COLOMBIA AND REGIONAL VENEZUELA
HUMANITARIAN CRISIS ANALYSIS 2019

December 2018

Each year, Sida conducts a humanitarian allocation exercise in which a large part of its humanitarian budget is allocated to emergencies worldwide. The allocation and subsequent disbursement of funds takes place in the beginning of the year to ensure predictability for humanitarian organizations and to allow for best possible operational planning. In an effort to truly adhere to the humanitarian principles, Sida’s humanitarian assistance is grounded in the four humanitarian principles, and in particular impartiality, with its compelling urge to ensure that humanitarian action is carried out based on “needs alone”, giving priority to the “most urgent cases of distress”. Therefore, Sida’s allocation methodology is grounded in several objective indicators such as; the scale of humanitarian needs (number of people in need), the severity of humanitarian needs (including food insecurity/IPC levels), the number of people targeted for the humanitarian response, the financial coverage of the respective humanitarian appeal, national capacities to respond and underlying risks, as well as distinct indicators related to forgotten crises. Sida also strongly supports the humanitarian coordination structures. Besides this initial allocation, another part of the humanitarian budget is set aside as an emergency reserve for sudden onset emergencies and deteriorating humanitarian situations. This reserve allows Sida to quickly allocate funding to any humanitarian situation throughout the year, including additional funding to Colombia, Venezuela or other countries in the region.

For 2019, Colombia and the regional Venezuela crisis is allocated an initial 65 MSEK. Close monitoring and analysis of the situation in Colombia and Venezuela will continue throughout the year and will inform possible decisions on additional funding.

1. CRISIS OVERVIEW

1.1 The humanitarian crisis in Colombia and the regional Venezuela crisis

Latin America faces two interlinked humanitarian crises with important challenges in the response to the needs of vulnerable population. On one hand, despite the peace agreement signed with the FARC guerrilla in November 2016, the armed conflict in Colombia continues with proliferation of actors, causing an increase in humanitarian indicators such as forced displacement, confinement and attacks against civil population. On the other hand, the region faces the challenge to respond to the needs generated by the massive outflow of people from Venezuela, compelled to leave their country due to the political instability, socio-economic crisis, growing insecurity and violence political and declining human rights situation.

1.1.1 Conflict in Colombia

Despite FARC’s disarmament and demobilization process concluded successfully in August 2017, violence has increased as a consequence of power reconfiguration dynamics in former FARC territories that are now being disputed by other illegal armed groups (ELN1, EPL2, FARC dissidents and other Organized Armed Groups3) who seek to benefit from strategic corridors and the control of illegal economies. Peace negotiations between the Government and ELN are stagnated and consequently armed actions in border region with Venezuela have skyrocketed. ELN is also operating in 12 Venezuelan States with actions that range from control of illegal economies and extortion to forced recruitment and smuggling of oil and cattle. These new dynamics of violence has brought a significant increase of internal displacement, confinement and mobility restrictions and incidents with landmines and unexploded ordnances (UXO). OCHA report that figures are the highest since 2014.

The humanitarian scenario for 2019 is expected to continue to deteriorate due to the uncertainty surrounding the peace talks with ELN, continued disputes among armed groups, delays in the implementation of the Peace Agreement with FARC and increased military operations.

1.1.2 Regional Venezuela Crisis

Venezuela is amid an acute economic and political crisis that has triggered an outflow of millions of citizens to the neighbouring countries. The crisis is atypical in the sense that it is not driven by armed conflict or natural disaster, but it is a result of political tensions and implosion of the economy with hyperinflation. This manifests in extreme loss of purchasing power and severe shortage of many basic items, including food and medicine as well as very high levels of violence and crime. Due to a significant lack of data it is unclear how humanitarian needs vary across the country and the severity of needs in different rural and urban areas. The Venezuelan government denies the existence of a crisis and reject humanitarian assistance.

1 ELN: Ejército de Liberación Nacional (National Liberation Army)
2 EPL: Ejercito Popular de Liberación (People’s Liberation Army) also kwn as “Pelusos”
3 The Colombian Ministry of Defence refer to armed groups that re-emerged after the paramilitaries demobilisation as Organized Armed Groups. Others refer to these groups as paramilitaries or post-demobilisation armed groups.
Distribution of food is controlled by the military and often dependent on support to the government. Also, there have been reports of the Colombian armed group National Liberation Army (ELN) being involved in control of food distribution in the border region. As to health, the Venezuelan Health Observatory report that less than 10% of operating theatres, emergency rooms and intensive care units were fully operational in 2016, and the situation has since then deteriorated. 88% of hospitals report shortages of medicines and health supplies in 2018 and only 15% of necessary medical supplies are available countrywide. Communicable diseases, such as measles, malaria, diphtheria, that were almost eradicated have now resurfaced. An estimated one million children are out of school and school attendance is dropping as schools’ lack teachers, water, electricity and school meals. Insecurity and exposure to crime on the route to school add to the absence level.

As a result, the crisis has forced more than 2.6 million Venezuelans to leave the country, at least 1.9 million of them have left since 2015. About 2 million are in Latin America and the Caribbean, an estimated one million of these in Colombia, half a million in Peru and around 200 000 in Ecuador. Up to October 2018, 205,808 Venezuelans filed asylum claims globally while an estimated 958,945 have accessed other forms of protection or alternative legal stay - temporary or more long-term – in host countries under the respective national or regional frameworks or arrangements.

Colombia is the country most affected by the outflow of Venezuelans and is both a transit and destination country. Of the over one million Venezuelan in Colombia 383,358 have received Special Stay Permits, allowing them to stay and work in Colombia for up to two years. Moreover, some 288,000 Colombians living in Venezuela, many as refugees due to the Colombian conflict, have returned to Colombia. Official records count almost 900 000 Venezuelans having transited through Colombia to other countries. Moreover, some 1.6 million Venezuelans are so called pendular migrants, holding a Border Mobility Card, which allow them to cross into Colombia for a short period of time, e.g to acquire food and medicines, vaccinate children and search healthcare etc, before they return to Venezuela.

As of today, about 5000 Venezuelans leave the country every day and there is no sign that the pace would recede, thus another two million could arrive in Colombia and the region in the coming year and in addition the pendular migration will continue.

1.2 Geographical areas and affected population

Areas most affected by conflict in Colombia are the Pacific Coast and the border areas with Venezuela and Ecuador. Besides armed conflict, these areas have suffered from historical neglect from the Colombian Government, which has led to high levels of unmet basic needs, lack of public services, poor institutional capacity and extended poverty. Conflict has disproportionately affected indigenous groups, afro-communities and rural communities as many of their territories are in areas where the country’s most valuable natural resources are concentrated, also offering multiple hidden transit routes for illegal exportation.

The border area with Venezuela receive the largest influx of Venezuelans, either as pendular migrants or Venezuelans with intention to establish in Colombia. Thus, these areas are triple affected, by the internal armed conflict, poverty and lack of public services, massive influx of Venezuelans and especially the Guajira region in addition is very vulnerable to droughts and flooding. Increasingly, not only the border departments but the whole of Colombia is receiving Venezuelans, on the Caribbean coast and in large capital cities as Bogota, Medellin and Cali the impact is notable, and the host communities sense the pressure on already lacking public services that end up affecting local population.

The high influx of Venezuelans and returning Colombians has led to a corresponding escalation in humanitarian needs in Colombia, including need for health services, food and protection. According to a joint needs assessment undertaken by several UN agencies, 82% of Venezuelans in Colombia could not satisfy their basic needs, 80% had no access to health services or medicine, and 19% relayed on emergency strategies for survival including child labour, prostitution and begging. Also, only 48.7% of school age Venezuelan children registered as residents and thus entitled to public education are attending school.

1.3 Critical assumptions, risks and threat

In Colombia the intensified conflict and increased militarization of conflict areas increase the levels of violence and risk for civilians. The multiple armed groups expose the population to extortion, confinement, mobility restrictions, forced recruitment, use of children and youth as collaborators and oblige people to participate in illegal activities, cultivation of coca, informal mining etc. Forced displacement and incidents with landmines and unexploded ordinances (UXO) are on the rise.

Venezuelans using illegal border crossing points face protection risks, as these routes are controlled by armed groups. Risks include looting and other abuse and also risk for recruitment to armed groups. Arriving in Colombia, risks and vulnerabilities are multiple, including lack of security and access to food and basic services, labor exploitation, SGBV, lack of access to documentation, discrimination and xenophobia, survival sex, trafficking, children out of school and children and adults at risk of recruitment by illegal armed groups.
Those who do not have a regularized residence in Colombia or a Border Mobility Card status are particularly vulnerable. Women and girls are reportedly being trafficked across the border for sex work. Partners are reporting that in recent months the vulnerability of people from Venezuela has augmented. Increasingly pregnant women, children, elderly and people in poor nutritional and health conditions arrive, with few or no financial resources and lacking documents to legally enter Colombia. Many of them, known as “walkers” travel thousands of kilometers by foot and continue walking in Colombia towards key cities in the country or onwards to Ecuador and other countries. The walking takes weeks or months in difficult and dangerous conditions.

There are severe obstacles and challenges to the humanitarian response inside Venezuela: lack of information and lack of access as well as the hyperinflation and high levels of corruption, security risks and difficulties to get money and goods into the country. There are only very incipient initiatives for coordination of humanitarian partners operating in Venezuela. By instruction from the UN Secretary General the coordination of the operational response for refugees and migrants from Venezuela lies with UNHCR and IOM. Even so the coordination with humanitarian assistance in Colombia, coordinated by OCHA, is key as the two crises are intertwined.

In Colombia there is a mixed picture of humanitarian donors phasing out support as expectations on the peace process were high while at the same time there is new funding and new actors participating in the response to the influx of Venezuelans. The risk for excessive focus on response to Venezuelans in Colombia neglecting the humanitarian needs related to the conflict and with insufficient focus on conflict sensitivity and attention to the needs in host communities must be monitored and lifted in dialogue with partners. If the planned phase-out of OCHA in Colombia proceed as planned, and operations are closed in 2019, it will be an important challenge for implementing partners and donors to uphold information management and coordination without the support of the OCHA team.

### 1.4. Strategic objectives and priorities of the Humanitarian Response Plan

**1.4.1 Colombia**

The Humanitarian Needs Overview, HNO, for Colombia 2019 identifies 7,048,379 People in Need, with the following disaggregation:

- 1,870,668 due to the influx of people from Venezuela
- 2,260,154 people directly affected by armed conflict (IDPs, UXO and MAP victims, sexual violence, confined population)
- 1,087,204 people indirectly affected by armed conflict (host communities)
- 1,830,353 people affected by both conflict and at risk of natural disasters

The Strategic Objectives of the 2019 Humanitarian response Plan, HRP, remain the same as previous year:

- Reinforcing multi-sectoral inter-cluster actions to save and protect lives
- Ensuring the centrality of protection and gender scope, preventing and mitigating risks
- Linking its humanitarian response to early recovery and development, specifically through durable solutions

Geographical scope of the HRP largely coincides with the most conflict affected areas but also includes areas with low institutional capacity. 58 municipalities with high humanitarian needs from both conflict and migration crises were identified.

Bearing in mind Colombia is a country expected to transit from conflict to peace, the HRP aims at promoting a transition from humanitarian actions to peace building and stabilisation. The 2019 HRP therefore focus on communities that besides having humanitarian needs are also prioritized by the Government for the implementation of the Peace Agreement. This strategy allows to cover the full spectrum from Humanitarian assistance to Development and Peace-Building and facilitates hand-over from humanitarian actors to local authorities and peace-building or development partners.

Based in 2018 levels of humanitarian funding and effectively reached population, it is expected that the HRP for Colombia 2019 will target between 1,790,000 and 1,940,000 people: 940,000 in response to the outflow of Venezuelans and 850,000 - 1,000,000 targeting conflict affected population. Funding required is approximately 140 million US$.

The HNO/HRP-process involves the Humanitarian Country team, the National Clusters and the Local Coordination Teams where local NGOs get to participate and provide their inputs. The HNO and HRP for 2019 were developed in close coordination with a Peace-building Overview and this joint exercise revealed that 144 municipalities need both humanitarian assistance and development cooperation and peace-building interventions. It is expected that by 2020, humanitarian, development and peace-building actors further align their planning mechanisms.

---

4 Colombia is not included in the Global Humanitarian Overview launched in December 2018
1.4.2 Regional Venezuela Crisis

There will be no HNO or HRP presented for Venezuela or any of the counties in the region affected by the massive outflow of Venezuelans. However, for the first time an Appeal for Venezuela Outflow is presented in the Global Humanitarian Overview. This appeal states 3 600 000 People in Need in the countries providing assistance and protection to people from Venezuela and 2 200 000 People to Receive Aid. Funding required for the implementation of the appeal is 738 million US$.

The humanitarian response related to the Venezuela Outflow is coordinated by UNHCR and IOM through the Regional Refugee and Migrant Response Plan with chapters for each country and with two common intervention areas;

1. Emergency response that will focus on:
   - Direct emergency response - provision of life-saving goods and services
   - Protection - ICLA, community protection mechanisms, strengthening of organizational processes

2. Self-sufficiency response seeking long-term integration of migrants and refugees focusing on:
   - Economic and cultural inclusion - access to public services, employment generation, entrepreneurship and sustainable livelihoods, social cohesion, anti-xenophobia campaigns
   - Institutional capacities - design of public policy and legal frameworks, reinforcement of States’ response mechanisms

2. IN COUNTRY HUMANITARIAN CAPACITIES

2.1 National and local capacities and constraints

Colombia has advanced national laws that entitle victims of the armed conflict, including Venezuelans who are victims of the conflict, to multi-sectorial assistance and also guarantee victim’s rights to truth, justice, reparation and non-repetition. At the local level, emergency assistance relies in municipal authorities and, secondarily, in the central government. Although there are clear responsibilities and institutions in place to guarantee proper assistance to victims of the armed conflict, this has been undermined by the conflict dimensions, poor coordination between agencies, insufficient institutional capacity at small municipalities and financial constraints. 80% of the municipalities affected by conflict lack resources and capacity for the attention of IDPs and victims. A rising trend is increased access constraints for state actors, especially in the border areas with Venezuela controlled by different armed groups. Indigenous Guards and Community Councils are the protection authorities of indigenous and Afro-communities respectively. These organizations have often acted as self-protection and resistance mechanisms.

In response to the regional Venezuela crisis the Government of Colombia has issued decrees for enabling the enrollment of undocumented Venezuelan children in public schools and guaranteeing emergency medical attention for Venezuelans. During April-June 2018, the Colombian government along with IOM and UNHCR led a national process to register and regularize the Venezuelan population in Colombia and thus granting them access to public services and work permits. However, despite good intentions, local administrations have been surpassed in their response capacity. Previous to the crisis, Colombia had no experience and almost no legal framework for receiving refugees or migrants and there have been constant changes in regulations generating widespread confusion as to what are the rights of irregular and regular Venezuelans in Colombia. The Colombian government recently issued a policy guideline document for the attention of Venezuelans in the country and has asked the international community’s help to guarantee a proper response to the crisis.

As to the national civil society response in Colombia, the Catholic Church is a predominant actor in providing protection and assistance, mainly lodging and canteens, and the Colombian Red Cross is an important provider of protection and health.

As mentioned, the Venezuelan government does not acknowledge the crisis, and all indications point at lack of capacities to reduce vulnerability and meet needs. In Mid-2016, the government created Local Committees of Supply and Production (CLAPs) to distribute food supplies and basic commodities and announced measures to respond to food shortages, including continuous raises the minimum wage and increased food distribution to vulnerable families. However, as the country’s economic and institutional situation continues to worsen, these measures have proven to be totally insufficient and often conditioned to holding new identity cards issued based on political loyalty. The Venezuelan institutions have no culture or experience of humanitarian aid and no coordination with Venezuelan authorities is at present feasible.

At community and household level the negative coping mechanisms abound. Family separation is increasing as young adults leave children, elderly and sick relatives behind when leaving the country. Food intake reduction and alternative feeding patterns has brought severe decline in nutritional status of the Venezuelan population.
2.2 International operational capacities and constraints / Regional assistance

Colombia has a well-functioning coordination of the humanitarian assistance in response to the internal armed conflict with a Humanitarian Country Team\(^5\) and clusters\(^6\) led by OCHA and with representation from national and international NGOs and donors.

At the local level, the response is coordinated by nine Local Coordination Teams. These teams were created in 2016 as the UN system response to the need of a more coordinated and effective action in a transition to a post-conflict scenario. The LCTs involve not only humanitarian actors but also development and peace-building national and international actors. This approach enables the provision of humanitarian assistance to be complemented with actions that address the root causes of conflict and peace-building initiatives. INGOs and local NGOs formally participate the drafting process of the HNO and HRP. The Country Based Pooled Fund in Colombia was closed in 2018. As a mitigation measure to OCHAs reduced operations in the country, INGOs have formalized a coordination forum for INGOs to performing joint analysis and advocacy.

According to OCHA, the Humanitarian donors in Colombia has contributed USD 88 million for the humanitarian response in 2018, a 52% increased compared to 2017. Largest donor continues to be USA followed by ECHO, Switzerland, Germany, Canada, Spain, Norway and Sweden. Unlike previous years, and as a sign of more focus on vulnerable Venezuelans in Colombia, the sector with most funding was Food security and Nutrition followed by Protection and multi-sector response. The HRP 2018 has been financed in a 27% (USD 42 million). USD 62.2 million were given outside the Humanitarian Appeal, mainly to ICRC. A “Response Plan for Mixed Migratory Flows” was added to the 2018 HRP requesting USD 104.2 million, out of which USD 22 million have been financed.

There is also a robust international cooperation infrastructure for the implementation of the Peace Agreements that includes 3 multi-partner trust funds (UN, EU, IDB). While this could be an opportunity for creating synergies between humanitarian and peace-building interventions, up to now actions have limited to exchange of information and coordination. Moreover, local and international NGOs complain donors are reluctant to finance “full-spectrum” interventions arguing they have different funding mechanisms for humanitarian and peace-building projects.

Sweden actively participates in the Humanitarian Donors Group and during the last year Sweden has actively advocated for complementary actions between the humanitarian and development actors. Sweden also participates on the Board of all three peace-building trust funds, which has allowed advocacy for a stronger implementation of the triple-nexus by, for example, including protection or resilience measures in development interventions.

As to Venezuelans outflow, neighboring countries have responded commendably, largely maintaining open-door policies and demonstrating considerable solidarity with refugees and migrants from Venezuela despite the strain on their reception capacity. This openness and solidarity was reflected in the landmark Quito Declaration adopted in September 2018, following a meeting between receiving countries aiming to articulate regional coordination.

Since early 2018 the international response to the outflow of vulnerable people from Venezuela is, by mandate from the UN Secretary General, led jointly by IOM and UNHCR through the Regional Inter-Agency Coordination Platform for Refugees and Migrants from Venezuela. The platform aims at addressing the protection, assistance and integration needs of both refugees and migrants through accompanying, complementing and strengthening national and regional responses of governments, international organizations and NGOs. Currently, the Regional Platform counts with 31-member organizations\(^7\). Within each affected country, there are national coordination platforms responsible for the national coordination. In September 2018, a Joint Special Representative for Venezuelan refugees and migrants in the region was appointed to work closely with and report directly to both the UNHCR High Commissioner and the IOM Director General. His task is to promote dialogue and consensus necessary for the humanitarian response, including access to territory, refugee protection, legal stay arrangements and the identification of solutions for Venezuelan refugees and migrants.

National coordination platform for Colombia is the recently created “Interagency group for mixed migratory flows” led by UNHCR and IOM. The emergence of this new coordination has generated tensions among the humanitarian actors as it is seen as a parallel coordination mechanism that could lead to duplication or fragmentation of actions and “competition between crises”. Two coordination mechanisms brings a risk of losing a joint perspective on how the two crisis are intertwined and mutually reinforce each other. Efforts to harmonize the two mechanisms have been made by e.g. back-to-back meeting for the HCT and the Interagency group for mixed migratory flows.

In May 2018, the UNHCR launched a USD 46 million supplementary appeal to respond to the needs of people displaced from Venezuela in 8 countries\(^8\). Up to November 2018, the appeal is 80% financed, being USA, CERF and EU the major

\(^5\) HCT is composed by 12 UN agencies and 11 INGOs. Doctors without borders, ICRC and ECHO participate as observers.
\(^6\) Seven clusters are active: Protection, Early Recovery, Health, Food Security and Nutrition, Education in Emergencies, Water and Sanitation and Shelter. Within the Protection Cluster, there are two sub-clusters: Mine Action and SGBV.
\(^7\) 15 UN Agencies, 9 NGOs, ICRC, IFRC and 5 donors (AECID, DFID, ECHO, OFDA, PRM)
\(^8\) Brazil, Colombia, Costa Rica, Ecuador, Mexico, Panama, Peru and Southern Caribbean.
donors. The appeal includes also USD 7.5 million for the situation within Venezuela, mainly for Colombian refugees in the country.

Inside Venezuela, international response to the crisis has been very limited so far as the Venezuelan government denies the humanitarian needs and restricts access for international humanitarian organizations. So far, the Venezuelan government has only asked for help for medical shortages and has acquired some medicine and blood reagents from the Pan American Health Organization (PAHO).

2.3 Access situation

In general, humanitarian actors are well respected in Colombia due to their experience and long-time commitment in the response to humanitarian emergencies in the country during the more than 50 years of internal armed conflict. ICRC and NRC are among humanitarian actors with longstanding access and support in conflict ridden areas. Regardless of the trust in humanitarian actors, presence of new armed groups has brought increasing access problems. In urban areas controlled by organized armed groups access in recently further hindered as presence of humanitarian actors can cause a risk of reprisals for the population.

Venezuela is according to ACAPS latest report on humanitarian access one of four countries at level 5 – Inaccessible. ACAPS also state that a general lack of information hampers the assessment of humanitarian access indicators. The main access constraint is the governments denial of the humanitarian needs and reluctance to let most humanitarian agencies and aid into the country. The access to people in need is further obstructed by high levels of violence and security risks.

3. SIDA’S HUMANITARIAN RESPONSE PLAN

3.1 The role of Sida

Sida’s humanitarian funding for Colombia was around 50 MSEK annually during the years preceding the peace agreements, thereafter decreasing to 25 MSEK in 2017 and the initial funding for 2018 was 23 MSEK. Support focused on protection, and to a lesser extent, water and sanitation, in the most conflict affected regions and on support to coordination. Traditionally, the largest partner has been ICRC as a well-known and respected partner for protection in conflict and being the only organization allowed to have contacts with armed groups listed as terrorists.

Despite the existence of zones with extended deprivations of public services (health, education, electricity) and deteriorated infrastructure, Sida has had a firm position on not financing actions that should be financed by the Colombian government, especially when the development inequalities are not a consequence, but a cause of the armed conflict.

In 2018, as OCHA was phasing out operations, Sida’s financing for the organization was doubled with the aim of ensuring a proper hand-over to local authorities. OCHA’s presence in Colombia has now been extended until end of 2019 due to the deterioration of the humanitarian situation. OCHA’s coordination work is highly recognized by UN agencies and NGOs; however, it is a concern for Sweden that instead of handing-over, the Office has focused in trying to maintain its capacity through “alternative” mechanisms, e.g. interns and UNVs. The counterproductive effects of a premature withdrawal of humanitarian actors and coordination actors is a lesson worth taking into consideration. Donors dramatically reduced their humanitarian funding during the period of peace negotiations as the situation was expected to improve once a Peace Agreement with FARC was reached. The humanitarian situation improved slightly during the negotiation process, but the trend reversed once the Peace Agreement was reached as new actors began fighting for FARC’s former territories. The premature withdrawal of humanitarian actors has led to gaps in humanitarian response as well as higher costs as actors that had withdrew are now reinstalling operations in the country.

As the situation in Venezuela worsened, and the outflow of people from the country intensified during 2018, six NGO partners as well as ICRC and UNICEF, UNHCR and FAO obtained Sida’s approval to use unallocated or additional funds for rapid response to the crisis in Colombia and the region. Sida contributed almost 70 MSEK in 2018 to partners for protection and assistance of Venezuelans in Colombia and the region, including limited support for assistance inside Venezuela. This is a good example of how both Sida as a donor and partners have shown capacity to quickly respond to a new crisis using the preestablished mechanisms to do so. For 2019 Colombia and the regional Venezuela crisis is on the list of ongoing mayor crises receiving annual and regular humanitarian support from Sida.
3.2 Response Priorities 2019

3.2.1 Humanitarian Focus
Sweden’s humanitarian response to Colombian armed conflict will, in accordance with the forthcoming HRP, continue to focus on protection and in addition support the humanitarian coordination. Continued support to ICRC’s work to establish the fate of persons missing in the conflict is prioritized, both for its humanitarian importance and for its contribution to the peace process. Sweden and ICRC were both appointed in the peace agreements to accompany the Colombian authorities in the search of missing persons. Thus, besides the attention of urgent humanitarian needs, support to ICRC also contribute to the implementation of the peace agreements. Coordination remains highly important, as new humanitarian actors are initiating operations in Colombia. The Pacific Coast and border regions will continue to be prioritized, as they remain areas most affected by conflict and in addition with a high influx of people from Venezuela.

As to the Venezuelan outflow, a multi-sector response in Colombia and the region is necessary to cope with the magnitude and complexity of the crisis. Emphasis should be on protection, including legal assistance to obtain a regular status in the host country ensuring access to rights and services such as health care and education. In addition, partners will be supported for contributions for psychosocial support including attention to SGBV. Cash assistance will be used as modality to assist some of the most vulnerable Venezuelans. Geographical focus should be the border regions, transit routes and cities with high rate of Venezuelan/host population.

In Venezuela, where there is no HNO or HRP, needs assessments are based on limited surveys and partners access and priorities largely define what can be achieved. Main areas for support will be health, food security and nutrition (with emphasis in children and school lunches) WASH and information production. Areas of intervention are equally difficult to prioritize and will depend on partners focus areas, mainly the border region with Colombia and the Caribbean coast.

3.2.2 Field Follow-up
In Colombia the humanitarian assistance responding to the internal armed conflict and urban violence will continue to be a focus for follow-up with ICRC and NRC as the most relevant partners. The phase-out of OCHA and future coordination of humanitarian assistance and synergies with peace and development efforts must also be followed.

A priority in early 2019 will be to monitor the assistance inside Venezuela and follow up implementation of projects and also how partners work with needs assessments, targeting and coordination. Partners operating in Venezuela are expected to require exceptions from normal agreement conditions to enable the assistance, e.g not transfer funds through banking system and this will require monitoring and dialogue.

3.3 Partners

OCHA – Colombia. OCHA is still in the process of phasing-out activities in Colombia and continued support is important to ensure best possible process.

ICRC – Colombia. ICRC has, as explained above, a key role in protection in Colombia and in the search of missing persons thereby contributing also to the peace process. Main priorities in 2019 include to address the protection-related concerns of violence-affected people and to provide assistance to the most vulnerable communities in the areas of economic security, water and sanitation, primary health care, mental-health and psychosocial support, hospital care and physical rehabilitation. The ICRC will also step up its assistance activities for migrants from Venezuela and other countries in the region and work with the authorities and with other organizations, to ensure migrants’ access to clean water, sanitation facilities and health care.

ICRC – Venezuela. For the first time ICRC has presented an appeal for Venezuela. Main priorities in 2019 include to step up efforts to help vulnerable people in violence-affected communities and in areas bordering Colombia to cope with their situation and build their resilience to the effects of violence, and to maintain support for the Venezuela Red Cross Society’s basic health services for people in areas along the Venezuela Colombia border. Other priorities include restoring family links of people separated from their families due to violence, migration or detention and to advocate for IHL in police and military procedures.

UNHCR/IOM – Regional. UNHCR and IOM jointly implement a substantial part of the Regional Refugee and Migrant Response Plan and forward funds to local implementing partners. Sida’s support will be earmarked for emergency response.

UNICEF – Regional. UNICEF has presented an appeal for “Children on the move” as part of the Humanitarian Action for Children. Actions will focus on three pillars of intervention at country level, with special emphasis on Colombia, Brazil, Ecuador, Guyana, Panama, Peru and Trinidad and Tobago. The pillars are 1) protection for migrant children and their families, to ensure access to child protection services, education, holistic health and nutrition support, and WASH services; 2) child protection and advocacy to ensure that the rights of the migrant and refugee children and their families are at the core of the actions taken by national stakeholders, civil society and humanitarian organizations; and 3) resilient development and social policy to promote inclusion and integration.
NRC – Colombia. The overall objective of NRCs Country Programme in Colombia is i) to provide timely humanitarian assistance to identified vulnerable groups; ii) to ensure that people who have fled violence or are confined have access to protection measures and iii) contribute to durable solutions for protracted IDPs.

NRC – Venezuela Displacement Crisis. As one of the few international NGOs working in Venezuela, NRC will aim to provide timely humanitarian assistance and protection to identified vulnerable groups in Venezuela. The objective is to ensure that people who have fled violence have access to protection measures.

AAH – Colombia Country Programme focused on response to the Venezuela Displacement Crisis. Through a multi-sectoral approach, AAH will target migrants and the host population with emergency assistance. The programme will include activities that seek to improve access to nutrition, health and WASH services for the affected population. The programme will also include distributions of non-food items and multi-purpose cash grants.

AAH – Venezuela Displacement Crisis. AAH’s project for integrated and comprehensive multisectorial emergency response to the most vulnerable population affected by the complex crisis in Venezuela aim to improve food and nutritional security for vulnerable population with focus on access to malnutrition prevention and treatment services to infants under five and pregnant and lactating women. The project will also rehabilitate and improve water supply systems in schools and community centres and distribute hygiene and dignity kits.

SRK –Venezuela Displacement Crisis. The overall objective of the Red Cross National Societies Monarch Butterfly programme for Colombia and Venezuela is to reduce the migrant populations’ vulnerabilities along the migratory route and in targeted communities on both sides of the Colombia/Venezuela border by meeting key humanitarian needs for the most in need migrant populations with a particular focus on primary health care, psychosocial support, awareness raising, protection from violence (in both Colombia and Venezuela); and integration activities to reduce discrimination and stigma (in Colombia).

<table>
<thead>
<tr>
<th>Partner</th>
<th>Sector/focus of work</th>
<th>Proposed amount</th>
</tr>
</thead>
<tbody>
<tr>
<td>OCHA</td>
<td>Coordination of the humanitarian assistance to Colombia’s internal armed conflict and the massive outflow of Venezuelans</td>
<td>2 000 000</td>
</tr>
<tr>
<td>ICRC</td>
<td>Un-earmarked support to ICRC’s Country Appeal for Colombia</td>
<td>8 000 000</td>
</tr>
<tr>
<td>ICRC</td>
<td>Un-earmarked support to ICRC’s Country Appeal for Venezuela</td>
<td>4 000 000</td>
</tr>
<tr>
<td>UNHCR / IOM</td>
<td>Support to the Regional Refugee and Migrant Response Plan for Refugees and Migrants from Venezuela – Earmarked for Emergency Response</td>
<td>10 000 000</td>
</tr>
<tr>
<td>UNICEF</td>
<td>Un-earnerked support to UNICEF’s appeal “Children on the move – Migration flows in Latin America and the Caribbean”</td>
<td>5 200 000</td>
</tr>
<tr>
<td>NRC</td>
<td>Un-earnerked support to NRC’s Country Program for Colombia; Shelter&amp;Settlements, ICLA, Protection, Education, Multi-purpose cash</td>
<td>10 000 000</td>
</tr>
<tr>
<td>NRC</td>
<td>Un-earmarked support to NRC’s Program for Venezuela Regional Displacement Crisis; Shelter&amp;Settlements, WASH, ICLA, Protection, Education, Food security, Livelihoods</td>
<td>10 000 000</td>
</tr>
<tr>
<td>AAH</td>
<td>Project support to AAH’s multi-sectoral emergency response to the most vulnerable population affected by the complex crisis in Venezuela: Nutrition, Health, WASH, NFI, Protection, GBV and Psychosocial support, Multi-purpose cash</td>
<td>6 500 000</td>
</tr>
<tr>
<td>AAH</td>
<td>Un-earnerked support to AAH’s country program in Colombia for responding to the Venezuela Displacement Crisis in Colombia: WASH, Health and nutrition, SRHR Psychosocial support including SGBV, Food security and Livelihoods, Multi Purpose Cash Information &amp; data management</td>
<td>6 300 000</td>
</tr>
<tr>
<td>SRK</td>
<td>Primary health care, psychosocial support, protection from violence and support o integration</td>
<td>3 000 000</td>
</tr>
<tr>
<td><strong>TOTAL:</strong></td>
<td></td>
<td><strong>65 000 000</strong></td>
</tr>
</tbody>
</table>

3.4 Synergies with long-term development assistance
Sweden’s Development Cooperation Strategy with Colombia for 2016-2020 has a budget of 920 MSEK to be implemented by Sida. The overall objective of the strategy is to contribute to sustainable peace and human security. Specific goals of the strategy are: democratic implementation of the peace agreement; access to transitional justice (including the issue of missing persons); improved conditions for inclusive and sustainable economic development in areas affected by conflict and with sustainable use of resources; greater access to basic and sustainable public services in conflict-affected regions and prevention of GVB.

The Embassy has sought to support the synergies between humanitarian assistance and long term-development in Colombia through direct financing of projects that target this purpose and support to the inclusion of resilience as a crosscutting issue in Trust Funds and also supporting methodologies that facilitate this synergy. Examples include support to FAO to strengthen the resilience of the livelihoods of vulnerable communities affected by the conflict and extreme climatic events and support to the UN Resident Coordinator’s Office Data Management and Information Analysis Unit.

As a result of the Peace Agreement with the FARC, the Colombian government committed to prioritizing development interventions in 170 municipalities heavily affected by armed conflict. These municipalities largely coincide with the regions with the most severe humanitarian needs, thus creating an opportunity of linking humanitarian and state development interventions.

Both the World Bank and the IDB have announced their willingness to support the region with the establishment of multi-partner trust funds that will address long-term solutions for the inclusion of the Venezuelan population within host countries. The World Bank has advocated for the inclusion of Colombia in the Global Concessional Financing Facility and Sida may in 2019 look into the feasibility of contributing to sustainable solutions through collaboration with e.g the World Bank.