OVERVIEW

The continuous spreading of COVID-19 in the Region, added to the response measures implemented by several countries to contain the virus and fight against it at a regional level, is producing differentiated changes and impacts that have worsen the situation faced by the migrant and refugee population and by host communities. The impact of the virus and the increased vulnerability of migrants and refugees have produced some profile and flow changes.

According to the International Organization for Migration (OIM): ‘There has been an increase of informal crossing at the borders which results in an increased vulnerability of migrant population. Women and girls are especially vulnerable to become victims of human trafficking”. In many countries there has also been a rise of xenophobic rejection, gender-based violence and domestic violence against migrants and refugees. In the specific case of migrant women, this discrimination can have consequences such as the lack of adequate care in a medical centre and other healthcare settings that are directly related to being women (such as pregnancy care, or legal and psychosocial support due to gender-based violence). Furthermore, quarantine and mobility restrictions force many women to isolate themselves with their abusers or potential abusers. Existing gender-based violence is exacerbated by labour and migration uncertainty, as well as by social distancing. For many migrant women who do not have sufficient support networks in transit and destination countries, isolation with their aggressor is a potential danger”.

Regarding migration flows, there has been a significant increase of migrants returning to Venezuela. Many of the returnees are going back to their country because they have no opportunities in the host and transit countries. This is an alarming situation considering the high risks migrants may face particularly regarding their health and protection. Some Venezuelan migrants have been returned according to organized actions — such as the Colombian case — but they may face even harder conditions in Venezuela. Many have experienced limited access to food, money and temporary shelter since Venezuela is still going to a specific humanitarian situation.

Thousands of Venezuelans have decided to set out long return journeys on foot, from Colombian inland regions to the border, and some have started to return from distant countries such as Ecuador or Peru.

Many others are still stranded between closed borders or have lost their jobs in their host countries with no access to basic rights and unable to provide basic needs for themselves and their families. This situation is specially alarming in Chile and Bolivia.

The Red Cross actions within the framework of the Regional Population Movement Emergency Appeal (see the link to the 18-month Operation report on the footnote) has been drastically reduced

1 https://rosanjose.iom.int/site/es/blog/los-riesgos-adicionales-de-la-covid-19-para-las-mujeres-migrantes-y-como-abordarlos
due to this situation, but in line with the Movement’s Seven Principles it is essential to continue supporting the most vulnerable people to protect their rights and dignity. Despite the difficulty of restrained mobility, lack of resources and volunteers, we are still working to ensure protection and human dignity for the most vulnerable.

This month there have been some operational changes. It is worth mentioning that the IFRC and the National Societies in the Americas are still considering the most vulnerable people as priority groups, that is, the migrant and refugee population — which have precarious, non-standard and insecure jobs or are unemployed — as well as high-risk groups such as elderly people, pregnant women, women traveling with children, and unaccompanied minors. In this sense, and to adapt the operation to this new context, the IFRC is fostering activities focused on Protection, Community Engagement and Accountability, and actively promoting Cash and Voucher Assistance activities.

The following is an update on the activities and measures taken by countries and National Societies within the framework of the Regional Population Movement Emergency Appeal operation.

For a better understanding of the activities that are taking place, please refer to the link below to a specific map. It offers geolocation information on the Humanitarian Service Points (HSP) which are still active within the operation in comparison to the ones that have been temporarily suspended.

https://go.ifrc.org/emergencies/3122#additional-information

3 https://media.ifrc.org/ifrc/document/humanitarian-service-points/
RESPONSE

ARGENTINA With regard to the previous month, the Argentine Red Cross (ARC) continues to implement their Contingency Plan on Human Mobility Response⁴.

In particular, the ARC is offering a hotline service with two posts dedicated exclusively to the assistance of migrant population.

This service of assistance and follow-up aimed at the migrant population consists of the following means:

- Email: migraciones@cruzroja.org.ar
- WhatsApp: +54 9 11 5753-2615
- Hotline: +54 9 11 3190-9827

Food boxes have been distributed to 600 people since one of the primary needs is to ensure food security.

Specifically, for the lines of action related to emergency situations and extreme need, the following is guaranteed:

- Advice, documentation inquiries, protection situations, among other levels of access to information, which may be consulted on our virtual channels and obtain immediate response.
- Individuals who have a need of shelter (considering that the demand will decrease, since this need is mainly related to the population that has just arrived in Argentina) will be able to consult online and schedule interviews on specific days and times, following recommended guidelines.
- As for the Restoring Family Links (RFL) programme, specific needs regarding ‘Search Requests’ will be handled online, and the interviews for completing forms will be conducted by telephone and will be signed by the Argentine Red Cross personnel member who followed up on the call; if an extremely urgent need to use our connectivity services arises, the procedure, day, time and branch/central office must be coordinated through online channels.

Furthermore, since the livelihoods of migrant population have been significantly affected, the Cash and Voucher Assistance programme will be continued and strengthened.

BRAZIL Regarding the impact of COVID-19 on the operation, the coordination between the IFRC and the International Committee of the Red Cross (ICRC) is being strengthened.

⁴ Source: Argentinan Red Cross - “Programa Nacional de Movilidad Humana Plan de Contingencia: Pandemics COVID-19”.
A new agreement has been signed to achieve the four operational goals related to the Venezuelan migration in Brazil, particularly in the states of Roraima (RR) and the Amazon (AM).

- **Goal 1**: Migrants have access to key information.
- **Goal 2**: Authorities are supported in the delivery of health care to the migrant population and host communities by the provision of first aid training to migrants and camp’s personnel.
- **Goal 3**: Migrant population receives comprehensive assistance and protection according to the stage of their migration journey in Boa Vista, Pacaraima and Manaos.
- **Goal 4**: Vulnerable populations have more access to water, sanitation and hygiene services.

This cooperation has been essential to respond to the increasing needs of migrants in the northern regions of Brazil. The extension of activities in Manaos have also given the opportunity to involve the local Red Cross branch in the migration response. In this sense, positive progress has been made in terms of capacity building. The increase of activities related to WASH, in addition to the donations to help fight the COVID-19 outbreak, has given positive results.

Likewise, an agreement with the Brazilian Red Cross is being signed to foster actions focused on protection and hygiene promotion.

**CHILE** In Chile, the COVID-19 outbreak has had a dramatic impact on the migrant and refugee population. Not only those migrants that have just arrived in the country have been affected, but also the ones who have lived in Chile for a long period of time. Most migrants that have lost their jobs and have no income are unable to pay rent and have lost their economic independence. They do not have access to food and cannot meet their basic needs. Consequently, this economic situation increases anxiety, stress and uncertainty among migrants.

According to a Chilean Red Cross’ report, there has been a significant increase in the number of homeless migrants in the city of Arica, and many migrants are facing the potential risk of losing their homes. The migration flow has not stopped at the Peruvian border, which means that migrants are still entering Chile through unauthorized routes. Furthermore, there is an increase in the number of migrants stranded at the borders (particularly Peruvian, Bolivian and Haitian individuals). Some of them have received assistance and shelter from local authorities and humanitarian organizations.

The IFRC Country Office and the Chilean Red Cross have updated a response plan of action within the framework of the migration operation in the region. Furthermore, despite the limited resources to provide self-protection equipment and the restrained mobility, it has been possible to ensure a good

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coordination between the National Society’s leadership and its technical areas, which has made possible to carry on with several activities within the operation, as described below.\(^6\)

**Cities of intervention**

- Santiago
- Antofagasta
- Iquique
- Arica

**Activities that will continue**

- Distribution of humanitarian aid, in particular, distribution of kits (food, protection wear, hygiene and safe water) to women, men, pregnant women and children. This distribution is made by means of home delivery and during field visits, and at Red Cross’ offices or partner’s offices.
- Prevention activities based on a communication and awareness strategy on self-care against the COVID-19 outbreak.
- Assessment of Migrant’s needs and vulnerabilities in the city of Arica.
- Remote and in-person psychosocial support at the two shelters located in Santiago, aimed at RC personnel and migrant population.
- Imminent activation of a hotline for migrants in Arica, and psychosocial support in Santiago.
- Weekly online assistance for Chilean Red Cross’ volunteers.
- Online training for partners in prevention and security measures against COVID-19 during the delivery of humanitarian aid.

**Temporary suspension of activities**

- Restoring Family Links (RFL)
- In-person training for volunteers

**GUYANA** As observed in many countries in the region, migrants and refugees in Guyana are more vulnerable to the spread of the virus. Many communities are completely closed and access is not allowed. The Guyana Red Cross Society will continue to promote hygiene and distribute hygiene items in close coordination with the Ministry of Health in Georgetown. In addition, increased support is planned for the migrant population but also for the host community, particularly in terms of health prevention. Specifically, 200 hygiene kits and 500 water filters will be distributed.

\(^6\) Source: IFRC’s office in Chile – Chilean Red Cross – “Plan de Contingencia - Proyecto de Movilidad Poblacional”. 
ECUADOR In Ecuador, the COVID-19 outbreak has had a dramatic impact on the migrant and refugee population, as well as in other countries in the Region. The migrant population, in particular Venezuelan nationals and specially those who don’t have legal migration status, have no access to social assistance (such as food or emergency vouchers) that the national government provides to vulnerable individuals and families within this pandemic situation. Furthermore, the migrant population (with legal or illegal migration status) strongly feel that they have no access to the public health system, even though in Ecuador access to health is a universal right regardless of nationality or migration status. However, it has been reported that access to public health has been limited in many cities due to the COVID-19 outbreak situation, and the migrant population might be the most affected by these restrictions.

Within this framework, the Ecuadorian Red Cross is still implementing activities in favour of the migrant and refugee population in the country. The National Society’s Human Mobility area has prepared a “Alerta Preventiva de la Situación de Movilidad Humana en el contexto de COVID-19” (Human Mobility Preventive Alert in the COVID-19 Context) that includes planning details (See attached document). Furthermore, in direct coordination with other humanitarian organizations and NGOs working with migrant population — including self-organized migrant networks — food, cleaning and hygiene kits have been distributed to shelters and organizations that provide assistance to people on the move in the provinces of Carchi, Imbabura, El Oro, Guayas, Pichincha, Cotopaxi and Sucumbios. In addition, the RFL point at the Scalabrini shelter in Ibarra is still active, and another RLF point has been set up at the ‘Casa Amiga’ shelter in the province of Sucumbios.

One of the best achievements of the Ecuadorian Red Cross with the support if the IFRC is the implementation of a The Cash and Voucher Assistance (CVA) Programme. It has been adapted to the current context of state of exception in the country. The CVA programme allows vulnerable families and individuals with movement restrictions to enter an online platform where they can request the access to cash from ATMs at a national level without using a bank card and according to security, financial and administrative standards.

PANAMA In Panama, the operation has been focusing more on providing assistance and support to migrants and refugees hosted in ‘La Penita’ and ‘Lajas Blanca’ camps, in the Darien province. The impact of this operation has been different to the one experienced by other countries involved in the Regional Population Movement Appeal.

As of 23 April 2020, 1,779 individuals are living in ‘La Peñita’ camp. It has been confirmed that 17 of these individuals are positive cases of COVID-19, and other 60 are potential cases. To prevent the spreading of the virus in ‘La Peñita’ camp, people infected with COVID-19 have been moved to the ‘Lajas Blancas’ camp. Lately there have several problems and high-tension situations in the Darien region due to several factors such as lack of information, the long stay of the migrant population in
the camps given the closure of borders, the discrimination against migrants from local communities, and the lack of universal basic services. Despite of this difficult context and given the movement restrictions and security issues, the IFRC and the Panamanian Red Cross continue to support the operation.

The following focus areas are being supported:

**Health**
A team of 1 doctor, 1 professional nurse, 1 nurse technician and 1 mother-and-child care technician is providing basic medical care, first aid, vaccination, wound dressing, nutrition screening and health care services to pregnant women and parents with babies or children.

**Water and Sanitation**
The local drinking water network has been equipped with a 75,000 litre-per-day water treatment equipment, and the Water and Sanitation team has provided training to the local water committee so they can be self-sufficient in the production of safe water, sanitation measures and hygiene promotion aimed at local residents and in-transit migrants.

**Shelter**
By involving the migrant population, the host community and the local authorities, it was possible to organize groups to work on the improvement of temporary shelters. (Materials and tools were supplied in order to build emergency shelters and 12 firewood cookers for 700 people).

**Protection**
A team of 3 RFL experts, with the support of the ICRC, is offering hotline and Internet call services. They are also disseminating self-protection messages among migrants on the move.

Furthermore, the RC is providing training support to local authorities for the implementation of a distribution system in line with humanitarian standards.

**PERU**
In Peru, the IFRC Country Cluster Support Teams in Lima are still working according to the operational plan which has been adapted to the current situation. Community activities and permanent assistance posts have been suspended. However, remote assistance is being provided to respond to the needs of the migrant population in the country, following the biosecurity and social isolation measures.

The main activities that continue to be carried out within the framework of the Regional Appeal are the following:

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• The National Society, with the support of the IFRC, is still providing remote health care and/or guidance to the Salesian shelter in Lima and the shelters in Tumbes. An average of 50 individual health care sessions are taking place on a weekly basis.

• Safe water is being provided by the UNHCR and the IOM to the migrant population in Tumbes’ shelters. 130 people are being permanently assisted.

• With the support of the IFRC, the WhatsApp® line remains active to disseminate information on COVID-19. This line is being offered to the general public and it is disseminated among the migrant population through communication networks that have been previously established. The information is provided by professional health workers in support of the 113-hotline established by the National Government. To connect to this line, please visit the link: https://bit.ly/LineaCRojaPe. An average of 150 calls are being handled on a weekly basis.

• The National Society is being supported in the dissemination of key messages on COVID-19 prevention through the social media accounts of the Movement and External Partners.

• During the last week of April, the National Society started to deliver prepaid cards to assist the migrant and refugee population. This aims to provide economic relief to migrants and refugees whose income has been affected by the suspension of economic activities. It is estimated that 400 homes will be assisted.

• Volunteers and personnel working on humanitarian assistance activities in the field have been provided with personal protection equipment.

Furthermore, with the support of the Migration Programme fund, humanitarian workers and vulnerable migrants are being assisted with psychosocial support. An average of 50 sessions and 400 follow-up calls have been made. Health personnel working in the field is also being provided with training in stress management and relaxation, following a request from the Peruvian Ministry of Health.

TRINIDAD AND TOBAGO The Trinidad and Tobago Red Cross Society will continue to work on behalf of people on the move. Particularly, actions will be focused on activating the “mobile health clinic”, providing communication messages about the risks faced by migrant and host communities. Moreover, the National Society is planning to activate Internet calls to meet the information needs of migrants and host communities. Surveys and monitoring will be carried out to assess the needs and vulnerabilities of migrant communities affected by COVID-19. The distribution of hygiene kits and the Cash and Voucher Assistance Programme will also continue to be delivered. Nevertheless, awareness activities against xenophobia will be suspended.
Regarding the impact of COVID-19 on our operation in Uruguay, the Uruguayan Red Cross (URC) will continue the following activities:

- The Cash and Voucher Assistance (CVA) Programme continues to be delivered, under protection mechanisms, and it is being adapted to digital means to ensure effective follow-up. Initially, 56 families will be assisted with the multipurpose programme and will receive between 200 and 600 USD for their basic needs. This amount will be based on the number of family members.
- The URC continues to provide dinner meals to migrants on a daily basis. Only one member of the family is allowed to enter the RC office and get the family food portion. This avoids the gathering of people at the URC central office. (Food portions are not been delivered anymore at the Scout Movement office).
- A health vulnerability assessment is being carried out.
- Information messages are being delivered.
- Hygiene kits are being distributed among RC personnel to promote handwashing.
- A contingency plan is being developed in coordination with the Uruguayan government.

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FOR MORE INFORMATION, visit the site https://go.ifrc.org/emergencies/3122 or contact:

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