



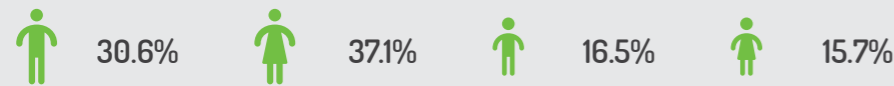
HEALTH

PEOPLE REACHED AND FUNDING BY NATIONAL AND SUB-REGIONAL PLATFORM

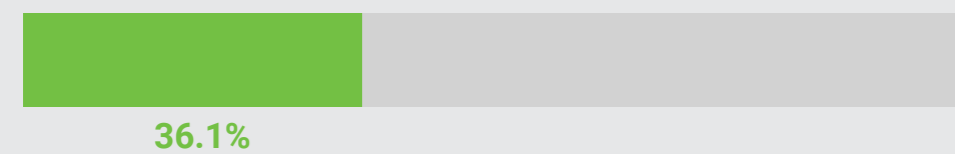
Legend: In-destination, In-transit, Affected host communities, Pendular, Colombian returnees, Budget received



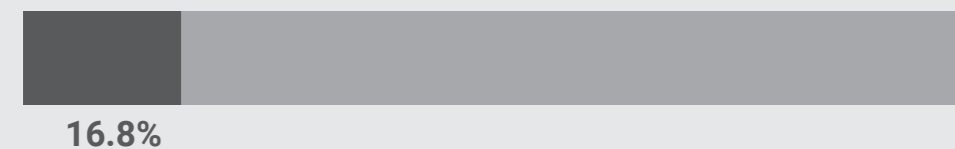
AGE AND GENDER DISAGGREGATION



PERCENTAGE OF PEOPLE REACHED



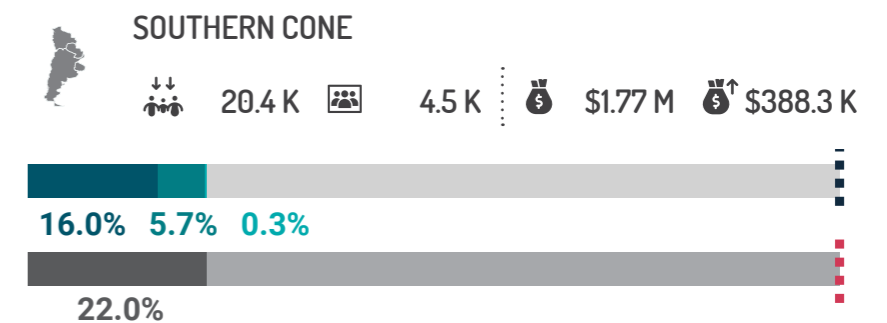
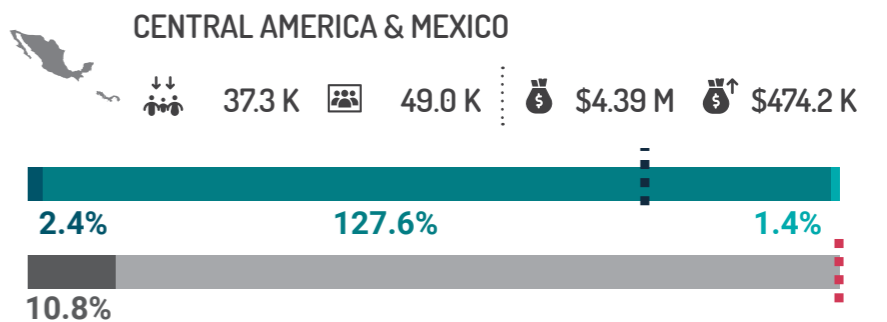
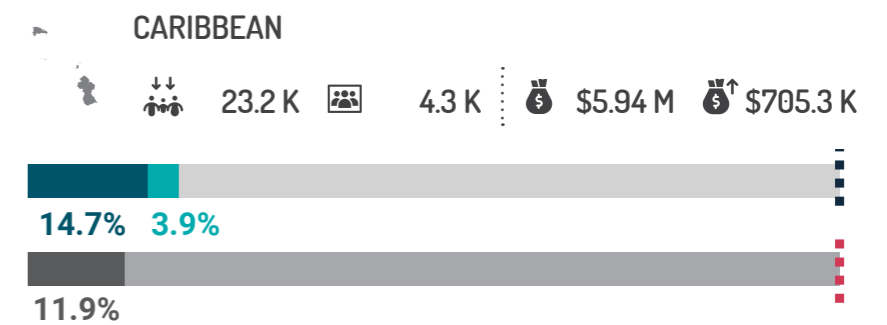
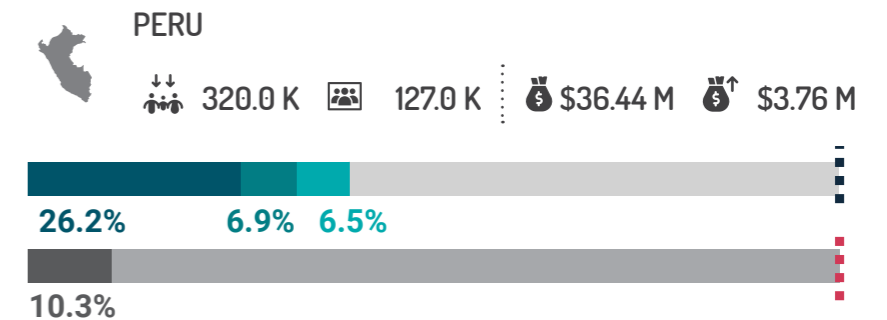
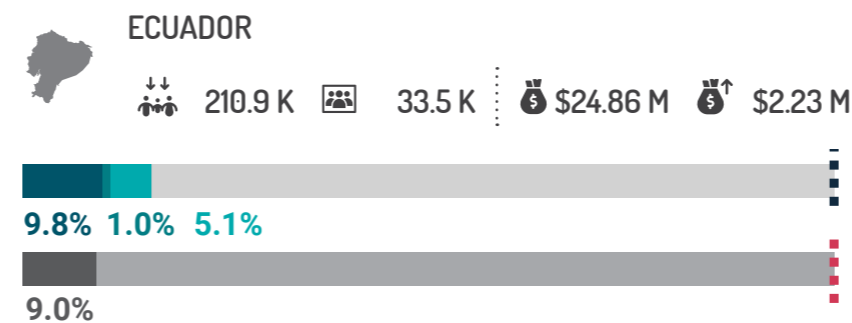
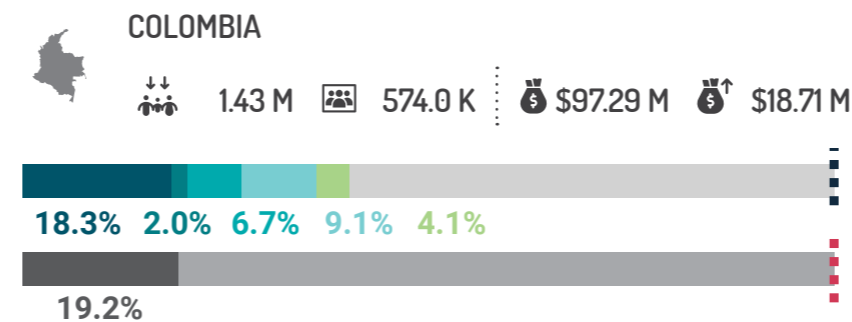
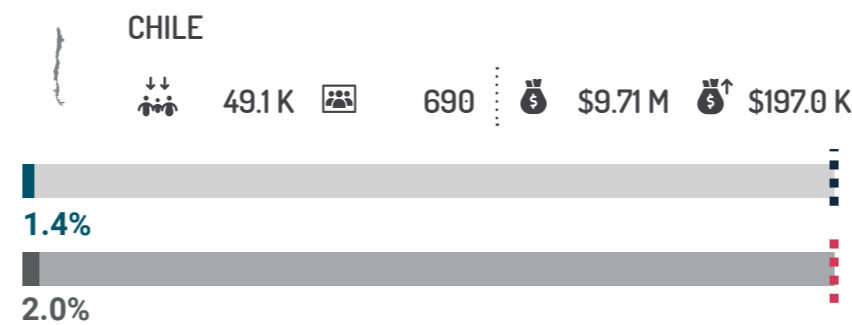
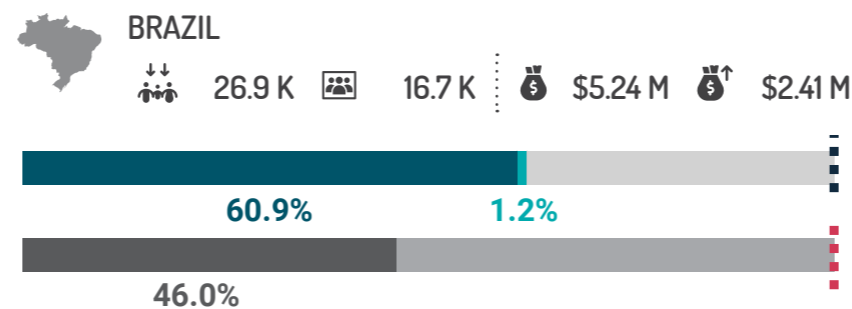
PERCENTAGE OF BUDGET REACHED



REPORTING PARTNERS **65**

IMPLEMENTING PARTNERS*** **176**
(INCLUDING 18 REFUGEE AND MIGRANT-LED ORGANIZATIONS)

DONORS **19**



* The above regional-level data on people reached with assistance under the RMRP 2023 does not include assistance provided to refugees and migrants in-transit. While assistance under the RMRP was provided to refugees and migrants in-transit (in Brazil and Mexico, primarily to Venezuelan nationals, in the other countries, refugees and migrants of all nationalities in-transit), given that in-transit populations by their very nature pass through multiple countries, they may be assisted in more than one country. This would mean that the regional total for in-transit people reached with assistance would include significant duplications. In order to avoid such duplications, information for the in-transit population assisted is included at the country levels and should be referred to distinctly from the in-destination population (as is also done for the corresponding PiNs and targets).

** Funding information as reported to the Financial Tracking Service (FTS) as of 1 April 2024. This data is based on partners' voluntary reporting of contributions and may not accurately represent all funds attributed to the RMRP response. Unmarked funds from donors may also not be reported to FTS with a sector or country designation at the time of receipt by RMRP partners.

Sectoral funds reported for activities implemented at a regional, sub-regional, or multi-country level are not reflected in the above infographic disaggregated by national and sub-regional platforms. For more information about the funding of the RMRP please refer to this link.

*** This includes RMRP appealing partners that are also implementing activities, as well as implementing partners that are not appealing partners. For this reason, it is recommended to quote partner figures separately and not sum the number of partners, as this would double-count implementing partners that are also reporting activities.



HEALTH



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Situation

The health of refugees and migrants in-transit and in-destination, and that of affected host communities, were a concern in 2023. While some countries in the region made progress integrating refugees and migrants into their national health systems, and others (such as Brazil, Costa Rica and Ecuador) provide universal healthcare for all, refugees and migrants across the region continue encountering barriers in accessing comprehensive health services. As noted in the RMNA 2023, these challenges include lack of health insurance, difficulties in covering the costs of medical services, administrative, linguistic, and cultural barriers, as well as being in an irregular situation and a fear of rejection.

Changes in the movement dynamics, with increased in-transit populations often involving entire families, women, children, and older adults, highlight the need for further specialized health

services in rural and semi-urban areas, including sexual and reproductive health, maternal and neonatal care, family planning and contraception, diagnosis and treatment for chronic diseases such as HIV/AIDS, diabetes and hypertension, specialized mental health and psychosocial support services (MHPSS).

As the aforementioned and increase in onward and transit movements regularly imply the use of dangerous journeys, with significant exposure to abuse and exploitation, a greater focus on mental and physical health situations has been identified by R4V partners. In the same context, reports of sexual violence underscored a prevalent and underreported reality along transit routes.

Response

R4V Health Sector partners across the region provided healthcare assistance to 707.6K people, including refugees, migrants, and affected host communities, reaching 36% of their target population in 2023. A total of 12,986 health activities were carried out by 65 appealing organizations and 176 implementing partners, with the Sector receiving a total financing of USD 31.62 million, representing 16,8% of its requirements.

Health Sector partners prioritized the provision of direct health assistance to refugees and migrants, including primary health, sexual and reproductive health (SRH), MHPSS, and maternal health services. Partners also contributed to strengthening public health systems, such as in Ecuador, where they supported regular vaccination campaigns for children.

Health partners also assisted in improving healthcare facilities, through medical equipment, personal protective equipment, and diagnostic laboratory tests, as well as infrastructure enhancement. Additionally, partners conducted capacity building activities for healthcare personnel, reaching 31,925 individuals.

To enhance access to healthcare and expand health insurance coverage, R4V partners undertook advocacy efforts in various countries. For instance, in Uruguay and Bolivia, partners collaborated with national and local health authorities to advocate for the recognition of temporary documents and direct assistance for enrolment. In Peru, partners promoted the inclusion of refugees and migrants in the Comprehensive health Insurance (SIS).

The coordination with other regional mechanisms, such as the intergovernmental Quito Process, which includes a HIV/AIDS Working Group (Champion Country: Argentina) and a Health/COVID-19 Working Group (Champion Country: Peru), was strengthened, through the Regional Health Sector's participation in technical workshops with governments in the region, as well as advocacy for a more holistic approach, including other health topics (apart from COVID-19, mental health, and HIV-AIDS) in Quito Process discussions and relating technical workshops.

Lessons Learned

While 2023 saw improvements in access to healthcare services, certain limitations persist, with continued coordination and efforts required to address healthcare needs amid increasing mixed movements. These challenges are exacerbated by logistical and infrastructure challenges, especially in remote areas, as well as continued challenges ensuring that national health policies are accessible to refugees and migrants. Therefore, in 2024 the Health Sector will ensure further coordination with governments, at federal and local levels, to enhance the provision of healthcare services.

In 2024, the Health Sector will continue to adjust programs to evolving movement trends to support refugees and migrants in accessing vital services, irrespective of their situation (in-destination or in-transit), while continuing to strengthen national capacities, and to work with governments to reduce barriers that limit access to healthcare services.