Costa Rica

Context

- Costa Rica registered its first COVID-19 case on 7 March. A quick Government (GoCR) response through an emergency declaration on 16 March, accompanied by several additional measures, have helped keep the ‘curve’ under control. These include movement restrictions and closing of national borders on 18 March, which restrict entry to nationals and residents, who are required to self-isolate for 14 days. An additional decree on 23 March prohibits legal status holders from re-entering the country if they depart between 25 March and 12 April, and they lose their status if entering irregularly. The border rejections and subsequent responses may place asylum seekers and refugees at risk. The 12 April end date will likely be extended.

- Although there are currently no confirmed cases of COVID-19 among UNHCR’s population of concern, the emergency exacerbates key needs. In terms of protection, while the Migration Authority provided a two-month extension of documentation for persons of concern (PoC) and an online process for new work permits, closure of the Refugee Unit to PoC means no new asylum claims are being formalized (resulting in a nearly 7-month wait for documentation), and no new interviews are being conducted (increasing the backlog of cases pending adjudication to 25,913 as of 1 April 2020). Those awaiting documentation do not have access to healthcare services, beyond life-saving emergencies or COVID-19; regular medical attention is a key need, particularly for those in high-risk categories. Limited numbers of new asylum seekers at the borders raises issues about access to territory and asylum. Furthermore, social distancing protocols and other restrictions have resulted in many asylum seekers losing their jobs, affecting their livelihoods and ability to meet basic needs. As a result, food security and housing / shelter needs are growing rapidly by the day.

UNHCR Response

UNHCR Costa Rica underwent a fast-paced transition process to adapt to the COVID-19 prevention measures with all staff working remotely and maintaining approximately 10% of in-person activities. A thorough review of essential activities was conducted with partners to ensure business continuity and address needs faced by asylum seekers and refugees.

- Remote Registration: Since launching remote registration, 1,844 PoC have been processed. This includes 1,401 newly registered, of whom 749 were identified for the health insurance project. Of those processed, 802 households (HHs) had socio-economic assessments completed. In line with the insurance project, PoC at risk of COVID-19 (age 60 and above, with underlying medical conditions, and healthcare workers) are being prioritized.

- Border Issues: UNHCR has taken over daily border activities in the north since the partner undertaking this work adopted a strict teleworking policy. The number of new asylum claims lodged decreased to nearly zero at both borders, and according to GoCR figures, the number of lodged asylum claims decreased by more than half in comparison to January and February. In the north the decrease is likely due to the presence of Nicaraguan military along the border. The GoCR estimates a possible influx of 20,000 persons over the Easter holiday. There are reports that since the onset of the emergency, approximately 400 asylum seekers have retracted their asylum requests to return to their country of origin. Some PoC cite a lack of access to services and livelihood opportunities as the main reason for departures.

- Migration Authority: UNHCR is providing support to the Refugee Unit to ensure that protection needs of asylum seekers and refugees are met during this crisis period. Areas of collaboration include ensuring access to territory, defining an effective screening procedure to identify potential PoC at border points, accessing the RSD system and agreeing on a process for continued adjudication of pending cases. In response to an urgent GoCR request, on 1 April UNHCR put a hotel in the northern zone at the disposal of the authorities carry out the 14-day quarantine of persons who arrive and wish to apply for asylum. During the current health emergency, UNHCR will also cover the cost of meals and basic needs at the quarantine centre. The authorities will manage the centre. UNHCR is sourcing other such facilities.
Health: As part of the strategic partnership between UNHCR and the Costa Rican Social Security entity (CCSS) to provide 6,000 asylum seekers with health insurance in 2020, more than 4,000 PoC have met the criteria for insurance coverage. Despite processing challenges caused by COVID-19 and subsequent related protocols, UNHCR continues to remotely process 500 PoC per week and adapted inclusion criteria to ensure all PoC in high-risk categories are included in the program. Assistance via telephone is also being provided, and UNHCR and the CCSS have information campaigns to ensure all those insured are guaranteed access to medical services.

CBI: Strict distribution procedures were adopted to reduce the risk of transmission. Under these, 241 HHs received multi-purpose cash assistance and 311 HHs are receiving cash grants. Under COVID-19, USD 289,500 has been distributed to beneficiaries. An additional 475 HHs were selected for emergency COVID-19 grant distributions in April. Over 1,300 HHs will receive cash assistance (multi-purpose and emergency COVID-19 grants) in April and May, with an additional USD 1 million to be distributed over the course of these months. The operation will provide one-time emergency grants for PoC especially affected by COVID-19 under specific criteria (e.g. loss of income, eviction, at risk of eviction, low food consumption score, etc.) to help cope with rapidly changing socioeconomic conditions.

Livelihoods: Partners are transitioning to online platforms to continue providing capacity building courses. The continuity of services in areas with poor Internet, such as the northern region, may not be feasible and alternative solutions are under consideration.

CwC: The UNHCR information Center had a 25% increase in requests since mid-March, the start of the COVID-19 pandemic in Costa Rica. To provide timely and relevant information to PoC, a CwC plan of action is being implemented. Under this, the Help website was updated with a webpage specifically on COVID-19. Likewise, daily SMS updates are being sent to 9,292 PoC contacts. The “RefugioCR” project was also launched on Facebook this week, which provides another platform for PoC to receive information and has 6,600 followers thus far.

CRRF/MINARE: The MIRPS PPT is revising its workplan due to COVID-19. The GoCR has reiterated that measures be based on the principle of non-discrimination and equal access. The RCM and MIRPS technical teams are streamlining processes to better respond to PoC needs during this crisis.

PSP: An assessment was carried out with each private sector partner to gauge how to advance on agreed workplans. While most actions are on hold for the duration of the pandemic, one partner confirmed free medical services by phone for triage purposes, and another will provide legal assistance to entrepreneurs.

Key Gaps
- Considering the projected impact of COVID-19 on the economy, particularly on the healthcare system, it is critical to increase the number of insured PoC and extend the implementation period of the health agreement. The corona virus has increased the health risks of the population of concern and will leave many persons with long term consequences associated with the impact of the virus.
- Due to the health crisis, the totality of the CBI budget for 2020 (USD 1.6 million) will be spent by this May. To address the increased need for cash assistance resulting from COVID-19, UNHCR requires an additional USD 2.4 million to assist 2,700 new households.

Special thanks to our donors: The European Union | Switzerland | The United States

CONTACTS
Ana Maria Baracaldo, Associate Reporting Officer, Costa Rica,
baracala@unhcr.org, Tel: +506 7181 7608

LINKS
UNHCR Website: https://www.acnur.org/costa-rica
Twitter @ACNUR_CostaRica

©UNHCR/Erick Gerstner