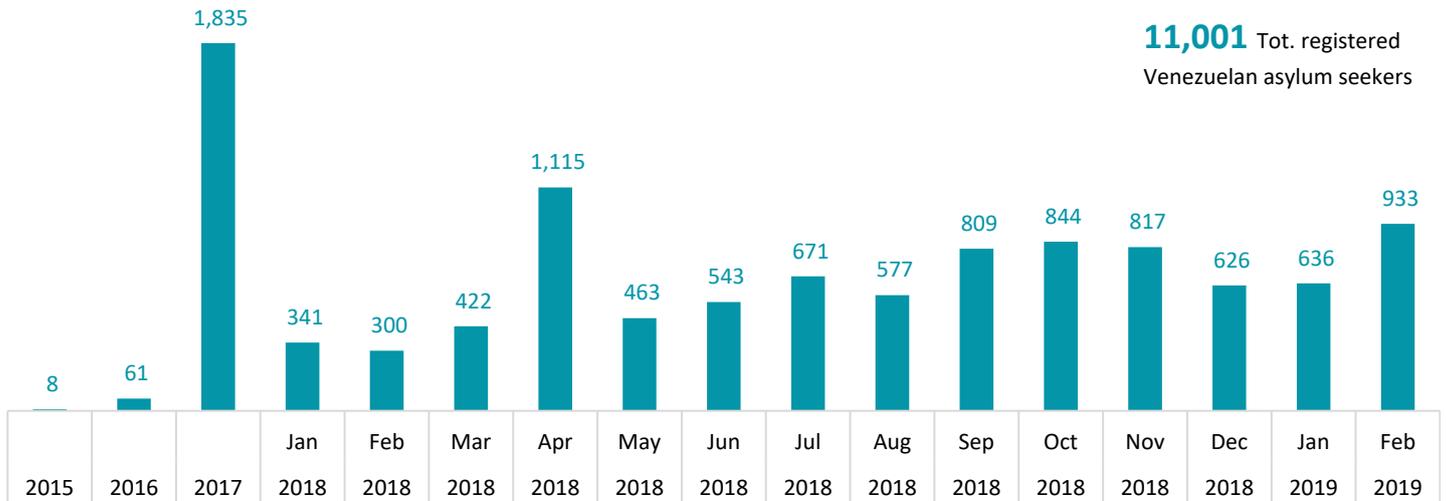
In **Trinidad and Tobago**, **548 Venezuelans** were interviewed to assess and identify the needs and vulnerabilities of the population. 64% of the interviewees were men and 36% women. In total, 45% arrived in Trinidad less than one year ago and 87% completed secondary school and left Venezuela while pursuing tertiary education. Employment or income generation activities and legal assistance were cited as important needs of the population.

Since January 2019, partners have provided **754 Venezuelans entering Guyana** with counselling on regularization of stay, life-saving information, as well as food support and temporary accommodation.

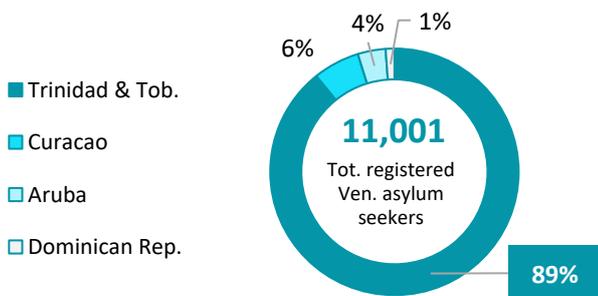
KEY FIGURES

Over **146,900¹** Venezuelans arrived in the Caribbean sub-region since 2015.

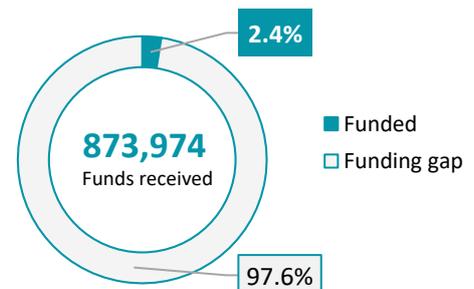
No. of Registered Venezuelan asylum seekers by month (2015 – Feb 2019)²



Registered Venezuelan Asylum Seekers by country (2015 to February 2019)



Total Financial Requirements



¹Caribbean sub-region planning figures (end of 2018).

²The chart shows the monthly registrations of new Venezuelan asylum-seekers in Aruba, Curacao, Dominican Republic, and Trinidad and Tobago. Figures by month are not cumulative.

OPERATIONAL CONTEXT

- **Access to territory and public services** for refugees, asylum-seekers, and migrants are among the most critical issues in many Caribbean countries. This is exemplified by refoulement and/or deportation at ports of entry, rejection of service in public health centers and schools, mandatory health screenings for status regularization and lack of proper referral systems for survivors of gender-based violence.
- **National authorities are engaging with the R4V partners** and discussing the processes needed to formulate new policies to ensure that appropriate responses are in place, and where relevant, the adoption of new legislation.
- **Lack of funding** for new or expanded activities as proposed under the R4V and the lack of comprehensive multi-sectoral needs assessment are impacting the overall ability of partners to deliver on the planned response.
- **Lack of information on in-depth multi-sectoral needs** has also hindered the definition of clearer targets and strategies.

RESPONSE OVERVIEW AND FUNDING UPDATE

Area of Intervention 1: Direct Emergency Assistance

In Curaçao, 100 Venezuelans were interviewed in order to identify their needs and vulnerabilities and guide R4V partners' humanitarian response. In Dominican Republic, R4V partners held a workshop to resume coordination meetings and to establish regular coordination mechanism among the partners and key stakeholders and agencies responding to the Venezuelan situation.

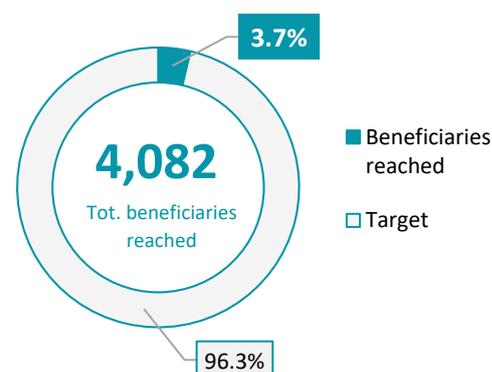
The partners continue to respond to the inflows of Venezuelans in Trinidad and Tobago. Nutritional screening of children under the age of 5 continues along with the promotion of healthy infant and young child feeding practices among caregivers and parents. In February, 123 Venezuelan households (218 individuals) were approved for assistance in the form of cash grants or vouchers. The partners are working with the local bank to formalize the procedure for Venezuelans to access such assistance. In Trinidad and Tobago, partners conducted 548 surveys to assess the needs, identify the vulnerabilities, and register the mobile population in Trinidad and Tobago. Some key findings include 64% are men, 36% women, 87% completed secondary school, and left Venezuela while pursuing tertiary education. Income generation or employment and legal assistance are among the top needs highlighted in the survey. A subsequent report was compiled and shared with the Government of Trinidad and Tobago.

Partners continue to work with the Government of Guyana and key stakeholders to respond to the inflows of Venezuelans in the country. In February, a multi-agency field assessment mission was conducted by the partners and government agencies to assess the situation in Region 1, Barima-Waini. Eleven communities were visited and 1,066 individuals (447 children under 18 years old and 56 under 1 year old) were assessed in the area of vaccination and health. Safe water supply and sanitation facilities are other areas being addressed in the borderline communities hosting Venezuelans. It is expected that by August 2019, 6,000 persons will have daily access to WASH services, 4,000 being children. Drinking water testing will also be conducted to detect contamination, along with storage containers and purification tablets to enable good hygiene-related practices.

In terms of education, partners have been working closely with Government counterparts. In Guyana, a partner is collaborating with the Ministry of Education to address the need to increase resilience for service delivery in host communities by addressing the immediate needs of schools and by rolling out a safe-school initiative. In Trinidad and Tobago, an innovative e-learning programme is being established that will be linked to the Trinidad and Tobago curriculum and the Caribbean Examination Council, the regional examining body.

Area of Intervention 1 is targeting around 107,000 people in 2019 and 4,082 were reached as of February.

Overall progress Aol 1



Area of Intervention 2: Protection

In Aruba, three advocacy meetings were held with authorities for alternative legal pathways while in Curaçao two separate discussions were held with local authorities.

The partners in Dominican Republic are continuously providing support to those in vulnerability situation. During the reporting period, 2 cases were referred to prevent deportation, however neither needed interventions for release. On 19 February, the pilot phase of Protection Monitoring (PTM) was rolled out and community meetings were held in 5 provinces (Santiago, La Romana, San Cristóbal, Santo Domingo, Punta Cana).

In addition, since 16 February, Venezuelans in the Dominican Republic took part in participatory assessments and feedback mechanism to improve service provision by partners. Other areas of interventions to begin shortly including the provision of psychological assistance and assistance to persons with specific needs.

The support to vulnerable groups is a critical component of the R4V areas of intervention. In Trinidad and Tobago, 97 people were provided with access to medical services, including Female Health Packages, STI³ tests and treatments, Urine Pregnancy Tests and Urinalysis. The youngest beneficiary was 12 years of age and the oldest, 80 years old. There has also been a noted increase in gender-based violence cases, and the first case of child molestation was registered during the reporting period.

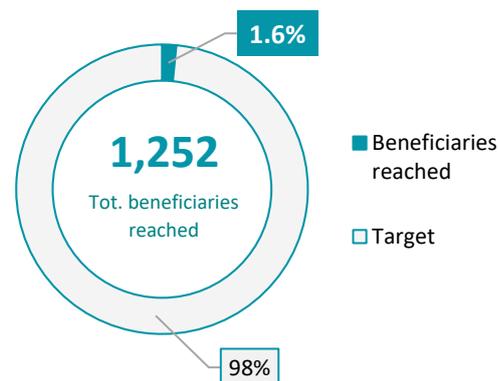
The partners continue to provide psychosocial counselling to Venezuelans to address the needs of the mobile population along with the provision of community self-management support. In Trinidad and Tobago, the partners have reported an increase in the number of beneficiaries accessing the service and attending their scheduled sessions, compared to 2018. Sensitization of refugees and migrants on reporting child protection issues and health were disseminated in the forms of bilingual animations (English and Spanish) with the expectation of reaching approximately 7,000 persons in host communities for 2019. Further, the partners are collectively developing a joint advocacy communication strategy on protection for Trinidad and Tobago.

As of February, 398 Venezuelans received counselling support in Guyana. Partners have continued to advocate for the establishment of information and protection desk facilities. Twenty-six (26) Individuals from government agencies and non-governmental organizations were trained in the area of Trafficking in Persons.

In Trinidad and Tobago, 218 children were provided with psychosocial support (PSS) including access to child-friendly spaces. Two additional child friendly-spaces will be opened in central and south communities in Trinidad and Tobago by March. Children accessing these spaces will be provided with psychosocial support, learning activities, play and information on child abuse/SGBV prevention and reporting.

Area of Intervention 2 is targeting around 78,000 people in 2019 and 1,252 were reached as of February.

Overall progress AoI 2



³ Sexually Transmitted Infections.

Area of Intervention 3: Socio Economic and Cultural Integration

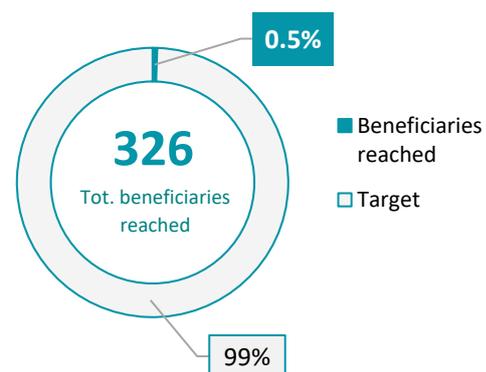
Incomplete, and sometimes incorrect information about the reason why Venezuelans are fleeing their country, and speculation over the impact of their presence in Caribbean countries, coupled with the increased pressure these arrivals apply onto national services, is also fomenting an unwelcoming environment and fuelling xenophobic and discriminatory sentiments in some host communities. This shows the need for social inclusion and inter-community dialogue activities.

In Guyana, partners have continued, throughout the month, to advocate for the inclusion of vulnerable persons from Venezuela in livelihood activities, while assessments of the impact of Venezuelan migrants/refugees on the national labor market have been conducted. Enabling Venezuelans access to existing public services is another important area of intervention of the R4V. In February, 111 Venezuelans benefitted from accompanied visits to government service providers.

Advocacy and sensitization efforts are underway in Trinidad and Tobago, where partners conducted one sensitization activity with the Ministry of Health (MoH), aimed at supporting national health care practitioners with culturally sensitive and trauma response. A joint advocacy was conducted on 18 February during the Parliamentarian sensitization activity on HIV. While health services are already being provided, other referral services are needed. Partners have also conducted public awareness interventions, including a media workshop, attended by 11 media professionals, representatives of digital media, press, and radio, and film. Journalists were taught key principles related to protection and given an overview of the Venezuela Situation. Another activity, involving the University of Trinidad and Tobago’s (UTT) Academy of Performing Arts, supported 10 beneficiaries who are artisans through a cash for work programme, working alongside UTT students in fields of music, acting, and design.

Area of Intervention 3 is targeting around 59,000 people in 2019 and as of February, 326 people (0.6% of the target) were reached.

Overall progress AoI 3



Area of Intervention 4: Strengthening the Capacity of Host Government

A critical component of the R4V is the strengthening of host government capacity to deliver essential services such as education, health, and social protection.

Partners in Curaçao have completed the mapping of the government’s response to identify gaps in services and contribute to the establishment of a functioning national information system addressing vulnerability and population dynamics. More funds are needed to implement activities to support women who are victims of sexual and gender-based violence, increase the capacity of local schools also hosting Venezuelan youth, and provide medicines and other supplies to health clinics also treating Venezuelans.

In Trinidad and Tobago, partners have activated a Child Protection/SGBV interagency working group aimed at inter alia and streamlining responses to child protection and SGBV cases including trafficking. This will also help to establish an information sharing system and strengthen referral pathways to appropriate services. Finally, to strengthen the capacity of the government, an additional 35 professionals were trained as trainers in providing psychosocial support to both the host and migrant population.

In Dominican Republic, work has started to conduct information campaigns to reduce xenophobia and sensitize and build protection mechanisms with one registered case that received support. Partners will also hold a joint planning workshop in April with ONR to strengthen asylum system using some aspects of the QAI methodology. More activities are expected to begin shortly.

COORDINATION

The Caribbean sub-region coordination platform covers 14 appealing partners in five Caribbean countries, namely the Dominican Republic, Trinidad and Tobago, Guyana, Aruba, and Curaçao. However, not all R4V partners have a permanent presence in these countries and some are based in another country that is currently not part of the R4V Caribbean sub-region. With an approximate combined population in need of international protection (146,900) ranking fourth in the Americas after Colombia (1 million), Peru (506,000), and Ecuador (221,000), the coordination platform must negotiate five different social, political, and cultural contexts in a region that has not previously had the need for coordinating at such a level of complexity and whose humanitarian actors have been operating under an already-established internal dynamic. At the moment, all coordination is done by the Caribbean sub-region coordination team based in Trinidad and Tobago, which is gradually preparing R4V partners in the Dominican Republic, Guyana, and Trinidad and Tobago to put in place a permanent national coordination cell, or Working Groups, in charge of analysis, information sharing, and creating consensus for advocacy messages and approaches to the Venezuelan response in a structured manner. They will also be the point of contact in those countries for all coordination matters. Aruba and Curaçao will remain, for the foreseeable future, under the Caribbean sub-region coordination team. The Caribbean sub-region team and national coordination cells will make use of the Caribbean log frame to keep track of indicators, implementation rates, funding shortages, as well as conduct gap analysis, determine the need to bring outside support, and conduct verification missions to the field.

CONTRIBUTIONS

Partners in the response are very grateful for the financial support provided by donors, contributing to their activities with un-earmarked and earmarked funds.

Brazil | CERF | Denmark | European Union | France | Germany | Holy See | Italy | Japan | Netherlands | New Zealand | Norway | Private donors | Spain | Sweden | Switzerland | United Kingdom | United States of America

PLATFORM PARTNERS

FAO | ILO | IOM | PAHO | Save the Children | UNAIDS | UNESCO | UNFPA | UNHCR | UNICEF | UNODC | UNWOMEN | WFP

For more information, please contact:

Robert Natiello, Regional Coordination Officer for the Caribbean and Chief of Mission, Guyana, **IOM**, rnatiello@iom.int

Joel Andersson, Senior Field Officer, **UNHCR**, anderssj@unhcr.org