“The overwhelming majority, 84 per cent, of the world's refugees are hosted in developing regions and their access to quality mental health care was already very limited even before the pandemic. Now at this devastating juncture, with coronavirus causing great physical and mental affliction, the need to invest in continued health services, including mental health, and ensuring their accessibility to all is as evident and critical as ever.”

Filippo Grandi
UN High Commissioner for Refugees

Read UNHCR’s Press Release urging prioritization of mental health support in coronavirus response

Some countries in the region, SUCH as Argentina, Aruba, Belize, Bolivia, Costa Rica, Mexico, Panama, have launched a series of measures to progressively relax confinement restrictions and scale up economic activities. In contrast, tightened measures have been imposed in others as Guatemala and El Salvador, where travel between departments has been banned. Quarantine measures remain in place in big cities such as Buenos Aires, Santiago de Chile and Havana. Restriction on non-essential travel across the United States’ borders have been extended until 21 June. Within this context, CEPAL’s latest report warns of 4.4% increase in poverty in Latin America due to the pandemic and calls for short- and long-term steps towards a universal basic income as a safety net for vulnerable groups.

In the Americas, there are concerns about the rising numbers of cases of COVID-19 among refugees, asylum seekers and other people of concern, especially among indigenous populations and those in collective sites. In Roraima, Brazil’s northernmost state, 105 Venezuelans are in isolation in the Protection and Care Area, where, unfortunately, a 59-year-old Warao woman died from COVID-19.

In Ecuador, the local authority on child rights in the hard-hit city of Guayaquil issued an emergency ban on evictions of families with children. Dominican Republic announced the non-penalization of declarations of births during COVID-19. In Mexico, the COMAR Refugee Commission doubled the number of remote RSD interviews, thanks to technical support and equipment from UNHCR.

On 15 May, the European Union and the Spanish Government announced the launch of an International Donors Conference in solidarity with Venezuelan refugees and migrants. This conference, organized with the support of IOM and UNHCR, will take place virtually on 26 May, 2020. The objective of the event is to raise the international community’s awareness about this unprecedented crisis; mobilise resources to support the both displaced population and their principal host communities; address complications arising from the coronavirus pandemic; and facilitate greater commitment and coordination among key stakeholders.

An escalating situation of chronic violence and insecurity, coupled with COVID-related restrictions, is exacerbating hardship for tens of thousands of people in the north of Central America. Violence has forced some 720,000 people in the region to flee their homes, as of the end of last year. Almost half of them are displaced within their own country—including some 247,000 people in Honduras and some 71,500 in El Salvador—while others have fled across borders.

Today, despite COVID-related lockdowns in Honduras, El Salvador and Guatemala, internally displaced people, or IDPs, and community leaders report that criminal groups are taking advantage of the confinement to tighten their grip over communities. Restrictions on movement make it harder for criminal groups to find and exploit their resources. A sharp increase in forced displacement may be expected as soon as the lockdown measures are lifted.

As the Coronavirus pandemic spreads through Latin America, UNHCR is warning that many displaced indigenous communities are now dangerously exposed and at risk. There are almost 5,000 indigenous Venezuelans displaced in Brazil, mainly from the Warao ethnic group, but also from the Eñapa, Karitá, Pemon and Ye’k’wana communities. With COVID-19 hitting Amazon region hard and Brazil emerging as an epicenter of the pandemic, UNHCR is worried that many may struggle without adequate health and sanitation conditions.

In Colombia, a number of bi-national indigenous groups, including the Wayuu, Bari, Yukpa, Inga, Sikuani, Amoruca, live near the border with Venezuela. While their ancestral homes straddle both countries, many have not been able to regularize their stay in Colombia and are undocumented. Some also face threats from irregular armed groups who control the areas where they live. To try to limit the spread and impact of the virus, UNHCR is working with national authorities to increase the capacity of national health systems. New structures including improved shelters, care and isolation facilities as well as early warning systems have also been put in place to respond to COVID-19 among indigenous populations, as well as displaced Venezuelans and their hosts.

UNHCR’s response in the Americas

Despite the pandemic-related restrictions, UNHCR continues to work to provide emergency assistance, including secure shelter spaces and cash-based assistance, as well as to advocate the inclusion of refugees in national public health responses, social safety nets and emergency assistance plans. Urgent action is required to help the most vulnerable refugees and IDPs, particularly in countries where they are unable to access state-run social protection schemes. With the coronavirus crisis exacerbating already dire humanitarian needs globally, timely and flexible support from governments, the private sector and individuals remain critical.

Situational Highlights

Challenges

UNHCR’s response in the Americas

Despite the pandemic-related restrictions, UNHCR continues to work to provide emergency assistance, including secure shelter spaces and cash-based assistance, as well as to advocate the inclusion of refugees in national public health responses, social safety nets and emergency assistance plans. Urgent action is required to help the most vulnerable refugees and IDPs, particularly in countries where they are unable to access state-run social protection schemes. With the coronavirus crisis exacerbating already dire humanitarian needs globally, timely and flexible support from governments, the private sector and individuals remain critical.
Argentina: Since a system of remote assistance via telephone, email and WhatsApp was put into place, UNHCR has provided advice and referrals to some 397 cases, representing 1,016 refugees and migrants. UNHCR continues to engage with Banco Ciudad to enable vulnerable refugees, asylum-seekers and migrants to open bank accounts. In the first phase, the program is slated to benefit around 100 persons of concern. UNHCR has also donated 1,200 protective masks and 28,000 latex gloves to the Argentinian National Migration Directorate.

Colombia: Since March, UNHCR has conducted 232 critical missions in 13 departments to monitor borders; support extremely vulnerable cases; inform communities; and support the health response. UNHCR donated three Refugee Housing Units, or RHUs, to hospitals in the northwestern city of Apartadó, to be used as coronavirus triage units. UNHCR has reached a deal with Colombian authorities to distribute emergency adaptive education kits to over 5,000 Venezuelan and Colombian households with children that have no web access.

Costa Rica: 482 refugees and asylum-seekers were included in Costa Rica's National Social Security, bringing to 5,289 the number of refugees and asylum seekers now insured under Costa Rican Social Security, thanks to a program underwritten by UNHCR. The agency also referred an additional 531 eligible candidates for possible inclusion in the scheme. From 4-13 May, 182 refugees and asylum seekers were given prepaid cash cards to help them meet their basic needs. Around 160 people of those beneficiaries were in an acute state of malnutrition.

Ecuador: UNHCR installed 42 refugee housing units, to be used for health services and shelter, and also provided furniture as well as technical support to an isolation center for those with mild coronavirus symptoms in the capital, Quito. In the southern border region of El Oro, the agency continued to help identify temporary isolation spaces. UNHCR distributed 5,072 hygiene kits, as well as hygiene supplies and personal protective equipment to 40 shelters. Five food distribution events were held in the southern cities of Cuenca and Loja, and bio-security gear was distributed to persons of concern, members of civil society as well as local authorities.

Honduras: UNHCR facilitated an online workshop on how the coronavirus pandemic is exacerbating the forced displacement and protection risks. More than 30 volunteers from Jóvenes contra la Violencia, a youth-based organization and UNHCR partner took part in the event. The participants are expected to conduct similar workshops in their communities as part of a bid to consolidate their assistance networks and refer cases to UNHCR. UNHCR has also collaborating with the Color Rosa Collective to reinforce its local leadership and ability to monitor forced displacement through an age, gender and diversity approach.

Mexico: Two more refugee health workers have joined Mexico’s efforts to deal with the coronavirus. Following the Ministry of Education’s certification of their diplomas, one refugee health care professional went to work in the central city of Aguascalientes, while the other was hired in Mexico City. As of May 20, 4,859 people remain in 101 operational shelters. UNHCR has begun to distribute personal protective equipment to shelters and has installed 17 portable toilets in 13 shelters in six localities. Those facilities benefit some 2,428 people. From 4 to 10 May, 408 individuals were remotely interviewed for cash-based assistance screenings and/or protection counselling.

Panama: UNHCR and Panama's national bank, BANESCO, signed a letter of understanding to start issuing prepaid debit cards to deliver cash-aid to refugees and asylum seekers. In the first week of May, UNHCR provided assistance to 400 people – mainly Colombians, Nicaraguans, and Venezuelans, as well as Salvadorans and Cubans. In addition to emotional support, they received cash for food or medicine or help pay rent.

Trinidad and Tobago: UNHCR implemented a program of cash assistance via QR voucher codes, which are sent to the mobile phones of persons of concern and can be redeemed in supermarkets and pharmacies. The program complements the existing programs of cash assistance via gift cards, as well as a cash-for-work scheme that sees persons of concern work as assistants on food distributions. UNHCR partners continue to provide telemedicine as well as legal aid, thanks, in part, to the creation of a virtual resource center online.

Venezuela: UNHCR's support allowed for an IOM/UNFPA/Ombudsperson to train isolation center managers in the western border state of Apure on protection issues and other matters. Relief items were distributed to sponatenous returnees in Apure, La Guaira, Bolivar, Tachira and Zulia states. Non-food items were handed out to more than 3,607 beneficiaries in Táchira alone, while 14,000 kg of charcoal was distributed to more than 14,000 people. Some 50 people with special needs received hygiene kits, food and transportation.

Stories from the field

Typically, Ruth* would spend her days at the small hair salon she opened last year, deftly operating the trimmer and sweeping the hair-covered floor. But lately, the 26-year-old Salvadoran woman has been spending her time tending to sprouts of chives, coriander, and other plants in the backyard of the small tin house she shares with her family in a rural community in El Salvador. Like millions of people around the world, the family has been in quarantine since El Salvador imposed an obligatory nation-wide stay-at-home order on March 21, 2020, in a bid to curb the expansion of COVID-19. But in El Salvador, the quarantine has had repercussions not seen in many other parts of the world. Here, sheltering in place can mean being at the mercy of the violent armed gangs that impose their reign of terror across wide swaths of the country. Before the coronavirus restrictions went into place, many of the gangs’ victims would flee abroad, while others sought safety in other areas of the small Central American nation. An estimated 71,500 Salvadorans were internally displaced between 2006 and 2016 due to gang violence, threats, and extortion. Those phenomena continue to exist. But now, in the midst of a pandemic, fleeing is no longer an option. “We wouldn’t be able to leave because we’re not allowed to leave the house due to the pandemic,” says Ruth, explaining the dilemma faced by victims of violence at the hands of gangs and criminal groups. Ruth knows what she’s talking about. She was harassed by a gang member who wanted to be her “girlfriend.” When Ruth rebuffed his advances, the gang member began to harass her, as well as her husband’s son. The family began to live in fear. You can read the story here.

Coordination and Response to date

The revised **Regional Refugee and Migrant Response Plan** (RRMP) was released on 12 May and presented at the eleventh meeting of the regional platform meeting, on 14 May. Now with 151 partners, revised financial requirements amount to USD 1.41B. Some 31% of activities (USD 439M) have been introduced / re-prioritized to respond to life-saving and emergency needs within the context of the coronavirus pandemic. The revised RRMP is incorporated within the Global Humanitarian Response Plan (GHRP) for C19. The EU and Spain announced a remote pledging event will be held on 26 May.
UNHCR, SICA and Trifinio Plan discussed activities in the Trifinio cross-border zone between El Salvador, Guatemala and Honduras, and information on the second phase of the Trifinio Master Plan.

UNHCR releases new guidelines on loss and deprivation of nationality

UNHCR, the UN Refugee Agency, has today issued new guidelines on the loss and deprivation of nationality. The guidance is intended to assist governments and policy makers in interpreting relevant international law.

For more information, click here.

Don’t miss out

WHO and UNHCR join forces to improve health services for refugees, displaced and stateless people

The World Health Organization (WHO) and UNHCR, the UN Refugee Agency today signed a new agreement to strengthen and advance public health services for the millions of forcibly displaced people around the world.

You can read the Press Release here.

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Funding the response

Financial Information

UNHCR AMERICAS - Funding Update

$ 528.1 million

UNHCR’s financial requirements 2020

30% funded

Notes:
1. The financial requirements for The Americas are for the operations in Belize, Brazil, Canada, Chile, Colombia, Costa Rica, Dominican Republic, Ecuador, El Salvador, Guatemala, Honduras, Mexico, Peru, Paraguay and Tobago, United States of America and Venezuela.
2. The percentage funded (30%) and total funding amount ($158,856,125) are indicative based on the methodology described above. This leaves an indicative funding gap of $369,198,466 representing 70% of the financial requirements.

While seeking funds to carry out COVID-19 preventative measures and response activities, UNHCR stresses the need for support to be in addition to the existing critical funding requirements laid out in UNHCR’s regular Global Appeal for 2020. It is vital that the international community keep supporting the millions of refugees and internally displaced people already living a precarious existence, for whom already limited self-reliance opportunities are likely to shrink further as a result of the economic impact of the crisis.

UNHCR is grateful for the critical and generous support provided by donors to the Coronavirus Emergency Situation globally, and to the Americas, as well as those who have contributed to UNHCR programmes with unearmarked funding.

Thanks to donors in 2020:

And to our private donors:

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Private donors USA

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