



Vaccination Campaign implemented by IOM in the municipality of Bucaramanga. @ Bucaramanga Health Institute/Sergio Mantilla, 2021

## IOM VISION

UPDATED: 27 APR 2022

IOM, in partnership with other key strategic actors, seeks to strengthen institutional and community capacities on preparedness and response for crisis situations in Colombia, including public health emergencies, to reduce the risks and vulnerabilities of affected populations (internally displaced persons (IDPs), former combatants, migrants and host communities) and support sustainable recovery, community stabilization and peacebuilding at national and local levels. These humanitarian, recovery and peacebuilding response strategies are part of the IOM Colombia Country Program for 2021-2024 approved by the Government of Colombia and cover three strategic areas: (i) stabilization, peace with legality, (ii) migration as a development factor, and (iii) catalyzing the Sustainable Development Goals (SDGs).

**\$32,648,087**

**Funding Required**



■ F. Confirmed: 53.87 M  
■ F. Gap: -21,221,317

**116,424**

**People Targeted**

**18**

**Entities Targeted**

## IOM PROPOSED RESPONSE

## CONTACT INFORMATION

OBJECTIVE	FUNDING REQUIRED	FUNDING CONFIRMED
Save lives and respond to needs through humanitarian assistance and protection	5,685,701	25,735,017
Address the drivers and longer term impacts of crises and displacement through investments in recovery and crisis prevention	26,962,386	28,134,388

International Organization for Migration

Bogota, Colombia

Email: [iombogota@iom.int](mailto:iombogota@iom.int)

## PRIMARY TARGET GROUPS

1. Internally displaced person
2. Local population / community
3. Former combatant / fighter

## BREAKDOWN OF FUNDING REQUIREMENTS (USD) 2022

OBJECTIVES AND ACTIVITY AREAS	2022
<b>Save lives and respond to needs through humanitarian assistance and protection</b>	
Direct Health Support	5,603,905
Protection	81,796
<b>Address the drivers and longer term impacts of crises and displacement through investments in recovery and crisis prevention</b>	
Community stabilization	6,050,000
Mental Health and Psychosocial Support: Dialogue and Social Cohesion towards Recovery and Crisis Prevention	832,178
Peacebuilding and peace preservation	16,900,000
Reparations	2,900,000
Health System Strengthening	280,208
<b>TOTAL FUNDING REQUIRED</b>	<b>32,648,087</b>

# 2022 - Colombia Crisis Response Plan 2022

## CONTEXT ANALYSIS

Fifty years of armed conflict in Colombia has resulted in more than eight million people becoming [internally displaced](#), large numbers of victims of abuse and violence, particularly survivors of gender-based violence (GBV), who require reparation and reintegration support, fragile communities with scarce income generating-opportunities, informality in land ownership, reduced livelihoods, a lack of basic social services, and a high risk of human trafficking and recruitment of children by illegal armed groups and criminal gangs. Following the signature of the Peace Agreement, various activities continue to be implemented for the reintegration of [former combatants](#), reparation of victims, capacity building and peacebuilding actions. Nevertheless, the country has seen a significant increase in the killings of [social leaders](#), unlawful confinements and forced displacements.

Colombia has also reported more than five million cases of coronavirus infections since the beginning of the pandemic until end of November 2021, as well as [128,528 deaths](#). To date, the pandemic has had its highest peak during the third wave at [720 deaths per day in late June](#) 2021. While IOM and other responders have implemented actions to reduce the impact of COVID-19 since March 2020, significant needs remain..

In addition, the arrival of refugees and migrants from Venezuela (with an estimated 1.8 million currently residing in Colombia), 980,000 Colombian and binational returnees, and Venezuelans in transit and crossing the border in pendular movements, has had a significant impact on the country considering that these populations have arrived in areas with existing economic needs and institutions with limited capacity for appropriate response.

Furthermore, due to border closures because of the COVID-19 pandemic, the Government of Colombia (GoC) has seen significant irregular regional and extra-continental migration flows from the [Caribbean, Africa, and South-Asia](#) who are in transit to Northern America. These movements are notable in the Darien Gap, located on both sides of the Colombia-Panama border. With up to 1,000 people on the move arriving each day in Necoclí, a municipality close to the Darien exit, local authorities have declared a "public calamity", warning that they cannot cope with the influx of thousands of people. This context has presented challenges for the integrated, safe, and coordinated management of migrants by the GoC since this irregular flow is also associated with illegal armed groups, drug traffickers, and smugglers that put migrants at a higher risk [along the route](#).

## COORDINATION

For crisis response, IOM coordinates its activities with the GoC, including the Presidency of the Republic, the Ministry of Foreign Affairs, and Migración Colombia (National Migration Authority), among others. In addition, IOM coordinates closely with the United Nations Country Team (UNCT) and the Humanitarian Country Team. On reparation, community stabilization and peacebuilding programming, IOM coordinates its activities with entities such as the Ministry of Interior, Ministry of Health, the Agency for Reincorporation and Normalization, the Territorial Renewal Agency, the National Land Agency, the Special Jurisdiction for Peace, Truth Commission, the Missing Persons Search Unit, the Unit for the Victims Assistance and Reparation, the Presidential Council for Stabilization and Consolidation (CEC), and the National Police of Colombia (PONAL in Spanish). In Colombia, IOM leads the camp coordination and camp management (CCCM) working group, co-leads the early recovery cluster, and actively participates in the protection, health, education, WASH, food security and information management working groups. IOM is contributing to Humanitarian Needs Overview (HNO) and Humanitarian Response Plan (HRP) exercises. For the coordination of the COVID-19 response in Colombia, IOM works following the national priorities registered in the humanitarian and socio-economic response plans for COVID-19.

Furthermore, the health response is coordinated with the Ministry of Health, the Pan American Health Organization (PAHO)/ World Health Organization (WHO) and the United Nations Population Fund (UNFPA). It is worth noting that the Colombian CRP 2022 does not include any activity related to the response for Venezuelan migrants since those activities are included in the multi-country crisis response plan which is based on the Regional Refugee and Migrant Response Plan for Refugees and Migrants from Venezuela. It also does not cover activities associated with large-scale movements of migrants as the migration flows at the Darien border because such activities are part of the Crisis Response Plan for large movements of highly vulnerable migrants in the Americas from the Caribbean, Latin America and other regions. The United Nations System and GoC signed the United Nations Sustainable Development Cooperation Framework (UNSDCF 2020-2023) in March 2020, and IOM is contributing to 10 outcomes of the cooperation framework, out of the 13 established. Three priority areas are: (I) stabilization, peace with legality, (II) migration as a development factor, and (III) catalyzing the Sustainable Development Goals (SDGs). IOM and the United Nations High Commissioner for Refugees (UNHCR) co-lead the second area, and IOM leads the Working Group for the outcome reincorporation of former

combatants in the first area.

## IOM CAPACITY

The IOM Country Office in Colombia has been supporting GoC efforts for the past 20 years in several areas including preparedness and emergency response, recovery, community stabilization and peacebuilding. In terms of emergency preparedness, IOM supports government institutions with the development of guidelines and procedures as well as capacity strengthening activities in the areas of shelter management, CCCM, protection, and prevention of risk of human trafficking, among others. IOM also provides humanitarian assistance to IDPs, including humanitarian transport aid, shelter, food/nutrition, non-food items, and health services including mental health and psychosocial support (MHPSS). Regarding peacebuilding and community stabilization, IOM has been i) supporting the GoC in the implementation of the policy for victims of the armed conflict and the development of strategies to facilitate the human rights reparation processes, ii) strengthening transitional justice mechanisms, iii) assisting institutions to implement processes of disarmament, demobilization and reintegration (DDR) and strategies for the prevention of child recruitment by non-state armed groups, and iv) assisting the government in scaling up the security of rural land tenure for victims and farmers, underpinning sustainable rural development, territorial stability and durable solutions. As part of the COVID-19 response, IOM has strengthened institutional capacities in 84 municipalities, delivering 2,387,396 medical supply items such as personal protective equipment kits, biomedical equipment, and equipment to support the COVID-19 vaccine cold chain. Additionally, IOM has provided infrastructure and equipment to nine hospitals, promoted access to health services of migrant and vulnerable populations, and carried out respiratory symptomatic screenings for 122,845 Venezuelan migrants, Colombian returnees and host community members to detect possible cases of COVID-19. IOM has also provided 13,388 primary health care services to 7,149 people, and between February and September 2021, 3,851 people have been vaccinated against COVID-19. Finally, IOM, jointly with UNHCR and the Ministry of Health, have been advocating for the inclusion of the migrant population among the target beneficiaries of vaccinations campaigns against COVID-19. IOM's main country office is in Bogotá, with 7 sub-offices, 11 project offices around the country, as well as 7 field liaison locations in strategic areas where projects are being implemented. IOM's current projects are being implemented in 32 provinces of the territory.

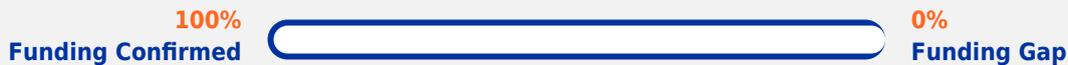
## SAVE LIVES AND RESPOND TO NEEDS THROUGH HUMANITARIAN ASSISTANCE AND PROTECTION

**Funding Required**  
\$5,685,701

**People Targeted**  
86,700

### People Targeted Description

Conflict Survivors of violence (IDPs, victims and host communities), children and adolescents (CH&A) at risk of recruitment, public officials of government entity counterparts, and vulnerable persons affected by COVID-19.



## \$ **DIRECT HEALTH SUPPORT**

IOM aims to improve access to life-saving primary health care services through:

- Building the capacity of civil society organizations to implement actions with a psychosocial approach with conflict affected communities;
- Scaling up access to health services in the context of the response to the COVID-19 pandemic, including mental health care, through support to local health institutions to improve case management, train health workers to improve infection prevention and control (IPC) in health care settings, and implement risk communication and community engagement activities based on health community networks;
- Promoting access to COVID-19 vaccines for IDPs, host communities and vulnerable populations, supporting vaccine supply chain management, providing vaccine service delivery with mass campaigns and routine immunization programmes, strengthening vaccination data collection and monitoring, and providing trainings for vaccinators and supervisors hired by local hospitals or by IOM on proper infection prevention and control, supply chain management and

**Funding Required**  
\$5,603,905

**Funding Confirmed**  
\$10,768,563



data collection.

## PROTECTION

IOM's programming aims to reduce threats to and vulnerabilities of children, adolescents, and youth at risk of recruitment, through the following activities, in consultation and collaboration with communities:

- Strengthening and expanding child protection mechanisms through capacity building of stakeholders like family members and communities, to recognize recruitment risks and implement actions to reduce the risks.
- Awareness raising and dissemination activities to strengthen community capacities to protect children, adolescents, and youth at risk of recruitment.
- Training of children, adolescents, and youth on their rights, protection, and self-protection against recruitment.
- Promote the Prevention of Sexual Exploitation and Abuse (PSEA) on IOM partners and staff.

**Funding Required**  
**\$81,796**

**Funding Confirmed**  
**\$6,653,062**

100% 0%



Vaccination Campaign implemented by IOM in the municipality of Bucaramanga. @ Bucaramanga Health Institute/Sergio Mantilla, 2021

## ADDRESS THE DRIVERS AND LONGER TERM IMPACTS OF CRISES AND DISPLACEMENT THROUGH INVESTMENTS IN RECOVERY AND CRISIS PREVENTION

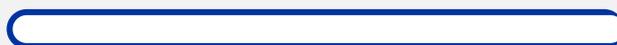
**Funding Required**  
**\$26,962,386**

**People Targeted**  
**31,524**

### People Targeted Description

Survivors of conflict (IDPs, victims and host communities), survivors of gender-based violence, social and community leaders, farmers, former combatants, ethnic, indigenous and rural communities, children, and youth targeted by GBV prevention projects, as well as public officials of local and national government entities.

100%  
**Funding Confirmed**



0%  
**Funding Gap**

## COMMUNITY STABILIZATION

Rural areas have been affected by violence and members of their communities have lost trust in authorities due to the ongoing armed conflict. IOM programming with the aim of community stabilization includes:

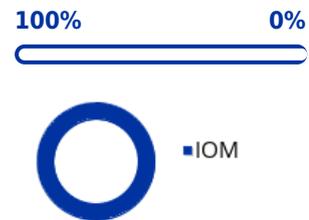
- Supporting state entities and institutions in developing a network to strengthen

**Funding Required**  
**\$6,050,000**

**Funding Confirmed**  
**\$7,521,004**

coverage, access, and quality in education for communities affected by violence, including ethnic groups, with the active participation of educational institutions and communities;

- Strengthening care, prevention and protection access regarding GBV through the training of public officers and community leaders on differential approaches (gender and ethnic) for communities and victims of violence;
- Providing technical assistance to local authorities to improve their violence and recruitment prevention capacities to prevent and protect children and adolescents from recruitment;
- Strengthening social and community resiliency capacities that improve their trust in institutions through the training of survivors of violence in effective communication skills, conflict management and leadership skills, and promotion of their participation in institutional and community spaces;
- Strengthening the capacities of ethnic communities in self-management and access to co-creation spaces for their ethno-development;
- Enhancing strategic communications through a culture of peace for social cohesion;
- Promoting job trainings and skills for employability, entrepreneurship, and for the creation and strengthening of local rural and urban enterprise, to contribute to social and economic stabilization of conflict survivors, as well as host communities.



## MENTAL HEALTH AND PSYCHOSOCIAL SUPPORT: DIALOGUE AND SOCIAL COHESION TOWARDS RECOVERY AND CRISIS PREVENTION

The persistence of human rights violations due to the long-standing armed conflict requires the adoption of measures by the State in areas of assistance, attention, reparation, prevention, and protection of survivors of violence. IOM will contribute to peacebuilding and reparations for survivors of violence through:

- Training of health care providers in MHPSS skills. i.e., Psychological First Aid (PFA), active listening, intercultural communication, stress management and positive coping mechanisms, basic mental health and psychosocial support, and attention to victims of GBV.
- Implementation of a comprehensive and context-specific mental health and psychosocial community resilience strategy in coordination with the GoC, local authorities and the community, in contribution to the measures of reparation by the government to survivors of violence. This includes family and community-based interventions, through the Comprehensive Health Care Protocol with a Psychosocial Approach to Victims of the Armed Conflict, and the implementation of the Psychosocial Community Rehabilitation Strategy for Coexistence and Non-Repetition of the National Psychosocial Rehabilitation Plan for Coexistence and No-Repetition.

**Funding Required**  
\$832,178



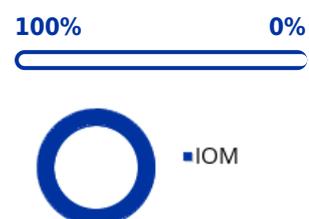
## PEACEBUILDING AND PEACE PRESERVATION

Despite the many gains throughout the years, peace and stability are negatively affected by the recidivism of former combatants, institutional weaknesses and the recruitment of children and adolescents by non-state armed groups. Aligned with government-led processes, IOM will contribute to peacebuilding through:

- Supporting the positive reintegration of former combatants and their families with income generation activities, training, gender-based violence (GBV) prevention, and strategies to overcome stigmatization and promote social cohesion in targeted communities;
- Providing technical assistance to the entities comprising the Comprehensive System of Truth, Justice, Reparation and Non-Repetition (SIVJRR) and promotion of the participation of survivors of violence, victims, and former combatants;
- Providing technical assistance to territorial entities and organizations in the

**Funding Required**  
\$16,900,000

**Funding Confirmed**  
\$18,061,532



- implementation of the victims law;
- Strengthening follow up capacities of territorial entities regarding commitments within the peace agreement;
- Providing technical assistance to Colombian state institutions in implementing strategies and tools to promote peaceful coexistence in the territories through a social violence prevention approach;
- Supporting the recovery of protective environments such as family institutions and/or communities through psychosocial support; respect for the rights of children, adolescents, and young people; generating initiatives for conflict resolution and behaviour to reduce GBV and domestic violence; and violence against women and children caused by mobility restrictions due to the COVID-19 pandemic;
- Providing technical assistance and strengthen territories in providing formal land tenure to affected populations, allowing access to various rural services like credit and subsidies.
- Promoting the participation and influence of diverse young women in civic spaces for peacebuilding, to make them more effective on conflicts management and peace consolidation.

## REPARATIONS

The persistence of human rights violations due to the continuity of the multifaceted conflict requires the adoption of measures by the State in the areas of assistance, attention, reparation, prevention and protection. IOM programming contributes to the improvement of support to victims through:

- Assisting the GoC in implementing the Comprehensive Health and Psychosocial Care Program for Victims of the Armed Conflict (PAPSIVI in Spanish), particularly within the framework of the module to benefit the ethnic victims of armed conflict, to improve the access of communities to mental health services.
- Strengthening institutional efforts to promote scenarios for dialogue and consultation with victims of armed conflict and ethnic groups.
- Technical assistance to territorial entities and organizations in the implementation of the victims' law.
- Strengthening the capacities of the Ministry of Interior for planning, managing and monitoring the implementation of the victims' policy and the assistance and reparation processes at the local level, through information systems.

**Funding Required**  
\$2,900,000

**Funding Confirmed**  
\$2,551,852

87% 13%




## HEALTH SYSTEM STRENGTHENING

To strengthen the health system in the country, health professionals, as well as local and national entities, will benefit from:

- Capacity-building activities, including improved capacity to respond to the specific needs of survivors of violence, such as upgrading GoC tools for the implementation of psychosocial rehabilitation measures and supporting the Ministry of Health in the integration of psychosocial care into the general health insurance system
- Improvement of psychosocial services delivered by Government institutions operationalizing policy instruments and developing Mental Health and Psychosocial Support tools for survivors of violence.
- Strengthening the Ministry of Health through human resources to facilitate advocacy and policy support and ensure access to Primary Health Care services and vaccination for vulnerable populations.

**Funding Required**  
\$280,208

