

DONOR UPDATE ON UNHCR COVID-19 RESPONSE IN COLOMBIA - #5



UNHCR in Quibdó, Choco delivered 27 baby kits to Venezuelan refugee and migrant families who lost their sources of income due to the COVID-19 emergency. ©UNHCR/Gamboa, Y.

CURRENT CONTEXT RELATED TO COVID-19 AND GOVERNMENT MEASURES

The Colombian Ministry of Health confirmed **5,949 cases of COVID-19** as of Tuesday 28 April, in 31 of the country's 32 departments, with Bogota concentrating the highest number of people infected (2,408 confirmed cases). In Colombia, a total of 269 individuals have died from COVID-19 and 1,268 cases have recovered. So far, 16 confirmed cases, which resulted in one patients' death, were reported among Venezuelan refugees and migrants.

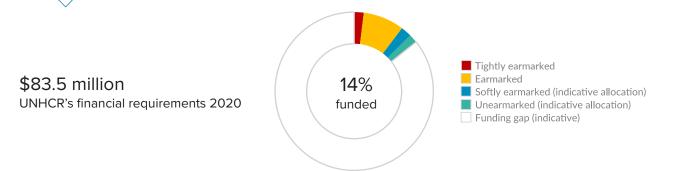
On 23 April, the National Indigenous Organization of Colombia (ONIC in Spanish) confirmed the first death by COVID-19 among the indigenous population of Yanakuna in San Jose de Isnos, Huila department. ONIC expressed its concern over the potential contagion among the other indigenous populations in the area considering the vulnerable socio-economic conditions and the lack of a proper protection and isolation procedure before and after the death of the community member.

Government of Colombia Measures Related to COVID-19

President Duque announced an extension of the obligatory quarantine until 11 May, with construction and manufacturing industries opening after 27 April. International and national flights (except for charter flights for humanitarian reasons) continue to be suspended until 30 May.

Migración Colombia issued Resolution 1006 on 15 April through which the validity of the





salvoconducto document for asylum applicants has been extended over the quarantine period. This measure protects asylum seekers from deportation in case their *salvoconducto* expires and is an important advance from the previous Resolution 918 which explicitly excluded this document from validity extension over the quarantine period.

The humanitarian corridor between Venezuela and Colombia remains open for the entry and exit of persons with serious health conditions.

Analysis of the Current Context

In the past two weeks, social unrest was reported in various cities across the country: in Barranquilla, over 300 Venezuelans expressed their intention to start walking to Paraguachón international border if their immediate needs for shelter and food were not met; in Cartagena 250 individuals have been protesting and asking the support of local authorities; in Cali, an additional 700 Venezuelans who were evicted and have been living on the streets gathered in front of the City Hall asking for the support of the Mayor with food and shelter during the extended guarantine, and some with facilitating returns to Venezuela. Protests continue in parts of Bogota, as well as in southern Colombia over the distribution of the government's foods kits among the indigenous communities.

The number of Venezuelan returnees since 4 April reached over 12,500 by 27 April, an average of 350 persons daily. Between 20 and 26 April, a total of 2,301 persons returned through the International Simon Bolivar Bridge, while 826 returns occurred through the International Jose Paez Bridge in Arauca. The Government of La Guajira has largely maintained its position against returns and blocked most buses headed for the Paraguachón border crossing point, however 310 Venezuelans coming from cities along the Atlantic Coast were allowed to return on 28 April. Some local authorities continue to pressure UNHCR to provide assistance with the returns, however UNHCR, GIFMM members and the national government continue to discourage these movements. In relation to this, GIFMM members released regional guidelines highlighting the importance of avoiding actions that may contribute to the spread of the pandemic. Returns are not in line with the mandatory guarantine and do not comply with the principles of security, voluntariness and dignity of voluntary return. As an alternative, UNHCR has been offering support in providing shelter to the most vulnerable Venezuelans that have the intention to stay in Colombia and whose livelihoods have been affected during the health emergency quarantine.

According to four UNHCR monitoring activities undertaken at the Simon Bolivar International Bridge (Cucuta), 70% of the Venezuelan returnees interviewed mentioned they have the intention to come back to Colombia once the quarantine is lifted.

The situation of 8 Colombian returnees stranded at the San Miguel International Bridge (the border with Sucumbíos, Ecuador) for over 15 days remains of concern as Migración Colombia has not opened the border and allowed them to enter, arguing to be complying with the Presidential Decree on compulsory isolation and insisting on a lack of adequate health facilities in the municipality to be able to fully comply with isolation requirements. The only people allowed by local authorities to enter Colombia were a pregnant Venezuelan woman and her child, following a health emergency concerning the child. UNHCR has been advocating with the local authorities, the Governor's Office and the Regional Ombudsperson for a dignified solution for the Colombian returnees.



Regarding the internal situation, ongoing violence and armed confrontations have been reported over the past two weeks, including the killings of 3 indigenous leaders reported in Cauca and one transgender leader in Barranquilla. In Chocó, three children belonging to indigenous communities were killed following confrontations between irregular armed groups, pointing to a lack of access to health services due to COVID-19 quarantine mobility restrictions. In addition, armed confrontations between irregular armed groups occurring in Cauca and Antioquia led to the displacement of 100 people.

UNHCR'S RESPONSE TO COVID-19

Health and hygiene/prevention measures

UNHCR supported 55 health professionals and 744 health brigades in Norte de Santander. Additionally, UNHCR is providing technical support to the Mayor's Office in Cucuta with the drafting of its local development plan, an opportunity to make sure local authorities involve Venezuelan refugees and migrants in planning and resource allocation for the next 4 years.



UNHCR donated 4 vital signs monitors to Santander University Hospital to help strengthen care capacity, especially for patients in critical condition. ©Hospital Universitario de Santander.

UNHCR has been supporting renovation of the Arauca Hospital, where 20 additional isolation spaces for possible COVID-19 positive patients are envisaged. UNHCR's Arauca office is in the process of procuring medical equipment such as hospital beds, ventilators and PPE.

In Apartadó, UNHCR provided 40 hygiene kits to the Guardia Indígena (indigenous guard) of the indigenous communities in the municipality of Apartadó. In Necocli, Antioquia, on the Panamanian border, UNHCR is helping the municipality manage the Temporary Preventive Isolation Zone, which shelters 294 people (mainly Haitian nationals) travelling in mixed migratory movements who have been stuck at the border due to COVID-19 travel restrictions. The Office provided hygiene kits, translation and public information material.



The indigenous guards of Apartadó take care of their communities to protect themselves from COVID-19. To contribute to their work, the local authorities gave them food for their families and UNHCR supports them with hygiene kits for self-care. ©Alcaldia de Apartadó.

Around 1,500 hygiene kits were delivered in Soacha and 2,000 in Bogotá.

In Medellin, UNHCR partner FAMICOVE continues to offer medical consultations in person two days a week as well as over the phone 3 days a week.

Protection

Between 16 March and 24 April, UNHCR remotely registered 5,113 families consisting of 19,618 individuals in PRIMES (72% female) at UNHCR's 33 telephone reception points nationwide. The Departments with the highest number of calls were Bogotá D.C (24%), La Guajira (22%), Antioquia (17%), Norte de Santander (15%) and Arauca (13%). 59% of calls were related to Humanitarian Assistance, followed by Legal Issues (15%), Documentation (8%) and Health (8%).

UNHCR developed and disseminated an information piece on the protection and health risks involved in returning to Venezuela, reiterating its position that due to the implicated risks, UNHCR neither promotes nor facilitates the movements. This information piece has been widely disseminated on social media platforms, including retweets by the Presidency's Border Management Advisor, and the Governor's Office of La Guajira.

In Barranquilla, UNHCR produced three communication tools in collaboration with UN Women within the framework of the *Somos Panas Colombia* campaign, containing messages on the



institutional response roadmap for SGBV survivors, on self-care and self-protection. Leaflets will be included in the food kits distributed by the City Hall and posters will be displayed in supermarkets.



A poster from the UNHCR-led Somos Panas campaign in collaboration with UN Women to raise awareness about SGBV in the context of COVID-19.

In Cucuta, UNHCR continues to deliver public awareness messages including protection information as well as information on the referral mechanisms to access rights, which is available <u>here</u>.

UNHCR continues to support survivors of SGBV in Bogota through an open communication channel between its call center and Linea Purpura (a government helpline for survivors of genderbased violence).

Food Security and Nutrition

UNHCR offices continue to support the Government with the distribution of food kits in various locations throughout the country. For example, in Arauca, UNHCR continues to support the Governor's office with the distribution of food to 1,079 Venezuelan refugees and migrant families living in informal settlements.

Cash-Based Interventions

Around 130 families in Bogota benefited from CBI interventions. Dozens more cases were assisted in other parts of the country as UNHCR is stepping up its emergency cash programme, targeting over 6,587 families nation-wide.

Shelter, NFIs and WASH

Over 50,000 Core Relief Items (CRI) from UNHCR's Global Stockpile were delivered to the operation's warehouse in La Guajira department for further distribution around the country.

Over 120 beneficiaries were assisted through hotel networks in Riohacha and Maicao. Cases are referred by Government authorities and partners and consist mostly of refugees and migrants who are living in the street, have suffered eviction, and GBV survivors. This strategy includes an interagency effort from WFP (Food), Malteser International (Health screening), Save the Children (Cash-Based Initiatives) and UNHCR (Shelter and Registration). Almost 50% of beneficiaries are children.

UNHCR donated 2 Refugee Housing Units (RHUs) to the Civil Defense in Cali and 3 RHUs and 4 tents for the health sector in Buenaventura to be used as triage areas; 150 mattresses and 75 bunk beds to the Mayor's office of Cali for the temporary shelter identified by the municipality; 6 tents and 2 RHUs were donated to Putumayo's Health Secretary; in Cucuta, 1 RHU was donated to the Secretary of Health to serve as an area for health triage; in Medellín, together with other members of the GIFMM, UNHCR supported the Mayor's Office with the implementation of its isolation protocol and the division of space to be used as dormitories in a large sports complex identified as a temporary shelter. Ten tents were set up at the Carlos Mauro Hoyos Center, and the temporary shelter was activated on 27 April.

FUNDING NEEDS

UNHCR Colombia is currently appealing for **USD 5.16 million for the COVID-19 response**. Thanks to donor contributions received against this global appeal, UNHCR Colombia has thus far received USD 4.5 million which are being used to finance the activities outlined in the Colombia part of the



Global Appeal, available <u>here</u>.

GLOBAL HUMANITARIAN CONTEXT

The 24 April <u>UNHCR Global COVID-19 Emergency</u> <u>Response</u> update included the following points:

IASC (Inter-Agency Standing Committee) <u>System-</u> <u>Wide Scale-Up Protocols</u> have been adapted to respond to the COVID-19 pandemic through a light approach responding to the particularities of the COVID-19 emergency.

In a joint statement, UNHCR and UNICEF highlighted the needs of forcibly displaced children, who, in the context of the COVID-19 pandemic, are at risk of being exposed to protection and health risks as well as being out of school for a prolonged period.

Additionally, UNHCR issued a <u>press release</u> drawing attention to the heightened risk of gender-based violence for displaced and stateless women in the COVID-19 pandemic.

A 9 April <u>policy brief</u> by UN Secretary-General António Guterres explores how women and girls' lives are changing in the face of COVID-19, and outlines suggested priority measures to accompany both the immediate response and longer-term recovery efforts.

On 23 April, UN Secretary-General António Guterres <u>released a statement</u> on the importance of human rights to shape an effective and inclusive response to the COVID-19 pandemic, outlining six key human rights messages. **Special thanks to major donors** (Australia, Canada, CERF, Denmark, European Union, Japan, Ireland, Sweden, the United Kingdom, the United States of America and others) of softly earmarked contributions and pledges at the global level to the Coronavirus Emergency Situation giving UNHCR critical flexibility to rapidly respond to evolving needs.

UNHCR's response in Colombia is possible thanks to the contribution of private donors and:

Austria, Canada, Central Emergency Response Fund (CERF), Chanel Foundation, Denmark, European Union, Germany, Japan, Republic of KOICA. Luxembourg, Korea. Netherlands, Norway, Sweden, Switzerland, UN Human Security Trust Fund (UN HSTF). UN Peacebuilding Fund, Switzerland, United Kingdom and the United States of America.