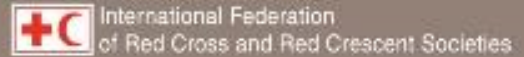


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## Emergency Appeal 24-month Operation Update

### Americas Region: Population Movement



<b>Emergency Appeal:</b> MDR42004	
<b>Date of issue:</b> 02 November 2020	<b>Timeframe covered by this update:</b> 6 September 2018 – 6 September 2020
<b>Operation start date:</b> 6 September 2018	<b>Operation timeframe:</b> 27 months; ends 31 December 2020 <sup>1</sup>
<b>Funding Requirements:</b> 12,500,000 CHF	<b>DREF amount initially allocated:</b> 741,590 CHF
<b>Number of people being assisted:</b> 455,900 people	
<b>Red Cross Red Crescent Movement partners currently actively involved in the operation:</b> Argentine Red Cross (ARC); Brazilian Red Cross (BRC); Chilean Red Cross (CRC); Ecuadorian Red Cross (ERC); German Red Cross; Guyana Red Cross Society (GRCS); International Committee of the Red Cross (ICRC); International Federation of the Red Cross and Red Crescent Societies (IFRC); Panama Red Cross Society (PRCS); Peruvian Red Cross (PRC); Spanish Red Cross; Trinidad and Tobago Red Cross Society (TTRCS); and Uruguayan Red Cross (URC).	
<b>Other partner organizations actively involved in the operation:</b> National governments of the affected countries; CARE; faith-based organizations (Jesuit Solidarity Service and Caritas); International Organization for Migration (IOM); Norwegian Refugee Council; Pan American Health Organization (PAHO); Save the Children; and United Nations Office for the Coordination of Humanitarian Affairs (UNOCHA); United Nations High Commissioner for Refugees (UNHCR); the United Nations Children’s Fund (UNICEF), Global Brigades, vicariate from La Peñita, Idas y vueltas, Manos Venenuegas in Uruguay, Pastoral Migrante, ADRA, CAREF, MIRARES y Manos Abiertas in Argentina, Caritas in Brazil, Fundación Scalabrini, Jesuit Migration Service, vicariate caritas and World Vision in Chile.	
<b>Donors involved in the operation:</b> American Red Cross; British Red Cross; British Red Cross (from British government); China Red Cross (Hong Kong branch); European Commission (ECHO); Italian Red Cross; Japanese Red Cross Society; Norwegian Red Cross; Red Cross of Monaco; Spanish Government; The Canadian Red Cross Society (from Canadian government); The Netherlands Red Cross (from Netherlands government); United Nations High Commissioner for Refugees (UNHCR); the United Nations Children’s Fund (UNICEF); and the United States Government (PRM).	

This 24-month Operation Update provides information about the overall migration situation in the Americas region, and explains how the Red Cross Red Crescent Movement has adapted its response to meet evolving humanitarian needs. This report covers the period from 6 September 2018 to 6 September 2020 with an emphasis on activities implemented since 31 March 2020. For more information on activities implemented as part of the Regional Appeal prior to that date, see the [12-month Operation Update](#) and [18-month Operation Update](#). This document also includes information about the implementation of the [Revised Emergency Plan of Action](#).

<sup>1</sup> Due to the impact of COVID-19 and the constantly changing dynamics of the migration situation in the region, the operation is currently under revision with a planned extension until June 2021.

**The current Appeal coverage is at 79%.<sup>2</sup> Thus far, National Societies have provided a total of 962,514 services. An estimated 3,914 people have been reached with Shelter services, 11,731 with services in Livelihoods, 127,028 with Health services, 431,075 with services in WASH, 31,626 with services in Protection, Gender and Inclusion and 304,989 with Migration services.**

The IFRC kindly encourages increased donor support to this Emergency Appeal that will enable the target National Societies to continue to contribute to the humanitarian and recovery needs of the migrant population and host communities.

[<Click here for the financial report, and here for the contact information.>](#)

## A. SITUATION ANALYSIS

### Description of the emergency

In recent months, population movement has continued to increase in the Americas region. In the world, there is an estimate of 5.5 million Venezuelan migrants and refugees. The number of Venezuelans living in Latin American countries rose from 4 million by the beginning of 2020 to 4.6 million as of early October 2020.<sup>3</sup> In addition to migrants from Venezuela settling throughout the region, some countries in the Americas receive significant numbers of extra-regional migrants from the Caribbean, Asia and Africa. While some settle permanently in the region, many others choose to travel north, crossing from Colombia into Panama through the Darien Gap on their way to North America.

The first COVID-19 cases appeared in Latin America in February 2020 and currently, the virus has spread to all 54 countries and territories in the Americas according to the PanAmerican Health Organization<sup>4</sup>. Though the long-lasting impacts of the pandemic on the migration context in the Americas remains to be seen, the spread of the virus is likely to exacerbate the migrant populations' already vulnerable position in the region. Refugees and migrants in the Americas are especially vulnerable to COVID-19 and other diseases due to high geographic mobility, instability, informal or precarious income, overcrowding, lack of sanitation, language barriers and lack of access to decent health care or vaccination programmes, among others.<sup>5</sup> As of early October 2020 there are 18,004,043 confirmed COVID-19 cases in the Americas and 592,561



Migration routes in the Americas Region

Source: IFRC

<sup>2</sup> As of 2 November, a total of 9,930,686 CHF has been received. For details on coverage, see [Donor response](#).

<sup>3</sup> "Latin America and the Caribbean: Venezuelan Refugees and Migrants in the Region". R4V, 12 October 2020.

<sup>4</sup> COVID-19 - PAHO/WHO Response, Report 29, 12 October 2020

<sup>5</sup> "Coronavirus: El reto de poner en cuarentena a millones en América Latina, donde mucha gente sobrevive día a día". BBC News Mundo, 18 March 2020.

deaths<sup>6</sup>. Indeed, governments have implemented an array of actions and policies to restrain the spread of the outbreak, ranging from health systems, economic and containment policies. According to the Oxford COVID-19 Government Response Tracker [latest update](#), the stringency of such measures peaked in April 2020, but began to decline in May and has remained stable between July and September, although still at relatively higher levels compared to the start of the pandemic in March.

Despite these tightened restrictions the flow of migration in the Americas has not ceased, indicating that many are choosing to migrate irregularly and face the associated difficulties, risks and protection issues. Moreover, it is expected that migrants will be especially affected by the border closure measures that many countries are taking to prevent the outbreak of the virus. Also, some migrants may express the will to return and many of them have already returned to their countries of origin. As host countries are impacted by the COVID crisis, migrants experience increasing difficulties and vulnerabilities, especially in host countries where there are already feelings of xenophobia and discrimination towards people under situations of human mobility. Different sources estimate that over 100,000 Venezuelans have returned to their home country since early April 2020<sup>7</sup>. The recent report [Venezuelans in return](#) by IFRC, expands on the risks and needs that return migrants face.

In the context of the COVID-19 pandemic, new methods and procedures have been implemented to deliver services. For example, given the loss of contact with the migrant population caused by the suspension of activities and the need of a new effective feedback tool during the pandemic, the IFRC —through the Americas Region Population Movement implemented a [COVID migration WhatsApp business line](#) that provides remote assistance to migrants affected by the COVID-19 crisis. In addition, to help humanitarian practitioners to get a better understanding of rental assistance programming in urban context, a [Step-by-step guide for rental assistance to populations affected by crises](#) was published. To contribute to the regional appeal the Department of International Humanitarian and Civil Protection (ECHO) funded a [Protocol of attention and intervention in mental health and psychosocial support to migrants](#). Also, given the need for safe referral tailored to the heterogeneity of the region a [Guide for the creation of secure referral mechanisms for people in a situation of migration and refugees](#) was developed.

Below is a brief description of the migration context in each of the countries included in the Emergency Appeal. For more information on how the COVID-19 pandemic has impacted migrant populations in the region and how National Societies are responding, please see the [recent update published](#) by the IFRC's Migration Cell.

## Argentina



Distribution of food boxes in Argentina  
**Source:** ARC

There are currently 210,071 Venezuelans in Argentina.<sup>8</sup> Venezuelans have become the largest foreign-born population requesting regularization in the country. While initially the Venezuelan migrant population was mostly made up of professionals, technicians or people with university studies, the latest studies show a significant increase of the vulnerabilities of the migrants entering the country. However, the borders remain closed since March 2020 due to the pandemic with only limited cases of regular and irregular entries.

In response to the influx of migrants in recent years, Argentina's immigration authorities have provided certain exceptions to expedite and facilitate the registration process. For example,

<sup>6</sup> [COVID-19 - PAHO/WHO Response, Report 29](#), 12 October 2020

<sup>7</sup> ["Latin America and the Caribbean: Venezuelan Refugees and Migrants in the Region"](#), R4V, 12 October 2020.

<sup>8</sup> [RMRP 2020 Dashboard](#)", R4V, 21 September 2020

Venezuelan identity cards and passports are acceptable for up to two years after they have expired, and minors are allowed to register using only birth certificates. Also, a virtual platform provided by the Ministry of the Interior—[Modulo de Radicación a Distancia de Extranjeros \(RADEX\)](#)—allows migrants to start their filing process digitally, lightening bureaucratic delays. In addition, due to the COVID-19 pandemic, the Argentinian Migration Office established the automatic extension of visas as well as the suspension of administrative deadlines.



## Brazil

Approximately 262,000 Venezuelans reside in Brazil, according to the latest figures from the Regional Platform.<sup>9</sup> To respond to the humanitarian needs created by the influx from Venezuela, the Federal Government launched an initiative ([Operação Acolhida](#)) in February 2018 coordinated by the Brazilian Armed Forces, to provide registration and documentation upon arrival, as well as emergency humanitarian assistance, including food and temporary shelter. The Brazilian Armed Forces also manage a voluntary relocation programme known as “Interiorização,” which was launched in April 2018 in coordination with federal and local authorities, UNHCR and other UN organizations, the International Movement of the Red Cross / Red Crescent, civil society actors and the private sector. The programme, which initially started in Roraima, has also been extended to the state of Amazonas. So far, over 42,400 Venezuelans have been relocated to more than 600 municipalities where there are more integration opportunities, thus relieving pressure on border communities.<sup>10</sup>

Due to the pandemic, the border with Venezuela in the Brazilian state of Roraima remains close. Nevertheless, there is an increase in the number of people crossing the border irregularly to enter Brazil according to different sources. In addition, the number of migrants returning to Venezuela is progressively increasing. According to a recent report from the Organization of American States (OEA) 6,000 Venezuelan migrants have returned to their country from Brazil.



## Chile

According to a study conducted by the National Institute of Statistics and the Department of Foreign Affairs and Migration about the number of migrants in Chile, as of December 2019, there were a total of 1,492,522 migrants in Chile.<sup>11</sup> Chile is currently the third most common destination for Venezuelan migrants after Colombia and Peru, with an estimated 472,827 Venezuelans representing the largest migrant group in the country.<sup>12</sup> The majority of migrants in Chile are located in the Metropolitan Region of Santiago (70%), while the remainder choose the regions of Valparaiso (8%), Libertador Bernardo O'Higgins (3%), Maule (4%), and Bio Bio (4%) as their destination in the country.

Since June 2019, Venezuelan nationals seeking to enter Chile and apply for work authorization need to obtain a consular tourist visa prior to entry and can no longer enter Chile under visa-exempt status. The tourist visa is valid for a period of 90 days, with the possibility of extension.<sup>13</sup> Notwithstanding, the Chilean borders remain close so there are practically no regular entries into the country. Due to this situation, the number of irregular entries through the borders with Peru and Bolivia has increased over previous months, causing great concern for the Government and humanitarian agencies. The vulnerability of the people crossing borders through irregular entries is higher and exposes people to human traffic, violence and robbery. Due to the pandemic, most of the local actors in the border are not open for in person assistance, specially shelter and protection assistance.

Finally, the violent protests which started in October 2019 across the country have triggered the intention of return for many migrants to Venezuela or other countries as well as an increase in displacement within the country. Many migrants

<sup>9</sup> <https://r4v.info/es/situations/platform/location/7509>, R4V, 30 August 2020

<sup>10</sup> <https://data2.unhcr.org/es/documents/details/79506>

<sup>11</sup> [https://www.ine.cl/docs/default-source/demografia-y-migracion/publicaciones-y-anuarios/migraci%C3%B3n-internacional/estimaci%C3%B3n-poblaci%C3%B3n-extranjera-en-chile-2018/estimaci%C3%B3n-poblaci%C3%B3n-extranjera-en-chile-2019-metodolog%C3%ADa.pdf?sfvrsn=5b145256\\_6](https://www.ine.cl/docs/default-source/demografia-y-migracion/publicaciones-y-anuarios/migraci%C3%B3n-internacional/estimaci%C3%B3n-poblaci%C3%B3n-extranjera-en-chile-2018/estimaci%C3%B3n-poblaci%C3%B3n-extranjera-en-chile-2019-metodolog%C3%ADa.pdf?sfvrsn=5b145256_6)

<sup>12</sup> [RMRP 2020 Dashboard](#), R4V, 30 June 2019

<sup>13</sup> [“Venezuelan nationals now require a visa to enter Chile”](#). Fragomen, 25 June 2019.

have moved from Santiago to northern regions or are living in border cities due to fear of violence and loss of employment, which was exacerbated due to the pandemic.



## Ecuador



A sanitizing tunnel used to safely provide services to migrants in Ecuador. **Source:** ERC

An estimated 178,000 Venezuelans reside in Ecuador, the majority of whom enter at the northern border with Colombia.<sup>14</sup> While many choose to stay in the country, a significant number continue towards Peru and Chile. In response to the situation, the Ecuadorian government set up humanitarian corridors where authorized buses transport migrants from the northern border to the southern border. Those migrants that choose to stay in Ecuador tend to settle in urban areas such as Quito, Guayaquil, Manta, Ambato, Santo Domingo and Ibarra, among others. The Ministry of Education as of July 2019 reports that 16,851 Venezuelan students are registered in the country's education system.<sup>15</sup>

In July 2019, the Ecuadorian government announced that all Venezuelans entering the country after 26 August 2019 would need a humanitarian visa prior to entry. There are currently two major pathways through which Venezuelan migrants can gain access to humanitarian visas in Ecuador: (1) For Venezuelans that arrived in the country without valid immigration documents prior to 26 August, a short-stay visa is available. For those that enter Ecuador after 26 August, a humanitarian visa is necessary. The Ministry of Foreign Affairs set up a [portal](#) through which migrants can apply online, but the humanitarian visas are only granted at Ecuadorian consulates in Bogota, Caracas or Lima. In the week following the July announcement, the number of people entering through the northern border was reduced by approximately 90%, while the number of people leaving Ecuador at the southern border with Peru increased significantly.



## Guyana

Guyana currently hosts migrants from a variety of different countries of origin, including South Africa, Cuba, Haiti, Pakistan and Venezuela. Due to the economic and health crisis in neighbouring Venezuela, the number of Venezuelan migrants in Guyana has seen a particularly significant increase in recent years. An estimated 12,000 Venezuelans reside in the country, over 9,000 of whom have registered for asylum to date.<sup>16 17</sup> A majority enter outside of established border crossings, through the country's porous borders in Regions 1 and 7 alongside Venezuela or through Region 9 along the border with Brazil. The situation in remote border regions is very different from the situation in the capital city, Georgetown. Human trafficking for sexual and labour exploitation purposes is particularly prevalent in border regions and has more recently increased in the capital city.

The Guyanese government has relaxed entry requirements for Venezuelans, allowing them to apply for a three-month residence permit at border entry points by presenting identity cards. Additionally, persons can be processed and request documents from Guyana provided they can prove relations to persons in Guyana. The Guyanese Government participated in the IV International Technical Meeting of the Quito Process, which took place in Buenos Aires on 4 and 5 July, and signed both the Quito IV Declaration and Roadmap that were adopted during the meeting. The Quito Process aims to harmonize policies and practices of countries in the region, coordinate the humanitarian response and improve the enjoyment of the rights of refugees and migrants from Venezuela.<sup>18</sup>

<sup>14</sup> "[Latin America and the Caribbean: Venezuelan Refugees and Migrants in the Region](#)". R4V, 9 April 2020.

<sup>15</sup> "[16.851 Estudiantes Venezolanos en el Sistema Educativo del Ecuador](#)". El Comercio, 7 July 2019.

<sup>16</sup> "[RMRP 2020 Dashboard](#)", R4V, 11 November 2019

<sup>17</sup> "[Caribbean Sub Region: Situation Report June - July 2019](#)". R4V, 17 September 2019.

<sup>18</sup> Ibid.



With an estimated 76,000 Venezuelans, Panama has the seventh highest number of migrants from the country in the region.<sup>19</sup> In addition to the flow of migrants arriving from Venezuela, Panama experiences a unique migratory situation in the Darien region, where migrants travel across the border with Colombia through undeveloped jungle. According to the National Immigration Service, 23,968 migrants crossed through Darién in 2019 and 3,366 were recorded in the first two months of 2020.<sup>20,21</sup> Most are migrants from Haiti or Cuba, with smaller numbers coming from African or South Asian countries, with a high level of vulnerabilities in health, water and protection. The migrants—most of whom aim to reach North America—tend to arrive by boat or air in Brazil, crossing the Amazon to Peru and turning north through Ecuador to Colombia, where they hire smugglers to shepherd them through the Darien Gap. Many endure robberies and/or sexual assault by armed groups, and encounters with the drug trafficking “mules” who walk the same paths as the migrants. Once through the Gap, most migrants pass through the small villages of Bajo Chiquito or Canaan Membrillo before making their way by foot or by boat along the Chucunaque River to La Peñita. From Darién, migrants take a bus to Los Planes, in Panama’s Chiriquí province near the border with Costa Rica, before continuing north.



A view of La Peñita, the village in Panama where PRCS operates through the regional Appeal. The village hosts migrants from a variety of different nationalities. **Source:** PRCS

According to a June 2019 an International Organization for Migration (IOM) survey utilizing the Displacing Tracking Matrix (DTM) methodology in Los Planes, stated that the United States is the destination country for 68% of the migrants surveyed, Canada for 7%, and Mexico for 14%. 11% have not yet decided on a destination country. Socioeconomic conditions were identified by 48% of people as the primary factor that influenced this choice, followed by political stability and ease of access to asylum procedures (39%). Family reunification, meanwhile, is the primary goal for 13% of those surveyed. The migrants surveyed claimed to have left their countries of origin for various reasons. Respondents from Caribbean countries stated that their primary reasons for leaving were a lack of economic opportunities and unemployment (36%), political instability and persecution (20%), and limited access to basic services such as education, healthcare, and transportation (9%). On the other hand, political instability and persecution (41%), wars or armed conflicts (25%), and insecurity and indiscriminate violence (22%) were identified as the primary push factors for migrants from African and Asian countries.<sup>22</sup>

<sup>19</sup> [“Latin America and the Caribbean: Venezuelan Refugees and Migrants in the Region”](#). R4V, 9 April 2020.

<sup>20</sup> [“Transito Irregular de Extranjeros por la Frontera Con Colombia: 2019”](#). Servicio Nacional de Migración Panama, 31 December 2020.

<sup>21</sup> [“Transito Irregular de Extranjeros por la Frontera Con Colombia: 2020”](#). Servicio Nacional de Migración Panama, 29 February 2020.

<sup>22</sup> [“IOM publishes the first data from 2019 on the profile of extra-regional migrants in Panama”](#). IOM, 8 July 2019.



Around 477,000 Venezuelans are currently living in Peru, which remains the second most popular destination in South America for Venezuelans after Colombia.<sup>23</sup> An estimated 35,000 migrants entered the country in 2019. Although the government has given temporary legal status to Venezuelan migrants, they have limited access to basic services such as health, education and the formal labour market.

Until June 2019, Venezuelans could enter Peru and apply for a temporary residency permit (or PTP) which allowed them to live and work in the country for a year. The permit allows migrants access to training, healthcare, and public education, and is renewable on an annual basis. But the Peruvian government announced in early June – six months after giving a deadline for the final PTPs to be issued – that Venezuelan migrants would thereafter be required to obtain a humanitarian visa before entering the country. The humanitarian visa allows Venezuelans to live and work in Peru, and is free to obtain, but securing the required documentation is costly and beyond the reach of many migrants.<sup>24</sup>



Only seven nautical miles from the coast of Venezuela, Trinidad and Tobago is currently one of the largest migrant-receiving countries in the Caribbean. An estimated 24,000 Venezuelans reside in the island nation.<sup>25</sup> Trinidad and Tobago has not had such numbers of inward migration in its modern history, therefore legal frameworks and institutional capacity to cope with the situation are lacking.

The official port of entry in Trinidad and Tobago is at Cedros Security Complex, where ferries from Venezuela are meant to disembark. The facility is closed to Venezuelans, however, even for those with the correct documentation needed to enter.<sup>26</sup> For those migrants choosing to travel irregularly to Trinidad and Tobago by boat, the journey can be a perilous one. Beginning in early 2019, there were a number of shipwreck incidents involving Venezuelan migrants attempting to enter Trinidad & Tobago and other Caribbean islands. Between April and June 2019, there were three shipwrecks that led to the death or disappearance of more than 80 Venezuelans in the region.<sup>27</sup>

On 26 July, the Government of Trinidad and Tobago began issuing registration cards to Venezuelans who had registered in the two-week exercise that was conducted from 30 May to 14 June 2019. The registration cards will allow Venezuelans to work legally for six months, after which a renewal for another six months can be granted. Card-holders still require a visa to travel between Trinidad and Venezuela. Although the registration card is not an identity document, at least one bank in Trinidad and Tobago announced that it will accept it as one of two forms of identification needed to access banking services (savings accounts and ATMs).



Recent official figures indicate that there are approximately 19,000 Venezuelans in Uruguay.<sup>28</sup> Although the Southern Common Market (MERCOSUR for its acronym in Spanish) suspended Venezuela, the Uruguayan government has provided Venezuelan migrants with access to the formal labour market and basic services. However, since March 2020, the borders with Argentina and Brazil remain closed. The Government elected in November 2019 has openly manifested its willingness to continue receiving migrants, mainly from Venezuela and Cuba, which represent the two largest migrant populations in the country. The main challenges for migrants in Uruguay are access to shelter, health and other basic services, as well as livelihoods.

<sup>23</sup> [RMRP 2020 Dashboard](#), R4V, 3 August 2020

<sup>24</sup> ["In Peru, tougher rules set to push Venezuela migration underground"](#). The New Humanitarian, 8 July 2019.

<sup>25</sup> ["Latin America and the Caribbean: Venezuelan Refugees and Migrants in the Region"](#). R4V, 9 April 2020.

<sup>26</sup> ["Caribbean Sub Region: Situation Report June - July 2019"](#). R4V, 17 September 2019.

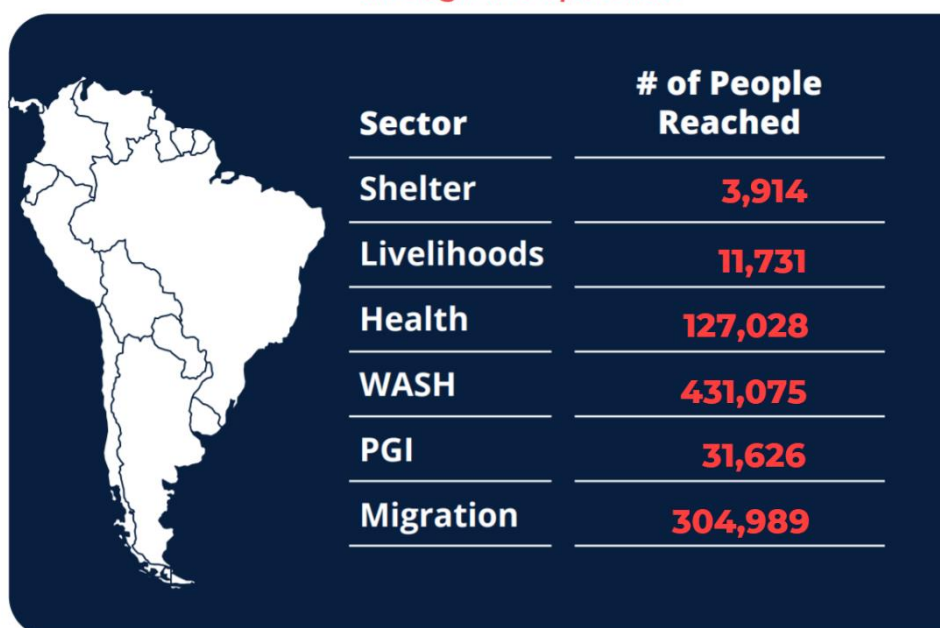
<sup>27</sup> ["Migrant Deaths Rise Among Venezuelans, Central Americans: UN"](#). Reuters, 18 June 2019.

<sup>28</sup> [RMRP 2020 Dashboard](#), R4V, 4 September 2020

## Summary of current response

### Overview of IFRC Actions at the Regional Level

A total of approximately  
**962,514 services** provided  
through the operation



In response to the growing number of migrants in the region, the IFRC's Americas Regional Office (ARO) issued an Emergency Appeal operation in September 2018. The operation involves a coordinated response in nine countries affected by the migration flows in the region – Argentina, Brazil, Chile, Ecuador, Guyana, Panama, Peru, Trinidad & Tobago, and Uruguay. In late 2018, a Migration Cell was organized out of the ARO office in Panama. The cell consists of IFRC personnel specialized in Migration, Community Engagement and Accountability (CEA), Protection, Gender and Inclusion (PGI), Information Management (IM), Psychosocial Support (PSS), Cash and Voucher Assistance (CVA), Finance, Planning, Monitoring, Evaluation and Reporting (PMER) – all working in coordination with National Societies in the affected countries as part of the regional Emergency Appeal operation. IFRC also deployed field coordinators to the Country Cluster Support Team (CCST) offices in Argentina, Chile, Peru, and Trinidad & Tobago. The Migration Cell has taken a decentralized approach to operational coordination. Team members frequently travel to the National Societies included in the Appeal, offering technical support, and overseeing capacity building exercises and/or activity implementation. With the COVID-19 outbreak, the team has provided constant and continuous support remotely. Furthermore, the operation continues to monitor the different migratory flows in the region, offering technical support to National Societies in the [Development of Migration Strategies](#)<sup>29</sup> and plans.





The process of developing a National Migration Strategy encompasses different phases resumed in the following's tables:

<sup>29</sup> The report is also available in [Spanish](#).





## Workshop, development, completion and adoption of the migration strategy

	Panama 	Ecuador 	Peru 	Chile 	Uruguay 	Argentina 	Brazil 	Trinidad and Tobago 	Guyana 
Workshop "Development of a Migration Strategy"	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>		<input checked="" type="checkbox"/>	
Elaboration of the Migration Strategy Work Plan	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>			
Drafting of the Migration Strategy	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>			
Definition of goals, strategic objectives and aims of the Migration Strategy	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>			<input checked="" type="checkbox"/>			
Final draft of the Migration Strategy being approved by the Governing Board	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>				<input checked="" type="checkbox"/>			
Migration Strategy approved by the NS			<input checked="" type="checkbox"/>						

In addition, National Societies are supported in identifying the different migration profiles and compositions of flows with a PGI and CEA approach. In November 2019, the Migration Cell coordinated a Training of Trainers (ToT) workshop on Migration developed in coordination with the Reference Centre on migration in Lima, Peru. The general objective of the workshop was to "Strengthen the capacities of National Societies to address the needs of migrants, in addition to strengthening the methodological component through the competency-based approach". The workshop was attended by 25 participants: 16 were men and 9 women, representing 9 National Societies, ICRC (1) and IFRC (4).

In response to the COVID-19 pandemic, the Migration Cell is in constant coordination with the COVID-19 Regional Emergency Appeal Operation, offering technical support in relation to the cross-cutting theme of migration, and is supporting with the adaptation of the Regional Appeal for Migration in response to the pandemic. For more information about our response and measures adopted since the COVID-19 outbreak, please consult the [GO Platform](#).

## Overview of Host National Societies / Movement Partners

Given the number of countries included in the appeal and the ever-changing nature of migration situations, the regional Emergency Appeal is a complex operation that requires a flexible approach. Countries such as Peru and Ecuador have tailored their response to a migrant population in transit, operating mostly out of border crossing points. Chile, Argentina and Uruguay are more often destination countries, and have focused their response on meeting the needs of migrants settling in urban areas. The unique migration situations in Panama, Trinidad & Tobago and Guyana, on the other hand, require a response that may look quite different from that in other countries involved in the operation.

The **Argentine Red Cross (ARC)** has 63 operational branches with approximately 1,630 staff members and over 7,000 volunteers. The response is focused in 6 key areas: health promotion, consultancy, and advice on settlement procedures (Migration), Protection, Gender and Inclusion (PGI), Shelter, Livelihoods and Restoring Family Links (RFL).

In response to the COVID-19 crisis, ARC activated a contingency plan for the human mobility response in early March 2020.<sup>30</sup> The Argentine Red Cross' humanitarian response at the borders, which depends on the entry of migrants and

<sup>30</sup> "National Human Mobility Programme Contingency Plan: COVID-19 Pandemic," Argentine Red Cross.

refugees into the territory, are still affected due to the borders closure.. This includes any intervention involving food, temporary shelter, delivery of NFIs, and humanitarian transport. Notwithstanding, the ARC has established a tele-assistance service for migrants to offer psychosocial support, information and referrals. In addition, it has distributed food kits to migrants with partner organizations, considering the adverse socio-economic effects of the pandemic among vulnerable populations, as well as emergency shelter through a cash-based intervention programme. In addition, the National Society, through its Humanitarian Observatory and with the support of IFRC, launched a research study about the impact of the pandemic on migrants. In summary, this study indicates that 70% of migrants are currently unemployed, 60% did not obtain any income in the last few months and 70% have difficulties to access food, which increases the risk of food insecurity

The **Brazilian Red Cross (BRC)** has been operative in the country for more than 110 years. It has operational branches in 20 states and in the Federal District and it provides humanitarian assistance across the country. Since the beginning of the pandemic, the National Society, with the technical and financial support of the IFRC, is providing humanitarian response to vulnerable migrants in the states of Rio Grande do Sul, Mato Grosso do Sul, São Paulo and Amazonas (second Brazilian state, apart from Roraima, where the Operacao Acolhida operates). Support is provided in the areas of health, WASH, psychosocial support, restoring family links, protection, gender and inclusion, and livelihoods. These interventions aim at guaranteeing food security, promoting personal hygiene habits in the time of COVID-19, preventing the disruption of family links, delivering workshops to migrants on gender-based violence and labor exploitation, promoting and protecting the rights of migrants, providing psychosocial support services to relieve stress and anxiety, as well as strengthening the capacities of volunteers and staff of the National Society. Some of these interventions are conducted in shelters that host Venezuelan nationals who have been part of the Government's internalization programme.

Additionally, a very positive Movement-coordination (BRC-IFRC-ICRC) has been developed over recent months to strengthen the humanitarian response in Brazil. This tight communication and coordination dates back to October 2019 with the start of a migration project between IFRC and ICRC in the states of Roraima and Amazonas. This project aimed at strengthening the response of the International Movement of the Red Cross to the humanitarian needs of migrants in the states closer to Venezuela. After six months of implementation (October 2019-March 2020), 109,239 services for restoring contact between family members were provided and 8 interventions were carried out in the WASH area, benefiting a total of 16,657 additional people.

Since 2014 the **Chilean Red Cross (CRC)** has an arrangement with the Ministry of Social Welfare to manage shelter services in the cold season, from May to October, for those in need. These services are available for, but not limited to, the migrant population in Chile. CRC supports 3 shelters, with a maximum capacity of 60 people in the highest capacity location and 30 people in the lowest capacity location. It is estimated that 3 out of every 50 people seeking shelter in Chile are migrants.

In response to the COVID-19 crisis, CRC developed a contingency plan to continue delivering humanitarian assistance to vulnerable migrants, focused on the provision of remote psychosocial support services and the distribution of humanitarian kits. While most humanitarian agencies suspended their services to migrants, CRC has increased its operational capacities to fulfil its mandate and strengthen its response in favour of vulnerable migrants.

In addition, the IFRC Country Office and the Chilean Red Cross have updated a response plan of action within the framework of the migration operation in the region. Despite the limited resources and the restrained mobility, it has been possible to ensure an optimal-coordination between the National Society's leadership and its technical areas, which has made possible to carry on with several activities within the operation focused on: Distribution of Humanitarian Aid, Cash Transfer Programmes, Hydration and safe water, Prevention and self-care activities, Provision of Health Services and Psychosocial support.

With the increase in the number of Venezuelans entering and passing through Ecuador, the **Ecuadorian Red Cross (ERC)**—with support from the Swiss Red Cross, the Spanish Agency for International Development Cooperation (AECID), the Asturian Development Cooperation Agency (AACD), European Civil Protection and Humanitarian Aid Operations (ECHO), the IFRC and the ICRC—began to implement its national plan for migrants in 2018. According to [ERC's population movement dashboard](#), nearly 320,000 services have been delivered to migrants. The response in Ecuador has taken place in Azuay, Carchi, El Oro, Esmeraldas, Imbabura, Manabí, Pichincha, Santo Domingo, Sucumbíos, and Tungurahua provinces.

**Guyana Red Cross (GRC)** has 7 branches, 40 staff members and a total of 350 volunteers. GRC participates in coordination meetings every two weeks regarding the migration situation in-country. Representatives from UNHCR, UNICEF, UNFPA and PAHO/WHO are regularly in attendance, along with members of the Guyana Ministries of Immigration, Foreign Affairs, Public Health, Education, Social Protection and the Civil Defence Commission. Through a 3-month agreement with UNHCR, GRC has also supported efforts to register migrants seeking asylum in Guyana. Using space at the GRC headquarters in Georgetown, GRC staff support UNHCR officials once a week in interviewing migrants and filling out registration forms. More than 50 migrants have registered at the office so far in 2019, a majority of whom are females from Cuba or from a variety of African countries.

In Panama, the planned response was originally focused on Venezuelan migrants seeking to settle in the country. However, given the humanitarian crisis in Darién, **Panama Red Cross Society (PRCS)** decided in early 2019 to shift its focus to a response geared more towards migrants entering in Darién and passing through the country on their way to North America. PRCS began implementing field evaluations in Darién in February 2019 and hired a project coordinator in July to work solely on the migration response. In December 2019, a cash transfer pilot program was carried out in La Chorrera to test the RC2 Relief data collection tool and the use of the Federation's debit card for money transfers with amounts differentiated by family group composition. A registration with RC2 was made and the following day a distribution was implemented using the tool. The whole process was digital and allowed to ensure data protection of the people assisted. The target group was 40 families, assisted by PRCS, who are migrants, asylum seekers or refugees.

The **Peruvian Red Cross (PRC)** has 41 branches, 62 staff members and over 800 volunteers at its disposal. Utilizing staff and volunteers from its branches in Tumbes and in cities along the north coast of Peru, PRC is one of several actors acting out of the Binational Border Care Centre (CEBAF) in Tumbes. PRC began responding to the rising number of Venezuelan migrants entering Peru in May 2018 and receives support from both the Spanish and German Red Cross, in addition to the IFRC and ICRC. Jointly with the IFRC Country Office in Lima, the Peruvian Red Cross has implemented 3 different initiatives of inclusion through arts oriented to communities and schools: 1) La Tarumba, has worked with young Peruvians and Venezuelans through the circus developing social-emotional skills and receiving psychosocial support; 2) La Combi, which worked on community cinema developing video clips related to migration, stigma and discrimination with children and youth in school centres; 3) D1, a well renowned dance company, elaborated a performance named “We are all migrants” with the aim to sensitize communities around migration. These initiatives have been funded by other funding partners.

In April 2019, the **Trinidad and Tobago Red Cross Society (TTRCS)** hired a Migration Programme Officer to work exclusively on the Emergency Appeal. The focus of the National Society has thus far been to increase capacity building around the issue of migration—which involves several new services for TTRCS—and to find Spanish-speaking volunteers for the operation. As migration is a sensitive topic in Trinidad and Tobago, with political implications that must be considered by the National Society in the operational context, TTRCS is planning implementation activities in a way that ensures that it is perceived as impartial and neutral by all community members, both belonging to host and migrant communities. In April 2019, the migration officer attended a regional stakeholder meeting on operationalizing a Regional Framework for Migrant Health and Rights. In July, TTRCS's finance officer attended a cash training in Barbados in preparation for Cash and Voucher Assistance (CVA) implementation in Trinidad and Tobago. The migration officer and a TTRCS board member also attended an ICRC training on Restoring Family Links (RFL) in

Curacao in August 2019. On 26 September 2019, TTRCS held a stakeholder meeting on with a total of 40 participants from 21 organizations (both Government and Non-Governmental entities working on migration).

The **Uruguayan Red Cross (URC)** has 19 branches, 30 staff members and approximately 300 volunteers. URC focuses its response for migrants on actions in the following sectors: Shelter, Health, Livelihoods, and Migration (including activities aimed at reducing stigma and xenophobia, re-establishing contact between family members and accessing information).

Regarding the impact of COVID-19 in Uruguay, the Uruguayan Red Cross (URC) has continued with the following activities:

- A Cash and Voucher Assistance (CVA) Programme;
- Distribution of dinner meals to migrants on a daily basis;
- Development of communication materials to facilitate migrants' access to rights;
- Provision of RFL services;
- Distribution of Hygiene kits as well as winter kits;
- Administration of a contingency center for migrants in Rivera;
- Elaboration of a response plan to the pandemic.

## Overview of Red Cross Red Crescent Movement

The International Committee of the Red Cross (ICRC) provides a response to the needs of migrants in the countries covered by this appeal through its Regional Delegation in Brasilia (covering Brazil, Argentina, Uruguay and Chile), its Regional Delegation in Lima (covering Peru, Ecuador and Bolivia), its Regional Delegation in Caracas (covering Venezuela, Trinidad and Tobago, Aruba, Bonaire and Curaçao) and its Regional Delegation for Panama and the Caribbean. The ICRC responds to the needs of migrants in Colombia through its country delegation. ICRC actions, focused on protection and RFL, are primarily implemented in sensitive border areas (mainly in Brazil, Colombia and Venezuela but also in Peru, Ecuador and the Caribbean islands). These are coordinated and complementary to those undertaken by other Movement partners.

The ICRC—together with host National Societies, the Secretariat and other Partner National Societies—continues to support the provision of RFL services along the migratory route. The 33 RFL connectivity kiosks (23 supported/implemented by ICRC) offer a combination of the following services: phone calls, access to Wi-Fi (with personal smartphones or Red Cross smartphones), access to the internet (with Red Cross laptops/tablets) and battery charging. In some of these kiosks, the Red Cross distributes self-care messages and messages to prevent family separation along with first aid, hydration and psychosocial support services. The ICRC also invests in the capacities of National RC/RC societies in RFL.

The IFRC Regional Office for the Americas (ARO) ensures proper and effective coordination between Movement components (National Societies and the ICRC) to meet the needs of the affected countries through their respective National Society. Considering the current migration context, ARO has formed a Migration Coordination Cell composed of experts from the IFRC with the mission to assess the situation and support the implementation of *active emergency* operations in the region. From this perspective, the Migration Coordination Cell is expected not only to address matters related to Venezuela, but also to contribute to advancing more regional planning and promotion of migration.

To achieve its objective, the Migration Coordination Cell operates on interrelated fronts:

- Help the National Societies to respond operationally to the crisis in migration corridors.
- Provide technical advice, including on new Red Cross Movement intervention areas.
- Provide expanded support to ensure that policies, advocacy actions and communication campaigns align with regional advocacy strategies related to the Toluca Declaration.

- Establish an integrated information system.

The Migration Coordination Cell is led by the Disaster and Crisis Department. The main goals of the Cell can be found in past Operation Updates and Revisions of the Emergency Appeal. It is important to reflect in this operation update the structure of the Migration Cell with a completed staff in Migration (South Cone and Regional), field coordination (Chile and Panama), Financer structure (Coordinator, Officer and assistant), Psychosocial Support surge, Cash Based Intervention surge, Information Management Senior Officer, Community Engagement and Accountability Senior Officer, Communication officer and other resources supporting the cell as Protection Gender and Inclusion Senior Officer, Security officer and other teams members of the IFRC.

The IFRC also coordinates closely with the ICRC delegations and regional delegations in the Americas and at its headquarters in Geneva, which collectively cover migrants' entire migratory journey. The ICRC, due to its well-established expertise and long-standing experience in Protection, is increasing its support to the affected National Societies along the migratory routes, coordinating with the Emergency Appeal for Migration in Colombia and with the Monarch Butterfly project in Peru.

## **Overview of non-RCRC actors**

The RCRC Movement coordinates with the IOM, UNHCR, and other UN system agencies and NGOs that participate in the Regional Platform of Interagency Coordination. This platform currently has 43 participants, including the Red Cross Red Crescent Movement, 17 UN agencies, 17 NGOs, five donors, and two international financial institutions. The platform, established by UNHCR and IOM in April 2018, organizes and synchronizes the response to migrant persons and refugees from Venezuela at the regional level. Dedicated national coordination platforms are already in place in Brazil, Colombia, Ecuador, Peru, Costa Rica and Panama; inter-agency coordination also is ongoing in the Caribbean, Central America and Mexico and Southern Cone. In addition, the IFRC through existing global agreements has maintained bilateral coordination with UN agencies in the target countries.

In their role as auxiliaries of their governments in humanitarian matters and abiding with Red Cross principles, National Societies participate in national coordination platforms managed by the United Nations.

## **Needs analysis and scenario planning**

### **Needs analysis**

The continuous spread of COVID-19 in the Region, added to the response measures implemented by several countries to contain the virus and fight against it at a regional level, is producing differentiated changes and impacts that have worsened the situation faced by the migrant and refugee population and by host communities. The impact of the virus and the increased vulnerability of migrants and refugees have produced profile and flow changes.

Regarding migration flows, there has been a significant increase of migrants returning to Venezuela. Many of the returnees are going back to their country because they have no opportunities in the host and transit countries. This is an alarming situation considering the high risks migrants may face particularly regarding their health and protection. Some Venezuelan migrants have been returned according to organized actions — such as the Colombian case — but they may face even harder conditions in Venezuela. Many have experienced limited access to food, money and temporary shelter since Venezuela is still going to a specific humanitarian situation.

Since the start of the operation, the IFRC and National Societies have continued conducting assessments of migrants' needs and the situation in host countries. Additional information is gathered through the Regional Platform and secondary sources (governments and humanitarian actors in the field) to identify changes per country and regionally in migration flows, profiles, needs and actors working on these. Overall, needs exist in areas such as Shelter, Health,

WASH, Livelihoods, maintaining and restoring family links and education. These vary depending on the migrant's profile (gender, age, where they are in their journey [in transit or at their final destination]) and the country.

While there are still pressing needs in the areas mentioned above, the IFRC sees the need to increase and highlight more actions related to **Protection, Gender and Inclusion (PGI), access to information, social inclusion, access to the labour market and Community Engagement and Accountability (CEA) within the context of Migration for all sectors**. The upcoming revised appeal will bring together the revisions National Societies are making to their national plans of actions and budgets. See section **B. Operational Strategy**.

#### **Shelter:**

Migrants are forced to seek informal and inadequate shelter (especially in destination countries) due to high housing prices and demand, compared to the available supply of adequate accommodations. During the transit process, shelters often lack the capacity to absorb the number of migrants arriving, forcing them to live in precarious conditions on the street or in informal settlements.

The demand for rent support for asylum seekers and migrants outweighs the supply of affordable housing options. Overcrowded conditions in accommodations is a high risk for people on the move and migrants. In most countries, the target population resides in cities with a high rate of urbanization and acute levels of vulnerability. Increased prices for rental properties, overcrowding in housing and lack of legal support for rent are common. In host countries, a focus on Housing Land and Property support is necessary.

#### **Livelihoods and basic needs (including food security):**

Loss of income, reduced assets, absence of legal documents and inability to enter the labour market make accessing food and launching or restarting income-generating activities difficult. Livelihoods recovery is hampered by high levels of poverty and inequality, inefficient health and education systems and limited work opportunities in transit and host communities. Migrants' complicated legal status and vulnerable humanitarian situation makes them especially vulnerable to labour exploitation. Lack of trust and xenophobia limit opportunities for migrants to access employment opportunities and/or place their products in local markets.

The majority of skilled migrants face challenges obtaining positions for which they are qualified and often engage in unskilled labour for which they are overqualified. Women, with their traditional support network disrupted, usually engage in caring for children, sick and elderly, and other domestic labours such as cleaning. Most women, therefore, do not have time for job seeking or cannot commit to time-intensive work opportunities. Women who are able to engage in paid work are exposed to protection threats, labour exploitation, xenophobia, restricted access to markets and unsecure working conditions. Finally, it is important to mention the high risk of child labour, as migrant children in some instances work alongside their parents, beg in the streets or sell items (this can include forced begging by their parents or as a result of trafficking) and are subject to forced labour in domestic work. There are also informal reports of commercial sexual exploitation, sometimes as a result of human trafficking; unfortunately, there are no updated figures available or research to show how many child migrants are facing this protection issue.

#### **Health:**

Health access for the migrant population is limited to specific care received in countries of transit (at isolated points); however, these services are of variable scope and coverage and do not represent comprehensive health care. Likewise, they are not part of an information management system that allows for the medical follow-up of users or patients beyond the point of care. In these conditions, clinical-pharmacological follow-up is lost, as well as the possibility of maintaining therapies and treatments for Non-Communicable Diseases (NCDs) or chronic diseases, generating an impact on the health condition of migrants. One of the main obstacles to health care is language barriers, since without human or technological resources to facilitate interpretation, many people increase their vulnerability, generating complications in their health condition due to lack of care and timely treatment.

The need to integrate supplementary and complementary nutritional programs, according to the needs of the population groups, the availability of resources in food security according to the cultural customs of both migrants and the receiving country. Similarly, supplementing immunization programs for the most vulnerable groups (children, older adults, immunocompromised persons) is a felt need, based on the lack of such programs in their countries of origin. Finally, the integration of health actions with host communities will ease the integration and natural acceptance of the migrant population, and in turn, the prevention of gender-based violence (GBV).

#### **Psychosocial Support (PSS):**

National Societies (NS) face the challenge of addressing psychosocial needs according to the characteristics of the context and the current situation. From the evaluation of psychosocial needs, it is emphasized the importance of strengthening the component of PHC in the technical aspect, available resources, installed capacity, structuring of procedure, guidelines and follow-up of the actions carried out by the NS. It also reflects the importance of having a reference and/or coordinator who can manage, coordinate and develop the PHC approach, as well as points of care and human resource capacity, being important for the articulation of volunteers and staff for care. In this way, the development, implementation and adaptation of regional documents such as the guide for differentiated health care and psychosocial support and the protocol for care and intervention in mental health and psychosocial support (SMAPS) for migrant populations, which contribute to strengthening psychosocial orientation in individual and group interventions carried out by the SNs.

The need to strengthen the processes of referral of cases that require specialized attention. In addition to articulating actions with other components such as PGI and CEA, with the aim of generating strategies for the promotion of mental health and psychosocial support for the community and as a fundamental element the need for continuous strengthening of volunteers and staff through a process of continuous training to promote knowledge and skills in the care of the population and their psychosocial well-being.

#### **Water, sanitation and hygiene promotion (WASH):**

The migrant community at certain points of their transit has limited access to safe water. It is essential to promote health in the environment by creating healthy environments where the community can follow the protection measures against COVID-19. To this end, it is extremely important to ensure that they have safe water and soap as a minimum, messages reinforcing the proper use of water, as well as resources for handwashing and hygiene education involving the entire community.

Without access to safe water, water distribution points, handwashing points, and soap in the community, basic handwashing hygiene actions and MRS facilities are compromised. Water education and health education are essential approaches to meeting these needs, fostering learning about water and health at the community level. In addition, improving institutional, professional, technical, health and education sector capacities, as well as water sector operators, are key to fostering understanding of cultural aspects of water, sanitation and hygiene to promote health equity.

#### **Protection, Gender and Inclusion (PGI):**

Insecure living conditions, a lack of community ties in host countries, fear of repercussions for being irregular migrants and the lack of official government protection negatively affect migrant populations. Furthermore, children and adolescents (particularly girls, women and unaccompanied youth) are at risk of sexual and gender-based violence (SGBV), unsafe child labour, labour exploitation, loss of educational opportunities, not meeting their age-specific nutritional needs and psychological challenges due to the migrant experience.

All the countries included in this Appeal have significant gaps in providing institutional referral mechanisms for protection issues, especially for migrant survivors of SGBV or other form of violence. Sex trafficking, for example, is one of the more prevalent protection risks. It is extremely difficult to identify, however, and there are very few existing referral mechanisms for victims. Referral systems do exist in some countries, but they do not ensure proper protection of the

affected population. Instead, these mechanisms tend to be time costly and ineffective. UN agencies, governments and the Red Cross have identified severe challenges with identified cases and their subsequent management.

### **Migration:**

Since the beginning of the operation, the IFRC and the different NS involved, have constantly observed and monitored the different needs of migrants in the region also in coordination with the operation in Colombia. The different flows and the composition of these, as well as the profiles of migrants have changed constantly since 2018. In general, at all stages of their journey, many migrants face coercion, exploitation and abuse, challenges that are compounded by inadequate support and limited access to essential services. The immediate needs of all persons exposed to physical or psychological danger during their journey—whether by land or by sea, and irrespective of their legal status—must be met, and persons with specific needs should be identified and supported. Without the opportunity to safely access essential services throughout their journeys, the humanitarian needs of migrants cannot be met, contributing to increased suffering and harm, as well as a loss of dignity.

According to the Regional Coordination Platform for the Response for Venezuelans (R4V), co-led by the International Organization for Migration (IOM) and UN High Commissioner for Refugees (UNHCR), until 2015, the region had largely been characterized by high levels of emigration, and neighbouring countries had never experienced migrant inflows at this scale.<sup>1</sup> Since then, receiving countries have largely maintained an “open-door” approach toward Venezuelans, with significant policy innovations allowing many to enter, remain on an interim basis, and receive legal status via existing visa categories and special regularization programs, as well as the reception of requests for asylum. However, the COVID-19 pandemic that hit the region in early 2020 has added a new layer of complexity. Receiving countries now face the challenge of managing a public-health crisis while also addressing the needs of displaced Venezuelans and the communities in which they live. Refugees and migrants in the Region are especially vulnerable to coronavirus and other diseases due to high geographic mobility, instability, informal or precarious income, overcrowding, lack of sanitation, and lack of access to decent health care or vaccination programmes, among others.

### **Community Engagement and Accountability:**

Lack of information, spreading of misinformation and rumours and difficulty accessing humanitarian organizations negatively affect migrant populations, especially vulnerable groups. While in several cases information is available, it does not reach the target population as there is a need to maximise the use of the right communication channels to talk to migrants. As people are uninformed, they can easily miss out on services and available assistance or be exposed to misinformation that might put them at risk. Given the high ownership of connectivity (79% of people have access to the internet), and phone access (70% of people have access to a mobile phone). Lack of participation is also a concern, as people might not have the opportunity to shape the assistance they receive and thus the aid delivered might not be satisfying actual needs. Increased participation is needed to ensure assistance is provided considering specific needs and preferences of vulnerable groups. Opening channels to listen to the community is also needed as it helps build a relationship of trust with migrants, and ensures channels are available to identify complaints, including serious instances such as sexual exploitation or abuse, fraud and corruption cases.

A rise of discrimination and negative sentiment towards migrants has been observed across the region. As mentioned in previous sections, xenophobic attitudes towards migrants by host communities raises protection concerns, can hinder access to basic services and could impede migrants’ abilities to engage in local labour markets. As a result, it is important to consider the need to engage with host communities and ensure activities are put in place to build a positive conversation around migration and facilitate the creation of a more inclusive and peaceful community, especially in countries of destination.

### **Operation Risk Assessment**

While clear predictions regarding the evolution of the migratory context in the Americas are not possible, several factors will continue to influence the current population movement:

- The socio-political situation in Venezuela, which also encompasses the context of pressure from external actors;
- Changes to migrant profiles, new routes and shifts in crossing points along borders;
- The economic situation in Venezuela that has generated a shortage of food, water supply and limited access to healthcare, which especially affect children and people with chronic diseases, and has a regional impact;
- The illicit armed groups active on the Colombian-Venezuelan border that could continue to spur the displacement and the mobility of the population; and
- Changes in migration policies, including the closure of borders, in host and transit countries.
- The current COVID-19 context poses significant risks to migrants and challenges to the regional operation, including the increase of vulnerabilities due to loss of employment, the significant number of migrants stuck at border areas and an important amount of Venezuelans aiming to return to their home country.
- Social contexts in the host and transit countries triggers different travel behaviours and increasing stress and anxiety, making migrants to take fast decisions that can put them and their families at risk.
- Reduced operational space in the countries of transit and destination
- Return of persons to Venezuela, under the tightening of migration policies
- Deterioration of the economic condition in transit and destination countries
- Reduced funding to sustain the operation
- Disaster in Americas
- Changes of the profile of population in transit

The IFRC, during an internal review, mapped different macro scenarios to identify possible regional-level actions for different types of outcomes of the current situation, analysing what could be the impact at the regional level. This exercise was repeated with the National Societies from Argentina, Costa Rica<sup>31</sup>, Ecuador, Panama, Peru and Uruguay to assess how each scenario could affect the situation in their countries and lead to possible changes in their humanitarian interventions.

Although it can be assumed that the COVID-19 context will change the migratory flows, the evolution of the influx as stated in the previous update remains:

- It can be assumed that the flow of people will continue;
- The actual number of migrants is underestimated due to the use of unofficial border crossings; and
- Migration routes could shift if more restrictive migration policies are implemented.

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<sup>31</sup> The Costa Rican Red Cross was invited to the process as they are also responding to the needs of migrants and have assessed a scenario in which there is a migration influx in their Costa Rica.

## B. OPERATIONAL STRATEGY

### Proposed strategy

In response to a sustained increase in population movements in the Americas, the RCRC Movement is conducting humanitarian operations through this Regional Appeal in nine countries receiving migrants. The National Societies in the region have scaled up their response with the support of other components of the Movement: the ICRC, PNS and the IFRC's Secretariat through DREF operations, the Emergency Appeal Colombia: Population Movement (MDRCO014), the Emergency Appeal in Venezuela (MDRVE004) and this Regional Emergency Appeal.

### Regional strategy on Migration:

The Emergency Appeal is aligned with the [Toluca Declaration for Migration \(TDM\)](#), which was adopted in November 2016 by the International Red Cross and Red Crescent Movement and established the Movement's regional priorities for the response to the humanitarian needs of migrants in the Americas. A [Red Cross Movement Plan of Action on Migration in the Americas 2017 to 2020](#) was established the following year, defining four lines of intervention to address migration:

- Improve the protection of migrants and reduce their vulnerabilities;
- Reduce stigma and discrimination against migrants and promote social inclusion;
- Conduct humanitarian diplomacy to protect migrants' dignity and rights;
- Strengthen knowledge management in the Movement through collaborative platforms and networks.

Areas of Focus per Country Included in the Emergency Appeal



Source: IFRC

All four lines are being addressed through this Emergency Appeal, with Protection, Gender and Inclusion (PGI) playing a central role in the intervention, supported by Community Engagement and Accountability (CEA) strategies. The [18-month Operation Update](#) develops the core intervention pillars of the operation.

National Societies have been working to develop national CEA plans and strategies that ensure communities are consulted, included and listened to throughout the intervention cycle. CEA is understood as a transversal theme in the intervention, however, in an effort to show a coherent CEA strategy that is present in every area of intervention, the CEA outcome, outputs and indicators are grouped together under the Migration area of focus in section **C. Detailed Operational Plan**, below. CEA activities focus on the following main areas:

- **Community participation and feedback:** Feedback mechanisms have been increasingly integrated in the response at local and national level to ensure two-ways communications can be established with the communities to identify changing needs, priorities and areas of concern. Feedback has been used by programmatic areas to shape response and adjust activities to ensure that our services are relevant and focus on responding to priority needs of the community. The IFRC has been coordinating at regional level with the

CwC group of the R4V platform to ensure coordination and synergies specially regarding surveys and studies. The National Societies have been also coordinating with the R4V interagency effort at national level. In response to the COVID-19 crisis, an information sharing system has been established through Whatsapp.

- Providing information as aid: The NSs have done a great effort producing timely, actionable and potentially life-saving information on different key thematic areas:
  - Information on the migratory route and potential risks faced by migrants (including climate, terrain and other potentially life-saving information), protection messaging, safety tips.
  - Information on migrants' rights at the country of transit or destination
  - Information on services available to migrants (both RC and through other organizations)
  - Health tips and information (including hygiene promotion)
  - Messages against xenophobia and discrimination

At the onset of the COVID-19 pandemic, IFRC developed risk communication action guides and National Societies worked on adapting messages and channels to ensure that migrants had the information they needed to protect themselves during the pandemic. Different formats have been developed and traditional, digital and innovative channels have been used to ensure that information reaches and produces changes in behaviour that will help people protect themselves from the epidemic.

- Capacity strengthening: The NSs have identified their CEA Focal points and the IFRC has been providing trainings, webinars courses, facilitating peer to peer support to ensure the mainstreaming of CEA throughout the response cycle.

As part of the added value that this intervention is delivering to the Movement, 4 case studies are being produced documenting the experiences of feedback mechanisms, participatory diagnostics and CEA support to cash interventions. In addition, a protocol for the implementation of WhatsApp for Business is being produced as a feedback mechanism that can be implemented by any National Society. It is important to note that the experiences of implementation of this line WhatsApp has been presented at the event of the CHS Alliance and the panel of RCCE in the Global Protection Forum and would be include in Sphere case study library.

IFRC, together with UNHCR, co-led efforts to conduct a regional-wide Information and Communication needs assessment across 16 countries that has helped identify information needs as well as preferred and trusted communication channels in order to increasingly consult with community members and deliver crucial information, as well to assess the level of communication that migrants currently have with humanitarian organizations to shape the response they receive across the regional context. Based on the results of this study, it was decided to implement the WhatsApp Line pilot in Peru, which has enabled lessons to be learned that can now be extrapolated to other National Societies.

Through a participatory approach, the Movement is developing a continuous assessment of the context that is guided by the recognition that factors such as sex, age, disability, gender, sexuality, health status, legal and social status and ethnicity or country of origin may put migrants at heightened risk of discrimination, abuse and exploitation along migratory routes. This also includes the development of assessment forms for this specific situation and that were connected to the assessment done by the FACT team from June to August 2018.

The issue of humanitarian data protection is critical. The aim is to provide services for vulnerable migrant populations that help them to connect with their loved ones while limiting their exposure and risks in relation to traceability. The IFRC and ICRC have been working on a joint approach to guide National Societies on the issue of data protection. On February 2020 an Information Management and Data Protection regional training was carried out in Buenos Aires, Argentina to develop capacities on National Societies on data collection and data management of sensitive data to prevent data breach and ensure compliance and enforcement with IFRC's data protection policies.

To provide services that guarantee humanitarian data protection an Information Management system called "RC2 Relief" has been implemented in Ecuador, Peru, Panama and Chile for Cash Voucher Assistance (CVA) which has user profiles aligned with the structure of the implementation control access to increase data security and privacy for the assisted

people and the data is secured stored on certificated servers where ports available are limited with private networks created isolating the database from the public Internet.

As a humanitarian actor, the Movement is documenting and analysing possible challenges to better understand and respond to the risks and threats faced by people on the move and to assess the capacity and commitment of authorities to protect this population. This entails issues of "future" risk, such as the consequences of new migration policies in each country, an increase in xenophobia and/or a general deterioration of the situation.

The IFRC is currently reviewing the Plan of Action on Migration in the Americas, along with National Societies, in order to determine the key areas and actions to be prioritized during the next years. As a humanitarian actor, the Movement is documenting and analysing possible challenges to better understand and respond to the risks and threats faced by people on the move and to assess the capacity and commitment of authorities to protect this population. The current situation of Venezuelan migrants and refugees is unprecedented in the region, thus it has important implications on the operations compared to a traditional disaster-related response. In this context, the regional migration team and National Societies teams have played a tremendous role to include a migration/displacement medium and long-term approach to the operations since the outset. These impacts and needs will continue, and the recovery to a long term and sustainable approach will be a long way (Including the COVID-19 context).

Some factors to take into consideration when thinking about mid and long-term solutions are:

- **The high number of migrant persons:** With almost 5.5 million people from Venezuela alone present in different countries in Americas, including more than 896,300 asylum seekers, the strains on social services in communities hosting this record number of migrants is expected to persist for the foreseeable future.
- **The complexity of the "root causes":** The situation that spurred the recent movement is particularly complex. It is not a conflict or a situation of violence that may end in the short term.
- **The fear of a "pull factor":** Governments in the Americas regions want to avoid creating a "pull factor" that would attract more people. Therefore, the requirements for entry into some countries of destination for Venezuelan migrants were tightened in mid-2019.
- **The phenomenon of "compassion fatigue" and donor fatigue:** Since the Venezuelan situation began in 2014, most countries in the region have generously facilitated access to territory and provided legal stay arrangements, despite an absence of the required infrastructure, systems and resources to host such large numbers. However, the basic services are strained (health, education, shelter) and Venezuelan migrants incorporation into the labor market has not taken place under the best conditions.
- **Social tension in the Americas:** In the last months several social protests started in some of the countries of transit and destination. The political solution from the governments in charge may end with a new electoral process, which could contribute to an increasing populist rhetoric in national politics.
- **Returning to Venezuela:** *Voluntary* repatriation is generally considered as the most desirable long-term solution for refugees (less for migrants). The assumption being that migrants and refugees were forced to flee their countries in the first place and thus they would prefer to go back home. *"Forced" return* of the displaced to Venezuela seems unlikely at the moment. Not only countries of destination recognize the fact that the concerned persons are in need of protection, there is also considerable pressure on the governments from the international community. *The "not-so-voluntary" repatriation* There is the possibility, also, that the countries of destination would at some point reduce/limit the level of assistance to the migrants so as to spur people to return "spontaneously" and "voluntarily" back to Venezuela.
- **Darien situation:** In addition to the unprecedented number of migrants from Venezuela settling throughout the region, some countries in the Americas receive significant numbers of extra-regional migrants from the Caribbean, Asia and Africa.
- **COVID-19 in the Americas:** Many of the returnees are going back to their country because they have no opportunities in the host and transit countries. This is an alarming situation considering the high risks migrants may face particularly regarding their health and protection.

The actions of the Red Cross in the framework of the operation of the Regional Population Movement Appeal continue to be reduced due to these situations. Nevertheless, despite the mobilization difficulties and lack of resources, it continues to work to ensure the protection and dignity of vulnerable people. Over the past few months, updates on the population movement operation and COVID-19 have been published through the [Go platform](#) where all documents can be accessed.

**Operation's objective: Urgent and immediate assistance and protection is provided in a coordinated manner to people traveling along migratory routes, at migration points and at their destination.**

## C. DETAILED OPERATIONAL PLAN

This report covers the period from September 2018 through September 2020. Though National Societies also use local funds, partnerships, and emergency funds to implement activities in response to migration, **the following section focuses on the actions covered with this Emergency Appeal's funds only.**

The fluid, ever changing nature of population movement, especially on the scale of that in the Americas in the last 2-3 years, presents several significant challenges when planning and implementing an Emergency Appeal for migration. Changes to migration policies, volatile economies in the region, civil unrest, an increasing number of implementing partners and constantly shifting humanitarian needs necessitate an agile operational response that can change when necessary in order to properly respond to migration trends.

The activities planned in each country at the start of the operation and during the revision of the Emergency Appeal in April and December 2019 were included with the migration context at the time in mind, but a number of significant developments throughout the region have presented implementation challenges in several instances. Due to changes in visa requirements and heightened restrictions in countries such as Ecuador, Peru, and Chile, for example, the number of migrants entering through formal border points has decreased in much of the region. Irregular migration has increased in several countries, on the other hand, as migrants choose to circumvent established border points and enter countries without proper documentation in order to avoid the lengthy and expensive naturalization processes that would otherwise be required of them. The needs of these migrants differ from those who enter through formal pathways, and thus the services provided by National Societies in countries where such influxes in irregular migration occur will have to change as well.

Moreover, a few of the National Societies included in the Emergency Appeal have yet to implement activities for a variety of reasons. The Chilean Red Cross, for instance, was not included in the operation until about halfway through 2019 and did not receive funding until September 2019. The Guyanese Red Cross also did not sign their agreement until September 2019, while ICRC in Brazil started implementing activities with funds from the Appeal in October 2019. The Brazilian Red Cross started being fully involved in the appeal in May 2020.

Finally, the COVID-19 pandemic and the resulting quarantine in place through much of the region has presented a series of challenges with regards to implementing activities. Restricted movement, a shifting migration context, sanitation concerns, as well as concern for the wellbeing of Red Cross staff and volunteers, have put some actions on hold in several countries. As a result of the pandemic and its impact on migrants in the region, the Regional Appeal will likely be revised to ensure a proper response to the new challenges presented to the operation.

A more detailed description will be given below, to explain low implementation rates in comparison to target numbers. But the low level of implementation in sectors such as Shelter and Livelihoods are generally attributable to the overall challenges mentioned above, in addition to the fact that a few National Societies are only recently beginning to implement their response to population movement in the region due to their national strategies, coordination with governments and existing capacities in each country.



## Shelter

People targeted: 4,850 people

People reached: 3,914 people

### People Targeted / Reached per Country in Shelter

	ARG	BRA	CHL	ECU	GUY	PAN	PER	TTO	URU	TOTAL
People Targeted	400	N/A <sup>32</sup>	600	3,050	100	300	N/A	N/A	400	4,850
People Reached	278	N/A	876	469	0	1,900	N/A	N/A	391	3,914

**Outcome 1: The migrant population restore and strengthen their safety, well-being and short, medium and longer-term recovery through shelter and settlement solutions.**

Indicators:	Target	Actual
Number of shelter services provided that are adapted to migrants' needs (disaggregated by type of service)	4,850	2,314

**Output 1.1: Migrants have received assistance to cover their basic short-term shelter needs.**

Indicators:	Target	Actual
Number of household items and emergency shelter materials/kits delivered	4,150	2,036

**Output 1.2: Migrants have received assistance to cover their mid-term shelter needs.**

Indicators:	Target	Actual
Number of assisted HH able to meet their mid-term shelter needs through cash for rent programmes.	700	278

**Output 1.3: Migrants have received assistance to cover their long-term shelter needs.**

Indicators:	Target	Actual
Number of regional strategies produced for long-term and programmatic approach.	1	0

Progress towards outcomes

### Outcome 1:

**2,314 shelter services provided that are adapted to migrants' needs.**

ARG	CHL	ECU	PAN	URY	Total
278	876	469	300	391	2,314

The 2,314 shelter services provided since the launch of the Appeal include the delivery of 2,036 household items in Chile, Ecuador, Panama and Uruguay and the provision of cash for rent to 278 families in Argentina.

### Output 1.1:

<sup>32</sup> If a National Society is not conducting actions in a sector, no figure is reflected for people targeted / reached in that country.

**2,036 household items and emergency shelter materials/kits delivered.**

CHL	ECU	PAN	URY	Total
876	469	300	391	<b>2,036</b>

**Chile:** From April to September 2020, the Chilean Red Cross (CRC) distributed 695 kits across Santiago, Arica, Iquique, and Antofagasta. The kits were adapted to the Chilean summer season and included a cap, sunscreen, three pairs of socks, and a blanket inserted in a reusable backpack. A total of 876 kits have been distributed since the start of the operation.

**Ecuador:** ERC has delivered 50 kits across Pichincha and El Oro targeted to households in need of basic kitchen supplies. Furthermore, ERC delivered cleaning kits to 5 shelters across Quito and Guayaquil reaching 269 people. Additional kit distributions are planned for El Oro, Machala, Tulcán, Lago Agrio, and Ibarra provinces.



Volunteers deliver of household items to a shelter in Ecuador. **Source:** ERC

**Panama:** The Panamanian Red Cross has delivered 200 Shelter kits, tarpaulins and construction items for emergency shelter, reaching 300 households at the migratory reception station of La Peñita. PRCS also participated with trained personnel for the installation of RHU's in the station of migratory reception in San Vicente to house 400 people with better housing conditions.



**Uruguay:** At its Montevideo and Santa Rosa branches, the Uruguayan Red Cross (URC) delivered cold-weather kits (which include blankets, gloves, hats, etc) to assist migrants coming from regions with warmer climates. As of September 2020, URC had delivered 141 kits with towels and 250 cold weather kits.

Output 1.2:

**278 households provided cash for rent to meet their mid-term Shelter needs.**



Volunteers interview a migrant household for ARC's cash for rent program. **Source:** ARC

**Argentina:** The Argentine Red Cross (ARC) has reached a total of 278 households through its cash for rent program. ARC continues to work at the border points of Puerto Iguazú and La Quiaca to provide an immediate response to those in need in the context of the pandemic. Additionally, the program procedures have been adjusted to consider household composition and local rental prices.

### Output 1.3:

#### *Regional strategies produced for long-term and programmatic approach*

**Regional:** With a steering commitment of 16 persons as a support practitioner to get a better understanding on the design and implementation of rental assistance services for population in need. This type of intervention needs a multifunctional team to secure that all components are properly integrated: Shelter, Cash, Protection (special focus in HLP/ security of tenure), Migration/CEA and IM. We are developing a guideline that will support decision-making around how to implement rental assistance intervention integrating different components to achieve shelter and settlement outcomes within their programmes. The main deliverable will be a step-by-step manual<sup>33</sup>. A webinar was held to present the tool, which was attended by 189 people from the Red Cross Movement and partners outside the movement.

#### **Challenges**

**Argentina:** As physical distancing measures were adopted there was a pressing need to reduce physical contact in the operation. As a result, face-to-face interviews were replaced with different electronic and digital technologies that have allowed the National Society to conduct interviews, monitoring and follow up remotely and to reduce physical contact to the delivery of benefits.

**Chile:** The pandemic forced the implementation of alternative procedures with appropriate health related prevention and protection measures. To address this issue a protocol for the delivery of humanitarian assistance in the context of COVID-19 was implemented. The protocol considers the provision of kits with appropriate protective equipment required for delivery, hygiene and disinfection guidelines, the reduction of the use of physical records that require the exchange of office supplies, among others measures.

**Ecuador:** In the context of the pandemic, there was limited access to goods and services because of difficulties in procurement (suppliers did not have appropriate procedures), and shortages of some products in the national market due to the closing of borders and over-demand of some products. The participation of volunteers was also limited due to adjustments in health insurance agreements.

**Panama:** The main challenges were due to the confinement of migrants in the region, which after manifesting affected infrastructure of the team on the field, all of the above due to the pandemic, the contraction of essential government services such as health, security, protection among others, due to the quarantines of the personnel due to contagion, increased the complexity to implement actions.

**Uruguay:** Logistical challenges in for the distribution of kits, as the branches involved did not have collection structures. Logistics management was thus centralized from the URC headquarters. Additionally, in the context of a health emergency various strategies were designed to protect the staff, volunteers, and migrants.

<sup>33</sup> A step-by-step guide for rental assistance to populations affected by crises available [here](#).

**Regional:** The change of context of COVID-19, as well as the new needs identified, have generated that the process of going to a medium- and long-term strategy is limited. However, a comprehensive process between Livelihoods and Housing must continue to be developed to seek sustainable solutions in the medium and long term.



## Livelihoods and Basic Needs

People targeted: 11,750 people

People reached: 11,731 people

### People Targeted / Reached per Country in Livelihoods

	ARG	BRA	CHL	ECU	GUY	PAN	PER	TTO	URU	TOTAL
People Targeted	750	2,000	N/A <sup>34</sup>	2,000	100	4,600	N/A <sup>35</sup>	1,400	900	11,750
People Reached	360	3,712	3,076	4,214	0	0	N/A	0	369	11,731 <sup>36</sup>

**Outcome 2: The target population, especially in disaster and crisis affected areas, restores, and strengthens its livelihoods.**

Indicators:	Target	Actual
Number of targeted HH (disaggregated by age and gender) that have enough cash or income to meet their survival threshold.	11,750	6,843
<b>Output 2.1: Households are provided with unconditional/multi-purpose, or conditional cash grants to address their basic needs.</b>		
Indicators:	Target	Actual
Number of country level livelihoods needs assessments for migrants.	4	7
Number of assisted HH able to meet (Survival) Minimum Expenditure Basket needs (including food items, food-related non-food items).	10,850	6,492
<b>Output 2.2: Vocational skills training and/or productive assets to improve income sources are provided to target population.</b>		
Indicators:	Target	Actual
Number of labour market surveys carried out.	2	4
Number of people trained in livelihoods, market-based livelihoods, and economic inclusion (disaggregated by age and gender).	900	511
Number of people supported with in-kind assets, cash, or vouchers for restarting economic activities (disaggregated by age and gender).	330	351
Progress towards outcomes		

**Outcome 2:**

<sup>34</sup> Chilean Red Cross did not initially have any actions planned in shelter as part of the operation. An updated target figure will be reflected in the revised EPoA.

<sup>35</sup> If a National Society is not conducting actions in a sector, no figure is reflected for people targeted / reached in that country.

<sup>36</sup> Where possible, an estimation for number of people per migrant household has been used to calculate the total number of people reached. In countries without an available estimate, one person has been counted per household.

**6,843 households** with sufficient cash or income to meet their survival threshold

<b>ARG</b>	<b>BRA</b>	<b>CHL</b>	<b>ECU</b>	<b>PER</b>	<b>URY</b>	<b>Total</b>
360	928	769	3,741	676	369	<b>6,843</b>

Output 2.1:

**7 country-level livelihoods needs assessments** completed.

1 each in Argentina, Chile, Ecuador, Panama, Peru, Trinidad & Tobago, and Uruguay.

**6,492 households** able to meet (Survival) Minimum Expenditure Basket needs (including food items, food-related non-food items).

<b>ARG</b>	<b>BRA</b>	<b>CHL</b>	<b>ECU</b>	<b>PER</b>	<b>URY</b>	<b>Total</b>
360	928	769	3,390	676	369	<b>6,492</b>

**Argentina:** Migrant communities in need of food were identified in San Juan, San Rafael, Rosario, Paraná, and La Plata, thus ARC has delivered food boxes for 360 households. As well the NS is seeking to provide a comprehensive response through the implementation of workshops, lectures, and training.

**Brazil:** BRC delivered 1000 baskets for 928 families of migrants, reaching approximately 3,712 people (considering families of 4 people). Within this number, 397 were delivered to men and 531 to women. 489 were delivered in the state of Rio Grande do Sul and 439 in Mato Grosso do Sul, mainly to communities of Venezuelans and Haitians. All the data are registered in ODK by the volunteers themselves, who receive training in the application. The challenges are also repeated with the delivery of hygiene kits.

**Chile:** CRC at its branches in Santiago, Arica, Antofagasta, and Iquique, has delivered 565 additional nutritional kits since April 2020. Since the start of the operation a total of 769 households, or an estimated 3,076 people, have been reached (considering an average household size of 4 members). The nutritional kits contain three cans of tuna, three cans of sardines, three units of tomato sauce, one package of peas and one of beans, canned mushrooms, one unit of mashed potatoes, one kilo of flour and one of corn flour, two packages of pasta, one package of rice, one of instant oatmeal, one of granola type cereal, 900 grams of powdered milk, coffee, tea, one kilo of salt and one of sugar.

**Ecuador:** Between April and September 2020, Ecuadorian Red Cross (ERC) supported a total of 613 households through the provision of 240 nutrition kits, and 373 cash transfers. Considering the current conditions, the procedure for the delivery of cash transfers was adjusted so that interviews, verification, delivery, and monitoring of transfers could be implemented remotely with support of communication technologies. Additionally, 18 people who received cash transfers and 280 migrants who are entering or returning by foot, because of the limited availability of public transportation in the context of the pandemic, received light nutritional kits. In total, 3,390 people in Ecuador have been reached through cash transfers and nutritional support.



Delivery of nutritional kits. El Oro province, July 2020  
**Source:** IFRC

**Peru:** Since April 2020, transfers were made to new households in the Lambayeque region. The transfers are conditional on a vulnerability assessment by the IFRC team. The amount transferred per user was approximately USD 121. Thus, during the evaluation period of this report 676 households were reached. Currently PRC is drafting a proposal for funding to reach an additional 300 households.

**Uruguay:** URC has reached a total of 199 households through its CVA program, to cover the basic needs of migrants. Through the Montevideo branch, dinner has been provided to migrants from Monday to Friday without interruption to 170 households.

## Output 2.2:

### **7 feasibility studies (including labour market surveys) carried out.**

The National Societies of **Argentina, Chile, Ecuador, Panama, Peru, Trinidad & Tobago** and **Uruguay** have carried out feasibility studies to evaluate the implementation of Cash and Voucher Assistance programs. These studies make it possible to determine with greater certainty that the modality and mechanism chosen is appropriate for the context in which they intervene. As the migration process is changing, these studies must be updated, especially in relation to market analysis. During the first quarter of 2020, reviews of the feasibility studies were carried out and recommendations for improvements and updates have been made.

### **511 people trained in livelihoods, market-based livelihoods, and economic inclusion.**

<b>ARG</b>	<b>ECU</b>	<b>Total</b>
38	473	511

**Argentina:** ARC has trained a total of 38 people in Livelihoods-related themes such as Argentine labour laws and workshops on CV and interview preparation.

**Ecuador:** ERC has trained a total of 473 people in Livelihoods-related themes.

### **351 people supported with in-kind assets, cash, or vouchers for restarting economic activities.**

**Ecuador:** ERC has reached a total of 351 households through conditional cash distributions. In November and December 2019, ERC distributed vouchers for school costs to 40 families and money to be used for start-up business costs to 66 families. In March 2020, an additional 85 families were reached with money to be used for start-up business costs.

## Challenges

**Argentina:** Many activities could not be carried out because of biosecurity measures in place during the pandemic. The National Society is working on the future implementation of workshops, talks and training through digital technologies to provide a more comprehensive response.

**Brazil:** The main difficulties encountered were related to social distancing and non-agglomeration, challenges encountered due to the pandemic. Due to the short time and large quantity of baskets to be delivered, the logistics of delivery had to be planned respecting the sanitary norms of each state, mainly in the use of masks, distance in queues, hygienization with alcohol gel and smaller groups of beneficiaries to deliver the baskets. The challenges are also repeated with the delivery of hygiene kits.

**Chile:** The NS points out the technical challenge of implementing the program in the absence of a livelihoods and/or cash transfer focal point. Therefore, technical support is requested from IFRC at the regional or cluster level.

**Ecuador:** Absence of transportation due to the restrictions caused by the COVID-19 Pandemic has increased migratory flows by foot. For this reason, light nutritional kits for “walkers” were activated once again. These kits were prepared in collaboration with the World Food Program to serve the purpose of contributing to the heavy caloric load migrants need, while being comfortable to carry during the journey.

**Uruguay:** The health emergency has shifted the urgency of basic needs to be met. The National Society plans to update the needs assessment to respond appropriately to economic and health challenges that have arisen for the host and migrant community under the pandemic.

**Trinidad y Tobago:** During physical distancing and other health related measures to address the spread of the COVID-19 disease, it has proven difficult to maintain contact with the migrant community.



## Health

**People targeted:** 124,525 people

**People reached:** 127,028 people

### People Targeted / Reached per Country in Health

	ARG	BRA	CHL	ECU	GUY	PAN	PER	TTO	URU	TOTAL
<b>People Targeted</b>	22,000	7,000	20,000	66,500	500	525	7,000	500	500	<b>124,525</b>
<b>People Reached</b>	17,919	960	1,197	83,208	353	14,046	8,363	449	533	<b>127,028</b>

### *Outcome 3: The immediate risks to the health of affected populations are reduced.*

Indicators:	Target	Actual
Number of people reached with health services adapted to migrants' needs (disaggregated by age and gender).	124,525	127,028

### *Output 3.1: The target population is provided with rapid medical management of injuries and diseases.*

Indicators:	Target	Actual
Number of basic health services adapted to migrants' needs delivered (disaggregated by type of service).	123,950	98,843

**Output 3.2: Psychosocial support provided to the target population.**

Indicators:	Target	Actual
Number of people reached through psychosocial support actions by type (disaggregated by age and gender).	66,200	15,366
Progress towards outcomes		

### Outcome 3:

**127,028 people** reached with Health services adapted to migrants' needs.

#### Output 3.1:

**98,843 basic health services** delivered.

ARG	BRA	CHL	ECU	PAN	PER	TTO	URY	Total
17,694	617	837	56,808	13,896	8,161	449	381	<b>98,843</b>

**Argentina:** ARC—through its branches in Saavedra, La Plata, Rosario, Córdoba and San Rafael—provides community health sessions, vaccination campaigns in coordination with public authorities, dissemination of sexual and reproductive health materials, and health-related workshops to the migrant population. Although only two locations currently hold community health days (Córdoba and Saavedra), there are plans to expand this activity to the rest of ARC's branches involved in the operation so that they can provide more visible health services with greater impact on the target population.

ARC has thus far provided 17,694 basic health services, delivering 15,000 health promotion materials, distributing 164 sexual health materials, reaching 982 people through health consultations, providing 89 HIV tests, and reaching 432 people through vaccination campaigns.

**Brazil:** Since April 2020, the BRC has produced 400 health promotion posters about hygiene care for the prevention of possible diseases and reached 535 immigrants with health promotion lectures focused on preventive education, covering the themes of health and hygiene promotion, epidemiology and STI/HIV. A total of 617 health services have been provided in Brazil since the start of the operation.

**Chile:** CRC has continued the delivery of psychosocial support and primary health care services. As well as referrals to specialized medical care, diagnostic tests, and medications. As a result of the pandemic, planned communication materials were not printed, but a campaign was created and disseminated through social networks, which has had a great impact on the population.

**Protégete y protege a otros de infecciones de vías respiratorias**

Logo: Cruz Roja Ecuador, IFRC

**Lávate las manos:**

- Después de usar el baño.
- Después de toser o estornudar.
- Después de cuidar a una persona enferma.
- Antes, durante y después de preparar la comida.
- Cuando las manos están visiblemente sucias.
- Antes de comer.
- Si estuviste en contacto con animales o sus desechos.

**Ecuador:** ERC provides basic health services to migrants primarily in the form of first aid and pre-hospital care. Operating out of its branches in Manabí, Tungurahua, Santo Domingo, Imbabura, Carchi and Sucumbíos provinces, ERC has provided 56,808 basic health services as part of the Regional Appeal. During the month of September 2020, ERC held talks in temporary shelters for people on the move, specifically related to habits and care to prevent contagion with a focus on COVID-19.

**Panama:** PRCS has reached 13,896 people with basic health services since the start of the operation. At the Migratory Reception Centre in La Peñita, Darien province, PRCS provides primary health care, nutritional screenings (mostly for children) and educational activities.

**Peru:** Since the start of the operation the Peruvian Red Cross (PRC) has provided a total of 8,161 health services. PRC operates out of the Bi-national Care Centre (CEBAF) at the border with Ecuador in Tumbes. The community health sessions included talks on the promotion of healthy habits as a measure of prevention of the spread of COVID-19.

**Trinidad & Tobago:** Trinidad & Tobago Red Cross Society (TTRCS) has reached a total of 449 people with health services provided at humanitarian assistance points.

**Uruguay:** URC has developed and distributed 381 health guides to the migrant community.

### Output 3.2:

**15,366 people** reached through psychosocial support (PSS) actions.

ARG	BRA	CHL	ECU	GUY	PAN	PER	URY	Total
578	439	360	13,200	353	150	202	84	<b>15,366</b>

**Regional:** The main achievements at the regional level with regards to psychosocial support include:

- Technical support to NS in planning and implementation of activities PSS
- Mapping of PSS needs and capacities of NS of the operation,
- Update of guide on psychosocial support to migrant population,
- Development of the protocol of care and intervention in Mental Health and Psychosocial Support (MHPSS) for migrants,
- Guide for NS on psychosocial intervention for migrants during the COVID-19, focus on telepsychology,
- Training on regional PSS documents,
- Webinars on psychological first aid (PFA) and grief and loss during COVID-19,
- Development of the migration virtual course with a PSS approach,
- Development of PSS materials with the application of the CEA strategy.

**Argentina:** ARC is delivering health services through community health days where a large number of migrant populations is served. However, given the current context, the health response has focused on psychosocial support through the provision of remote assistance services and the opening of a toll-free 0800 telephone line. Between July and September 2020, 103 people were reached under this modality, totalling 578 people reached with PSS services in Argentina since the start of the operation. The 0800 line is centralized in Buenos Aires but operates with national coverage.

**Brazil:** BRC reached 439 people in lectures and workshops that addressed issues like xenophobia and stigma, etc. All the actions were carried out in communities and immigrant centres or hostels.

**COVID-19**

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**Você sabe o que é xenofobia?**

**¿Sabes qué es la xenofobia?**

**Savez-vous ce qui la xénophobie?**

**Ódio e hostilidade em relação a pessoas imigrantes e refugiadas. Incluem atitudes, preconceitos ou comportamentos que rejeitam e excluem as outras pessoas, por conta da sua condição de imigrante.**

**Odio y hostilidad hacia inmigrantes y refugiados. Incluyen actitudes, prejuicios o comportamientos que rechazan y excluyen a otras personas, por su condición de inmigrantes.**

**La haine et hostilité vers les migrants et les réfugiés. Ils comprennent des attitudes, des préjugés ou des comportements qui rejettent et excluent d'autres personnes, en raison de leur condition d'immigrants.**

**VOCE SABIA?**

**¿USTED SABÍA?**

**LE SAVIEZ-VOUS?**

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**LA XENOFOBIA ES UN DELITO EN BRASIL**

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Informational material for ARC's 0800 line and from BRC's workshop on xenophobia and stigma. **Sources:** ARC and BRC

**Chile:** CRC provides the following PSS services: intervention in child-friendly spaces, individual and group intervention. The workshops are aimed at the migrant population and volunteers in which they address issues of psychosocial support. Before delivering kits to the population, focus groups are held with adults to address cultural issues and expression of emotions, in addition to activities with children. It has material on psychosocial support adapted to migration. During the period from July 1 to September 6, 2020, 14 psychosocial support services were provided, 130 people were reached in recreational learning activities or children, and 230 people were reached in individual or group psychosocial support services.



A PSS workshop in Chile. **Source:** CRC

**Ecuador:** ERC has reached a total of 13,200 people through its psychosocial support services aimed at the migrant population. PSS delivered include intervention in child-friendly spaces, psychological first aid and primary intervention in mental health (kits).

**Guyana:** The Guyana Red Cross Society (GRCS) provides PSS services to migrants and host community members through its staff and volunteers and makes referrals to mental health services. As part of the operation, a total of 353 people in Guyana have been reached through PSS actions thus far.

**Panama:** At the point of attention to the migrant population located in La Peñita, Darién PRCS provides the following services in psychosocial support: brief intervention, group intervention and psychoeducation through workshops addressing issues of stress management, emotions, coping

techniques and psychological first aid. It is worth mentioning that the interventions are aimed at the migrant population and the host community, and the main group of attention is adults. The targeted population is often on the move, and thus there is a limited amount of time to work with and little opportunity to follow up with individuals. PRCS reached a total of 150 people through PSS services.

**Peru:** 202 PSS services have been provided mainly to migrants, as well as to the host community and volunteers, including group sessions. In the most vulnerable cases, follow-up calls were made.

**Uruguay:** URC provides PSS through intervention in child-friendly spaces, workshops, group meetings and individual attention in the form of interviews and psychosocial evaluations. The workshops are formative spaces aimed at the migrant population and volunteers, in which psychosocial and cultural issues are addressed. The group meetings, on the other hand, are made up of migrant families and involve recreational activities in a space provided for listening and sharing experiences (such as the space used for the meal service mentioned in Output 2.1. URC has reached a total of 84 people through PSS services thus far, including 38 through direct intervention and 46 through group sessions / workshops.

## Challenges

**Chile:** One challenge is the availability of medical professionals to care for vulnerable people who have diseases or other conditions that could be medically or immediately life-threatening. Therefore, it was arranged to hire professional staff for such care. In addition, it is expected that the area of Mental Health and Psychosocial Support of the CRC will be strengthened with the technical support of IFRC.

**Ecuador:** The Ecuadorian health system has focused its scarce resources in the current COVID-19 crisis, thus there is limited response in other health areas. Inasmuch, the migrant population already has a low rate of usage of the public health system because of fear of being identified as irregular. Indeed, the ERC seeks to activate mechanisms to complement health services for migrants.



## Water, Sanitation and Hygiene

People targeted: 362,400 people

People reached: 431,075 people

### People Targeted / Reached per Country in WASH

	ARG	BRA	CHL	ECU	GUY	PAN	PER	TTO	URU	TOTAL
People Targeted	N/A <sup>37</sup>		1,000	40,000	500	20,000	300,000	500	400	<b>362,400</b>
People Reached	N/A	24,361	2,248	42,240	354	42,475	319,021	75	301	<b>431,075</b>

**Outcome 4: Vulnerable populations have increased access to appropriate and sustainable water, sanitation and hygiene services.**

Indicators:	Target	Actual
Number of people that have access to safe water and minimum conditions for basic sanitation and hygiene.	362,400	431,075

**Output 4.1: The National Societies provide migrants in border areas with increased access to safe water, sanitation and promote positive behavioural changes for improved hygiene practices in target population.**

Indicators:	Target	Actual
Number of hydration points, showers and bathrooms established and maintained.	40	56
Number of litres of water distributed.	3,100,000	8,389,719
Number of personal hygiene kits provided according to age and gender.	12,650	8,485

Progress towards outcomes

### Outcome 4:

**431,075 people** with access to safe water and minimum conditions for basic sanitation and hygiene.

### Output 4.1:

**56 hydration points, showers and bathrooms** established and maintained.

BRA	ECU	PAN	PER	Total
18	3	29	6	<b>56</b>

**Ecuador:** ERC has installed a 2500 litre water reserve tank (in coordination with CARE Ecuador) at a shelter in Imbabura. At CEBAF Huaquillas in El Oro province, ERC installed water storage systems parallel to the CEBAF system in showers and toilets and installed portable showers. Since April 2020, control inspections have been carried out on the water purification system located in ADRA's facilities, which the entity currently has open to the migrant and local population.

**Panama:** PRCS has installed a water purification plant in La Peñita, Darién province on the 21 August 2019. The plant, which became operational after the 12-month period covered in this report, produces 15,000 litres of water

<sup>37</sup> If a National Society is not conducting actions in a sector, no figure is reflected for people targeted / reached in that country.

per day. The water is distributed through 3 distribution ramps, two providing water to migrants at the shelter in La Peñita and another to the local community school. PRCS also established 19 latrines and 9 handwashing stations in La Peñita. Since April 2020, PRCS has trained the newly appointed local water committee and has performed improvements in the WASH infrastructure in the region.



PRCS volunteers work on the water purification facility in Darien in November 2019. **Source:** PRCS

**Peru:** PRC has established 6 hydration points at CEBAF in Tumbes.

**8,389,719 litres of water distributed.**

CHL	ECU	PAN	PER	Total
658.5	186,508	7,405,000	797,552	<b>8,389,719</b>

**Chile:** CRC distributed 1,317 500 ml bottles of water (totalling 658.5 litres) to a total of 671 people.

**Ecuador:** As of September 2020, ERC registered a total of 186,508 litres of water distributed.

**Guyana:** GRCS has procured 500 water filters, but distribution is currently on hold due to the COVID-19 crisis.

**Panama:** PRCS distributed 40,000 daily litres of water in La Peñita, and 12,000 daily litres of water in Bajo Chiquito both in Darién. This adds up to more than 7.4 million litres produced since the start of operations.

**Peru:** PRC distributed 797,552 litres of water through 6 hydration points at CEBAF in Tumbes, reaching an estimated 319,021 people. PRC also distributed reusable canteens at hydration points.

**8,485 personal hygiene kits provided.**

BRA	CHL	ECU	GUY	PAN	TTO	URY	Total
896	1,417	1,012	354	4,500	75	231	<b>8,485</b>

**Brazil:** Since April 2020, the BRC delivered 896 hygiene kits mainly to communities of Venezuelans and Haitians in Rio Grande do Sul and Mato Grosso do Sul. Overall, 676 families were reached, 294 kits were delivered to men and 382 to women.

**Chile:** CRCS has distributed a total of 1,417 hygiene kits to the migrant population, including 513 kits for children below three years, in Santiago, Iquique, Antofagasta and Arica.

**Ecuador:** In order to maintain the level of operations of the Ecuadorian Red Cross, personal protection equipment for humanitarian personnel kit was acquired, both for those who provide assistance to the migrant population directly, as well as for other areas of the entity. A total of 1012 kits have been delivered since the start of the operation in Ecuador.

**Guyana:** GRCS has delivered 354 family hygiene kits in Mabaruma, Georgetown and Bartica regions.

**Panama:** PRCS has delivered 4,500 hygiene kits to migrants since the start of the operation.

**Trinidad & Tobago:** In April and June, TTRCS distributed 75 hygiene kits to migrants and people in COVID related quarantine. Additionally, given the rising concerns around COVID-19, a one-day training session focussed mainly on health, hygiene and sanitation using the PHAST approach and CBHFA methodology was offered.

**Uruguay:** URC has distributed 231 hygiene kits to migrants at its Montevideo and Santa Rosa branches.

### Challenges

**Panama:** PRCS noted the challenge of coordinating with community leaders and on-site authorities the hygiene and sanitation community health days in the context of COVID-19.

**Guyana:** Limited access to communities due to COVID-19 restriction and travel bans. GRCS is liaising with partner organizations present in the community to explore the possibility of a joint response.

**Chile:** CRC expresses the need for development of mechanisms that allow for a better allocation and more efficient distribution of aid, taking into consideration the increased flow of Venezuelan citizens through irregular migration paths. Currently a multi-purpose transfer mechanism is being designed with the support of a consultant. In addition, CRC notes the need to hire a WASH specialist.



## Protection, Gender and Inclusion

People targeted: 14,850 people

People reached: 31,626 people

### People Targeted / Reached per Country in PGI

	ARG	BRA	CHL	ECU	GUY	PAN	PER	TTO	URU	TOTAL
People Targeted	100	N/A <sup>38</sup>	10,000	3,000	500	500	200	50	500	14,850
People Reached	101	253	115	6,280	0	20,803	4,030	0	44	31,626 <sup>39</sup>

**Outcome 5: National Societies, in coordination with communities, identify the and address the distinct needs of the most vulnerable and particularly disadvantaged and marginalized groups, due to inequality, discrimination and other infringement of their human rights.**

Indicators:

Target

Actual

<sup>38</sup> If a National Society is not conducting actions in a sector, no figure is reflected for people targeted / reached in that country.

<sup>39</sup> This figure is calculated by adding up the total number of people reached through PGI-related activities (primarily activities focused on the prevention of SGBV).

Number of assessments of migrants needs that incorporate PGI to identify potential beneficiaries and define different approaches to the intervention	9	5
<b><i>Output 5.1: National Society interventions improve equitable access to basic services, considering different needs based on gender and other diversity factors.</i></b>		
<b>Indicators:</b>	<b>Target</b>	<b>Actual</b>
Number of NS trained in Humanitarian Norms on Gender and Diversity.	9	4
Number of areas of focus in which differential actions are planned, implemented and reported.	7	4
<b><i>Output 5.2: Programmes and operations prevent and respond to sexual and gender-based violence and other forms of violence, especially against children.</i></b>		
<b>Indicators:</b>	<b>Target</b>	<b>Actual</b>
Number of child-friendly spaces operated at assistance points or mobile assistance units that integrate child protection standards.	13	20
Number of activities implemented to help prevent SGBV.	35	5
Progress towards outcomes		

## Outcome 5:

Key PGI achievements from the Regional Appeal in the Americas include:

- Child Protection Rapid Assessment in Colombia and Ecuador: June and July 2019.
- Rapid Assessment of Protection, Gender and Inclusion with emphasis on Gender Violence and Forced Labor in Argentina: November 2019.
- Rapid Assessment of Protection, Gender and Inclusion in Panama: La Peñita and Lajas Blancas December 2019.
- Rapid Assessment of Protection, Gender and Inclusion in Health Services and Inclusion Programs in Peru: November and December 2019.
- Rapid Assessment of Protection, Gender and Inclusion in Shelter Programs in Chile: January 2020.
- Focus Group Discussions of Protection, Gender and Inclusion in services provided for migrants in Uruguay: since January 2020-ongoing.
- Planned: Survey on migrant needs with PGI questions and Focus Group Discussions of Protection, Gender and Inclusion: postponed due to COVID-19.
- Training delivered to Ecuador Red Cross on PGI “Seven Moves: Protection, gender and inclusion in emergencies training”.
- Incorporation of key PGI recommendations in PSS guidelines: PSS Regional Guidance, MHPSS por Migrants Guidance and Self-care Guidance.
- Development of the [“Guide for the creation of safe referrals mechanisms for migrants and refugees for Red Cross and Red Crescent National Societies”](#)
- Capacity building for the National Societies on trafficking: different meetings and interviews were made to analyse the current situation of the region in regards to trafficking and a basic virtual course is being implemented throughout October; this course has the participation of 14 NS of the region and staff from IFRC ARO ( 27 F, 9 M).

*All the rapid assessments are available for reference. Nevertheless, the general and common recommendations have been:*

- Incorporation of a gender and diversity analysis that feeds the programmatic actions. This requires complementary assessments or to include PGI indicators into the current surveys to be implemented.
- Elaboration of protocols for safe referrals together with mapping of protection services in the territories.
- Key actions aimed at prevention and response to gender violence.
- Design and elaboration of material specifically oriented to protection risks (culturally adapted).
- Strengthening of CEA actions that involve protection actions especially in the chapter of Child Protection.
- Delivery of NFIs not only differentiated by sex but informed by a gender and diversity analysis that addresses the protection needs of the migrant populations. For example: dignity kits, PSS kits for children with key messages of self-care.
- Development of key messages on key protection issues such as trafficking, sexual exploitation and forced labor.

### Output 5.1:

**5 NS trained in Humanitarian Norms on Gender and Diversity.**

**Ecuador:** In 2019, a training on “Protection and Assistance to Child Migrants” was held with technical staff and volunteers at a national level; also, a PGI training on humanitarian norms in gender and diversity was implemented with ERC in Quito and at a border point under a pilot implementation of the PGI toolkit. In March 2020, 3 trainings on Protection, Gender and Inclusion were held (1 for managers and project coordinators of HQ, 1 for volunteers of Zones 1 and 3, 1 for volunteers of Zones 2 and 4)

**Peru:** In March 2020, one PGI briefing for IFRC staff of the Lima Cluster Office was implemented and one training on Gender and Diversity for artistic partners was delivered in order to incorporate the PGI approach into their actions with migrant populations.

**4 areas of focus in which differential actions are planned, implemented and reported.**

We are trying to implement as part of the core sector in terms of Shelter (Rent guidelines assistance), Livelihoods and basic needs (Multi-propose cash), Health and PSS (teleservices). This is reported in each of the areas of focus.

## Output 5.2:

**20 child-friendly spaces** operated at assistance points or mobile assistance units that integrate child protection standards.

ARG	CHL	ECU	PAN	Total
6	3	10	1	20

**Argentina:** With support from IFRC, ARC is developing a PGI approach involving child and adolescent friendly spaces and the delivery of recreational kits. A total of 82 children/adolescents have been reached through the program thus far at 6 child friendly spaces.

**Chile:** CRC has established 2 child friendly spaces in Independencia and Puente Alto branches in Santiago and one in the local office of an implementing partner in Arica. These services have been interrupted during the peak of the pandemic.

**Ecuador:** ERC established 10 child-friendly spaces in Imbabura, Santo Domingo, Tungurahua, Carchi, and Azuay provinces. The spaces are used for PSS services directed towards children under 16 years of age, primarily through the delivery of recreational kits.

**Panama:** PRCS established a child-friendly space in La Peñita during a PSS exercise in July 2019.

## 5 activities implemented to help prevent SGBV.<sup>40</sup>

**Argentina:** ARC response is oriented towards gender violence and labor exploitation, seeking to serve as a link to assist public authorities and assist migrants in a situation of vulnerability. Nearly 35 volunteers from different branches have been trained in safe referral intervention, as well safe referral guides have been promoted. All the branches involved in the operation work in coordination with government authorities to identify possible cases of SGBV and to refer them promptly. Thus far, 19 possible cases of SGBV were referred to the [144 telephone line service](#) which provides 24-hour support for people who experience sex or gender-based violence.

In the context of COVID-19, the use of communication tools has been intensified to prevent situations of violence and discrimination, contributing to a better understanding between migrants and host communities based on respect for diversity and mutual support.

<sup>40</sup> This indicator refers to the number of activities in each NS's plan of action that specifically address SGBV.



**Brazil:** BRC has made 400 posters with information on protection, gender and inclusion that reached 253 people. All the actions were held in migrant communities as well as in shelters and institutions. In addition, the National Society is in process of developing their internal protocol for the prevention and response of gender-based violence.

**Ecuador:** ERC has resumed the design of the "Entre risas y sonrisas" magazine and the comic book on safe migration of children and adolescents. Additionally, a total of 1106 learning materials that address issues of protection in a situation of migration from the perspective of the needs and rights of children and adolescents have been delivered.

**Panama:** Works have been done to replicate the conditions on La Peñita to Bajo Chiquito and Lajas Blancas. During this period the following figures have been reached # people reached with information materials and activities, # of activities implemented to help prevent or mitigate discrimination and xenophobia.

**Peru:** Since the implementation of WhatsApp Business® in June 2020, as part of the communication and information prevention strategy during the COVID-19 pandemic, 1,046 queries have been made and more than 20 thousand information messages have been sent. This tool also served as a means of identifying protection cases and referrals to other Red Cross or partner services.

**Trinidad and Tobago:** TTRCS provided information and connectivity point services in an event in south Trinidad, Rio Claro, Cedros jointly with other agencies to provide one-stop shop services to the migrant population in the area.

**Uruguay:** URC has contributed to the dissemination of materials and counselling spaces for migrants, as well as guidance in accessing procedures and resources. Support was also provided in the preparation of graphic inputs for dissemination, with the understanding that the approach and the project must respond in a comprehensive manner to the various problems that arise in people's careers.

## Challenges

**Chile:** One of the main challenges is the absence of a PGI focal point. Through the technical support of the IFRC, a focal point could be identified and provided the necessary support and tools to be able to assist in this thematic area.

**Ecuador:** ERC reports the need to strengthen the understanding and appropriation of PGI among their staff to provide assistance to the target population and to generate meaningful referral routes at local levels.

**Panama:** PRCS expresses the need to hire a PGI Officer to the project in Darien. Also, the need to coordinate the participation of the staff in on-line training on protection, gender and diversity issues with the migrant and host population.

**Uruguay:** In the context of the health emergency in response to COVID-19, the unmet basic needs of the host community have increased xenophobic behaviour towards people in a migration context. This is because the collective imagination of the people in the community of Santa Rosa identifies the Uruguayan Red Cross as a unilateral response to the needs of migrants. The objective of PGI's integrated approach, like CEA, is to provide support, training, and work on key messages to change this perception, reduce xenophobia and thus achieve better integration and inclusion of people in the context of migration.



## Migration

People targeted: 119,700 people

People reached: 304,989 people

### People Targeted / Reached per Country in Migration

	ARG	BRA	CHL	ECU	GUY	PAN	PER	TTO	URU	TOTAL
People Targeted	1,500	2,000	500	100,000	500	900	10,000	300	4,000	119,700
People Reached	1,635	114,660	0	153,908	0	22,797	7,524	19	4,446	304,989 <sup>41</sup>

**Outcome 6: The migrant population receives comprehensive assistance and protection according to the stage of their migratory journey through the National Societies' branch network.**

Indicators:	Target	Actual
Number of services for migrants offered at integrated assistance points or mobile assistance units (by type of service).	104,400	354,261
<b>Output 6.1: Assistance and protection services are provided and promoted to migrants and their families through collaboration with local and national authorities, as well as in collaboration with other relevant organizations.</b>		
Indicators:	Target	Actual
Number of national referral systems established.	4	3
Number of cases referred to other stakeholders.	No target	TBD <sup>42</sup>
<b>Output 6.2: Comprehensive care points in receiving areas and host communities are established through the branch network.</b>		
Indicators:	Target	Actual
Number of assistance points and mobile assistance units for the migrant population staffed by volunteers during the action.	49	39
Number of services delivered to re-establish and maintain contact with family members.	106,000	151,007
<b>Output 6.3: The target population receives services for the digitalization and protection of their documents and information.</b>		
Indicators:	Target	Actual
Number of services provided for the digitalization and protection of people's documents and information.	501	TBD <sup>43</sup>
<b>Output 6.4: Migrants, transit and host communities access key information and are engaged in decision making processes that contribute to reducing their vulnerability and foster social inclusion.</b>		
Indicators:	Target	Actual
Number of people reached by information materials and information activities.	63,600	201,910
Number of interactions with affected population through digital channels for information provision and feedback collection. <sup>44</sup>	No target	1,344

<sup>41</sup> This is the combined number of migration-related services (RFL, information, digital communications, etc.) in each country.

<sup>42</sup> Lack of NS capacity makes monitoring this indicator difficult. At the moment, there is not a means of tracking referrals in most countries.

<sup>43</sup> Lack of NS capacity makes monitoring this indicator difficult. At the moment, there is not a means of tracking data protection services provided in most countries.

<sup>44</sup> Lack of NS capacity makes monitoring this indicator difficult. At the moment, there is not a means of tracking visits to Virtual Volunteer in most countries.

Number of feedback surveys received.	1,500	3,477
Number of perception survey activities conducted with host communities to assess sentiment towards the migrant population.	6	3
# of activities implemented to help prevent or mitigate discrimination and xenophobia	25	15

#### Progress towards outcomes

#### Outcome 6:

**354,261 services** for migrants offered at integrated assistance points or mobile assistance units.

ARG	BRA	ECU	PAN	PER	TTO	URY	Total
1,716	113,662	204,105	22,773	7,259	300	4,446	<b>354,261</b>

#### Output 6.1:

**3 national referral systems** established.

**Argentina:** ARC coordinates with the Argentine government to refer possible cases of SGBV and human trafficking (see Output 5.2).

**Guyana:** A migrant referral point was established at GRCS headquarters in Georgetown, which has reached 395 people since the start of the operation.

**Uruguay:** The Uruguayan Red Cross has developed a mapping of support services for different basic needs and as a result elaborated the Guidance "Resources for persons in migration processes" which includes health (physical and psychological), legal, protection *and recreational services*.

#### Output 6.2:

**39 assistance points and mobile assistance units** for the migrant population staffed by volunteers during the action.

ARG	BRA	CHL	ECU	PAN	Total
18	6	2	11	2	<b>39</b>

**Argentina:** ARC has established 18 assistance points through its branches in Buenos Aires, La Plata, Santa Fé, Córdoba, Mendoza, Misiones and Jujuy. In addition, the ARC acquired two mobile humanitarian units to provide different services to vulnerable migrants, including legal and documentation advice, RCF services, and child protection services. All migration interventions have shifted towards remote assistance by the subsidiaries involved, which use WhatsApp messaging services and assist the migrant population on a shift basis.

**Brazil:** ICRC installed 6 reception centres in Manaus through the operation.

**Chile:** CRC has established 2 humanitarian service points through the operation.

**Ecuador:** ERC established 11 assistance points, 7 of which are dedicated to RFL activities.

**Panama:** PRCS installed 2 assistance points in La Peñita, Darién province.

**151,007 services** delivered to re-establish and maintain contact with family members.<sup>45</sup>

<sup>45</sup> For more information, see the operation's RFL dashboard [here](#).

ARG	BRA	ECU	PAN	URY	Total
991	109,662	38,564	814	976	151,007

**Argentina:** ARC has registered 991 RFL services since the start of the operation. These services have gained importance in the context of the pandemic as migrants would have had a larger probability of losing links with family members at their country of origin without them.



Family contact workshop.  
Mato Grosso do Sul, August 2020  
**Source:** BRC

**Brazil:** In the last semester the BRC has provided 423 RFL services during the delivery of hygiene and food kits to migrant communities in Rio Grande do Sul and Mato Grosso do Sul. Telephone calls, collection of search requests, a workshop, and guidelines for preventing loss of family contact, connectivity services, and general guidance on public services and legal support were offered. Since December 2019, with funding from the Regional Appeal, a total of 109,662 RFL services have been registered in Brazil.

**Chile:** Nine RFL teams were acquired and distributed as follows: 1 for Arica, 2 for Antofagasta, 2 for Iquique and 4 for Santiago de Chile. RFL services have yet to be delivered in Chile, however, due to complications stemming from the COVID-19 pandemic.

**Ecuador:** RFL services in Ecuador were adapted to the context of the COVID-19 pandemic. In May, the "Protocol for Maintaining Family Contact in the Context of the COVID-19 Health Emergency" was approved, which allows RFL services to be outsourced to institutions outside the Movement, so that connectivity RFL services can continue to be provided to the migrant population in shelters and temporary isolation centres. A total of 38,564 RFL services have been provided in Ecuador since the start of the operation.

**Panama:** PRCS provided 814 RFL services in La Peñita.

**Uruguay:** URC has delivered 976 RCF services in total since the launch of the Appeal. Based on data collected between December 2018 and August 2019, 90 percent of the people receiving RCF services from URC were between 18 and 39 years of age, while the remaining 10 percent were between 40 and 70 years old. Of the migrants receiving RCF services in Uruguay, 47.3 percent were Venezuelan, 48.6 percent were Cuban, and 4.1 percent were from Argentina, Brazil, or Colombia. Approximately 76 percent of connectivity services (phone calls, Wi-Fi, battery charging) were provided to males and 24 percent were provided to female migrants. Ninety-three percent of connectivity services were made to maintain contact with their families, while 7 percent were used to restore contact with their families. An estimated 12 percent of the calls made were unsuccessful.

#### Output 6.4:

**201,910 people** reached by information materials and information activities.

ARG	BRA	ECU	PAN	PER	TTO	URY	Total
725	4,000	165,541	21,874	6,000	300	3,470	201,910

**Argentina:** ARC provides advice on settlement procedures and supports migrants with the use of RADEX, a digital platform provided by Argentina's Ministry of the Interior that facilitates obtaining identity documents and permanent

residence status. ARC seeks to expand its RADEX services to achieve a greater impact on the target community. A total of 725 people has been reached with information activities in Argentina thus far.

**Brazil:** BRC has reached 4,000 people who received communication materials on health, migration, and the prevention of sexual and gender-based violence.

**Ecuador:** ERC, as part of its Population on the Move Communication Plan, has developed a series of activities aimed at reaching out to both migrants and host communities. So far, 165,541 people have been reached through information services.

**Panama:** PRCS has reached 21,874 people via communication materials

**Peru:** PRC has distributed 6,000 protection messages along the migration route in Peru (especially in northern Peru).

**Trinidad & Tobago:** TTRCS designed and printed a number of informational materials (8) (Red Cross programmes, health, protection and safety, marketing for RFL services etc.) all of which have been translated to Spanish. In addition, TTRCS organized an online community health day that offered health scans, medical consultations and general information to the host and migrant community. A total of 300 people were reached.

**Uruguay:** URC have developed a graphic identity and a 9-piece toolkit, focusing on various aspects of migration from a rights perspective. In the reporting period, 3,470 people have been reached through publications in the NS official social media accounts

**1,344 interactions** with the affected population through digital channels for information provision and feedback collection.<sup>46</sup>

PAN	PER	Total
85	1,259	1,344

**Panama:** PRCS has interacted with 85 people through digital platforms since the start of the operation.

**Peru:** With technical support from IFRC, PRC established a [Whatsapp line](#) in March 2020 to enable remote assistance for migrants impacted by the COVID-19 crisis. Since its implementation, 1,259 unique users have been served and more than 27 thousand messages have been sent.

**3,477 feedback surveys** received.

BRA	ECU	PAN	PER	Total
200	1,814	109	1,354	3,477

**Brazil:** In July, BRC held meetings in which they both branches shared challenges and identified needs that were not addressed in the first phase of the operation. Thus far, 200 people have provided feedback for the operation in Brazil.

**Chile:** WhatsApp has been identified as one of the most reliable means of communication in the migrant population, followed by e-mail. Therefore, the CEA strategy is being developed through WhatsApp for Business, which serves both for service feedback and for the dissemination of key and informative messages

**Ecuador:** 1,814 surveys from the migrant population have been received. ERC participated in the development of the Joint Evaluation Survey of the needs of the migrant population. This exercise was carried out by the entities that are part of the Working Group on Refugees and Migration - GTRM Ecuador.

<sup>46</sup> This indicator measures the number of times a digital platform (such as Whatsapp, Virtual Volunteer, etc.) is used to access information.

**Panama:** PRCS surveyed 109 people about services provided during an August visit in La Peñita.

**Peru:** To improve the services provided, especially in the medical sessions, satisfaction surveys are carried out with migrants, as well as with PRC volunteers and personnel. PRC has surveyed a total of 1,354 people since the beginning of the operation.

*15 activities implemented to help prevent or mitigate discrimination and xenophobia.*

**Chile:** messages with key information are being distributed through social networks aimed at the host population, to prevent and mitigate xenophobia.

**Ecuador:** During this period several communication products have been developed that seek to sensitize the host population to the reality experienced by the migrant population in general, as well as especially in these moments of declaration of a Health Emergency in the country. The products include Youtube videos<sup>47</sup>, websites<sup>48</sup>, promotion in social networks and WhatsApp.

### Challenges

**Chile:** CRC considers as main challenge the development of a migration strategy to strengthen programmatic structure and linkages between NS and local authorities. Currently a long-term strategy is being developed with the support of the IFRC.

**Ecuador:** The measures to contain the spread of COVID-19 pandemic have limited service provision, therefore new protocols, materials, and procedures with partner organizations were implemented. For example, headsets and specific disinfection kits for RFL equipment were procured.

**Panama:** Limited human resources. PRCS cited the need for more volunteer / staff support for the operation to implement RFL activities not only in La Peñita but also eventually in Los Planes. Schedule more frequent RFL tours to ensure that migrants can communicate with their families, providing PPE staff and supplies for sanitation of equipment used in this.



## Strengthen National Societies

**Outcome S1.1: National Society capacity building and organizational development objectives are facilitated to ensure that National Societies have the necessary legal, ethical and financial foundations, systems and structures, competencies and capacities to plan and perform.**

Indicators:	Target	Actual
Number of volunteers directly involved in the operation.	2,315	2,157

**Output S1.1.4: National Societies have effective and motivated volunteers that are protected.**

Indicators:	Target	Actual
Number of volunteers that receive training on their role and the risks faced	745	1,237
Number of volunteers that receive psychosocial support.	1,925	220
Number of new volunteers.	165	TBD <sup>49</sup>

**Output S1.1.6: National Societies have the necessary corporate infrastructure and systems in place.**

Indicators:	Target	Actual
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<sup>47</sup> <https://youtu.be/9uGdiYfTahE>, <https://youtu.be/ujh6yEHkpak>

<sup>48</sup> <https://www.cruzrojamovilidadhumana.org/>

<sup>49</sup> Data for this indicator is not yet available.

Number of migration response protocols and procedures established.	5	5
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Progress towards outcomes

**Outcome S1.1**

**2,157 volunteers** directly involved in the operation.

See the table below for details:

National Society	Number of Volunteers Directly Involved
Argentine Red Cross	125
Brazilian Red Cross	52
Chilean Red Cross	169
Ecuadorian Red Cross	1400
Guyana Red Cross Society	40
Panama Red Cross Society	143
Peruvian Red Cross	70
Trinidad & Tobago Red Cross Society	30
Uruguayan Red Cross	128
<b>Total</b>	<b>2,157</b>

Output S1.1.4:

**1,172 volunteers** received training on their role and the risks faced.

See the table below for a detailed breakdown of the trainings performed by each National Society:

National Society	Type of Training	Number of Volunteers Trained
Argentine Red Cross	PSS	50
	Migration	16
	ENI Workshop	24
	MdV	34
	Protection	24
	IM	8
	<b>Subtotal</b>	<b>156</b>
Brazilian Red Cross	PSS and Basic Health	50
	RFL	67
	Protection	71
	IM	2
	<b>Subtotal</b>	<b>190</b>
Chilean Red Cross	PSS	111
	Migration	29
	RFL	17
	IM	15
	<b>Subtotal</b>	<b>172</b>

Ecuadorian Red Cross	Financial education and business management	49
	CTP	22
	Human mobility, PGI, CEA	78
	IM	27
	<b>Subtotal</b>	<b>176</b>
Guyana Red Cross Society	eCBHFA, ECV and First Aid	14
	<b>Subtotal</b>	<b>14</b>
Panama Red Cross Society	PSS, RFL, Protection	143
	IM	20
	<b>Subtotal</b>	<b>163</b>
Peruvian Red Cross	PSS, First Aid	70
	Migration	30
	Protection	30
	SGBV	30
	IM	8
	<b>Subtotal</b>	<b>168</b>
Trinidad & Tobago Red Cross Society	Migration, CEA, RFL	30
	<b>Subtotal</b>	<b>30</b>
Uruguayan Red Cross	Migration	20
	Cash transfer	16
	PSS and basic health	25
	RFL	57
	Humanitarian Aid Distribution	30
	ENI Workshop	20
	<b>Subtotal</b>	<b>168</b>
	<b>Total</b>	<b>1,237</b>

**Brazil:** In May 2020, 25 volunteers were trained in education and health, 25 in PSS, 67 in RFL and 71 in PGI. The training was held in Rio Grande do Sul and Mato Grosso do Sul. In addition, a RFL guideline was created for the support of BRC activities, as well as additional guidelines for feedback with beneficiaries (CEA), protection, gender and inclusion, and communication materials for all areas of the project.

**Chile:** CRC has carried out 25 training sessions of which 10 have been since the outbreak of COVID-19. The topics covered have been Information Management, Basic First Aid, Psychosocial Support, RFL, Migration, Prevention and Care on COVID-19 and the Migration Strategy Survey.

**Ecuador:** During this period, the construction of the proposal for the Basic Human Mobility Curriculum of the Ecuadorian Red Cross was completed. This instrument was built for on-site training, however, due to the characteristics of the moment, it was adjusted for on-line training as well.

**220 volunteers** received psychosocial support.

**Brazil:** BRC provided PSS to a total of 43 volunteers

**Chile:** CRC provided PSS to a total of 30 volunteers

**Panama:** PRCS provided PSS to a total of 118 volunteers.

**Uruguay:** URC provided PSS to a total of 29 volunteers

#### Output S1.1.6:

##### **5 migration response protocols and procedures established.**

In general, protocols have been developed to be able to continue the operation with COVID-19.

**Argentina:** ARC drafted a Migration Manual (including a Border Assistance Manual and an Urban Centre Assistance Manual) and is developing a longer-term strategy for Migration.

**Chile:** In 2019 the CRC created a manual on migration for volunteers with the objective to provide general knowledge on migrants' rights in Chile. Furthermore, the CRC is in the process of developing a long-term migration strategy.

**Ecuador:** A protocol was developed to continue providing CVA services approved by IFRC and the National Society

**Panama:** Security and reception protocols for migrants were drawn up in the various intervention locations, in coordination with local authorities and the host community.

**Peru:** PRC developed a National Human Mobility Plan, a guiding document for the development of RC/RC Movement migration-oriented projects in Peru. The plan delineates gaps in services and activities in which it is possible to intervene according to the capacities of the National Society. It also outlines internal strengthening needs (managerial and voluntary). Similarly, the new strategic plan for the National Society incorporates the component of migration and social inclusion of migrant communities. Together with the National Plan for Human Mobility, PRC's strategic plan aims to ensure that projects currently implemented in Peru are sustainable in the medium to long term.



## **International Disaster Response**

### ***Outcome S2.1: Effective and coordinated national and international disaster response is ensured.***

<b>Indicators:</b>	<b>Target</b>	<b>Actual</b>
Number of Regional Intervention Team (RIT) and IFRC staff mobilized to provide support.	13	13

### ***Output S2.1.1: Effective response preparedness and National Society surge capacity mechanism is maintained.***

<b>Indicators:</b>	<b>Target</b>	<b>Actual</b>
Number of missions to support NS and/or CCST.	70	116

### ***Output S2.1.4: Supply chain and fleet services meet recognized quality and accountability standards.***

<b>Indicators:</b>	<b>Target</b>	<b>Actual</b>
Number of new kits created for migration purposes and strategies for regional sourcing.	5	5

### ***Output S2.1.6: Coordinating role of the IFRC within the international humanitarian system is enhanced.***

Indicators:	Target	Actual
Number of coordination meetings carried out within the Movement and with key external stakeholders.	12	14
Number of reports on the participation of the humanitarian network and key partners.	12	10

Progress towards outcomes

## Outcome S2.1

**13 RIT and IFRC staff mobilized to provide support.**

See the table below for details:

### Surge Deployments: Americas Region Migration Appeal (09/2018 – 03/2020)

Deployment Type	National Society	Deployed To	Intervention Area	Deployment Date
FACT	Spanish RC	Panama (ARO)	CEA	17/06/2018
FACT	Canadian RC	Panama (ARO)	PMER	02/2019
FACT	British RC	Panama (ARO)	IM	02/2019
RIT	Mexico RC	Peru (CCST)	IM	04/2019
RIT	Brazilian RC	Panama (ARO)	IM	05/2019
RIT	Ecuadorian RC	Chile	General	05/2019
IFRC	IFRC CCST Central America	Chile	General	07/2019
RIT	Honduras RC	Panama	WASH	10/2019
Internship	N/A	Panama	CEA	08/2019
RIT	Mexican RC	Panama	General	01/2020
RIT	Colombian RC	Panama	PSS	01/2020
RIT	IFRC ARO	Ecuador	Finance	03/2020
RIT	IFRC ARO	Southern Cone	IM	03/2020

### Output S2.1.1:

**78 missions to support NSs and/or CCSTs.**

See the table below for a detailed breakdown of IFRC staff missions in support of the operation:

	Argentina	Brazil	Chile	Ecuador	Guyana	Panama	Peru	Trinidad & Tobago	Uruguay	Other	Subtotal
Coord and Head of CCST	2	4	8	5	1	10	4	1	5	1	41
Migration	2		1	2		5	2	2	2	1	17
CEA				1		1	2	1		3	8
IM	2		3			3	2	1	2		13
PMER		1	1		1	1	1	2	1		8
Programme			2	1							3
PGI	1		2	2		1	3		2	3	14
Livelihoods	1		1	1		2	1		2		8

PSS			2			1			1		4
										<b>Total</b>	<b>116</b>

**Output S2.1.4:**

**5 new kits created** for migration purposes.

New kits have been developed at both the Regional and National levels. See the tables in the [annex](#) for a detailed description of the items included in the new kits developed as part of the operation.

**Output S2.1.6:**

**14 coordination meetings** carried out within the Movement and with key external stakeholders.

The coordination meetings carried out included:

- The Inter-American Conference in Buenos Aires (Inter-American Conference) in May 2019
  - Prior to the Inter-American Conference, a high-level meeting in conversation format was held to address the "Challenges and Commitments of the Red Cross Movement to Migration in the Americas" in the face of the regional context and current humanitarian challenges. Government representatives of the National Societies of the Americas, the President and Vice-President of the International Federation and its Secretary General, International Committee of the Red Cross, representatives of Participating National Societies, representatives of Social Movements and representatives of the migrant population were in attendance.<sup>50</sup>
- The Appeal Revision process with Movement Partners in April 2019
  - Focal points from the National Societies included in the appeal met with IFRC staff and representatives from Partner National Societies in Panama to work on a revision of the operation in April 2019. The revision extended the operation until February 2020 and included changes to the budget and planned activities of each National Society.
- A January 2019 meeting with Partner National Societies.
- Argentina Red Cross launched a Press Meeting in which the National Society shared information about the National Strategy and Communication campaign for migration with local journalists.

Members of the Migration Cell also participated in the 2019 Annual Meeting of the IFRC Global Migration Task Force in Bogota, Colombia from 11-13 September 2019. Though the meeting took place after the reporting period for this report, much of the planning for the event took place in the year after the launch of the Appeal. The global meeting was hosted by Colombian Red Cross and included more than 50 participants, with representatives from 20 National Societies, the IFRC and the ICRC. The discussions included an analysis and reflection on global and regional trends, a marketplace showcasing new National Society initiatives on migration and displacement, reflections on the strengths and strategic direction of the IFRC Migration Task Force and an analysis of the achievements to date in implementing the IFRC Global Migration Strategy. On the final day of the meeting, external partners from the Government of Colombia, UNHCR and other agencies joined the discussions centred on the strategic and operational approach of National Red Cross Societies from the Americas in addressing the humanitarian needs of migrants. Also, a marketplace of NSs involved in the operation showed the activities and lessons learned as part of the operation.

We have been coordinating field visits with several key partners such as UNHCR, UNICEF, IOM, DFID, ECHO, PRM and AECID in different countries so that they can visualize our operations on the field.



**Influence others as leading strategic partner**

**Outcome S3.1: The IFRC secretariat, together with National Societies, uses its unique position to influence decisions at the local, national and international levels that affect the most vulnerable.**

<sup>50</sup> An IFRC newsletter with more information about the Inter-American Conference can be found [here](#).

<b>Output S3.1.1: The IFRC and the National Societies are visible, trusted and effective advocate on humanitarian issues.</b>		
<b>Indicators:</b>	<b>Target</b>	<b>Actual</b>
Number of newsletters, press releases and reports produced.	100	61
<b>Output S3.1.2: The IFRC produces high-quality research and evaluation that informs advocacy, resource mobilization and programming.</b>		
<b>Indicators:</b>	<b>Target</b>	<b>Actual</b>
Number of monitoring and evaluation reports produced.	8	2
Number of research lessons learned materials and evaluations produced.	1	Planned
<b>Outcome S3.2: The programmatic reach of the National Societies and the IFRC is expanded.</b>		
<b>Indicators:</b>	<b>Target</b>	<b>Actual</b>
Number of coordination spaces to exchange information to ensure optimal coordination in resource mobilization.	24	24
<b>Output S3.2.1: Resource generation and related accountability models are developed and improved.</b>		
<b>Indicators:</b>	<b>Target</b>	<b>Actual</b>
Number of partnerships built with key actors from the migration response.	10	6
Number of proposals developed and presented to potential donors.	20	23
Progress towards outcomes		
<p><b>Outcome S3.1</b></p> <p><u>Output S3.1.1</u></p> <p><b>61 newsletters, press releases and reports produced.</b></p> <p>Social networking: (01.10 - 31.03)</p> <p>Twitter: 18 posts in Spanish, 8 posts in English 26 tweets from other SN or referring to the topic.</p> <p>Migration content for Voices of the Americas and the Caribbean:</p> <ul style="list-style-type: none"> <li>● October edition: <ul style="list-style-type: none"> <li>○ Peru: Cuerda Firme presentation video.</li> <li>○ Peru: Empathy exercise (stories)</li> <li>○ Peru: Days of solidarity</li> <li>○ Ecuador: figures and testimony.</li> </ul> </li> <li>● December Edition: <ul style="list-style-type: none"> <li>○ Colombia: A day at La Hormiga</li> <li>○ Peru: Cuerda Firme: transforming lives through art.</li> <li>○ Panama: grateful to be alive.</li> </ul> </li> </ul> <p>Development of the following audio-visual products:</p> <ul style="list-style-type: none"> <li>● Mini documentary "Andrés and Liz"- the follow-up to two Cuerda Firme students.</li> <li>● 3 testimonials from Cuerda Firme participants.</li> <li>● Video of the culmination of the Cuerda Firme Program.</li> <li>● Video Somos Comunidad, using community cinema for social inclusion.</li> <li>● Video Sin Fronteras, raising awareness through dance.</li> </ul>		

- Attention Post in Tumbes, Peru.

### Output S3.1.2

#### ***Monitoring and evaluation reports produced.***

A monitoring and evaluation (M&E) plan<sup>51</sup> has been developed for this operation in Spanish and English. This M&E plan provides a common framework for National Societies and the IFRC on indicators, definitions, data collection methods, frequency, and responsible persons at different levels. The M&E plan was shared with National Societies during revision process in March to obtain feedback and adjust it as needed. The national-level Plans of Actions then follow the macro-structure laid out in the M&E Plan. Once the national Plans of Action are completed, the M&E plan will be updated to include the consolidated targets at country and regional levels. The M&E plan also specifies the evaluation process for this operation. A final evaluation is planned and aligned with the IFRC's Framework for Evaluation. Contingent upon funds, the evaluation will be tailored to the complexity of the operation (migration response, eight countries, and distinctive capacities and scope of activities per National Society).

To aid in the monitoring process for the operation, PMER and IM staff from the Migration Cell created a system of tables to track implementation in each National Society included in the operation. The tables include the activities from each country's plan of action, and are updated on a regular basis in order to keep the [regional dashboard](#) for the operation up to date. To date, information in the dashboard and in updates have been used in place of monitoring and evaluation reports.

#### ***Research lessons learned materials and evaluations produced.***

Lessons learned activities will be carried out as the operation ends, to complement the evaluation process.

### **Outcome S3.2**

#### ***4 coordination spaces to exchange information to ensure optimal coordination in resource mobilization.***

The Partnerships and Resource Mobilization (PRD) department has organized several coordination spaces with donors and partners. These include:

- Two international teleconference calls with National Societies across the globe and the ICRC to discuss joint resource mobilization efforts for this response.
- A meeting with external partners and donors at regional level to present the progress on the operation's activities.
- A briefing with Permanent Missions representatives at Geneva level to present the operation and the related funding needs.

Other coordination spaces including one-to-one meetings and donor visits at field level took place in relation to specific grants and funding applications.

The Secretariat at the global, regional and local levels, undertook a series of resources mobilization activities including:

1. Engagement with donors and partners from different funding sources to present the details of the operation and possibilities of collaborations
2. Development and presentation of proposals and funding applications
3. Development and use of fundraising marketing materials including a fundraising toolkit
4. Organization of a "Donor Advisory Group" field visit in January in Colombia including representatives from governments and Partner National Societies to discuss and explain the regional humanitarian needs related to the population movement in the region.
5. Regular meetings with partners and donors to provide an update on the operation

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<sup>51</sup> Available upon request.

The Inter-American Conference in Buenos Aires also served as a vital coordination space for resource mobilization, as several Partner National Societies involved with the Appeal were in attendance. See Output 2.1.6 for more information about the Inter-American Conference.

IFRC was co-chair of the resource mobilization committee of Response for Venezuelans (R4V) Platform

Output S3.2.1

**23 proposals** developed and presented to potential donors.

The IFRC, on behalf of National Societies, has presented 23 proposals to several partners and donors. Other donors and partners have kindly donated to the appeal based on the published EA document.

**Effective, Credible and Accountable IFRC**

***Outcome S4.1: The IFRC enhances its effectiveness, credibility and accountability.***

***Output S4.1.3: Financial resources are safeguarded; quality financial and administrative support is provided contributing to efficient operations and ensuring effective use of assets; timely quality financial reporting to stakeholders.***

Indicators:	Target	Actual
Number of financial reports published.	5	10
Progress towards outcomes		

**Outcome S4.1**

Output S4.1.3:

**10 financial reports** published.

As per the IFRC's reporting guidelines for emergency operations, the IFRC will publish on its website financial reports with all its operations updates and final report for this emergency.

An ARO finance officer provided guidance to National Societies when developing their revised budgets and for financial reporting guidelines in March 2019 to ensure good reporting and accountability standards.

Since April 2020, monthly financial reports were published

## D. BUDGET

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Click [here](#) to access the financial report.

Reference documents

Click here for:

- [Operational Updates and Previous versions of the Emergency Appeal](#)

## Contact information

**For further information, specifically related to this operation please contact:**

### In the National Societies:

- **Argentine Red Cross:** [info@cuzroja.org.ar](mailto:info@cuzroja.org.ar)
- **Chilean Red Cross:** [roberto.yanez@cuzroja.cl](mailto:roberto.yanez@cuzroja.cl); [maria.ferrer@cuzroja.cl](mailto:maria.ferrer@cuzroja.cl)
- **Brazilian Red Cross:** [gabinete@cvb.org.br](mailto:gabinete@cvb.org.br)
- **Ecuadorian Red Cross:** [presidencia@cuzroja.org.ec](mailto:presidencia@cuzroja.org.ec)
- **Guyana Red Cross:** [guyanaredross@yahoo.com](mailto:guyanaredross@yahoo.com)
- **Red Cross Society of Panama:** [crppresidencia@cuzrojadepanama.org](mailto:crppresidencia@cuzrojadepanama.org)
- **Peruvian Red Cross:** [director.ejecutivo@cuzroja.org.pe](mailto:director.ejecutivo@cuzroja.org.pe)
- **Trinidad and Tobago Red Cross Society:** [admin@ttrcs.org](mailto:admin@ttrcs.org)
- **Uruguayan Red Cross:** [presidencia@cuzroja.org.uy](mailto:presidencia@cuzroja.org.uy)

### In the IFRC regional office for the Americas:

- Jono Anzalone, Head of the DCPRR Department: [jono.anzalone@ifrc.org](mailto:jono.anzalone@ifrc.org)
- Felipe Del Cid, Continental Operations Coordinator: [felipe.delcid@ifrc.org](mailto:felipe.delcid@ifrc.org)
- Santiago Luengo, Regional Migration Operations Manager: [santiago.luengo@ifrc.org](mailto:santiago.luengo@ifrc.org)
- José Félix Rodríguez, Migration Coordinator: [josefelix.rodriguez@ifrc.org](mailto:josefelix.rodriguez@ifrc.org)
- Mauricio Bustamante, Head of Regional Logistics Unit Americas Region: [mauricio.bustamante@ifrc.org](mailto:mauricio.bustamante@ifrc.org)
- Susana Arroyo, Communications Unit Manager: [susana.arroyo@ifrc.org](mailto:susana.arroyo@ifrc.org)

### For Resource Mobilization and Pledges:

- Marion Andrivet, Resource Mobilization in emergencies Manager: [marion.andrivet@ifrc.org](mailto:marion.andrivet@ifrc.org)

### For Performance and Accountability:

- Maria Larios, Planning, Monitoring, Evaluation and Reporting Manager: [maria.larios@ifrc.org](mailto:maria.larios@ifrc.org)

### In IFRC HQ in Geneva:

- Antoine Belair, Operations Coordination Senior Officer for Disaster and Crisis (Prevention, Response and Recovery): [antoine.belair@ifrc.org](mailto:antoine.belair@ifrc.org)

## How we work

All IFRC assistance seeks to adhere to the **Code of Conduct** for the International Red Cross and Red Crescent Movement and Non-Governmental Organizations (NGO's) in Disaster Relief and the **Humanitarian Charter and Minimum Standards in Humanitarian Response (Sphere)** in delivering assistance to the most vulnerable. The IFRC's vision is to inspire, **encourage, facilitate and promote at all times all forms of humanitarian activities** by National Societies, with a view to **preventing and alleviating human suffering**, and thereby contributing to the maintenance and promotion of human dignity and peace in the world.

The IFRC's work is guided by Strategy 2020 which puts forward three strategic aims:



**Save lives,**  
protect livelihoods,  
and strengthen recovery  
from disaster and crises.



Enable **healthy**  
and **safe** living.



Promote **social inclusion**  
and a culture of  
**non-violence** and **peace**.

# Emergency Appeal

INTERIM FINANCIAL REPORT

Selected Parameters			
Reporting Timeframe	2018/09-2020/09	Operation	MDR42004
Budget Timeframe	2018-2020	Budget	APPROVED

Prepared on 23 Oct 2020

All figures are in Swiss Francs (CHF)

## MDR42004 - Americas - Population Movement

Operating Timeframe: 03 Jun 2018 to 31 Dec 2020; appeal launch date: 06 Sep 2018

### I. Emergency Appeal Funding Requirements

Thematic Area Code	Requirements CHF
AOF1 - Disaster risk reduction	440,000
AOF2 - Shelter	550,000
AOF3 - Livelihoods and basic needs	1,440,000
AOF4 - Health	2,180,000
AOF5 - Water, sanitation and hygiene	750,000
AOF6 - Protection, Gender & Inclusion	650,000
AOF7 - Migration	2,270,000
SFI1 - Strengthen National Societies	2,140,000
SFI2 - Effective international disaster management	1,720,000
SFI3 - Influence others as leading strategic partners	360,000
SFI4 - Ensure a strong IFRC	0
<b>Total Funding Requirements</b>	<b>12,500,000</b>
<b>Donor Response* as per 23 Oct 2020</b>	<b>9,853,721</b>
<b>Appeal Coverage</b>	<b>78.83%</b>

### II. IFRC Operating Budget Implementation

Thematic Area Code	Budget	Expenditure	Variance
AOF1 - Disaster risk reduction	0	664	-664
AOF2 - Shelter	214,978	148,546	66,432
AOF3 - Livelihoods and basic needs	1,132,356	672,362	459,994
AOF4 - Health	1,047,999	724,223	323,777
AOF5 - Water, sanitation and hygiene	525,024	458,791	66,233
AOF6 - Protection, Gender & Inclusion	262,954	61,170	201,783
AOF7 - Migration	1,300,965	1,139,070	161,896
SFI1 - Strengthen National Societies	1,740,007	1,400,091	339,916
SFI2 - Effective international disaster management	2,704,158	2,121,480	582,678
SFI3 - Influence others as leading strategic partners	60,842	44,034	16,808
SFI4 - Ensure a strong IFRC	56,729	4,414	52,314
<b>Grand Total</b>	<b>9,046,012</b>	<b>6,774,846</b>	<b>2,271,166</b>

### III. Operating Movement & Closing Balance per 2020/09

Opening Balance	6,578
Income (includes outstanding DREF Loan per IV.)	8,976,858
Expenditure	-6,774,846
<b>Closing Balance</b>	<b>2,208,590</b>
Deferred Income	337,450
Funds Available	2,546,041

### IV. DREF Loan

* not included in Donor Response	Loan :	741,590	Reimbursed :	741,590	<b>Outstanding :</b>	<b>0</b>
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# Emergency Appeal

INTERIM FINANCIAL REPORT

Selected Parameters			
Reporting Timeframe	2018/09-2020/09	Operation	MDR42004
Budget Timeframe	2018-2020	Budget	APPROVED

Prepared on 23 Oct 2020

All figures are in Swiss Francs (CHF)

## MDR42004 - Americas - Population Movement

Operating Timeframe: 03 Jun 2018 to 31 Dec 2020; appeal launch date: 06 Sep 2018

### V. Contributions by Donor and Other Income

Opening Balance							6,578
Income Type	Cash	InKind Goods	InKind Personnel	Other Income	TOTAL	Deferred Income	
American Red Cross	199,915				199,915		
British Red Cross	254,519				254,519		
British Red Cross (from British Government*)	3,535,922				3,535,922		
China Red Cross, Hong Kong branch	25,403				25,403		
DREF Allocations				-91,590	-91,590		
European Commission - DG ECHO	1,612,664				1,612,664		
Italian Red Cross	97,239		234,129		331,368		
Japanese Red Cross Society	88,843				88,843		
On Line donations	1,698				1,698		
Red Cross of Monaco	34,336				34,336		
Spanish Government	282,089				282,089		
The Canadian Red Cross Society (from Canadian Gov	358,346				358,346		
The Netherlands Red Cross (from Netherlands Govern	1,021,682				1,021,682		
UNHCR - UN Refugee Agency	311,365				311,365	173,815	
UNICEF - United Nations Children's Fund	222,868				222,868	26,896	
United States Government - PRM	787,429				787,429	136,739	
<b>Total Contributions and Other Income</b>	<b>8,834,319</b>	<b>0</b>	<b>234,129</b>	<b>-91,590</b>	<b>8,976,858</b>	<b>337,450</b>	
<b>Total Income and Deferred Income</b>					<b>8,983,436</b>	<b>337,450</b>	

## Annex

<b>Men's personal hygiene kit</b>	
<b>Description</b>	<b>Quantity</b>
Razor	1
Toothpaste X 50 ml + adult toothbrush	1
Bath Soap X 250 g	1
Toilet paper X Roll	1
Hand towels 70X40 cm	1
deodorant in roll on X 50 ml	1
Shampoo in X envelope 10 ml	5
Small comb	1
Cloth fabric with Red Cross logo and phrase: "DONATION - FORBIDDEN TO SELL"	1

<b>Women's personal hygiene kit</b>	
<b>Description</b>	<b>Quantity</b>
Shaver	1
Toothpaste X 50 g + adult toothbrush	1
Bath Soap X 250 g	1
Toilet paper X Roll	1
Hand towels 70X40 cm	1
Sanitary towels X 10 units	1
Deodorant in roll on X 50 ml	1
Shampoo in X envelope 10 ml	5
Small comb	1
Cloth fabric with Red Cross logo and phrase: "DONATION - FORBIDDEN TO SELL"	1

<b>Children's personal hygiene kit</b>	
<b>Description</b>	<b>Quantity</b>
Toothpaste X 75 g + children's toothbrush	1
Bath Soap X 250 g	1
Wet Wipes X 50 units	1
Hand towels 70X40 cm	1
10 oz children's assorted colours plastic cup	1
Shampoo X 10 ml	5

Cloth fabric with Red Cross logo and phrase: "DONATION - FORBIDDEN TO SELL"	1
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<b>Babies' personal hygiene kit</b>	
<b>Description</b>	<b>Quantity</b>
Diaper cream No. 4 X 20 g	1
Baby bath soap X 250 g	1
Cloth diaper 70X50 cm X 2 units	1
Baby Wipes X 50 units	1
Disposable diaper stage No. 2 X 5 units	1
Shampoo X 100 ml	1
Cloth fabric with Red Cross logo and phrase: "DONATION FORBIDDEN TO SELL"	1

<b>Personal hygiene promotion kit</b>	
<b>Description</b>	<b>Quantity</b>
Hand washing information	1
Antibacterial gel 30 ml	1