

RAPID NEEDS ASSESSMENT – NECOCLÍ

Colombia, 13 – 16 December 2021



The Colombian town Necoclí is an important hub in the migration routes of extra-continental and Caribbean populations towards Mexico, the United States, and Canada. People from all over the world transit through Colombia as part of the “south-north” migration in search for better socioeconomic opportunities. Necoclí forms a strategic point because of its proximity to the border with Panama. In Necoclí, people embark the boats that bring them closer to the Darien Gap, an extremely dangerous jungle that forms a natural barrier with Panamá, and which is the only way to reach the northern subcontinent by land.

The Darien Gap

126,675 people crossed the border between Colombia and Panamá through the Darien between January and November 2021

80% of the people report having been robbed, assaulted, or raped up to three times when crossing the Darien.

According to OCHA, the UN agency monitoring the situation and coordinating the response

Arriving in Necoclí feels for many like being close to reaching their dream destination; in the words of a Haitian migrant: “*reaching Necoclí is like reaching Miami*”. However, many risks await them both in Necoclí as when crossing the Darien rainforest.

The Darien rainforest is extremely dangerous and difficult to transit. It is home to wild animals including snakes, jaguars, poisonous frogs, and mosquitos. Its high temperatures, humidity, rivers with strong currents, and lack of water and food put people at risk of pathological problems such as dehydration, respiratory problems, gastrointestinal injuries, traumatic injuries such as blistered and injured feet, and even death. The Darien is controlled by armed criminal groups such as Colombian drug traffickers and Panamanian indigenous groups. Taking the seaway would potentially be a safer alternative route, but the Panamanian government has prohibited entry to the country by sea. People who do take this route, do so in illegal vessels at night at high risk of drowning.

State of emergency

The number of refugees and migrants present in Necoclí is fluctuant. In 2021, the arrival of migrants increased significantly due to worsening conditions in both home and host countries. With the closure of borders because of the Covid-19 pandemic, thousands of migrants stranded in Necoclí unable to continue their journey. When money ran out and accommodations became overcrowded, people lived in precarious conditions on the beach and streets of the municipality. Unable to respond to the needs of the migrants and with the water and sewage systems collapsed, the mayor’s office declared a state of emergency in August that year.

Historic trends of migration flows have shown that numbers drop at the end of the year when people prefer to spend the holidays with family and friends and when the weather conditions make crossing by sea and land even harder than it already is. It is expected however, that the number of migrants transiting through Colombia will increase again early 2022 with the reopening of borders, hardening conditions in home and host countries, and improving weather conditions.

Melting pot

In Necoclí, three situations come together in an already difficult local context. The first being that of **people in transit** who stay for only a few nights in the municipality while they pursue their boat ticket and await their turn to cross the sea towards the Darien. In November 2021, 1,241 people left Necoclí by boat according to data from the EMPI (Comprehensive Mobile Protection Team) from the Colombian Family Welfare Institute (ICBF). That same month, 8,638 people crossed the border with Panamá.

People come from a variety of countries. Migration Panama registered the entry of people from more than 35 different countries¹, such as Haiti, Cuba, Venezuela, and Bangladesh. Initially, people had enough resources to cover their expenses, but Necoclí's economy started developing around this migration with dollarization, overcrowding of housing, and excessive prices for food and shelter as its consequences. Those who do not have enough money, or who cannot pay in dollars stay on the beach or the streets, sometimes in small tents or in the open air. There is very limited access to private and safe sanitary facilities. People bathe in the sea, go to a remote dam, or fill water bottles to wash themselves. This seriously compromises people's integrity and accelerates the spreading of diseases. Health problems are prevalent among this population. Most frequent conditions are respiratory, viral, and intestinal diseases, as well as skin eruptions.

People lack information about the natural conditions of the Darien, the presence of armed actors in the territory, the requirements for regularization in host countries, and the available assistance. Because of the unclear and false information circling around among migrant groups, some people decide not to listen or believe any of it. Others purposely decide not to investigate details about the Darien, trusting on the help of God during their journey. Therefore, people are easily deceived and exploited. People are not prepared for the difficult conditions of the jungle, and leave Necoclí with inadequate shoes, with too heavy luggage, and without basic camping gear.

The second scenario is that of **migrants who had to halt their migration**. The second scenario is that of **migrants who had to halt their migration**. These predominantly Haitian families are stranded in Necoclí while they try to resolve medical, juridical, or financial issues.

GBV

Local authorities lack the capacity to effectively prevent and respond to sexual exploitation and abuse and other forms of gender-based violence. Until very recently, the municipality did not have its own response plan to GBV leading to an important underreporting of cases. Anecdotal evidence mentions the increase in sex workers to serve both the Colombian and migrant population. Venezuelan women are especially stigmatized and pointed out as potential sex workers. Haitian women, on the other hand, are stigmatized for being carriers of HIV.

¹ The following are the 12 main countries of origin: Haiti, Cuba, Chile, Brazil, Venezuela, Bangladesh, Ghana, Uzbekistan, Senegal, India, Angola, Cameroon. Important to mention that the children from Haitian parents born in Chile and Brazil are registered under Chilean and Brazilian nationality.

MHPSS

Migrants across all three situations show signs of deep sadness, depression, hopelessness, humiliation, fear, and impotence. Children have begun to take on the emotional impact of their parents. Although there is some psychosocial help available through humanitarian agencies, effective access is limited due to cultural and linguistic barriers. Mental health disorders are hardly addressed. The hospital does not offer psychiatric support and unable or unwilling to be referred to other cities, people stay untreated.

expenses. Access to healthcare is limited, not just because of lack of documentation or health insurance but because of the limited health services offered in Necoclí.

Special concern for these women is the safety and wellbeing of their children. Children are at risk of forced recruitment and kidnapping by illegal armed groups that control Necoclí's surrounding towns. In schools, Venezuelan children are bullied and stigmatized because of their nationality. Teachers seem to do little to resolve these classroom conflicts.

HIAS talked to people who got seriously injured while trying to cross the Darien rainforest, obliging them to return to Necoclí to receive medical attention and to recover. These families initially had sufficient resources to cover their expenses in Necoclí, but it has not been enough to pay for their basic needs during the several months they have to spend in the municipality. The language barrier makes it almost impossible for them to obtain a (temporary) job. They often rely on the church for food assistance and housing. Besides Haitians, HIAS also spoke to Venezuelan and Cuban citizens who arrived in Necoclí in very poor socioeconomic conditions, without a support network that can contribute financially. These people cannot afford the boat ticket, nor can they pay for daily food and housing.

This group of stranded individuals particularly show signs of distress, sadness, frustration, and loneliness. The uncertainty about the future and the impotence is especially hard on them. As these people do not have the intention to stay in Necoclí but cannot continue their journey either, they struggle integrating in the host community.

The third group is that of approximately 1,200 **Venezuelan people who have the intention to stay** in Necoclí. HIAS talked to 30 women about their living conditions and priority needs. These families have been affected by the rise in living costs in Necoclí, especially in food prices, since the increased arrival of extra-continental migrants. This makes it hard for them to provide for their basic needs, especially since jobs are scarce, salaries are often paid with delays, and earnings are not enough to cover their



Figure 1. HIAS carried out individual and group interviews with refugee and migrant populations.



Figure 2. HIAS talked to Venezuelan women with the intention to stay in Necoclí about gender-based violence.

Local context

These three scenarios are set in a municipality that is already unable to satisfy the basic needs of its inhabitants itself. The municipality has severe water issues caused by an obsolete aqueduct system that regularly collapses. Water comes and goes intermittently and is not fit for consumption. Necoclí's hospital only offers preventative and curative care for non-urgent conditions, providing health services of low or medium complexity. For more serious and complex issues, people must go to towns further away, implying additional expenses that people often cannot afford. There is no mention of any migration issues in Necoclí's development plans and therefore there is no specific budget assigned to respond to the needs of the migrant population. The hospital has been left with a huge financial dept for providing emergency care to migrants.

Although potentially a touristic town, Necoclí does not benefit from a thriving economy. Its unemployment rate reaches 80%. With the absence of tourists due to the pandemic and the multiple news reports about the increased number of migrants in Necoclí, its economy has been adapted completely to the presence of migrants. Prices are now in dollars instead of Colombian pesos, street vendors sell camping gear and cookware on the beach, locals started restructuring their houses to be able to host more migrants against a higher price, evicting others in the process. According to information from the Ombudsman, several children and adolescents dropped out of school to find work responding to the migration.

Necoclí also has a strong presence of illegal armed groups. Extortions, kidnapping, drug trafficking, illegal mining, selective assassinations, and arms trade are common practices. The Ombudsman has raised concerns about the violations of human rights of children, including migrant children, by these illegal armed groups that forcibly recruit and utilize children. The perception of the population of these armed groups is dual, they recognize the effectiveness of the parallel justice system offered by these groups and prefer to solve disputes with the "people of security" instead of the police. On the other hand, mothers are extremely worried about the safety of their children.

Authorities reiterate that Colombia is not the cause or the final destination for the majority of the migrants. This idea is used to justify a limited response that is mainly focused on ensuring that people continue their journey as soon as possible and do not stay longer than necessary in the

country. However, it is paramount to offer a comprehensive response to the situation to protect the dignity and integrity of people fleeing poverty and social/political unrest. Both migrant population and host community require greater access to basic services such as safe drinking water, food, and healthcare. Local institutions must be strengthened to be able to effectively provide legal assistance, information and orientation services, GBV prevention and response, amongst others. Psychosocial support and mental health care are needed for those who experience distress caused by the migration.

Tentative response

With HIAS' international and national experience and expertise in Mental Health and Psychosocial Support (MHPSS), Protection, and GBV, the organization is well positioned to support and strengthen local authorities as well as humanitarian and grassroots organizations present in the region and guarantee a better response to the needs of the migrations staying in or passing through Necoclí. At the same time, HIAS' regional presence in amongst others Peru, Ecuador, Colombia, Panamá, and Mexico provides the perfect opportunity to develop a comprehensive approach along the migration route. HIAS' response would be twofold: providing emergency assistance to people merely transiting through Necoclí and enhancing the social fabric for people who must interrupt their migration or who have the intention to settle in Necoclí.

Emergency response (*migrant populations in transit*): People crossing the Darien need basic supplies for their protection and survival. HIAS could distribute survival kits, including for example, a first aid kit, a compass, drinking water, whistle, and a flashlight. For women and girls, these kits will also contain products that will help them maintain their personal hygiene and dignity. Kits for both men and women should also include supplies that promote sexual and reproductive health.

HIAS offices in both Colombia and Panama should work together to identify the human rights violations people face in the Darien rainforest to develop key information pieces and orientation sessions on the prevention and mitigation of risks as well as available services for people whose rights have been violated crossing the Darien. Information and orientation should especially focus on GBV and women's rights and enhance help-seeking ability of survivors of rape or assault.

To address the mental health and wellbeing of individuals and communities in crisis, HIAS can strengthen the capacities and competencies of services providers such as government and non-government officials, health care workers, and civil society) in providing Psychological First Aid. These trainings ensure services providers better understand how people respond to stressful and traumatic events, as well as gain basic skills for active and empathic listening, identification of specific needs and protection risks, and how and when to refer for specialized care. HIAS should monitor and advocate for better access to emergency healthcare for migrants, including physical and mental health and legal medicine. Additionally, HIAS will advocate for education in emergencies as a moment of physical and psychological safety to children and their families and a way of providing life-saving messages.

Where possible, HIAS will also support organizations that seek to satisfy people's urgent food, shelter, and WASH needs. In addition, HIAS will join forces with organizations with cross border operations to ensure rapid family reunification for separated or unaccompanied minors on both sides of the border.

Social fabric (*host and migrant population in Necoclí*): This component will focus on facilitating more and better interactions between community members, including migrant and host populations.

Strengthening the social fabric in Necoclí will contribute to the prevention of xenophobia and discrimination. It is also a way of improving emotional wellbeing, helping people to make more friends, feel included, and find support among peers when needed. Strengthening relationships, networks and practices that communities use to cope and heal will help bolstering the resilience of people. It will provide the tools to families and communities to support and care for others in ways that restore and strengthen collective structures and systems essential to well-being. These participatory sessions will be guided by a skilled facilitator and be organized around a gender and human rights approach, promoting integration, inclusion, and cultural exchanges.



Figure 3. HIAS seeks to complement the actions implemented by other humanitarian organizations present in the municipality. In the photo representatives of Pastoral Social as part of a project funded by UNHCR.

Within the process of strengthening the social fabric, participants will be encouraged to challenge existing social norms that maintain gender inequality and increase the risk of gender-based violence and impede effective responses to sexual violence. It is important to work with both men and women to challenge and transform beliefs, attitudes, and behaviors that perpetuate or condone violence against women, girls, and the LGBTQ. HIAS will help both communities as local organizations and authorities to work on risk reduction, primary prevention, and survivor support. This approach enables HIAS to meet the safety, psychosocial, economic, and justice needs of survivors and facilitate their access to appropriate care.

HIAS will encourage organizations and entities to explore the possibilities of cash for work programs that provide temporary employment for migrants with specific abilities, for example, language skills so that people can stabilize their income.

As elaborated above, HIAS response strategy for all three migration scenarios will focus on the strengthening of the capacities of organizations and governmental entities already present in Necoclí. By sharing its knowledge, expertise, and resources, HIAS will provide service providers with the right tools to address GBV risks and MHPSS concerns and enhance the protection of refugees and migrants living in or passing through Necoclí.