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Reporting Period: 18-30 April 2020

Latin America and the Caribbean Region

COVID-19 Situation Report No. 2

United Nations Population Fund



Highlights

- The COVID-19 pandemic continues to expand in Latin America, following patterns seen in other parts of the world.
- Brazil, the largest and most populous country in the region, reports the highest number of confirmed cases and fatalities, followed by Peru, Chile and Ecuador.
- Most countries in the region have weak and fragmented health systems, which do not guarantee the universal access needed to address the COVID-19 health crisis.
- Generally, health systems are organized through public-sector services for people with low income, social security services for formal workers and private-sector services for those who can afford them. Health systems remain segregated and unequal, resulting in different services of varying quality to different population groups.
- Although reform is underway to reduce fragmentation and expand access, health systems are still inadequate.
- Over the last several weeks, an increased impact on the health of personnel on the frontlines has been noted, due to their heightened level of exposure and lack of adequate personal protection equipment (PPE).
- Additionally, over the last several weeks, governments in the region have taken measures to scale up the capacities of their health systems to respond to COVID-19.
- As the epidemic continues to grow and is expected to reach its peak in May and June 2020, preventive social isolation measures and nation-wide lockdowns continue in the vast majority of countries, exacerbating existing inequalities and affecting the most vulnerable population groups. Refugees and migrants from Venezuela in host and transit countries are especially affected.

Situation in Numbers

 **189,752** Confirmed COVID-19 Cases

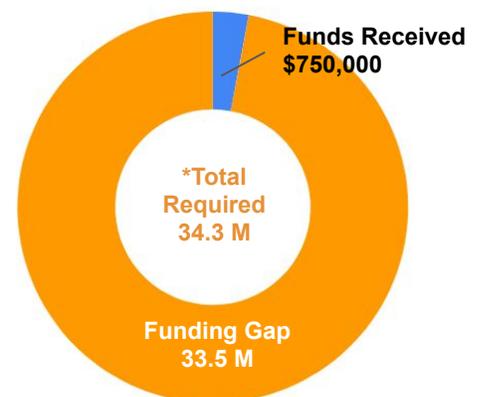
 **3,795** COVID-19 Deaths

Source: WHO April 30, 2020

Key Population Groups

-  **8 M** Pregnant Women
-  **172 M** Women of Reproductive Age
-  **165 M** Young People (age 10-24)
-  **58 M** Older Persons (age 65+)

Funding Status for Region (US\$)



* provisional figures

Regional Response Summary

UNFPA is working in humanitarian and development contexts in Latin America and the Caribbean (LAC), actively participating in the UN system's support to national governments' response to COVID-19, and follows the leadership of the Resident Coordinators' Offices and the technical leadership of the Pan American Health Organization and the World Health Organization (PAHO/WHO). In humanitarian countries, the humanitarian country team is often using the humanitarian structure already in place to cope with COVID-19.

The Global Humanitarian Response Plan covers multiple countries with humanitarian needs: Colombia, Haiti and Venezuela, which have national humanitarian response plans. In addition, 17 more countries are covered by the Refugee and Migrant Response Plan. The latter plan is currently being revised to adapt to the COVID-19 context. This revision will focus on i) visibility of the needs of refugees and migrants in the response to COVID-19 in the region; ii) ensuring access of humanitarian actors and availability of humanitarian supplies to refugee and migrant populations; and iii) ensuring access to lifesaving services for refugees, migrants and host communities, with priority on health and protection.

Coordination and partnerships

Under the political leadership of the Resident Coordinators Offices and the technical leadership of PAHO/WHO, UNCTs are coordinating the United Nations cooperation and support to national governments in the region through coordination meetings, communication, information and technical assistance.

UNFPA actively participates in humanitarian coordination mechanisms (especially health and protection clusters), providing technical assistance to government counterparts and strategic allies, and promoting advocacy and policy dialogue to ensure continuity of SRH services. This includes pre and postnatal care, safe pregnancies, access to contraceptives, continuity of GBV prevention and response services, protection of frontline health personnel, including midwives, and generation and analysis of relevant disaggregated data.

Country examples:

- **Mexico:** Works with the Ministry of Foreign Affairs, Ministry of Health and Ministry of Governance, particularly the National Population Council, National Women's Institute and National Youth Institute.
- **Argentina:** Works with counterparts at national and local levels, such as the Ministry for Women, Gender, and Diversity; Ministry of Education; Ministry of Health; Women, Gender and Diversity Agency Salta; Ministry of Women Buenos Aires Province; and Ministry of Women Córdoba.
- **Honduras:** Acts as a member of the MERECE, the Donor's Roundtable in Education, which has presented a proposal of an education response plan to the Ministry of Education.
- **Peru:** Maintains ongoing coordination with the Table for the Fight against Poverty (a health working group), the Monitoring Table for Sexual and Reproductive Rights and some civil society organisations (CSOs).
- **The Caribbean:** Participates in 6 UN country teams and consequently supports 6 UN joint COVID-19 response plans. UNFPA leads pillar 4 in four Spotlight Initiative-identified countries in the Caribbean (Belize, Guyana, Jamaica and Trinidad & Tobago) and therefore leads the COVID-19 response within the national Spotlight Initiative, in collaboration with government, local partners, European Union and other partners.

In most of the countries, UNFPA is actively participating in the UN country and humanitarian teams, and leading or co-leading SRH, GBV and social protection clusters.

Country examples:

- **Colombia:** Positions the concerns of pregnant women, adolescent girls and women, as well as the needs of indigenous women and other vulnerable groups, who are in more remote areas and whose livelihoods are being affected by the economic consequences of COVID-19.
- **Paraguay:** Reviewed the analysis of the situation of human rights and COVID-19, prepared by the UN Office of the High Commissioner for Human Rights, providing content from the perspective of SRHR, gender equality, the rights of adolescents and young people, as well as of more vulnerable groups such as the LGTBI community and people of African descent.

Regional Response Summary (continued)

Country examples continued:

- **Costa Rica:** leads one of the working groups of the National Commission on Emergency, which is directed to persons in situations of vulnerability, including older persons, persons with disabilities, persons unsheltered, persons with addictions, and persons with palliative care.
- **El Salvador:** in coordination with the Ministry of Health, started the purchasing process for the need to supply 15,000 kits for pregnant women, in a joint purchase with other UN agencies. Likewise, UNFPA is supporting the needs of the Salvadoran Institute for Children and Adolescents (ISNA) with the provision of 940 hygiene kits.

In some countries, UNFPA has made visible the risks of GBV caused by confinement and SRH implications, particularly with regard to maternal mortality, caused by a disruption in essential services.

Country examples:

- **Colombia:** co-leads the sub-clusters of GBV and SRH for the response to COVID-19.
- **Honduras:** as part of the HCT, activated the Gender-Based Violence Area of Responsibility, coordinated by UNFPA, to address the increase in complaints of sexual violence and GBV at large.
- **Uruguay:** developed precautionary measures related to GBV (such as extending the deadlines for the placement of ankle bracelets, police custody, distancing measures, etc.)
- **Bolivia:** coordinates with PAHO/WHO, UNICEF, the Maternity and Safe Birth Table, the Maternal Mortality Observatory and SRH non-governmental organizations to guarantee the continuity of SRH services.
- **Panama:** works with the UN High Commissioner for Refugees to map actors working in GBV to update the directory of both governmental and non-governmental organizations that provide care to women and adolescent survivors of violence.

Continuity of SRH Services and interventions, including protection of health workforce

UNFPA across the region continues its coordination efforts with regional partners including PAHO/WHO, UNICEF, Inter-American Development Bank, World Bank, UNAIDS and Professional Associations (such as La Federación Latinoamericana de Sociedades de Obstetricia y Ginecología) and the International Confederation of Midwives. The objective is to support joint advocacy with health authorities, particularly those related to SRH continuity of care, and preparation of a series of SRH webinars for the Ministry of Health managers and providers of SRH and COVID-19 services.

A declaration is also currently being drafted on the relevance of reproductive rights and the role of midwives in the context of COVID-19, to be signed by the Network of Professional Midwives in Latin America.

In the Caribbean, UNFPA is partnering with seven International Planned Parenthood Federation affiliates and providing support in reorganizing their service delivery model, including through telemedicine/counselling services (in 13 countries) and community-based contraceptive mobile services (Belize).

Country examples:

- **Honduras:** UNFPA, PAHO/WHO, SESAL and the Honduran Society of Gynecology and Obstetrics started virtual training sessions on the guidelines for the care of pregnant, in labor, postpartum and lactating women in the context of COVID-19, addressed to more than 500 healthcare professionals.
- **Venezuela:** several trainings were organized for doctors and other staff on SRH and STIs/HIV prevention within the COVID-19 context, as well as the use of injectable contraceptives to assist returnees in the 18 shelters organized in border communities.
- **Paraguay:** Supporting the development of the logistics management system for PPE commodities and participated in the procurement of PPE.
- **Panama:** Providing PPE to SRH service providers serving indigenous communities.
- **Mexico:** Advocating for ensuring PPE for traditional and professional midwives, as well as other health personnel working at the first level of neonatal and maternal health care.

Regional Response Summary (continued)

Addressing GBV

UNFPA is mobilizing efforts to secure the best response and technical assistance to Women, Health and Social Development authorities to strengthen social protection systems, particularly by guaranteeing the continuity of essential services to prevent and respond to GBV.

Country examples:

- **Bolivia:** Provides technical assistance to the national government for the inclusion of gender and protection standards in the National Response Plan to COVID-19, operational tasks of the Emergency Operating Committee and the establishment of shelters.
- **Ecuador:** UNFPA, as an active member of UN Social Protection Group, is providing technical assistance on analysis and generation of information for enhanced coverage and targeting of social protection emergency programmes, as well as designing strategies for the recovery and resilience of vulnerable populations. UNFPA also supported the Secretariat of Human Rights in the adoption of the communication and care protocol for cases of gender and intra-family violence during the emergency.
- **Argentina:** Within the framework of Spotlight Initiative, is providing specific support to the Argentine Ministry for Women and the gender offices in three of the Initiative's target provinces. UNFPA LAC launched and rolled out the virtual regional Essential Services Course to address violence against women and girls, with a cycle of webinars with experts and practitioners, to exchange and strengthen the response during COVID-19 (15 countries participated). In addition, UNFPA is providing technical support to governments for GBV prevention in temporary shelters across the English- and Dutch-speaking Caribbean countries.

Ensuring the supply of modern contraceptives and other reproductive health commodities

As part of the effort to secure a supply of contraceptives, UNFPA is providing technical support to governments in analyzing the availability of reproductive health supplies, forecasting needs and anticipating shortages and/or possible stock-outs.

Country examples:

- **Ecuador:** Identifying scenarios of logistics needs and gaps to inform the development of an Emergency Response Protocol.
- **Paraguay:** Supporting the Ministry of Health in procurement and logistics for essential supplies, including medicines, during the pandemic.
- **Panama:** Providing PPE to SRH service providers serving indigenous communities.
- **Venezuela:** Adopted a door-to-door strategy to raise awareness among communities about SRH and GBV, with special emphasis on the prevention of adolescent pregnancy, alongside medical authorities. It includes the provision of condoms and the collocation of injectable contraceptives prior to informed consent.
- **Peru:** Provided technical assistance to the Ministry of Health to define community-based strategies for distribution of contraceptives, including specific strategies for adolescents.

Risk communication and community engagement, including youth engagement

UNFPA is supporting risk communication and community engagement with national health authorities, and other partners to develop, implement and monitor an effective action plan for communicating effectively with the public. UNFPA is engaging with communities and other stakeholders in the public health response to COVID-19.

Country examples:

- **Peru:** Providing technical assistance provided to the Ministry of Women and Vulnerable Population to draft orientations to regional and local governments to address rights of women and vulnerable populations in regional response to COVID19.
- **Uruguay:** In response to a request from the Uruguayan Board for Women in Prison, UNFPA and UN WOMEN procured and distributed female kits for the 620 women in prison in Uruguay.

Regional Response Summary (continued)

Country examples (continued.):

- **Costa Rica:** UNFPA, as member on behalf of the UN System, of the Social Inclusion Working Group created by the Operational Emergencies Committee of the National Commission on Emergencies, is advocating for the inclusion of the needs of women with disabilities in all the campaigns, promoting the use of accessible formats, and supporting a campaign targeted to older persons.
- **Guatemala:** UNFPA in partnership with the civil-society organization *Ixmucane*, is providing attention to indigenous women survivors of GBV during COVID-19. In Venezuela, UNFPA and the UN High Commissioner for Refugees are conducting joint advocacy for the collection of disaggregated data on returnees housed in shelters.
- **Brazil:** PPE produced by vulnerable groups (migrants/refugees/incarcerated women) are being procured or having their production funded through partnership. PPE are being included in UNFPA dignity kits.
- **Mexico:**, UNFPA, in coordination with the Mexican Demographic Society, is promoting the use of models and technical analysis for generation and analysis of data and evidence on the impact COVID-19 on the elderly population, youth, indigenous peoples and migrants.
- **Panama:** Supporting a survey in the Ngäbe-Buglé Comarca indigenous region, aimed at identifying pregnant women and girls expected to give birth in the next six months, in order to provide community-level monitoring and promote the use of the maternal health houses.
- **UNFPA Regional Office:** Promoted a virtual process of exchange and networking with more than 150 young leaders, youth organizations and networks (including for people of African descent, indigenous groups, the LGBTI community, people living with HIV/AIDS, young people with disabilities, people living in rural areas, etc.) participating in our “Youth Now Strategy.”

Media and Communications

UNFPA is reaching out to populations about the COVID-19 pandemic, especially with regard to the plight of women, girls and young people, and the need for SRH and GBV prevention and response services.

- **Brazil:** [ABEP e UNFPA realizam webinar sobre desafios da produção de dados populacionais no contexto da COVID-19](#) e [UNFPA e Itaipu realizam atividades online com adolescentes do oeste do Paraná](#)
- **Paraguay:** [UNFPA apoya a Paraguay a dar continuidad a los servicios esenciales frente a la COVID-19](#)
- **Guatemala:** [Carta abierta a los jóvenes en tiempos del Covid-19](#)
- **Perú:** [COVID-19 en Perú: Promoviendo oportunidades para la igualdad en el contexto de emergencia](#)
- **Venezuela:** [Suministros de las Naciones Unidas llegan hoy a Venezuela para apoyar la respuesta a la COVID-19 y salvar vidas](#)
- **El Salvador:** [Imprisoned, quarantined women need hygiene supplies in El Salvador](#)
- **El Salvador:** VIDEO: [Corazón de una nación](#)
- **UNFPA LACRO:** VIDEO: [Me Quedo en Casa](#) - [Un Joven Afrodescendiente en Casa](#) - [TRELLO BOARD](#)

In Asunción, Paraguay, within the framework of its response plan to the COVID-19 pandemic, UNFPA delivered protection supplies for its human resources to the Ministry of Public Health and Social Welfare, particularly to doctors and obstetricians who care for maternal health (prenatal checkups, obstetric emergencies, childbirth and postpartum care), offer family planning and care for adolescents in the regions prioritized in the National Mobilization for the Reduction of Maternal, Newborn and Child Mortality.

Photo: UNFPA Uruguay

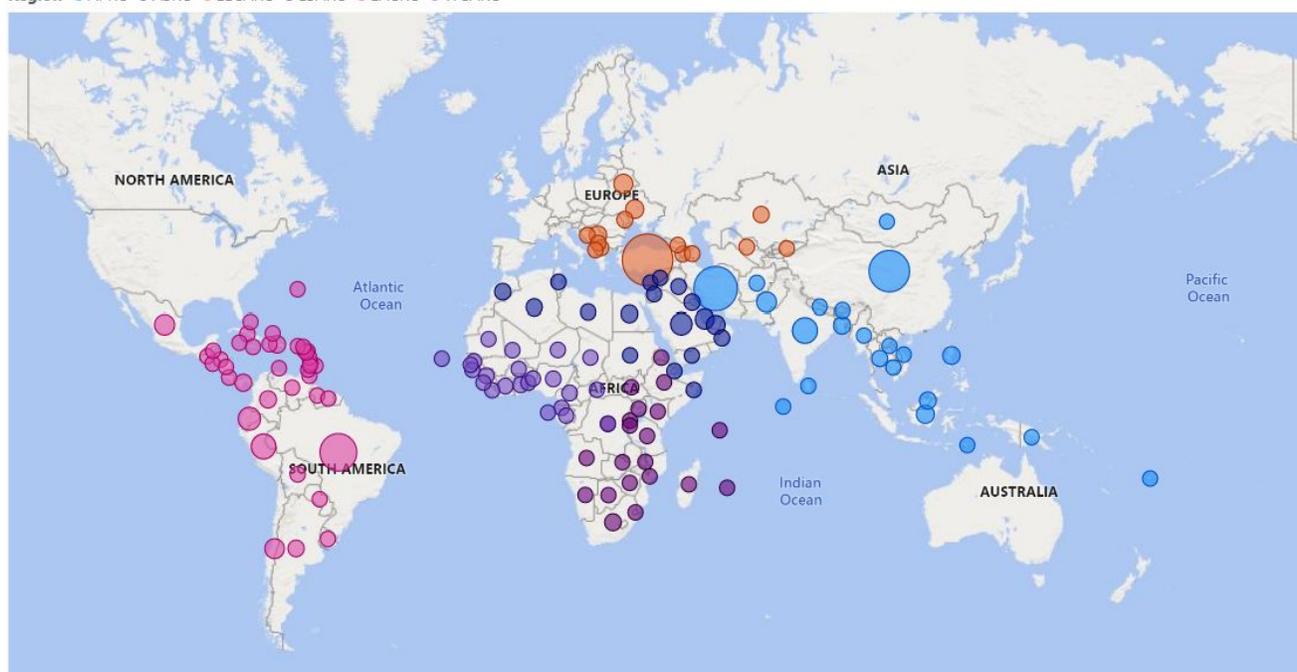


Annex: Confirmed COVID-19 Cases and Deaths in LACRO (WHO, 30 April 2020)

Country	Confirmed Cases	Deaths
Argentina	4,201	207
Bolivia (Plurinational State of)	1,053	55
Brazil	71,886	5,017
Caribbean*	1,183	58
Chile	14,885	216
Colombia	5,949	269
Costa Rica	705	6
Cuba	1,467	58
Dominican Republic	6,652	293
Ecuador	24,675	883
El Salvador	377	9
Guatemala	557	16
Haiti	76	6
Honduras	738	66
Mexico	16,752	1,569
Nicaragua	13	3
Panama	6,200	176
Paraguay	239	9
Peru	31,190	854
Uruguay	625	15
Venezuela (Bolivarian Republic of)	329	10
Total LACRO	189,752	9,795

Confirmed Cases by Country and Region

Region ● APRO ● ASRO ● EECCARO ● ESARO ● LACRO ● WCARO



* Belize, Guyana, Saint Lucia, Jamaica, Suriname, Trinidad and Tobago, Anguilla, Antigua and Barbuda, Aruba, Bahamas, Barbados, Bermuda, British Virgin Islands, Cayman Islands, Dominica, Grenada, Montserrat, Netherlands Antilles, Saint Kitts and Nevis, Saint Vincent and the Grenadines, Turks and Caicos Islands