Situation/Context Information

- On 15 March President Martín Vizcarra declared a State of National Sanitary Emergency for 90 days. Measures include closure of all borders to non-commercial maritime, terrestrial or aerial transportation, and a 15 days period of quarantine. The decree includes the restriction of constitutional rights and liberties on free passage throughout the territory, freedom of assembly and personal security. There are exceptions to the movement restrictions for the use of pharmacies, banks and commercial establishments selling basic needs products, which will remain open until 4pm only.
- On 18 March the government announced a state of exception and mandatory curfew from 8 pm to 5 am. This measure reinforces the announced quarantine as the number of confirmed cases has increased to 234. Moreover, private vehicles will not be allowed to circulate. Military and Police forces will support the oversight and enforcement of these measures.
- The Ministry of Health (MINSA) is the one authority currently performing detection tests.
- To date, no cases of COVID-19 have been informed amongst refugees and migrants from Venezuela.

Key Impacts, needs and risks:

- The closure of the borders and the declaration of quarantine had a strong impact at the Binational Assistance Border Centre (CEBAF) located in the northern border with Ecuador. Exceptionally, on 16 March some 115 asylum requests that were pending at the border, were evaluated in an accelerated manner by the Special Commission for Refugees (CEPR) and through partners’ advocacy and support almost 200 persons could access the territory and were taken to temporary shelters where they are provided with food rations and NFI kits. The relocation of these people was important, within the context of the current situation and in the best interest of Peru’s public health. Yet, during the quarantine authorities may no longer able to receive asylum claims at the border, constraining access to territory and asylum.
- Movement restrictions and the quarantine impact the overall response across the country and at the borders, where services provided by partners (including the provision of drinking water) are temporally suspended. The vulnerable situation of many refugees and migrants from Venezuela, especially considering that more than 80 per cent of those economically active are informal workers, is heightened by the risk arisen with the spread of COVID-19 and the measures to prevent and mitigate it. There is an increased need to access WASH services
- Families with no access to shelter or financial resources to afford accommodation, food and health care during the quarantine are being identified, however the restrictions impact the efforts.
- Increasing need of psychosocial support during the quarantine, support to survivors of GBV at risk of revictimization, medical advice for pregnant women (specially for difficult pregnancies).

Response/preparedness

To date, six emergency coordination meetings took place:

- On 16 March Meeting held by the National Humanitarian Network and led by the National Institute of Civil Defence (INDECI)- authorities requested information on three aspects related to refugees and migrants from Venezuela:
  1. The location of shelters and the number of persons in each one to develop a possible assistance protocol with the MINSA.
2. Contact details of key essential field and office personnel within organizations assisting refugees and migrants to ensure their free passage.
3. Location and numbers of particularly vulnerable refugees and migrants to assess the possible support from the Ministry for Development and Social Inclusion.

- On 16 March- Extraordinary GTRM Coordinators Meeting- followed on the points raised during the meeting of the National Humanitarian Network. **Actions taken:**
  1. The GTRM is compiling information on existing shelters across the country.
  2. Information on the number of vulnerable refugees and migrants in the country and their location is being consolidated. The RMIPR 2020 sectorial Persons in Need data (broken down by region) has been shared with the Peruvian government.
  3. The Communication working group shared a kit with information and key messages for partners to ensure messaging homogeneity.
  4. The Communication working group is mapping partners working through hotlines and the information they are providing, through a shared online document.

- On 17 March - Extraordinary Cash-Based Interventions WG meeting focusing on the identification of vulnerable persons in urgent need of support during the national emergency. It was previously thought that refugees and migrants could be included in the emergency provision of cash by the Peruvian government, however, a decree made their inclusion more difficult. **Actions taken:**
  1. An emergency CBI matrix is being filled by partners to identify the organizations with available resources for cash transfers, amounts and modalities.
  2. Partners are identifying persons at heightened vulnerability in need of CBI assistance.

- On 18 March- Extraordinary Protection WG sub-sectors’ meeting focusing on access to territory and documentation, child protection, gender-based violence (GBV), human trafficking and psychosocial support. **Actions taken:**
  1. Partners are establishing pathways for child protection, GBV, and human trafficking.
  2. An emergency matrix has been shared to identify organizations with available resources for the response to the COVID-19 emergency, map the activities that can be performed remotely, and options for alternative shelter.
  3. GTRM partners are advocating and coordinating with the National Humanitarian Network and the INDECI to ensure vulnerable refugees and migrants have access to governments financial support. More than 200,000 persons are at heightened vulnerability during the quarantine.
  4. Organizations are identifying persons with heightened protection risks, and mapping the main concerns received from refugees and migrants on shelter, access to food and employment.

- On 18 March- Extraordinary meeting of the Health Working Group- the Health Board of the National Humanitarian Network and the GTRM Health Working Group merged efforts to operate under joint coordinated actions during the national sanitary emergency. **Actions taken:**
  1. Partners are
    a. mapping vulnerable populations and evaluating the impacts of the emergency.
    b. identifying needs in the Public Health system that need to be supported.
    c. identifying and defining key actors, roles and responsibilities.

- On 19 March- Second Extraordinary GTRM Coordinators Meeting- **Actions taken:**
  1. Protocol for CBI is being adapted for the emergency.
  2. The Communication WG will share materials and a banner with relevant information on the mapped hotlines for their dissemination.
  3. The Education WG is identifying, alongside education authorities, the strategies needed to habilitate distance learning (including virtual learning) for students.