

KEY OUTCOMES ON THE CHARACTERIZATION OF TEMPORARY COLLECTIVE **ACCOMMODATION**





DESCRIPTION AND METHODOLOGY

In June 2021, the Multisector Group, under the DTM (Displacement Tracking Matrix) methodology developed a characterization form that was applied in person to the management teams of:



Temporary Collective Accommodation (ACT in Spanish)



Departments in the country

OBJECTIVE

This characterization was carried out in order to learn the conditions, needs and characteristics of the response offered in the accommodation sites in Colombia, as an input to strengthen intersectoral care in these key spaces for the response to refugees and migrants, in light of the of the formulation of the Refugee and Migrants Response Plan - RMRP 2022.

CHARACTERISTICS OF TEMPORARY COLLECTIVE ACCOMMODATION (ACT)

1. Three types of ACT were identified:



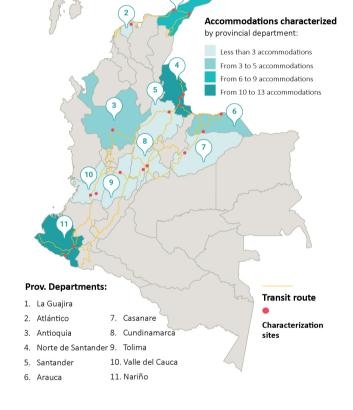


Centers of **55%** reception and



Collective





2. Although they are mostly located on the transit routes of 'walkers', as well as in key urban points, it is evident that the quantity and response capacity of the accommodation (with an accommodation offer for nearly ≈5,000 people) is insufficient with respect to the needs (calculated at ≈135,000 accommodation spaces required), with greater gaps in Bogotá, Antioquia and La Guajira. Furthermore, 3 out of 4 interviewees perceive that the demand for temporary accommodation in the municipality is higher than the supply. In particular, gaps are identified in the amount and capacity of specialized accommodation for survivors of Gender-Based Violence (GBV) and unaccompanied or separated children.

¹ See more about the DTM methodology, International Organization for Migration- IOM at: https://www.iom.int/sites/a/files/tmzbdl486/files/migrated_files/ What-We-Do/docs/HE-Information-management-DTM.pdf



3. The characterized ACTs mainly serve the population in transit and, to a lesser extent, the Colombian returnees and the population aiming to stay (the pendular population is served in those sites located on the borders). Half of them include host communities in their care, an important factor in promoting integration and combating xenophobia.

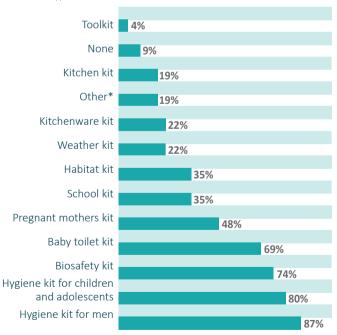


Does the host community have access to services/assistance provided by the shelter?

Yes 52% No 48%

4. The most frequently offered services are water, sanitation and hygiene promotion, food, information and guidance, and psychosocial care. In contrast, in the three types of accommodation, challenges persist in providing assistance aimed at guaranteeing recovery and rest without spending the night, assistance in child protection, and assistance in physical health.





(*) Includes stay-warm kits for children and adolescents, energy kits and traveling kits.

- 4. The most commonly prioritized profiles correspond to families with children and adolescents (NNA in Spanish) and / or pregnant and lactating women, and secondly to those with LGTBIQ+ members or people with disabilities. The care of unaccompanied and separated children or GBV survivors is evidenced almost exclusively in specialized accommodation. Other profiles, such as people with chronic diseases, belonging to ethnic groups, women and men who travel alone and evicted families are less covered.
- **6.** The average care capacity differs substantially between specialized accommodation (24 people) and the other two types of ACT: collective and reception / transit centers (100 and 110 people respectively).

Average service capacity by type of accommodation



Reception and transit centers



Collective Centers



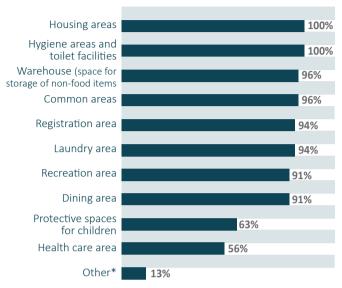
Specialized accommodations

- 7. Compared to non-food items (NFI) provided in ACTs, the most common ones correspond to hygiene and biosafety kits for different profiles and to school kits, while climatic kits (which are highly required in transit contexts) or kitchenware / kitchen kits are less common. 9% of the accommodations offer no NFI whatsoever.
- 8. Regarding infrastructure, housing spaces and coverage of general services for the population are very frequent (between 91% and 100% have these spaces). In contrast, specific areas for child protection (63%) and health (56%) are less frequent. 4 out of 10 have access facilities for the population with physical disabilities.
- 9. According to Sphere standards, 89% of ACTs exceed the 4.5m2 living space threshhold per person², and 11% are below this threshold. Most of the accommodations have ventilation, lighting and thermal protection in their spaces.

² It should be noted that the minimum standards for humanitarian response (Sphere) provide for a 4.5-5.5 m2 living space per person in cold climate urban environments, including internal space for cooking and bathroom and / or sanitation facilities.





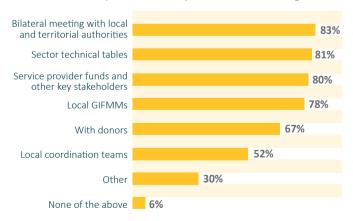


(*) includes technical area for reverse osmosis plant for water purification, refrigeration area, lockers for suitcases, isolation room, work area for managing team, psychosocial and legal service area and auditorium.

ACCOMMODATION MANAGEMENT SYSTEM

1. Between 78% and 83% of the accommodations are articulated directly with authorities, local GIFMM and their sectoral technical groups, and key partners for the provision of services. Donor articulation is less frequent (67%). Almost all (96%) appeal to these dialogues to communicate gaps in their services / assistance in a timely manner.

Coordination spaces attended by accommodation managers



Most of the accommodations (78%) include among their funding sources resources from international cooperation partners. However, most of them combine this financing with other sources such as public and / or own resources. 9 out of 10 properties have funds available until December 2021 or before, and one in six had funds secured only until June 2021 (the month of data collection).

3. On average, the temporary accommodation management team is made up of 11.3 people, of which 64% are women and 36% are men; this does not vary significantly between ACT typologies. However, there are differences in the average number of people who attend each person housed therein: in specialized accommodation, a staff member serves a maximum of 1.8 people, in collective centers 8.7 and in reception and transit centers 10.7.

Ratio between accommodation capacity by type and people in management teams

	Reception centers and transit	Collective Centers	Specialized accommodations	
Average staff	10.3	12	13.4	11.3
Average capacity	110.1	99.8	24.1	92.9
Average number of people / average total staff	10.7	8.3	1.8	8.2

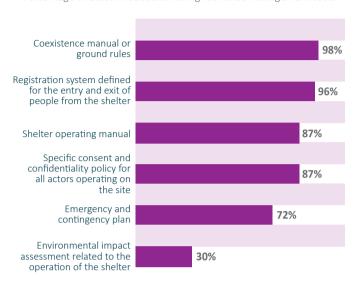
4. The training rates for management teams in general and specific protection issues are high (exceeding 80%), followed by those on cross-cutting approaches (between 40% and 60%).

It requires the reinforcement of training in contextual issues, such as support for assisted pre-registration to the ETPV and the prevention of COVID-19.

- **5.** Physical and emotional first aid are provided in more than 80% of ACTs, regardless of their type.; Likewise, the proportion of accommodations that implement caregiver care programs also exceeds 80%.
- 6. In general, there are adequate management practices and procedures in the evaluated accommodations, in particular in terms of registration, coexistence and operational manuals, as well as consent / confidentiality policies, monitoring of gaps / needs and infrastructure maintenance (all above the 87%). Contingency planning (72%) and environmental impact aspects (30%) are less covered.



Percentage of accommodations having identified management tools



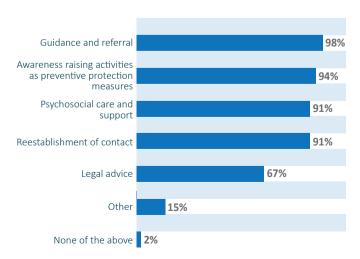
COMPREHENSIVE SECTORAL ASSISTANCE



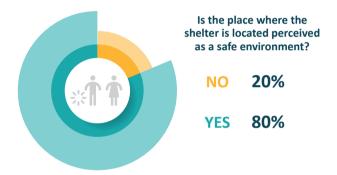
PROTECTION ASSISTANCE

1. Faced with the protection services offered, orientation and referral, prevention activities, psychosocial support and reestablishment of contacts (mainly via phone calls or Wi-Fi connection), these are very common, exceeding 90% of the accommodations that provide them. Legal advice is the least frequent service: two-thirds of ACTs provide this support.

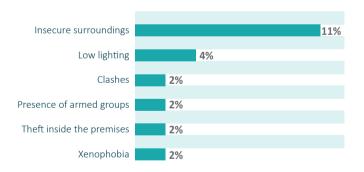
Protection services provided inside the accommodation



- 2. Regarding specific protection issues, human trafficking is the least covered, both in terms of specialized personnel and guidelines and protocols, as well as in response and referral. On the other hand, the preparation and attention / response to violence based on gender is superior to that of the other aspects of protection.
- 3. 87% of the accommodations have some security and surveillance scheme, be it private (48%), self-managed (37%) or public. Consequently, for management teams, 8 out of 10 accommodations are perceived as a safe environment. Of those who are not perceived this way, they are mostly concerned about the insecurity of the surroundings, low lighting, and to a lesser extent the presence of armed actors, robberies within the ACTs and xenophobia.



Respondents could select more than one option

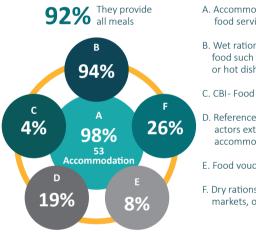


4. In one third of the ACTs, some incident or act of violence has occurred since they were opened; the vast majority due to conflicts between refugees and migrants, and to a lesser extent between them and accommodation staff or host communities. Expressions of xenophobia have been identified in one of four accommodations, and almost half (48%) have had at least one GBV incident since the opening thereof. These events do not seem to be linked to a lack of privacy in the spaces (complaints about this are very low in relation to incidents).



- 5. Regarding incident management, 89% of the accommodations evaluated have a conflict resolution mechanism and 81% have a case reporting and referencing system.
- **6.** 98% of the accommodations offer food services, mainly in their facilities through served meals / hot dishes (94%) and dry rations such as food kits (26%); and in 19% of the cases through external actors. Assistance through transfers and coupons (CVA) is less common (8% in bonds and 4% in cash).

Feeding assistance and type of three food assistance services



- A. Accommodations offering food service
- B. Wet rations (ready-to-eat food such as served meals or hot dishes)
- D. Reference is made to other actors external to the accommodation
- E. Food vouchers
- F. Dry rations (food kits, markets, others)
- 7. 92% offer three meals a day, and those who do not do so, report insufficient (own) resources therefor. Likewise, 93% have a daily nutritional bill, and 7% who do not comply with it rigorously affirm that price increases force them to make variations in the preparations. To mitigate this effect, 20% have spaces for food production, such as orchards or plots.
- 8. ACTs in general ensure safety practices in terms of cleaning, handling, preparation and storage of food (between 90% and 98% of the accommodations comply with these procedures).
- 9. Regarding nutrition services, offered by 89% of the accommodations, the most frequent are the activation of care routes in cases of acute malnutrition, the provision of health and nutrition services, and nutritional counseling on breastfeeding / complementary feeding.

- 10. 94% of the accommodations provide health care with the support of partners and humanitarian organizations (which support between 13% and 59% of the accommodations) or health institutions and entities (between 17% and 23%).
- 11.61% of the ACTs evaluated indicated that they have a nursing assistant or professional within the facilities, in two of three cases their presence is full time. 93% of the accommodations have a type A first-aid kit3, and 94% of management teams know how to activate the health care route in the event of an emergency.
- **12.** Faced with the supply and demand of health services, it is identified that general medicine consultations present both high supply (78%) and high demand (68%); while vaccination services have a medium supply and high demand (70%), and dental services are the most demanded (78%), however, only 35% of ACTs offer these services.
- 13. Regarding the management of COVID-19, the best management components correspond to the knowledge of routes for referral of cases (98%) and information and signage against preventive measures (91%). On the other hand, 78% have a place for isolation and only 36% have protection and prevention tools such as face masks, antibacterial gel, alcohol and towels.

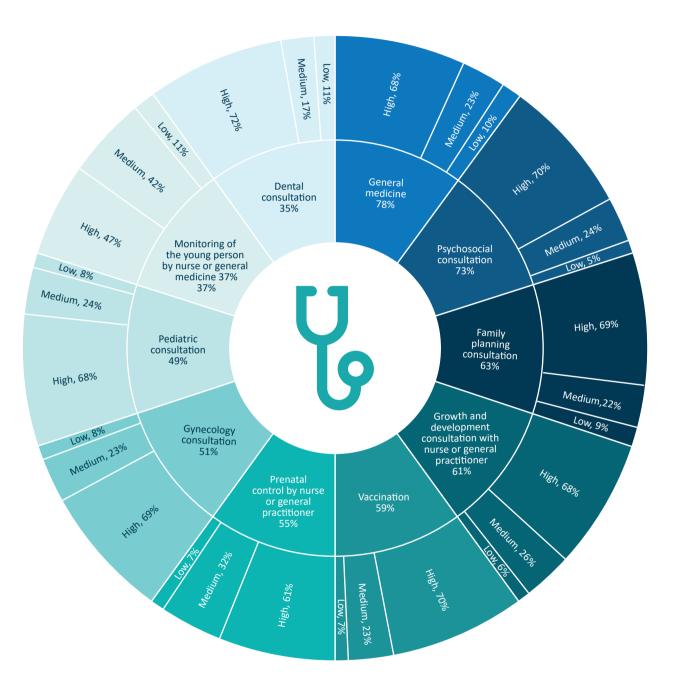
WATER, SANITATION AND **HYGIENE ASSISTANCE**

- **14.** In 85% of the accommodations, the water supply corresponds to the piped aqueduct, consistent with their mostly urban location (81%); however, in 11% of them the access is not continuous. Other sources such as rivers or streams, tanker trucks or even wells or reservoirs are even more discontinuous.
- 15. As access and availability of water become more limited, water storage practices are more common. 3 out of 4 accommodations store at least 15 liters of water per person per day, the minimum recommended by the Esfera standards. The vast majority of ACTs have water storage containers in excellent or good condition.

³ First-aid kit specially designed for establishments or shopping centers with an area of less than 2,000 square meters, which must be placed in a site properly marked and protected against humidity, light and extreme temperatures.







16. 76% of the accommodations treat the water to make it suitable for consumption, either by filtration, chlorination, boiling or another method. 9% of the accommodations do not have hydration points, and are located mainly in Cúcuta and Medellín, cities with high temperatures

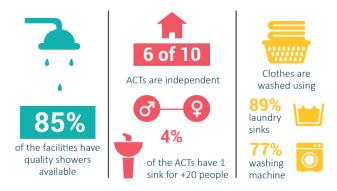
(ranging between 22°C and 33°C, and between 16°C and 26°, respectively). The average number of hydration points remains the same for those with maximum attention capacities between 10 and 89 people (2 points), and rises to 7 points for those with 200 people or more.



17. In terms of basic sanitation, in general the facilities are in excellent or good condition (93%), 9 out of 10 toilets are connected to sewers (in rural areas the disposal of excreta is mainly through septic tanks), and the vast majority have lighting, security (eg interior locks) and space separation. Regarding availability, in 3 ACTs (5% of the accommodations) there is a toilet for more than 50 people.



18. In terms of hygiene, the availability and quality of showers are sufficient in the vast majority of accommodations (85%); in general, they offer good lighting and internal lock, and in 6 out of 10 ACTs they are separated between men and women. 4 accommodations (7%) have a shower for more than 50 people. The washbasins are also adequately lit (96%), 4% of ACTs have one for more than 20 people. Clothes are washed through laundry sinks (89%) and washing machines (77%).



19. Almost all accommodations (98%) manage solid waste through public or private collection, and 87% perform waste separation at the source.

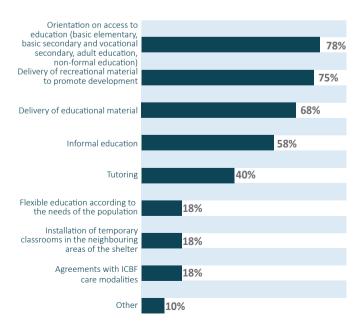
20. Cleaning and disinfection protocols are generally frequent (they are practiced by 93% to 98% of ACTs); the least common is vector control, performed by 83% of the accommodations. The most frequently cleaned areas are the kitchens (half of the ACTs are cleaned three times a day), followed to a lesser extent by floors and common areas, and thirdly by showers, toilets, hydration points and finally by rooms (in 74% of the accommodations are cleaned once a day).



ASSISTANCE IN EDUCATION

- **21.** 3 out of 4 accommodations (74%) include emergency education activities in their spaces, with a lower proportion for reception and transit centers compared to other ACT typologies.
- 22. The main activities carried out correspond to guidance and delivery of educational material, followed by training tasks (e.g. non-formal education, school reinforcement and flexible education). Strategies such as temporary classrooms and alliances with the ICBF (particularly in La Guajira and Antioquia) have also implemented 7 accommodations in each case.

Type of educational activities offered by the accommodations

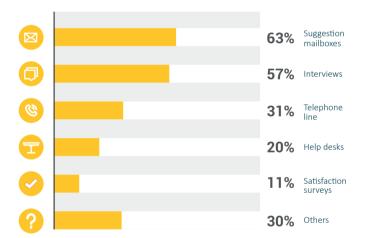






- **23.** 83% of the accommodations disseminate key messages to inform refugees and migrants about access to services through orientation points or other information channels.
- 24. As to the feedback on the services offered to the people in the accommodation, the most common modality, also considered the most effective, corresponds to the suggestion boxes and direct interviews with the housed people; and to a lesser extent, telephone lines or help desks are used. Nine out of ten ACTs with these mechanisms consider the confidentiality, timely response and monitoring required for their effective implementation.

Percentage of accommodations with feedback and complaints mechanisms



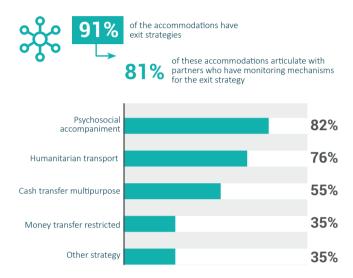
25. Only in 52% of the accommodations was the facility arranged with the host community during the planning phase. This was less frequent in specialized accommodation due to confidentiality issues. This same proportion of ACT (52%) has mechanisms of accountability to the population in the accommodation.

EXIT STRATEGY

26. 91% of the accommodations have exit strategies for people in the facilities. The most used are psychosocial accompaniment (82%), humanitarian transport (76%) and

monetary transfers (either multipurpose or restricted - mainly for payment of rent, food and transport). However, from the on-site observation: it was identified that the implementation mechanisms of these strategies are not necessarily clear to the management teams..

Exit strategies implemented by accommodations



27. The strengthening of these exit strategies is required, within the framework of activities that contribute to reunification, relocation and socioeconomic integration.

CHALLENGES AND RECOMMENDATIONS

1. Gaps in coverage and capacity are identified in the response of accommodations, mainly due to lack of stable financing, since there is a limited capacity to economically ensure the operation of one out of every six characterized accommodations. The main source of financing for accommodation are resources from international cooperation:

78% of the accommodations characterized have this kind of funds.

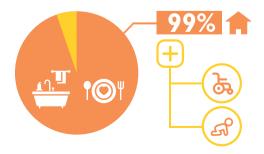




- 2. The low reporting level of the organizations that provide an ACT response implies an information barrier that prevents having updated and complete mappings of the response, which are essential for an effective incidence.
- **3.** Of the accommodations characterized, 17% are specialized, identifying a capacity gap according to the needs of the population of interest. Most of the response in these accommodations is directed to the care of unaccompanied children and pregnant / lactating mothers, persisting gaps in the specialized care of other profiles with specific needs, such as the elderly, people with disabilities and ethnic groups.



- **4.** 44% of the accommodations have infrastructure adapted for access by people with disabilities and groups with specific needs; however it is necessary to join forces to strengthen the capacities and infrastructures of the rest of the accommodations, contributing to universal access.
- 5. Important integration challenges with the host community are identified, considering that most of the accommodations are located in urban / more densely populated areas. The assistance or access to services, as well as the realization of joint activities when planning the accommodation, during its maintenance until its closure, are part of the central strategies for the incentive to cohesion, the strengthening of the social fabric and the prevention of xenophobia.



- **6.** 83% of the accommodations have assistance and protection for children, 87% with assistance in physical health and 56% with assistance for recovery and rest without spending the night, which shows the need to prioritize the assistance, taking into account the essential to provide a comprehensive response within these spaces.
- 7. An articulated intersectoral response is required to promote a timely transition to durable solutions, where joint work between the sectors of Socio-economic Integration, Protection and Multisector, supported by the Group of Monetary Transfers, will be essential for the achievement thereof. Likewise, close collaboration with local actors, including civil society organizations, is necessary.
- **8.** It is necessary to strengthen the articulation between the accommodation management teams with GIFMM sector groups, as well as with government and local authorities, in order to guarantee a coordinated response avoiding duplication and promoting cooperation among offers.
- 9. Comprehensive sector assistance is one of the fundamental roles that the accommodation management team must fulfill; therefore, it is recognized that there are gaps in the response that prevent achieving the above; therefore, it is important to:
 - I. Strengthen the protection approach for orientation, information, referral and case management.
 - II. Ensure nutritional care through delivery of supplements and management of malnutrition cases.
 - III. Have permanent nursing assistants or other health professionals, and expand the offer in dental care.
 - IV. Improve access to safe water and vector control practices in ACTs, in addition to strengthening the promotion of hygiene practices of the people living therein.
 - V. Develop timely and relevant educational activities according to population profiles and length of stay of the people in the accommodation sites.
 - I. Implement regular strategies (eg claim, complaint and grievance mailboxes and one-to-one interviews with the population) to ensure better accountability to the beneficiary population and the host community.



CHARACTERIZATION OF TEMPORARY COLLECTIVE SHELTERS

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Coordination: OIM Emergency and Stabilization Program – Rigoberto Mesa (rmesa@iom.int) and

Jerson Achicanoy (*jachicanoy@iom.int*) - and the multisector sector co-facilitation team.

With the support of the analysis and reporting team:

María Alejandra Alarcón malarcon@iom.int

Juan José Ramón T. ramontel@unhcr.org

Heidy Posada hposada@iom.int

Laura Zambrano zambranl@unhcr.org

Laura De La Cruz ladelacruz@iom.int

Cristian Cano canocalv@unhcr.org

Hugo Sánchez husanchez@iom.int

Natalia Ramírez natalia.ramirez@cruzrojacolombiana.org

Otto Nietzen onietzen@iom.int

The exercise was jointly led by:





Participating members, entities and sectors - Shelter management organizations:

























































