Colombia is characterized by a fragile and prolonged humanitarian context marked by recurrent multi-hazards affecting its territories and combined with severe structural and systemic challenges within the health system. Recent shocks, including the COVID-19 pandemic, growing violence within the Colombian territories and along the border with Venezuela (Bolivarian Republic of), and repetitive hydro-meteorological disasters over the last 12 months aggravate such chronic challenges.

In 2022, the number of people in need of humanitarian assistance increased by 300,000 due to deteriorating indicators of maternal and child mortality, pregnancy in adolescent girls, human immunodeficiency virus (HIV), suicides, sexually transmitted infections (STIs), gender-based and sexual violence, and communicable diseases.

Increasing population trends, primarily due to mass migration movements and the persistence of armed conflicts, create access barriers to essential health services, mobility restrictions, and forced displacement, further impacting the health, lives, and well-being of populations in vulnerable situations. In many territories, geographical distance to health facilities and attacks against medical missions hinder providing appropriate healthcare.

In 2022, heightened heavy rainfall affected most of the Colombian territory since the beginning of the first rainy season (from mid-March to June), causing flash floods, landslides, and many severe weather-related incidents that resulted in human casualties and critical infrastructure damage. Faced with these intensifying extreme weather events, on October 2022, the National Disaster Risk Management (UNGRD per its acronym in Spanish) declared a national disaster due to the acute humanitarian impact caused by the second rainy season influenced by the La Niña phenomenon. According to official reports, 289 municipalities in 26 departments declared public calamity.
Internal displacement and confinement remain significant access barriers to essential services such as healthcare for Colombian populations in situation of vulnerability. In 2022, an estimated 104,800 people were affected by mobility restrictions due to the armed conflict, and over 174,000 suffered from violent events. This figure represents an increase of 90% when compared with the previous year. Forced displacement is also on the rise and a problematic consequence of the intensification of the armed conflict, causing almost 70,000 people to leave their homes this year.

The persistence of displacement, confinement and mobility restrictions significantly hampers access to healthcare services and affects the lives and well-being of the most vulnerable. Beyond mobility restrictions, weak local health networks and the limited presence of state health facilities in many territories result in long distances from rural areas to health centers, seriously reducing access to health. Nationwide estimates are that at least eight million people in Colombia have limited access to health services often located more than one hour from where they live.

**STRATEGIC OBJECTIVES**

Humanitarian needs in Colombia are anticipated to increase in 2023 with a sharpening of the humanitarian impact in the country and the intensification of armed actions in the Pacific and northwestern regions and border area territories. Prompt, comprehensive, and coordinated efforts are needed to:

- **Strengthen coordination and readiness processes**
  Strengthen health emergency coordination, response, and monitoring mechanisms, leveraging community and institutional capacities.

- **Contribute to timely and efficient health response**
  Protect and save lives by supporting and expanding local community and institutional health response capacities to address the urgent and unmet health needs of vulnerable populations affected by sudden-onset and protracted emergencies.

- **Strengthen agile and interoperable public health systems**
  Assist local health authorities with collective public health actions, including epidemiological surveillance and strengthening community capacities in preventive health and early detection of major public health events.

- **Reduce health risks associated with water, sanitation, and hygiene**
  Support communities and health entities for the improvement, maintenance and adequacy of low complexity for access to safe water, basic sanitation, and hygiene.

**RESPONSE STRATEGY**

The health sector’s response strategy in Colombia focuses mainly on two objectives:

- Contribute to reducing avoidable morbidity and mortality rates through effective access to essential health services by the population affected by emergencies and violent situations.

- Strengthen community capacities to promote primary health care, first response, epidemiological surveillance, and active participation in decision-making regarding health issues.
PAHO aims its efforts at protecting and saving lives by supporting and expanding local health emergency coordination, readiness, response, and monitoring capacities to address the urgent and unmet needs of the vulnerable population impacted by sudden and prolonged emergencies, with emphasis on rural territories with little or no access to health institutions, and confined communities.

Considering the multiplicity of humanitarian emergencies in Colombia, and the diversity of regional dynamics, it is vital to promote the delivery of comprehensive humanitarian health assistance in prioritized geographical areas and to the prioritized populations.

It is vital to promote the delivery of comprehensive humanitarian health assistance in prioritized geographical areas.

Directed efforts should support the preparation, coordination, and delivery of health services to the most vulnerable communities in a complementary manner to the services offered by State institutions to ensure comprehensive care, including primary health care, sexual and reproductive health, care for chronic non-communicable diseases, mental health, support to routine and COVID-19 vaccination, and care for gender-based violence.

PAHO will also assist local health authorities in collective public health actions, including epidemiological surveillance and community capacity building in preventive health and early detection of major public health events.

Considering the cultural diversity of the country and the disproportionate impact of humanitarian emergencies on ethnic groups, needs-oriented intercultural approaches involving traditional specialists, midwives, and community agents in the provision of indirect care are essential.

Recognizing and valuing the responsibility of the State to guarantee the protection of people as the first responder in an emergency, WHO will also continue to strengthen effective mechanisms that allow for better articulation and efficient coordination of the multiple humanitarian health actors in the country.

EMERGENCY RESPONSE ACTIVITIES

Within the framework of its health emergency response, PAHO’s priority actions to mitigate the health impact associated with acute adverse events and the prolonged humanitarian context in Colombia include:

- **Scaling-up emergency readiness**, response, and coordination mechanisms and capacities. This includes strengthening contingency plans, activating and operationalizing national and territorial coordination spaces, and reinforcing community capacities for first response, primary healthcare delivery, and public health surveillance.

- **Expanding the local community and institutional health response capacities**, including support for deploying the health response in affected communities and low complexity adaptations to health facilities to ensure operations during and after an emergency.

- **Supporting local health authorities** in strengthening early warning and response, public health surveillance networks, laboratory diagnosis of major infectious events with epidemic and pandemic potential, and information management.

- **Implementing low complexity technical solutions** that improve access to safe water and adequate basic sanitation and hygiene conditions, and technical support for the strengthening of environmental health, solid waste management, and disease prevention.
Supporting Syndromic Surveillance of La Mojana Flood Response in Colombia

Colombia’s La Mojana region is currently experiencing the most prolonged emergency in recent years. More than 155,888 people from 38,972 households need assistance due to atypical rains, floods, and related displacement. In the department of Sucre itself, over 500 temporary emergency shelters have been identified, some of which offer cover to more than 2000 people.

This situation has produced significantly high risks of spreading communicable diseases in affected populations. In this context, with PAHO/WHO’s support, La Mojana’s regional health authorities mobilized WHO’s electronic Early Warning, Alert and Response System (EWARS) in-a-box to help detect outbreaks.

The overall goal of this tool is to ensure the rapid notification of disease syndromes and events of public health importance to inform and guide immediate response.

The National Institute of Health of Colombia (INS) collaborated with PAHO/WHO to roll out the system in the 500 temporary emergency shelters. Officials receive syndrome notification in real-time at the INS’s surveillance office, which prompts epidemiologists and surveillance officers to take necessary actions, including confirmation of cases and supporting access to proper treatment.

PAHO/WHO conducted training and field work to support the implementation of the system and raise awareness of its use in temporary shelters. EWARS will also continue to support response to other emergencies in La Mojana and throughout the country.

Read the full story here.
HOW TO SUPPORT THIS APPEAL

Generous donations from the international community allow PAHO to deliver its technical cooperation and deploy its operational and logistics support to address existing and emerging public health challenges impacting the countries and territories of the Americas.

The financial requirements outlined in this appeal are pivotal to providing lifesaving health assistance and protective services to communities affected by emergencies without leaving anyone behind. PAHO ensures it will distribute funding most efficiently and where needed, in coordination with public health authorities, United Nations agencies, civil society organizations, and other humanitarian partners.

Here are some ways private or public organizations and individuals can contribute to this donor appeal.

DONATING DIRECTLY TO THIS APPEAL

Financial contributions from governmental aid agencies, multilateral institutions, foundations and philanthropic organizations, and other public and private sector partners are among the most valuable and effective forms of support for health emergency response. The main characteristic of a financial donation is its flexibility to support an agile response. The resources obtained can be used quickly and efficiently, responding to the most acute needs and ensuring that the funded actions fully align with the local priority public health actions.

Donating organizations are invited to contribute cash to support one, several, or all priority actions highlighted in this appeal. To donate to PAHO, please contact Julie Mauvernay (mauvernj@paho.org).

Individual donations can also make a difference and help save lives by supporting the delivery of essential supplies and critical assistance to people in need. Individuals can contribute to PAHO’s Health Emergency Appeal by mailing checks to PAHO, 525 23rd St NW, Washington, D.C., 20037.

DONATING IN-KIND RESOURCES AND SERVICES

PAHO encourages the private and public sectors to align response efforts to this Appeal’s priority lines of action. Donations from corporations must comply with PAHO’s guidelines and roadmap for engagement with the private sector.

To make an in-kind donation of goods and services, please contact Julie Mauvernay (mauvernj@paho.org) or donate@paho.org to guarantee coherent priorities, minimize gaps and duplication in the health response, and ensure quality assurance of the goods offered.

PAHO appreciates and thanks in advance its donors for their generous contributions to support the delivery of its humanitarian health assistance throughout the Region. PAHO will report contributions to this Appeal on its webpage to acknowledge and give visibility to donors’ generosity, report on funding received, and identify remaining financial gaps.

Help us provide lifesaving health assistance and protective services to communities affected by emergencies, without leaving anyone behind.