

## MID YEAR REPORT

**REFUGEE AND MIGRANT RESPONSE PLAN 2020 – RMRP 2020** 

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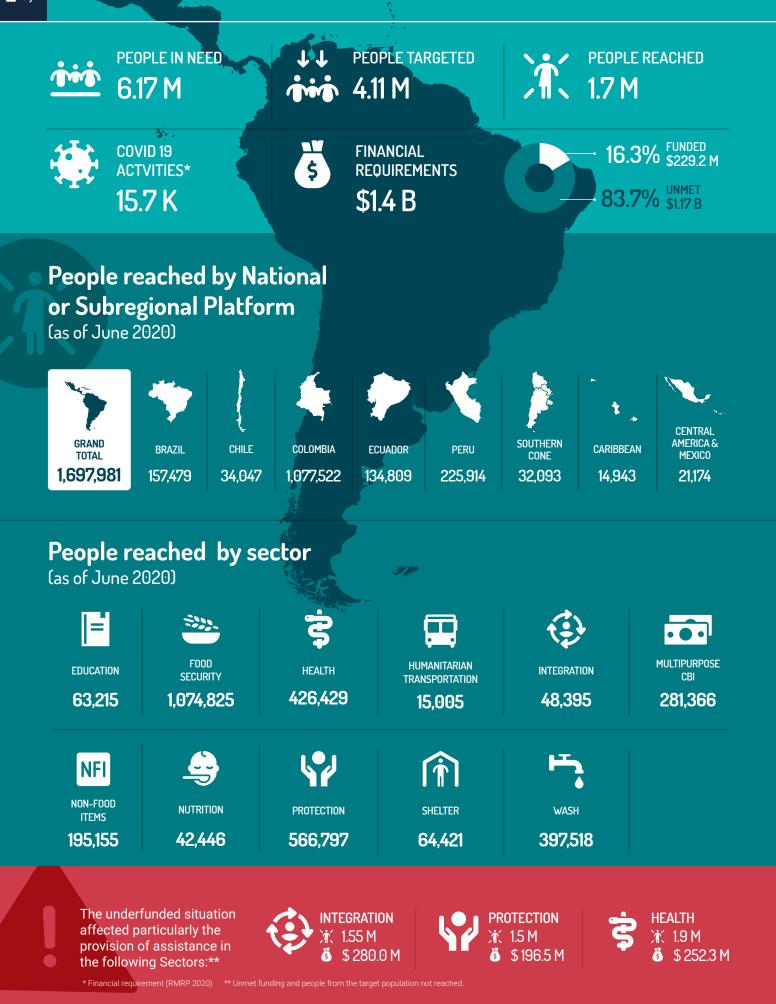
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© Plan Internacional. Alan and Alanyelith read the COVID-19 awareness leaflet included in their hygiene kit © David Beasley y Ana Buitron – WFP entrega de desayunos en el comedor de las Madres Salesianas. Ibarra, Ecuador.

# REGIONAL

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Inter-Agency Coordination Platform for Refugees and Migrants from Venezuela



#### **Regional overview**

At the beginning of 2020, the outflow of refugees and migrants from Venezuela due to political, human rights and socio-economic developments in the Bolivarian Republic of Venezuela (hereinafter Venezuela) continued in the thousands. By the end of June, it is estimated that the number of Venezuelans in countries across Latin America and the Caribbean stood at 4.3 million, compared to the 3.9 million as of January 2019, and the total estimate of refugees and migrants in the world stood at 5.2 million, compared to 4.8 million in the world as of December 2019.

However, the outflow from Venezuela through regular channels came to an almost-standstill as of late March/April 2020 when the onset of the COVID-19 pandemic in Latin America and the Caribbean led to the imposition of lockdown measures and border closures by most governments of the region, including Venezuela. Latin American and Caribbean countries were severely impacted by the COVID-19 pandemic. As a result, national governments and R4V partners alike were forced to respond not only to the existing refugee and migrant crisis but also to a health crisis with unforeseeable socio-economic impacts on host communities, as well as refugees and migrants from Venezuela. It also put health and social welfare systems to the test, as well as countries' abilities to maintain an inclusive society.

Refugees and migrants from Venezuela found themselves in increasingly precarious situations, resulting primarily from their loss of livelihoods following measures put in place to mitigate the spread of COVID-19, and the fact that many refugees and migrants were not included in national social protection and health programmes adopted by host countries. As of June 2020, it was estimated by government authorities that more than 83,000 individuals returned to Venezuela. These return movements were largely triggered by the effects of measures adopted to contain the spread of the COVID-19 pandemic.

In response to the COVID-19 pandemic, a review of the RMRP was conducted by all Platforms, Sectors and R4V partners in order to plan and implement a regional response adapted to the new challenges and adversities faced in the region as a result of the pandemic. The revised RMRP took into consideration the impacts of the pandemic on refugees, migrants and host communities in the region and the changes in the response which were necessary to meet the changing or exacerbated needs. These COVID-19-specific needs were also integrated into the RMRP section of the GHRP 2020 (page 75). Some primary adaptations included a shift towards remote modalities of assistance, including the increased use of hotlines and other forms of technology for the provision of information or for referrals and the increased importance of cash-based interventions (CBI), which could be implemented remotely. The re-prioritization exercise was conducted in strong

coordination with all R4V partners, host governments and donors.

By June 2020, the Regional Refugee and Migrant Response Plan had received 229.22 million USD in funding, representing 16.3% of the total requirements in the revised RMRP 2020 of May 2020. This had enabled R4V partners to reach a total of 1.6 million people with assistance, including refugees, migrants and host community members.

#### **Regional Sectors**

Throughout the first half of the year, the Regional Inter-Sectoral Coordination Group (ISCG) was very active in coordinating the regional sectors' priorities and focus under the RMRP, as well as transversal matters, such as environmental and gender-related considerations in the common response, and developing a more notable PSEA footprint. The frequency of ISCG meetings was changed from monthly to biweekly due to the increased demands of the COVID-19 situation. Weekly COVID-19 Flash Updates were issued from March to June featuring key updates from all Platforms as well as from Regional Sectors in order to inform R4V partners, donors and stakeholders about the status of the response. Impacted by the pandemic, Platforms coordinated the review of the RMRP to ensure the inclusion of refugees and migrants in health and social welfare programs, in order to avoid them becoming even more vulnerable to a range of risks. In parallel, the revised RMRP 2020 ensured the overall balance of humanitarian, protection and integration response priorities in the context of the response to the COVID-19 pandemic.

In the wake of the pandemic, an increasing proportion of the refugees and migrants from Venezuela became unable to cover their basic needs, such as hygiene and healthcare, and were equally unable to comply with quarantine and physical distancing measures enforced by governments. The Regional Health Sector responded by working with Ministries of Health in the region to increase the inclusion of refugees and migrants from Venezuela in national healthcare systems, and by working with R4V partners to distribute PPEs such as face coverings. Through the coordinated efforts of the Regional WASH Sector handwashing facilities were established across the region to prevent the spread of the COVID-19 virus, while guidance was provided to refugees, migrants and affected host communities through risk communication and community engagement (RCCE) focused on handwashing and other prevention messages. In the southern part of the region, the winter season posed additional risks to refugees and migrants that were unable to afford appropriate clothing, increasing their exposure to health risks. In response, R4V partners provided basic NFIs, such as clothing as well as household and hygiene items, to help protect the most vulnerable.

R4V partners of the Regional Integration Sector implemented various social cohesion, anti-xenophobia and integration initiatives to address the exposure of refugees and migrants to increasing levels of discrimination, violence, exploitation and abuse. Jointly with the national Platforms, the Sector advocated for the insertion of Venezuelan health professionals in the COVID-19 health response. This allowed several hundred refugees and migrants from Venezuela to participate and support host communities during the response to the COVID-19 pandemic (especially in Argentina and Peru), whereas in Chile, pursuant to a new governmental degree, foreign health professionals are permitted to practice without the requirement for a formal validation of their professional titles.

With the refugee and migrant population primarily working within the informal sector, the implementation of curfews and other movement restrictions, as well as the closure of businesses, had a disproportionately grave impact on them. Largely without savings or social safety nets, the loss of employment resulted in many being unable to cover their rents, leading to a spike in evictions and subsequent homelessness among the refugees and migrant populations. As a result, R4V partners of the Regional Shelter Sector and the CBI working group enhanced the focus of their response to financial and in-kind support for rents, provision of alternative individual accommodations, such as hotels, and other risk-mitigating strategies to prevent evictions. In addition, collective centres were restructured spatially to allow for physical distancing and guarantining of detected COVID-19 cases.

The Regional Protection Sector activities to support refugees and migrants during the pandemic, focused on the collection of information on public policies adopted by states, monitoring return movements to Venezuela, and advocating for preventive measures against evictions. Resulting from prolonged confinement and isolation in the first months of lockdown, risks and prevalence of gender-based violence (GBV) were exacerbated, impacting especially women and children in violent relationships. R4V partners in the Regional GBV sub-sector worked to ensure that refugee and migrant GBV survivors could access quality care, including remotely, while enhancing risk mitigation and recovery. The Regional Human Trafficking & Smuggling sub-sector supported government institutions and civil society organizations to provide assistance to victims of trafficking - the numbers of which rose during lockdown due to closure of borders - with an emphasis on surveillance, rescue operations and psychosocial support, as well as establishing referral pathways. The Regional Child Protection sub-sector supported national platforms in ensuring that appropriate systems and high quality, coordinated and age appropriate health, protection, psychosocial and justice services were made available and remained sensitive to the needs of refugee and migrant children and adolescents.

Food insecurity and poor nutrition levels among refugees and migrants have been of particular concern, especially among those who lost their livelihoods. The Regional Food Security Sector responded with enhanced food distributions and Cash-Based Initiatives (CBI), including a focus on urban where the majority of the vulnerable refugee and migrant populations reside.

As part of lockdown measures instated across the region, schools were closed, leaving millions of children and adolescents without effective access to education. The Regional Education Sector conducted regional campaigns for preschool children, helping parents to provide remote learning opportunities through recreational and pedagogical activities, and identified good practices in psycho-social support for children, teachers and parents/caregivers. The Sector also supported governments with the implementation of a framework for school reopening as soon as the situation permits.

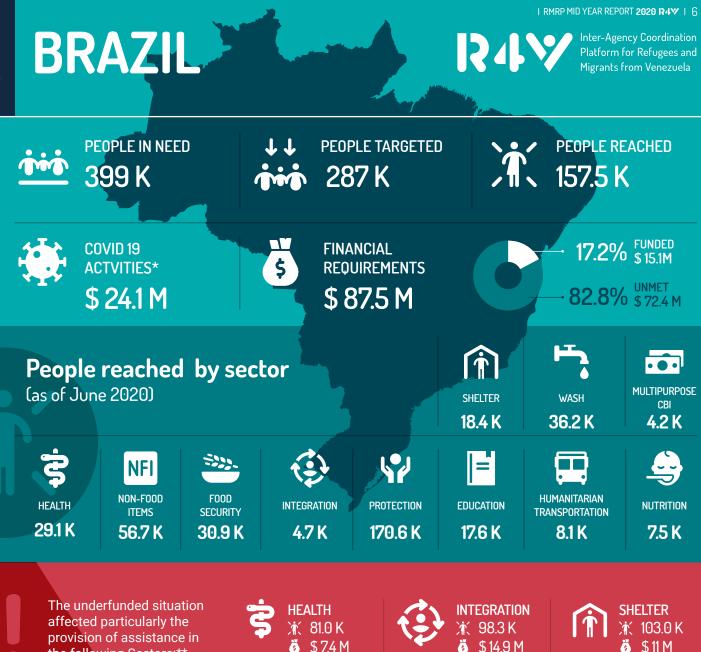
While the Regional Humanitarian Transportation Sector was forced to suspend most activities due to movement restrictions, it continued to provide services for the most vulnerable refugees and migrants from Venezuela with protection risks, especially women and girls and unaccompanied minors for family reunification or interiorization.

#### **Consequences of underfunding in 2020**

Numerous efforts were made by Platforms, partners and stakeholders to support fundraising for the 151 partners of the RMRP 2020. On 26 May 2020, an International Donor Conference was virtually organized by Spain and the European Union with the support of UNHCR and IOM. The Conference reached its main objective by mobilizing resources of the international community and generating the much-needed visibility – particularly in the context of COVID-19 - to one of the largest external displacement crises in the world. The resulting \$2.7 billion in pledges, including \$632 million in grants, will contribute to support the host countries efforts to develop health and social welfare programmes for both Venezuelans and host communities, as well as to scale up the RMRP.

Despite all the efforts from partners and donors, by the end of June, the RMRP received 229.22 million USD in funding, representing 16.3 per cent of its total requirements. The effects of this underfunded situation are numerous and coupled with the overall socioeconomic effects triggered by the COVID-19 pandemic, has had grave consequences for the response.

This report highlights examples of sectorial funding gaps and how they affect assistance to refugees and migrants from Venezuela. From a regional perspective, major gaps in assistance were encountered in sectorial activities carried out in the areas of Integration, Shelter and Protection.



Since the beginning of the year, R4V partners, in strong coordination with national authorities in Brazil assisted over 162,500 Venezuelan refugees, migrants and host community members.

the following Sectors:\*\*

Due to the COVID-19 pandemic, all borders were closed in mid-March, with few irregular movements at the Venezuelan border being reported. For foreigners in the country, the validity of documentation providing legal stay was extended until the end of the state of emergency in Brazil.

Since the onset of the pandemic, the Government response, referred to as "Operaçao Acolhida" (OA), developed a contingency plan in partnership with the R4V Platform and state and municipal authorities in Roraima and Amazonas, including the establishment of a field hospital in Boa Vista (Area of Protection and Care – APC). Within the first weeks of its opening on 19 June, the clinical section of the APC (having a capacity of 254 beds) received 117 patients. Additional isolation facilities were established in Manaus. The internal relocation programme continued to operate, following contingency protocols.

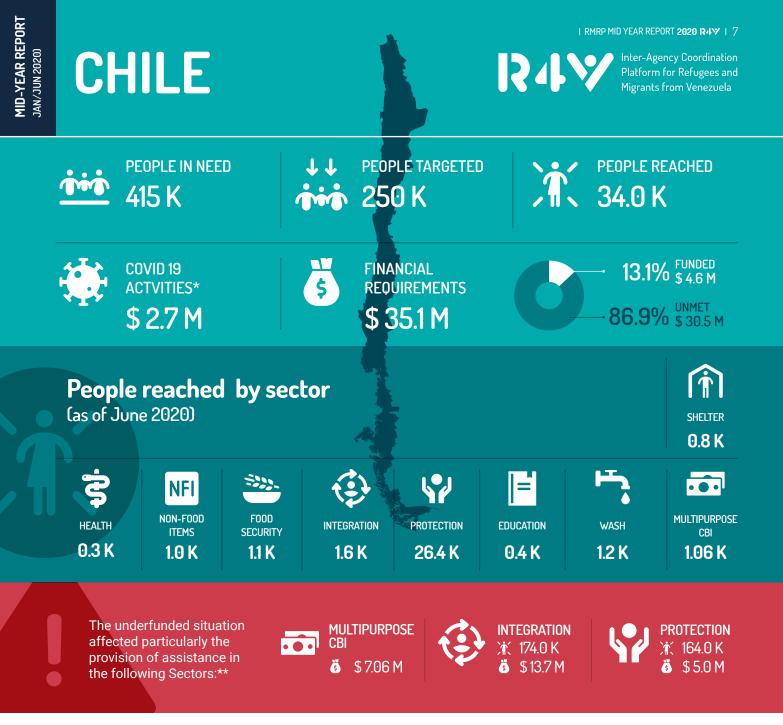
To respond to the impact of the pandemic on refugees and migrants, Brazilian authorities extended the reach of the country's Emergency Basic Income benefit to refugees and migrants from Venezuela<sup>1</sup>. R4V partners are supporting refugees and migrants from Venezuela in claiming this assistance.

The gaps in funding hindered interventions of smallscale partners and of activities implemented beyond the immediate coverage of the Operation Welcome, especially for refugees and migrants who relocated outside of Roraima and Amazona, in the sectors of Shelter, Protection and Integration.

\*\* Unmet funding and people from the target population not reached.

<sup>\*</sup> Financial requirement (RMRP 2020)

<sup>1</sup> A subsidy of BRL 600 (USD 116) per month for up to two adult members of a household, or BRL 1,200 (USD 232) for single female-headed households



In 2020, the work of R4V partners in Chile's national platform reached 22,316 refugees and migrants from Venezuela and host community members.

Implementation of activities at the beginning of the year focused on the provision of psychosocial services and legal assistance, access to livelihoods, as well as key humanitarian needs (food, non-food items and shelter) in Santiago de Chile, Arica, Antofagasta and Iquique. Support Spaces played an important role in providing timely and comprehensive information and protection services to refugees and migrants arriving in Chile and/ or transiting through northern Chile on their way to the capital.

The rapid spread of COVID-19 in Chile substantially affected the operational environment and the very tangible consequences for refugees and migrants from Venezuela have since been felt in the form of closures of all borders to foreigners and non-residents, the halting of Refugee Status Determination (RSD) procedures and the slowing of other regularization processes, as well as through the closure of businesses. The closure of businesses in the service industry, often employing refugees and migrants under precarious conditions, hit these communities particularly.

R4V partners provided assistance in the form of food and NFI distribution including hygiene kits, CBI, and rental subsidies to address the rise in evictions as a result of the loss of livelihoods and refugees' and migrants' inability to cover rents.

Insufficient funds in Chile affected partners' capacity to deliver food boxes and NFIs; to provide psychosocial support during the pandemic for those suffering from loss of employment and stress; and to implement antixenophobia campaigns..

I RMRP MID YEAR REPORT 2020 R4¥ I 8 **COLOMBIA** Inter-Agency Coordination 124 Platform for Refugees and Migrants from Venezuela **PEOPLE IN NEED** PEOPLE TARGETED **PEOPLE REACHED** 3.2 M 2.3 M 11 M 14.2% FUNDED \$ 111.5 M **COVID 19 FINANCIAL** \$ ACTVITIES\* REQUIREMENTS 85.8% UNMET \$ 670.8 M \$296.8 M \$782.3 M

Î People reached by sector **MULTIPURPOSE** (as of June 2020) SHELTER \<sub>v</sub>/ΔSH CBI 328.7 K 160.4 K 31.4 K NFI NON-FOOD FOOD HUMANITARIAN HEALTH INTEGRATION PROTECTION EDUCATION NUTRITION ITEMS SECURITY TRANSPORTATION 270.4 K 87.6 K 24.8 K 165.1 K 26.7 K 920.5 K 34.6 K 6.4 K The underfunded situation INTEGRATION HEALTH **FOOD SECURITY** affected particularly the <u>ж</u> 1.3 <u>М</u> 🕷 98.3 K 🛣 1.4 M provision of assistance in \$ 214.7 M \$506.0 K \$183.5 M ŝ the following Sectors:\*\*

Since the beginning of the year and by June 2020, R4V partners in Colombia assisted over 1.1 million Venezuelan refugees, migrants and host community members in Colombia. The country has received the largest number of refugees and migrants from Venezuela (over 1.8 million as of June 2020). In addition, hundreds of thousands of Colombians have returned from Venezuela due to the exacerbated socio-economic difficulties experienced as a result of the COVID-19 pandemic, and many more Venezuelans have transited through the country or engaged in pendular movements.

The onset of the COVID-19 pandemic in March had a significant impact on refugees and migrants, including over 1 million of whom had an irregular status. In a Rapid Needs Assessment carried out by the Grupo Interagencial sobre Flujos Migratorios Mixtos GIFMM in April 2020, over half of all households interviewed stated having problems complying with quarantine measures, mainly due to a need to earn an income in order to cover basic needs (43%of households) or access food (36%). An increase in protection concerns was reported, including GBV, discrimination and xenophobia and the risks associated with informal border crossings such as human trafficking and smuggling.

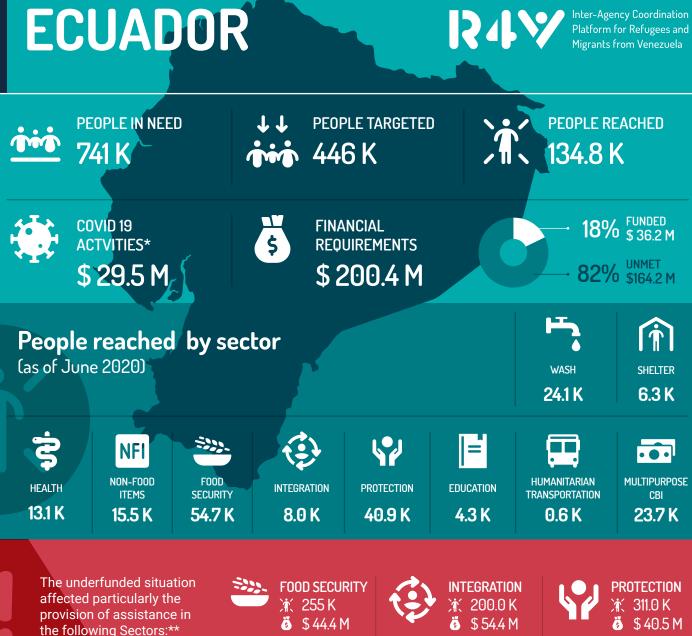
refugees and migrants from Venezuela to make ends meet following the widespread loss of gainful employment as a result the country-wide shutdown. As increasingly more Venezuelans were unable to pay their rents, evictions and homelessness, as well as expose to exploitation and numerous additional protection and health risks followed. R4V partners worked on strategies to respond to evictions faced by refugees and migrants from Venezuela. Other priorities have been the prevention and response to GBV and xenophobia, as well as addressing humanitarian needs such as food and shelter, especially in border areas and along the routes taken by caminantes. During the first half of the year, 64 partners in Colombia re-prioritized and amended their activities in order to support those in need with appropriate assistance during the pandemic.

migrants from Colombia to Venezuela were observed.

These were largely due to the impact of the inability of

The lack of funding in Colombia for the delivery of medical equipment and supplies in areas bordering Venezuela has led to great challenges for medical attention to refugees and migrants. Also there has been a loss of capacity to respond to refugees and migrants with an intention to stay at the Caribbean coast, and for activities in entrepreneurship, employability, and GBV case management.

Since early April, return movements of refugees and



In the first half of 2020, partners of the Grupo de Trabajo para Refugiados y Migrantes (GTRM) in Ecuador reached 117,521 refugees and migrants with assistance. The year began with less entries of refugees and migrants from Venezuela than exits, consistent with the trends of the end of 2019.

The first case of COVID-19 was detected in February. Restrictions and the closure of borders were implemented in mid-March, which is when registration of refugees and migrants from Venezuela was suspended due to a closure of immigration offices. The majority of COVID-19 cases were identified in the province of Guayas, particularly in the provincial capital Guayaquil, where the number of Venezuelan refugees and migrants was the second highest in the country. Like in many countries in the region, the onset of the pandemic overwhelmed the health system, triggering return movements by some Venezuelans in Guayas towards their home country. In this context, Ecuador also became a temporary host to those transiting from Peru and Chile.

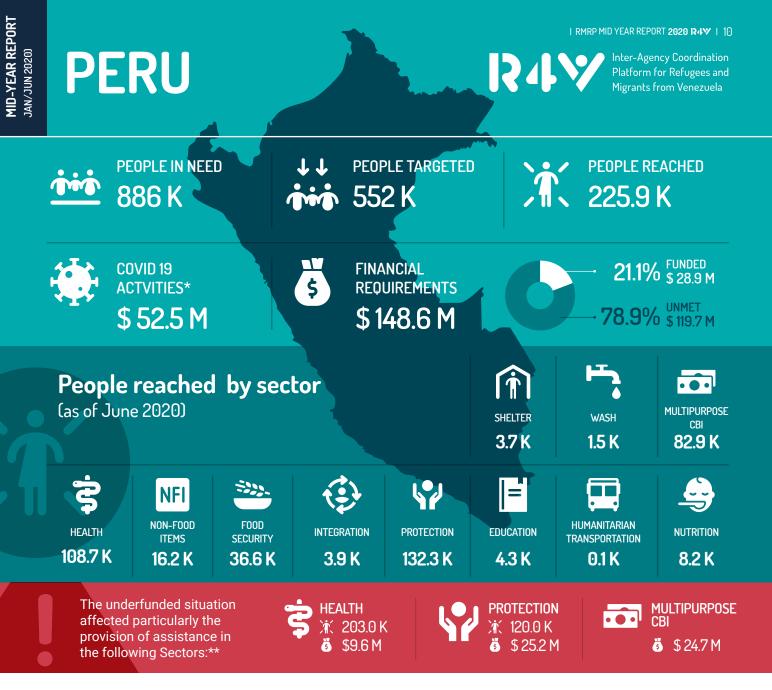
In order to obtain a better understanding of the pandemic-

specific needs of refugees and migrants, the GTRM conducted two rapid needs assessments, as well as assessing the response capacity of R4V partners to assist amidst the changed situation, including with adapted and remote delivery modalities. The focus of the GTRM's response in Ecuador has been to enhance multisector assistance, including through flexible support mechanisms, for example through the increased use of vouchers or CBI. Some of these vouchers were originally intended for food assistance and were adapted for the purchase of hygiene items.

I RMRP MID YEAR REPORT 2020 R4¥ I 9

Since June, restrictive measures have begun to relax, permitting registration and regularization processes for Venezuelans to recommence, and allowing for increases in food assistance and access to livelihoods and mobility for refugees and migrants.

Insufficient funds in Ecuador hindered partners' response particularly in addressing refugees' and migrants' most basic needs through cash and voucher support, during the pandemic.



Since the beginning of the year, R4V partners along with national authorities have assisted some 148,200 Venezuelan refugees, migrants and host community members.

In March 2020, the Peruvian government declared a state of emergency due to the COVID-19 pandemic. Quarantine and mobility restrictions have impacted all economic sectors as most activities were suspended.

Since the onset of the pandemic, R4V partners of the Grupo de Trabajo para Refugiados y Migrantes (GTRM) scaled-up CBI efforts supporting refugees and migrants and host community members in Peru. In addition, R4V partners assisted in covering winter- and health-related needs of refugees and migrants, while cash-for-food programmes also supported vulnerable host community members. Based on advocacy with financial institutions to expand the acceptance of documentation (i.e. the asylumseeker document) in order to facilitate the receipt of CBI by refugees and migrants, R4V partners signed agreements with financial institutions to facilitate the acceptance of additional documentation for refugees and migrants.

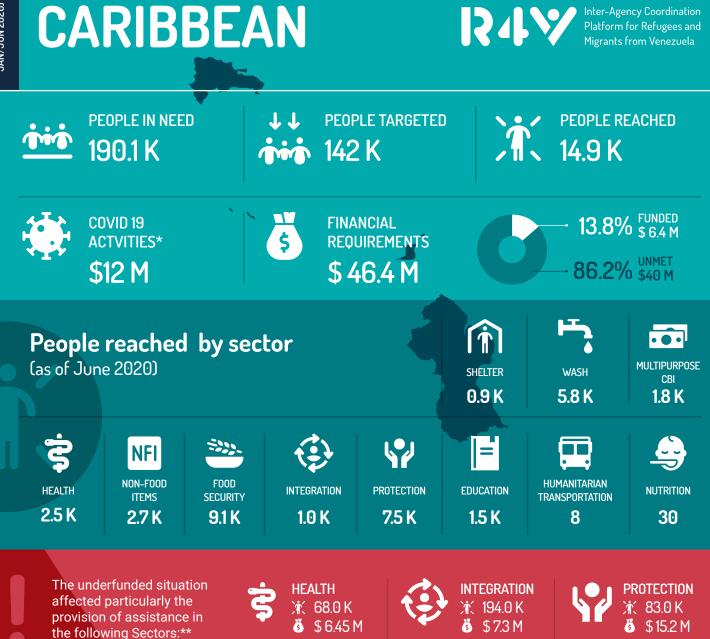
Supporting self-reliance was a key component in responding to the needs of refugees, migrants and

affected host communities in Peru. Partners focused on supporting self-employment and entrepreneurship to sustain the gradual reactivation of the local economy and to generate income. Such activities were also oriented towards supporting women's empowerment and financial independence.

Over the first six months of the year, the GTRM's protection strategy focused on building the capacity of authorities to respond to the heightened risks of children, survivors of GBV and victims of human trafficking in the context of the pandemic, and its protracted effects. In close cooperation with government authorities, the GTRM prioritized the establishment of clear protocols to identify persons at risk, irrespective of nationality, and to support virtual and remote case-management. The reactivation of the asylum system, the regularization of the status of Venezuelan nationals and the possibility of family reunification also were at the core of the protection priorities.

Due to insufficient funds, the provision of direct medical attention to refugees and migrants in Peru was most severely hampered, as was the provision of direct support for access to employment and entrepreneurship promotion.

<sup>\*</sup> Financial requirement (RMRP 2020) \*\* Unmet funding and people from the target population not reached.



Since the beginning of 2020, the Caribbean Sub-regional Platform assisted 15,048 refugees and migrants from Venezuela and host community members.

With the onset of the COVID-19 pandemic, large-scale losses of livelihoods and heightened a vulnerability of Venezuelans was observed. The main concerns throughout the sub-region were reported as unemployment, increments in the cost of living, food insecurity, threats of eviction, and access to healthcare.

As of May, some countries commenced the easing of some of the movement restrictions imposed to mitigate the spread of the pandemic<sup>2</sup>. Amid these tentative phases of reopening, many Venezuelan refugees and migrants returned to the informal labor sector but remained in a state of heightened vulnerability while the search for employment proved challenging in economies adversely affected by the pandemic. Sex workers in Guyana became increasingly vulnerable to trafficking and gender-based violence.

Overall, the R4V response in the sub-region focused on addressing the most urgent needs, mainly food and non-food items (NFIs), shelter, CBI, health assistance and protection support. Psychosocial support and legal assistance were also provided on a remote basis. The R4V response in Trinidad and Tobago also targeted the region of Icacos with WASH and food assistance, benefitting some 80 indigenous Warao people from Venezuela living in makeshift shelters along the beach without adequate sanitary conditions.

Insufficient funding in the Caribbean had a greater impact, specifically on the capacity to provide cash and voucher assistance for food, shelter and tertiary health. For example, in Trinidad and Tobago, cash grants for humanitarian assistance increased, however more than 86 per cent of applicants could not be provided with assistance.

<sup>\*</sup> Financial requirement (RMRP 2020)

<sup>\*\*</sup> Unmet funding and people from the target population not reached.

<sup>2</sup> In the Dominican Republic there was a continuous rise in cases



Since the beginning of the year, R4V partners, in close coordination with national institutions in the countries of the Central America and Mexico Sub-regional Platform, assisted 12,500 Venezuelan refugees, migrants and host community members.

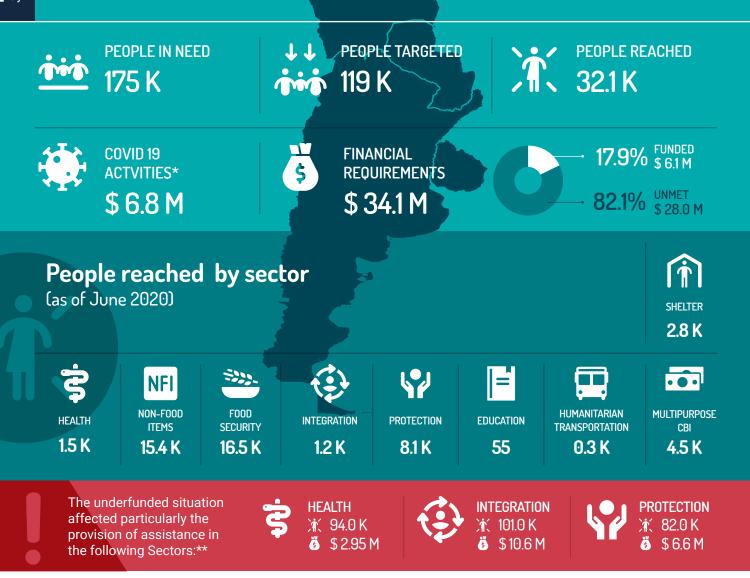
As a result of preventative measures established to curb the spread of the COVID-19, refugees and migrants from Venezuela faced increased protection risks and economic vulnerabilities. The most pressing needs reported included access to employment and income generation, food and hygiene items, medical treatment, psychosocial support and secure housing.

Due to a general decrease in revenues and partial shutdown of the economy, businesses were forced to close, reduce hours and salaries, and lay off workers, affecting Venezuelans employed in the formal and informal economies. Venezuelans have reported threats of eviction as a result of their inability to pay their rents and due to xenophobic perceptions that they may be responsible for the spread of COVID-19.

In Central America and Mexico, R4V partners supported refugees and migrants from Venezuela with food, psychosocial support, counseling and healthcare. R4V partners provided CBI to cover their basic needs including food and hygiene items. In Panama, an antixenophobia campaign, #SomosLoMismo was launched over the past months. In Costa Rica, R4V partners also supported Venezuelans with information and/or virtual legal assistance, including on access to documentation, asylum and other rights, as well as legal residence.

In Central America and Mexico, the lack of funding hampered partners' ability to enable refugees and migrants to obtain vouchers to purchase food hygiene kits and diapers, to obtain cash assistance for transport and administrative fees associated with accessing regularization pathways, and assistance to access education. SOUTHERN CONE R4N

Inter-Agency Coordination Platform for Refugees and Migrants from Venezuela



The four countries of the Southern Cone Sub-regional Platform (Bolivia, Argentina, Paraguay and Uruguay) generally maintained open door policies towards refugees and migrants from Venezuela. However, the onset of the COVID-19 pandemic in March led to the closure of borders, and new irregular entries between Bolivia and Argentina in particular. Movement restrictions were partially lifted in May but tightened again in June due to new waves of the pandemic spreading within the sub-region.

Governments in the sub-region implemented notable measures to protect the rights of refugees and migrants such as the extension of validity of documentation, and the adoption of innovative modalities (i.e. remote mailing of applications) to accept asylum claims. However, refugees and migrants with irregular status have not been systematically included in some government-led social protection programmes, such as the provision of food baskets and CBI. Therefore, R4V partners have responded to this gap, focusing on the provision of remote assistance wherever possible. Since the beginning of the year, R4V partners in the Southern Cone have assisted 32,093 Venezuelan refugees, migrants and host community members. Humanitarian assistance has focused on the provision of shelter, NFIs, food and CBI. As the winter season approached in May and June, essential winter clothing and hot meals were provided to refugees and migrants from Venezuela given their increased vulnerability.

A rise in xenophobic incidents was noted in the sub-region whereby Venezuelans were scapegoated for socioeconomic problems faced by host communities, as well as for the propagation of the virus linked to perceptions relating to the living conditions of refugees and migrants. The Platform has strengthened Communicating with Communities initiatives to counter this trend with antixenophobia messages.

In the Southern Cone, due to insufficient funding, many funds originally foreseen for Integration activities needed to be reprioritized towards humanitarian assistance, preventing the implementation of entrepreneurship trainings, financial inclusion, job matching, and the provision of seed capital for establishing small businesses, as well as protection activities such as legal and psycho-social assistance in border areas.

### LIFE STORIES

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ECUADOR

Although governments have promoted containment and support measures for the most vulnerable, the lack of access to information, the fear of possible xenophobic repercussions and the insecurity of being a foreigner without legal support, is a huge stress for refugees and migrants from Venezuela. *"By law, landlords are not supposed to collect the rent, however, we don't know what will happen,"* says Alba, a Venezuelan who completed a 1200-mile journey to Ecuador from her hometown just before the closure of borders. Shoulder to shoulder with other R4V partners, Plan International has supported the Venezuelan population in their host communities in Colombia, Ecuador and Peru. As part of its response to the pandemic, the organization is coordinating actions considering immediate and long-term needs of the most vulnerable through economic support, delivery of goods and supplies, as well as comprehensive education and protection actions.



NAYELIS TOTESAUT 23, left Venezuela about nine months ago. She is pregnant and living in Brazil.

© UNFPA Brasil / UNFPA Venezuela

The situation in Venezuela was critical, nobody could buy food. We had to leave the country to avoid starvation. Here, at least, we have the opportunity to work.

The pandemic has a foothold in Brazil, with increasing cases of COVID-19. Health services have been strained by the response, potentially affecting services for pregnant women.

And refugees and migrants from Venezuela face added vulnerabilities, as many are living in poverty, and some have limited access to water and sanitation facilities. Ms. Totesaut, for instance, currently lives in an improvised plastic tent with her two children.

Within the framework of the R4V Platform, UNFPA is delivering thousands of dignity kits to refugees and migrants in the Brazilian state of Roraima, where both Horihanny and Ms. Totesaut live. UNFPA is also raising awareness about the disease and how to prevent it.

