The IFRC Regional Office for the Americas is publishing this special bulletin to inform the impact of changes to population movements. Moreover, the bulletin reflects the coordination and efforts of National Societies and the IFRC in addressing the needs of migrants affected by COVID-19 and the consequent border closures and movement restrictions, which considerably limited refugees' regular flow migrants and increased flows in irregular entry points in the region.

This bulletin is issued for information purposes and reflects the current situation and details available at this time. The National Red Cross Societies, supported by emergency appeals launched by the International Federation of Red Cross and Red Crescent Societies (IFRC), seek funding and other donors' assistance. For more information, please see the 24-month report on the Colombia operation and the 18-month report on the regional operation.

The situation

Due to COVID-19 and since countries have started to relax restrictions, changes have been observed in migration flows, especially those of Venezuelan nationals in the region. There continues to be a consistent increase in the return
of Venezuelan nationals to Venezuela, and in October, according to official data, there has been an increase in the number of Venezuelans in other countries.

According to the latest data reported by the R4V Coordination Platform and other sources, there are:

![Population Movement Table]

It is assumed that if all irregular movements were considered, the total number of refugees and migrants in the region could be more than the 4.6 million Venezuelans reported by R4V.

**Panama**

According to official Migration data, although the land borders remain closed, the flow of migrants in Darien continues to increase. According to the Ministry of Security, more than 300 migrants have arrived in the past week, and some have tested positive for the new coronavirus, among them 14 Venezuelans. Moreover, according to the analysis of our partner UNICEF in Panama with whom the Red Cross implemented actions in the target area, there is an estimate for 2021 of the arrival of approximately 14,000 people crossing through Darien. It highlights an increase in the number of Venezuelan people, something that in 2018 and 2019 had not been observed.

**Colombia**

In Colombia, Migracion Colombia (Migration authority) estimates that, as of the end of September, close to 109,000 Venezuelan citizens have returned to their country (through registration at migration offices), due to the effects associated with the COVID-19 pandemic and the consequences of confinement. However, many of those who have returned to Venezuela in previous months are now returning to Colombia, travelling within the country or choosing to leave for other countries in the Andean region and the southern cone. The immigration authority in Colombia estimates that for every person who has returned to Venezuela, there could be two people who leave their country again (1 returned in the company of at least one family member) in the coming months, representing a margin of re-entry of between 200,000 and 250,000 people. 19 pandemic and the consequences of confinement. However, many of those who have returned to Venezuela in previous months are now returning to Colombia, travelling within the country or choosing to leave for other countries in the Andean region and the southern cone. The immigration authority in Colombia estimates that for every person who has returned to Venezuela, there could be two people who leave their country again (1 returned in the company of at least one family member) in the coming months, representing a margin of re-entry of between 200,000 and 250,000 people. or choosing to leave for other countries in the Andean region and the southern cone. The immigration authority in Colombia estimates that for every person who has returned to Venezuela, there could be two people who leave their country again (1 returned in the company of at least one family member) in the coming months, representing a margin of re-entry of between 200,000 and 250,000 people.

Although the borders between Colombia and Venezuela will remain officially closed until November 1, 2020, authorities in Colombia have evidenced an increase in the number of Venezuelans entering the country through irregular crossings in the departments of Guajira, Arauca, and Norte de Santander, with immediate impacts expected in departments that are identified as transit corridors, including Santander, Casanare, and Boyacá. In the GIFMM's (Interagency Group of Mixed Migratory Flows) coordination area in Norte de Santander, it is estimated that on

1. [https://www.prensa.com/judiciales/ministerio-de-seguridad-confirma-muerte-de-dos-migrantes-en-darien-estaban-contagiados-de-la-covid-19/](https://www.prensa.com/judiciales/ministerio-de-seguridad-confirma-muerte-de-dos-migrantes-en-darien-estaban-contagiados-de-la-covid-19/)
average, between 300 and 400 people could be walking daily through the department of Norte de Santander, in route to the interior of Colombia and other countries in the region. This information is contrasted with the increase in the average number of attentions made by the Red Cross on the route of the "caminantes" during the last weeks of September and throughout October.

At the same time, in the south of the country, on the border between Colombia and Ecuador, between the regions of Nariño and Carchi, the movement of persons through informal crossings has been identified, with an average of 50 persons circulating daily, both as an outflow and as an inflow into Colombian territory, impacting the occupation of temporary shelters in the municipality of Ipiales (the southernmost point and border with Ecuador), where more than 400 persons are being assisted in this area of the country, with multi-sectoral actions.

The department of Nariño in Colombia is currently suffering the impacts of additional migration flows, with its capital city of Pasto as the temporary home for about 400 people, contained by border closures’ administrative effects. Besides, in Necoclí (Municipality of Antioquia), close to 300 people have been stuck and have decided to move towards the Darien triangle, towards Panamanian territory. Besides the Venezuelan migrants, Colombia registers close to 1,500 other migrants with origins as diverse as Senegal, Bangladesh, India, Pakistan, or Haiti.

According to the last report of the R4V Platform in Ecuador, an increase has been detected (+54k²). According to the official data provided by authorities, this increase is due to the difference between entry and exit numbers, the saying (migratory balance) that would also count the data of non-official steps.

On the other hand, the Ecuadorian Red Cross has not, for the moment, increased its attention at the border. Numbers remain constant, as do the services provided by the Red Cross.

According to the latest report of the R4V Platform, a new calculation method is used to estimate the number of Venezuelan migrants living in Peru. Including regular and irregular entries, Perú is hosting over 1 million (+213.7k³) Venezuelan migrants, over 70% of which live in Lima, the capital city.

As the land borders are officially closed due to a contingency measure in response to COVID-19, the border checkpoint has not been operational since 16 March 2020. However, the team has carried out border line monitoring where family groups’ presence has been observed, mainly entering Peru through unauthorized crossings. This situation is different from that of two months ago when people were observed mainly leaving Peru on their way to Venezuela.

In both Tumbes and Tacna, people are still transiting to cross Peruvian borders on their way in or out of the country. In the main parks and avenues of both cities, migrants can be seen begging for food or transportation, many of them because they have no access to livelihoods.

During the last 15 days, there has been an increase in migrants’ entry through the border in Desaguadero. The border is still closed. However, a policy allows entry for 5 days to Bolivian territory, which has been used by Venezuelan migrants to transit through the country on their way to Chile. The number of entries is unknown, but field personnel indicates that large groups are entering Bolivia.

According to the figures shown by the Jesuit Migrant Service, despite the greater obstacles imposed by the COVID-19 in the country, between January and August 2020, 5,147 people entered through unauthorized crossings in 2019 compared to 8,048 and 6,310 in 2018. The Arica Prosecutor's Office has also shown an increase in cases of migrant

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² According to a time period reported by R4V from September 2020 to October 2020. https://r4v.info/es/documents/details/79560
³ IDEM
trafficking. According to conversations with the IOM, the flows have not diminished, but the irregular crossing points’ risks have increased.

The Chilean Red Cross reports **500 people of Venezuelan nationality staying in the streets** and a situation of extreme vulnerability before reaching the border point of Colchane, on the border with Bolivia in a small town named Huara. These people’s vast needs include shelter, food, hygiene kits, health services, information, and psychosocial support, among others.

There are also 100 people crossing daily through the Colchane border, of whom 30% are children. Among this group, there are also pregnant women and many people with chronic diseases. All these people cross the border through irregular entry points. The 100 people entering are counted due to migrants' self-reports to police authorities to receive a document that allows them to continue their journey throughout the country. Nevertheless, misinformation causes many migrants to enter with fears and afraid of being expelled and do not proceed with the police authorities' self-report. In this sense, a larger number of people are entering but are not reported. There is an evident increase in xenophobia and discrimination against migrants in this region. No access to health services and the absence of other organisations that could assist this population make them more vulnerable and with urgent basic needs.

Finally, the weather conditions in the borders with Peru and Bolivia are harsh with very low temperatures at night and high temperature during the day and migrants often get affected with heatstrokes and hypothermia.

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**ARGENTINA**

Since the beginning of the pandemic, Argentina's borders have been closed; only a few migrant families have regularly entered Argentine territory in recent months, exceptionally with international agencies' support. There have been some cases of irregular entries both in Misiones (border with Brazil) and in Jujuy (border with Bolivia) in which the Argentine Red Cross has intervened. There are also reports of people stranded on the borders with Peru and Brazil, who intend to mobilize to Argentina when the pandemic's situation improves.

The National Society reports people at the border with Brazil, including single women with small children. Some people were stranded at other borders, and others have already intended to reach Argentina.

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**BRAZIL**

In Brazil, the border with Venezuela remains closed in Roraima. However, an increase in the number of people crossing the border irregularly is beginning to be observed. Since they entered irregularly, they cannot access documentation in Brazil or public services, increasing their vulnerabilities and facing deportation risk. It is estimated that due to the Venezuelan elections in December 2020, the number of illegal entries will continue increasing.

According to the ICRC, an increase in migrants' number has recently been observed at the bus station in Boa Vista. A lack of access to migrants' health system has also been evidenced in the northern states for different reasons, including lack of capacities and xenophobia. The needs of NFI's have also significantly increased over previous months.

The number of returnees is also progressively increasing. According to a recent Organization of American States (OAS) report⁴, 6,000 Venezuelan migrants have returned to their country from Brazil. According to UNHCR and IOM sources based on the Manaus-based Operacao Acolhida, it is unknown when the border will reopen, making it difficult for some people to return.

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**URUGUAY**

Since July, there has been a considerable increase in regular entries to Uruguay through the borders in Rivera and Artigas. Most of these migrants are from Colombia and Cuba and are in vulnerable conditions. Due to this increase, the government has strengthened the sanitary controls across the borders.

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Red Cross and Red Crescent action

**Panamanian Red Cross**

IFRC and NS are continuing the support in the field.

For Shelter, in coordination with UNICEF, the Panamanian Red Cross is purchasing canvases and tents to expand of emergency shelters. Existing shelters will be renewed, and areas of the intervention will be expanded if necessary; Health: There are plans to extend the contracts of health personnel with a focus on maternal, childcare, and first aid; WASH: the National Society is working on the extension of the technical staff in water and the community promoters in La Peñita and Bajo Chiquito is foreseen, the provision of chemical supplies for the two water systems has been scheduled, the distribution network of potable water in La Peñita was expanded by 50%, the distribution network of potable water in Bajo Chiquito was expanded by 25%, Hygiene kits for 4000 people and coordinated with UNICEF the purchase of supplies such as mosquito nets, buckets, and drums for distribution in ERM. As part of psychosocial support, the field team was strengthened by hiring a psychologist and a social worker to implement community actions. The service could be extended to volunteers in the field. The service could be extended to volunteers in the field.

**Colombian Red Cross**

The Colombian Red Cross continues to carry out actions in response to migrants in transit in the central border departments and intermediate crossings through its branches and its fixed and mobile attention strategies. From Norte de Santander, constant monitoring is carried out along the corridor, working simultaneously on the adjustment of the current contingency and response plan, which allows for the reinforcement of support along the route of the walkers, with offers associated with health services (first aid, medical consultations, psychosocial support), as well as the protection component (RFL and orientation through its help desk). Hygiene kits and food are currently being distributed, along with the provision of protective gear.

Given the increased flow of migrants to Colombia, the Colombian Red Cross is installing a point of care for migrants in the department of Casanare following the route from Arauca to the interior and south of the country. This point will offer first aid services, delivery of FI/NFI, hydration, and RFL services. The CRC is also strengthening operations in Santander, Meta, Putumayo, and Nariño, even considering the impacts of transit and departure of migrants through the south of the country.

**Ecuadorian Red Cross**

The Ecuadorian Red Cross has been taking some meetings with local branches at border points (Carchi, Sucumbios and El Oro) to create an action plan. A National Alert has been issued within the National Society considering coordination meetings at the local level and with Movement actors. In coordination with the Human Mobility Unit, the National Society is elaborating an inventory of all stocks (kits, supplies etc.) to pre-stock in case of need. They already purchased food kits for “caminantes”.

Coordination with the COVID’s operation to support the analysis of COVID tests to migrants in Carchi through agreement, continued providing First aid and psychosocial support and developed a mapping of services and distribution of brochure for the “caminantes” is being developed.
The IFRC and Peruvian Red Cross are working closely with organization in the field, especially UNHCR and OIM, to identify vulnerable cases better, conducting field evaluation in Tumbes (border line), including distribution of cash and voucher assistance (CVA) and planning other evaluation in Tacna.

In response to the COVID-19 emergency, the Peruvian Red Cross provided ongoing health services, and water supply to 3 shelters settled up in Tumbes by the UNHCR. The Lima field team provides health services and hygiene kits (including masks and alcohol) in at least 5 migrant shelters. At least 380 households have been supported with ongoing cash transfer based on health vulnerability.

Medical days are still underway in Tumbes and Lima with a safety sanitary protocol, while the Medical Services Point in Lima (PAC) restarted operations in late September. Operations in Tacna, Puerto Maldonado, and Arequipa are planned to restart in early November.

Finally, the Red Cross’ WhatsApp® Business line has been operating since late March, delivering reliable information to vulnerable people such migrants. While this line provides information, it also is a method to collect information about needs and protection cases who may need referral or PSS services.

Bolivian Red Cross

Bolivian Red Cross is providing health care, WASH, and RFL in the Desaguadero border and constant monitoring of the route throughout the country.

Chilean Red Cross

The Chilean Red Cross (CRCh) branch in Arica – near the border with Peru – provides primary health care to migrants in vulnerable health conditions and satisfies basic needs through a cash-based intervention programme. The CRCh also provides safe water, food boxes, winter kits, and hygiene kits for adults, and children. They also provide psychological support and information about self-care, health promotion and prevention to COVID-19.

A team formed by the Local Coordinator of the project in North of Chile, the Primary Care Physician, the Director of Risk Management of the Arica Branch, accompanied by the volunteers of the Arica Branch, assessed the towns of Huara and Colchane, belonging to the Tarapacá region, to verify and compile background information that would allow the analysis of the migratory situation and the needs of this population that is facing these border communities, as well as an eventual intervention of the Chilean Red Cross if necessary. Due to these migrants’ extreme needs and vulnerabilities and considering the limited capacities of local authorities and the lack of presence of other organisations in this area, the CRCh and IFRC are designing a PoA for intervention. They are working on the mobilization of resources.

Argentine Red Cross

The Argentine Red Cross is constantly monitoring the borders (at Puerto Iguazú and La Quiaca) through its two border coordinators. The National Society provides shelter, food, psychosocial support, RFL, and information services to migrants entering the country through its northern borders. A mobile humanitarian service point will soon be deployed to the border area in the province of Jujuy.

Brazilian Red Cross

The Brazilian Red Cross is closely monitoring the situation in the northern states of Roraima and Amazonas. The BRC branch in Amazonas is providing humanitarian assistance to vulnerable migrants, with IFRC technical and financial
support, in close coordination with the Operacao Acolhida. The ICRC continues providing RFL services in the states of Roraima and Amazonas.

**Uruguayan Red Cross**

The Uruguayan Red Cross, in close coordination with public authorities, is managing a contingency center for migrants in the northern city of Rivera with a capacity for 12 people. Migrants are requested to stay at this center for up to 48 hours while they wait for the COVID-19 test results to enter the country. The National Society is developing a cash-based programme to support the livelihoods of vulnerable migrants.

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**Contact information**

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

**In the National Societies:**
- Argentine Red Cross: info@cruzroja.org.ar
- Chilean Red Cross: cristian.pincheira@cruzroja.cl
- Colombia Red Cross: National Migration Manager: Diego Piñeros; phone: +571 437 5300; email: diego.pineiros@cruzrojacolombiana.org
- Brazilian Red Cross: gabinete@cvb.org.br
- Bolivian Red Cross: secretaria@cruzrojaboliviana.org
- Ecuadorian Red Cross: presidencia@cruzroja.org.ec
- Guyana Red Cross: guyanaredcross@yahoo.com
- Red Cross Society of Panama: crppresidencia@cruzrojadepanama.org
- Peruvian Red Cross: director.ejecutivo@cruzroja.org.pe
- Trinidad and Tobago Red Cross Society: admin@ttcrs.org
- Uruguayan Red Cross: presidencia@cruzroja.org.uy

**In the IFRC regional office for the Americas:**
- Jono Anzalone, Head of the DCPRR Department: jono.anzalone@ifrc.org
- Felipe Del Cid, Continental Operations Coordinator: felipe.delcid@ifrc.org
- Santiago Luengo, Regional Migration Operations Manager: santiago.luengo@ifrc.org
- Juana Giraldo, Colombia Migration Operation Coordinator: juana.giraldo@ifrc.org
- José Félix Rodríguez, Migration Regional Coordinator: josefelix.rodriguez@ifrc.org
- Mauricio Bustamante, Head of Regional Logistics Unit Americas Region, mauricio.bustamante@ifrc.org
- Susana Arroyo, Communications Unit Manager: susana.arroyo@ifrc.org

**For Resource Mobilization and Pledges:**
- Marion Andrivet, Emergency Appeals and Marketing Senior Officer: marion.andrivet@ifrc.org

**For Performance and Accountability:**
- Maria Larios, Planning, Monitoring, Evaluation and Reporting Manager: maria.larios@ifrc.org

**In IFRC HQ in Geneva:**
- Antoine Belair, Operations Coordination Senior Officer for Disaster and Crisis (Prevention, Response and Recovery): antoine.belair@ifrc.org
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.