

# Information bulletin no. 1

## Americas: Population Movement

<b>Information Bulletin N° 1</b>	<b>Date of issue:</b> 22 August 2019
<b>Date of disaster:</b> Ongoing since 2015	<b>Point of contact:</b> Santiago Luengo, Migration Cell Coordinator – <a href="mailto:santiago.luengo@ifrc.org">santiago.luengo@ifrc.org</a>
<p><b>Number of National Societies currently involved:</b> Argentine Red Cross (ARC), Brazilian Red Cross (BRC), Chilean Red Cross (CRC), Colombia Red Cross Society (CRCS) Ecuadorian Red Cross (ERC), Guyana Red Cross (GRC), Peruvian Red Cross (PRC), Red Cross Society of Panama (RCSP), Trinidad &amp; Tobago Red Cross Society (TTRCS), and Uruguayan Red Cross (URC).</p> <p><a href="#">Click here</a> to view the overall numbers of volunteers, staff and branches per National Society based on FDRS data.</p>	
<b>Number of people affected:</b> 4 million people estimated	<b>Number of people to be assisted:</b> At least 322,500 people
<p><b>N° of other partner organizations involved:</b> Government authorities of the target countries including ministries of health and migration offices; International Organization for Migration (IOM); United Nations High Commissioner for Refugees (UNHCR); United Nations Office for the Coordination of Humanitarian Affairs (UNOCHA); the United Nations Children’s Fund (UNICEF), Norwegian Refugees Council, CARE; Save the Children, Pan American Health Organization (PAHO); Encounters: Jesuit Solidarity Service; Caritas.</p>	

**This bulletin is being issued for information only, and reflects the current situation and details available at this time. While this document covers population movement in the Americas, it does not include information related to the migrant caravans traveling from Central America to North America. For information on that situation, see the [bulletin published on 23 July](#).**

## The situation

In early 2015, the Americas region began to experience a surge in migration flows due in large part to the rise of people emigrating from Venezuela in response to the country’s faltering economy. This swell in migration continued in the years following, as the number of Venezuelans living in Latin American countries rose from an estimated 700,000 in 2015 to over 3 million by late 2018.<sup>1</sup> As of June 2019, an estimated 4.3 million Venezuelan’s have left the country since 2015.

Venezuelans, particularly those traveling alone, experience a number of vulnerabilities along the migratory route. These include trafficking, discrimination, exploitation by would-be employers and a lack of access to basic services. According to a recent study by the International Organization for Migration (IOM) in which more than 4,000 Venezuelan migrants were surveyed, 21 percent of respondents reported being victims of labour exploitation, 14 percent reported having worked without pay, 29 percent reported experiencing discrimination and 2 percent reported having been



*Photo 1: Migrants await services from the Ecuadorian Red Cross. Source: Ecuadorian Red Cross (ERC), 2019.*

<sup>1</sup> [“Regional Refugee and Migrant Response Plan for Refugees and Migrants from Venezuela”](#). R4V, 14 December 2018.

forced into labour.<sup>2</sup> Moreover, many Venezuelans encounter a variety of health risks along the migratory route, and several factors contribute to limited access to basic health services. Physical, cultural and social limitations can prevent migrant people living with HIV, for example, from accessing health services.<sup>3</sup>

While those leaving Venezuela have spread throughout South and Central America and the Caribbean, there have also been reports of migrants from Central Africa, Cuba and Haiti entering Colombia and heading north through Panama in an effort to reach North America. The trek is a dangerous one, particularly in the Darién gap – a region of largely undeveloped jungle on the border between Colombia and Panama with a significant presence of drug traffickers, along with numerous natural hazards.

In response to the situation, the IFRC's Americas Regional Office (ARO) has issued three Emergency Appeal operations – [one](#) in Colombia, [one](#) in Venezuela and [another](#) involving a coordinated response in nine countries affected by the migration flows in the region. With budgets of nearly 5 million and 9 million Swiss Francs (CHF) respectively, each operation began in 2018 and the latter is planned to extend into 2020.

Migration flows in the Americas have changed significantly in recent weeks, due in large part to certain changes in migration and border patrol policies. Moreover, perilous migratory routes in Central America and in the Caribbean have led to heightened vulnerability among migrant populations and a marked increase in migrant deaths in the region compared to recent years.

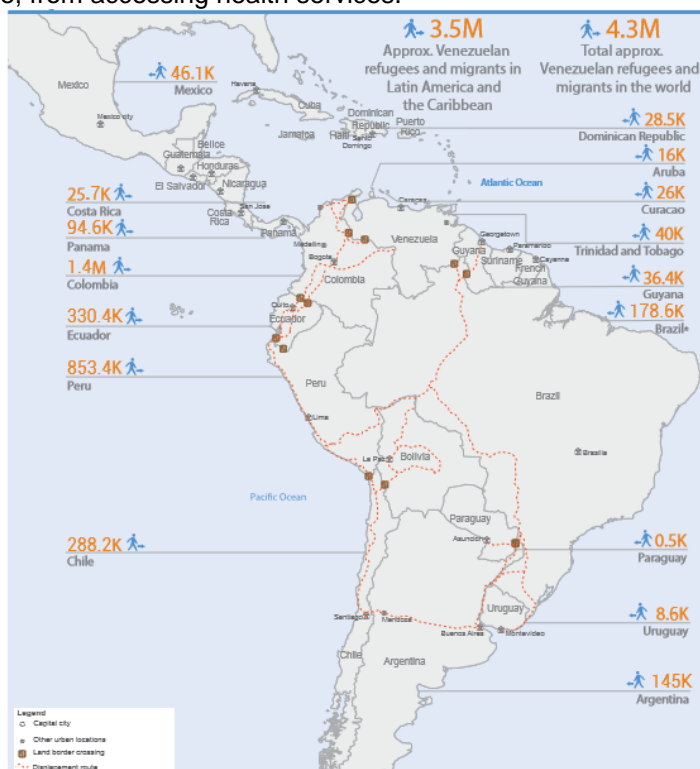
Below is a more detailed breakdown of recent developments related to the current migration situation in Latin America:

## South America

Two of the main crossing points along the border between **Colombia** and Venezuela (Simón Bolívar and Francisco Paula de Santander) reopened on 8 June for the first time since February of this year. The reopening led to a marked increase in the number of people entering Colombia in the days following the reopening, with more than 37,000 people registered crossing at Simón Bolívar on 8 June alone.<sup>4</sup>

The change in Peruvian visa requirements also significantly impacted **Ecuador's** northern border with Colombia, where over 8,000 people were recorded to have entered through the Rumichaca and San Miguel border crossings on 14 June.<sup>5</sup>

In **Peru**, officials announced new migratory measures declaring that all Venezuelan citizens who want to enter the country through any of its borders must have a humanitarian visa after 15 June 2019. The humanitarian visa must be processed in Peruvian consulates in Venezuela, Colombia and Ecuador prior to attempted entry into the country. As a result of this announcement, there was an exponential increase in the number of people entering the Binational Border Assistance Center (CEBAF) in Tumbes. On Monday, 10 June, coordinating agencies working out of CEBAF established a contingency plan in response to the increased migratory flow through the border crossing near Tumbes.



A map depicting the number of Venezuelan migrants throughout the Americas region. Source: R4V, August 2019.

<sup>2</sup> "Venezuelans Vulnerability to Exploitation, Trafficking, and Discrimination". IOM, 16 July 2019.

[https://rosanjose.iom.int/site/sites/default/files/Reportes/07092019\\_dtm\\_venezuelans\\_english\\_0.pdf](https://rosanjose.iom.int/site/sites/default/files/Reportes/07092019_dtm_venezuelans_english_0.pdf)

<sup>3</sup> "Communities at the Centre: Defending Rights, Breaking Barriers, Reaching People with HIV Services". UNAIDS, 16 July 2019.

<sup>4</sup> "Venezuela Migration Crisis: Special Communication". Plan International, 14 June 2019.

<sup>5</sup> "Flash update". R4V, 18 June 2019.

The main objective of the plan was to temporarily increase health services and drinking water distribution to meet the needs of people transiting through CEBAF in the period leading up to the changes in the entry requirements.

There has been an increase in the number people declaring **Chile** as a destination country at the Santa Rosa-Chacalluta Border Control Point with Peru, according to the Displacement Tracking Matrix (DTM) issued by IOM. During the month of June (as of 23 June) a total of 18,270 Venezuelans were registered crossing from Peru into Chile. Chilean authorities denied entry to 9,000 people in June, more than 4,200 of which were between 15 and 23 June. The number of entry refusals is already almost double that from the entire month of May. On 20 June, Chile introduced a new visa requirement, in which all Venezuelans wanting to enter the country as tourists must now apply for a visa in advance from a Chilean consulate before arriving at the border. The percentage of people who could not access Chile, prior to the consular/tourist visa requirement, was equivalent to 30 percent of the total number of Venezuelans seeking entry. Entry refusals also occur with people of other nationalities, such as Colombians or Haitians.

In December 2018, 288,233 Venezuelans were registered in Chile—more than double the number recorded just 18 months prior, during the 2017 census. Venezuelans represent the largest migrant group in Chile, which has the third largest population of Venezuelans according to recent figures. 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. Upon arrival, migrants' short-term needs include income generation, regularization of migratory status, housing, information for the protection of rights and access to health. Longer term needs include adaptability to the local context (social, cultural and disaster) and social inclusion and integration of the immigrant population.

Of the nearly 500,000 migrants in **Argentina**, close to 30% are from Venezuela, making Venezuelans the largest migrant group in the country. Nearly 40,000 Venezuelans are estimated to have entered Argentina in the first three months of 2019, according to a recent report – a significant figure considering that 70,531 Venezuelans entered the country in all of 2018.<sup>6</sup> According to the National Direction of Migration (DNM) of Argentina, the majority who settle in the country are young professionals or have university studies and integrate into the formal labour market. Most are engineers, accountants and health professionals.<sup>7</sup> On 1 July, the DNM held a technical meeting with representatives of UNHCR, IOM and other officials from countries in the Americas to discuss the topic of human mobility. The aim of the meeting was to reach a consensus on regional migration policies regarding the Venezuelan crisis.<sup>8</sup>

**Brazil** has recorded a large increase in applications for refugees and temporary residence in recent months. Most migrants enter Brazil through the country's northern border, many arriving after days of walking through the jungle or asking for rides while walking along roads in the state of Bolivar. Upon arrival in Brazil, migrants are received by a task force (organized as part of joint operation involving several humanitarian agencies) which aims to provide: point of contact, restoration of family links (RFL), delivery of documents and visas, medical care and placement in shelters. After processing migrants, organizations identify places of reception throughout the country, provide guidance on potential destination cities, organize travel to and reception in new destinations, and raise awareness in the private sector for the absorption of the refugee workforce. The agencies working in the task force also pay special attention to women, children and the most vulnerable portion of the migrant population. In Boa Vista, people who voluntarily adhere to the internalization strategy are registered, documented and vaccinated. Participating Venezuelans also receive guidance on destination cities and information material on access to health care.

## **Central America**

The number of migrants crossing into the Darién region in **Panama** (at the border with Colombia) has significantly increased in recent months. As of mid-May 2019, the National Border Service of Panama (SENAFRONT) reported that 10,541 migrants had crossed through the dangerous, heavily forested and mostly undeveloped region. Most are migrants from Haiti or Cuba, with smaller numbers coming from African or South Asian countries. Migrants—many 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 Peñitas.<sup>9</sup>

<sup>6</sup> [“Nueva Ola de Inmigración Venezolana: Entraron 40,000 Solo en el Primer Trimestre del Año”](#). La Nación, 4 July 2019.

<sup>7</sup> [“Venezolanos Lideran Radicaciones de Extranjeros en Argentina”](#). Associated Press, 4 July 2019.

<sup>8</sup> [“Reunión técnica Para Buscar Soluciones a la Situación Migratoria Venezolana”](#). Dirección Nacional de Migraciones, 1 July 2019.

<sup>9</sup> [“Panama Sees Surge in Migrants Crossing Perilous Darien Gap”](#). Associated Press, 15 May 2019.

## Caribbean

A number of recent incidents have brought to light the risk of shipwrecks involving migrants attempting to enter Caribbean countries off the coast of Venezuela. In the past two months, three shipwrecks have led to the death of more than 80 Venezuelans in the region.<sup>10</sup> **Trinidad & Tobago** is a particularly popular destination for Venezuelans. In early 2019, it was reported that an estimated 40,000 Venezuelans had entered the small island nation, which has a population of only 1.3 million.<sup>11</sup> In late May 2019, the government of Trinidad & Tobago initiated a two-week period in which 5 registration centres were opened to process Venezuelans who have entered the country both regularly and irregularly. During the registration period, which ended 14 June, Venezuelans nationals were fingerprinted and photographed, and were asked to provide evidence of their nationality along with their address in Trinidad and Tobago. Migrants were also required to undergo medical examinations. After registering, Venezuelan nationals receive a registration card and photo identification, and will be granted the equivalent of a “Work Permit Exemption” – valid for an initial period of 6 months.<sup>12</sup>

## Red Cross and Red Crescent action

Through the IFRC’s regional appeal:

- 49 shelter services have been provided;
- 7,687 migrants have been reached through health services;
- 62,962 people have been provided access to safe water and minimum conditions for basic sanitation and hygiene;
- 28,859 services have been delivered to re-establish and maintain contact with family members; and
- 40,000 migrants have been reached by information materials and information activities.

## South America

The **Colombia Red Cross Society (CRCS)** has deployed actions to assist migrants since 2015, when the exponential increase in population movement from Venezuela began. To structure a more comprehensive humanitarian action, the CRCS recently launched a 2019-2021 strategy that focuses on humanitarian, rapid response and stabilization actions in branches located in border cities and in larger cities where migrants have begun to settle. With the help of Movement partners and regional branches, the CRCS has extended the migration strategy to all strategic points where pendular, settling and migrants in transition are located.

The CRCS also works in coordination with IFRC in the implementation of the **Emergency Appeal for Population Movement in Colombia**. This project provides primary health care to migrants on the move via 5 Health Care Units in border cities and to migrants settling in big cities through a similar number of Health Provision Institutions. Health services include psychosocial assistance and preventive medicine through capacity building. In addition to primary health care, services provided include access to clean water, RFL, distribution of bedding and hygiene kits, friendly spaces and soon stabilization cash transfer programs.

As of May 2019, **a total of 73,742 services have been provided**: 47,326 in primary health care, 57,786 in provision of drinking water, 4,791 in RFL, among others.

During July 2019, a field assessment was conducted by the Federation’s Child Protection focal point, a PGI specialist from the region together with Colombia and Ecuadorian Red Cross. The main objective is to identify the protection needs of the child population in the intervention zones of the International Federation of the Red Cross within the framework of the appeals of the People’s Movement in Colombia and Ecuador, with emphasis on the border regions, which will contribute to reinforcing the protection strategy of the operation.

The **Ecuadorian Red Cross (ERC)**, through the fund allocated by the IFRC, has been able to contribute to the improvement of services in the provinces of Carchi, Sucumbíos and El Oro during times of upswing in the migratory flow, as well as to strengthen the attention on the country’s central migratory route in Santo Domingo, Imbabura, Tungurahua, Manabí, Azuay and Pichincha, becoming the only institution that is providing care in all areas of need in the country in the areas of Psychosocial Support, Restoring Families Links, distribution of humanitarian assistance and provision of Safe Water.

<sup>10</sup> [“Migrant Deaths Rise Among Venezuelans, Central Americans: UN”](#). Reuters, 18 June 2019.

<sup>11</sup> [“Forced Into Illegality: Venezuelan Refugees and Migrants In Trinidad & Tobago”](#). Refugees International, 27 January 2019.

<sup>12</sup> [“Venezuelan Migration Policy Gets Green Light”](#). Office of the Prime Minister, 11 April 2019.



With funds allocated by the IFRC Appeal, a total of **34,357 services** have been provided to the beneficiary population.

- 1,345 First Aid
- 3,297 Psychological support services.
- 1,467 Humanitarian Assistance. (Kitchen sets and blankets)
- 28,175 Restoring Family Links services.
- 7,110 liters of safe water.
- 56 Health assistance services.
- 17 dental services.

The Ecuadorian Red Cross has a [National human mobility plan](#), where several Movement partners are working together such as the ICRC, IFRC, Swiss Red Cross and Spanish Red Cross.



Photo 2: Migrants attend a Peruvian Red Cross event.  
Source: Peruvian Red Cross, 2019.

As part of the contingency plan developed by coordinating agencies in Peru, members of the **Peruvian Red Cross (PRC)** and personnel from **IFRC's office in Lima**, established a strategy focused on the following lines of action:

- **Strengthening of response capacity:** through an increase in medical support staff, vaccines support, staff for the distribution of water at hydration points and operational and logistical support staff.
- **Inter-institutional coordination:** participation in meetings called for emergency care and coordination with all institutions in order to achieve a better response.
- **Disseminating self-care messages** in waiting lines at migratory points.
- **Training** of volunteers.

The contingency plan establishes that PRC—with the support of IFRC—will **increase its staff** at CEBAF, **provide nursing support** in the vaccination area, **guarantee drinking water** at the hydration points and **provide water for general services** (baths and showers), if necessary. The planned staff support will include the following personnel:

- 1 field coordinator
- 6 doctors
- 17 nurses
- 1 digitizer
- 4 maintenance personnel
- 1 Information Management (IM) Regional Intervention Team (RIT) member

As of 21 June, PRC reports a total of **6189 people reached through basic health services**, **62,962 people reached with access to safe drinking water**, and **157,405 litres of water distributed** thus far as part of the IFRC's regional emergency appeal operation in Peru.

The **Chilean Red Cross (CRC)** has thus far kept its technical teams active at both the national and local levels for scenario monitoring and ongoing advice to branches on issues related to changes in the migratory flow in the country. Permanent coordination is maintained with key actors at different levels such as UNHCR, the National Government, the Ministry of the Interior, the Community of Venezuelans in Chile, the Government and Intendancy of Arica, DHL, among others, in order to update relevant information and coordinate as required. It has also begun updating procedures for each line of action linked to the migration context and developing an institutional communication strategy for work with the community at large with the support of a general RIT deployed. In the next few days, they plan to carry out a first response activity in the northern border in order to attend to a part of the population that is currently waiting to regularize their migratory situation and enter the country. **The CRC has identified first aid, Water, Sanitation and Hygiene (WASH), and restoring family links as the primary areas of need** among the migrant population in Chile.

The **Argentine Red Cross (ARC)**, as part of the regional appeal on migration, has worked in seven different provinces where the majority of migrants are located: the city of Buenos Aires (Saavedra and Villa Crespo), La Plata, Santa Fe, Rosario, Córdoba, Mendoza and San Rafael. In addition to these areas, the ARC has also identified La Quiaca in Jujuy and Puerto Iguazú in Misiones as two border zones in which they will operate. The ARC has **focused its response in five areas: health promotion, shelter, protection, gender and inclusion (PGI), re-establishing family links (RFL) and documentation consultancy.**



*Photo 3: A migrant receives consultation from an Argentine Red Cross volunteer. Source: Argentine Red Cross, 2019.*

The ARC's achievements in the operation to date include the following:

- **15 psychosocial support meetings** have been held with the community, and **5 counselling workshops** have been held on the treatment of chronic illnesses.
- Around **330 consultations** have been given to migrants in need of documentation to access medication.
- **Condoms and gels** have been distributed to **230 migrants**.
- ARC plans to provide cash-based shelter support to 250 families.
- ARC has provided **free calls abroad to around 710 people** and **sent a total of 1460 messages** free of charge, in an effort to reunite migrants with their families.
- Access to WiFi and charging ports for electronic equipment.
- **Direct advice provided to almost 225 people** in order to obtain the necessary documents for the filing process.

In response to the exponential increase in the humanitarian needs of migrants, the **Uruguayan Red Cross (URC)** has adopted a migration strategy framed in the emergency appeal and based on a human rights perspective. The strategy seeks to complement existing responses to the situation, facilitating the processes of accountability and community resilience. The URC's strategy aims first to address the basic needs of migrants by providing services such as **daily dinners, delivery of hygiene kits and provision of shelter and bed material.** In addition, the national society aims to improve migrants' access to information, to create contextualized resource guides, to provide psychosocial support for migrants and volunteers, to re-establish family links and to develop national awareness campaigns against xenophobia. To date, the URC has **provided nearly 1500 meals** to migrants, **distributed 116 hygiene kits**, and **facilitated 100 phone calls** to help re-establish family links.

At the beginning of 2018, the **Brazilian Red Cross (BRC)** began activities to work with Venezuelan migrants in the state of Roraima. **Ninety-one volunteers were trained to work with the RFL and first aid programs**, however only continued to provide RFL services until the end of 2018. By 2018, there were more than 70 actors in Roraima, including government bodies, international organizations, NGOs and churches, coordinated by the Brazilian Army in the "Operação Acolhida."

## **Central America**

**IFRC staff in the Americas Regional Office (ARO) in Panama** are coordinating with the **Red Cross Society of Panama (RCSP)** in the distribution of **hygiene kits, water and sanitation kits (Kit 5), safe water and auto protection messages** as a response to influx of migrants in the Darién region. The distributions are being done in accordance with the International Organization for Migration's (IOM) needs assessment for a response to the situation. IFRC staff have already conducted a field assessment in Darién, and **the WASH Regional Coordinator of IFRC recently travelled to the region to perform a technical evaluation and provide strategic support.**

There have been several coordination meetings between RCSP, ICRC and IFRC to support the situation, as well as meetings with external partners (such as UNICEF and IOM) to ensure a coordinated response. Federation staff in Panama have also coordinated with the IFRC team in Colombia. The volunteers and staff of the Panamanian Red Cross, with the support of the migration cell team and WASH from IFRC, have carried out actions of evaluation, CEA and safe water distribution.

## Caribbean

IFRC staff have identified the need for a **technical working group focused on the issue of migrant shipwrecks** and have requested **the support of two National Societies (Italian Red Cross and Spanish Red Cross) with expertise on the subject. The Country Cluster Support Team in Trinidad & Tobago is coordinating with ICRC** to ensure a common understanding of the situation in the Caribbean, and to coordinate efforts in the region.

## Region

At the regional level, **IFRC personnel at the ARO in Panama** have developed a dashboard to assist with monitoring of the operation. Officials from the Migration Cell and ARO are having continual coordination meeting with stakeholders, including interagency meetings and direct coordination with ICRC. The ARO team and migration cell were active participants in the Quito process meetings in Argentina.

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## 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 (NGOs) in Disaster Relief and the Humanitarian Charter and Minimum Standards in Disaster 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:

1. Save lives, protect livelihoods, and strengthen recovery from disaster and crises.
2. Enable healthy and safe living.
3. Promote social inclusion and a culture of non-violence and peace.

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