Situation

Since the beginning of the year, 1.7 million refugees and migrants and members of host communities were assisted with one or more services by R4V partners; this includes responding to urgent needs resulting from the COVID-19 pandemic. In May, the Regional Platform together with eight national and sub-regional Platforms and 151 partners launched the review of the Refugee and Migrant Response Plan (RMRP) 2020, to include COVID-19-related needs and amend financial requirements (amounting to ca. 1.41 billion). In addition, on 26 May, an International Donors Conference in solidarity with Venezuelan refugees and migrants was convened by the European Union and Spain, with the support of Canada, Norway, UNHCR and IOM, in order to mobilize support for refugees and migrants from Venezuela displaced in the region, including in the context of the impact of the COVID-19 pandemic. During the event, multiple donors committed to an overall total of USD 2.79 billion, including USD 653 million in grants, to benefit hosting governments as well as RMRP partners.

The return movements of thousands of Venezuelan refugees and migrants to their home country is of great concern to R4V partners. Since April 2020, due to the increasingly precarious situation of refugees and migrants, resulting primarily from their loss of livelihoods following measures put in place to mitigate the spread of COVID-19, it is estimated by government authorities that more than 83,000 have returned to Venezuela. This also comes as a result of many refugees and migrants not benefitting from national social protection and health programmes adopted in host countries. Without the means to sustain themselves, many have seen no option but to return to Venezuela. Aggravating the situation further, over the past three months, evictions have continued despite preventative measures that governments in the region have enacted. In this context, the Regional Platform and its partners convened a technical workshop on return movements, at which partners agreed that the priority focus of partners and donors shall remain on supporting the assistance to refugees and migrants in their host communities and thereby help avoid additional exposure of vulnerable individuals to health and protection risks associated with return movements.

Main Developments

In Brazil, as of 30 June, Brazil had 1,402,041 confirmed cases of COVID-19 and associated 59,594 deaths. Despite the rising number of cases in the country, most Brazilian states have announced a gradual reopening of non-essential services. The majority of COVID-19 cases are concentrated in the states São Paulo, Ceará and Rio de Janeiro. Entry restrictions for foreign nationals, including refugees and migrants from Venezuela, are extended until the end-July. Due to measures adopted by different federal states over the past months, some refugees and migrants from Venezuela experienced problems in obtaining or renewing documents such as the National Migration Registration Card and the Individual Taxpayer Registration Number (CPF). As a result of the restrictions, many were unable to access social benefits that could have helped them during the pandemic.
Over the last three months, the number of COVID-19 cases continued to rise in Chile. The Government of Chile and R4V partners estimated that 2-3 per cent of the Venezuelan population (some 4,500 individuals) were willing to return to their country of origin. Authorities in Chile over the past months launched a “Humanitarian Returns Plan” in order to facilitate the return of refugees and migrants. In May, 165 persons were also assisted in accessing the EUNACOM exam, allowing them to convert their medical professional certification, enabling them to join the healthcare workforce in Chile.

Over the last three months, return movements of refugees and migrants continued to take place in between Colombia and Venezuela. Refugees and migrants from Venezuela, while being affected by restrictive measures during the COVID-19 pandemic, have also been suffering from evictions. This situation has led many to return to their place of origin in Venezuela. On 25 June, the President of Colombia extended the national quarantine measures until 15 July. Venezuelan authorities announced to the Colombia Migration Unit that the daily reception of Venezuelans through humanitarian border corridors be limited to three days a week. In mid-June, Colombian authorities established the Centre for Transitional Sanitary Attention (CAST), which is located on the International Bridge of Tienditas. This centre offers health services and right protection to Venezuelans waiting to return to Venezuela. The CAST has a current capacity of 390 people and a projected expansion, for a maximum of 600 people.

In Ecuador, the city of Guayaquil has been the most affected by the health crisis caused by COVID-19. Over half of the districts of the country have begun to relax the restrictive measures in June, leading many Venezuelan refugees and migrants to begin seeking employment opportunities again. On 29 June, the registration and regularization process for Venezuelans was reactivated. The process for applying for the emergency visa to stay in Ecuador for humanitarian reasons will be open until 14 August. It is estimated that 236,000 Venezuelans completed the online registration and 151,000 registrations have already been validated by authorities to proceed for the issuance of the emergency visa for humanitarian reasons (VERHU).

In Peru, the Government announced the extension of the state of emergency for another 90 days, until 7 September. On 28 May, the SNM launched the Agencia Virtual de Migraciones, and the Mesa de Partes Virtual de Migraciones online platforms that enable foreigners to change or update their migratory category and/or request the renewal of their residency permit. New and modified measures were announced on June 26, including quarantines focused on more affected regions in order to counter the spread of COVID-19. On June 22, the Special Commission for Refugees (CEPR) resumed its online appointment system allowing asylum-seekers to complete and obtain work permits.

Despite the COVID-19 context, all countries in the Caribbean sub-region (Aruba, Curaçao, the Dominican Republic, Guyana and Trinidad & Tobago) took a decision to re-open business sectors while maintaining social distancing protocols, since lockdowns and confinement measures had resulted in severe hardship for refugees, migrants and the host community, especially in tourism-dependent economies such as Aruba. During the pandemic, many Venezuelans lost their livelihoods and faced poverty, destitution, eviction, food insecurity and increased protection risks. In Guyana, due to restriction measures induced by the COVID-19 pandemic, there was a notable rise in trends of Venezuelan sex workers moving to the mining areas in search of livelihoods. They, along with many other refugees and migrants in the country, faced evictions and loss of jobs.

In Central America and Mexico, the number of COVID-19 cases continued to increase over the past three months. Restrictive measures to curb the spread of the COVID-19 remained in place in the sub-region in Panama, Costa Rica and Mexico. Borders remained closed in Panama and Costa Rica but not Mexico. The Mexican government suspended asylum procedures sine die. Costa Rica became the first country in Central America to legally recognize same-sex marriage which strengthens the protection system for LGBTI refugees by recognizing the validity of civil unions within the different procedures (i.e. family reunification, extension of the status of refuge to the spouses).

Border closures were maintained in the four countries of the Southern Cone. Nevertheless, Argentinian and Paraguayan authorities are considering exceptions to the closure of borders for people in need of international protection, as already done by Uruguay. The Bolivian National Commission for Refugees (CONARE) met in June and recognized 50 Venezuelan as refugees. In Paraguay, so far in 2020, 670 new asylum applications have been received from Venezuelans.
Response

In Brazil, the R4V Platform in coordination *Operação Acolhida* is responding to the COVID-19 situation. On 19 June, the clinical section of the Área de Proteção e Cuidados (APC) - a hospital set up by Brazilian authorities to respond to COVID-19 - was inaugurated with the support of R4V partners. The space has a capacity of 254 beds and received 117 patients in June alone. In addition, in June, Brazilian authorities extended the Emergency Basic Income benefit for an additional two months. The benefit targets informal workers regardless of nationality, providing a subsidy of BRL 600 (USD 116) per month for up to two adult members of a household, or BRL 1,200 (USD 232) for single female-headed households. R4V partners are supporting refugees and migrants from Venezuela in receiving this assistance.

In Chile, R4V partners have been assisting groups of Venezuelans located in shelters around Santiago, Arica and Antofagasta with basic humanitarian assistance. R4V partners supported refugees and migrants with health care, daily food and hygiene items – while coordinating the operation of shelters. Psychosocial support activities and information sessions regarding evictions and other housing challenges have been held by R4V partners.

In Colombia, the national GIFMM conducted two rounds of joint needs assessments. Since the beginning of the movement restrictions partners worked on a strategy to respond to increasing evictions faced by refugees and migrants from Venezuela. Other priorities have been the prevention and response to GBV and xenophobia, as well as the addressing of humanitarian needs such as food and shelter, especially in border areas and caminantes’ routes. In particular, since the inauguration in mid-June of the CAST, located on the International Bridge of Tienditas, the local GIFMM and partners have provided support in health, WASH, food security and nutrition, and protection.

The GTRM in Ecuador conducted a Joint Needs Assessment, reaching over 1,600 households and more than 7,000 refugees, migrants and host community members, aiming to evaluate access to services during the pandemic. The results indicate that access to food, shelter, medicine and hygiene supplies are the main concerns for refugees and migrants, while access to livelihoods has been severely affected. The host community identified access to food, medicine, healthcare and work as their main concerns. The partial lifting of confinement measures has generated greater capacity for mobility of refugees and migrants including for livelihoods. In this sense, there was an increase in R4V food-related assistance as well as assistance in accessing the asylum system and migratory services.

In Peru, the GTRM scaled-up Cash-Based Interventions (CBI) efforts supporting 34,200 refugees and migrants and host community members. R4V partners provided assistance for winter and health related needs of refugees and migrants, while cash-for-food programmes also supported vulnerable host community members. Advocacy was also conducted with financial institutions to expand the acceptance of documentation (i.e. the asylum-seeker document) in order to facilitate the receipt of CBI by refugees and migrants. R4V partners signed agreements with financial institutions to facilitate the acceptance of additional documentation for refugees and migrants while receiving cash.

In the Caribbean, R4V partners supported refugees and migrants from Venezuela with health services, shelter, food and livelihoods activities, including with indigenous Warao women in Guyana. R4V partners adapted their delivery of assistance during COVID-19, including for education in Trinidad and Tobago, and launched a livelihoods market assessment for the Venezuelan population in the Dominican Republic.

In Central America, partners are supporting refugees and migrants from Venezuela with food, psychosocial support, counseling and healthcare in Panama, Mexico and Costa Rica. R4V Partners are providing cash-based interventions to cover their basic needs including food, for example, over 820 persons were assisted in the Sub-region with cash during June. In Panama, a social network campaign, #SomosLoMismo, reached 544,966 people with anti-xenophobia messages. In June, in Costa Rica, 150 Venezuelans received information and/or virtual legal assistance including documentation, access to asylum, access to rights and, legal residence.

R4V Partners in the Southern Cone helped refugees and migrants with shelter solutions, medicines, NFIs (especially hygiene and winter clothes kits), food assistance and CBI to cover their most pressing needs. Primary health care assistance, as well as interventions for children education and birth registrations were carried out in Bolivia, as were psychosocial support and integration activities in Paraguay and Uruguay, where quarantine measures have been relaxed.