Assessment of Emergency and Protection Needs HIAS Colombia



OVERVIEW

Globally, HIAS operates in 16 countries throughout Africa, Europe, and the Americas. In May 2020, HIAS conducted a needs assessment to analyze the impact of the COVID-19 crisis on the displaced people and vulnerable host communities who access HIAS services. The assessment findings show a decrease in ability to meet basic needs, increased threats to legal protection, impacts on mental health and resilience, and increased risk of gender-based violence (GBV).

HIAS Colombia

Established: 2019

Locations: Barranquilla, Bogota

Key Program Areas:

- Economic Inclusion
- Gender-based violence prevention and response
- Mental health and psychosocial support

Globally, HIAS interviewed over 800 respondents across all program locations, ensuring that assessment responses represented the diversity of viewpoints and experiences within each community that HIAS serves, including women and girls at risk, elderly people, people experiencing extreme poverty, people living with disabilities, and LGBTQ populations.

Across all locations in Colombia, HIAS interviewed 32 individuals. Approximately 78% of respondents were female, 13% were male, and 9% identified as another gender. Most respondents were adults aged 18-59 (97% of respondents), with a small percentage of children under 18 (3% of respondents).

RESULTS

ACCESS TO BASIC NEEDS

Due to the COVID-19 crisis, most displaced people (including both Venezuelan refugees and Colombian IDPs) and vulnerable host communities are not able to meet their basic needs.

Assessment findings show that people need safe, flexible options for meeting their basic needs in a changing crisis context. Limited access to food is common. Access to non-COVID-19 healthcare is very limited, with people reporting that they cannot get the medications they need.

"People are afraid of dying in the absence of medical care. Venezuelans do not have immediate access to health like Colombians."

Displaced person, Colombia

Similarly, many people report that they cannot access WASH resources, such as basic protective supplies, due to unavailability and cost. Access to WASH is a disproportionate challenge for women and girls, who are often responsible for household sanitation and equipment, and thus face additional pressure from the inability to meet this basic need.

Among people surveyed,

9 in 10

cannot access sufficient food

4 in 10

cannot access secure shelter

7 in 10

cannot access basic WASH

9.5 in 10

cannot access health care

Many coping mechanisms reported have negative economic and personal impacts, such as depleting savings, selling possessions, and begging.

Although some people report receiving support from the government, UNHCR, or NGOs, this support is limited, both in the number of deliveries per household and the quantity within each delivery; thus, many people seek help from neighbors and local neighborhood organizations instead. In some neighborhood with these networks, households can signal that they need help by hanging a red flag in their window.

ECONOMIC INCLUSION

Most people reported that their most significant problem is loss of income and work. Losing income, whether from formal or informal employment, means that people also cannot meet basic needs, including sufficient food and safe shelter.

As many displaced people have limited access to formal employment and income due to their legal status and other policy and societal barriers, they are particularly vulnerable to the economic impacts of the COVID-19 situation. Due to the existing quarantine restrictions in Barranquilla and Bogota in response to the large increase of COVID-19 cases, Venezuelan refugees are not able to engage in any typical income generation activities, such as street vending, to obtain cash that would allow them to meet their basic needs.

Loss of income and the subsequent inability to meet basic needs also equates to loss of autonomy for women and LGBTQ-identified individuals, who are at greater risk for experiencing GBV when they do not have or cannot control their own economic resources.

LEGAL PROTECTION

Displaced people need increased legal protection, including both legal status and effective access to rights, which in turn enables them to meet their basic needs.

Barriers in access to services: Displaced people face barriers in accessing non-COVID-19 health care in Colombia, where this is restricted for those who have a specific legal status.

Return to countries of origin: Although migration is officially discouraged, temporary humanitarian corridors, with health controls, have been established for cross-border movement between Colombia and Venezuela. Both people surveyed and HIAS staff reported that many Venezuelans are returning to Venezuela due to resource scarcity, barriers in access to services, and loss of secure housing due to eviction.

"Many people have returned to Venezuela because they have been removed from the apartments because they do not pay the rent. So people leave, they prefer to return to their country. Since they don't give them help, they leave."

Displaced person, Colombia

The one exception is for people who already have received their refugee status determination (RSD) and do not want to relinquish this. In addition, people note that not everyone has the resources to attempt return.

"I know many people who have returned and many others who want to return, [but] have not succeeded due to lack of money."

Displaced woman, Colombia

MENTAL HEALTH AND PSYCHOSOCIAL SUPPORT

Key mental health and psychosocial support (MHPSS) trends among people surveyed included stress and concern over lack of income and inability to meet basic needs (amid generalized concern over the COVID-19 situation), as well as the impacts of physical lockdown and quarantine measures on support systems and mental health.

Many people reported feelings of despair and prolonged sadness. Both men and women expressed frustration and stress over not being able to work, especially not being able to provide basic necessities for their families or care appropriately for children. People also shared worry about the insecurity caused by widespread food scarcity in many locations, including incidents of crime and robberies.

"People are very stressed now because of the situation, because we have no job options. We find ourselves hopeless, sad, even in the children themselves because they cannot go out to play. We don't know what will happen, when this will end, and when it will end. We feel very stressed."

Displaced woman, Colombia

GENDER-BASED VIOLENCE (GBV)

The COVID-19 crisis has increased the risk of GBV for women, girls, and LGTBQ-identifying individuals. Almost all respondents across all genders reported this heightened risk of GBV, especially domestic violence.

"Now it is very easy for people's emotions to change. Violence begins in the home, and the most affected are women."

Displaced man, Colombia

Violence at home. Both men and women recognize the risk of both intimate partner violence (IPV) and violence against children as families are required to stay at home together. Several respondents reported that they were aware of households that fought over economic stressors. In addition, with reduced economic self-reliance, women may not be able to leave violent partners or family members.

Whether or not respondents had personally experienced or heard about violence, many reported that men in general lacked appropriate coping skills to deal with the economic and psychological stress of the crisis. While recognizing that violence is not an acceptable response, people noted that increased stress was associated with increased violence, suggesting a need for further education and engagement of men on coping skills and alternate responses.

Respondents also emphasize an increased risk of both physical and sexual violence against children, especially girls.

Violence against LGBTQ+ individuals. In addition, respondents also recognized the risk of domestic violence against LGBTQ_-identifying individuals, who may be required to stay at home with family members who do not accept them. People reported that LGBTQ+ individuals, especially trans men and women, are also at greater risk for experiencing harassment and violence in public.

People surveyed offered suggestions for improving the safety of women, girls, and LGBTQ+ individuals, which include increasing awareness around GBV, providing counseling

and support for individuals at risk and GBV survivors, and strengthening women's' autonomy through economic self-reliance.

FURTHER STEPS

The findings from this rapid needs assessment directly inform HIAS' response to the current emergency situation. HIAS continues to protect the safety, health, and rights of forcibly displaced people and vulnerable host communities from risks associated with the COVID-19 crisis, and HIAS will work on an ongoing basis to monitor their immediate and changing needs. HIAS will build on these findings to conduct any future assessments required throughout the stages of crisis response and recovery.

CONTACT

Camilo Ramirez • Country Director • camilo.ramirez@hias.org