

“ We call on **every** country to ensure that everyone on its **territory** regardless of legal status - including **refugees, migrants, internally displaced people, asylum-seekers, and others on the move** - have access to COVID-19 vaccines, tests and treatment for COVID-19. They should adopt concrete measures to **remove** barriers to vaccination for everyone on their territory (...) and **fight misinformation** ”

UNHCR, IOM and WHO
in an open letter to G20 Heads of State

Read the open letter to the G20 Heads of State from UNHCR, IOM and WHO.



Situational Highlights

By the end of October, the **Americas** reported the lowest COVID-19 figures in over a year according to **PAHO/WHO**. Across **North, Central and South America**, overall cases and COVID-19 related deaths decreased. While the downward trend was also reflected in the **Caribbean**, as of early November, there were concerning shortages of hospital capacity reported in the **Dominican Republic** and **Trinidad and Tobago**.

More than one billion COVID-19 vaccine doses have been administered in the region and 46% of people in **Latin America and the Caribbean** have been fully vaccinated against COVID-19. That is twice as many as in August of this year. At least 32 countries have reached vaccination coverage of 40%. However, 19 countries remain below that percentage and some like **Haiti, Guatemala** and **Nicaragua** have yet to reach 20% coverage.

In general, refugees, asylum-seekers and the displaced population are included in national vaccination plans. In **Colombia**, almost 129,000 Venezuelan refugees and migrants were vaccinated by October.

Meanwhile, **Mexico's** government **launched** a plan to strengthen vaccination coverage and reach a more significant number of children aged 0 to 12 years in the national territory, including the refugee and migrant population.

Argentina, Bolivia, Chile, Dominican Republic, Ecuador, El Salvador, Honduras, Panama, and Uruguay have started administering booster doses, following the initial priority groups. In the **United States**, the Food and Drug Administration (FDA) authorized the emergency use of the Pfizer vaccine to include children from 5 to 11 years old. **Colombia** started inoculating children between 3 and 11 years old with the Sinovac vaccine. In other countries in the region such as **Chile, El Salvador** and **Ecuador**, COVID-19 vaccines are already being applied to children between 6 and 11 years old. **Cuba** became the first country in the world to vaccinate children from the age of 2 at the beginning of the month.

In **Haiti**, thousands of doses of COVID-19 vaccines will be returned to COVAX due to the lack of capacity in the country to apply them before the expiration date (November). Only 0.6% of the population is fully vaccinated.

Operational Context

Across the region, restrictive measures at borders, originally put in place to prevent the propagation of COVID-19, are progressively being lifted. This could lead to an increase in the already unprecedented number of mixed population flows moving across the **Americas**. As the number of people on the move goes up, border areas become even more strained. Reports of rising xenophobia and intensifying tensions in refugee hosting communities become ever more frequent, which increases the protection risks for refugees and migrants already in a vulnerable situation.



The number of Venezuelan refugees and migrants rose to 6 million, out of which 80 per cent are in **Latin America and the Caribbean** – with **Colombia** and **Peru** hosting the biggest numbers of Venezuelans in the region. The efforts by host countries to provide regular stay continue to show positive outcomes. **Colombia's** implementation of the Temporary Protection Status continues, with ongoing bio-metric registration and over 1.5 million people pre-registered already.

People in mixed movements, in particular from **Haiti**, are moving across the **Americas**. Most of them had settled in countries like **Brazil** and **Chile** and have decided to leave due to the socioeconomic crises triggered by the COVID-19 pandemic and a lack of documentation. More than 121,000 people crossed the Darien jungle in their way to Central America and the United States, according to Panamanian authorities. The perilous journey puts people's lives at risk. Three people lost their lives in a **shipwreck** in Acandí, **Colombia**, while countless others have perished in the jungle. An increasing number of women and girls crossing the Darien gap are **reporting** sexual assaults.

Consequences of Underfunding



Funding gaps in the COVID-19 response limit UNHCR's ability to provide emergency assistance to the most vulnerable populations on the move. During the pandemic, refugees faced loss of livelihoods, evictions, and rising xenophobia compounded with a deep socio-economic crisis. Cash-based assistance provided a life-saving response that kept them from becoming even more vulnerable. The current gap shows a shortfall that limits the response in this area. Smaller, but significant gaps, would also affect UNHCR's ability to procure safe shelter spaces and the capacity to support the States local and national responses in host communities. In 2021, UNHCR in the Americas adopted a two-fold strategy aimed at providing immediate assistance to cover the basic needs and protection, as well as promoting mid to long-term solutions with a focus on regularization and inclusion. The scope and success depend on the amount of funding the region receives, both in terms of humanitarian grants and financial loans to receiving States.

Response in progress: 1 January - 31 October, 2021

 165,582 people supported with health consultations (primary, secondary, tertiary, as well as mental, sexual and reproductive health).	 310,550 individuals receiving Non-Food Items (NFIs).	 259,354 individuals receiving legal assistance.
 56,239 people of concern to UNHCR benefitting from improved access to safe water.	 213,815 people receiving cash grants or vouchers.	 16,994 children and adolescents of concern to UNHCR provided with educational support (materials, enrollment support, or other).
 422,619 people benefitting from improved hygiene conditions (including through the distribution of hygiene kits, the construction of latrines and/or other interventions).	 312,913 individuals registered by UNHCR and/or implementing partners - age/gender breakdown.	 5,688 survivors of sexual and gender-based violence supported by UNHCR and/or implementing partners (with legal assistance, psychosocial counselling, or by being provided a safe space).
 170,805 people of concern to UNHCR supported with shelter, settlement or temporary collective accommodation solutions.	 792,628 people provided with information by UNHCR and/or implementing partners (in-person or remotely, e.g. Hotlines/call centres, WhatsApp, etc.).	 19,426 children supported by UNHCR and/or implementing partners (via case management).

Ongoing initiatives...

In **Brazil**, an emergency space was inaugurated in Boa Vista to accommodate up to 700 Venezuelan refugees and migrants, including some experiencing homelessness waiting to finalize their documentation procedures.

In **Colombia**, as October marked Mental Health day, UNHCR inaugurated the “Escuchaderos” in Medellin, which are safe spaces which provide psychosocial assistance to refugees, migrants, internally displaced persons and host communities.

In **Honduras**, UNHCR carried out a field mission to El Florido border (Copán) and organized an information booth with water and biosafety masks for 806 Nicaraguans who had to complete their migratory procedures in order to exit the country. According to the government of Honduras, over 51,000 Nicaraguans have crossed the border to access vaccination.

In **Peru**, The Ministry of Health, alongside UNHCR and IFRC, provided health services, such as access to COVID-19 vaccines and the distribution of masks, to some 500 people of concern in Lima.

Stories from the field

Medical care and vaccines saving the lives of Venezuelans in Ecuador

Estela (65) and Roger (68) are a married couple who had to leave Venezuela three years ago. Roger suffered from heart disease and could no longer get his medicines back in his country. They found a new home in Ecuador, but the path has not been easy. Roger was hospitalized for a week as soon as they arrived in Quito. While his health improved, his condition made him a high-risk person after the onset of the pandemic. As a result, the couple tried to leave their home as little as possible over the past year and a half. When they had the opportunity to get vaccinated, they rushed to the vaccination centre. Despite the fact that both of them have integrated well with the community, the process has not been easy. Estela has a degree in Bioanalysis, but in Ecuador, she does domestic work and takes care of their children. Her son has not been able to practice his profession either, so he does odd jobs. Estela and Roger hope that as the vaccination campaign progresses, they will be able to find a better job and provide a better future for their families. Read the full story [here](#).



Coordination and partnership

The **R4V Regional Platform** published a study about the “**Inclusion of Refugees and Migrants in the Response to COVID-19**” in **Argentina, Brazil, Chile, Colombia, Dominican Republic, Ecuador, Mexico, Panama, and Peru**. The document offers an insight on the measures taken by the States around three subjects: regularization for refugees and migrants, protection, and the economy.

MIRPS states participated in the development of the **Regional Framework for Local Governance, developed by UNHCR and UNDP**, highlights the importance of the socioeconomic inclusion of refugees and displaced people in their host communities. **Honduras has confirmed they will hold the MIRPS Presidency for 2022.**

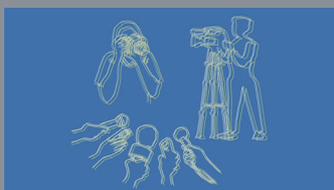


Don't miss...

High Commissioner **highlights** the need for strengthening the asylum system and to adopt alternatives for people with other protection needs in **Mexico**.



UNHCR **launched** a pocket-book for journalists covering forced displacement in **Latin America and the Caribbean**.



Mendoza becomes the 14 city in **Argentina** to join the **Cities of Solidarity** initiative.



More than **6 million Venezuelans** fled their country, more than 80 per cent moving to neighbouring countries in **Latin America and the Caribbean**.



Funding the response in 2021

COVID-19 SUPPLEMENTARY APPEAL 2021

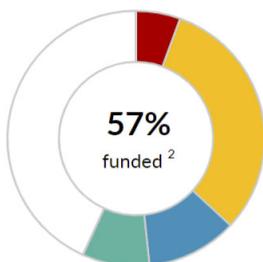
To respond to the most pressing needs resulting from the pandemic, UNHCR is appealing for \$924 million in funding in 2021. As of 23 NOVEMBER, donors had already pledged \$455.9 million.

THE AMERICAS as of 23 November 2021

\$ 728.3 million

UNHCR's financial requirements 2021¹

- Tightly earmarked
- Earmarked
- Softly earmarked (indicative allocation)
- Unearmarked (indicative allocation)
- Funding gap (indicative)



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, Guyana, Honduras, Mexico, Peru, Trinidad and Tobago, United States of America and Venezuela.
2. The percentage funded (56%) and total funding amount (\$405,240,292) are indicative based on the methodology described above. This leaves an indicative funding gap of \$323,109,327 representing 44% of the financial requirements.

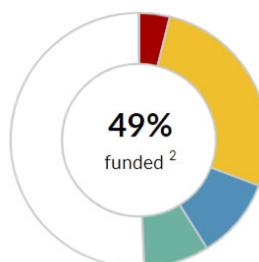
CORONAVIRUS EMERGENCY

Total financial requirements as of 23 November 2021

\$ 924.0 million

UNHCR's financial requirements 2021^{1,3}

- Tightly earmarked
- Earmarked
- Softly earmarked (indicative allocation)
- Unearmarked (indicative allocation)
- Funding gap (indicative)



Notes:
1. The financial requirements of the Coronavirus Emergency include requirements in Afghanistan, Albania, Algeria, Angola, Argentina Regional Office, Armenia, Aruba, Azerbaijan, Bangladesh, Belize, Benin, Bosnia and Herzegovina, Brazil, Burkina Faso, Burundi, Cameroon, Central African Republic, Chad, Chile, Colombia, Costa Rica, Côte d'Ivoire, Cyprus, Democratic Rep of the Congo, Djibouti, Dominican Republic, Ecuador, Egypt, El Salvador, Ethiopia, Gabon, Gambia, Georgia, Ghana, Guatemala, Guinea, Guinea-Bissau, Guyana, Honduras, India, Indonesia, Iraq, Islamic Republic of Iran, Israel, Italy, MCO, Jordan, Kazakhstan, Kenya, Kosovo, Kyrgyzstan, Lebanon, Liberia, Libya, Malawi, Malaysia, Mali, Malta, Mauritania, Mexico, Montenegro, Morocco, Mozambique, Myanmar, Nepal, New Or Additional Mandate Nam, Niger, Nigeria, North Macedonia, Pakistan, Panama, Peru, Rwanda, Saudi Arabia, Senegal, Serbia, Sierra Leone, Somalia, South Africa, South Sudan, Spain MCO, Sudan, Syrian Arab Republic, Tajikistan, Thailand, The Republic of the Congo, Togo, Trinidad and Tobago, Tunisia, Uganda, Ukraine, United Republic of Tanzania, United States of America, Venezuela, Yemen, Zambia and Zimbabwe.
2. The percentage funded (49%) and total funding amount (\$455,419,514) are indicative based on the methodology described above. This leaves an indicative funding gap of \$470,580,486 representing 51% of the financial requirements.
3. For 2021, \$469 million of UNHCR's COVID-19-related needs has been mainstreamed into its Global Appeal and \$455 million are supplementary needs bringing the total COVID-19 related requirements in 2021 to \$924 million. The funding level shown here includes contributions to the mainstreamed activities related to COVID-19.

Do you want more info? Check <https://reporting.unhcr.org/>

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