



# EXECUTIVE SUMMARY

GIFMM COLOMBIA:

JOINT NEEDS

ASSESSMENT COVID-19

JUNE 2020



## Introduction

The Interagency Group for Mixed Migration Flows (GIFMM, its acronym in Spanish) is the national coordination platform for the response to the over 1.78 million Venezuelan refugees and migrant population in Colombia. In light of the significant impact of the COVID-19 crisis on the living conditions of this population, the GIFMM worked together with 29 partners, to carry out a joint needs assessment in 26 departments of the country in June. The assessment enables an analysis on a national level, as well as for 10 prioritized departments, of the impact of the crisis on Venezuelan households and current priorities.

## Metodology & limitations

Due to the preventative isolation measures within Colombia, data collection was carried out remotely, with over 2,543 phone surveys to the target population, Venezuelan refugee and migrant households. The surveys were conducted with the heads of household or those who could respond on their behalf. The unit of measurement for this analysis is the household. The sampling design allows for an analysis on a national level, as well as for ten departments: Antioquia, Arauca, Atlántico, Bogotá, La Guajira, Magdalena, Nariño, Norte de Santander, Santander and Valle de Cauca.



context of COVID-19, in order to inform and strengthen the joint response of the GIFMM members, by promoting an intersectoral understanding of the current conditions and needs.

In addition, the assessment includes a panel analysis: 448 households<sup>1</sup> who were contacted during the first round of the needs assessment, carried out by 17 GIFMM partners in April 2020, were contacted again during the second round. The responses of those 448 households allow for comparisons to be made between the two collection periods.

As for the limitations of the analysis, there is a selection bias in the sample, since households included within the databases used as the sampling frame are those who have already been in contact with the organizations prior to the surveys. In addition, when conducting phone-based surveys, it is not possible to confirm responses through direct observation as is common during face-to-face surveys. Finally, issues considered sensitive to respondents may be underreported during phone-based interviews.

<sup>1</sup> The 448 households surveyed during the first and second round represent 61% of the total sample interviewed during the first round (737 households)

## Key findings

Round 2	Panel Results
 <p><b>PERCEPTIONS ON PRIORITIES</b> The three main needs perceived by households are <b>food (92% of households)</b>, <b>shelter support</b> such as rental assistance (<b>66%</b>) and access to <b>employment or other sources of income (53%)</b>.</p>	 <p><b>PERCEPTIONS ON PRIORITIES</b> The three main needs perceived by households in both April and June continue to be <b>food</b> (which remained at <b>94%</b>), <b>housing support</b> (increased from <b>54%</b> to <b>67%</b>) and <b>livelihoods</b> (increased from <b>44%</b> to <b>53%</b>).</p>
 <p><b>SOURCES OF INCOME</b> Before the preventive isolation measures, <b>89%</b> of the households surveyed reported having <b>a paid job as their main source of income</b>. <b>Two</b> months later this percentage is <b>58%</b>. <b>16%</b> have <b>no source of income at all</b>.</p>	 <p><b>SOURCES OF INCOME</b> In April, <b>20%</b> of households reported a <b>job</b> as their main <b>source of income</b>. In June, this percentage increased to <b>57%</b>, representing an <b>increase of 30 percentage points</b>. At the same time, the percentage of households that mentioned that their income was sufficient to cover their expenses for <b>only up to one day increased by 12 percentage points</b>.</p>
 <p><b>FOOD SECURITY AND NUTRITION</b> Before the preventive isolation measures, <b>29%</b> of households consumed <b>two meals a day</b> while <b>69%</b> consumed <b>three meals</b>. Two months later, <b>59%</b> of households reported having <b>two meals a day</b>, while <b>only 26% consumed three meals</b>. Lack of dietary diversity continues, with, on average, households not consuming all food groups relevant to an adequate diet.</p>	 <p><b>FOOD SECURITY AND NUTRITION</b> Between April and June, the proportion of households having <b>two or three meals a day increased by 6 percentage points</b>. The food groups consumed in June were <b>at least halved compared</b> to the groups reported in April.</p>
 <p><b>WATER AND SANITATION</b> <b>27%</b> of households surveyed are <b>unable to wash their hands properly</b>, because they do not have access to water or inputs to do so. <b>18% do not have access to water when required</b>.</p>	 <p><b>WATER AND SANITATION</b> Households have <b>slightly improved hand washing practices</b> with an increase of <b>3 percentage points</b>. The percentage of households that do not have access to water when required decreased from <b>19% to 10%</b>.</p>

Round 2	Panel Results
 <p><b>EDUCATION</b></p> <p>30% of the households surveyed <b>do not have access to educational materials or activities</b>. 31% <b>do not have access to the internet</b>. Of the households that do have access to the internet, they access it mainly through their mobile phones. Only <b>2% of households report having a computer</b>.</p>	 <p><b>EDUCATION</b></p> <p>An increasing number of households with children <b>have gained access to remote learning opportunities</b>. During the first round almost half of the households with children indicated that their children did not undertake specific learning activities. In the second round, <b>48%</b> of these households indicated that they now use school books/materials and/or access virtual classes.</p>
 <p><b>HEALTH</b></p> <p>El <b>37%</b> de los hogares encuestados mencionó haber necesitado <b>tratamiento médico</b>. El <b>58%</b> de estos tuvo limitaciones para acceder debido <b>a no estar afiliados al sistema de salud (54%)</b> y al <b>alto costo de los servicios y medicamentos (50%)</b>.</p> <p><b>37%</b> of the households surveyed mentioned needing <b>medical treatment</b> since the start of the preventative isolation measures. Of these, <b>58%</b> had limitations in access <b>due as they are not affiliated to the health system (54%)</b> and the high cost of services and medicines (<b>50%</b>).</p>	 <p><b>HEALTH</b></p> <p>In April the main difficulty in not accessing treatment was <b>not being able to leave the house (38%)</b> while in June it was due to <b>not being affiliated with the health system (55%)</b>.</p>
 <p><b>SHELTER</b></p> <p><b>25%</b> of the households stated that they <b>do not know where they will live next month</b>. <b>17%</b> have changed their place of residence since the isolation measures started. <b>63%</b> of these households due to <b>an inability to pay</b>, <b>17%</b> because of <b>problems with their landlord</b> and <b>13%</b> because they <b>exceeded that the allocated time allowed</b> within the type of shelter.</p>	 <p><b>SHELTER</b></p> <p><b>15%</b> of PANEL households <b>have changed their place of residence</b> since the start of the COVID-19 measures, while <b>20% have changed their type of accommodation or in agreement</b> with their owner.</p>
 <p><b>PROTECTION</b></p> <p><b>8%</b> of the households surveyed indicated that they have experienced <b>cohabitation problems</b>. <b>31%</b> of these households due to a <b>risk of eviction</b>, followed by <b>30%</b> due to <b>problems with children</b> and <b>24% with their partner</b>. Additionally, <b>12%</b> of the households <b>have had to leave their home</b> and <b>23% face the risk of possible eviction</b>.</p>	 <p><b>RESPONSE</b></p> <p>The percentage of households that <b>have received aid increased by 13 percentage points</b> between April and June. This is due to an increase of 10 percentage points in the <b>receipt of government grants</b> and <b>4 percentage points in the support from NGOs and the UN</b>.</p>

## PRIORITIES

- The three main needs prioritized by households are food (92% of households interviewed), shelter, including support with payment of rent and public services (66%) and access to employment or other source of income (53%). Households surveyed in the 10 prioritized departments indicate the same priority needs
- The results show several specific needs among the population assessed: 10% of the heads of household interviewed have some form of disability; 33% of the households reported at least one member who is pregnant and/or lactating. 87% of the households have children, while 63% of households have one or more children under 5 years old.

## FOOD SECURITY AND NUTRITION

74% of respondents said they had missed at least one meal a day out of the three meals required, with 59% of households currently eating two meals on average a day and 16% eating only one time or less. COVID-19 measures have had an impact on the consumption of household: 55% of households have experienced a reduction in the number of meals consumed per day since the start of the preventative measures.

In general, there is a low quality and poor diet diversity of the diet, characterized by infrequent consumption of fruit and protein, in contrast with a high consumption of carbohydrates. The data indicates that the populations of Nariño and Arauca, mainly, present report a lower number of average food groups per day, which would indicate lower diet diversity.

## LIVELIHOODS

Before the preventative isolation measures, 89% of the households surveyed reported having a paid job as their main source of income; two months later this percentage dropped to 54%. 16% had no source of income at all. Households that are currently without a source of income are more prevalent in Nariño (24%).

For the second round, the average number of hours worked is slightly less than half a day, which results in a low income for these households even if they report that some of their members have a job. 43% of respondents indicated their income could support their household for only one day. La Guajira stands out as the department with the greatest difficulty in accessing sufficient income to meet basic needs, with 58% of households indicating that their income could support their households for up to one day, followed by Arauca (50%).

Households headed by women, 63% of the households surveyed, stand out as being disproportionately affected by the COVID-19 crisis, with 19% of households headed by women reporting having no source of income, compared to 11% of households headed by a man (19% vs. 11% respectively).



## SHELTER

Most households live in a rented house or room (82% of the households surveyed). Almost half of the households (47%) indicated that they have not secured a place to live in the month after data collection. This seems of specific concern in Nariño, where 63% of households indicated that they are uncertain where their household will live. 73% of households residing in rented accommodation, hostels or with friends and family do not have a written agreement. The department with the highest percentage of households that do not have insurance, or do not know if they have their place of residence insured for the following month, is Nariño (63% of households).

17% of households have changed their place of residence since the start of the preventative isolation measures. Of these households, 63% did so because they were unable to pay the rent and 17% of households indicated that they faced problems with the owner.

## HEALTH

37% of the households surveyed mentioned that one or more members needed medical treatment since the start of the COVID-19 preventative measures in March. Of these households, 58% faced barriers to accessing health care, as they are not affiliated to the national healthcare system (54% of households facing barriers) and the high cost of services and medicines (50%).

The PANEL analysis shows a change in perceived limitations since the start of the preventative isolation measures: in April, the main difficulty in accessing medical treatment was not being able to leave the house, while in June, the main difficulty reported was not being affiliated with the health system. It should be noted that non-affiliation to the health system was reported much more frequently in households requiring health services for round 2 (55%) than for round 1 (37%).

**Sexual and reproductive health:** 21% of respondents reported that since the start of the preventative isolation measures a member of the household has presented needs related to sexual and reproductive health services: contraceptive services were required by 10% of the households interviewed. 9% of households reported a need for maternal health care, while 4% of households reported a need for activities in the prevention and treatment of STIs and/or HIV.

**Mental health:** 48% of respondents mentioned that a member of their household had experienced symptoms of anxiety, reduced sleep and/or crying episodes. The analysis shows that households that consume a low number of meals per day and/or report cohabitation problems are more likely to report symptoms of anxiety, crying episodes and/or reduced sleep.

## EDUCATION

30% of households with children do not have access to educational materials or activities. Access to education is particularly low in Santander and Magdalena, where more than 40% of households with children do not have access to educational activities. Connectivity is a key aspect in guaranteeing the right to education during the pandemic, as well as access to timely information. However, only 69% of households with children report being able to access the internet.



## TELECOMMUNICATIONS

31% of households do not have access to the internet. Of the households that do have access, this access is mainly through their cell phones, as only 2% report having a computer. Internet access is unevenly distributed across different departments. For example, 44% of the households interviewed in Magdalena and 38% in Norte de Santander do not have access to the internet.

## WATER AND SANITATION

18% of households do not have access to water when required. The high proportion of households without access to water when required in the departments of La Guajira (52%) and Magdalena (50%) is noteworthy. Illustratively, at the national level, 5% of households prioritize access to water among their main needs. Most of these households are in La Guajira and Magdalena, where 15% and 17% of households surveyed prioritize access to water. The consumption of untreated water increases the risk of water borne diseases, which, if results in an increase in a demand for health care, further complicates the current health emergency.

27% of the households surveyed do not wash their hands properly at the required times, as they have no or intermittent water service, or do not have the inputs to do so.

## PROTECTION

8% of the households surveyed indicated that they face cohabitation problems. 31% of these due to the risk of eviction, followed by 30% due to problems living together with children and 24% with their partner.

On average, 46% of the households surveyed reported having experienced being discriminated against during the course of 2020 (before and after the preventative isolation measures).

33% of households have at least one member who has not been registered in their country of birth (Colombia, Venezuela or others).

23% of households face the risk of possible eviction in the month following data collection, due to an inability to pay or problems with their landlords. In addition, only 20% of households in rental situations have a written contract or agreement with their landlord.

## RETURNS TO VENEZUELA

The vast majority of respondents report that no-one in their household has returned to Venezuela (92%), with while 8% of households indicating that at least one household member has returned to Venezuela since the start of the preventative measures. 78% of the households indicate that no one from their household intends has the intention to return next month, while 16% of the households interviewed report that someone from the household intends to return next month. The main reason for thinking about returning is the partial or total reduction in access to income in Colombia (50% of households reporting that someone from the household intends to return), followed by the intention to join the family in Venezuela (28%) and the lack of access to food in Colombia (23%).

## RESPONSE

65% of the people interviewed indicated they had received assistance since the start of the preventative measures, while 35% mentioned that the household has received no aid. With regards to the origin of the assistance received, the majority comes from NGOs/UN (39% of the households) and the Government (25%). 46% of the households surveyed received in-kind support or services, while 15% of the households surveyed received support in cash and/or bonds.

24% of households now rely more heavily on support from government or other organizations as a source of income, compared to 13% of households before COVID-19.



## ANÁLISIS PANEL

- The three main needs perceived by households in both April and June continue to be food (which remained at 94%), housing support (increased from 54% to 67%) and livelihoods (increased from 44% to 53%).
- The PANEL analysis shows that COVID-19 measures have impacted dietary diversity. Between the first and second round of the assessment, the type of food groups consumed by PANEL households were reduced by half, compared to what was reported on April.
- The PANEL findings show that households have partly adapted to the preventive isolation measures, with an increase of 30 percentage points in households that report work as one of their main sources of income between round 1 and 2. At the same time, there is an increase in the proportion of households that report that their income can only sustain their expenditures for a day
- The PANEL analysis shows that more households with children have managed to access distance learning opportunities since the beginning of COVID-19 isolation measures.
- In the first round of the assessment, 40% of households in the PANEL had received support since the start of COVID-19. During round 2, this percentage increased to 53%. This is mainly due to an increase in government support, with 22% of the households in round 2 receiving Government support, compared to 11% of households in round 1.

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