

COVID-19 DISEASE SOUTH AMERICA REGIONAL RESPONSE

Reporting Period 9 June - 7 July 2020



SITUATION OVERVIEW

In South America, COVID-19 was first detected on 26 February 2020, when Brazil confirmed a case in São Paulo. Since then, coronavirus cases have been rising sharply in South America with more daily cases than the US and Europe, reaching a total of 2,511,513 as of 7 July 2020, or 21.8% of the total number of cases globally. Brazil with a total of 1,603,055 confirmed cases is the country with second highest number of cases in the world after the US. Other countries in the region are also battling major outbreaks. Peru, with a total of 302,718 has the second highest number of reported cases in the region followed by Chile and Colombia with 298,557 and 117,110 respectively.

Brazil with 64,867 registered death cases is also second country in the world, again after the USA followed by Peru (10,589) and Chile (6,384).

Chile has one of South America's highest rates of testing - around 63 tests per 1,000 people, followed by Peru with 55 and Venezuela with 46 tests per 1,000 people. At the bottom of the list are Suriname and Bolivia with 2 and 7 tests per 1,000 people.

As COVID-19 spreads worldwide, South American governments took restrictive mobility measures to try

to reduce the impact of the pandemic. Lockdowns, curfews, business closures, travel restrictions and border closures in the region have caused migrants to lose their jobs, with negative impacts on incomes and remittances, often resulting in the loss of their regular migratory status, blocking their possibility of return, and therefore, substantially increasing their vulnerability. Specific regional factors exacerbate the vulnerability of migrants in the context of COVID-19, including high rates of urbanization and densely populated cities, which often lead to crowded living and working conditions for migrants. Moreover, despite formal restrictive measures, irregular entries continue through unauthorized crossings or irregular routes, where health controls do not exist for the prevention of COVID-19³.

Brazil has continued to take less severe lockdown and national restrictions measures than other South American countries, while other countries like Argentina have imposed compulsory lockdowns. Peru had one of the first and strictest national lockdowns in the region, which lasted until the end of June, but it continued to see cases and deaths rise. As cases rapidly rise in Chile, the government has tightened lockdowns across the country.

¹⁻ WHO COVID-19 Situation Dashboard: https://covid19.who.int/

²⁻ Ibidem

³⁻ https://www.crisisresponse.iom.int/sites/default/files/appeal/documents/IOM%20South%20America%20Regional%20Strategic%20Preparedness%20and%20Response%20Plan%20COVID-19.pdf

SNAPSHOT OF IOM RESPONSE IN SOUTH AMERICA

STRATEGIC PRIORITY 1

Ensure a well-coordinated, informed and timely response through mobility tracking systems and strengthening partnership and coordination structures established at the community, national and regional levels.

M M A R

COORDINATION AND PARTNERSHIPS

IOM has provided information to governments in the region on how COVID-19 has affected human mobility at national and regional levels. IOM has also disseminated information on measures that governments have put in place to reduce these impacts. Additionally, in the framework of the Global Compact for Migration (GCM), in Latin America and Caribbean, IOM is coordinating work to engage Governments and UN agencies in establishing national networks as platforms that aim to review progress made towards GCM 23 objectives, taking into consideration COVID-19 impacts and challenges.

IOM Chile has been engaging the private sector in operations to provide humanitarian response to migrants in vulnerable situation. In June, NATURA Company has supplied the Chilean Catholic Institute of Migration (INCAMI) with 400 hygiene items to respond to the emergency.



In Colombia, IOM is partnering with the National Institute of Health (INS) to strengthen its response capacity through the provision of 'situational rooms', in the departments of Norte de Santander, Arauca and La Guajira in the border with Venezuela, and Nariño in the border with Ecuador. It is also supporting the health authorities and the hospital network in the development of health information and education activities in

the main cities as Bogotá, Cali, Medellín, Barranquilla, Cartagena, Santa Marta, Bucaramanga, Cucuta, Arauca, Puerto Carreño, Riohacha, Maicao, Pasto and Ipiales.



IOM Colombia has also established a comprehensive strategy with the Ministry of Education for the prevention of COVID-19 in the school environment. This strategy includes actions for the delivery of school kits for children and teenagers in areas prioritized by the Ministry of Education and IOM.

In Paraguay, IOM is leading the Inter-Agency Group for Assistance to Returned Migrants through which monthly reports related to needs in the context of humanitarian response are shared with the government and donors. In addition, IOM is supporting the Secretary for Returnees to prepare a Strategic Plan that considers COVID-19 challenges in a rights' based approach in a context for the return and reintegration.

In Uruguay, IOM is working alongside with UNETE and the National System of Emergencies (SINAE), to build a comprehensive monitoring tool to measure all COVID-19 impact in the country. IOM Uruguay worked in coordination with UNICEF and civil society, to help migrant families with children, providing them with shelter, food, hygiene kits, and psychosocial support.





TRACKING MOBILITY IMPACTS

The current COVID-19 outbreak has affected global mobility in the form of various travel disruptions and restrictions⁴. IOM has developed a global mobility database to map and gather data on the locations, status and different restrictions at Ports of Entry (PoEs), (www.migration.iom.int). IOM Offices in South America are actively collecting information on various PoEs (airports, land border points, blue border points⁵), internal transit points, areas and sites with high presence of mobile population in an effort to better understand the extent of these restrictions, as well as the impact on different types of population groups.

IOM Peru developed a DTM Site Assessment in temporary shelters where nationals, migrants and refugees are hosted. The document presents data on the location of 28 temporary shelters currently opened in Lima, Tumbes, Piura and Lambayeque.



STRATEGIC PRIORITY 2

Contribute to global, regional, national and community preparedness and response efforts for COVID-19 to reduce associated morbidity and mortality.



RISK COMMUNICATION AND COMMUNITY ENGAGEMENT (RCCE)

IOM Argentina has launched a digital campaign called #ChauPrejuicio ("Bye prejudice") to raise awareness about the stereotypes, prejudices and discrimination

that affect migrants. Also, in coordination with the Government of Argentina, through the National Directorate of Migration, the Ministry of Labour and the International Labour Organization (ILO), IOM launched a digital campaign explaining migrants' rights and duties regarding access to work in the context of COVID-19.





In Brazil, IOM supported Cáritas Brasileira in launching the Portuguese and Spanish bilingual booklet "Manitas Brillantes", which seeks to raise awareness among Venezuelan children and their families about the importance of hygiene and self-care as ways to prevent COVID-19. In coordination with key governmental institutions, Information sheets have been distributed for awareness raising purposes on the risk to exploitation and trafficking in the context of the Pandemic.



IOM Chile has developed -together with PAHO and the Ministry of Health- an information campaign in Spanish and Haitian Creole, broadcasted on social media to strength access to relevant medical services while increasing prevention and control of COVID-19 in migrants' dense areas.



⁴⁻ https://migration.iom.int/

⁵⁻ International border crossing point on water

In Colombia, virtual educational activities are taking place to promote best practices and prevent the risk of COVID-19 contagion. The activities include wide dissemination of content through the website, social networks, digital applications, gifs, flyers, posters, community radio and audio clips in Spanish and in native languages, especially for indigenous population of the departments of La Guajira, Norte de Santander and Vichada. The activities also include the development of communication strategies for community leaders to act as prevention agents in cases of Gender Based Violence (GBV). Community strategies addressed to youth to talk about prevention of respiratory virus in the community of Callejas, Tierralta, Department of Cordoba in the Caribbean coast, are also included in the activities.



IOM Peru has implemented a series of communication campaigns in social media aiming to prevent discrimination during the pandemic and to highlight how migrants are working together to respond to COVID-19. These campaigns included messages such as #DeEstaSalimosJuntos. In addition, IOM Peru launched a campaign to prevent trafficking in persons for communities at risk, including refugees and migrants. #AlguienTrataDeEngañarte.





IOM continues to support national governments in strengthening disease surveillance, such as among border communities and at points of entry (PoEs). This also includes community-events' based surveillance (CEBS), and data collection and population mobility mapping exercises for high-risk areas are conducted to better understand mobility trends, and inform regional and national preparedness and response plans - whilst ensuring information is integrated into national surveillance and reporting mechanisms.

As such, in Colombia, IOM supports the epidemiological monitoring of suspected, probable or confirmed cases of COVID-19 referred by the Health Secretariats or local hospitals or identified by telephone and home visits, in departments of Bolivar (city of Cartagena), Cesar, Norte of Santander (Border with Venezuela), Antioquia, Atlántico, La Guajira (Border with Venezuela), Nariño (Border with Ecuador) and Valle of Cauca.



In Tumbes, IOM Peru established a program that improves the public health surveillance system by identifying and treating diseases amongst refugees and migrants from Venezuelan who were sheltered by IOM during the COVID-19 lockdown measures. More over, in coortidation with local authorities and partners, IOM Peru has been increeses access to health services such as: children vaccination, sexual and reproductive health services, mental health and psychological first aid assistance and medical consultations (refugees and migrants from Venezuela).



IOM Ecuador jointly with UNFPA, is developing a Community-Based Surveillance Strategy to be implemented at the Northern Border aiming to support communities to detect, report and derive COVID-19 cases to established health system protocols. The initiative is still in process and requires the approval of the governmental counterparts. The initiative seeks to connect and strengthen its actions with other UN Agencies that are already applying similar strategies such as UNICEF and UNHCR.



IOM Chile has been working in close collaboration with the Immigration Department and reviewed detailed needs of the government to assess their Border Management System. It also developed a detailed workplan for next steps in carrying out a Point of Entry nationwide assessment.

With the support of IOM Paraguay, the General Direction of Migration has completed the adaptation of spaces in its central office for attention to migrants and 2 POEs.



POINTS OF ENTRY (POE)

At the regional level IOM's primary interface on PoE matters remains the Iber-American Network of Migration Authorities (RIAM) where IOM is the Technical Secretariat and provides expert advice, best practice exchange facilitation and resource access. During this reporting period IOM supported the RIAM Presidency Pro-Tempore (Panama) in developing the workplan for the rest of 2020.

In Argentina, the border points at Tancredo Neves and Aguas Blancas-Bermejo have been strengthened by acquiring sanitary modules to proceed with the sanitary review of individuals identified with a temperature above 37.5°C and apply the referral protocol to the nearest hospital. Also, protection, prevention and detection items of COVID-19 were delivered in Argentina to the National Directorate of Migration (DNM) to strengthen response capacities in the Triple Border and Aguas Blancas.



INFECTION PREVENTION AND CONTROL

With regards to IPC, IOM strengthens the provision of critical Water, Sanitation and Hygiene (WASH) facilities and services in health care facilities, camps, POE and displacement settings. It also involves development of protocols, tools and guidance on handwashing, waste disposal, and site planning (including contingency spaces, hospital expansions, burial sites, and quarantine areas), and training.

In Brazil, IOM delivered more than 400 hygiene and cleaning kits in Roraima to be distributed to vulnerable Brazilian families, refugees and migrants. In Manaus, Amazonas, 140 hygiene kits were donated to the indigenous population. In Manaus, water fountains and bed sheets were donated to the city hall to be placed in the COVID-19 isolation area of sheltered indigenous people, directly benefiting 32 people. The daily delivery of meals to 400 sheltered indigenous people also continues to take place in the city. Also, IOM Brazil IOM distributed 340 hygiene kits to vulnerable families at the Boa Vista bus station. An information session and movies were also offert information in support of the beneficiaries' mental health.



IOM Colombia provides multi-sectorial assistance in public health interest spots (transport terminals, at the Venezuelan border, temporary shelters and care centers for refugees and migrants) including sanitation, wash, health, protection, sanitation, decontamination, energy kits, among others, in the departments of Norte de Santander, Arauca and Bogotá.



IOM Ecuador has provided Personal Protective Equipment (PPE) to shelters' staff, local governments and Ministry of Government. Disinfection supplies, protection masks, protective clothing, safety glasses and gloves have been provided to support counterparts in guaranteeing biosecurity measures are being complied.



LOGISTICS, PROCUREMENT AND SUPPLY MANAGEMENT

In Brazil, IOM delivered 1.5 tons of food to 250 stranded migrants in Acre, Assis city, border with Peru and Bolivia.

In Colombia, IOM delivered approximately 19,000 NFI kits for migrants and host communities in departments of Cundinamarca, Antioquia, Atlantico, La Guajira, Boyacá, Santander, Arauca, Casanare, Norte de Santander (Border with Venezuela), Nariño (Border with Ecuador) and Valle del Cauca.



IOM Chile delivered food and hygiene kits in 10 municipalities of Chile to 380 refugees and migrants from Venezuela.

STRATEGIC PRIORITY 3

Ensure access of affected people to basic services and commodities, especially to those in most vulnerable conditions, including health care, and protection and social services.



CAMP COORDINATION AND CAMP MANAGEMENT (CCCM)

The Regional CCCM sectorial working Group under REDLAC umbrella collect by IOM and UNCHR is actively carrying weekly meetings with an average of 15 members/humanitarian actors, from ranged UN agencies, IFRC, NGOs, participating to share information, and provide technical support to country actors by disseminating guidelines in both Spanish and English and delivering trainings. This sectorial working group delivered four webinars on Management of Shelters in the Context of COVID-19 with crosscutting themes such as: gender and GBV, protection and rights, environment, and health.

In Bolivia, IOM has been providing virtual CCCM trainings in the context of COVID-19. 28 participants including: government officials from the Vice Ministry of Civil Defense (VIDECI), national Red Cross Societies, NGOs and UN agencies, were trained through four seminars (from 11 to 18 June) focused on: coordination and management; minimum standards adapted to the COVID-19 situation; protection/Gender Based Violence (GBV) and; participation and accountability to affected population.



PROTECTION

IOM has noted an increase in the number of migrants seeking to return home because of loss of their livelihoods or because they were stranded during the lockdowns. Many are requesting assistance with humanitarian flights and/or subsistence support. Venezuelan nationals are reported to return in massive numbers, mainly from Colombia and Ecuador. The exacerbated vulnerabilities resulting from lack of access to livelihoods such as increase of debts, being homeless or because of family separation thus lack of protection network leave

migrants at higher risk of contagion of COVID-19 but also to exploitation, abuse and human trafficking.

Migrants face livelihood challenges, especially those in irregular situation who do not have access to the protection mechanisms at receiving or transit countries, including access to health care and to government schemes to palliate the socio-economic challenges. Public offices have reduced hours or are working from home which not only has a direct and immediate impact on migration regularization process, but also reduces the detection of most vulnerable cases, and thus the possibility to provide protection and assistance. For instance, the invisibility of trafficking victims is aggravated by confinement, making case identification even more challenging. Traffickers find new means of exploitation through appointments in private homes or other clandestine sites. As these are private spaces, the possibility of detection is much lower.

At the regional level IOM has convened key stakeholders from government and civil society to jointly identify challenges to detect and assist victims as well as to exchange lessons learned to overcome such difficulties. Over 200 participants from all South America have joined the IOM webinars to improve knowledge management and best practices. Information sheets are produced based on the discussions. IOM is also gathering information on how the pandemic is affecting the incidence of trafficking through a regional assessment on the characterization of the crime, its victims and its perpetrators.

In Argentina, 34 vulnerable Venezuelans have been assisted by IOM and the Argentine Catholic Commission for Migration Foundation (FCCAM) through an aid scheme designed according to the needs identified such as lack of access to health, food and housing. IOM has distributed 5,000 food and personal hygiene and prevention of COVID-19 kits, reaching migrants of different nationalities, including the LGBTI migrant population.



In the Northern region of Chile, IOM assessed the situation of the stranded migrants in the border communities and supported the regional and local authorities in the management of shelter for more than 2,000 stranded migrants. The aid included food, tents, blankets, hygiene supplies and temporary accommodation, for more than 40 people targeting the most vulnerable groups, such as pregnant women, families with minor children and older persons. IOM has also provided technical assistance on shelter management.

In Colombia, IOM is providing multi-sectorial orientation and support for refugees and migrants in topics such as physical and mental health, COVID-19 awareness, follow-up to sexual violence and gender based violence protection, child protection, human trafficking cases, shelter, rent, regularization, Cash Based Interventions (CBI) and case referral. IOM has activated psychosocial support lines at the community level and has implemented childbirth preparation courses through circuits, digital communication networks and community workshops.



In Ecuador, IOM has produced an analysis on the situation of LGBTI+ migrants and refugees to identify their differentiated needs, capacities and protection gaps. This will facilitate coordination and strengthen alliances with local partners working on the topic. Additionally, IOM has been working to assist victims of trafficking in coordination with NGOs and State institutions and has produced two handbooks on TIP: 1) Handbook for journalists on how to report cases of trafficking in persons, 2) Guide for police operations on trafficking, within the framework of the National Action Plan on TIP.

In Paraguay, IOM has been providing assistance to most vulnerable migrants, including accommodation and shelter assistance, Non-Food Items (NFIs), food and medical supplies.



In Peru, Haitian migrants in transit and in vulnerable conditions, received assistance such as accommodation and food to support them in the obligatory 14 day quarantine. In addition, IOM has provided humanitarian transportation from Tacna to Lima to stranded migrants. Included in institutional and operational programming of the Peruvian State, IOM has facilitated the design and implementation of referral pathway for refugees and migrants from Venezuela who have been victims of Trafficking in Persons (TiP) or who could be a potential victim.

In Uruguay, migrants in vulnerable situations received assistance including accommodation, hygiene kits, food and psychosocial support. Also, in coordination with relevant government institutions, IOM is supporting the design of referral mechanism for the protection and assistance of trafficking victims as well as an analysis of current challenges to protect Venezuelan citizens who have been victims of gender-based violence.



STRATEGIC PRIORITY 3

Support international, national and local partners to respond to the socio-economic impacts of COVID-19.



ADRESSING SOCIO-ECONOMIC IMPACT

IOM Argentina has partnered with Ashoka, the leading NGO on social-entrepreneurship, to conduct a mapping of social innovations, and launched the campaign "Hola Argentina" with the aim of identifying and promoting solutions promoted by various sectors, addressing challenges linked to integration of migrants in Argentina.

In Brazil, IOM is implementing activities to guide and support Venezuelans to register to receive emergency cash aid from the federal government in the city of Pacaraima, Boa Vista, and Manaus, benefiting more than 1,500 people. In addition, IOM reached the milestone of 1,000 beneficiaries in income transfer program implemented in Paraná with Caritas and CERF financing. The program aims to support vulnerable Venezuelan families who participated in the federal government's internalization strategy and were strongly impacted by the pandemic.



Also, IOM Brazil continues to work with Cáritas Brasileira in Brasília, Florianópolis, Porto Velho and São Paulo to host Venezuelan and other migrants impacted by COVID-19, having lost their jobs, their income or even their homes in rented houses. So far, 257 people have been provided shelter. Morever, in partnership with the São Paulo Municipal Department of Education and

UNICEF, IOM supported the production of school-books in French, English, and Spanish. The material began to be delivered mid-June in São Paulo to almost 4,000 refugee and migrant students aged 0 to 8 years that do not speak Portuguese as their first language.

In partnership with the Municipality of Santiago, IOM Chile has been providing rental subsidy to migrant households that cannot meet basic needs as a consequence of COVID-19. This programme has benefited 20 families (91 adults 33 children).

IOM Colombia has been addressing the socio-economic impacts of the pandemic in the sector of Montes de María in the Departments of Bolivar and Sucre by a) working to strengthen the Mesa de Garantías⁶ for leaders and human rights defenders through the delivery of food aid to 120 women and their families and b) the delivery of 72 sewing machines for the manufacture of face masks as an economic reactivation mechanism that will benefit 225 families in the production process.





In Peru, IOM and UNCHR as co-leaders of the refugees and migrants' working group, decided to provide 380 soles, approximately 109 USD (equivalent amount the Government provides to Peruvian nationals) as humanitarian assistance through CBIs to vulnerable migrants. To date, IOM Peru has provided humanitarian assistance in the response framework of COVID-19 through cash-based interventions of approx. 107,879 USD. In addition, IOM Peru, increased its efforts and delivered more than 50,000 hot meals to vulnerable refugees and migrants.

⁶⁻ The Mesa de Garantías is carried out within the framework of the National Process of Guarantees for the work of human rights defenders, social and community leaders, which emerged in April 2009, as an agreement between state institutions and organizations that defend human rights, with the accompaniment of the international community, whose purpose is to advance in the analysis of the human rights situation and the commitment to carry out actions in prevention, protection and investigation.

NEW PROGRAMMATIC APPROACHES/INNOVATION

The government of Colombia has requested technical assistance to the RO on KM strategies for migration policies given current situation. The request was from the office of the President. The RO is supporting the mission and the office of the President with technical assistance. The main areas are:

1. Devising/identifying interaction/coordination platforms between Government and knowledge generating entities (academia, think tanks, international organizations), so that we can keep abreast of developments

and insights in priority public policy areas and ease knowledge sharing of relevant practices both locally and internationally.

- 2. Identifying specific public policy areas to whose approach policy and academic research would be especially relevant.
- 3. Fostering incentive structures to promote research in the policy areas identified above.

INFORMATION SHARING AND COMMUNICATION

A series of information briefs have been produced by the IOM Regional Office in South America. So far, ten infosheets have been disseminated. These documents aim to capture the most recent developments as well as the impact of the COVID-19 in the region.







A series of videos have been developed that highlight migrants' testimonies from South America who work on the front line during the pandemic. These migrants answered a series of questions in front of the camera - what was most difficult during the pandemic? What has been the most satisfactory?. It has been disseminated with the hashtag #EstamosJuntosenEsto throughout the social media of the Regional Office and from national offices.









A series of Facebook live interviews have been disseminated with the aim of first-hand learning about the IOM COVID-19 planning and response in each country. In addition to interviews to the Head of Offices from Argentina and Bolivia, the last live conversation was held with the IOM Chile Chief of Mission.





In addition, the IOM Regional Office for South America together with the Country Offices in the region has implemented a series of webinars on trafficking in persons during COVID-19 time.



Also, IOM has partnered with the Institute of Human Rights Public Policy (IPPDH) to carry out a virtual discussion on Migration Governance and COVID-19.



IOM has been actively supporting the dissemination of the UN Pause Verified campaign, which seeks to raise awareness for people to reason and review the content of social media before sharing. The main objective is to combat false news and disinformation.

RESOURCES MOBILIZATION/FINANCIAL UPDATES

countries, namely Argentina, Bolivia, Brazil, Chile, \$21,255,000. zuela.

The IOM Regional SPRP for South America is a and the World Bank.

The IOM Regional Office for South America launched a comprehensive, coordinated response that addresses Strategic Preparedness and Response Plan (SPRP) immediate and long-term health concerns with regards seeking USD 21,255,000 to alleviate the impact of the to current COVID-19 pandemic. Currently, IOM has COVID-19 pandemic on the most vulnerable migrants confirmed funding amounting to USD \$ 10,213,428, i.e. and their host communities in ten South American 48% of the total appeal funding requirement of USD The funding received include Colombia, Ecuador, Paraguay, Peru, Uruguay and Vene- reprogramming of projects and new lines of funding from the US Government, Canada, the European Union,

For latest information on IOM tools and resources for COVID-19 pandemic response visit www.iom.int/covid19



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