A stylized map of Latin America and the Caribbean in light gray. A vertical column of yellow and white arrows points north from the northern coast of South America. To the left, a red arrow points right. The title is overlaid on a dark blue background with red accents.

IMPACT OF THE COVID-19 PANDEMIC ON REFUGEES AND MIGRANTS FROM VENEZUELA

EVICTED PERSONS, INDIGENOUS PEOPLES AND
SEX WORKERS IN LATIN AMERICA AND THE CARIBBEAN

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The Regional Protection Sector of the R4V Platform and the Refugee and Forced Displacement Unit of the Department of Social Inclusion of the Organization of American States (OAS) would like to thank the national sectors in Colombia, Peru, Ecuador and Brazil and subregional sectors in the Caribbean and Southern Cone for their support in drawing up this diagnosis. The diagnosis was conducted in nine countries of Latin America and the Caribbean (Peru, Ecuador, Brazil, Colombia, Argentina, Dominican Republic, Curaçao Trinidad and Tobago and Guyana) with the support of 15 organizations of the Regional Protection Sector, community-based organizations and civil society organizations.

This document was prepared by the Regional Protection Sector of the Regional Inter-Agency Coordination Platform for Refugees and Migrants from Venezuela (R4V) jointly with the OAS Refugee and Forced Displacement Unit and within the scope of the strategic priority included in the Refugee and Migrant Response Plan (RMRP 2021: **mitigation of disproportionate impacts in higher risk groups within the scope of international standards, the exchange of best practices and prioritization criteria.**

The Regional Protection Sector is led by the United Nations Refugee Agency (UNHCR) and HIAS; 106 organizations participate in it (non-governmental organizations, agencies in the United Nations system and civil society organizations) present in four countries (Colombia, Ecuador, Brazil, Peru) and three subregions (Caribbean, Central America and Southern Cone).

INTRODUCTION

In order to deepen the analysis of the impacts of COVID-19 in Venezuelan refugees and migrants, in 2020 the Regional Sector, in coordination with the Refugee and Forced Displacement Unit of the OAS Social Inclusion Department, decided to prepare a diagnosis on the effects and disproportionate impacts in three population groups:



Information was gathered in nine countries of Latin America and the Caribbean (Peru, Ecuador, Brazil, Colombia, Argentina, Dominican Republic, Curaçao, Trinidad and Tobago and Guyana) with the support of 15 organizations of the Regional Protection Sector, community-based organizations and civil society organizations.



During the last year, these countries have faced the economic and social effects of the COVID-19 pandemic and have imposed a series of measures to mitigate the risks of infection; these measures have affected the living conditions of the population and, specifically, Venezuelan refugees and migrants. Implementation of these measures has disproportionately affected certain population groups, creating new scenarios of risk and exposure, with a particular impact on the right to adequate housing, employment, access to the territory and asylum procedures, non-discrimination, access to justice, protection against abuse, among others.

Evicted persons, sex workers and/or those in prostitution and indigenous peoples have been victims of discrimination and xenophobia, sexual violence, and denial of access to social protection systems or COVID-19 support programmes. They have also lost their livelihoods and have faced situations of labour exploitation, homelessness, barriers to accessing documentation and abuse by State security forces. The report describes how these situations of risk have had differentiated and intersectional impacts in

21
focus groups



5
in-depth interviews



9
countries



138
people
from targeted population
groups and service
providing organizations



situations that require complex and integrated interventions to make up for the existing protection gaps.

The findings and recommendations of this diagnosis are a fundamental input for evidence-based guidance of the processes of developing public policies and regulatory frameworks at a national and regional level to ensure that the refugee and migrant population of Venezuela can overcome the obstacles to guaranteeing their human rights and attempting to access institutional assistance and national protection systems. They are also used to adjust the strategies, programmes and projects of the member organizations, other sectors of the R4V Platform and the international community in general, in order to guarantee that the protection response is relevant and has an impact while prioritizing those groups which most absorb the effects of the measures implemented and, in the future, the consequences of the pandemic impacts in the region.

This document also represents a valuable input for the processes of discussion, consultation and definition of regional commitments for member States of the Organization of American States (OAS). It can be used for developing impact tools and providing technical and strategic guidance for governments. These factors are key to the process of designing the R4V 2022 Refugee and Migrant Response Plan.

A qualitative and participatory methodology was used for the diagnosis, with 21 focus groups and five in-depth interviews in nine countries and with the participation of 138 people from targeted population groups and service providing organizations. The information-gathering process was carried out between October 2020 and February 2021.

The report is structured as follows:

-  1. Recommendations addressed to States, immigration authorities, police and armed forces, judges and justice operators, national human rights institutions, international human rights institutions, international organizations, non-governmental organizations and civil society, international cooperation and the private sector.
-  2. International Framework on Human Rights and Human Mobility in the context of COVID-19.
-  3. Main findings, including differentiated impacts on children, adolescents and women.
-  4. Differentiated and intersectional impacts. 
-  5. Organizational processes protection networks.
-  6. Relationship with institutions.
-  7. Challenges for service provider organizations during COVID-19.



PREFACE

In recent years Latin America and the Caribbean have faced one of the greatest exoduses in their history. According to official figures over 6.2 million Venezuelans live outside their country of origin with an estimated 5.2 million residing in the region. In addition to the effects on the living conditions, safety, dignity and health of refugees and migrants, the COVID-19 pandemic has exacerbated pre-existing inequalities and made the most defenceless members of society more vulnerable.

The serious risks for persons in situations of mobility, identified in the early stages of the health crisis and analysed in this publication, led to the need to seek creative and urgent solutions. The goal was to strengthen the protection mechanisms and roll out new aid channels in the context of the restrictions imposed by the pandemic that impacted the region so severely.

Aware of its role in supporting the hard work of the 17 receiving countries in Latin America and the Caribbean, the R4V Platform focused on protection, advocating for access to the territory and to protection systems at borders, better access to regularization and asylum mechanisms, measures to protect children and adolescents, prevention of human trafficking and smuggling and assistance to victims, a systemic response to situations of gender-based violence and support for family reunification.

Many countries established measures to safeguard the rights of refugees and migrants such as suspending administrative and judicial proceedings, extending document expiry dates and decrees suspending evictions, among others. In practice, some of these measures were not as widely applied as was intended. The steep rise of stigma and xenophobia aggravated the situation.

This diagnosis describes disproportionate effects, risks and needs in three protection groups: sex workers, evicted persons and indigenous populations, representing just some of the people in a situation of extreme vulnerability. The valuable findings of this diagnosis point to a dramatic rise in sexual abuse and violence, labour exploitation and precarious access to adequate housing.

The carefully presented information guides the preparation of new approaches to dynamic problems. The report shows how information can facilitate the design of a response with revamped assistance and protection strategies focused on specific needs. It could moreover strengthen governance and contribute to creating more effective public policies. Through practical recommendations directed at governments and actors of international cooperation, this report also contributes to encouraging the inclusion of these groups into their programmes in the long term.

This initiative by UNHCR and HIAS led Regional Protection Sector and the Department of Social Inclusion of the Organization of American States collaborates on preparing the Regional Response Plan for Refugees and Migrants (RMRP) 2022 for an even more effective response to urgent protection needs. It also contributes by making recommendations to guarantee that the information on rights, pathways for accessing justice and assistance services is appropriate for refugees and migrants.

While the region is making progress with encouraging signs of inclusion of refugees and migrants through promising regularization and integration programmes, the crisis is becoming ever more visible and the response is bringing together a greater diversity of stakeholders; our priority will continue to be meeting the urgent needs of the most vulnerable.

Eduardo Stein

**JOINT SPECIAL REPRESENTATIVE OF UNHCR AND IOM
FOR VENEZUELAN REFUGEES AND MIGRANTS**



PREFACE

“We are foreigners, and we have been unfairly abused for being who we are.” These are the words of one of the women interviewed for this report portraying the situation of one of almost 6.2 million Venezuelan refugees and migrants forced to leave their country. It is part of the story of one of the millions of people who today travel and live in our continent, as they continue to fight to survive and have a dignified life, especially now that their situation has worsened because of the many impacts of the COVID-19 pandemic.

The crisis of forced displacement of Venezuelan refugees and migrants is the greatest of its kind in the recent history of our region and the second greatest – after Syria – globally today.

Despite the significant measures adopted by governments in the region to give Venezuelans access to their territories, and protect and admit them, they still face many barriers in access to documentation, regularization and refugee status determination and access to basic services such as health care, food, water and sanitation and decent housing. In many cases, they have been forced to work in insecure, unstable and informal jobs, many are victims of discrimination, racism and xenophobia, and in the case of indigenous peoples they face many challenges in access to land, territory and their resources.

Within these millions of Venezuelan refugees and migrants there are particularly vulnerable groups who suffer disproportionate effects on their rights as is the case of indigenous persons, female sex workers or those practising prostitution and evicted persons. As shown by this report, these groups face greater obstacles in accessing social assistance and protection measures, and at the same time have not always been part of the COVID-19 pandemic response and recovery plans. This report focuses on the special situation of these groups, to make these effects visible so that we can all work together to remove the challenges they face to integrating fully into the host countries and communities.

At OAS we recognize the efforts made by States in the region which, following our long humanitarian and asylum tradition, have taken in refugees and migrants forced to leave Venezuela and have continued to adopt measures to integrate them.

This report, drawn up jointly with the R4V Platform Regional Protection Sector and for which we have received information from hundreds of people, civil society organizations and community-based organizations, highlights the main challenges preventing these groups from effective enjoyment of their human rights. At the same time, it connects these challenges with the standards of the Universal System and Inter-American System in terms of the impacts of the COVID-19 pandemic on the rights of refugees and migrants, and it provides public policy guidelines for tackling them.

The report also represents an extremely useful tool for guiding the work carried out by OAS bodies specializing in the subject, such as the Committee on Migration Issues (CAM) and the Committee of Juridical and Political Affairs and strengthening the commitments of our General Meeting.

Its main asset is the practical recommendations it gives to OAS member States and different stakeholders at the national level so that they can prepare public policies, laws and practices based on evidence and on the international undertakings made by States – in accordance with international human rights law and international refugee law – in response to the needs and challenges identified in this report.

The report recommends that sufficient resources continue to be allocated to develop these policies, laws and practices, at the same time as capacity-building and awareness-raising is reinforced for government employees, especially members of the police, armed forces, migration authorities, judges and judicial officers, among others.

The OAS maintains its commitment to the Venezuelan population, whether in the country or abroad, and will continue to make available to States all its tools to strengthen response mechanisms from a human rights and whole-of-society approach. These mechanisms include member States and their migration authorities, police and armed forces, judges and judicial officers, as well as national human rights institutions, international organizations, non-governmental organizations, civil society and the private sector. Only through this joint and coordinated work will refugees and migrants in our region be fully integrated into their host communities.

Luis Almagro
SECRETARY GENERAL OF THE OAS



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RECOMMENDATIONS

Based on the information gathered and the findings made during the process of drawing up this diagnosis, the following recommendations are made:



TO STATES



General

1. Guarantee that all State policies, laws, and practices developed in response to COVID-19 adjust to the standards of international human rights law and international refugee law, taking into consideration the specific needs of vulnerable groups and persons and promoting effective consultation processes that guarantee the mitigation of risk of Venezuelan refugees and migrants.
2. Allocate resources to adapt the existing information systems to identify variables such as gender, age, ethnic self-identification, disability, and trade/job with a focus on intersectionality, regardless of the migration situation, as a base for making progress in the process of adjusting/designing public policies, legal frameworks, and programmes with an impact on Venezuelan refugees and migrants.
3. Strengthen capacity-building, awareness-raising, and training on human rights, population consultation tools, strengthening the community fabric and age, gender, and diversity for members of public forces (including members of the police and armed forces), migration officers, border zone officers and those linked to entities that are key for Venezuelan refugees and migrants to access to assistance and protection services.
4. Guarantee confidential and efficient pathways for reporting fraud, harassment, and abuse by public employees, providing the necessary guarantees, due process, and the support of regulatory bodies.
5. Establish firewalls guaranteeing real and strict separation between migration control functions and access to other public services for refugees and migrants, especially economic, social, and cultural rights. This would mean that migration and security authorities cannot access information about the migration situation of those using public services and that the institutions responsible for providing these services are not required to find out or share information about the migration situation of users.
6. Promote and guarantee the participation of Venezuelan refugees and migrants in making decisions about the processes and projects

involving them. Promote, listen to and include especially the voices of female heads of households, nursing and pregnant women, female sex workers and/or those in situations of prostitution, LGBTIQ+ persons and the indigenous peoples of Venezuela.

7. Provide extensive and updated information about those who can apply and about pathways for accessing mechanisms to determine refugee status and the rights this status entails, especially in connection with access to health care, jobs, and education, and disseminate this information widely.
8. Guarantee that all information connected to protecting Venezuelan refugees and migrants and concerning the prevention or provision of COVID-19 services is designed in accessible formats, paying special attention to guaranteeing access to information by persons with limited internet access or those for whom access is difficult due to language.
9. Design social media campaigns to inform about the regularization processes for refugees and migrants at national level, identifying the access pathways and listing/desegregating the local institutions involved.
10. Guarantee that the campaigns reach refugee and migrant populations of Venezuela who are suffering from the disproportionate effects of the pandemic such as: women, girls and female adolescents, trans women, female sex workers or those in a situation of prostitution, indig-

enous peoples and victims of forced eviction, among others.

11. Adopt measures to guarantee access to health care services, including mental health care, which must be based on the free and informed consent of the individual. When service providing organizations do not have these resources, reach agreements with universities and local organizations for psychological assistance to refugees and migrants, including the need for differentiated approaches considering the different vulnerability statuses, the multiple effects and the population affected.
12. Consider internet access as a universal basic service. To guarantee connectivity public-private partnerships may be considered, facilitating access for particularly vulnerable sectors, such as Venezuelan refugees and migrants and indigenous peoples.
13. Develop integration policies for Venezuelan refugees and migrants in destination countries. These policies should implement positive measures, such as education and awareness campaigns, aimed at promoting multicultural societies and combating discrimination and xenophobia.



Related to indigenous peoples¹:

1. Consider special protection measures for cross-border and binational indigenous peoples, ensuring regularization processes and the right to nationality when necessary or at the risk of statelessness.
2. At the level of national and local authorities, conduct censuses of the indigenous population in host countries to identify peoples, communities, nationality/binationality, age, gender, functional diversity and education level. This information will contribute to the design of protection policies and provision of services to the indigenous population settled in host cities and communities.
3. Conduct free and informed advance consultation processes with indigenous peoples and/or their authorities about the processes and decisions involving them, those connected with access to adequate housing –settlements, shelters or land–; health care, education and food, respecting their own worldview, language and cultural processes.
4. In consultation with indigenous peoples, establish culturally relevant protocols and implement the adjustments required to create the appropriate conditions in shelters or settlements hosting communities on the go, as well as adequate exit strategies, taking into consideration the health care and biosecurity requirements to prevent the spread and infection of COVID-19 and other diseases.
5. Guarantee access to information for indigenous peoples living in both urban and rural zones. Especially information connected with the provision of services during the pandemic and handling cases of discrimination, racism, and gender-based violence. Information must be accessible and culturally appropriate in terms of both languages and formats for each community.
6. Focus on and strengthen culturally appropriate livelihood projects that include gender, age and diversity approaches and context analysis in consultation with indigenous peoples. .



1. In the context of the recommendations of the Special Rapporteur on the rights of indigenous peoples, in his report A/75/185/S of 20 July 2020, available on: <https://undocs.org/es/A/75/185>

TO MIGRATION AUTHORITIES



1. During the pandemic, consider economic alternatives to eliminate or reduce the costs involved in the migration regularization process in some countries in the region. This means costs concerning fines, passport renewals or other costs associated with the regularization process, taking into consideration the economic difficulties and difficulties in accessing decent work for Venezuelan refugees and migrants. Priority should be given to the populations which suffer disproportionate effects of the pandemic, such as women, female sex workers or those in a situation of prostitution, indigenous peoples and persons forcibly evicted.



TO POLICE AND ARMED FORCES



1. Design and implement capacity-building, training, and awareness-raising campaigns on the rights of refugees and migrants, at all hierarchical levels of said institutions. Programmes must include differentiated approaches analysing multiple vulnerabilities, providing tools to identify the specific needs of population groups, especially female sex workers or those in a situation of prostitution, indigenous peoples, and victims of forced evictions.
2. Establish action and assistance protocols, focused on human rights, for cases of forced eviction of Venezuelan refugees and migrants. These protocols should provide for measures including a gender, age and diversity perspective, especially with ethnic and cultural focuses, which respond to the differentiated impacts suffered by specific population groups.
3. Design assistance plans and protocols for the police response and handling in cases of sexual abuse and violence against Venezuelan refugee and migrant women, children, and adolescents. Incorporate protection and assistance mechanisms for female sex workers or those in a situation of prostitution in coordination with public ministries or national human rights institutions.
4. Guarantee the creation of plans/protocols to report cases of police abuse, harassment, and sexual violence securely and confidentially, and ensure survivors can access justice.

TO JUDGES AND JUDICIAL OFFICERS



1. Guarantee that Venezuelan refugees and migrants, especially the victims of forced evictions or sexual violence, have access in conditions of equality to effective and confidential legal resources and reporting mechanisms in secure conditions, and that they receive legal, medical, and psychological assistance appropriate to their status and specific needs, incorporating intersectional approaches such as gender, age, diversity and ethnic self-identification.
2. Implement protocols for handling gender-based violence that: i) guarantee the confidentiality of the processes and provide an adequate response to Venezuelan women refugees and migrants who are victims of sexual abuse or violence, especially trans women and female sex workers or those in a situation of prostitution when the aggressor is a national of the host country; ii) provide for differentiated measures for assisting trans women and female sex workers or those in a situation of prostitution (and their children) and include the specific features of sexual violence in the context of human mobility.
3. Guarantee full reparation for Venezuelan refugees and migrants who have been victims of abuse or violations of their human rights. Full reparation includes restitution, compensation, rehabilitation, satisfaction and non-repetition warranty measures.



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TQ NATIONAL HUMAN RIGHTS INSTITUTIONS²



1. Strengthen the processes of institutional oversight to promote and defend the human rights of Venezuelan refugees and migrants, regardless of their migration situation, ensuring access to protection and justice measures with special attention on indigenous peoples, victims of forced evictions and violence against women, trans women and female sex workers and those in a situation of prostitution.
2. Observe specifically the special protection needs of Venezuelan refugee and migrant populations made more vulnerable due to the differentiated impact of the pandemic and the contexts of illegal armed actors and organized crime networks such as: sex workers and those in a situation of prostitution, LGBTIQ+ persons and indigenous peoples.
3. Include in their training and capacity-building processes for their officials and government representatives the differentiated impacts of human mobility and the pandemic on indigenous women, girls, and female adolescents, trans women, female sex workers or those in a situation of prostitution and the victims of forced evictions as well as in the response to sexual abuse and violence against women and LGBTIQ+ people.
4. Give specific guidance sessions to women refugees and migrants who are sex workers or in a situation of prostitution which include information on human rights, possible forms of exploitation and reporting mechanisms available.
5. Support mediation processes in cases of forced eviction against Venezuelan refugees and migrants, prioritizing those which involve, among others, Venezuelan refugees, and migrants at risk of eviction, female sex workers or those in a situation of prostitution and indigenous peoples.
6. In cases of violence, sexual abuse, or sexual violence, provide legal guidance and support to victims, ensuring the activation of the existing protocols and the necessary safety, protection and confidentiality conditions for survivors.

2. EWithin the scope of recommendation i) of report [A/41/38/S](#) by the Special Rapporteur on the human rights of migrants.

7. Design and implement guidance and information events for Venezuelan refugees and migrants about their rights in connection with:
 - The role of the police, the safeguarding and respect of human rights,
 - Eviction mediation processes,
 - Violence or abuse against indigenous persons or peoples,
 - Violence against sex workers or those in a situation of prostitution,
 - Sexual abuse and violence against women, children and LGBTIQ+ people, and
 - The reporting mechanisms in the event of negligence, abuse or violation of human rights.



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TO INTERNATIONAL ORGANIZATIONS



1. Reinforce the human rights and collective rights approach in protection strategies/projects and in the provision of services for Venezuelan refugees and migrants.
2. Adapt the services and intervention strategies on offer to the protection risks emerging in the pandemic context, the financing available and the operating capacity, guaranteeing the complementarity, coordination, and rational use of the resources available, taking into special consideration the needs of female sex workers or those in a situation of prostitution, indigenous peoples, and evicted persons.
3. Strengthen the processes for consulting the population to guarantee the relevance of the actions to be taken. In the case of indigenous peoples, ensure staff is trained in collective rights and able to design processes that contribute to the cultural and physical preservation of these peoples.
4. Widely and adequately disseminate all Venezuelan refugees and migrants information about the provision of services available, support channels, criteria for prioritization.
5. Focus efforts on supporting and coordinating the response to victims of forced evictions or those at risk of eviction, the indigenous population, sex workers or those in a situation of prostitution and LGBTIQ+ persons as they suffer differentiated impacts during the pandemic.
6. Promote accountability processes to the Venezuelan refugee and migrant population to obtain feedback and identify possible gaps and proposals for future design and planning processes.
7. Strengthen advocacy work with key actors at a global and regional level, to guarantee the availability of the resources necessary to enhance the protection response and the expansion of specialized services (trauma care, legal representation, expansion of alternative housing for cases with high level of risk, etc.), to increase the impact of mitigating risk for groups in particularly vulnerable situations.



TO NON-GOVERNMENTAL ORGANIZATIONS AND CIVIL SOCIETY



1. Strengthen connections and the work between organizations at local, national, and regional level in matters related to preventing and responding to forced evictions, assistance for sex workers and work with indigenous peoples.
2. Strengthen, systematize, and coordinate the identification and referral processes that guarantee effective and priority access for the most vulnerable groups to assistance services and protection mechanisms. This should include Venezuelan refugees and migrants affected by the actions of illegal armed groups and organized crime networks linked to situations of eviction, commercial sexual exploitation and other incidents of violence and abuse, strengthening the response capacity through cash transfers, food banks, psychosocial assistance, legal advice, alternative care, among others.
3. Establish processes for identifying higher risk cases that include home visits and dissemination processes to strengthen accountability processes, monitoring of families assisted and mitigation of risks.
4. Strengthen the systems for verifying, prioritizing, and monitoring the conditions of families and persons who are recipients of the services. Establish home visits to determine the level of prioritization and support for beneficiary families and/or persons.
5. Adjust the prioritization criteria to the current needs of the population, to make transparent progress with assistance, ensuring verification and monitoring mechanisms.
6. Include the host community in the prioritization processes as cornerstone of integration processes for Venezuelan refugees and migrants that contribute to strengthening the social and community fabric and can contribute to reducing xenophobia and discrimination.
7. Strengthen the comprehensive monitoring systems for programmes and projects connected with services or direct transfers to Venezuelan refugees and migrants, in order to identify possible risks of extortion or others that may affect the integration process and expose families to new risks.

8. Include in the training and capacity-building processes tools for supporting the most vulnerable population groups during the pandemic, especially female transgender sex workers, evicted persons and persons in street situation, and indigenous peoples in urban contexts in a begging situation.
9. Identify and establish alliances with human rights organizations and/or law firms, to document and design strategic litigation strategies in cases of violence or abuse against Venezuelan refugees and migrants, especially special protection groups in which multiple human rights violations converge and where there is no fast and exhaustive response from the government institutions. The identification and strategic litigation of cases of evicted transgender women involved in sex work, evicted persons in street situation or facing further eviction risks, and indigenous peoples in street situation could improve the State's response.
10. Conduct local assessments of the economic initiatives that forcibly evicted Venezuelan refugees and migrants are designing and attempting to undertake as a response to the pandemic. Demarcate these initiatives within the employment needs and local context.

11. Guarantee support in terms of material and technical resources for economic initiatives prepared by Venezuelan refugees and migrants who are victims of forced evictions, as these will allow the economic recovery of this group in the medium and long term.
12. Design or strengthen projects focused on the economic and professional reintegration of women refugees and migrants in a situation of prostitution or female sex workers and forcibly evicted women, taking into consideration the need to tackle their reintegration into the labour market.



TO INTERNATIONAL COOPERATION



1. Carry out in-depth mapping of regional organizations that are supporting persons in a situation of prostitution, LGBTQ+ persons and indigenous peoples, to identify a strategy for channelling human, material and technical resources and strengthen the structure of these organizations.
2. By means of public-private partnerships, design and implement a virtual portal and/or geo-referenced mobile application that centralizes the information on access to government and non-government services and resources for the refugee and migrant population. Include information connected to regularization processes, access to international protection, assistance in cases of sexual or police violence, among others. The platform may provide access pathways, contact details and services provided for at a local and national level. If these initiatives exist, popularize the lessons learned in other host countries and cities and replicate best practices.
3. Promote and launch support networks and self-protection mechanisms for female sex workers or women in a situation of prostitution, supporting the consolidation of national and regional organizational processes that favour sharing knowledge and best practices and provide psychosocial assistance.
4. Support the development of regional protection analysis in technical terms, allowing the development of national and regional strategies and fuelling advocacy strategies to mitigate risks and effectively access protection, as well as contributing to adjusting the existing strategies/programmes/projects.
5. Assist in strengthening the existing organizational processes and designing self-protection measures that include developing call down procedures, safety protocols, human rights training, reporting, and recording cases, etc.
6. Include the situation of female sex workers or those in a situation of prostitution, especially transgender women, evicted persons and those at risk of eviction and refugee and migrant indigenous peoples in the advocacy and reporting processes of the mechanisms of the United Nations System, the Inter-American System and other actors involved in monitoring States' obligations and compliance with international treaties.



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TO THE PRIVATE SECTOR



By means of public-private partnerships:

1. Create mapping or diagnoses of labour and market needs in host cities and locations, focusing on access to employment and employability of refugees and migrants, particularly victims of forced evictions or female sex workers or those in a situation of prostitution, by means of developing livelihoods or entrepreneurship projects based on the results of this mapping. This prevents the market from being saturated, diversifying and filling vacancies identified in the local job market.
2. Create a job portal or labour exchange aimed at forcibly evicted refugees and migrants, female sex workers or in a situation of prostitution and indigenous peoples to promote the working conditions of these population groups mid-pandemic.
3. Forge partnerships to promote access to the internet for Venezuelan refugees and migrants, facilitating their access to information, protection measures and services. In the case of children and adolescents, measures of this type that guarantee their access to education.





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2

INTERNATIONAL FRAMEWORK OF HUMAN RIGHTS OF PERSONS IN CONTEXT OF MOBILITY AND COVID-19

2.1 RESPONSES FROM THE UNIVERSAL SYSTEM AND INTER-AMERICAN SYSTEM IN TERMS OF THE IMPACTS OF THE COVID-19 PANDEMIC ON THE RIGHTS OF REFUGEES AND MIGRANTS

As a reaction and response to the global pandemic situation caused by COVID-19, the various human rights protection systems, both the universal and the inter-American, have made a series of decisions developing guides and guidelines, calling on States and other actors to increase human right protection during this crisis. Along these lines, the Office of the United Nations High Commissioner for Human Rights (OHCHR) has developed a series called **COVID-19 Response “Human rights at the heart of the response”**. In this context, both the Office and various Special Rapporteur ship of the Universal Human Rights System have made specific calls to States to take the measures necessary to guarantee protection and respect of human rights during the COVID-19 context. The guides include themes such as: Human rights of migrants³, indigenous peoples⁴, LGBTI people⁵, among others.

The Committee on the Protection of the Rights of All Migrant Workers and Members of Their Families (CMW) and the Special Rapporteur on the Human Rights of Migrants, both of the United Nations, have also drawn up the Joint Guidance Note on the impact of the COVID-19 pandemic on the human rights of migrants⁶, in which they warn about the disproportionate effects of the pandemic on migrants and their families and make 17 recommendations to States in response to said effects in line with their human rights obligations. Subsequently, the Joint Guidance Note on Equitable Access to COVID-19 Vaccines for All Migrants was adopted by the Committee on the Protection of the Rights of All Migrant Workers and Members of Their Families, the United Nations Special Rapporteur on the Human Rights of Migrants, the Office of the High Commissioner for Human Rights (OHCHR), the Special Rapporteur on Refugees, Asylum Seekers, Internally Displaced

3. OHCHR, COVID-19 Response, *COVID-19 and the human rights of migrants: guide*, 7 April 2020.

4. OHCHR, COVID-19 Response, *what is the impact of COVID-19 on indigenous peoples' rights*, 29 June 2020.

5. OHCHR, COVID-19 Response, *COVID-19 and the human rights of Lgbti people*, 17 April 2020.

6. UN Committee on Migrant Workers and UN Special Rapporteur on the Human Rights of Migrants, *Joint Guidance Note on the Impacts of the COVID-19 Pandemic on the Human Rights of Migrants*, 26 May 2020.

Persons and Migrants of the African Commission on Human and Peoples' Rights, the Special Representative of the Secretary General on Migration and Refugees of the Council of Europe and the Rapporteur on the Rights of Migrants of the Inter-American Commission on Human Rights (IACHR).⁷

In connection with evictions, the Special Rapporteur on the right to adequate housing of the Universal System issued the Guidance Note on COVID-19: Prohibition of evictions⁸. In the note, the Rapporteur states that forced evictions are a violation of international human rights law and is inconsistent with the “stay home” policy, exposing people to the risk of becoming homeless, directly relating this situation with the right to access adequate housing.

At a regional level, the Department of Social Inclusion of the General Secretariat of the Organization of American States (OAS) in its “Practical Guide to Inclusive Rights-Focused Responses to COVID-19 in the Americas” urged Member States to create specific response programmes and policies for the migrant population, indigenous communities, members of the LGBTI community, among others⁹.

Meanwhile, the Inter-American Commission on Hu-

man Rights (IACHR) approved Resolution 1/2020, Pandemic and Human Rights in the Americas¹⁰, bringing together recommendations to protect vulnerable groups including persons in a situation of human mobility, indigenous peoples, women, LGBTI people and street people. The IACHR has also issued a series of statements and press releases connected with the impacts of the COVID-19 pandemic, focused on specific populations, including migrants, refugees, and displaced persons¹¹; indigenous peoples¹²; Venezuelans in Venezuela and the region¹³; and about themes such as domestic violence¹⁴ and human trafficking¹⁵.

It is important to note the statement on the right to access information prepared by the rapporteurships of the Universal System and the Inter-American System in which they urged States to ensure internet access to ensure the information, both to prevent infection and to provide assistance to everyone¹⁶.

Meanwhile, the Inter-American Court of Human Rights adopted Statement 1/20 “COVID-19 and Human

7. Committee on the Protection of the Rights of All Migrant Workers and Members of Their Families et al., *Joint Guidance Note on Equitable Access to COVID-19 Vaccines for All Migrants*, 2021.

8. OHCHR, Guidance Note on COVID-19: *Prohibition of evictions*, Leilani Farha Special Rapporteur on the right to adequate housing, 28 April 2020.

9. General Secretariat of the OAS http://www.oas.org/es/sadye/publicaciones/GUIDE_ENG.pdf

10. Inter-American Commission on Human Rights, Resolution 1/2020. Available on: <http://www.oas.org/en/iachr/decisions/pdf/Resolution-1-20-en.pdf>.

11. OAS, Inter-American Commission on Human Rights, press release 077, *The IACHR urges States to protect the human rights of migrants, refugees and displaced persons in the face of the COVID-19 pandemic*, 17 April 2020

12. OAS, Inter-American Commission on Human Rights, press release 103, *IACHR Warns of the Specific Vulnerability of Indigenous Peoples to the COVID-19 Pandemic, Calls on States to Adopt Targeted, Culturally Appropriate Measures that Respect These Peoples' Land*, 6 May 2020

13. OAS, Inter-American Commission on Human Rights, press release 064, *IACHR and its SRESCER Deeply Concerned about the Impact of COVID-19 Pandemic on Venezuela, Call for Safeguards for the Rights of Venezuelans around the Americas*, 29 March 2020.

14. OAS, Inter-American Commission on Human Rights, press release 074, *The IACHR calls on Member States to adopt a gender perspective in the response to the COVID-19 pandemic and to combat sexual and domestic violence in this context*, 11 April 2020

15. OAS, Inter-American Commission on Human Rights, press release 183, *On World Day Against Trafficking in Persons and in the Context of the COVID-19 Pandemic, the IACHR Urges States to Identify and Protect Victims of Human Trafficking, Particularly Women and Girls*, 29 July 2020

16. OAS, Inter-American Commission on Human Rights, press release R58/20, *COVID-19: Governments must promote and protect access*

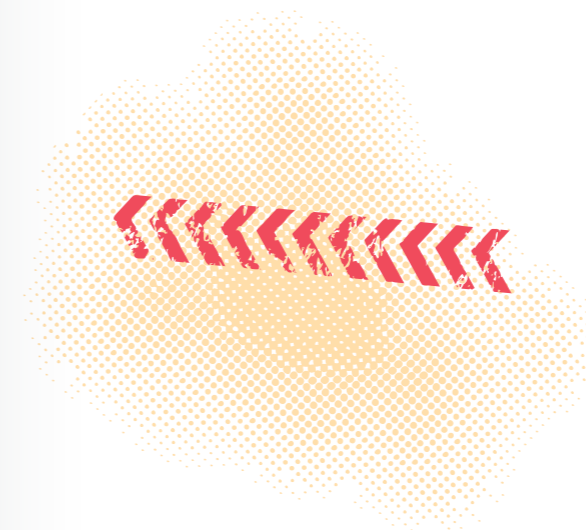
...forced evictions are
**a violation of
international human
rights law** and is
inconsistent with the
“stay home” policy,
exposing people to
the risk of becoming
homeless...

SPECIAL RAPPORTEUR ON THE RIGHT TO ADEQUATE HOUSING OF THE OHCHR



Rights: Problems and Challenges must be Addressed from a Human Rights Perspective and with Respect for International Obligations”. Along these lines, the Court stated that “given the nature of the pandemic, the economic, social, cultural and environmental rights must be guaranteed, the economic, social, cultural and environmental rights must be guaranteed, without discrimination, to every person subject to the State’s jurisdiction and, especially, to those groups that are disproportionately affected because they are in a more vulnerable situation, such as older persons, children, persons with disabilities, migrants, refugees, stateless persons, persons deprived of liberty, the LGBTI community, pregnant or postpartum women, indigenous communities,

the homeless, those living in poverty, and the health care personnel who are responding to this emergency.” In addition to the foregoing, it also upheld that “at times such as this, it is especially important to ensure, promptly and appropriately, the rights to life and health of everyone subject to the State’s jurisdiction without any discrimination, including older persons, migrants, refugees and stateless persons, and members of indigenous communities.”¹⁷



Afrodescendants, those who work in the informal sector, the inhabitants of underprivileged districts or ar-

to and free flow of information during pandemic – International experts, 19 March 2020

17. OAS Inter-American Court of Human Rights, *Statement 1/20, COVID-19 and Human Rights: The Problems and Challenges must be Addressed from a Human Rights Perspective and with Respect for International Obligations*, 9 April 2020.



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3

MAIN FINDINGS

3.1 DISCRIMINATION, RACISM, AND XENOPHOBIA

The inter-American Principles on the Human Rights of All Migrants state that all persons in the context of human mobility “have the right to live free from stigma, stereotypes, prejudices and practices of intolerance”¹⁸ However, Venezuelan refugees and migrants are recurring victims of various forms of discrimination, racism and xenophobia in their host cities and countries. This situation has become particularly acute during the COVID-19 pandemic. Along these lines, the Office of the United Nations High Commissioner for Human Rights has upheld that: “In situations of fear and uncertainty, such as the current pandemic, migrants and minorities associated with migration can be particularly vulnerable to attitudes and behaviors that stigmatize and scapegoat them.”¹⁹

During the investigation described in this report, Venezuelan refugees and migrants asserted they were victims of discrimination, racism or xenophobia, identifying this as the main cause of violence against them which they perceive has increased during the pandemic and lockdown. The diagnosis indicates that cases of discrimination, racism and xenophobia have increased or become more acute both in the response of the State institutions and in the behaviour of the population in host communities. The situations include, among others: access to health care denied, even to those affected by COVID and their minor children; obstacles to accessing information and justice; processes of forced eviction and migration controls; and language barriers in non-Spanish-speaking countries.

A. PERSONS SUBJECT TO OR AT RISK OF FORCED EVICTIONS

One of the causes of **forced evictions** identified was difficulties in paying rent, combined with discrimination due to their nationality and migration situation. Female respondents who were evicted or at risk of eviction reported targeting linked to their nationality in contexts of harassment and sexual violence by landlords to prevent eviction. This type of situation particularly affects female sex workers and/or women in a situation of prostitution and heads of households²⁰. Transgender female sex workers expressed that this type of situation is widespread within the LGBTIQ+ community but that reports to the competent authorities had no effect.

*I lived in a rented property, we were evicted because we lost our jobs. We are now living in another rented property, but they only gave us the walls, we had to put on the roof (corrugated iron) and doors. Eight of us live there (me, my wife, our three children, my in-laws and my brother who has a disability). **As we don't have jobs the landlord is evicting us.***

*I have walks around and see “for rent” but there are places where you ask and they say “we don't rent to Venezuelans”. Others are very expensive, and we have no money for rent. Some say that we Venezuelans are bad, that we steal and kill so they say, **“no because you are Venezuelan”, because “you are venecos”**²¹.*

18. IACHR, *Inter-American Commission on Human Rights - OAS, 2019.*

19. OHCHR, 2020.

20. Focus groups organised with evicted persons

21. Focus Group with evicted persons



B. FEMALE SEX WORKERS OR THOSE IN A SITUATION OF PROSTITUTION

For **female sex workers or those in a situation of prostitution**, the discrimination and xenophobia that already existed became more acute during the pandemic. In their case, the discrimination they suffer is linked to nationality, migration situation, gender identity and/or in some cases their profession or job. Their increasing vulnerability, both in practice of their profession and when receiving assistance from State institutions, has affected access to health care, justice, and information, and in some cases, the safeguard of access to international protection and processes for regularizing their migration situation²².

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*“I don't feel it's only because of nationality, if it was only because of nationality it would also happen with women who also practice sex work at night and in the full light of day. I feel it is because of our gender and the work we do. So, they want to show an image of respect, it's just for show: they don't respect us as a population, or as migrants or for our gender. (...) Or in the hospitals where we are treated. If clients hit us they don't treat us and the police don't do anything, rather we are evicted, they give us the run around and they don't let us ask for help. **They see us as 'thieves, insects'**”²³*

22. Focus groups organised with female sex workers.

23. Focus group organised with female sex workers.



C. INDIGENOUS PEOPLES

In the case of **indigenous peoples**, racism and xenophobia, from both the government and its institutions and from the population in general, intersect. These communities identify this situation as historical and structural, but it has intensified due to the pandemic, making them more vulnerable.

The lack of knowledge by some authorities about their traditions and customs and prejudices and cultural stereotypes combine with the denial of access to health care services, the difficulties in accessing lands in line with their worldview and their relationship with earth and territory, such as lands suitable for housing which allow for self-consumption growing, have basic services and favour social distancing and biosecurity measures. The above sometimes combine with rejection by part of the population in host communities, not only because they are indigenous, but “Venezuelan indigenous”. They are also stigmatized for their economic situation, culture, physical appearance and sanitation and hygiene conditions²⁴.

“If we had any difficulty – in the bank – they refused to serve us because we were indigenous. They refused to pay us because they believed we were indigenous Bolivians. It was explained we were Venezuelans and that the documentation was valid. There were months of failed meeting in the bank, until the legal adviser [of the organization supporting us] began the process, the bank understood, and the employees were given preparation on the refugee protocol and the Warao community. The service completely changed, now they know how to serve us and deal with us, they know how difficult it is to be foreign and not speak Spanish. Some of us only speak Warao”²⁵.

3.2. MIGRATION SITUATION AND INTERNATIONAL PROTECTION

The lack of knowledge about access to international protection, the regularization processes, and their respective costs, together with the closure and transition to online working of the institutions responsible, are two of the transversal obstacles identified by Venezuelan refugees and migrants in the various countries in which the research was carried out.

Both in the regularization processes and in the access to international protection, fraud cases were reported in different countries. This type of situation particularly affects female sex workers or in a situation of prostitution.



*“Most of the scams have been in regularization: **they post online that they help to process passports and they scam us, we pay large sums of money that are difficult to obtain.** They ask for a payment upfront and then they don't deliver, they open new profiles on Facebook. They offer services to process Venezuelan documentation and to make appointments in the countries. People are trusting and they get scammed. These scam networks circulate on Facebook and WhatsApp”²⁶.*

24. Focus groups with indigenous peoples.
25. Focus Group with indigenous peoples.

26. Feedback session with female sex workers or those in a situation of prostitution.

3.2.1. Obstacles to accessing identity and migration documents

The difficulties in accessing identity and migration documentation have led to Venezuelan refugees and migrants accepting poorly paid informal or formal jobs or being subject to conditions of labour exploitation and not feeling they have equality to report these situations or access to social protection. This creates a sensation that they have no rights: “we are worth nothing here”, said a person in one of the focus groups²⁷.

“This is one of our priorities, because with no valid passport or if not in a legal situation we feel we have no rights and are not able to demand that the authorities serve us”²⁸.

Despite this, a high number of people participating in the diagnosis who had been evicted or were at risk of eviction, in a situation of prostitution or female sex workers and members of indigenous peoples stated they did not know the access pathways or know which institutions to contact or the costs and requirements to be met during the migration regularization processes²⁹.

Those who managed to identify routes to regularization encountered difficulties during the pandemic, such as closures of the offices responsible for carrying out these formalities³⁰ or online services, prolonging processing times and having an impact on the change in the population's priorities in the face of their immediate needs. For example, those who had savings to pay the regularization process were forced to use the money on other priorities, such as paying for food or accommodation to avoid being evicted³¹.

The high costs of the regularization processes in some countries constitute another barrier faced by Venezuelan refugees and migrants, including among others: payment for issuing or renewing a Venezuelan passport, and the formalities for issuing visas or residence permits depending on the countries and, sometimes, fines for having them expired.

*“The economic issue is always a difficulty for those working day to day who never manage to have enough money to pay the costs. Moreover, offices for carrying out the processes were closed. It has now become more acute with the pandemic because as they are not working as much they have less money to cover the costs and fines, **it has become an uphill struggle**”³².*

27. Focus groups with female sex workers and evicted person

28. Focus Group 05. Forced Evictions.

29. Ibid 28

30. GF-P-Ind-03, GF-Desl-FZ-04. This situation was seen in countries such as Brazil, where the federal police is responsible for the regularisation process, and it was closed during the pandemic, obstructing the formalities by Venezuelan organisations and people seeking asylum or regularisation.

31. GF-Desl-FZ-01, GF-Desl-FZ-02 and GF-Desl-FZ-05.

32. Feedback 01, Sex workers.

Some institutions responsible for the migration regulation processes set up an online service to prevent crowds and comply with biosecurity rules. However, for Venezuelan refugees and migrants this service format has not always been easy to access. Firstly, not everyone has access to electronic means – computers, smartphones, or tablets – or they do not have access to internet to carry out these formalities virtually. Additionally, even on online platforms, the processes must be carried out directly by the refugee or migrant, limiting the support from organizations that could help them in the process.

The cost of fines for late regularization, the costs of issuing or updating residence cards³³ and travel to the organizations to receive help and guidance with the processes constitute additional barriers to accessing documentation.

“This is the other issue that has got worse with the pandemic. I have a refugee visa that has to be renewed every three months; it expired during the pandemic and I have tried to renew my visa through various organizations. I haven't been able to do it because there is no face-to-face service in the citizen's advice centre, everything is digital. I haven't had a response. So I don't have a valid visa. During the pandemic I found a job, which I lost because my visa was expired. (...) One day I went out to take my children to the park, Immigration stopped me and gave me a warning that I had to leave the country in the next 30 days because I didn't have a valid visa. Even when we have valid passports and even though I had my last eligibility interview digitally, I have no document to demonstrate that I am legal in the country, since I applied for the visa. Nobody answers at the DPI, there is no response”³⁴.

33. GF-DesI-FZ-05, Feedback-DesI-Fz-02, Feedback-PTSX-01.

34. Focus Group 01, Forced Evictions.

35. GF-Del-FZ-04, GF-PTSX-05, GF-PTSX-07, GF-PTSX-08.

For refugees and migrants in Caribbean countries and Brazil, the language presents an additional barrier. In most cases in the institutions responsible for the regularization processes the information that contains the requirements, the steps to take and the offices to visit are in the official language of the countries and there is no information in Spanish, constituting a de facto obstacle to their migration and international protection processes³⁵.

A. FEMALE SEX WORKERS OR PERSONS PRACTISING PROSTITUTION

In the case of **female sex workers or those who practice prostitution**, the greatest vulnerability factor reported was the absence of the Venezuelan identity document and feeling that they are discriminated in the regularization process for being women, Venezuelan and, in some cases, for being sex workers³⁶. “For both reasons, because we come from another country and because we are prostitutes”³⁷, said one woman.

They say that by having a Venezuelan passport job opportunity are opened and they can become “legal” in the host country. When their passports have expired, they cannot apply for any benefit³⁸. The lack of documentation causes the violence and abuse they suffer from the owners of the bars where they work, or from clients. They suffer not only economic abuse, but also sexual abuse: “they want us to sleep with them for a badly paid job”, threatening to report them to migration authorities.

“We are often asked for our passport, permit or residence card to carry out sex work.

If we don't have a passport we have to hide when the authorities come, we are more exploited, they pay us less”³⁹.

36. GF-PTSX-01, GF-PTSX-02 and GF-PTSX-03.

37. GF-PTSX-05

38. GF-PTSX-01 and Feedback-PTSX-01.

39. Feedback 01, Sex workers.



B. INDIGENOUS PEOPLES

In the case of **indigenous peoples**, the situation varies depending on the country they are in. “*For indigenous peoples there are no borders*”⁴⁰, it is all one territory: the “*Wayuu Nation*”, the “*Motilón Bari Nation*” or the Warao territories. Despite this, they recognize they are in a different country, with the laws and regulations specific to each one.

During the diagnosis, it was identified that while in Guyana and Brazil the regularization and/or residence permit processes for the communities of indigenous peoples are carried out relatively easily, with the

40. GF-P-IND-04, GF-P-IND-08, EP-P-IND-01.

support of international organizations or civil society for the formalities⁴¹; in Colombia the situation is different. Although cross-border indigenous peoples are considered binational – Colombian-Venezuelan –, in practice the lack of an agreement between the two countries makes it difficult for Colombian nationality to be recognized for indigenous persons born in Venezuela, belonging to indigenous peoples such as the Wayuú or the Motilón Bari.

In these cases it was documented that there was an absence of collective regulation mechanisms used to obtain Colombian nationality or Colombian residence permits for those belonging to a single community or family.

In this case, the lack of regularization and access to documentation has deepened the gap in assistance provided by the Colombian authorities and public institutions to people from the Wayuú and Motilón Bari communities, a gap demonstrated by the denial of access to health care, land, and territory, drinking water, education and justice⁴².

“We urgently need something that identifies us, something that gives us the right to have an IPS (health care) and documentation for job issues. There are many children with many needs and they are denied opportunities because they don't have a birth certificate or identity card (...) There are many elderly people who have no documents, nor their children (...) there are many children who do not receive education, health care or other benefits. They don't exist for the State. The elderly don't receive State benefits. Without documents we are nobody. Their professional sons and daughters have no jobs because they don't have document”⁴³.

41. GF-P-IND-03, GF-P-IND-01, GF-P-IND-06 and EP-P-IND-01.
42. GF-P-Ind-04, GF-P-Ind-05 and GF-Ind-08.
43. Focus Group 04, Indigenous Peoples.

3.2.2. Obstacles to accessing recognition of refugee status and international protection

In addition to the absence of information about access to international protection there is a lack of clarity about the scope of recognition of the refugee status in terms of rights and access to State services and programmes.

The diagnosis showed that specifically persons in a situation of prostitution or female sex workers whose refugee status is recognized or whose application is in process do not identify a specific protection impact of this recognition in terms of respect of their rights or improvement in their living conditions and protection⁴⁴. Conversely, situations were identified in which, despite recognition of the refugee status or being applicants for such status, they were denied care in hospitals and health centres and, in some cases, were even victims of abuse of authority and sexual abuse by members of the police forces⁴⁵.

“And then the police if you go out on the street for a bit they want to give you the run around, they want to take your things, they don't let you walk around, if you are looking for work, such as for example on Tuesday I had a client, I came to José Grande, just as there was a raid, they caught me and the little I did to get home they took the money, if I don't give it to them I'm undocumented. Why? Because I have a refugee card that is useless to me, because we thought having refugee status would take a weight off us and give us work, how many people here wouldn't like to have a decent job, but they don't give us one because this card is worthless and the police aren't interested”⁴⁶.

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44. GF-PTSX-01.
45. GF-PTSX-01, GF-PTSX-02, GF-PTSX-03
46. Focus Group 01, Sex workers.



3.3 ACCESS TO WORK IN DECENT CONDITIONS

The pandemic made informal working conditions more precarious: many people lost the possibility of working selling things on the street or were forced to go out during lockdown or during curfews, not only exposing themselves to the risk of COVID-19 infection but also fines or penalties from the police forces⁴⁷.

Increased labour exploitation was also identified, in the form of working days that exceed the legal working day and the normal regulatory workloads, and in some cases the retention of passports or documents for payment on consignment of products to sell on the streets, situations that may also be classified as human trafficking⁴⁸.

“I paid the rent to the woman cleaning her house, but she practically exploited me because it was from 6am to 8pm”⁴⁹

The lack of access to work also influenced the increase in **domestic violence**. Respondents shared their experiences of how the lack of a basic income, overcrowding, being locked up and school closures, among other factors, increased tension within families, generating higher impacts in cases of domestic violence⁵⁰.

The lack of income and the pressure linked to this situation intensified **abuse against women, especially** single mothers and LGBTIQ+ people. Participants in the diagnosis stated they perceived an increase in situations of transactional sex, survival sex and requests for sexual favours in return for access to work and/or economic remuneration⁵¹. During the focus groups a lack of job opportunities and of economic income was also identified as leading people to practise prostitution for the first time during the pandemic⁵². This situation was recorded for both women and men, and especially through sex webcam services.

A. SEX WORKERS OR PERSONS PRACTISING PROSTITUTION

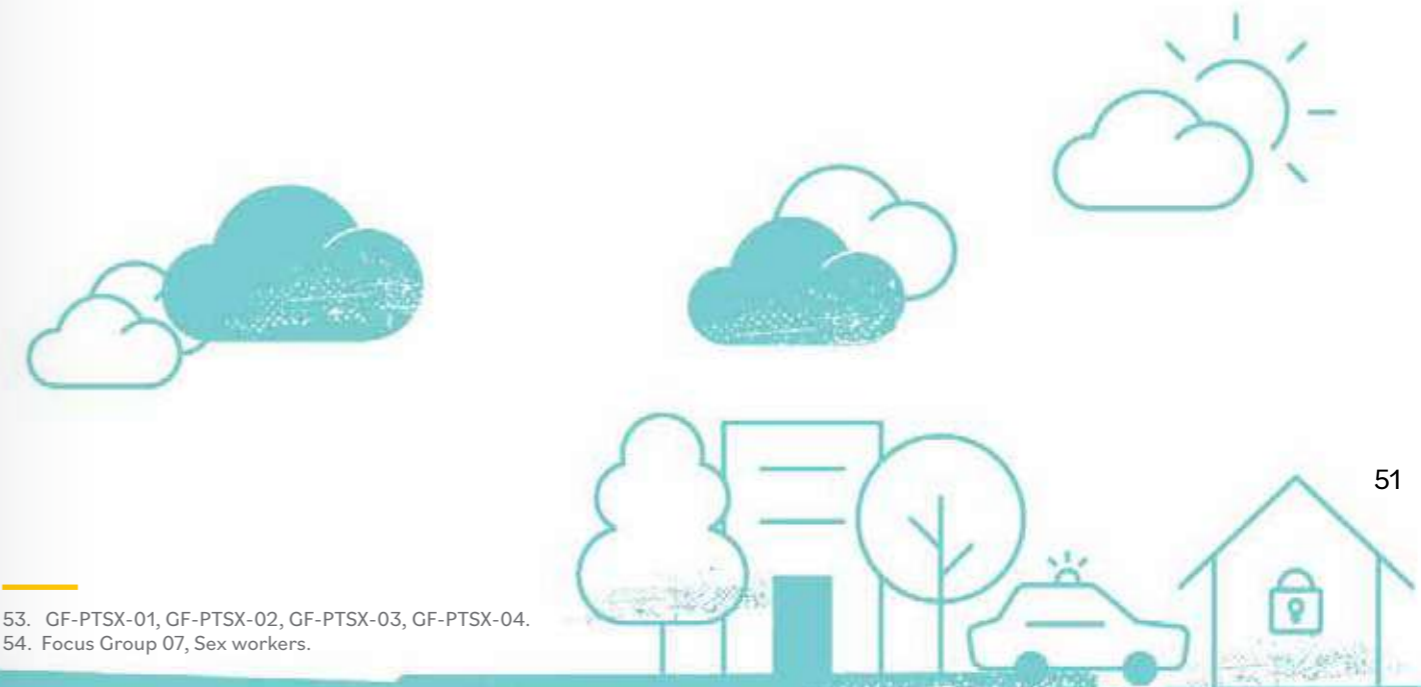
In the case of **female sex workers or those practising prostitution**, the close of bars or venues where they practised their trade in many cases meant going out on the street to do so, facing risks to their physical safety and health. Given the lockdown and time restriction measures, women faced the need to provide the service in insecure areas to unidentified persons, unlike the procedures in existence in the venues where they previously worked. In some of these cases women reported situations of sexual, emotional, and psychological abuse not only from their clients but also members of the police forces who, under the guise of monitoring compliance with the curfews imposed in some countries,

detained them and sexually abused them.⁵³ When investigating these cases female sex workers stated that when they attempted to report the offences they were threatened and intimidated without managing to access legal proceedings or procedures for reporting cases of sexual abuse.

They also reported not having sufficient access to sexual and reproductive health measures, especially those related to preventing sexually transmitted diseases, or the biosecurity elements required to prevent COVID-19 infection.

“When working in bars there are certain levels of safety, there is private security or 'bodyguards' who protect us from attacks by clients or warn us about raids by the police forces”⁵⁴.

In this context transgender female sex workers disproportionately absorb the impact as they are victims of persecution, finger-pointing, and stigmatization by both the host communities and employees of the competent entities. In the specific case of one of the countries in which the focus groups were conducted, women stated they knew the focal point for the LGBTIQ+ community in the police force and had a favourable working channel; however, they mentioned that the rights and responsibilities are not circulated to those who regularly patrol the streets and who normally commit the abuses recorded.



53. GF-PTSX-01, GF-PTSX-02, GF-PTSX-03, GF-PTSX-04.
54. Focus Group 07, Sex workers.

47. GF-PTSX-1, GF-PTSX-2, GF-PTSX3, GF-Desl-FZ-01 and GF-Desl-02.
48. GF-Desl-FZ-01, GF-Desl-FZ-02, GF-Desl-FZ-05.
49. Focus Group 02, Forced Evictions.
50. GF-Desl-FZ-01, GF-Desl-FZ-02, GF-Desl-FZ-03, EP-PTSX-02, GF-PTSX-01, GF-PTSX-02, Feedback-PTSX-01.
51. GF-Desl-FZ-02, GF-Desl-FZ-04.
52. GF-Desl-FZ-02, EP-PTSX-03, EP-PTSX-04, EP-PTSX-01, EP-PTSX-02, GF-PTSX-06.

3.4 ACCESS TO HEALTH CARE

In terms of health care, not only was the difficulty in accessing treatment for COVID-19 cases identified, but also the obstacles to accessing treatment of other diseases and, in some cases, chronic illnesses. This has demonstrated that one of the consequences of the fact that health care services have focused on caring for COVID-19 cases was the lack of medical resources for responding to the population's other needs.

This situation has had a greater impact on specific groups, such as those with chronic illnesses, the elderly, single mothers and children and adolescents and some children of female sex workers, who stated they had the perception that during the pandemic they were “seen as a source of infection not as rightsholders”⁵⁵.

During the information-gathering, cases were identified of people with illnesses such as cancer and fibromyalgia, where during the pandemic their diagnoses worsened due to lack of access to medical treatments and the absence of economic resources⁵⁶. A case was also identified of a girl with functional diversity needing specialist medical treatment, to which she did not have access during the lockdown⁵⁷.

*“I took my three-year-old son to the hospital at 4:00 in the afternoon, it was 9:00 at night and **the child had convulsions, he had fainted, and they didn't see him, they didn't seem him because he didn't have documentation, because he didn't have SIS (Integrated Health Insurance). They didn't treat my son. (...) They sent me to the Office for Women, but the first thing they asked me for there was the residence card, and I didn't have it. (...) When you tell them you are a sex worker, they look at you as if you are a freak**”⁵⁸.*

“My oldest daughter, with functional diversity, caught COVID. We went to the hospital for her to be seen and they treated us very badly, they wouldn't see us. We had to bring back the sick child”⁵⁹.

During the pandemic and the lockdown, multiple cases were observed of effects on the **mental health** of the Venezuelan refugees and migrants who took part in the diagnosis. The anguish and uncertainty caused by their situation of human mobility led to problems of depression, anxiety, and panic attacks, as well as post-traumatic stress as a result of being closed in and the concern about their health and economic status⁶⁰ without the support necessary to handle these problems,⁶¹ in addition to unhandled events of abuse and sexual and domestic violence. Although some organizations are providing psychosocial and/or psychological support virtually, the challenges of working online combine with the lack of ongoing effective treatment to handle trauma and not isolated one-off assistance.

“While the economic part affected us a lot, we are people who obviously, as my colleague said, are foreign: we are doubly affected, mistreated, we have been unfairly attacked for being who we are. In my case, I have a little girl who had a tumour detected on the left ovary, and really I have been very affected financially; in fact, my daughter caught COVID. I have had to go out on the street however I can, sometimes I'm afraid. I don't know what to do (...). In the case of my daughter, her health, I have had to stay at home a lot now, remember we can be infected more likely, even with prevention measures (...) I have been affected, very affected psychologically, because they haven't treated me as they should, especially my daughter's health”⁶².



59. Focus Group 01, Forced Eviction

60. GF-Desl-FZ-01, GF-Desl-FZ-02, EP-PTSX-02, EP-PTSX-04, GF-PTSX-01, GF-PTSX-02, GF-PTSX-09, GF-PTSX-10, Feedback-PTSX-01.

61. GF-PTSX-01 and GF-PTSX-03.

62. Focus Group 1, Sex workers.

55. GF-PTSX-03.

56. GF-Desl-FZ-02, GF-Desl-FZ-03, GF-PTSX-07, Feedback-PTSX-01

57. GF-Desl-FZ-01

58. GF-PTSX-01.



3.5 HOUSING, LAND AND TERRITORY

The crisis generated by the COVID-19 pandemic has highlighted that access to decent and adequate housing⁶³ is still a challenge for a large part of the world's population. In some cases, the absence of decent housing conditions means that “staying home” is difficult, if not impossible, for Venezuelan refugees and migrants. Most people lack safe and adequate housing, whether in formal or informal settlements, or in shelters where they take refuge collectively. Requirements such as liveability, physical distancing and regular handwashing are difficult to meet.

A constant identified during the diagnosis was the precarious nature of accessing adequate housing for Venezuelan refugees and migrants in the three population groups on which this diagnosis focuses. The problem of forced evictions was also identified: during the pandemic its causes and consequences have particularly affected female sex workers and those practising prostitution, as well as the indigenous population.

3.5.1. Difficulties in accessing housing

The obstacles faced by Venezuelan refugees and migrants to accessing housing in decent conditions include:



63. Components of the right to decent housing are legal security of the possession – whether owned or rented –, availability, proximity of services, sustainability of costs, liveability, adequate location and cultural suitability (DESC, 1991).

This situation of precariousness in accessing housing became more acute during the pandemic; with difficulty in paying rent and overcrowding two of the main causes of forced eviction identified during the diagnosis⁶⁴.

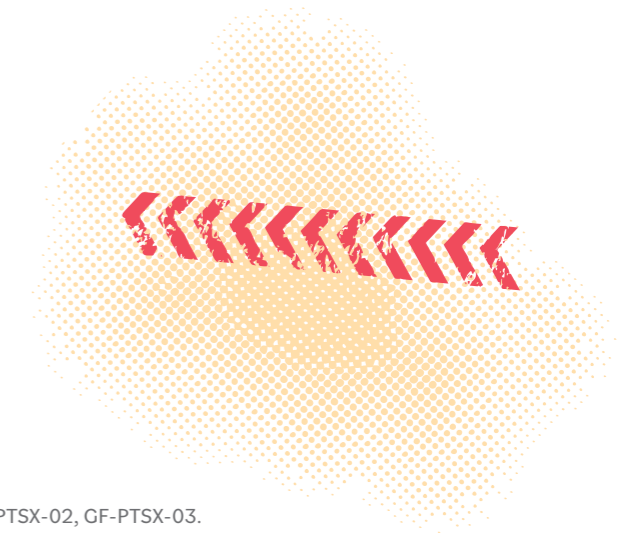
In the Caribbean countries in which information was collected the access to renting housing is a significant problem due to the conditions of poverty; the pandemic has added to the high housing cost due to oil exploitation, such as the case of Guyana. This makes it even more difficult for Venezuelan refugees and migrants to access housing, especially for female sex workers and those practising prostitution.

The “high costs of rents” charged to Venezuelans⁶⁵, have forced large families to share a single room or to live in houses without adequate conditions: corrugated iron roofs, dirt floors, plots without adequate sanitary installations, without access to drinking water and in some cases without ventilation or access to daylight, making the housing unsafe and unliveable⁶⁶.

Along these lines, safety in terms of both housing conditions and the areas in which they are located lead to more vulnerable conditions for children and adolescents. On the one hand they are exposed to risks of violence or sexual violence and exploitation, and on the other hand, in some cases making access to education difficult, whether virtual, due to the lack of adequate physical and technological resources, or face-to-face, given that the locations of study are far from their homes.

3.5.2. Violence during evictions and in the risks of eviction

Added to this context was the need to host in small living spaces relatives and other Venezuelans who had been evicted. In some cases, this led to situations of overcrowding, causing tensions with the landlords who at times reported the Venezuelan refugees and migrants to the authorities and other times carried out forced evictions directly.



64. GF-Desl-FZ-01, GF-Desl-FZ-02, GF-Desl-FZ-03, GF-PTX-01, GF-PTX-02, GF-PTX-03.

65. Feedback-Desl-Fz-01, GF-Desl-FZ-01, GF-P-Ind-01

66. GF-Desl-FZ-01, GF-Desl-FZ-02, GF-Desl-FZ-03, GF-P-Ind-4, GF-P-Ind-5, GF-PI-06, GF-PI-07.

““(…) Because today thank God, for good or bad, we are going and God knows what will happen to us. Today the Venezuelan sister is telling us that we can stay there, I don't know for how long, if suddenly she starts having problems. Because, just like this girl did us the favour of giving us accommodation, it's not her house, she's paying rent too, and unfortunately we caused her problems because there are a lot of us and they are getting us out. (…)**Sometimes the violence is not hitting, it's the words, the looks, so many things that we feel very humiliated**”⁶⁷



The inability of Venezuelans to pay leads to situations of abuse and violence by landlords, with cases of abuse occurring during the mediation processes or payment offers. Example of some “alternative” payment methods were long days in domestic tasks in return for not evicting families from their homes: the elderly, women and children were some of the victims of this practice of “exchange”⁶⁸.

“The time we have been in this house my children have cleaned part of the grass, the lawn. We have to clean the lawn. The lawn is very large and my children had to clean it and when they arrived [the owners] they didn't even say thank you, (…)**it is a horrible humiliation. They told me I had to clean the whole front part of the house where we are living**”⁶⁹.

Events of violence or destruction of the property of Venezuelan refugees and migrants were also identified during or before evictions. Situations were documented such as utilities being cut off (water and electricity) and even internet which, although not considered a basic utility, for refugees and migrants is vitally important as this is the means with which they communicate with their families in Venezuela, with their support network in the host cities, with the public institutions and with the organizations providing them assistance and advice. This situation is even more important in the case

68. GF-Desl-FZ-01, GF-Desl-FZ-02, GF-Desl-FZ-03.

69. Focus Group 02. Forced Evictions.

70. See: UNESCO, Global Monitoring of School Closures caused by COVID-19; UNICEF, Latin America and the Caribbean is home to 3 out of 5 children who lost an entire school year worldwide. The region is facing the world's longest school closure, in: <https://www.unicef.org/lac/en/press-releases/latin-america-and-caribbean-is-home-of-3-out-5-children-who-lost-an-entire-school-year-in-the-world>; UNICEF, COVID-19: over 97 per cent of students still out of the classrooms in Latin America and the Caribbean, available in: <https://www.unicef.org/press-releases/covid-19-over-97-cent-students-still-out-classrooms-latin-america-and-caribbean>; UNDP, UNICEF and UNDP report reveals the impact of the pandemic on education, available in: <https://www.latinamerica.undp.org/content/rblac/en/home/presscenter/pressreleases/2020/informe-unicef-y-pnud-evidencia-impacto-de-la-pandemia-en-la-edu.html>.

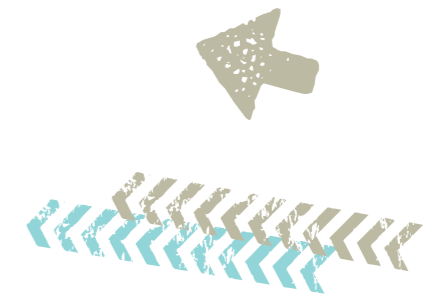
71. GF-Desl-FZ-01, GF-Desl-FZ-02, GF-Desl-FZ-03, GF-Desl-FZ-04, GF-PTX-01, GF-PTX-02, GF-PTX-03, EP-PTX-04.

72. GF-PTX-01, GF-PTX-02, GF-PTX-03, Feedback-PTX-02.

73. GF-Desl-FZ-01, GF-Desl-FZ-02, GF-Desl-FZ-04, GF-PTX-01, GF-PTX-02, GF-PTX-03.

of families with school-age children, given the fact that classes are online, especially in the countries of Latin America⁷⁰, in the pandemic context⁷¹.

In many cases, the evictions involved abuse or sexual violence. Transactional sex or sex with adolescent daughters of Venezuelan women, especially female sex workers or those in a situation of prostitution, is proposed in exchange for staying in the housing, “because that's our job”⁷². These situations had a specific effect on women, single mothers, girls, adolescents and gay people⁷³.



“(...) I have the bad experience, and it is already enough, to be a single mother and end up living in a place where the landlord is a man, they tend to make mistakes, complicate things or seek other interests, definitively sexual. Where I was living, just when the pandemic and quarantine arrived, the owner was a man. This person threatened that he was going to take away the water and electricity, essentials, especially when we have children and even more when with special needs. Then, he made requests for sexual exchange. (...) I consider that I am sane due to psychological support, because it has been very difficult. So if that is not violence what is? If I don't satisfy his needs, either with my daughter or me, we are on the street. That's extreme. That is why we moved to an unliveable place, with no water; my son is now suffering the consequences, his body is full of fungus, he's pretty sick. For fear of sexual attack and fear of being on the street”⁷⁴.

74. Focus Group 01. Forced Evictions.



It was identified that female sex workers or those working in prostitution generally have access to three housing types:



Of the three circumstances, the last has the most risk of eviction: by paying on a daily basis not only is the housing cost higher⁷⁵, but the people are forced to struggle on a daily and ongoing basis in order to pay the rent, increasing the risks to their personal safety and of COVID-19 infection and the continued fear of being evicted.

“Housing, “we live badly”, in small rooms or hotels. We have nowhere to go, there are no shelters, we have had to sell the things we had before COVID. In practical terms, we are on the street, we eat on the street, “we don't even have for condoms”, sometimes they give us food but we have nowhere to prepare it”⁷⁶.

Additionally, cities were identified in which campaigns were carried out not to accept LGBTIQ+ people who are sex workers or in a situation of prostitution in hotels or rooms paid for on a daily basis, exposing them to a situation where they are completely defenceless and in some cases on the street⁷⁷.

75. GF-PTSX-04, Feedback-PTSX-01

76. Focus Group 01. Sex workers.

77. GF-PTSX-01, GF-PTSX-04.

3.5.3. Access to land and territory by indigenous peoples

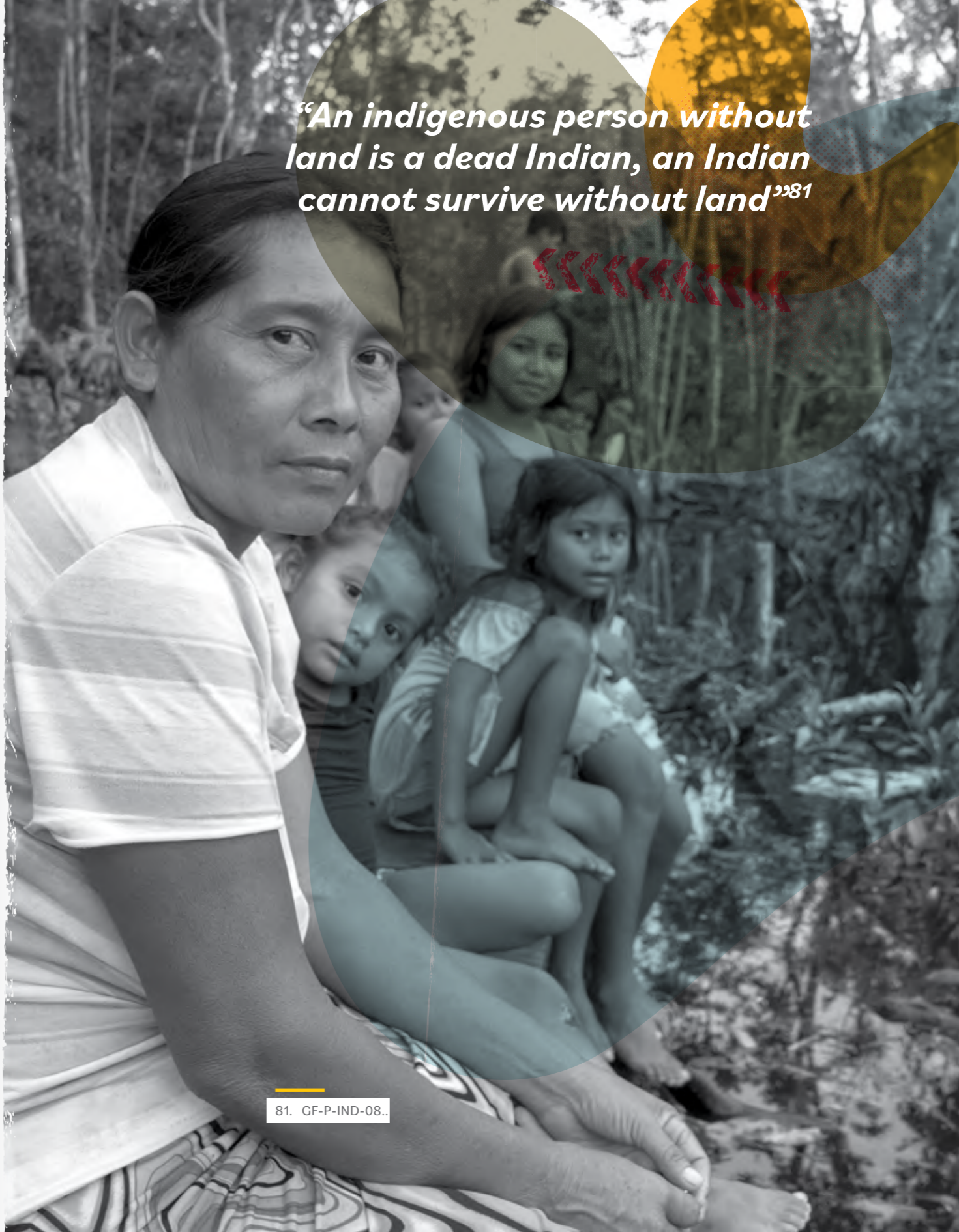
During the investigation there was contact with the cross-border indigenous communities Wayuú and Motilón Barí in Colombia, and Warao in Brazil and Guyana, who migrated collectively, in communities or in families. They have sought, as the sole alternative to protect their culture and identity, communal settlement forms on borrowed land (Wayuú territories in Colombia, Warao in Guyana), shelters (Waraos in Brazil), abandoned properties (Colombia) and even properties of public use (FUNAI in Brazil). All these modalities maintain the community and/or family organizational form, with defined leadership that does not necessarily correspond to a collective structure or organization as people⁷⁸.

In both Colombia and Guyana settlement conditions are similar. Between 10 and 16 families, comprising an average of 4 or 6 people, live on these plots of land. The dwellings are built with sheets of brass and dirt floors. Most of the plots have no utilities or drinking water. In the case of Guyana, the communities are in areas far from the urban centres, which makes them feel safe from both acts of violence and COVID-19 infection, but places them far from access to health care, education and job opportunities. The communities settled in Guyana have small areas in which they can grow crops for self-sufficiency; on the land they have access to rock for building which they cut out and extract for sale.

About access to land, the Wayuú population in Colombia indicated the existence of scams as land prices soared, hindering access of indigenous peoples to the territory. The scam victims occupying these territories have also suffered extortion and threats due to failure to pay to “legalize” the land. These situations have raised the population's risk and exposure level, especially for those who assume leadership roles and have contact with State institutions and organizations.

For the families and communities settled in Brazil the change from living on their territories in Venezuela to the urban areas of Brazil meant a very drastic change in their culture and lifestyle. Their collective and community organizational forms linked to life “close to the river and the mountain”⁷⁹, working their lands for subsistence and self-sufficiency, their cultural activities, their collective and community organizational forms have had to be replaced to be able to live and survive in urban contexts, whether in shelters or houses, often depending on assistance policies about which they have not been consulted on a collective or community level and which do not include adequate cultural approaches⁸⁰.

“An indigenous person without land is a dead Indian, an Indian cannot survive without land”⁸¹



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81. GF-P-IND-08..

78. GF-P-IND-01, GF-P-IND-04, GF-P-IND-05, GF-P-IND-06 -GF-P-IND-07.
79. GF-P-IND-01.
80. GF-P-IND-01, GF-P-IND-03, GF-P-IND-08

Some shelters do not have capacity to accept the number of families arriving in the cities, nor do they have sufficient bathrooms for everyone living there; access to food remains precarious and it is not adapted to their eating habits; the space for children to play is neither sufficient nor suitable⁸². During the consultations, it was identified that, for establishing and running the shelter, indigenous peoples are not consulted about their customs or needs; for example, the type of accommodation, type of food or need for organizational spaces related to their worldview and culture.

Families who have sought rental houses in urban areas have faced not only payment difficulties, but racism and xenophobia by the population, who refuse to rent to them, not only because of the number of people in the family, but because they are Venezuelan indigenous persons.

“Before our community was the river, the Caroní River. We went out hunting at night. The women went to the mountain to look for moriche palm (tree of life) to make crafts, and they fished. We worked day and night. Now it's different, we can't go to the jungle, we can't make crafts. We have nothing to make necklaces. They only see houses and roads (...). In the community the house was made of wood, with a moriche palm roof, the water was from the river, the electricity, roads, the indigenous school is made of wood. Now we can't see the rivers, no wood, the house is different. Now we are living in Santa Mónica, Belo Horizonte, the house is brick and cement, we have to pay water and electricity”⁸³.

82. GF-P-IND-01, GF-P-IND-08

83. Focus Group 01, Indigenous Peoples.

“In terms of health, the environment is very complicated, a lack of maintenance in the abrigo. The abrigo⁸⁴ is very important to help the Warao because they have water and help with food. But a pump is needed to bring the water. When it rains it fills up and the children can't run around”⁸⁵.

“It has been hard for us to find housing. They won't rent to us because we are indigenous and Venezuelan. When they were told the home was for an indigenous family from Venezuela people said it was already rented; one woman said “no, they're Indians”, she was very dramatic because we are indigenous. It took us five months to find a house. We still haven't managed it for one family who remain in the Jesuit shelter”⁸⁶.

84. In Portuguese: place of refuge, accommodation.

85. Focus Group 08, Indigenous Peoples.

86. Focus Group 01, Indigenous Peoples.



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4

DIFFERENTIATED
AND INTERSECTIONAL
IMPACTS

4.1 EFFECTS ON CHILDREN AND ADOLESCENTS

This diagnosis shows how the lockdown, social isolation and forced evictions have particularly affected Venezuelan refugee and migrant children and adolescents, children of the victims of forced evictions, female sex workers or those working in prostitution and indigenous peoples.

Female participants in the focus groups shared some of the direct effects on their sons and daughters during the pandemic. Firstly, not being able to go out and socialize with their peers, school closures and the economic and emotional costs of the transition to online schooling have made it difficult for children to socialize and hindered their adaptation to the host communities⁸⁷. Online classes affect not only children and adolescents but also for their families, especially those in vulnerable conditions such as families in human mobility or single-parent families in which the mother or father head of household is required to go out to work and cannot work from home.

“As women we have fewer opportunities to work because we have to look after the children. If you are a single mother it is more difficult, because we don't have a man to support us and many people want to take advantage of this, because we are women alone”⁸⁸.

Moreover, forced eviction has forced Venezuelan families to move to other areas of the cities with lower rents, but higher levels of danger. This situation has had a direct impact on safety that they feel in connection with their children. In the case of Peru, they have tried to create networks of Venezuelan families who can care for each other's children. Another self-care strategy has been the restriction on their daughters travelling within neighbourhoods due to the harassment they receive from adult men in the streets. In this sense respondents observed a correlation between the work they do (sex work) and harassment levels⁸⁹.

In addition to this context is the violence they have experienced during the forced evictions or in family tensions due to the risk of being evicted. As a consequence of the evictions, children and adolescents have been forced to change their social surroundings and to move several times during the lockdown. This situation has made it more difficult for them to adapt to the host cities and attain stability, affecting them emotionally and psychologically⁹⁰.

87. GF-Desl-FZ-01, GF-Desl-FZ-02, GF-Desl-FZD-03, GF-PTX-01, GF-PTX-02, Feedback-PTX-01.

88. Focus Group 02, Forced Evictions.

89. GF-Desl-Fz-02, Feedback-Desl-FZ-02, GF-PTX-02.

90. GF-Desl-FZ-01, GF-Desl-FZ-02, GF-Desl-FZD-03, GF-PTX-11.

“I have a daughter with a disability, a neurological problem: she has three cysts on the brain and needs medication to prevent seizures; she is a 12-year-old adolescent, and my son is 15 and the youngest is 8. The little one especially is sad because he can't go out to play, we have just moved to a new place, I hope it will be for a long time: the children's response is 'again mum?'; they always cry when we have to move. Obviously being an adolescent is the most difficult stage for a human, where they suffer, so in spite of the fact that they have adapted to the situation they have suffered a lot. I don't think I know how to repair my children's emotions, if it has affected me as an adult, it's worse for them – they have no stability to study, have no friends, we move, we move, we move. Experiencing violence of any kind obviously affects children more, even though they know how to manage it better. But basically adolescents keep quiet and this has many consequences”⁹¹.

Ein connection with the differentiated impacts and approaches, one of the points of concern is the situation of the children of sex workers or those working in prostitution, a situation seen in the whole region. The concern was most obvious in Peru and Guyana, where the people who participated in the focus groups stated that the need to care for children while their mothers work, combined with the high levels of harassment and violence towards girls and female adolescents, increased their vulnerability and risk.

The impact of the pandemic, the lockdown, the violence experienced during evictions and the tension of the risk of being evicted particularly affected adolescents as they were locked up at home, facing online classes and with few opportunities for socializing. Young people, say their parents, “have become more rebellious, they don't want to eat, bathe or look after themselves; seeking virtual ways to socialize, which increase the use of their mobiles”⁹².

91. Grupo Focal 01. Desalojos Forzados.

92. GF-Desl-FZ-03

In search of alternatives to help their families pay the rent and avoid eviction, young people have become involved in drug microtrafficking and some male and

female adolescents have resorted to transactional sex in their neighbourhoods, cities and on websites, and the practice of prostitution⁹³.

4.1.1. Indigenous children and adolescents

Indigenous peoples live from working the land: they fish, sow, harvest and sell the crafts they make with materials taken from the land⁹⁴. Living in cities has presented many challenges for indigenous communities, including seeking employment opportunities and livelihoods. Faced with the need to feed their families, some people have gone out on the streets begging with their children, exposing them to the danger of COVID-19 infection, but also the risks of exploitation and recruitment by organized crime networks.

In some cities where child begging is prohibited, indigenous people have faced the risk of being arrested and their children institutionalized⁹⁵, with the serious impacts that this type of decision has for the worldview of the indigenous peoples.

(...) when we had just arrived we were in the central zone “begging with the children”, we put out a hat to ask for money and get enough to pay for the hotel, they charged us 300 reales a day, it's very expensive. [One of us] was approached by a police officer because it's a crime, there is a law protecting children and adolescents. After a long time we no longer took the children out. In the beginning as the police didn't understand they wanted to take away the children and take her [the indigenous person] into detention⁹⁶.



93. GF-Desl-FZ-03, Feedback-PTSX-03.
94. GF-P-IND-01, GF-P-IND-03, GF-P-IND-04, GF-P-IND-05, GF-P-IND-08.
95. GF-P-IND-01, GF-P-IND-08.
96. Focus Group 01. Indigenous Peoples.

4.2 VIOLENCE AGAINST WOMEN

4.2.1. Violence against women evicted or at risk of eviction

Violence against women has been another of the transversal impacts shown during the research. Women evicted or at risk of eviction and female sex workers who participated in the diagnosis identified an increase in violence against them. This violence is seen in cases of domestic violence, in cases of harassment and sexual abuse on the street by settlers of the host cities, violence suffered during forced evictions and violence by police forces. Women identify that this violence is based on xenophobia and the fact of being Venezuelan women where the gender stereotypes and sexualization of their body play a decisive role.

This situation not only affects adult women, but particularly single mothers and their child and adolescent daughters. In this sense, a specific impact on single mothers was identified, for whom there is a heavier burden of discrimination, violence, access to decent work and services by the institutions.

“I am a single mother of three boys and a girl with functional diversity. I arrived in August 2019. It has been extremely difficult for me to find a lease due to my nationality and xenophobia. I am discriminated for being Venezuelan, but also for being a woman and a single mother. It is not very well accepted here that a single mother has the capacity to pay rent”⁹⁷.

97. Focus Group 01. Forced Evictions.



For women, especially when they are the head of the household, access to decent housing has additional difficulties: on the one hand, no one will rent to them when their children are small, citing problems of noise and disturbances in general; on the other hand, there is a perception that being “single women” prevents them from making the payment and that a male provider figure is needed to take on the commitment, i.e. the landlord “*doesn't see them as strong or responsible enough to meet the rent*”⁹⁸, por eso necesitan de un hombre las proteja, ofreciéndoles en ocasiones su ayuda, apoyo o acosándolas sexualmente con el objetivo de “garantizar” su vivienda.

*“The citizen's response is that I had to agree (to have sexual relations) just for being Venezuelan, being a woman and alone, and obviously vulnerability increased at the time of the pandemic. So, the three things, because obviously when the citizen saw that were we not in a pandemic I still wasn't going to pay on time”*⁹⁹.

In some countries, occasional cases were observed of “*unions for convenience*”¹⁰⁰, Venezuelan women who agreed to live with a man from the host country to avoid eviction or to survive. Some service provision organizations stated they were aware of these cases and the violence occurring within these relationships. However, it is a difficult subject to document because of the secrecy surrounding it¹⁰¹.

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98. GF-Desl-FZ-01, GF-Desl-FZ-02.
99. Focus Group 01. Forced Evictions.
100. EP-PTSX-02- GF-PTSX -09.
101. GF-Desl-FZ-02.

4.2.2. Violence against female sex workers or those working in prostitution

The pandemic and lockdown have had a particular impact on sex workers or those working in prostitution. In some Caribbean countries Venezuelan women were identified who were hired from Venezuela to work in bars; when they arrived in the host country the processing of their passports and air journeys were paid for. Once they arrive at the bar, in most cases their passports are withheld, and they are forced to pay with “*sex, liquor or drugs*”¹⁰² the “*investment*” made by the bar owners; in other cases they are also charged for outing permits.

*“They bring the women, they exploit them and they have to pay the debt. They have to get the money however they can, with sex, liquor or drugs. It was a lot of money. They put them to work in bars. They have to get a lot of money, up to 2000 florins (1,111 USD). In one of the bars, when they were going to go out shopping, half of what they earned was for the bar owner and he also charged them 50 florins for the outing, for the permit”*¹⁰³.

The pandemic has made the hiring in bars even more precarious, with cases on a national level of women transferred from urban centres to areas with a greater presence of venues and bars where they can work¹⁰⁴, in many cases border areas or areas where there are various types of illegal economies (extraction of natural resources).

In addition to all the problems already described the situation of Venezuelan trans women in a situation of prostitution or who are sex workers has an additional discrimination component: discrimination based on their sexual orientation and gender identity¹⁰⁵. During the diagnosis it was shown that violence against them is practised not only because they are women, they are Venezuelan and they are prostitutes, but also because they are trans women.

In this context, it was determined that a significant impact and vulnerability affecting female sex workers or women working in prostitution from Venezuela is normally related to the variable of their job, their nationality, their sexual orientation and gender identity and their migration situation. These factors increase the risk of exposure and persecution and define a scenario of high vulnerability in which authorities, often police forces, have committed threats, harassment and sexual violence, and also verbal, physical and emotional violence¹⁰⁶, that the participants in the sessions defined as “systematic”.

During the investigation various events of gender-based violence were identified: local authorities making it mandatory for women to carry out the HIV-AIDS test to stay in the host city, followed by threats of deportation if they refused to carry out the test. Situations of abuse and police violence carried out directly against them because they are

102. GF-PTSX-07.
103. Focus Group 07. Sex workers.
104. GF-PTSX-05, GF-PTSX-07, GF-PTSX-08, GF-PTSX-Organizations Caribbean, Feedback-PTSX-Caribbean.
105. During the investigation there was contact with a group comprising eleven Venezuelan trans women sex workers.
106. GF-PTSX-01, GF-PTSX-04, Feedback-PTSX-02.

trans female sex workers. In some countries of Latin America, trans female sex workers also stated that they were survivors of sexual violence by members of the police forces. They had gone to the competent authorities and had not obtained access to justice or activation of the protocols for handling these cases. These recurring events, with no kind of support or assistance, have increased the levels of anxiety, anguish, and depression in this population segment.

Both the daily rental charge and the intimidation campaigns by the authorities and the population in general have not only caused forced evictions but have also forced trans women to migrate repeatedly to other cities. This makes it difficult for them to identify routes to access services, participate in support networks and receive sexual and reproductive health care, psychosocial support and information on projects focusing on livelihoods, which could help them to improve their stability and social integration levels.

Cases of violence and threats by illegal armed groups against trans women in a situation of prostitution during the pandemic were also identified. These threats were in some circumstances connected with these actors controlling territories during the pandemic and zoning the locations for the women to work. At other times they were in response to women showing leadership and demanding and defending their sexual and reproductive rights. The threats were intended to ensure the women left the cities or zoning where they could or could not practise prostitution¹⁰⁷.





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5

ORGANIZATIONAL PROCESSES AND PROTECTION NETWORKS

The gap in access to information has had a direct impact on the level of organization and participation of Venezuelan refugees and migrants in the decisions concerning them. In general, the organization and participatory processes identified are marginal in the cases of **persons evicted or at risk of eviction**. No networks, associations or groups of Venezuelans organized around preventing or demanding assistance with evictions and organizations about other issues were identified. This was transversal for most of the countries in which contact was made¹⁰⁸.

However, in some countries a higher level of organization and participation of Venezuelan refugees and migrants who have suffered forced evictions was identified: amid the pandemic some groups of people began working in their own businesses as a form of self-support. A further example of organization and participation is the initiative by victims of evictions of the LGBTIQ+ community, who decided to create a foundation to provide legal advice to Venezuelans and migrants in the community.

With respect to **sex workers** or those **practising prostitution**, in South America higher levels of organization are perceived than in Caribbean countries. It appears that this has a direct relationship with how women self-identify. In the case of South American countries, it is easier for them to talk about their work and, in some cases, recognize that they are forced to practise sex work to survive. This facilitates spaces for them to come together, communicate and listen to each other, always mediated by organizations providing them with support services¹⁰⁹. In the Caribbean countries the context is different: there is no type of organization or participation; women have no spaces to

108. GF-Desl-FZ-01, GF-Desl-FZ-02, GF-Desl-FZ-03, GF-Desl-FZ-04, Feedback-Desl-FZ-02.

109. GF-PTSX-01, GF-PTSX-02, GF-PTSX-03, GF-PTSX-04.

listen to and meet each other, and only in some cases were organizations providing relevant services identified¹¹⁰.

One of the variables identified that influenced the organizational processes is the presence of organizations that work directly or indirectly on the theme of sex work. In the case of Colombia, Peru and Ecuador there are local organizations that work with female sex workers or women practising prostitution and which have incorporated them into their assistance networks. This has not only created spaces for coming together but also led to identification of reference points individually or collectively¹¹¹. In these countries, everyone had as a reference point an organization, they could contact to request help, but also where they can meet other women in the same situation to seek emotional support and in order to identify possible risk mitigation strategies¹¹².

Consequently, it can be stated that there are differences between the coping mechanisms for the effects on female sex workers in countries where women have the support of larger organizations – as is the case of Argentina, Colombia, Ecuador, and Peru – and those in countries in the Caribbean region, without a network of allied organizations. This demonstrates that for female sex workers or women practising prostitution having organizations as a reference point to go to represents a feeling of security and this not only determines the extent to which they are affected, but their organizational, agency and participation capacity and level¹¹³.

With respect to **indigenous peoples** their organizational and participatory processes are different. In most cases, the members of indigenous peoples have migrated and settled collectively, whether in communities or in families. This has directly influenced their levels of organization and participation which, although in some cases is perceived as marginal, is more active.

110. GF-PTSX-05, GF-PTSX-06, GF-PTSX-07, GF-PTSX-08, EP-PTSX-01, EP-PTSX-02.

111. GF-PTSX-01, GF-PTSX-02, GF-PTSX-03, GF-PTSX-04, Feedback-PTSX-01, Feedback-PTSX-02.

112. GF-PTSX-01, GF-PTSX-02, GF-PTSX-03, GF-PTSX-04, GF-PTSX-05, GF-PTSX-07, Feedback-PTSX-01, Feedback-PTSX-02.

113. Feedback-PTSX-01, Feedback-PTSX-02.

In this sense, in both Colombia and Brazil it was possible to identify specific leaderships that seek to promote spaces of contact with the public institutions and with national and international organizations. They often face direct obstacles related to discrimination, racism and the absence of free and informed prior consultation about the decisions concerning them, for example setting up shelters, food aid, or access to health assistance and children's education.

During the information-gathering process it was identified that both the migration process and the pandemic have had a direct impact on the contact between the indigenous peoples settled in the host cities and their family, social and organizational networks in their country of origin. This constitutes an additional effect connected with preserving their culture and identity, their self-determination and governance. The loss of contact with elders in the country of origin – their traditional authorities – affects the processes of passing down their identity and culture, with potential risks of physical and cultural extinction.



(...) Elders are our libraries, they have a lot of wisdom and history.

The Warao culture lives on this wisdom. That is why it is very important for children to learn this knowledge and history of the worldview of the Warao culture. It is extremely important to maintain this Warao education because it is very important to learn our own education and a multicultural education”¹¹⁴.



114. Focus Group 08. Indigenous Peoples.



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6

RELATIONSHIP WITH INSTITUTIONS

Two dynamics were established in the relationship between refugees and migrants and institutions during the pandemic and lockdown. The first, the existence of a gap in access to information about pathways for assistance from the institutions providing services. Venezuelan refugees and migrants cannot in general identify which institutions to go to, which steps to take, where to call or how to look for the institutions and/or assistance during lockdown and the closure of face-to-face services by organizations. The second is the widespread mistrust of State institutions at both national and local level, linked to xenophobia, discrimination and insensitivity to the specific needs of these groups and the reality of Venezuelan refugees and migrants.

Some service provision organizations also identified the need to review and prioritize institutional assistance pathways at both national and local level. In this sense, there is a perception that the information about the responsibility and role of each institution involved in matters concerning the situation of refugees and migrants is not accessible “even to citizens, and much less to Venezuelan migrants”¹¹⁵.

In some cases, people stated that there was no clarity in the requirements for accessing assistance and protection services and that some of the existing aids do not meet the demands and needs of refugees and migrants¹¹⁶. Along these lines, the need to develop diagnosis and consultation processes with the population was expressed, in the case of indigenous peoples from a collective rights perspective. In terms of institutions, the national human rights institutions – ombudsmen, com-

115. Feedback PTSX 02.
116. Feedback Desl-FZ-02

missions, local public advocates – were identified as allied entities, from which they received advice and assistance to prevent evictions in particular¹¹⁷.

The mistrust towards institutions is linked, in most cases, with low levels of government employee knowledge about human mobility, specific and intersectional needs and services being denied due to the migration situation of the population, increasing their vulnerability and exposure to risks¹¹⁸.



117. GF-Desl-FZ-05.
118. Feedback-Desl-FZ-01, Feedback-Desl-FZ-02.

6.1 RELATION WITH THE POLICE FORCES

A transversal element in every country that represents a major challenge for the region is the role of the police forces in relations with Venezuelan refugees and migrants. Throughout the investigation widespread rejection of this actor was shown, due to the levels of abuse, rejection and stigmatization faced by the different population groups in this study¹¹⁹.

In the police force response in the region to the measures implemented in the context of the pandemic some differences were established according to the country and population group. However, transversal factors emerged, such as arrests involving bribes – request for money in exchange for freedom –¹²⁰, threats of deportation with implications of separating families¹²¹ and sexual abuse, especially in the case of female sex workers¹²².

“They arrived, I have worked in the chongos¹²³, working in the chongos they arrive, supposedly they detain you but they take you to rape you. To let you go they do everything to you, without a condom, with the risk they are infected and pass on diseases to us who take such good care of ourselves so we don't infect our families, to live a better quality of life with our families and we can't, we can't. We are practically mute here, we can't even talk, we can't complain, we can't do anything”¹²⁴.

Trans female sex workers were victims of differentiated violence based on their sexual orientation and gender identity: not only were they forced to work on the street in search of a livelihood, but they were approached by the police and attacked, subject to extortion, blackmail and threats of detention and deportation. In some cases, even sexual abuse¹²⁵.

Despite these conditions, some groups of female sex workers, including transgender women, have begun processes of advocacy, lobbying, dialogue and consultation with focal points of human rights and the LGTBIQ+ community within the police forces. Despite these efforts that have been assessed as positive by these leaders, there is a gap in the existing lines of communication between the focal points and senior management and the lower rank

agents or patrol guards, who are directly responsible for patrolling and local specific supervision on the streets and those who, in practice, have created these scenarios of abuse and violation¹²⁶.

In cases of forced evictions, the perception of discrimination and xenophobia by the police institutions continues. On the one hand, the disproportionate use of force by the public forces during evictions and on the other the absence of a role in mediating and preventing them; during these evictions police forces gave priority to nationals over refugees and migrants, despite there being legal frameworks regulating evictions during the police pandemic and lockdowns.

In the case of populations settled in “invaded” or “for sale” land, cases of abuse of authority and disproportionate use of force were presented, in which the riot squads made use of tear gas to disperse the settled population and evict them. The use of these methods took place in the presence of children and elderly members of the population, not only affecting their physical health but also their mental health¹²⁷.

On the other hand, a habitual decision was identified: not to go to the police forces due to perceived xenophobia when being assisted, as Venezuelans¹²⁸.

“even though we go to the police, even though we look for them, they don't support us, but they support locals and landlords”¹²⁹.

119. GF-PTSX-01, GF-PTSX-02, GF-PTSX-03, GF-PTSX-04, GF-Desl-FZ-01, GF-Desl-fz-02, GF-Desl-FZ-03, GF-Desl-Fz-04.

120. GF-PTSX-01, GF-PTSX-03, GF-Desl-FZ-01, GF-Desl-fz-02, GF-Desl-FZ-03.

121. GF-Desl-FZ-02, GF-Desl-FZ-03.

122. GF-PTSX-01, GF-PTSX-03.

123. Popular expression used in some South American countries to refer to venues, usually nocturnal, where prostitution is practised.

124. Focus Group 01. Sex workers.

125. GF-PTSX-04.

126. GF-PTSX-04, Feedback-PTSX-02.

127. GF-Desl-FZ-03.

128. GF-Desl-FZ-01, GF-Desl-FZ-02, GF-Desl-FZ-03.

129. GF-Desl-FZ-01, GF-Desl-FZ-02, GF-Desl-FZ-03.

6.2 RELATION WITH JUDICIAL OFFICERS

During the pandemic, the relationship between Venezuelan refugees and migrants and the justice system institutions was marked by three variables: lack of knowledge about the pathways to access justice; employees' lack of knowledge of the rights of refugees and migrants and the role they should play; and the scarce availability of services and legal assistance for the population groups involved in this diagnosis and the specific impacts they have suffered during the pandemic.

“if it is difficult for the host community to access the justice system because they don't know it, for a community of migrants it is much more unknown”¹³⁰

The first barrier to accessing justice, in line with what was said in the focus groups, is the refusal to accept a complaint based on the complainant's migration status¹³¹.

In connection with the closure of the justice systems in some countries¹³², during the lockdown, refugees and migrants who could did so with the support of non-governmental organizations and/or the office of the public defender of the host countries. However, cases were identified in which both people and organizations and/or the public defence system found the justice system closed: “*Faced with the closure of the judicial system we had no contact point to submit complaints, follow them up or access justice*”¹³³, said a public defender who assisted evicted families.

In countries like Peru, the public defender's office carried out informal mediations that reduced the risk of eviction; however, these could not be formalized due to the closure of the justice systems, with the process remaining under the will of those who, at the time, reached

130. Feedback-Desl-Fz-02.

131. GF-Desl-FZ-04, Feedback-Desl-FZ-01, Feedback-Desl-FZ-02.

132. As in the case of Peru.

133. GF-Desl-FZ-05.

mediation. There is no certainty or monitoring capacity for these processes and there possible recurrence of risks for the families. A fear of a resurgence of evictions persists among the population with new peaks of the pandemic affecting the economic reactivation processes and creating new expulsion processes¹³⁴

In connection with situations of harassment or sexual violence linked to eviction processes, refugees and migrants stated they were unaware of the existing pathways for mitigating these risks and the assistance plans/protocols for victims, including access to justice and the possibility of lodging the corresponding complaints¹³⁵.

The diagnosis showed that some justice authorities favoured men who were nationals of the host countries, failing in their duty to investigate, prosecute and punish cases of sexual abuse violence committed against Venezuelan women. In this sense, situations were identified in which Venezuelan women or girls seeking justice were reported or received threats of deportation if they continued with their complaints¹³⁶, this situation is one of the reasons why Venezuelan refugee and migrant women decide not to report sexual violence.

“We supported the case of a Venezuelan woman who got together with an Ecuadorian citizen with whom she has a daughter. The woman has a 13-year-old daughter. During the pandemic it was shown that the brother of the husband was raping the woman's daughter. The Venezuelan woman went to lodge a complaint, but the judge did not protect her or her daughter. After the proceedings the husband threw her out of the house and took away her youngest daughter. The woman ended up in the street with the 13-year-old daughter, with no resources, money or documents. The 13-year-old is still going through a difficult emotional process, she has not been able to receive full psychological support. The woman is still being constantly harassed by her ex partner and his brother”¹³⁷.

Specifically, the information collected reflects the failure to implement measures guaranteeing safe access to the justice system and ensuring confidentiality; a space of trust for the victim; access to psychological assistance; access to health care; in general, the application of specific protocols so that the victims of sexual violence receive assistance from the justice sector and the institutions related to victim aid¹³⁸.

134. Feedback-Desl-Fz-02.

135. GF-Desl-FZ-01, GF-Desl-FZ-02, GF-Desl-FZ-04, GF-PTX-01, GF-PTX-02, GF-PTX-03, GF-PTX-05 - GF-PTX-07.

136. GF-PTX-07, GF-Desl-FZ-02.

137. Focus Group 05. Forced Evictions.

138. Feedback-PTX-02.

“We were hit, we went to the police, to the prosecutor and they did nothing. They said 'no, don't worry'. The attacker was there too, he threatened us and the prosecutor did nothing.

They told us: 'if you report it we will have to deport you, we will pass you to the migration department'. We didn't report it because we were afraid. It pressured us, and there was no one to help. If they had wanted to kill us no one would have done anything, nobody does anything for us. The prosecutor did nothing. The prosecutor said: 'he's not going to press charges you can go'. In other words, he was the attacker and we were going to pay for it¹³⁹.

”



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7

CHALLENGES FOR ORGANIZATIONS PROVIDING SERVICES DURING COVID-19

Both for service providing organizations and for the population, the first challenge identified during the pandemic was going from face-to-face to online. Combined with the lockdown conditions, for some organizations this meant a change of focus, priorities, methodologies, technical capacities and approaches used to work.

Some of the service providing organizations were not prepared for the transition to online or telephone assistance. This situation was shown from two perspectives: firstly, the technological organizational challenge they faced in terms of the need to prepare the teams to work remotely and, the access to connectivity in the homes of the employees of the organizations. Assisting the refugee and migrant population online, using virtual tools, has meant a technological challenge for some organizations, given that they did not all have the equipment, platforms, and technical supports necessary to carry out virtually and remotely coordinated work¹⁴⁰.

Similarly, the organizations faced the situation where some of their workers lacked technology resources, connectivity and skills in using new technologies. *“Some people didn't have internet at home or the tools necessary to work from home online”*¹⁴¹, said one of the organizations. This situation made the assistance and protection processes more complex and delayed them.

The pandemic changed the impacts, levels of exposure and, therefore, the needs of Venezuelan refugees and migrants. The organizations had to adjust/design relevant response mechanisms, based on the reality of the population, with reduced operating, monitoring and follow-up capacity and additional challenges in identifying and adjusting the assistance and prioritization criteria.

140. GF-Desl-FZ-05, Devolución-Desl-FZ-02.
141. Devolución-Desl-FZ-02, GF-PTX-11

This transition included an adjustment to the prioritization of intervention themes to assist, for example, a claim in connection with prevention/assistance to evicted persons, the legal advice necessary and temporary housing measures for homeless and/or evicted people. These adjustments demonstrated both gaps in the teams' technical capacity and the need to seek additional funding sources for new need blocks of the population that had not been detected or prioritized such as access to a livelihood, psychosocial and psychological support, and access to health care and sexual and reproductive health care¹⁴².

In some Caribbean countries, organizations working with women who are survivors of sexual violence or with people with HIV-AIDS highlighted the rise in cases of people who began to practise transactional sex or survival sex because of the lockdown and subsequent lack of livelihood. This caused the organizations to need to expand their assistance and support and to hold meetings focused on this population and on themes such as preventing sexually transmitted diseases and psychosocial support for women¹⁴³.



142. GF-Desl-FZ-05, Devolución-Desl-FZ-02.
143. GF-PTX-10, GF-PTX-11, Devolución-PTX-02.



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The organizations also faced a change in approach and working with public institutions, both local and national. In connection with mitigating the risk of eviction, organizations had to contact entities which often did not have open contact channels, such as police inspectorates, for example. Similarly, in the case of female sex workers, the organizations themselves stated they had gaps in identifying the needs and risks of this population that guarantee adequate high-impact handling of protection needs and risks. This gap was identified by the organizations providing services to the indigenous population, connected to the lack of preparation, knowledge about collective rights and working strategies with indigenous peoples.

This adjustment process included accelerated recruitment, training, capacity-building awareness-raising and advocacy procedures to adapt and classify the services available to the population's specific and differentiated needs. The emerging protection needs have also brought up financing gaps in the service provision organizations, as their capacity to respond has been overwhelmed.

The strategies the organizations came up with to tackle the pandemic, in addition to working online, included coordination with organizations at territorial and local level¹⁴⁴. The organizations that support evicted populations or populations at risk of eviction, for example, referred to joint work by means of handling cases requiring holistic approaches, through which they coordinated the relevant referrals to different organizations to provide coordinated complementary assistance¹⁴⁵.

Another of the strategies used by some of the organizations and that has had a positive impact on the population was making home visits to families they identified as in need of priority support. *"The fact that they made these visits mid-pandemic provides a perception of closeness and security to people"* ¹⁴⁶, stated one of the participating organizations.

In the case of the organizations that have worked with or supported female sex workers or those practising prostitution, some of them began to connect virtually with networks and/or organizations in other countries. Others continued face-to-face work, making home visits or with tolerance zones, more direct assistance events and brigades and setting up meeting spaces at their head offices. This is despite the increased demand for services because of COVID-19, not having the necessary resources and not having the physical or logistical capacity to carry it out¹⁴⁷.

In general, service providing organizations have had to reinforce their strategies for psychosocial assistance to the populations they support, facing the obstacles entailed in carrying out ongoing and systematic work virtually. Connectivity difficulties, both financial and technical, prevent many people from continuing with the support processes after the first consultation¹⁴⁸.

The beneficiaries identified that going online has affected assistance during the pandemic in two different ways: firstly, the waiting times to receive cases and the type of treatment they receive from the organizations; secondly, not knowing or understanding

144. GF-Desl-FZ-05.

145. GF-Desl-FZ-05, Devolución-Desl-FZ-02.

146. GF-Desl-FZ-05, Devolución-Desl-FZ-02, Devolución-Desl-FZ-01.

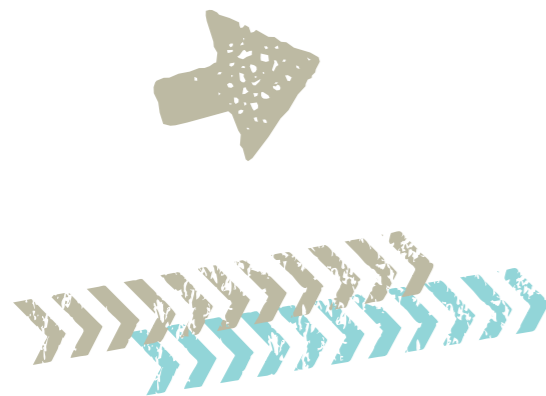
147. GF-PTX-01, GF-PTX-02, GF-PTX-03, GF-PTX-04, GF-PTX-09.

148. Grupo Focal con Organizaciones proveedoras de servicios a personas en situación de prostitución.

the assistance priorities and the help they can receive from the organizations¹⁴⁹. This is related to the lack of personal and visual contact between the organizations and beneficiaries and to the fact that the monitoring and support processes are perceived to be more complex and distant.

“The people dealing with us were tired and annoyed, so they didn't do a good job (...) or they take a long time to deal with us and we don't know how to follow up our cases. Nor do we know what are their priorities and what steps to take”¹⁵⁰.

Despite this, some organizations stated that statistical monitoring of their individual assistance levels showed a rise in the number of cases supported and that they managed to provide ongoing and close support to beneficiaries virtually by implementing personalized monitoring strategies.



“About the online help: during COVID there has been a lot of contact with people, there is online monitoring. It is not the online distance that makes the person feel less listened to. From our experience the opposite has happened, messages are sent to the same person and a good relationship with people has been forced. This can be achieved, it is more than anything about how cases are monitored”¹⁵¹.

In the case of sex workers or those practising prostitution, the relationship with some service providing organizations shows situations of exclusion and discrimination that make them more vulnerable, despite the fact that this population group identifies the local networks that have helped them specifically and recognizes the importance of the support they provide them in terms of access to health care and sexual and reproductive health, access to the justice system and advice on regularization processes. They state that with other service providing organizations there is no clarity about the help they provide.

149. GF-Desl-FZ-01, GF-Desl-02, GF-PTX-03, GF-PTX-01, GF-PTX-02, GF-PTX-03.
150. Grupo Focal 01, desalojos forzados.
151. Grupo Focal 03, personas trabajadoras sexuales.

For them, one thing is the organizations with which they work and which support them directly as women in prostitution and another thing is organizations working on projects connected to livelihoods, access to food banks, rent assistance and other services¹⁵². In this sense they feel that their treatment has worsened during the pandemic and that they are not treated with dignity. They state that in some cases if they have been over a year in the host countries they receive no aid, however they state:

“We understand this, but don't mistreat us (...) they should change the priorities because we can't go out to work and we have nothing to feed our families”¹⁵³.

The widespread perception is that the criteria for prioritizing who receives assistance are not clear, that the help is being channelled not necessarily to those who are most vulnerable, but that in some cases it is determined by how close the person is to the organization.

152. GF-PTX-01, GF-PTX-02, GF-PTX-03, Devolución-PTX-01.
153. Grupo Focal 02. Personas trabajadoras sexuales
154. Devolución 01. Personas Trabajadoras sexuales.

*“When I first arrived I was given a food card for six months. With the pandemic I applied again, but as I had been in the country for over a year they couldn't give more any more help. I am now applying for an appointment with the same organization that is supporting me with the documentation, but they told me that as I have been in Ecuador for over a year I don't qualify for any help. **After a year in the country I no longer have access to any help, whether financial or food, because supposedly we are now stable in the country**”¹⁵⁴.*



SOURCES CITED

- CIACHR, Inter-American Commission on Human Rights - OAS. (7 December 2019). INTER-AMERICAN PRINCIPLES ON THE HUMAN RIGHTS OF ALL MIGRANTS, REFUGEES, STATELESS PERSONS, AND VICTIMS OF HUMAN TRAFFICKING. Resolution 04/19 approved by the Commission on 7 December.
- DESC, C. (1991). General Observation 4, on the right to adequate housing.
- Blouin, C. (2019). *Estudio sobre el perfil socio económico de la población venezolana y sus comunidades de acogida: una mirada hacia la inclusión*. Lima: Lima: Instituto de Democracia y Derechos Humanos de la Pontificia Universidad Católica del Perú y PADF.
- GIFMM, G. I. (2020). *Colombia Migrantes y Refugiados Venezolanos*. Colombia.
- Freier, F. (26 June 2020). Los Refugiados y el COVID. *El Comercio*, <https://elcomercio.pe/opinion/colaboradores/los-refugiados-y-el-COVID-19-por-feline-freier-columna-COVID-19-coronavirus-cuarentena-refugiados-migrantes-venezolanos-noticia/>
- BBVA. (10 October 2019). www.bbva.com. Obtained from BBVA Research: El aporte de la inmigración venezolana a la economía peruana: <https://www.bbva.com/es/pe/bbva-research-el-aporte-de-la-inmigracion-venezolana-a-la-economia-peruana/>
- GIFMM, The Interagency Group for Mixed Migration Flows. (2019). *Colombia: Situational Report*, September 2019.
- OHCHR. (2020). *A/75/185 Report by the Special Rapporteur on the rights of indigenous peoples*. Geneva.
- IACHR, Inter-American Commission on Human Rights. (17 April 2020). *The IACHR urges States to protect the human rights of migrants, refugees and displaced persons in the face of the COVID-19 pandemic*.
- OHCHR. (2019). *A/HRC/41/38 The impact of migration on migrant women and girls: a gender perspective*. Geneva.
- OHCHR. (7 April 2020). HUMAN RIGHTS AT THE HEART OF THE RESPONSE. *COVID-19 AND THE HUMAN RIGHTS OF MIGRANTS: GUIDE*.
- Useda Guerreo, M. E., Guerrero Barón, M. H., & Nisimblat, N. (2010). *Indicadores de goce efectivo de derechos en familias desplazadas por la violencia en Colombia*. Studiositas.

APPENDIX



METHODOLOGY

The diagnosis was conducted using a qualitative, participatory methodology based on dialogue with the participants belonging to each of the specific populations and service provision organizations. To collect information between two and three tools were designed to prepare the focus groups and in-depth interviews for each of the population groups: one for refugees and migrants and another for the service providing organizations. This led to eight information-gathering forms. In the case of indigenous peoples, the methodological tools used were adapted.

The structure of the tools was divided into four parts: the first, general information about the participants during the COVID-19 context; the second part was related to access to services and safeguarding the rights of refugees and migrants during the pandemic and lockdown; the third was related to access to information, participation and consultation and feedback intentionality; the fourth and final was focused on the recommendations that each population group identified according to their status and the specific effects on them. Each focus group and/or in-depth interview lasted approximately two hours.

The study identified and prioritized people who suffered forced evictions, female sex workers or those practising prostitution and transnational indigenous peoples in nine countries of Latin America and the Caribbean. The fieldwork was carried out virtually between November 2020 and January 2021. In total 21 focus groups were held, five in-depth interviews and seven feedback sessions, with both members of the specific populations and the service providing organizations, regional organizations, and national sectors. The process included a total of 138 Venezuelan refugees and migrants and approximately 30 workers from service providing organizations and/or the national sectors of the R4V Platform.

Factsheet

POPULATION GROUPS	COUNTRIES	FOCUS GROUPS/ INTERVIEWS	PERSONS	ORGANIZATIONS
PERSONS EVICTED OR AT RISK OF EVICTION	Brazil Ecuador Peru Colombia	Focus Groups: 4 / Uno por país Feedback: 2	23 persons Women 19 Men 2 LGBTI 2	Coopi Save the Children UNHCR NRC JRS - Brazil
PERSONS IN A SITUATION OF PROSTITUTION	Argentina Colombia Curaçao Guyana Ecuador Peru Dominican Republic Trinidad and Tobago	Focus Groups: 9 Interviews: 4 Feedback: 3	70 persons Caribbean: 30 South America: 40 Women: 57 LGBTI: 13 -11 trans, 2 gay -	Save the Children 100% Diversidad Plapperts -Ecuador Miluska Vida y Dignidad -Peru RedTranSex -Peru Famia Plania - Curaçao Bloosom- Guyana HIAS - Guyana Voices - Guyana -Trinidad and Tobago-
INDIGENOUS PEOPLES	Brazil Colombia Guyana	Focus Groups: 8 In-depth interview: 1 Discussion meetings with NGOs and UNHCR: 2	45 persons Brazil: 19 Warao: Men 12 Women 7 Colombia 10 Wayú: Men 5 Women 4 Motilón Barí: 1 Guyana 16 Warao Women 16	UNHCR - Colombia UNHCR - Guyana ONIC JRS - Brazil
TOTAL		FOCUS GROUPS: 21 INTERVIEWS: 5 FEEDBACK: 7	PERSONS: 138	SERVICE PROVIDING ORGANIZATIONS: 15

SCOPE AND LIMITATIONS

The diagnosis was conducted between October 2020 and February 2021, months in which lockdown, mobility restrictions and meeting measures were still in force in some countries of Latin America due to COVID-19. For this reason all the fieldwork, information-gathering and validation of this information was carried out remotely using online or telephone platforms.

To identify and contact the populations, there were focal points of the R4V Platform Protection Sector, service providing organizations at national level and regional and national UNHCR offices.

In this way only people who had contact with the organizations at local level and/or with mobile devices with internet or telephone connection access could participate in the focus groups, in-depth interviews, and feedback.

This means that this diagnosis had no access to victims of forced evictions, female sex workers or those practising prostitution or members of indigenous peoples if they did not have contact with one of the organizations or internet access; those who are often the most vulnerable could not share their experiences about how the COVID-19 pandemic has affected them.

For these reasons, the diagnosis was focused on the perceptions and experiences of the people in the populations of interest in connection with the impact the pandemic has had on them. The variables investigated included access to international protection mechanisms and pathways, the main impacts of the pandemic on enjoying their rights, their organizational levels and their relationship with government institutions and service provision organizations. This allowed us to present an analysis of the main findings, more than an evaluation of the institutional or organization response.

ORGANIZATIONS THAT CONTRIBUTED TO THE DEVELOPMENT OF THIS REPORT

- Cooperazione Italiana - COOPI
- Save the Children
- Norwegian Refugee Council
- Jesuit Refugee Service - JRS
- 100% Diversidad - Argentina
- Plapperts - Ecuador
- Miluska Vida y Dignidad - Peru
- RedTransSex - Peru
- Famia Plania - Curaçao
- Caribe Afirmativo - Colombia
- Bloosom - Guyana
- HIAS
- Voices GY - Guyana
- Organización Nacional Indígena de Colombia - ONIC
- United Nations High Commissioner for Refugees - UNHCR





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