



**Venezuelan
children**
between a rock and
a hard place

Migration and COVID-19:

Venezuelan children between a rock and a hard place

The dramatic decision to migrate involves displacement of a person, a family, or a people group from their home to another place, either within their county or outside the country. Migration implies abandoning one's intended life and facing uncertainty, xenophobia, and deprivation of basic needs as they search for safety, food, or economic opportunity. This age-old phenomenon involves different types of people and arises from different associated causes. In today's world, it includes food insecurity, personal safety risk, lack of access to medical or other basic services and the extreme vulnerability, as well as different forms of discrimination.

.....

This report was produced by Natalia Korobkova on behalf of the Venezuela Response Team at World Vision International in collaboration with the field offices.

We would like to thank the generous contributions of children and young people who shared their time and thoughts through this survey. We are grateful to colleagues and staff members from field offices: Claudia Patricia Sanchez Muñoz, Pauline Ochoa León, Elizabeth Bedoya, Gabriela Benitez, Johnny Jara, Jose Ignacio Peralta Barria, Luis Corzo, Marlene Arroyo, Natalia Cuello Avendaño, as well as Venezuelan organisation "Alimenta la Solidaridad". We are thankful for the assistance and support given by WV LAC and Venezuela Regional Response colleagues Mishelle Mitchell, Chris Huber, Paula Martes and Golda Ibarra.

Editing Consultant: Franklin Santander

Design: Fernando Otarola

©World Vision International 2020 All rights reserved. No portion of this publication may be reproduced in any form, except for brief excerpts in reviews, without prior permission of the publisher. For further information about this publication please contact: natalia_korobkova@wvi.org World Vision is a Christian relief, development, and advocacy organisation dedicated to working with children, families, and communities to overcome poverty and injustice. Inspired by our Christian values, we are dedicated to working with the world's most vulnerable people. We serve all people regardless of religion, race, ethnicity, or gender.

CHILD AND ADULT SAFEGUARDING CONSIDERATIONS World Vision ensured safe and ethical participation of children when they shared their stories, adhering to World Vision's safeguarding protocols. Names of children have been anonymised and changed to ensure confidentiality. All photos were taken and used with informed consent.

Cover photo: ©2019 World Vision

I. Introduction

South America has become the scene of one of the worst humanitarian crises in recent times. The crisis involving migrants and refugees from Venezuela involves children, adolescents, and young people who have left their country of origin to settle in surrounding countries, either due to political or economic reasons, sometimes both.

Faced with this reality that leaves millions of people between a rock and a hard place, World Vision has mounted a multi-country and multi-sector response. Its objective is to form a ring of protection around migrant children and their families, all the while restoring their dignity and hope in the face of adversity. Humanitarian assistance, protection and advocacy, the generation of livelihoods and cultural and economic integration are the pillars of this response. As of May 2020, it has reached more than 250,000 people in seven countries since January 2019.

World Vision's response to the crisis involving migrants and refugees coming from Venezuela includes operations in Colombia, Ecuador, Peru, Chile, Bolivia, Brazil, and Venezuela under the three pillars described above partnering with the humanitarian clusters coordinated by the United Nations. Operation Hope Without Borders is seeking US \$80 million to benefit 700,000 vulnerable people from January 2020 through December 2022. This implies being able to directly help 200,000 migrants at the regional level and 40,000 people in Venezuela in 2020.

Several organizations have also taken clear positions and actions in relation to this set of problems. UNICEF, for example, has expressed its concern because of the "reports of xenophobia, discrimination and violence perpetrated against Venezuelan children and families in host communities."¹

For its part, a joint communiqué between OHCHR, IOM, UNCHR, and WHO mentions that "While many nations protect and host refugee and migrant populations, they are often not equipped to respond to crises such as Covid-19," particularly in what is involved in prevention, testing, and treatment.²

Migrations break cultural and community ties when they leave home. In addition, families are shattered, and in many cases, this deepens their poverty and infringes on rights such as health, education, nutrition, housing, and protection. Migration is a right that involves high risks. These risks, since several months back, have been added to the global pandemic caused by the COVID-19 virus.

The UN Refugee Agency (UNHCR) estimates that by the end of 2020, 6.5 million Venezuelans will have left the country.³ This creates a diaspora throughout the continent that faces the migration drama, and also stalked by the threat to their lives brought by COVID-19.

This potentially lethal combination (migration and COVID-19), has become daily life for approximately 1,075,000⁴ Venezuelan children, adolescents and young people who have left the country over the last several years seeking – with or without their parents – the opportunity for a better life. Another 1 million children were left behind in Venezuela while their parents attempted to find some sort of work opportunity in other countries.⁵

This document, based on a World Vision study in different countries in South America, addresses this double-edged problem in the daily life of Venezuelan children. It also shows the changes due to the situation, the risks and the violation of the rights of children and adolescents who have migrated from Venezuela to different countries in the region, or who still are in that country. Although the latter group does not fit into the category of migrants, World Vision also researched about their situation in the context of the pandemic.

.....

¹ UNICEF, Crisis migratoria en Venezuela: 1,1 millones de niños de toda la región necesitarán asistencia en 2019, April 5, 2019.

² UNCHR, The rights and health of refugees, migrants and stateless must be protected in COVID-19 response, March 31, 2020.

³ UNCHR, US \$1.35 billion needed to help Venezuelan refugees and migrants and host countries, November 13, 2019

⁴ according to estimates published by CLACSO in "Voices and experiences of Venezuelan children and adolescents in Brazil, Colombia, Ecuador, and Peru", Buenos Aires, 2020, some 25% of all Venezuelan migrants are boys, girls, and teenagers.

⁵ Nearly a Million Children Left Behind in Venezuela as Parents Migrate, The New York Times, March 25, 2020

Forward

Two world wars. Armed conflicts in different parts of the world that have led to the displacement of millions of people. The devastating effects of climate change that have depopulated entire villages. The daily experience of inequity. As the world watched these phenomena unfold, they all created the same effect: mass migration. However, the year 2020 confronts us with a global pandemic that affects every aspect of life.

If this context has been devastatingly unpredictable and uncontrollable for the average person settled in their family, community, and country, how much more so for the families and millions of migrant and refugee children and adolescents.

“Migration and COVID-19: Venezuelan Children Between a Rock and a Hard Place”, is the image that aptly describes the reality of people, who, without a fixed home, without access to basic services such as health and sanitation, without employment, without income and livelihoods, and in many cases, without legal documentation, they must survive a global event on a scale this generation has never seen.

The study that we are pleased to present, delves into the harsh reality of children, adolescents and young migrants and refugees from Venezuela who are caught up in the economic and political crisis now made worse by the COVID-19 pandemic. This research delves into the emotional state and material conditions of children—some accompanied and others alone—in the midst of the pandemic. The results of this investigation drive World Vision to pursue articulate, effective responses for one of the most vulnerable population groups.

We help strengthen national health systems, empower communities through collaborative action, and guarantee the protection of children through our advocacy and operation. We thank our field staff and partners in governments, faith-based organizations, cooperation agencies and civil society that allow us to bring hope and life alternatives to thousands of people, who in the midst of one of the greatest trials facing humanity, feel cornered by the cruel choice of starving or dying of COVID-19.

“Life and life in all its fullness is our vision, and our job is to convene and generate a collaborative movement that **allows us to overcome one of the most challenging chapters in our history.**”

**Joao
Helder Diniz**

Regional Leader World
Vision Latin America
and the Caribbean.



II. Study Problems and Methodology

Since the World Health Organization declared COVID-19 a global pandemic in March, the world has undergone critical situations with no precedent in post-modern history. This has forced countries to take preventive measures such as the declaration of health emergencies, implementing quarantines, and ordering social distancing to avoid spreading the contagion to the masses.

To pinpoint the impact of these measures on the life of children, adolescents and migrants from and in Venezuela, World Vision International has performed research in seven countries in the region (Brazil, Bolivia, Chile, Colombia, Ecuador, Peru, and Venezuela) to report on the situation. To figure out the details inherent to the exercise and vulnerability of children's rights, a total of 392 surveys have been applied in this sub region during the month of April, 2020. From all of these surveys, 363 were answered completely by children, adolescents and young people who currently live in the aforementioned countries were systematized.

From this sample, 29.47% of children, adolescents and young people currently live in Colombia, 23.14% lived in Brazil, 18.18% live in Peru, 12.67% live in Ecuador, 7.71% live in Chile, 5.23% live in Bolivia, and 3.58% live in Venezuela. Some 57.6% of all the children who were questioned are younger than 11 years old, 32.8% are between 11 and 15 years old, and 9.6% are between 16 and 18 years old. Of all this population, 89.5% live in the city and 10.5% live in the country. It is important to point out that more than half of the people who were questioned are girls. Moreover, the low sample percentage in Venezuela is due to local restrictions with the Internet service and other logistical issues.

The tool that was used in the survey, both online and in person, was KoBoCollect (which is based on OpenDataKit) and is used to collect primary data in humanitarian emergencies and in other settings that involved challenging areas.

This, then, is a document that essentially collects the perspective and feelings of migrant children in relation to the risks, vulnerability, and the impact of the pandemic in the region.

TECHNICAL SHEET

Title	Survey on the Impact of COVID-19 on Migrant Children, Adolescents and Young People from Venezuela
Implementing Countries	Brazil, Bolivia, Chile, Colombia, Ecuador, Peru, Venezuela
Participant Age Ranges	Children below 18 years of age
Data collection period	April 17-27, 2020
Number of surveys applied	392
Number of valid surveys	363
Number of unanswered surveys	29
Participation rate	92,6%
Number of questions	21 questions
Collection form	Online and in-person using KoBo Collect
Sampling methodology	Random between areas of influence by World Vision and its associates
Sampling unit	Individuals

III. The country context

The roots of the crisis that Venezuela is undergoing lie in its recent history. Beginning in 1999, after the election of Hugo Chávez as the president of Venezuela, a series of structural transformations took place such as the installation of a Constituent Assembly and the subsequent approval of a new Constitution. This brought about the implementation of measures and laws and modified the institutional, economic, some social, and political environments.

The new regime installed in the country, along with the creation of the new Republic under the name of the Bolivarian Republic of Venezuela, nationalized companies, prohibited various communication media and promoted financial reforms that modified the balance of power in Venezuela and Venezuela's relationship with the international community. One of these reforms was the nationalization of oil companies in the country through expropriation. Added to that, President Chavez was reelected several times until his death in 2013. This is the year when his chancellor, Nicolas Maduro, took over the presidency.

The transformations that were made and the perpetuation of the so-called "Bolivarian" government had a structural effect on the Venezuelan citizens. Venezuela went from being a regional power to being a country in crisis. The business fence laid around Venezuela, added to the falling oil prices, the main source of currency for the country, substantially reduced the income for the state apparatus and forced the government to contract investments violently to the detriment of the infrastructure, services, and the institutional apparatus. The institutional weakening caused a severe social split aggravated by hyperinflation and unemployment that took away access for millions to food, health, and basic services since an elite associated with spheres of power enjoyed the basics and the sumptuous. In the middle of both extremes, a rampant violence that turned Venezuela into the most violent country in the world, prevails.

The country's political situation, in terms of governance, sharpened based on the blows by the power between the government and the opposition. Moreover, factors such as the centralization of decisions and the management of performance criteria and the transparency of the governmental institutionality have deteriorated country's coexistence and governance.

The sharp decline in the quality of life of the Venezuelans caused millions of its citizens to leave the country. According to the R4V platform,⁶ as of June 5, 2020, more than 5.1 million Venezuelans had immigrated to other countries over the preceding five years. Of those migrants, 4.3 million went to Colombia, Ecuador, Brazil, Peru, Bolivia, and Chile.

Of this figure, international organizations indicate that more than 1 million children, adolescents and young people currently live in these countries. The massive exodus exceeded the recipient countries' institutional capacities. These countries have not been proactive in developing a special set of regulations to support migrant populations. The dearth of specific types of support have brought about stigmatization, xenophobia, distress and crossing borders without documentation, with a high risk of trafficking and exploitation, etc.

Some of the effects and types of impact that were caused by the COVID-19 pandemic, particularly for migrant children and families coming from Venezuela, are the following:

- Loss of sources of income: the uprooted people face an endless number of problems with the loss of daily income and livelihoods to cover basic needs, according to the United Nations Organization.
- Eviction: due to the inability to make a payment, many migrants have been evicted from their places of residence in the different countries⁷.
- Family separation: the phenomenon took place prior to COVID-19 and was exacerbated by the economic limitations. Nevertheless, these situations became even more precarious with the pandemic. There are no ways to cross borders and there are no types of protocol or hope for family reunification.⁸
- "Forced" return to Venezuela: due to these factors, many Venezuelan families and citizens are forced to return to their country. Oftentimes the trip is made illegally due to the immigration policies in the countries but also risking their life and health because there are no standards of conditions for social distancing or hygiene⁹.

6 R4V Response for Venezuela's Coordination Platform for Refugees and Migrants from Venezuela, May 2020.

7 In images: migrantes venezolanos denuncian desalojos en Bogotá en medio de pandemia, Voa Noticias, April 2, 2020

8 Refugiados y migrantes de Venezuela: olvidados en medio de la pandemia, El País, May 24, 2020.

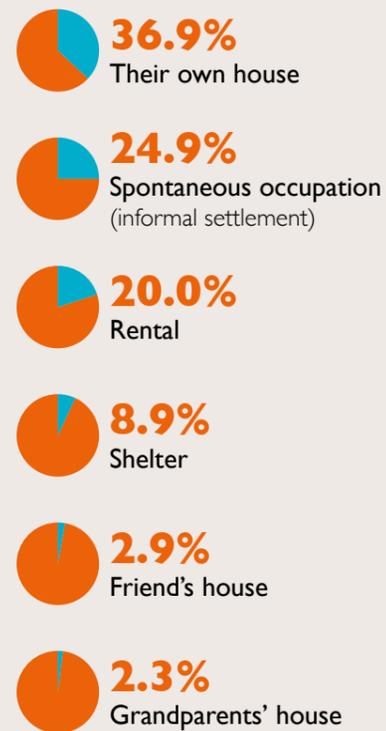
9 Unos 25.000 migrantes venezolanos en Colombia regresaron a su país en medio de la pandemia de coronavirus, Infobae, May 13, 2020

IV. The findings

4.1 Situation Overview

What we've heard from 363 migrant & refugee children

Where are the migrant children during quarantine?



Family Separation



1 in 4

children are separated from both of their parents during this pandemic



1 in 3

children live only with 1 of the parents

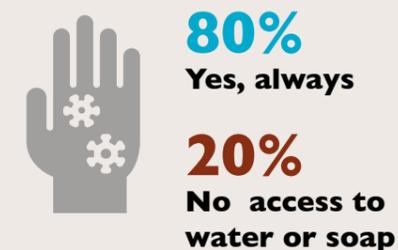
Working or Staying at home



Every third child goes hungry to bed



During quarantine do you have enough water and soap?



Perception of the family situation worsening in regards to:



When housing situation got worse



38.5% Looked for cheaper housing



28% are at risk of eviction



9.2% had to move with a family member



6.9% evicted



10% had to go to shelter

Access to healthcare services

34% do not have access to the healthcare services



40.9% have access to health services

How do you feel during quarantine?



54.9% feels bored



1 in 3 feels worried (34%)

Continuing education

63% not studying



37% studying



Is Coronavirus generating discrimination?

31% YES

29.1% NO

Discriminated groups



56.5% Venezuelans



32.4% People living on the streets



33.3% Migrants



21.3% Others



5.6% Indigenous

6.5% People living with disability

4.2 Deeper dive: **Country by Country**



BRAZIL: High vulnerability of migrant children

The situation of migrant children within the context of COVID-19 is critical. Three out of every four migrant children and adolescents who live today in Brazil, live in informal settlements (slums, favelas, or invaded lands). These contexts typically do not have access to basic services and are on the outskirts of the different cities, which increases the risk and vulnerability of children. Most of the children who were questioned (77%) did not attend classes either because the classes were suspended or because they are not enrolled in any school.

Family separation is persistent: one-third of the migrant children who live in Brazil do not or did not have any parents living at home before so the risk of the abuse increase.

In relation to this issue, almost two-thirds of the children who were questioned claimed that in this time of COVID-19 somebody at home has to leave to work so they had to find the most inexpensive place to live.

In the survey, migrant children in Brazil claim that discrimination is one of the issues that affect them the most. Half claimed that they were able to sense a different type of negative treatment for some people and two-thirds claim that they felt discrimination because they were migrants.

According to the data in this survey, Brazil is the country with the lowest migrant population with access to television (23% have a television compared to 62% for the semi-regional average), radio (19% compared to 28% on average) or a cell phone (81% compared to the average of 91%). These limitations on access to mass communication media are possibly the reason that the migrants in Brazil report the highest number who had received information about COVID-19 from the NGOs (66% compared to the average of 26.3%). The sum of this data may be an indication to us that, despite the political supporters in the Brazilian state related to Venezuelan migrants and refugees, a state weakness persists in reaching the population in precarious conditions.

However, 80% of children and adolescents claim that they know where to go if they need help. Some 85% of the people who were interviewed claim that the parents and their family are the first people to turn to for protection and help.



Three out of every four **migrant children and adolescents** who live today in Brazil, live in places that are spontaneously occupied



77% did not attend classes either because the classes were suspended or because they are not enrolled in any school



BOLIVIA: Structural shortcomings that impact migrant children

Bolivia tallies the lowest number of Venezuelan migrants in comparison to the other Andean nations. Nevertheless, the situation is perhaps the most critical because six out of 10 children, adolescents and young people report that they are staying in shelters provided by the government.

In those places, the right that is the most frequently violated is access to education because none of the interviewees is enrolled in any school. Interruption of the learning process and the lack of access to an educational system is even more limiting on the possibilities related to social mobility for migrant children and deepens the risks associated with poverty.

In relation to health, the interviewees claim that the only way they are able to access the health care service is through a physician who assists people in the shelters. Another critical issue is access to food. Eight out of 10 children, adolescents, and young people claim that they experience problems with food.

In short, difficulties with access to or deprivation of housing, health, food, education, and income are, among others, the most overriding needs for the migrant children who are located in this country. In the context of the pandemic, it was found that, comparatively, the migrant children interviewed in Bolivia are the children who most frequently reported (32%) that they did not have full access to soap and water to wash their hands frequently. This is a basic recommendation by the WHO to prevent COVID-19 and other diseases infection.

One out of every four interviewees said that they are thinking about moving to live in another city in the same country and a little bit more of 10% indicated that they have a desire to go back to Venezuela.

Some 53% of children and adolescents believe that COVID-19 has driven discrimination up toward one group of people in particular, indicating that 70% of the cases of the population group that received the most discrimination are migrants.

Most of the migrant children in Bolivia connect to the Internet from their parents' cell phones. In addition, 90% gained access to information about the COVID-19 risks primarily through information provided by a member of their family. Although they have a relevant level of knowledge about where to go in case of the risk or injury, 92% stated that they would turn first to their parents and their family.



32% said they did not have full access to soap and water to wash their hands frequently



six out of 10 children adolescents and young people report that they are staying in shelters provided by the government



CHILE:

The friendliest in the region

The context is equally challenging and threatening for a boy or girl. Even so, for people who have set themselves up in Chile, the conditions are relatively better according to the survey. Although income and food are highly critical factors for migrant children who are located in Chile, the largest problem for the pandemic and the quarantine for them is that there have been conflicts that have arisen inside the family. Some 43% of migrant children in Chile compared to 22.8% of the sub regional average have stated that domestic conflicts have risen.

The responses for migrant children in Chile also stands out due to the higher percentage of children and adolescents who reported that they felt concerned by the pandemic (54% in Chile compared to 34.2% of the sub-regional average) and that they felt fear (32% in Chile compared to the average of 19%).

Along with Brazil and Colombia, Chile is part of the countries where almost the total (93%) of the interviewees reported that they had lost income. However, the major difference with these two countries for migrant children in Chile is that two-thirds live in their own home, not in shelters.

It is important to point out that 82% of the interviewees revealed that they had serious problems with access to food. In addition, it bears pointing out that half of the interviewed population is at home with their whole family while the other half indicated that somebody had to leave the house to work. This has a direct impact on care and the possibility of purchasing food. Of the population interviewed in Chile, almost one-third of the children

indicated that they were thinking about going back to Venezuela. The other third has no intention of moving from the city where they are currently located while the remaining one-third does not know what it will do.

Half of them have someplace to go for issues related to health and that same percentage receives education over the Internet or through print material. The other half has suspended classes or is not enrolled in any school.

Eight out of every 10 boys and girls claimed that they had Internet and television service and that they have received information about COVID-19 about protection, symptom recognition, and actions in case of catching the disease through these media.

Comparatively, in relation to other countries, the migrant children who live in Chile know the most (93% compared to the sub-regional average of 75.5%) about where they are able to go in case of risks or injuries but their mothers and fathers are the first place they would go for help.

Their perception about different forms of discrimination due to their status as Venezuelan migrants is relatively low. Only one-third sense other forms of discrimination to other population groups or categories.



82% of the interviewees revealed that **they had serious problems with access to food**

54% of children and adolescents who reported that they felt concerned by the pandemic (compared to 34.2% of the sub-regional average)



COLOMBIA:

The persistence of hunger

Compared to the other countries in the sample, migrant children in Colombia face the most serious difficulties in obtaining food. Nearly 9 out of 10 children mentioned it.

Lack of income, food, hygiene items and access to services are the main factors affecting migrant children in Colombia.

Some 85% stays home during the quarantine, with both parents, with one of them or with a relative. On the other hand, one out of four does not live with relatives.

Two-thirds remain in quarantine with the whole family and one-third said that somebody from the family had to leave the house to work despite the measures. Some 88% of the latter stay home with an adult who takes care of them.

Some 70% of the population interviewed have no access to medical services. In addition to this, half of migrant children are not attending school because classes are suspended; while the other half receives education over the Internet or through print material.

Colombia seems to be the preferred destination for migrant children coming from Venezuela. None of those interviewed said they wanted to go back to Venezuela.

Two-thirds do not know what they will do and one-third said they will stay in Colombia.

75% of migrant children claimed having access to soap and water, although one quarter have partial or no access to these inputs.

As a consequence of the crisis increased by the COVID-19, some 70% had to find the most inexpensive place to live, or is at risk of being evicted due to non-payment of rent.

Regarding access to information, according to the survey, Colombia is the country where migrant families have the greatest access to information through television, radio and cell phones. This is how they have obtained information about the risks, symptoms and care needed to avoid infection with COVID-19.

84% of surveyed children have a sense of care and protection. They know where to go and to whom (their family). However, there is little reference to institutions or bodies of the protection system. As to coexistence, 20% of those interviewed have felt an increase of discrimination following the outbreak of the pandemic; they claimed that Venezuelans, as well as homeless people are the most discriminated people.



70% of the population interviewed have **no access to medical services**



serious difficulties in obtaining food
Nearly nine out of 10 children mentioned it.



ECUADOR:

With shortages but they are not discriminated against

Eight out of 10 migrant children are having problems to access food. Almost half of them have access to health care services, but the other half do not have or do not know that there is a health facility near their house. Education of all of them, in general, has been affected. 85% have their classes completely suspended without any other option to continue studying, and the rest is not enrolled in any school.

All children questioned are spending the quarantine at a fixed location, either in a rented house or in a spontaneous occupation. 80% of all of them live with their parents or with one of them, while 20% does not longer live with any of their parents. As their compatriots in other countries show, lack of income, food and uncertainty about housing are the most critical needs in Ecuador. It is important to point out that 55% of them is risking to be forced to vacate their homes because of non-payment of the rent.

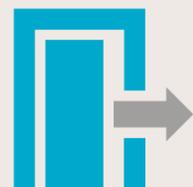
92% do not plan to move, or do not know what to do, while 7% want to go back to their country. Eight out of 10 claim having access to soap and water to reinforce hygiene measures during the emergency.

The majority claimed they has Internet, television service and cell phones and that they have received information about COVID-19 and about protection, symptom recognition through these media and that they comply with preventive measures.

The pandemic and quarantine measures have caused boredom and concern to at least two thirds of migrant children in Ecuador:

89% claimed they know where to go and to whom in the event of risk or injury, however; as in other countries, parents and family members are mentioned as the main referents rather than the state protection services.

In the meantime, only one third perceived discrimination, however; they do not recognize themselves as subjects of discriminatory acts; they identify other population groups as the victims.



55% of them is risking eviction from their homes **because of non-payment of the rent**



85% have their **classes completely** suspended without any other option to continue studying, and the rest is not enrolled in any school



PERÚ:

The most discriminatory environment

Peru is the second most popular destination for Venezuelan migrants after Colombia. Peru is also the second place where migrant children have experienced hunger to a greater extent. Eighty-six percent claimed not having enough food at home. Thus, income and food have been the most critical factors for migrant children and their families in Peru.

Thirty-four percent needed to find a cheaper house and 32% are at risk of eviction because of non-payment.

Only one-third of those interviewed said they have access to health care services, while another third did not because of their migrant status.

The remaining third does not know if there is a health facility near their place.

The impact in the educational process remains constant. Thirty percent of children are not attending school because they have suspended classes or because they are not enrolled in any school, while 61% of children, adolescents and young people are receiving education over the Internet or through print material.

All children questioned said they are spending the quarantine in a house. Some 39% live in rented houses, 20% have their own house and 10% live in places that are spontaneously occupied. Three out of four indicate they live with both parents or with one of them.

Of the children questioned, those living in Peru represent the highest percentage (16%) of situations where, because of the pandemic, parents had to leave them with someone else.

Under the lockdown measures, almost 80% has access to soap and water, while 20% have little or no access.

In their homes, the children questioned have cell phones, television and Internet, and there, they learn about the risks and care related to COVID-19.

Three-quarters claimed they know where to go in case of risk or injury due to violence. Unlike the other countries, in Peru, 60% said they would go to the police rather than to their own family. It is important to point out that Peru is the country where the migrant children who participated in the study felt more discrimination: 50% have reported experiencing increased discrimination against a particular group with the onset of the pandemic and almost all of them (91%) showed that it is against them because of their migrant condition coming from Venezuela. About 14% of migrant children said want to go back to Venezuela.

86% claimed **not having enough food** at home



Only one-third of those interviewed said they have access to health care services, while another third did not because of their migrant status



VENEZUELA: The drama of children without parents

The economic, political and social crisis in Venezuela prevented the access of large sectors of the population to basic goods, even before the COVID-19 pandemic. The health emergency exacerbated the situation. Almost 70% of Venezuelan children do not have access to water and soap for hand-washing in order to prevent COVID-19 infection. The same percentage of people is having issues regarding the access to food. Therefore, malnutrition is one of the most serious effects that will intensify the pandemic. Given this reality, three quarters of children interviewed indicated having access to health care services.

As to education, just over one-third does not attend school because of the suspension of the school cycle. The rest are receiving classes through the Internet and through television and radio broadcasts.

In Venezuela, 92% of children stayed home during the quarantine, while the rest are at their grandparents' home. Family separation is most evident in Venezuela: all the children interviewed were living without their parents at the time of the survey.

Just over one-third said that the whole family stays home during the quarantine, while the rest claimed that some adults go out to work. Thirty percent of these stay alone at home or with a boy or girl of their own age.

Children, adolescents and young people have access to a television set, a little less to cell phones and the Internet, but these are resources available in most of their homes.

The family and community leaders have been the ones who have given them information about COVID-19 prevention, care and risks.

Moreover, television has also been a medium through which they have had access to information.

Although the quarantine and the health crisis have affected them because of the concern and boredom it causes, most of them feel somehow protected, because they know where to go and to whom if they find themselves at some kind of risk

Venezuelan children and adolescents do not see themselves as victims of discrimination; however, they claim that discrimination does occur against homeless people or against disable people.

Almost 70% of Venezuelan children do not have access to water and soap for hand-washing in order to prevent COVID-19 infection. The same percentage of people is having issues regarding the access to food.

Family separation is most evident in Venezuela: all the children interviewed were living without their parents at the time of the survey.

V. Life stories

LITTLE GIANTS¹⁰

The yard of a small guesthouse was the perfect place for a big party. The night before, some parents prepared everything they needed, children were really excited and helped organize things. They did not want to go to bed even if they were sleepy. Saturday arrived as well as the celebration so expected by the children attending the Santa Eduvigis Dining House. At this party, we met 12-year-old Danfred and his 11-year-old sister Jehisy, who live with 69 years old Oly, their paternal grandmother.

“Their parents did not take care of them. I raised them since they were months old and I struggled for years with Danfred malnutrition”, says Oly.

This boy weighs just 48 pounds at the age of 12. He has the weight and size of a 7-year-old boy, according to the WHO. Her sister and grandmother are also underweight.

In Venezuela, many children are abandoned or left behind and have to face life with their needs and fears. Many drop out of school because they are not supported by somebody to guide and motivate them. Danfred and Jehisy study, they do well at school. They are also trained in the Youth Symphony Orchestra in Los Teques city. Danfred has a great talent to sing with a mezzosoprano voice, which combined with his tender look, sweetens and moves hearts. The kids do not have internet, or telephones with WhatsApp, items schools and high schools use to assign homework. Danfred and his sister don't hide their concern about the COVID-19 pandemic.

“The pandemic has worsen our situation. All of us feel depressed,” grandmother says “we are observing the quarantine imposed, but it is hard. Kids have lost weight since they do not attend school, because they are not having one of their meals for the day.”

The situation affects physical and emotional health of the family: children cry because they see their grandmother cry when she can't get them food or their school supplies, and sometimes all three cry together, says Oly. But Grandma also expresses hope because she always asks God not to abandon her, and this time, God shows her his help through the benefit provided by World Vision partnering with Los Teques Christian Center.

Danfred and Jehisy are noble, educated, simple, helpful and loving children. They cry, but they also laugh, play and dream in the midst of the shortages that surround them. The presence of hunger and resilience in the face of adversity has turned them into little giants.



©2020 World Vision

THE QUARANTINE AFFECTED HER HEALTH

Elba, 8, is the oldest daughter of José and Virginia, a couple of Venezuelan migrants who have lived in Manta for a year and a half. The first to arrive in Ecuador was José who worked tirelessly until he raised enough money for his family to leave his country and together seek a better future. José and Virginia are part of ECUAVEN, an association of entrepreneurs supported by World Vision Ecuador, as part of its line of humanitarian assistance with people on the move. Since Elba arrived in the country, she has attended the Child Friendly Space, where in addition to receiving support with her tasks, she has developed her ability to draw.

Elba was diagnosed with ASD (Autism Spectrum Disorder), a developmental disability that can lead to significant social, communication, and behavioral problems. Often, there is no indication on the face of people with ASD that sets them apart from others, but those with ASD may communicate, interact, behave, and learn differently from other people. For this reason, Elba has rigorous medical treatment that allows her to control the disease. In addition, the girl has a daily routine that includes outdoor activities.

Since the declaration of sanitary emergency began in Ecuador, Elba has suffered a health loss because the confinement generates an anxiety crisis in her. In addition to this situation, the family lives in a house declared as disabled, due to the structural damage it suffered with the earthquake of April 2016 and they do not have safe spaces where the girl can play. Nicolás, 6, has also been affected by Elba's health crises and always asks his dad to have medicine on hand so that his little sister can take it.

José tells us that in these days of quarantine medicine is very scarce and that he has walked for up to two hours visiting the city's pharmacies to get a dose that stabilizes the girl's health. In addition to insufficient medications, prices have risen and the prescription has expired with no possibility of obtaining a new one because medical check-ups are suspended so the dose is incomplete. The quarantine is substantially subtracting the few savings that the family had to invest in the cake business that is their source of income and they have allocated them for food and medicine that is a priority at this time.

José and his family have been beneficiaries of a consumption card for the value of USD \$ 90 so that they can fulfill their quarantine period and their food is assured; however, Elba's health is their biggest concern right now.



VI. World Vision Actions

The sharp decline in the living conditions of millions of people as a result of the prevailing situation in Venezuela and its impact on neighboring countries, required a multi-country and multi-sector intervention by World Vision, leveraged by a large network of partners in civil society, faith-based organizations, governments and the private sector.

The first phase has focused on direct humanitarian aid, in the form of nutrition projects and the distribution of multipurpose monetary assistance (for food, medicine and hygiene items) for the most vulnerable sectors. This aid is still in place in this time of the pandemic.

The health emergency, far from alleviating needs, has triggered requests from refugees and migrants to return to their country of origin. Both staying in host countries and a possible return trip to Venezuela are fraught with risks for children, in particular. In addition to humanitarian aid, World Vision will continue to work for the inclusion and economic and cultural integration of migrant populations and host populations. WV will also continue tirelessly advocating for governments to guarantee decent legal conditions for the protection and support of migrant and refugee populations.

Along with our supporters, donors, and community partners, we will continue providing opportunities for the reintegration of children into educational processes. We will continue advocating for effective protection, access to water and sanitation, and livelihoods. In doing so, we are certain that we contribute to the preservation and prosperity of a very important contingent of human capital in Latin America and the Caribbean.

The deep inequality that persists in the region highlights the vulnerable position migrants are in as they seek a better life. That is why, in the context of this pandemic, World Vision Latin America gives priority among its beneficiaries to migrant, refugee and indigenous populations, and their children because of their vulnerability status.

World Vision's response to the COVID-19 emergency includes strengthening national health systems, supporting and equipping workers and community health services, the protection of the most vulnerable children and families and advocacy and collaboration to ensure child protection in this context. The organization plans to reach 70 million people globally, including 10 million in Latin America and the Caribbean. More than US\$50 million will be required at the regional level to succeed. Our operation aims to save lives and restore the capacities of communities and families through the generation of livelihoods. We are inviting you to join this cause and to donate. For further information, please visit www.worldvisionamericalatina.org



VII. Conclusions and Recommendations

As a child focused organization, World Vision is deeply concerned about the immediate impact and negative indirect impacts that COVID-19 will have on the health and well-being of migrant children and adolescents from Venezuela in the long term.

World Vision's five major concerns regarding migrant children are:

1. Deterioration of their physical and mental health due to the lack of access to basic health services.
2. Unprecedented challenges for the provision of humanitarian assistance to children.
3. Increased risks to child protection.
4. Disruption of education.
5. Loss of family support/income and the consequent food insecurity.

These five concerns, combined with the persistent inequality prevailing in the region, are a breeding ground for social conflict and insecurity, which directly affect migrant and refugee children.



7.1 Conclusions

Some conclusions based on the actions experienced and the study carried out in different countries in South America can be summarized as follows:

- The socioeconomic impacts of COVID-19 and the insufficient government response measures have harmful effects on the livelihoods that leave fathers, mothers and caregivers in a struggle to make it to the end of the month. The situation is particularly serious for migrant families, where any access to income is likely to be limited to daily earnings or even cash/voucher distributions by relief agencies.
- Just in the region, 1.1 million children and adolescents have been displaced from Venezuela, forced to seek a future and better living conditions. Their status as migrants, sometimes without the necessary documentation, prevents them from accessing national health, education and social protection services.
- The closure of schools deprives children of essential education and child development opportunities. Likewise, the suspension of the school cycle deprives communities and millions of children of a safe and protected space during the day and of an essential source of food, in those institutions with school canteens. Highly vulnerable populations, including migrant populations, have additional risks because they are exposed to violence, abuse and exploitation.
- Migrant children without parental care, whether pre-existing or not, are particularly in need of protection, as they lack sufficient means and conditions to survive a crisis such as COVID-19.
- As COVID-19 arrived into a region with a large number of vulnerable displaced children and families, with protection and health care services that are weak or difficult to access, it is possible to predict the impacts related to the deterioration of nutrition, the impoverishment of households, as well as a rise in forms of violence such as child labor, labor exploitation and child marriage.

7.2 Recommendations

Given the fact that findings of this study focus mainly on gaps in access to food, insufficient financial resources, the suspension of education, difficulties in accessing health care services, and a high risk of protection and the separation from parents, as major problems, below are recommendations that the different governments, stakeholders, United Nations agencies and development organizations and donors can implement in order to mitigate the impact of the pandemic on migrant children and adolescents:

- Migrant children and their families should be included in national and regional COVID-19 risk prevention actions based on the principles of best interest of the child, survival and development, participation and non-discrimination.
- State actions against the COVID-19 pandemic must be based on children rights approach, and not only on health measures.
- Lockdown and sudden interruption of the educational processes and projects of children and adolescents affect not only their academic skills, but has also a high impact from the emotional perspective and emotional health. Therefore, it will be critical that governments, civil society, and the international community invest in methodologies such as Raise in Tenderness, in order to restore and resignify an experience like the pandemic, which without due attention, can turn into trauma and lead to family, community and social conflicts associated to frustration.
- Governments should urgently ensure the development of social protection measures for the most vulnerable, including the provision of food and monetary assistance for migrant fathers, mothers and caregivers in all contexts, in order to meet the immediate basic needs of their children.
- Emergency measures from governments, relief workers, donors and NGOs should also include social bonuses for households living in poverty and extreme poverty in order to support family economy for families to be able to cover the market basket, food and nutrition of migrant children while the emergency measures aimed at preventing the expansion of COVID 19 last in this phase.
- Governments, UN agencies, donors and NGOs should come together to develop coordinated responses in the face of COVID-19 emergency, including continuity strategies for education services under different modalities and platforms, in order to assure the right to development and education of Venezuelan migrant children.
- In this context of health emergency, child protection systems must ensure, that care of migrant children is also a priority and prevents violation of their rights, especially in situations of violence that affect them.
- Ensure health care and medical services in the event of risk or suspicion of infection for migrant children and adolescents by including them in care, communication and referral channels.
- Finally, government, society and families in each country should provide spaces and opportunities for children and adolescents to exert their right to play, to recreation and to healthy entertainment, especially in this context of a pandemic where fear, doubts and stress need to be channeled.



Esperanza
sin fronteras



It takes a world
to end violence against children

For more information, please contact:

Natalia Korobkova
World Vision Advocacy and Protección Manager, Venezuela Migrant Crisis Response
natalia_korobkova@wvi.org