



RMRP 2023 • 2024

HEALTH

2023

2024



PEOPLE IN NEED

↑ 33.6% ↓ 37.0%

7.32 M

7.75 M

↑ 14.9% ↓ 14.5%



PEOPLE TARGETED

↑ 32.4% ↓ 37.0%

1.96 M

1.42 M

↑ 15.5% ↓ 15.1%



PIN PERCENTAGE

52.3%

52.5%



TARGET PERCENTAGE OF PIN

26.7%

18.3%



TOTAL REQUIREMENTS

\$188.13 M

\$161.20 M



RMRP PARTNERS:

91

SECTOR LEADS: SAVE THE CHILDREN, WHO/PAHO

KEY FIGURES BY PLATFORM

	2023				2024				
			Targeted In need				Targeted In need		
BRAZIL	105.0 K	26.9 K	25.6%	\$5.24 M	110.7 K	21.0 K	19.0%	\$3.55 M	16
CHILE	209.1 K	49.1 K	23.5%	\$9.71 M	227.1 K	51.2 K	22.6%	\$10.83 M	7
COLOMBIA	5.32 M	1.43 M	26.8%	\$97.29 M	5.66 M	849.4 K	15.0%	\$78.42 M	34
ECUADOR	547.5 K	210.9 K	38.5%	\$24.86 M	554.3K	235.6 K	42.5%	\$22.74 M	24
PERU	1.30 M	320.0 K	24.6%	\$36.44 M	1.38M	319.9 K	23.1%	\$32.17 M	30
CARIBBEAN	96.0 K	23.2 K	24.1%	\$5.94 M	98.0K	15.6 K	15.9%	\$5.52 M	13
CENTRAL AMERICA & MEXICO	246.8 K	37.3 K	15.1%	\$4.39 M	249.8K	37.9 K	15.2%	\$4.12 M	9
SOUTHERN CONE	111.7 K	20.4 K	18.2%	\$1.77 M	116.2K	16.7 K	14.4%	\$1.66 M	12

SECTOR OVERVIEW

The results of joint needs assessments and surveys at regional and national levels conducted by R4V partners, as reflected in the RMNA 2022,² show ongoing difficulties of refugees and migrants to access quality primary healthcare services to address health needs, especially related to Mental Health and Psychosocial Support (MHPSS) and Sexual and Reproductive Health (SRH).

As noted in the RMNA, the main barriers to accessing healthcare services include lack of documentation and/or being in an irregular situation, lack of information on administrative procedures on how to access healthcare and national health insurance plans, discrimination and xenophobia, high cost of care and medicines in some countries, and lack of complaint mechanisms to exert their rights to health. Although some countries have national legislation which provides free and universal access to public healthcare for any population within their territory, in practice there remain critical gaps in provision of healthcare for refugees and migrants across the region. Language and cultural differences are also barriers in the case of indigenous refugees and migrants and those in countries in the Caribbean. In most countries, health information systems do not disaggregate data on health needs and services by nationality, nor specifically for refugees and migrants, which would facilitate a more tailored health response that addresses the specific needs of refugees and migrants from Venezuela.

Against this background, the Health Sector will prioritize the following objectives to meet the health needs of refugees and migrants from Venezuela, as well as affected host communities:

1. Promote and support the access to essential healthcare services and supplies at all levels of care during transit and in-destination.
2. Strengthen national capacities through technical support to eliminate the main barriers that limit the access and use of healthcare services.
3. Advocate for the inclusion of refugees and migrants from Venezuela in national frameworks that guarantee access to MHPSS, SRH, specialist services and inclusion in public health interventions in response to public health emergencies.

The Sector will ensure that the response, particularly for sudden and/or massive movements that could have health consequences, will include early detection, alert, and controls to reduce the risk of outbreaks of water, food and vector-borne diseases.

The Health Sector will focus on the provision of technical assistance to healthcare personnel and other R4V Sectors at regional and national levels through capacity development, including face-to-face and on-line trainings, webinars, and virtual courses on topics such as MHPSS, SRH, non-communicable diseases and others.

Health needs assessments in selected countries, and the elaboration of technical guidelines and education materials will be implemented as part of efforts to strengthen national capacities. Partners will also conduct advocacy for the inclusion of refugees and migrants in public health initiatives and support the strengthening of national health information systems (including digitalization) to improve data disaggregation according to sex, age, nationality and ethnicity.

The Health Sector will build on progress made in obtaining greater commitments and increased actions from governments in the region to address challenges and needs of refugees and migrants from Venezuela in the COVID-19 and HIV/AIDS working groups of the Quito Process.

To ensure a comprehensive and intersectoral response, the Health Sector will closely coordinate with the Protection, WASH, Nutrition, Food Security and Integration Sectors and the GBV Sub-sector. The Sector will also reinforce coordination, increase technical support, and follow-up on the implementation of the commitments stated in previous joint declarations of the Quito Process. This will include greater communication with ministries of foreign affairs and ministries of health to follow up on the agreements and identify support needs to achieve their implementation, as well as sharing health information to strengthen interventions in the countries.

The Health Sector's interventions are underpinned by the human right to health,³ and guided by the objective of universal healthcare coverage, which includes coverage of refugees and migrants. It will mainstream protection within the response, providing tailored assistance for the most vulnerable groups such as children and adolescents, pregnant and lactating women, elderly people, LGBTQI+ persons, indigenous peoples, people of indigenous and African descent, people living with HIV/AIDS, people with specific needs, and other groups in order to "Leave No One Behind". An age, gender and diversity (AGD) approach will be applied during the implementation of all response priorities.

[2] R4V, RMNA, October 2022; <https://rmrp.r4v.info/rmna/>

[3] The right to health must be enjoyed without discrimination on the grounds of race, age, ethnicity or any other status. Non-discrimination and equality require states to take steps to redress any discriminatory law, practice or policy. <https://www.who.int/news-room/fact-sheets/detail/human-rights-and-health>