EMERGENCY TRACKING SOUTHERN BORDER MONITORING IN THE CONTEXT OF COVID-19

CHIAPAS AND TABASCO, MEXICO REPORT #3 – AUGUST 2020



HIGHLIGHTS



0%/13%

in the regular migration flow at official overland entry points.



27%/28%

of the persons requesting services are Honduran nationals.



65%/53%

of the organizations consulted are operating in-person on a limited basis and remotely.



65%/42%

of key informants consider that migrants have crossed the border with irregular migration status during the second half of August.

*Previous report

METHODOLOGY

This report is a baseline assessment for the month of August, to determine the status of official Points of Entry (PoE) and service delivery for migrants along Mexico's southern border, specifically in Tapachula in the State of Chiapas, and Tenosique and Villahermosa in Tabasco. The information for the PoEs is derived from the efforts of IOM Mexico in evaluating official PoEs at the national level. The evaluation of service delivery for migrants is done through the identification of organizations and institutions in the field, based on the sector-specific approaches set forth in the IOM Operational Framework for Emergency Migration Situations. The information in this report was collected by IOM Mexico staff in Chiapas and Tabasco, through interviews with 18 key institutional informants working in the abovementioned municipalities, to wit: the National Migration Institute

(INM); Asylum Access; Bethlehem Diocesan Shelter; I Was a Stranger and You Took Me In, A.C.; UNICEF Tapachula; Immigrant Prosecution Unit; World Vision; Doctors of the World France-Mexico, A.C.; A Friendly Hand in the Fight against AIDS, A.C.; RET International; Public Security; Consulate of Honduras in Tapachula; Consulate of El Salvador in Tapachula; Consulate of Guatemala in Tapachula; Women Overcoming, A.C.; UNHCR Tapachula and Tenosique; DIF Long Live Mexico Shelter; and The 72 Shelter.

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CONTEXT OF THE SITUATION

On 11 March 2020, due to the alarming levels of propagation and severity of the COVID-19 virus, the World Health Organization declared a State of Pandemic. Due to this situation, on 23 March 2020 the General Health Council of the Ministry of Interior of the United Mexican States acknowledged the epidemic as a serious disease deserving priority attention throughout the country.

The federal government applied the Healthy Distance Campaign from 23 March through 31 May, promoting isolation at home and the application of basic measures to prevent contagion, as well as ordering the closure of establishments not essential for emergency health care, including businesses, schools, and institutions at all three levels of government. The governments of Chiapas and Tabasco also began a Healthy Distance Campaign in parallel with the federal government, applying the same recommendations for the suspension of activities, including procedures, applications, and legal proceedings. On 01 June the Epidemiological Risk Traffic Light Campaign was initiated to transition towards a new normality. This is a weekly monitoring system to regulate the use of public spaces according to the risk of COVID-19 transmission. This initiative presents risk scenarios as the rate of contagion decreases.

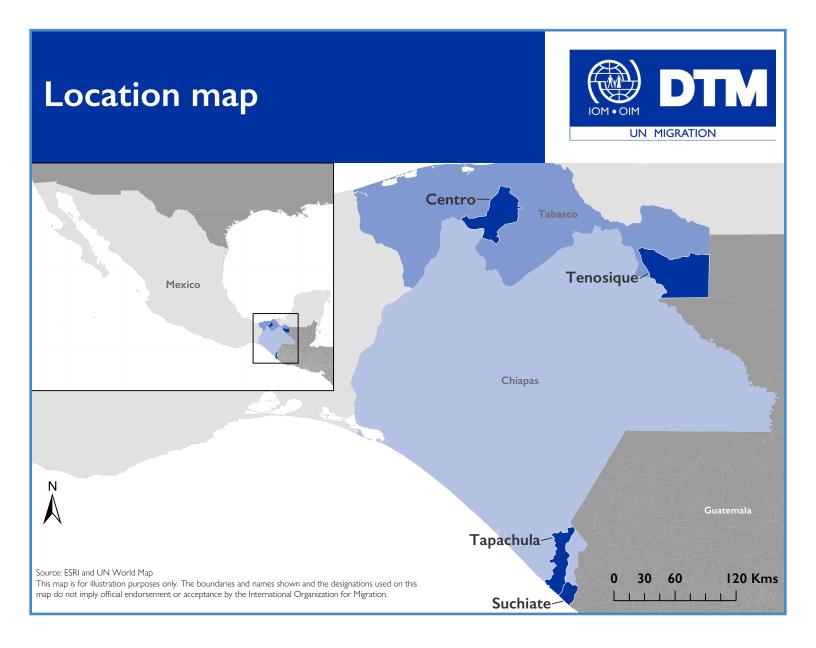
The moderate alert traffic light, represented by the colour Orange, predominated during the first half of August in most of Mexico, with the gradual opening of non-essential activities. The State of Tabasco moved into this category on 31 August, despite accumulating 28,715 cases and 2,594 deaths and remaining one of the States with the highest hospital occupancy rate. The Municipality of Centro, where the city of Villahermosa is located, is where most of the State's cases have occurred, with 13,575 accumulated cases and 1,091 deaths, while Tenosique reported 974 cases and 64 deaths.

The state of Chiapas remained in Orange status for most of August, moving to Yellow at the end of the month, leading to a greater reopening of economic activities. Chiapas accumulated 6,289 cases and 1,076 deaths as of 31 August, of which 944 cases and 234 deaths were in the Municipality of Tapachula.

The Mexican government presented a report on the records of positive cases and deaths among the migrant population through August. There have been 407 positive cases of migrants at the national level, mainly from Honduras, the United States, the Bolivarian Republic of Venezuela, Cuba, El Salvador, and Guatemala. There were 23 reported deaths of migrants from El Salvador, Guatemala, Honduras, Haiti, Canada, Chile, Cuba, Spain, and the United States. The States with the highest number of positive cases among migrants are the Federal District (Mexico City), Nuevo León, and Chihuahua. In the streets of downtonw Tapachula, a 25-year-old Haitian migrant who had shown symptoms of COVID-19 was reported to have been abandoned.

In Tapachula, with the opening of the economies, there has been an increase in the mobility of migrants through the city. Likewise, in Tenosique there has been a significant increase in the flow of extra-regional population, in addition to an increase in violent events.

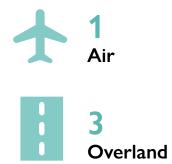
LOCATION

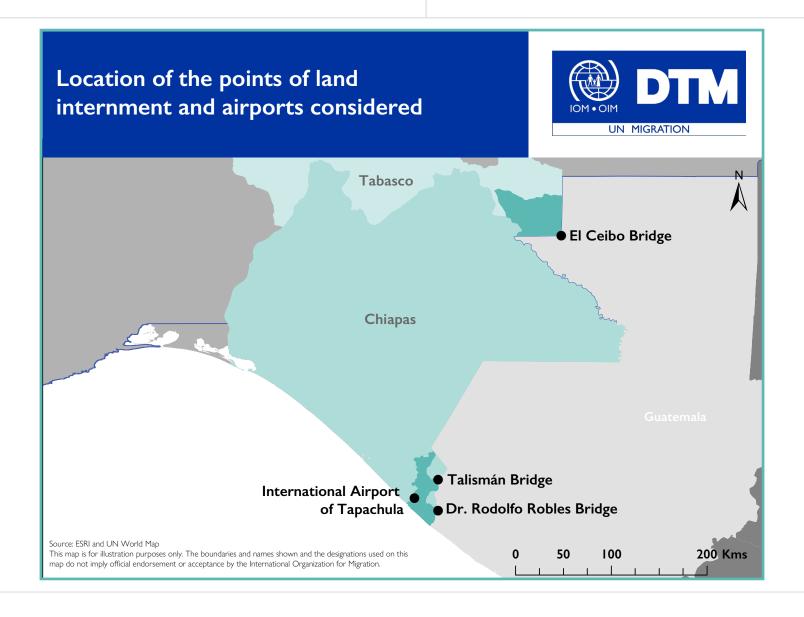


OFFICIAL POINTS OF ENTRY EVALUATION

The border stations in Mexico have not closed for migrant crossing during the period since the the Pandemic was declared, but transit has been closed for cross-border trade. Guatemalan borders were closed during August, however, with the low regular migration flow being attributed to said closure.

In general, the Tapachula PoEs present the greatest migratory flow activity, especially the Tapachula International Airport. This airport recorded an increase in the number of flights during August. Health authorities are present at all border stations to apply health protocols to migrants.





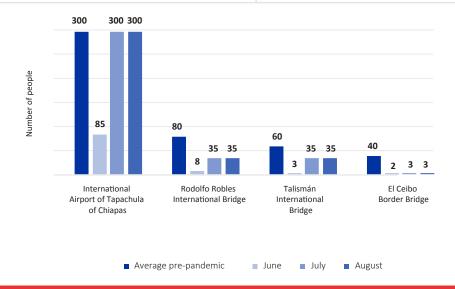
ENTRIES AND EXITS

Tapachula International Airport is the point with greatest mobility. During the month of August, the flow of travellers was similar to pre-pandemic rates (approximately 300 entries and exits daily).

On the other hand, only the overland PoEs have seen significantly reduced migrant flows. The migration flow through overland stations was similar to July, and it is estimated that only 35 people entered daily, mostly at the Talismán International Bridge and the Rodolfo Robles International Bridge. The former is located between Talismán (Mexico) and El Carmen (Guatemala), and the latter between Ciudad Hidalgo (Mexico) and Tecún Umán (Guatemala).

Most of the people passing through these points are cross-border migrant workers (merchants) and returnees from Guatemala. At the same time, it is important to note that the border on the Guatemalan side was still closed in August, with public health entry controls for its nationals, so there have been continuing challenges for the entry of Guatemalan migrant returnees.

In addition, the return of migrants from Honduras and El Salvador has been detected, with said persons opting for irregular migration at blind crossings to enter Guatemala. An example of this is the increase in irregular return flows across the Suchiate River between Ciudad Hidalgo (Mexico) and Tecún Umán (Guatemala). With the opening of Guatemalan borders (estimated for 18 September 2020), significant changes in migratory dynamics are expected.



AFFECTED POPULATIONS

		International Airport of Tapachula of Chiapas	Rodolfo Robles International Bridge	Talismán International Bridge	El Ceibo Border Bridge
People affected by mobility restriction	Nationals				
	Regular travelers				•
	Returnees		0	0	0
	Refugees				•
	Migrant workers		0	0	

PUBLIC HEALTH

The PoEs generally comply with the provisions of the IOM standard operating procedures and the assessment of migrant health. Border personnel are trained by the Mexican Ministry of Health, and in the case of Tapachula, efforts have been reinforced with support from institutions, such as the Chiapas State Workers Social Security Institute (ISSTECH).

In addition, there are specialized medical personnel from the same institutions for case attention and referral, and availability of informational material such as pamphlets and posters on preventing virus propagation.

It is important to note that, as part of the safety protocol, temperatures are taken with digital thermometers, anti-bacterial gel is provided, and travellers are requested to fill out a Health Declaration Form.

The Talismán International Bridge and the Rodolfo Robles International Bridge are the places that are currently observing the federal protocols for preventing the spread of the virus (promotion of hygiene and prevention of contagion when suspicious cases have been identified). In the case of Tenosique, however, there is a permanent Ministry of Health team that identifies cases in the Municipality and follows up on them with the health sector (even in other States).

		International Airport of Tapachula of Chiapas	Rodolfo Robles International Bridge	Talismán International Bridge	El Ceibo Border Bridge
Standard Operating Procedures	Presence of health authorities	0	0	0	0
	Application for handling the migration flow, occupational health and safety of staff, detection, registration, notificación and referral of sick passengers	0	•	0	•
	Has trained staff	0	0	0	0
	Information about COVID-19 is provided on the site	0	0	0	0

Meets the standard

		International Airport of Tapachula of Chiapas	Rodolfo Robles International Bridge	Talismán International Bridge	El Ceibo Border Bridge
Prevention and control	Presence of hand washing stations	0	•		0
	Hand washing stations equipped	0	•		•
Health evaluation	Application of a health evaluation protocol	0	0	0	0
	Temperature recording	0	•	0	•
	Filling in the declaration health form	0	0	0	0
	Infrastructure for crowd control and safety of screeners		•		•

Meets the standard

		International Airport of Tapachula of Chiapas	Rodolfo Robles International Bridge	Talismán International Bridge	El Ceibo Border Bridge
Protective equipment	For staff and other workers on site	0	0		•
	Mouthguards available for suspicious cases	0			•
	Availability of an isolated space for evaluation of suspicious cases	0			0
Reference system	Implementation of a referral system for suspicious cases	0	•	0	•
	Efficient reference system	0	0	0	0

Meets the standard

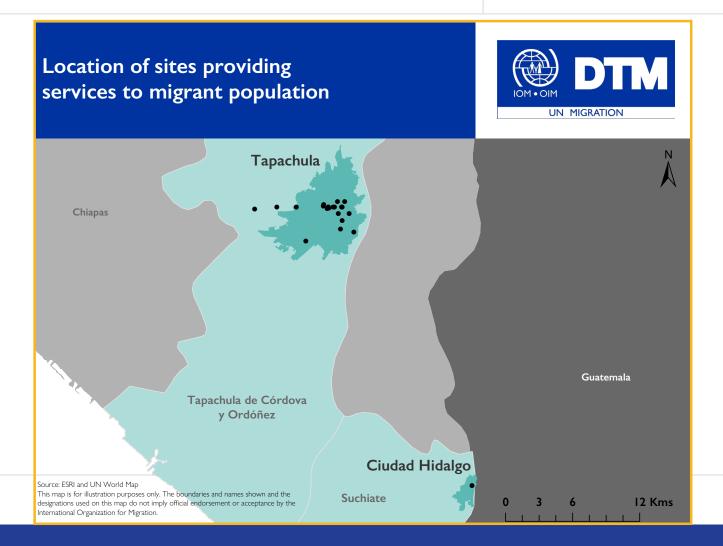
SERVICE DELIVERY EVALUATION

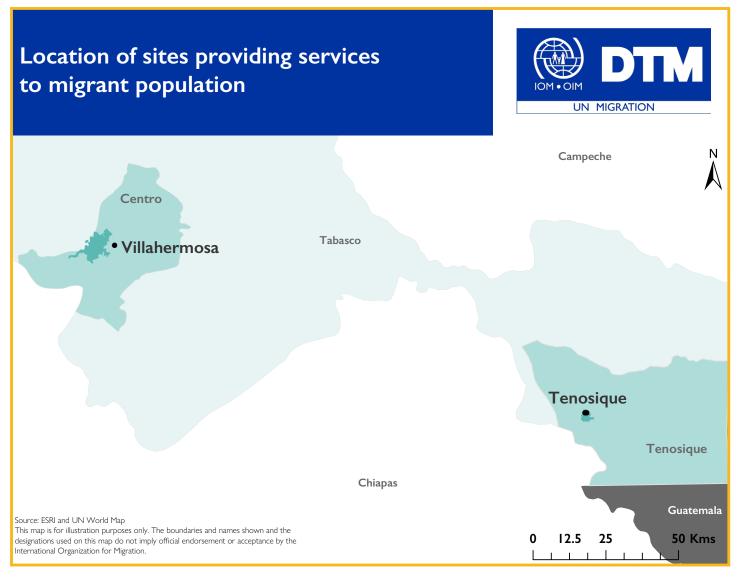
The evaluation was carried out with 17 civil society organizations, Consulates, and government institutions from Tapachula, Villahermosa, and Tenosique. The main findings include the fact that what defines the demand for services are the current needs of migrants due to the impact of the Pandemic. It has been identified, however, that the people who requested services during the month of August are people who had recently arrived in Mexican territory, since they require more guidance.

Another notable trend for the month of August is that organizations and institutions changed the modality of attention, and are gradually resuming inperson attention. 65% of the organizations and institutions that provide limited in-person attention and maintain remote attention indicate that they have appointment systems to serve users. Remote attention is provided primarily through telephone calls, in addition to e-mail consultations and social networks. These organizations are international and civil society organizations (35%) that provide inter-institutional coordination, protection and, services to victims of gender violence, children and adolescents, sanitation and hygiene, temporary shelter, access to justice, and psycho-social care.

Most of the institutions surveyed that are operating normally are govern-mental (35%), being mainly responsible for providing services related to protection of migrant populations, and civil society organizations (12%), which are mainly responsible for providing health and care services, access to justice, psychosocial attention, and temporary shelter for victims of gender violence.

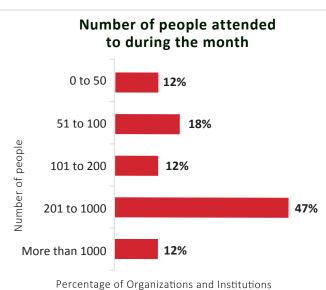




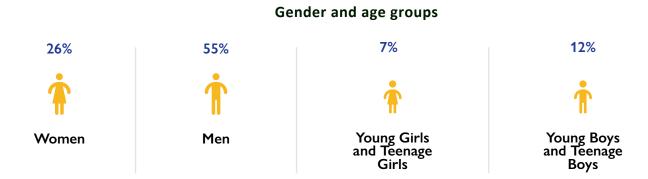


Organizations and institutions have recorded at least 8,000 service operations during the month. 41% (7 institutions and organizations) indicate that they served more people than in the previous month. It should be noted that these institutions and organizations consist of Consulates, government shelters, and NGOs that are responsible for providing protection to migrants. It is estimated, however, that these account for about 1,000 people served.

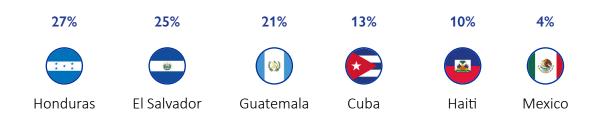
On the other hand, 47% (8 institutions and organizations) responded that they had served fewer people in August. It should be noted that at least 4,600 people were served in person, while 2,150 were served in a limited and remote manner.



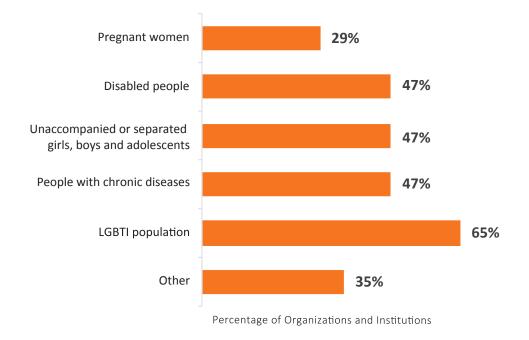
PROFILE OF MIGRANTS ACCESSING SERVICES



Principal Nationalities Served during the Past Month



Percentage of Organizations and Institutions Serving People in Vulnerable Conditions



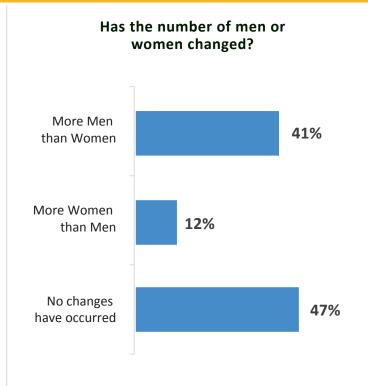
Others include homeless people, victims of gender-based violence, potential victims of human trafficking, victims of gunshot wounds, and applicants for refugee status.

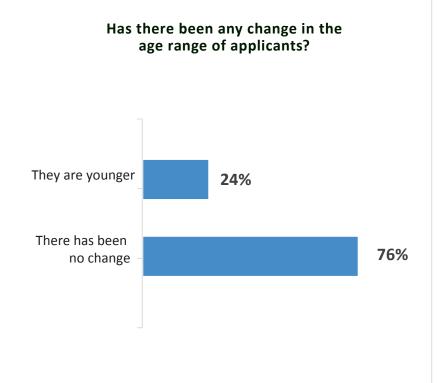
MONTHLY ASSISTANCE

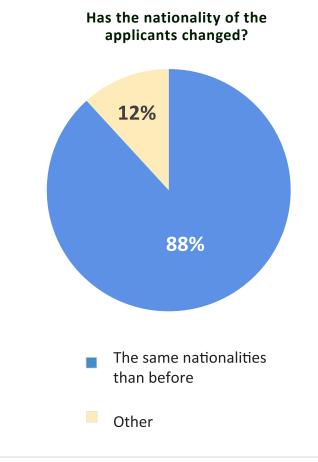
For the month of August, an increase in the request for services by men was identified, with 7 organizations noting this trend (41%). The services provided are temporary shelter and support for inter-institutional coordination. In this case, people from Northern Central America predominate.

On the other hand, 12% (2 organizations) served more women than men, especially in areas of protection and care for victims of gender violence. The main nationalities in this case are people from Northern Central America and Mexico. The trend remains, however, that men are the ones who most request and receive services.

12% percent of the informants indicated that during the month they served people of other nationalities besides those typically served, including people from Haiti, Cuba, and extra-regionals from Ghana and India, among others. This situation occurs mainly in Tenosique, where they are not representative nationalities in the migrant community.







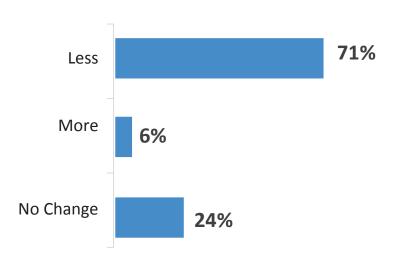
CHANGES IN THE PROFILE OF THE MIGRANT POPULATION IN A VULNERABLE CONDITION

During the month, there has been an increase in the number of cases of migrants requiring medical attention, and unfortunately the number of migrants who have died (mainly due to COVID-19). Moreover, the emerging needs of people who have become homeless due to a lack of resources to pay rent, are also notable.

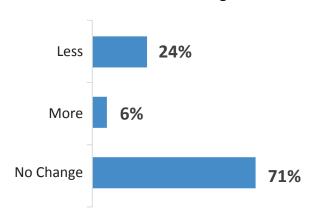
Regarding the care of children and adolescents, an increase in the health needs of children under five years of age, cases of family separation and unaccompanied migrant children (UMN), and UMN assisted return cases was reported.

In terms of refugee applications it was found that, as a general trend, many migrants abandon the process and avoid appeal processes when their application is denied. Nevertheless, a significant number of families in need of international protection have been identified.

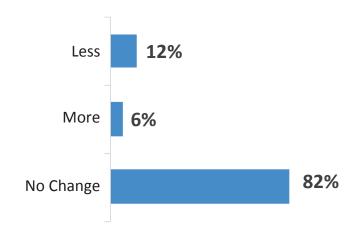
Has the presence of the LGBTI population changed?



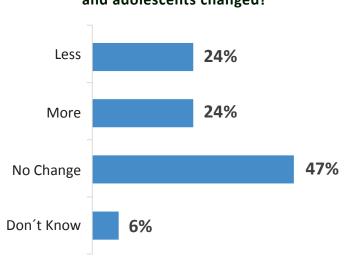
Has the presence of older adults changed?



Has the number of pregnant women changed?





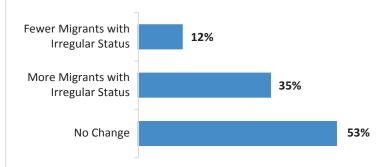


CHANGES IN THE PROFILE OF THE MIGRANT POPULATION BY MIGRATION STATUS

Among the main findings identified, key informants perceive an increase in the arrival of extra-regional migrants with irregular status in both border cities. In Tapachula, the arrival of Cuban and Haitian migrants has been specifically noted. These migrants state that they have resorted to migrant smuggling networks to travel through Central America.

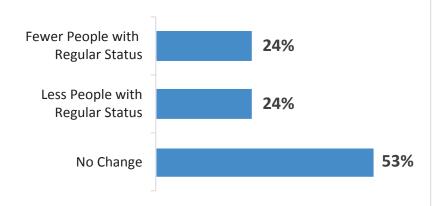
Within the context of the border control that is being carried out in Central American countries due to the Pandemic, migrants are using more dangerous routes and are exposed to greater risks along their way due to border closures, particularly along the Guatemala-Mexico border.

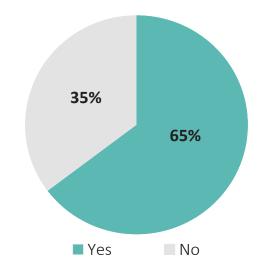
Have you noticed any changes in the presence of people with regular migration status?



Have you identified whether the time of arrival of migrants to Mexico has been recent (last 2 weeks)?

Have you noticed any change in the presence of people in an irregular migratory situation?





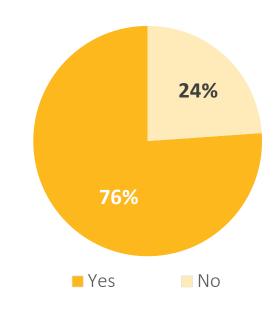
CHANGING DEMANDS FOR SERVICES

In general, the trend is towards a higher demand for humanitarian support services, which shows that the needs of the migrant population are increasing. Despite that, 47% of the key informants indicated that they have served fewer people than during the previous month.

The organizations and institutions consulted focus mainly on providing services related to psychosocial care, protection of persons in vulnerable conditions, and protection of victims of gender-based violence. These services include medical care, mental health, legal accompaniment upon victim request, and temporary shelter.

Also, civil society organizations provide mostly food and personal hygiene articles. These supplies have been obtained through cooperation with other partners such as diaspora organizations, which are not necessarily related to the nationalities served.

To a lesser extent, they also focus on providing services related to transportation, shelter or clothing, hygiene products, and employment referral. Has there been any change in the number of migrants requesting your organization's services due to the pandemic?



DEMAND FOR SERVICES

The demand for services is measured by the organizations and institutions that provide same. Not all of them provide the same services, so the percentages and their interpretation should be analyzed separately. The following is an account of the demand for humanitarian assistance services available along Mexico's southern border:

SERVICES



INFORMATION ON ACCESS TO PHYSICAL HEALTH SERVICES



Higher demand in 56% of thirteen organizations and institutions.





INFORMATION ON ACCESS TO TESTING FOR COVID-19



There were no requests for services from 60% of fifteen organizations and institutions.



MEDICATION



Higher demand in 57% of fourteen organizations and institutions.



PSYCHOSOCIAL CARE SERVICES



Higher demand in 67% of sixteen organizations and institutions.



PROTECTION TO PEOPLE IN VULNERABLE CONDITIONS



Higher demand in 60% of seventeen organizations and institutions.



FOOD



Higher demand in 69% of thirteen organizations and institutions.



CLOTHING



Higher demand in 42% of twelve organizations and institutions.



SHELTER



Higher demand in 54% of thirteen organizations and institutions.



HYGIENE PRODUCTS



Higher demand in 75% of twelve organizations and institutions.



FAMILY REUNIFICATION



Higher demand in 31% of thirteen organizations and institutions.



TRANSPORTATION



Higher demand in 38% of eight organizations and institutions.





There were no requests in 46% of thirteen organizations and institutions.



ACCESS TO LEGAL SERVICES



Higher demand in 50% of fourteen organizations and institutions.



PROTECTION OF VICTIMS OF GENDER-BASED VIOLENCE



Higher demand in 50% of seventeen organizations and institutions.



EMPLOYMENT REFERRALS



Higher demand in 45% of eleven organizations and institutions.



ORIENTATION FOR FUNERAL SERVICES AND REPATRIATION OF BODIES



Higher demand in 46% of thirteen organizations and institutions.



VOLUNTARY RETURN INFORMATION



There has been no change in 33% of twelve organizations and institutions.



LEGAL ADVICE



Higher demand in 47% of fourteen organizations and institutions.



APPLICATION FOR REFUGEE STATUS OR INTERNATIONAL PROTECTION



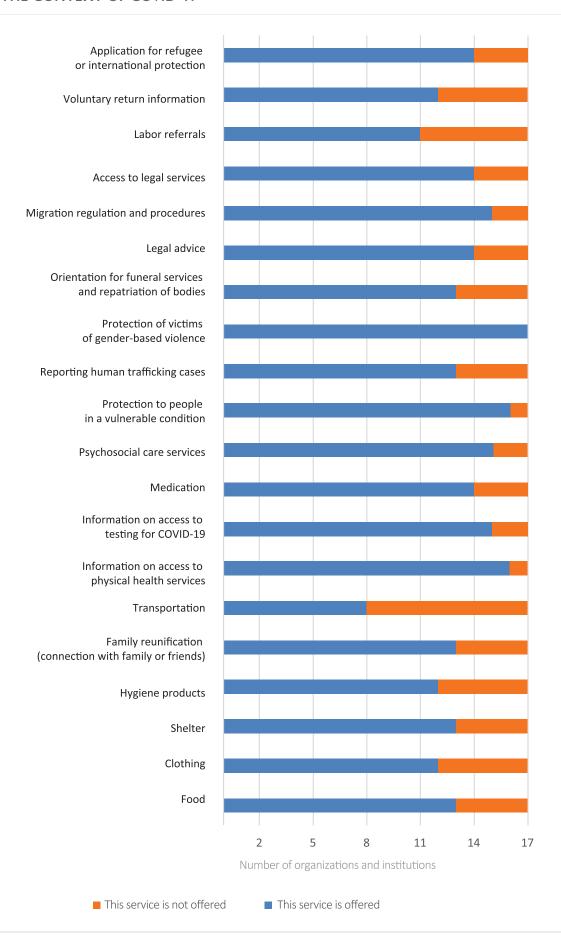
Higher demand in 64% of fourteen organizations and institutions.



MIGRATION REGULATION AND PROCEDURES



Higher demand in 73% of fifteen organizations and institutions.

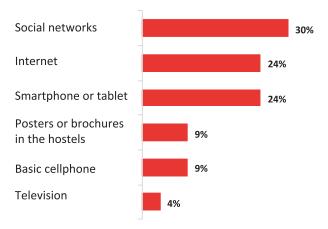


ACCESS TO INFORMATION

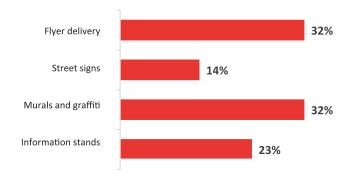
In terms of Internet use, 53% of the key informants indicated that some people can access the Internet, and 65% said that migrants access the Internet through smartphones that they share with family and friends. 44% indicated that migrants use WhatsApp to inform themselves, while 41% said that migrants use Facebook to interact with others.

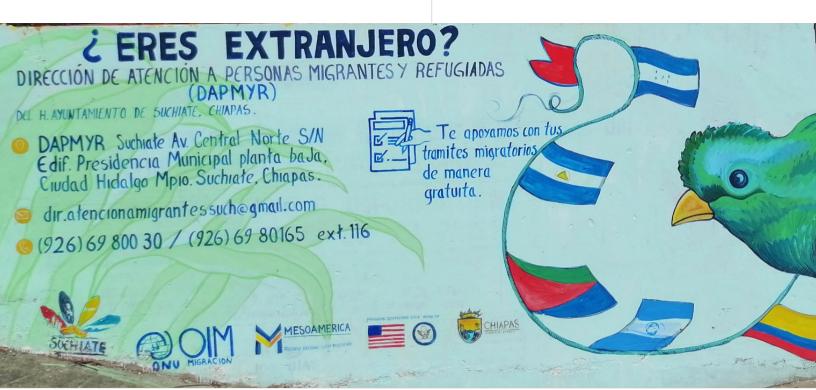
Regarding other media such as television and radio, in both cases the key informants agreed that most migrants do not have access to these media.

What are the means of communication most used by migrants?



In-Person Communication: Which means are the most effective in informing migrants?





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