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Revised Emergency appeal Colombia: Population Movement

 International Federation
of Red Cross and Red Crescent Societies

Revised Appeal n° MDRCO014

To be assisted: **645,000 people**
DREF allocated: **297,157 Swiss francs (CHF)**

Initial funding requirements: **2,2 million CHF**
Revised funding requirements n°1: **2,5 million CHF**

Revised funding requirements n°2: **4,9 million CHF**

Revised funding requirements n°3: **6,6 million CHF**

Actual Funding requirements: **10 million CHF**
Funding gap: **2.2 million CHF**

Appeal launched: **15 March 2018**

Revision n°1 issued: **9 April 2018**

Revision n°2 issued: **15 August 2018**

Revision n°3 issued: **23 August 2019**

Total expected timeframe: **39 months**

Appeal ends: **30 June 2021 (Extended 12 months)**

This revised Emergency Appeal seeks a total of some 10 million Swiss francs, increased from 6,6 million Swiss francs, to enable the IFRC to support the **Colombian Red Cross Society** to deliver assistance and support through **6475,000 services** to vulnerable migrants and host communities **for 39 months**, with a focus on the following areas of focus and strategies for implementation: **Shelter; Livelihood and basic needs; Health; Water, sanitation and hygiene; Protection, Gender and Inclusion; Migration; Disaster Risk Reduction; Strengthening the National Society, Ensuring effective international disaster management, Influencing others as leading strategic partner and Ensuring a strong IFRC.**

This revised Appeal results in a funding gap of 2.2 million Swiss francs based on an increased number of people to be assisted, an extended timeframe, an increase in activities with an enlarged geographic scope and a transition towards supporting the Colombian Red Cross with medium to long-term migration programming. The planned response reflects the current situation and information available at this time of the evolving operation and the COVID-19 context and will be adjusted based on further developments.

The disaster and the Red Cross Red Crescent response to date

July 2017: The migratory flow increases significantly across the Colombia – Venezuela border. The DREF operation Colombia: Population Movement (MDRCO013) is launched for 236,295 Swiss francs.

October 2017: The volume of the migratory flow continues, prompting a six-month extension to the operation. Coverage and resources to the DREF are increased to 297,157 Swiss francs with 231,836 people reached in 2017. The [final report](#) is published in 2018.

February 2018: The Colombian government expresses its willingness to receive international support, with the State's National Unit for Disaster Risk Management (UNGRD) requesting complementary support from the CRCS.



CRCS psychologist attending to migrants through the friendly space in Vichada, June 2020. Source: CRCS

- **March 2018:** The IFRC launches an [Emergency Appeal](#) for 2.2 million Swiss francs to assist 120,000 people for 12 months.
- **April 2018:** The IFRC issues the [first revision of the Emergency Appeal](#) seeking 2.5 million Swiss francs to assist 120,000 people, including an increased budget to expand coverage of the protection and migration activities.
- **August 2018:** The number of people migrating increases, leading to increased humanitarian needs, particularly in health. The IFRC issues a [second revision of the Emergency Appeal](#) for 4,890,382 Swiss francs to expand the scope of health activities.
- **May 2019:** [12-month update](#) issued.
- **August 2019:** [Third revision of the Emergency Appeal](#) issued for 6,591,863 Swiss francs with an extension until June 2020.
- **March 2020:** Colombia confirms its first case of COVID-19. COVID-19 national emergency declared, and Colombia closes its terrestrial, aerial and maritime borders.
- **May 2020:** [24-month update](#) issued, extending this Emergency Appeal timeframe to 30 June 2021.

The operational strategy

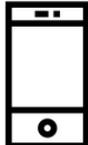
Summary of the Red Cross response to date

The Colombian Red Cross Society (CRCS) has conducted actions to assist migrants since 2015, with the start of the population movement from Venezuela. To structure its more comprehensive humanitarian action, the CRCS created a 2018-2021 National Strategy for Attention to Migrants that focuses on humanitarian, rapid response and stabilization actions. This strategy is aligned with the [Toluca Declaration](#) and the [IFRC's Global Strategy for Migration 2018 to 2022](#). With the support of Movement partners and through CRCS branches, the National Society has extended its migration strategy to all strategic points where pendular, settling and transiting migrants are located. At all stages of their journeys, and irrespective of their legal status, the CRCS team is ready to respond to migrants' needs, support the enhancement of their resilience, and assist them in advocating for their rights.

The CRCS intervention strategy aims to assist in a comprehensive manner through the provision of support and accompaniment for the stabilization of persons, communities and territories affected by the current migratory context. It seeks to provide humanitarian assistance and initial complementary support in a sustainable manner, in terms of opportunity, and relevance. It concurrently aims to contribute to the economic, social and cultural integration of the migrant population and to sustainable development.

During the first two years of this Emergency Appeal operation, the CRCS and IFRC worked together to establish strategically located attention points for people on the move, seeking to combine health services to the target populations with actions in the areas of shelter; livelihoods and basic needs; water, sanitation and hygiene promotion; and protection, gender and inclusion (PGI). By the end of July 2020, 470,482 services in all areas of focus were provided through the financing of this appeal.

Operational achievements (as of 31 July 2020)

470,482 total services provided	24,517 people reached with basic needs and improved livelihoods	6,000 bedding kits distributed	279,570 health care services provided	5,580 individual psychosocial support services
				
6 water distribution points	40,081 individual hygiene kits distributed	1,263 dignity kits to children, adolescents and pregnant women	5 Health Care Units	7 Health Providing Institutes
				
6 Friendly spaces installed	5 Sites with Restoring Family Links services	1,245,234 litres of safe water distributed	2 orientation helpdesks	1 protection project for pendular migrant children in school
				

This Colombia operation complements other IFRC actions such as [Americas: Population Movement Emergency Appeal \(MDR42004\)](#) and the Monarch Butterfly programme that addresses migration on the Colombia-Venezuela border and on a regional level. In addition, the Red Cross launched the [Venezuela: Health emergency \(MDRVE004\)](#) Appeal in April 2019. Since the launch of the [Emergency Appeal for COVID-19 pandemic in the Americas \(MDR42006\)](#), the Colombia operation also complements COVID-19-specific actions from the regional appeal operation. The IFRC operations in Venezuela, Colombia and at the regional level are closely coordinated to ensure the complementarity of actions. The [Venezuela appeal is due to close in July 2021](#), and the Regional Migration appeal is being revised to be extended until June 2021, aligned with the Colombia appeal timeframe, all with a transition to programme planning, given the complexities associated with population movement across the continent. In view of the transition process, this emergency appeal and the Monarch Butterfly programme in Colombia are increasingly co-funding CRCS activities in given points of attention to migrants, with a focus on capacity-strengthening.

Needs assessment and targeting

The Regional Coordination Platform for Refugees and Migrants from Venezuela estimates that as of [August 2020](#), over 5.2 million Venezuelans have emigrated. As of 31 May 2020, there are just under 1.8 million estimated Venezuelan migrants in Colombia, based on the [latest estimate from the Colombia migration](#)

authority, [Migracion Colombia](#), the majority of which are irregular migrants. The recent [needs evaluation \(June 2020\)](#), from the Interagency Group of Mixed Migratory Flows in Colombia (GIFMM for its acronym in Spanish), in which the CRCS participated actively, indicated that the prioritized needs for the migrants and refugees were food (92%), shelter (66%) and employment or other livelihoods (53%). These are the same sectors compared to the previous survey in April 2020. Additional transcontinental migrant flows have been identified as transiting through Antioquia and the Gulf of Urabá, to reach Panama and North America, in some cases fleeing violence, persecution or breaches of human rights, as well as for personal or economic reasons.

In light of the COVID-19 outbreak and consequent imposition of movement restrictions by national authorities, migratory dynamics have changed dramatically in the past months, with thousands of migrants seeking to return to Venezuela due to the loss of their livelihoods and shelters. As of mid-August 2020, over 100,000 migrants are estimated as having returned to Venezuela since March 2020. As migratory authorities seek to carefully manage returns to Venezuela in light of the COVID-19 outbreak, thousands of migrants are unable to continue their onwards journeys, pending confirmations that they may travel and cross the border, [with several thousand also waiting at the border with Venezuela](#) to be able to cross from Colombia.

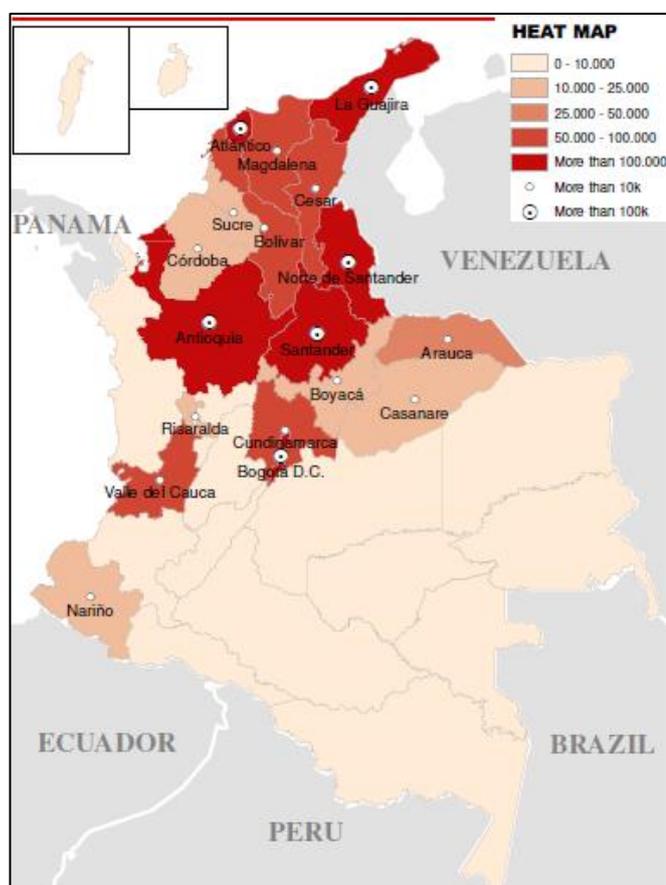


Figure 1: Map showing estimated location and numbers of Venezuelan migrants (heat map). Based on Migracion Colombia data as of 31 May 2020.

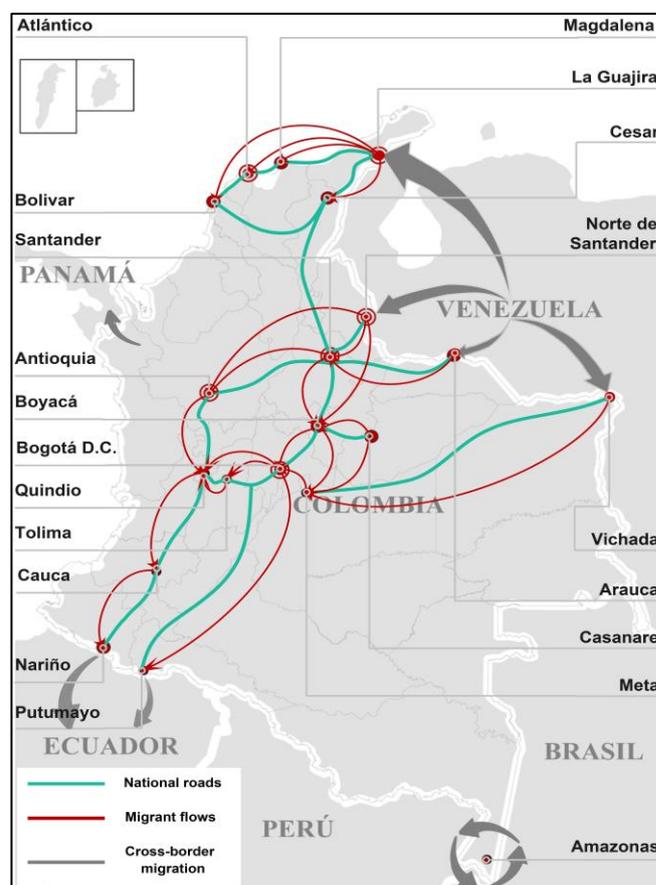


Figure 2. Map of migrant flows Information up to August 2020.

According to the CRCS health reports, migrants are especially vulnerable to respiratory infections, dermatitis, high risk pregnancies, contraceptive intake control, stress and parasitosis. Although not widespread, events of malnutrition in children and pregnant women are of special concern for medical teams, as they could have long term effects on development and overall wellbeing. The persistent instability, the exclusion from state relief programs responding to COVID-19, the effects of lockdowns and quarantines on the informal economy

are all pushing migrants into negative coping strategies such as survival sex. This in turn feeds xenophobia and discriminatory sentiments.

COVID-19 has reshaped the humanitarian landscape, with migrants settling in big and border cities, awaiting the possibility to enter Venezuela and potential seek irregular border crossing points. In this situation, new humanitarian needs have evolved: malnutrition, scarce sheltering, inexistent social and economic integration and increasing protections risks. In the medium term, it is also expected that there will be reverse flows of migrants from Venezuela to Colombia, and it is estimated that 80 per cent of migrants currently returning to Venezuela, will be [migrating again to Colombia in the company of at least one additional person](#).

In order to respond to the changing needs of the migrant population in Colombia, the SNCRC constantly monitors migratory flows and other situations, updating information and providing solutions according with the specific needs of each department affected by the migratory phenomenon. Needs also have been identified through the CRCS's Community Engagement and Accountability (CEA) tools, which include the completion of over 5,440 service evaluations and feedback through suggestion boxes, online surveys and face-to-face mechanisms from January to July 2020. The average satisfaction rate is above 90 per cent and the average monthly percentage of congratulatory comments is 65 per cent. In the remaining 35% of feedback comments received, the people reached requested dental and specialized medical services (a high number of requests are for the care of pregnant and lactating mothers, paediatrics, nutrition and ophthalmology) and due to the situation resulting from the COVID-19, there have been increased requests for food, cash transfer and hygiene support.

This revised Emergency Appeal will target continued and integrated actions in Atlántico, Arauca, Cundinamarca, Putumayo, Nariño, Santander, Norte de Santander, La Guajira and Vichada, as well as complementary and specific actions in other departments where needs emerge, aligned with the IFRC and CRCS ongoing assessments which show that these municipalities have the highest rate of migrants per Colombian citizen, compounded with an unmet demand for primary health care and socioeconomic integration of migrants and host communities. Other municipalities, such as Medellín= and Santa Marta, have a high number of migrants, but have institutional and market infrastructure to supply the humanitarian demand. Among selected municipalities, special attention will be given to pregnant women and to children, which are population groups that are experiencing symptoms of malnutrition and signs of domestic violence.

Population prioritization will address humanitarian and integration needs, focusing on responding to vulnerabilities according to the types of mobility (vocation to transit/remain of the migrant or willingness to move and their contact with support networks), the local response capacity of the settlement cities, as well as the population and geographic conditions, which determine the differential and territorial approaches to be employed.

Coordination and partnerships

In Colombia, together with IFRC, the American, German and Spanish Red Cross National Societies, as well as the International Committee of the Red Cross (ICRC), are supporting the CRCS with projects to provide migrants with health, livelihoods and other complementary services. The CRCS convenes monthly coordination meetings with all Movement components, to share critical information about results, challenges, plans, mitigation strategies and other topics that affect the operation, and to coordinate between all Movement partners to enhance the efficiency and the results of the humanitarian response to the population movement. A detailed list of regional presence and operational focus of Movement partners is available in the [24-month Operations Update](#).

The Colombian Red Cross Society is a prominent actor in the humanitarian response to the migration phenomenon, due to its extensive operational presence throughout the national territory, actively participating in national and department coordination fora, such as the GIFMM. It has participated in local coordination committees to meet the needs of migrant, returnee and refugee populations and host communities in eight departments of Colombia. Similarly, the CRCS is co-leader of the multisectoral sub-group, which coordinates

assistance and services with interventions in temporary housing and settlements, non-food items (NFI) and humanitarian transport. It also participated in the second and third versions of the rapid needs assessment led by the GIFMM. The IFRC is an observer to the GIFMM, participating in the national coordination fora alongside the CRCS and ensures that its actions in support of the CRCS remain coordinated with other humanitarian actors. Both the CRCS and IFRC are observers to the Humanitarian Country Team, and are actively involved in the cluster system, in particular in the Health Cluster, the Logistics Working Group, the Cash Transfer Working group, the latter of which the CRCS co-leads.

COVID-19 response

The first COVID-19 case was reported in Colombia on 6 March 2020. As of 14 September 2020, [Colombia has 708,964 confirmed cases with 22,734 deaths](#). Unemployment has increased over 20 per cent in Colombia, having the [highest increase in unemployment among OECD countries](#). Migratory dynamics have since changed dramatically, with [thousands of migrants seeking to return to Venezuela](#) due to the loss of their livelihoods and shelters.

On 31st January 2020, IFRC launched a global [Emergency Appeal](#) (further revised in February, March and May 2020) to support its worldwide membership to deliver assistance and support to communities affected or at risk of being affected by the COVID-19 outbreak with three IFRC wide operational priorities:

- ✓ Preventing transmission and reducing the health impacts through health and WASH interventions;
- ✓ Reducing the socio-economic impact; and
- ✓ Strengthening National Societies.

The Emergency Appeal focusses on ensuring the implementation of effective and relevant activities to ensure that ongoing activities will factor in these new risks. As auxiliaries to public authorities, Red Cross and Red and Crescent National Societies are playing a strong role in supporting national COVID-19 response focused on preventing and suppression transmission of the virus. Focus is also given to supporting National Societies to maintain critical service provision to people affected by humanitarian crises through new and ongoing Emergency Appeals, while adapting to COVID-19. This includes ensuring the health and safety of staff and volunteers and developing plans specifically for emergency health service provision.

As such, the National Society actions' dedicated to COVID-19 and those conducted through new or ongoing operations will be mutually beneficial and build upon programmatic synergies. IFRC continues to assess and adapt its emergency operations in response to disasters and crisis and continues to provide necessary and updated guidance to its membership. The IFRC revised global Emergency Appeal complements both the UN Global Humanitarian Response Plan and is linked to the Strategic Preparedness and Response (SRP) Appeal of the World Health Organization (WHO), launched in February and the WHO revised strategy from April 2020 to support countries to improve their prevention and response. With support from the IFRC as well as other partners, the CRC has been responding to the COVID-19 outbreak in 30 of the 32 departments in the country, providing over 150,000 health services, delivering over 1,100,000 items to attend to basic needs, attending to over 6,700 families with cash transfers and strengthening 7 hospitals as of early September 2020.

The strategies envisaged in this revised Emergency Appeal will be aligned with COVID-19 prevention strategies to ensure the compatibility and to maximise synergies. Up to date information on the activities of the supported National Society as part of the national COVID-19 response and covered outside of this emergency appeal is available on the [COVID-19 operation page](#) on IFRC GO platform.

Proposed Areas for intervention

Overall goal: Provide humanitarian and stabilization assistance to protect the lives, health and dignity of 645,000 people affected by the migratory situation in the departments of Atlántico, Arauca, Cundinamarca, Putumayo, Nariño, Santander, Norte de Santander, La Guajira and Vichada, through a number of continued and integrated

actions in livelihoods and basic needs, health, water and sanitation, shelter, protection and migration services, as well as complementary and specific actions in several other departments where needs emerge and which may expand based on available funding.

This revised Emergency Appeal supports continued activities in the areas of focus of shelter; livelihoods and basic needs; health; water, sanitation and hygiene promotion; protection, gender and inclusion; migration; and disaster risk reduction. Emphasis will continue in primary health care including first aid services especially in the points along the paths for the caminantes (migrants on foot), whilst ensuring a transition to CRCS branch and community capacity-strengthening through the community based health first aid (CBHFA) approach for health and WASH components. The increase in the timeframe also allows for the development/establishment of new livelihoods initiatives, additional cash transfer activities with a protection approach, further protection activities through local protection focal points, distribution of age- and gender-differentiated dignity kits and increasing protection and inclusion activities through schools as a protective environments, as well as continued distribution of assistance to cover basic needs of migrants in transit and settled migrants, in particular in the light of the

COVID-19 outbreak which has impacted in particular on livelihoods, health and hygiene, whilst exposing vulnerable migrants to increased protection risks.

. In particular, given that this revision focuses on the third and final year of the Emergency Appeal, there will be an important focus on seeking to ensure sustainability of the interventions, through capacity-strengthening and community-based actions.

The intervention may expand to additional departments based on emerging needs and available funding, in line with the Colombian Red Cross' migration strategy.

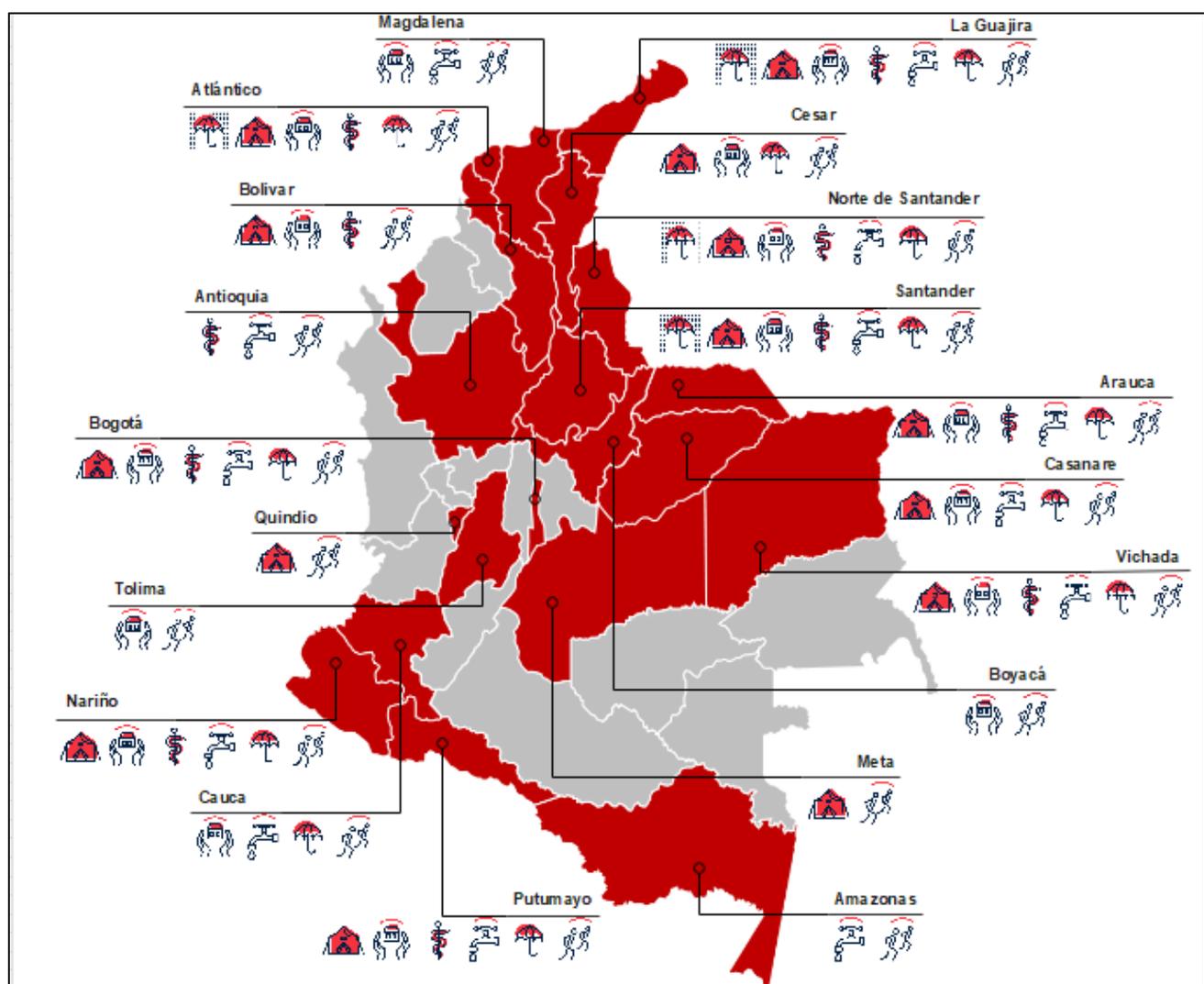


Figure 3: Map of services provided and planned through this revised Emergency Appeal.

The operation aims to provide humanitarian aid through three core strategies — **Migration; Protection, Gender and Inclusion (PGI); and Community Engagement and Accountability** — which are integrated across the different areas of focus:

- Shelter
- Livelihoods and basic needs
- Health
- Water, Sanitation and Hygiene (WASH)
- Disaster Risk Reduction (DRR)

This revised appeal also incorporates an important focus on capacity- and infrastructure-strengthening. This response will encourage and facilitate actions and generate processes of stabilisation and early recovery,

through the integration/inclusion phase, allowing for the generation of a continuous care route, from the programme and strategic scope of the CRCS vision.

The operation targets migrants according to their profile (transit, pendular, settled, seasonal, returnee) and host communities and their specific needs in the operation's lines of intervention, especially those who are experiencing severe difficulties in terms of accessing public services. Amongst migrants, groups will be prioritized as follows:

- Those to be assisted during their migratory journey
- Those to be assisted when they move between border areas
- Those to be assisted once they have settled in their host country

Areas of Focus



Shelter

People targeted: 7,000

Male: 3,000

Female: 4,000

Requirements (CHF): 270,000

Proposed intervention

Needs analysis and population to be assisted

Collective shelters do not have the appropriate sanitary conditions to house migrants, and there is a deficit in the availability of safe and dignified temporary accommodation, whether in collective shelters or rented accommodation. There is a need for access to medium-term housing solutions, in particular, rental support and the initiation of support activities to promote housing (stabilization solutions to attend to immediate and medium-term needs, as well as longer-term solutions) as well as access to basic household items. Finally, migrants that remain in border zones, waiting for border openings, lack bedding kits and warming garments for cold weather.

Populations will be attended along the main migrant routes for people on foot, with a focus on territories with a harsher climate, as well as in key cities in which there are important numbers of settled migrants. As for the collective and community shelters being supported with food and hygiene elements, as well as structural strengthening, will be targeted along the main migrant transit routes across the country.

Shelter Outcome 2: Communities in disaster and crisis affected areas restore and strengthen their safety, well-being and longer-term recovery through shelter and settlement solutions.

Shelter Output 2.1: Short, medium and long-term shelter and settlement assistance is provided to affected households

Activities completed

- Refresher workshop on centre management to CRCS staff and volunteers focused on migration

Ongoing activities

- Provision of bedding kits containing raincoats, blankets for cold weather and other essential products.
- Distribution of hygiene and first aid kits to community shelters.
- First aid training for hosts/ managers of community shelters
- Awareness raising/training of shelter volunteers and staff
- Participate in shelter approach coordination spaces
- Shelter sectoral assessment and develop strategy for the potential medium-long term
- Monitoring and evaluation of the different shelter interventions provided

Activities planned to be carried out

- Identify shelters with infrastructural and supply needs
- Purchase and distribution of basic hygiene equipment, first aid kits and food assistance for 20 community shelters
- Strengthening 20 shelter/ refuge infrastructure
- Shelter interventions to provide rental assistance or support to strengthen housing structures (provision of cash transfer, with technical support)



Livelihoods and basic needs

People targeted: 57,000

Male: 26,000

Female: 31,000

Requirements (CHF): 780,000

Proposed intervention

Needs analysis and population to be assisted;

In June 2020, it was estimated by an inter-agency needs assessment, that 46% of migrant households do not have any paid employment as a source of income, and 43% of migrant households indicate that their income can support them for just one day, demonstrating an important need for improved livelihoods opportunities for settled migrants. In addition, migrants in transit continue to require access to basic needs such as food and water.

Populations will be attended in various departments of the country in which migrants transit or settle, in order to provide basic needs assistance. The targeted population for livelihoods is in Putumayo, Nariño, Santander, Vichada and Guajira.

Livelihoods and basic needs Outcome 3: Communities, especially in disaster and crisis affected areas, restore and strengthen their livelihoods

Livelihoods and basic needs Output 3.1: Vocational skills training and/or productive assets to improve income sources are provided to target population

Activities planned to be carried out

- Feasibility analysis and market assessment, including assessment of needs and productive capacity in five regions hosting migrant populations.
- Identification of 75 individual and collective ventures with growth and sustainability potential that originate in migrants and host communities, and provision of skills development training for 75 ventures
- Provision of cash-based family subsidy to people engaged in the skills development programme
- Provision or replacement of productive assets for those ventures that comply with skill training accomplishment standards
- Monitoring of activities and endline to measure impact
- Conference with stakeholders as a mean to advocate for the rights of migrant people and host communities

Livelihoods and basic needs Output 3.2: Basic needs assistance for livelihoods security including food is provided to the most affected communities

Ongoing activities

- Purchase and distribution of individual and family food kits, including travel kits for returning migrants in the COVID-19 context
- Purchase and distribution of kitchen kits with complementary food kits to affected communities

Livelihoods and basic needs Output 3.5: Households are provided with multipurpose cash grants to address their basic needs

Ongoing activities

- Refresher workshop on introduction to cash and voucher assistance to volunteers
- Distribution of unconditional cash and voucher-based assistance to most vulnerable households in key cities
- Provide safe transportation to migrants to shorten their routes
- Advocacy actions with local and national authorities on the impact of cash and vouchers assistance
- Adapt the CRCS CEA strategy to develop and implement CEA actions for cash and vouchers assistance and a grievance /compliance mechanism system
- Monitoring of post-distribution and user satisfaction



Health

People targeted: 436,000

Male: 196,200

Female: 239,80000

Requirements (CHF): 4,560,000

Proposed intervention

Needs analysis and population to be assisted;

Based on CRCS health interventions, respiratory infections, dermatitis, high risk pregnancies, contraceptive intake control, stress and parasitosis are the most prevalent pathologies amongst migrants. In addition, in the COVID-19 context, migrants are increasingly vulnerable to exposure to the virus. Specialized medical services in dental health, obstetrics and pediatrics are in high demand. In a recent inter-agency needs evaluation on mental health needs, 48% of the migrants interviewed noted that a member of their household has shown symptoms of anxiety, reduced sleep, or crying episodes.

Basic primary health care activities will continue to be provided, through the approaches of Health Care Units (HCU) in Nariño, Putumayo, Arauca and Guajira, providing medical consultations, pre-natal and post-natal care, nutrition attention and psychosocial assistance, with referrals to specialist services as well as increased community-based health work, with all services being adapted to ensure appropriate social distancing whilst staff are equipped with personal protective equipment (PPE).

Health Outcome 4: The health and dignity of the affected migrant population is improved through increased access to appropriate health services.

Health Output 4.1a: 200,000 migrants provided with health care in CRCS HCUs

Ongoing activities

- Primary health care provided through mobile / fixed Health Care Units, including distribution of medicines according to prescription, and health provision institutions
- Comprehensive assistance to pregnant women and new-born, including the delivery of prenatal and postnatal kits
- Referral and counter-referral of migrants to medical centres via the ambulance service
- Digital medical history form to control regular patients and facilitate further control for migrants on foot.

Activities planned to be carried out

- Referral and counter-referral of migrants to medical centres and specialized services, through conditional cash transfer.
- Purchase and distribution of personal protection elements (PPE) for field personnel and volunteers

Health Output 4.1b: 51,000 migrants provided primary level health care in CRCS HPIs

Ongoing activities

- Referral and counter-referral of migrants to medical centres via the ambulance service
- Primary and specialized health care through Health Provision Institutions, including basic laboratory examination services
- Health promotion and disease prevention activities

Health Output 4.1c: Needs-based first aid, disease prevention and health promotion measures are provided to the migrant population

Completed Activities

- Emergency health workshop for volunteers and staff focusing on migration
- Nationwide community-based health and first aid (CBHFA) training with a focus on migration

Ongoing activities

- Community participatory plan to promote health

- Printing and distribute health promotion materials (Sexual and reproductive education kits)
- First aid care
- Sexual and reproductive health care, including the counselling and delivery of contraceptive methods

Activities planned to be carried out

- Community-based mental health based on needs identified through community-based health and first aid (CBHFA) approach
- Community health committees for epidemiological surveillance.
- Health promotion and disease prevention campaigns and fairs within communities, about common diseases, including communicable diseases, non-communicable diseases, sexual and reproductive health, and mental health and psychosocial support.

Output 4.1d: Children and pregnant mothers have access to nutritional supplements

Ongoing activities

- Nutritional supplements distributed to pregnant women and children
- Improving nutritional supplement distribution strategy for children and pregnant women

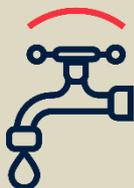
Activities planned to be carried out

- Evaluate the nutritional supplement distribution and share lessons learned

Health Output 4.4: Individual psychosocial support is provided according to the needs of the affected migrant population

Ongoing activities

- Provision of psychosocial care, and as necessary refer to specialist services, and distribution of psychosocial support kits for children and communities.
- Print materials with PSS and self-care information.
- Psychosocial support for children in primary education



Water, sanitation and hygiene

People targeted: 382,500
 Male: 172,000
 Female: 210,500
 Requirements (CHF): 920,000

Proposed intervention

Needs analysis and population to be assisted:

Needs evaluations from June 2020 indicate that close to 20% of migrant households do not have access to water when it is needed, and close to 30% of migrant households do not wash their hands. In particular, there is an increased importance of hand washing to decrease the spread of COVID-19 and a need for biosafety measures for migrants on the move.

Settled migrant populations will be attended in Vichada, Guajira, Arauca, Magdalena, Putumayo, Nariño and Amazonas, and migrants on the move will be attended during their journeys across the country.

WASH Outcome 5: Vulnerable people have increased access to appropriate and sustainable water, sanitation and hygiene services

WASH Output 5.1: Communities are provided by NS with improved access to safe water.

Ongoing activities

- Establishment of nine hydration points
- CRCS CEA strategy for WASH interventions

Activities planned to be carried out

- Needs assessment in water and sanitation infrastructure in all municipalities covered by the CRCS migration 2019-2021 strategy.
- Installation and strengthening of community aqueducts
- Design and implement water and sanitation systems that directly contribute to migrant and host communities' access to improved sanitation
- Purchase and distribution of water bottles and water drums with lids to store safe water
- Training for target communities on WASH systems, sustainable use and maintenance

WASH Output 5.5: NS promote positive behavioural change in personal and community hygiene among targeted communities.

Completed Activities

- Water, sanitation and hygiene workshop for CRCS volunteers with a focus on migration
- Distribute individual hygiene kits targeted to men, women and children

Ongoing activities

- Hygiene and sanitation promotion and disease prevention
- Distribute family hygiene kits to settled migrants and communities

Activities planned to be carried out

- Installation of hand-washing sinks, showers and clothes washing slabs
- Purchase and distribution of house cleaning kits
- Distribution of individual and family bio-security kits and facemasks



Protection, Gender and Inclusion

People targeted: 52,700

Male: 23,715

Female: 28,985

Requirements (CHF): 600,000

Proposed intervention

Needs analysis and population to be assisted

As migrants continue to transit across countries, complex border dynamics generate threats and risks for migrant children, adolescents and youth, such as sexual exploitation, risk of forced recruitment in actions such as smuggling of gasoline, goods and food, which are activities controlled by organized illicit groups. Girls, women and gender-diverse individuals are at risk of trafficking, domestic and sex slavery and other forms of exploitation and abuse; these risks are exacerbated by the lack of documentation and limited knowledge about their individual rights. In addition, risks have increased during the sanitary emergency, in light of loss of livelihoods, increased negative coping strategies and increased vulnerabilities.

Actions will focus particularly on children, adolescents and vulnerable adults with a strong focus on appropriate social distancing to mitigate the risk of virus transmission, in the departments of Arauca, Vichada, Putumayo, Santander, Norte de Santander and Guajira in particular, with additional actions as needed.

Protection, Gender and Inclusion Outcome 6: Communities become more peaceful, safe and inclusive through meeting the needs and rights of the most vulnerable

Protection, Gender and Inclusion Output 6.1: Programmes and operations ensure safe and equitable provision of basic services, considering different needs based on gender and other diversity factors

Completed Activities

- Training for volunteers and staff in the IFRC Minimum standards for protection, gender and inclusion in emergencies

Ongoing activities

- Friendly Spaces in migrant attention points with professional psychologists to ensure safety and decrease stress for the migrant population
- Purchase and distribution of gender and age-differentiated dignity kits for adolescents

- Establishment of a focal point in key migrant attention points to provide orientation and protection services to the migrant population to all available internal and external (aid partners, Government) services, as well as to carry out key CEA actions.

Activities planned to be carried out

- Training for volunteers and staff on Prevention and Response to Sexual Exploitation and Abuse

Protection, Gender and Inclusion Output 6.5: Educational and community dialogue programmes raise awareness on humanitarian challenges, cultivate humanitarian values and develop relevant interpersonal skills

Ongoing activities

- Training for teachers and parents to promote the creation of a protective environment in educational contexts highly affected by migration
- Implementation of the CRCS CEA strategy to include specific actions for PGI, focused on prevention of discrimination, stigma and xenophobia

Activities planned to be carried out

- Lessons learned from the “schools as a protective environment” component



Migration

People targeted: 645,000

Male: 290,000

Female: 355,000

Requirements (CHF): 380,000

Proposed intervention

Needs analysis and population to be assisted

Migration flows continue to be variable and complex, highlighting diverse needs in a diverse migrant population, including migrants from Venezuela, transcontinental migrants and indigenous communities. Needs cover all areas of focus mentioned above, as well as needs related to contact with family members and strengthen non-discrimination.

Migrant populations will be assisted in the key border and transit departments, as well as in departments where there are important numbers of settled migrants alongside the host community.

Migration Outcome 7: Communities support the needs of migrants and their families and those assisting migrants at all stages of migration (origin, transit and destination)

Migration Output 7.1: Assistance and protection services to migrants and their families are provided and promoted through engagement with local and national authorities as well as in partnership with other relevant organizations.

Ongoing activities

- Acquire and operate comprehensive assistance mobile units at border points or in locations with high concentrations of migrants
- Provide comprehensive care services in CRCS branches with a high incidence of vulnerable migrants in transit and destination communities
- Referral system for legal guidance or assistance, access to protection system with authorities and other humanitarian actors (help desk)
- Roll out the Virtual Volunteer tool and UReport, a bi-directional information tool, with supporting dissemination actions

Activities planned to be carried out

- Distribution of culturally differentiated kits to remote indigenous migrant communities to strengthen resilience
- Exit strategy developed that includes community consultation and sharing of the final evaluation results with the community

- Workshops and technical follow-up to strengthen the capacities of volunteers and employees in the differential and rights approach

Migration Output 7.2: Awareness raising and advocacy address xenophobia, discrimination and negative perceptions towards migrants are implemented.

Ongoing activities

- CRCS CEA strategy for Migration to engage migrants physically and virtually (including perception surveys), including feedback about services and to inform revision of activities and services.
- Campaign through a strategy linked to messages to raise awareness and prevent gender-based and sexual violence, stigma and discrimination through media outlets, such as radio, TV, written press, flyers, banners and the arts
- Establishment of a two-way communication mechanism

Activities planned to be carried out

- Professional training opportunities for migrants and host communities in order to strengthen social cohesion and access to the market, seeking engagement through the private sector

Migration Output 7.3: Family links are restored for people separated from, or without news of, their loved ones as a result of the disaster

- **Ongoing activities** Provision of Restoring Family Links (RFL) services,
- Provision of electric power to charge mobile phones and data systems (Wi-Fi)



Disaster Risk Reduction

People targeted: 10,000

Male: 4,500

Female: 5,500

Requirements (CHF): 70,000

Proposed intervention

Needs analysis and population to be assisted

- As Colombia is exposed to a variety of natural hazards, there is a need to ensure that increasing numbers of settling migrants are better prepared for effective disaster risk response within their host communities.

DRR Outcome 1: Communities in high risk areas are prepared for and able to respond to disasters

DRR Output 1.1: Communities take active steps to strengthen their preparedness for timely and effective response to disasters.

Activities planned to be carried out

- Global and regional workshops and events on climate change and migration
- Distribution of key messages on disaster risk reduction for migrants
- Awareness and public education campaign on hazards applied to different contexts, with the involvement of community organizations.
- Community early warning systems in migrant or host communities

Strategies for Implementation

Requirements (CHF): 2, 420,000

Based on the demand for the technical and coordination support required to deliver in this operation, the following programme support functions will be put in place to ensure an effective and efficient technical coordination: **human resources, logistics and supply chain; information technology support (IT); communications; security; planning, monitoring, evaluation, and reporting (PMER); monitoring, evaluation, accountability and learning (MEAL); Community Engagement and Accountability (CEA); partnerships and resource**

development; and finance and administration. More details are set out below and in the Emergency Plan of Action.

National Society: This revised and extended Emergency Appeal will work to sustain the organizational capacities of the National Society, which will continue to be strengthened both at the national and the branch levels, through infrastructure, capacity-strengthening and knowledge management. This includes a focus on CRCS staff and volunteers, with timely and quality engagement in their well-being, in particular through the provision of psychosocial support and complementary insurance, and opportunities for volunteer peer-to-peer exchanges. Operating branches will continue to be strengthened and equipped, whilst national society strengthening workshops will continue to be run with the IFRC and other Movement partners, with a focus on programmatic and financial sustainability. Through this emergency appeal, the IFRC will also continue to support the active engagement of the CRCS in regional and global fora, with a view to a long-term programmatic approach to migration.

Operational support and accompaniment from the IFRC's Regional Office for the Americas and the office in Colombia will be sustained through the support of technical staff. The IFRC will continue to support the CRCS in its participation in platforms led by government and other coordination mechanisms.

Human resources: This revised and extended Emergency Appeal will continue to support the contracting of staff at field level, which includes medical personnel (doctors and nurses) and technical personnel, as well as at headquarters level, including administration and finance officers, migration coordinator and protection support, Community Engagement and Accountability (CEA) and information management staff. The Emergency Appeal will partially or fully cover these positions, contingent upon funding.

Communications: The CRCS' Communications unit conducts digital monitoring on migration in social media and traditional media across Colombia and regionally. There has been a strong use of social media by the National Society and IFRC accounts to share the scope of the intervention and contextualize the magnitude of the population movement, raising awareness and advocating on the humanitarian needs migrants face. The IFRC's Communications staff in Panama and in Peru will continue providing technical support to the CRCS and bringing visibility to their humanitarian efforts.

Community Engagement and Accountability (CEA): Since the incorporation of the CEA approach to migration operations and the recruitment of a CEA officer dedicated to the CRCS migration strategy, protocols have been in place for accountability towards the community, either in person or virtually, communicating all necessary information to the community (selection criteria, available support, delays and closure of actions) through multiple channels. Community participation and feedback also is carried out through suggestion box mechanisms and meetings to evaluate activities within the operation. Through CEA, PMER and IM integration, the National Society is engaging in an ongoing analysis of needs that underpins program decisions. The CRCS migration manager coordinator and IFRC operations manager also monitor performance and changes in context and ensure that all implemented activities are compliant with IFRC standards.

Information Management (IM): The IFRC and CRCS have continued to implement and improve the information system, strengthening the use in the data collection tools through the Open Data Kit (ODK) and improving the user's confidence with the tool. Moreover, constant guidance has been provided in the consolidation and management of the databases, from which two dashboards were created, linked to the ODK tool data and another with the monthly consolidation of all projects and partners in this operation.

Planning, monitoring, reporting and evaluation (PMER): This Emergency Appeal will continue to support the CRCS with a PMER officer, a MEAL officer focused on knowledge management, as well as technical support from an IFRC PMER officer in-country, a MEAL officer in Panama, and support from the Lima and Panama IFRC offices. The operation's monitoring and evaluation plan is aligned to regional indicators in order to facilitate monitoring of activities and indicators regionally. A final evaluation is planned for 2021.

Logistics and Supply Chain: All procurement related to this operation will follow the IFRC's standard procurement procedures. The Regional Logistics Unit (RLU) in Panama has been closely supporting the operation with procurement, technical advice and technical authorization in line with procedures. A Procurement Officer from RLU carried out two field visits to the operation to work with the National Society, and this appeal has supported the logistics infrastructure of the CRCS. As the operation continues, so will the technical support of the IFRC and the strengthening of the CRCS' logistical capacity.

Funding Requirements

APPEAL

Colombia - Population Movement Funding requirements - summary

SHELTER	270,000
LIVELIHOODS & BASIC NEEDS	780,000
HEALTH	4,560,000
WATER, SANITATION AND HYGIENE	920,000
PROTECTION, GENDER & INCLUSION	600,000
MIGRATION	380,000
DISASTER RISK REDUCTION	70,000
STRENGTHEN NATIONAL SOCIETY CAPACITIES	730,000
ENSURE EFFECTIVE INTER'L DISASTER MANAGEMENT	1,520,000
INFLUENCE OTHERS AS LEADING STRATEGIC PARTNERS	95,000
ENSURE A STRONG IFRC	75,000
TOTAL FUNDING REQUIREMENTS	10.000.000

all amounts in Swiss Francs (CHF)

See attached IFRC Secretariat Funding Requirements (Annex 1) for details. With some 7.7m Swiss francs of contributions received, the net multi-lateral needs amount to 2.3 m Swiss francs.

Jagan Chapagain
Secretary General

Reference documents



Click here for:

- [Previous Appeals and updates](#)

For further information, specifically related to this operation please contact:

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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 (NGO's) in Disaster Relief and the **Humanitarian Charter and Minimum Standards in Humanitarian 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:



Save lives,
protect livelihoods,
and strengthen recovery
from disaster and crises.



Enable **healthy**
and **safe** living.



Promote **social inclusion**
and a culture of
non-violence and **peace**.