ANALYSIS:

"The current state of the situation of migrants and refugees in temporary housing and shelters in Ecuador March-April 2021"

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1. Introduction

CARE is an international non-profit organization that contributes to reducing poverty; it has presence in Ecuador since 1962. CARE works with people to develop their agency, that is, to increase their self-esteem, confidence, and ambitions to change their situation, as well as providing knowledge and developing skills and abilities to increase their resilience. CARE seeks to address and eventually change inequality that continues in intimate relationships, families, education, social and political networks, markets, and among community groups or citizens. Discrimination and exclusion can be preserved through laws and policies, as well as social norms and customs that influence how people are expected to behave and participate in the social, economic, and political spheres based on their gender.

Venezuela is experiencing what could be the worst crisis in its recent history, with levels of extreme poverty, exacerbation of violence and insecurity, and manifest deterioration in the quality of life. Extreme shortage of food, medicine and other goods, combined with hyperinflation, has forced more than 5.4 million people to leave Venezuela, according to GTRM figures [1] (2021). More than 431,207 Venezuelans are estimated to have settled in several Ecuadorian locations (GTRM, 2021), while a significant number have moved to other countries. The vast majority of these people require protection and humanitarian attention, which increase in the face of the COVID-19 crisis.

Refugees and migrants were recently affected by the closure of the Colombia and Peru borders in March 2020, due to the COVID-19 health crisis. According to the GTRM, the borders' closing goes hand in hand with increased inflows through irregular crossings. This also implies augmented levels of violence in borders, including robberies, assaults, trafficking networks, sexual exploitation, and increased precariousness of social and economic conditions, as well as xenophobia (GTRM, 2021).

In this context, and due to social system asymmetries, women, children, unaccompanied adolescents, the elderly, and the LGBTIQ+ population are more vulnerable to increased gender violence and human trafficking. For this reason, it is essential to "understand the circumstances and conditions of the migrant and refugee populations living in shelters," by assessing the perceptions of this population.

This report aims at explaining the conditions of shelters that host Venezuelan population in human mobility. The following section will present the state of the art of academic literature on shelters and foster homes that we were able to collect, as well as the results of the primary information collected in eight shelters located in the cantons of Ibarra, Quito, Manta, Machala, and Huaquillas, from March 16 to April 16, 2021.

1.1. Some conceptual clarifications

Studies on the subject of temporary accommodation, carried out in Ecuador, are rather scarce. Within this bibliographic field, qualitative research and case studies prevail as theoretical-methodological resources. Among academic writings, connections between migration and poverty stand out, plus the need for coordination between various actors, including the State, to protect vulnerable populations such as children and adolescents (C&A), women, and sex-gender diverse people from an intersectional approach. Likewise, the issue of safe accommodation for human trafficking survivors is rarely addressed.

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1   Refugee and migrant working group for its acronym in Spanish

Based on research results and critical views on the governance of safe spaces, shelters can be seen as a "disciplinary entity" and a "relief space," but not as an integral solution for social integration. On the other hand, these places, even with their limitations, are highly valuable for vulnerable populations, who sometimes develop a sense of belonging towards them. Other key findings are the scarce specific spaces for the LGTBQ+ population, as well as the gap between public policies and their application in Ecuador.

We define "shelter" as the buildings that provide protection, security, and safety to people against threats, imminence or occurrence of potentially destructive phenomena with multiple causes, including the management and recovery from risks and disasters and the humanitarian response to migratory flows. Shelters also aid for the restructuring of life projects.

The comprehensive services model focuses on the provision of basic assistance of diverse scope, including the use of accommodation facilities, the existence of collective and private spaces, both by gender and/or mixed, for family groups, couples or individuals; provisioning and supplies to spend the night and for personal hygiene, as well as access to water, sanitation, and food. Eventually, as part of these services, emergency health, education and legal assistance can be found, as well as the provision of clothing and other supports that contribute to improve the transit conditions of migrants and reduce the risks and vulnerabilities that they faced during this period (UNDP, 2015). In addition to the general services comprised, this model gets its name from the profile of the beneficiaries it welcomes, with no restriction protocols or differentiated approaches, as in the case of Priority Attention Groups.

According to the theory and basic principles of humanitarian action, the attention model of a shelter focuses on rights and is based on tailored intervention strategies articulated from interdisciplinary assistance to the needs and demands of certain segments of the population. The services provided by the different organizations linked to this model include therapeutic, psychological, psychosocial and psycho-pedagogical attention, rights empowerment, strengthening of life projects, prevention and management of specific rights violations from a differential approach that responds to the demands of particular situations (Van der Gucht et al., 2019; Rova et al., 2020; Gottlieb et al., 2020; Zamora, 2015 & Aldeas Infantiles SOS Colombia, 2020). The focus of the organizations linked to this model is based on the special protection needs of priority attention groups that generate specialized interventions aimed at restoring rights, protection, and security with a differentiated and intersectional approach, besides providing comprehensive services. The range of services within the comprehensive model is oriented not only to support vital demands such as access to food, water, sanitation, shelter, protection, education, and health care; but rather to generate coordination, links, capacities, skills, and competencies for resilience and integration in society, minimizing the psychological effects of not belonging, marginalization, strangeness, and re-victimization (Badali, 2019).

The differentiating element of this approach lies on the prominence of public policies on migration and the role of the state in the supervision and support of services, including issuance of documentation, information channels to access services, access to housing through affirmative action policies, subsidy programs, prevention of xenophobia, apostille of diplomas obtained abroad, guidelines for hiring migrant and refugee workforce, training in livelihoods and sustainable enterprises, as well as outreach and public awareness campaigns on the contributions of migrants to the development of society.

It is fundamental to mention that the administrative control policies for humanitarian monitoring of migrants and the "police state" approach of migration policies promoted by government administration

over the years 2017-2021, with many similarities among South American countries, inhibits the possibility of shelter management with State support in the terms described above.

On the other hand, the country has acknowledged the basic rights of people in human mobility, such as temporary accommodation/shelter, access to refugee status or immigration regularization, legal advice, protection of rights and guarantees, access to health, decent work, education, water, hygiene and sanitation, adequate food and nutrition, reestablishment of family contact, and support for voluntary return. Additionally, other essential rights are incorporated focusing on Priority Attention Groups based on social and/or psychological assistance, livelihood counseling, protection of people living with HIV or catastrophic illnesses, people with disabilities, pregnant women, C&A, and older adults. As a primordial condition, all these basic rights should be included in the services provided by the country's shelters.

1.2. Research objectives

General Objective: Have a "state of the art" diagnosis on the services offered by shelters/temporary accommodation buildings catering to priority attention groups (children, female GBV survivors, unaccompanied adolescents, older adults, LGBTIQ+ individuals) in the cities of Huaquillas and Machala (El Oro), Manta and Portoviejo (Manabí), Tulcán (Carchi), Ibarra (Imbabura), Lago Agrio (Sucumbíos), and Quito (Pichincha).

Specific Objectives:

1. To understand the condition of the services offered by temporary accommodation buildings (shelters, hostels, and other temporary accommodation spaces) hosting migrant and refugee populations in the cities of Huaquillas, Machala, Manta, Tulcán, Ibarra, Lago Agrio, and Quito; assess if this offer covers the needs demand and the minimum standards to provide a dignified and adequate response.

2. To make realistic, achievable (given the funding context) recommendations for humanitarian work in shelters, for them to respond to migrants and refugees' immediate needs and achieve long-term self-sustainability. The recommendations will be directed to CARE International and other actors working in the shelter sector, such as UNHCR, IOM, Red Cross, other international NGOs, and other local organizations and public policy decision-makers.

3. To investigate and assess other sectors, such as WASH, Protection (including the GBV and IP subsector), Health, and those deemed important for a complete diagnosis.

4. To propose an advocacy plan to work with other actors and decision-makers to highpoint the scale of Venezuelan migration and the characteristics of the emergency related to the Temporary Accommodation sector: humanitarian needs without attention, extreme levels of violence, sexual violence, rape, exploitation (especially against women, girls, and the LGBTIQ+ population).

5. The study will present effective and appropriate ways to serve migrant people to reach self-sustainability and resilience.

1.3. Methodology, profile of the surveyed population and samples

The tools designed were aimed at people who are directly linked to shelters at the territorial level (administrators and personnel), as well as direct beneficiaries of these institutions' services. A special approach is taken for priority attention groups, particularly children and adolescents and women survivors of GBV, for whom special instruments were designed, considering the specific demands and situations that characterize these populations.

To begin with, the study identified various institutions with different profiles and services. Thirty-three (33) institutions in total: 3 in Huaquillas, 2 in Machala, 2 in Portoviejo, 2 in Manta, 2 in Tulcán, 4 in Ibarra, 6 in Lago Agrio and 12 in Quito. These institutions include local governments, civil society organizations, international organizations, private initiatives, public administration centers / Ministry of Economic and Social Inclusion (MIES) and religious institutions; the people to whom its protection or comprehensive services are directed, whether they are women, survivors of GBV and C&A. From this initial identification, the study selected a sample of eight institutions that represent the heterogeneity of the population, considering the factors previously described, as shown in Table No. 1.

Table No. 1. Preliminary survey of shelters/hostels by territory and sample selection.

Province	Canton	Institution name	Administrator	Type of organization	Type of protection services	Sample
El Oro	Huaquillas	Non identified	UNHCR	International Org.	Integral	
		Virgen de la Merced	Cáritas	International Org.	Integral	
		Centro de Alojamiento Temporal "8 de Septiembre"	Adra	International Org.	Integral	X
	Machala	Movimiento Mujeres de El Oro (Comprehensive care center) - Machala	Civil society	Civil society	Women and children / GBV survivors / LGBTIQ +	
		"Casa Linda"	MIES	Public	Adolescent survivors of Trafficking	X
Manabí	Portoviejo	Casa Hogar de Belén	Portoviejo Archdiocese	Religious	Children and adolescents	
		Aldeas Infantiles SOS	Feder. Aldeas Infantiles SOS Int.	International Org.	Children and adolescents	
	Manta	Jubasca	Scalabrinian Mission	Religious	Women, children and adolescents / GBV survivors	X
		Fundación Shekinah	Mennonite Churches	Religious	Children aged 6 months up to 12 years	
Carchi	Tulcán	Manos Unidas Tejiendo Progreso	Local government	Public	Women, children and adolescents / GBV survivors	
		Casa de acogimiento temporal Rumichaca	ADRA	International Org.	Integral	X
Imbabura	Ibarra	Casa de Acogida Cristo Peregrino	Scalabrinian Mission	Religious	Couples, with priority on pregnant women and / or with children	
		Albergue Municipal Ibarra	Local government	Public	Integral	X
		Casa de Doña Carmen Carcelén	Private	Private	Integral	
		Casa de Acogida Mamá Zoila Espinosa	Local government	Public	Women, children and adolescents / GBV survivors	

Province	City	Shelter	Organization	Type	Population	Sampled
Sucum-bios	Lago Agrio	Casa de Acogida "Luis Vizueta"	Local government	Public	Temporary accommodation for families. Provincial Hospital patients	
		Casa hogar "Mis pequeños valientes"	Local government	Public	Children and adolescents	
		Casa Amiga	Sucumbios Women Federation	Civil society	Women, children and adolescents / GBV survivors	
		Buen Samaritano	CARITAS	Religious	Integral	**X**
		Albergue Kwasarina Huasi	UNHCR	International Org.	Children and adolescents	
		CEBAF	Tarabita Foundation	Private	Integral	
Pichincha	Quito	Albergue La Dolorosa Foundation	Society of Jesus	Religious	Children and adolescents	
		ALDEAS INFANTILES SOS	Fed. Aldeas Infantiles SOS Int.	International Org.	Children and adolescents	
		Casa Refugio Matilde	Civil society	Civil society	Women, children and adolescents / GBV survivors	
		Nido de Protección	Alas de Colibri	Civil society	Children and adolescents between 12 and 17 years old / victims of trafficking	
		Nuestros Jovenes Foundation	Private	Private	Children and adolescents /Women GBV survivors	**X**
		Casa de la Mujer 'Warmi Wasi'	GAD	Public	Women, children and adolescents / GBV survivors	
		ADOLE-ISIS	GAD	Public	Adolescent mothers	
		Albergue San Juan de DIOS	Orden Hospitalaria San Juan de Dios	Public	Integral	X
		Casa de la Mujer (Patronato San José)	GAD	Public	Women, children and adolescents / GBV survivors	
		Albergue "Casa de autonomias"	Asociación Solidaridad y Acción (ASA)	Civil society	Children and adolescents	
		Non identified	Equidad Foundation	Civil society	LGBTIQ+	
		La Argelia shelter	Jesuit Refugee Service	Religious	Integral	
TOTAL PRELIMINARY POPULATION:			**33**	**TOTAL SAMPLED:**		**8**

The survey respondents provided input on: 1. Protection and security; 2. Legal advice and access to documents for immigration regularization; 3. Access to health / medications / sexual and reproductive health / psychological and psychosocial assistance; 4. Access to adequate food and nutrition / access to sufficient and safe water; 5. Access to education / training / skills development; 6. Assistance on safe housing; 7. Assistance on access to work, employment and other self-managed livelihoods; 8. Participation and socio-economic integration; 9. Social cohesion, prevention and confrontation of xenophobia and other forms of violence and social exclusion.

The qualitative instruments included semi-structured interviews and focus group discussions (C&A, adults -men and women- and members of the LGBTIQ+ community). In the case of focus group discussions (FGD) with children and adolescents, different intervention approaches were applied, such as using recreational elements (games and vignettes) and accompaniment from psychologists and/or pedagogues. Another methodological element incorporated was the segmentation of participants of FGDs by age range: ages 5 to 10, and ages 11 to 14 (knowing that the projections, capacities for the expression of emotions, and relationship dynamics differ among these groups).

Four surveys were designed to obtain specific data:

1. The first survey focused on establishing the situational and infrastructure characteristics of shelters to guarantee compliance with decent standards of habitability. This exercise contributed to identifying the special attention requirements for investments, maintenance, and construction for rehabilitation based on the capacities and strategic projections of the units.

2. The second survey aimed at determining the linkage and/or contribution of the different public actors -local governments and MIES (Ministry of Economic and Social Inclusion)- concerning the temporary accommodation/shelters sector catering to the migrant and refugee population, facing non-addressed humanitarian needs, extreme levels of violence, sexual violence, rape, and exploitation, particularly against women, girls and LGBTIQ+ people. The analysis of this survey focused on identifying the potential support directed from public policy towards these institutions as part of their approach to human rights and fundamental guarantees.

3. The third survey focused on determining the services offer of shelters/temporary accommodation buildings to which the Venezuelan migrants and refugees belonging to priority attention groups can access to (children, female GBV survivors, unaccompanied adolescents, elderly, and LGBTIQ+ people). The survey aimed at identifying new entrances reception capacities and accommodation conditions, characterize the residents and their life situations, and assess conditions such as access to basic services: accommodation, food, drinking water, legal assistance and migratory regularization, health care, sexual and reproductive health, psychological attention, and biosafety. The study also covered access to education for children and adolescents, access to the labor market, self-managed livelihoods, training, education, skills development, and skills for employment and entrepreneurship. In addition, the study addressed issues of social cohesion, perceptions of well-being and security, tensions, and occurrence of discriminatory and/or xenophobic acts.

4. The fourth survey addressed the sociodemographic characteristics, situational conditions, perceptions, and perspectives of socioeconomic insertion of the beneficiaries regarding the services offered in shelters where they temporarily reside. The questionnaire included inquiries around limited access to fundamental rights and guarantees for users.

The provisions on handling information, confidentiality, and feedback were observed throughout the survey process. The consulting team established a procedure for forecasting contingencies and referral of cases, if cases of people with needs for psychological care, crisis management, and legal assistance were identified through survey application.

Under the instruments defined in the research methodology, 130 surveys were carried out to shelter system services' beneficiaries, of which 50.7% were male, 47.69% were female, and 1.54% self-identified as other gender. Regarding age groups, the most representative are those ranging from 19 to 35 years old (53.8%) and 36 to 64 years old (30%), followed by those under 18 (14.6%) and those over 65 (1.64%). Another variable utilized was the marital status of respondents, of which 62.3% identify themselves as single, 30% reported being in a de facto union, 5.4% are married people and 2.3% are widows. Most single survey respondents are women, while males lead the married group.

Regarding family groups' composition, 61.5% of the people surveyed reported having a non-traditional family composition. This data mainly describes people who are traveling alone or accompanied by friends and colleagues they met during the trip. Other forms of family organization are also included in this group, such as people traveling with their partners, siblings, or one parent, etc.

Within this group, the unaccompanied adolescents' group is significant, representing 18.75% of the "people traveling alone" sample. It is important to note that, in the shelters, the interviews revealed that formation of small groups of people traveling alone is a subsistence mechanism that allows displacement with minimum conditions of security and protection against robberies, kidnappings, or other types of violence occurring during the migratory path. It is important to mention that women and adolescents who travel alone are more exposed to human trafficking networks, as well as robberies, physical attacks, kidnappings, and extortion. Sometimes these people are caught by cross-border organized crime networks.

OUR VOICES

"My wife was contacted by some people that said they would help her get to Quito quickly and safely. She had no money and came alone with our son. In exchange, she was given drugs to bring into Ecuador, and at the border, they stopped her. She is imprisoned in Latacunga, and I have not seen my son. I have been wandering from place to place for four months, sleeping on the street, and asking for money to find out where they took him"(San Juan de Dios Shelter Interviewee).

Of the remaining portion of the sample, 32.3% claimed traveling with the entire family, comprised of a mother, a father, and children. The remaining 6.2% are only mothers and their children, as the fathers were not allowed into the shelter where the survey was conducted.

Table No. 2. Composition of family groups within shelters, April 2021

Other composition	%
Alone	32,50%
Unaccompanied adolescent	18,75%
Mother / daughter / brother / partner	21,25%
Partner	2,50%
Does not specify	25,00%

Source: Survey of migrants and refugees hosted in shelters in Quito, Machala, Huaquillas, Tulcán, Manta, and Ibarra in Ecuador April 2021. Prepared by the author.

Regarding the level of instruction, 30.77% finished middle school and 23.85% finished high school, followed by 14.62% who finished primary and 11.54% finished basic education. The technical education (6.92%), university (9.23%), master's (0.77%) and doctorate levels (0.77%) were less representative among the interviewees' education levels.

Regarding the type of occupation before migrating from Venezuela, the greatest group is students, followed by laborers, household-care related activities, workers in the area of commerce, sales, and customer service, and to a lesser extent, other trades related to beauty, food handling, other professional activities, and teaching. Currently, 62% of these people are not working, 23% beg in the streets or alternate street vending with begging. The remaining 15% carry out informal and occasional jobs (recyclers and day jobs as bricklayers, carpenters, commercial promoters of restaurants, and other local businesses, etc.).

Among survey respondents, 36.9% reported having some type of disability or severe and/or degenerative disease. The most notorious was visual impairment, followed by heart and degenerative diseases (diabetes, autoimmune diseases, high blood pressure, etc.) Disabilities related to hearing, motor, intellect, or learning were fewer. One case of HIV was reported.

Finally, the study inquired the ways by which people learned about the accommodation building where they were residing. Information provided by networks of friends and acquaintances was the main channel (68%), followed by NGOs and by local governments (15% and 9%, respectively).

2. Results

2.1. Humanitarian context: Venezuelan humanitarian crisis and the shelter sector in institutions in Ecuador

At the beginning of February 2021, the Peruvian government, in agreement with Ecuador, decided to militarize the border between El Oro and Tumbes and closed 33 irregular crossings. The GTRM Huaquillas partner organizations carried out a Rapid Interagency Assessment (ERI for its acronym in Spanish) to gather more detailed information on the profiles and needs of Venezuelan refugees and migrants, which revealed the following needs as priority: food (29%), accommodation (28%), health (11%), and access to migration regularization (22%).

The shelters are operating with reduced capacity, following the national protocols and guidelines for preventing and confronting COVID 19. However, overcrowding regularly prevails as a consequence of the enormous demand for these services. In the same way, additional shelters had to be enabled to host the population in the face of sudden increases in the flow due to closure of borders, which leave large in-transit populations stranded in border areas. Various sources such as the GTRM acknowledge that, during the last month (March / 2021), the number of refugees and migrants living on the streets in the country's main cities and near-border areas like Ibarra, Tulcán, Huaquillas, and Machala has increased [2].

2.2. Reception capacity and terms of stay

The shelters where the research was carried out stated they mostly host migrants, refugees, and people living on the street (including people from the host community), and to a lesser extent, survivors of violence, internally displaced people, and/or people facing substance abuse.

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The institutions have an accommodation capacity that ranges from 18 to 150 people. Jubasca is the accommodation building with the smallest capacity, and September 8 the one that can host the biggest number of said range. The Temporary Shelter of San Antonio de Pichincha can host 120 people, while San Juan de Dios has 100 beds. The Rumichaca Temporary Shelter House can host 60 people, and Casa Linda has a capacity for 30 GBV and human trafficking survivors. See table 2.

Table No. 3. Shelters' hosting capacity, April 2021

Accommodation building	Maximum person accommodation capacity before COVID-19	Current maximum person accommodation capacity
8 de septiembre	150	75
San Juan de Dios Shelter	300	100
Temporary Accomodation Shelter – Rumichaca	60	60
Casa Linda	30	30
Nuestros Jovenes Foundation	120	60
Jubasca	40	18
Ibarra Municipal Shelter	30	30

Source: Survey of the shelters' administrative personnel in Quito, Machala, Huaquillas, Tulcán, Manta, and Ibarra. Ecuador, April 2021. Prepared by the author.

Five of the eight accommodation sites' administrative managers interviewed reported hosting 112 children and adolescents (42 boys, 69 girls) aged between 0 and 17. The Casa Linda shelter is the only accommodation site with a formal education service, provided through MINEDUC. The Rumichaca shelter, the 8 de Septiembre shelter, Nuestros Jovenes Foundation, and the Buen Samaritano shelter have occupational and skills development services for in-transit children and adolescents.

The administrative managers of the eight accommodations sites from the sample reported hosting 182 adults. Of these, 63% identified themselves as male, 34.8% as female and 2.2% as LGBTIQ+, as shown in Graph 1 below.

Graph No. 1 Distribution of adults hosted in shelters, April 2021.
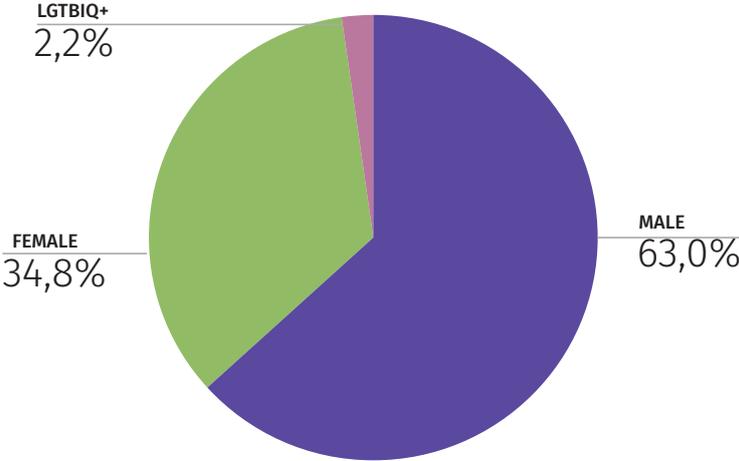
source: Survey of the accommodation sites' administrative personnel in Quito, Machala, Huaquillas, Tulcán, Manta, and Ibarra in Ecuador April 2021. Prepared by the author.

66% women, 31% men, and 3% people from the LGBTIQ+ community comprise the shelters' staff of the sample. Most positions include operational performance, volunteering, and security personnel. There are fewer positions of social workers, psychologists, and doctors. The inexistence of education professionals among the shelters' staff is widespread.

The periods of stay in the shelters range from 3 days (Albergue San Juan de Dios) to 6 months (Casa Linda), depending on the type of services and the beneficiary population residing in these spaces. However, in the context of the COVID-19 pandemic, all institutions have made the periods of stay more flexible. Regarding information/dissemination mechanisms on access to shelters, the administrators informed similar routes as those reported by the beneficiaries: the usual channels are friends or acquaintances networks, other NGOs, and the local governments, respectively.

The prevailing form of distribution of sleeping spaces comprises separate bedrooms for men and women, respectively, followed by bedrooms for family groups and multiple rooms (mothers with children). All bedrooms have good lighting and ventilation, as well as private bathrooms. Only the San Juan de Dios shelter has bathrooms located outside of bedrooms. All shelter managers, except Casa Linda and San Juan de Dios, due to the profile of the beneficiaries they cater to, indicated that when hosting LGBTIQ+ populations, private spaces are given to these group, to prevent occurrence of sexual harassment and abuse; no incidents of this nature have been reported to date. In the context of the COVID-19 pandemic, the shelters reduced their capacity in compliance with sanitary measures. However, most of the informants reported facing temporary overcrowding and shelters have had to enable other areas in the face of exponential increases in migratory flow.

El Buen Samaritano shelter in Sucumbíos, belonging to the Cáritas organization, with a long history in this area, specifically hosts the migrant population. Since it opened in 2000, it catered to flows of Colombian migrants and refugees. Currently it attends the Venezuelan population and, since March 21, Haitian migrants whom entered through the Colombian border. This shelter does not have any type of exclusion criteria; guests can stay for one month.

The Rumichaca and 8 de Septiembre shelters in Tulcán and Huaquillas, respectively, are run by ADRA and have a management model that observes the inclusion criteria. These evaluation parameters are taken into account, both by the organizations that refer the population and internally by the psychosocial team. The criteria they use focus on the female population: the organization welcomes, on the one hand, single women, whether they are heads of household, pregnant women, with catastrophic illnesses or with disabilities (although without the need for a caregiver); and, on the other hand, they welcome bi-parental family nuclei. Exclusion criteria include unaccompanied children and adolescents, single men and women survivors of GBV, whom will only be admitted when other organizations cater to them for a period of two to three days. When potential guests are people with a will to stay in the country, the maximum accommodation period will be ten days, and between three to four days, when they are in transit. If any agency requests to extend this stay, it may be done for up to fifteen days.

The Jubasca shelter belongs to the Scalabrinian Mission and is located in the Manta canton. This shelter selects the population it hosts based on their specific needs, and priority is given to families with children and pregnant women. Stay time is five days for families without children and up to fifteen for families with children. The Municipal shelter of Ibarra, whose target beneficiary group is single men and women (they do not cater to children and adolescents), has a specialist in human mobility issues, whom conducts surveys to gather information on various indicators. The guests' answers determine their level of vulnerability, and whether or not they can enter the shelter. The stay time ranges from eight to fifteen days.

On the other hand, although some shelters are not exclusively for the migrant and refugee population, they primarily host this group. One of these shelters is the San Antonio de Pichincha Temporary Shelter, of the Nuestros Jovenes Foundation, in the Quito canton, which guests are 99.9% Venezuelan and Colombian. They have also welcomed Moroccans, Argentines, Spaniards, Brazilians, Peruvians, and Ecuadorians to a lesser extent. As the administrator points out, *"{…} we never discriminate against anyone, whoever knocks on the door and accepts the regulation enters if we have the capacity to welcome them at that time".* Like the previous cases, the maximum stay period foreseen by the regulation is fifteen days.

The San Juan de Dios shelter of the San Juan de Dios Hospital Order hosts anyone in need, whether they are street dwellers, people in human mobility, people with not enough economic resources, women head of household with children, and families. *"{…} as a religious order we do not discriminate against anyone; we welcome whoever needs help,"* states a representative of the shelter. This center provides night service, which means occupants do not live in this space but can return to spend the night. The time of stay here is around a month.

A special case is the Casa Linda Institutional Shelter, whose target population are adolescent survivors of trafficking for sexual exploitation, regardless of their nationality. Currently, there are only local beneficiaries, which raises questions regarding how the trafficking of women and adolescents in human mobility is being identified and prevented. Casa Linda's inclusion criteria includes; age group, catering to people aged 12 years to 17 years, 11 months, and 29 days, and risk situation, either due to threats, violation of rights, because their physical, psychological and sexual integrity are at risk, because they do not have a family member that can provide immediate and comprehensive care (District Director MIES Machala). They make exceptions to receive the children under five years old of adolescent guests, with a maximum quota of five children. The stay time is determined based on availability for reintegration. The technical standard dictates that the minimum stay is six months and up to a year maximum. The reinsertion process is analyzed individually, considering each adolescent's condition.

Two aspects regarding the criteria on the stay time should be noted: First, the pandemic generated more flexibility regarding stay time in certain shelters. The Nuestros Jovenes Foundation extended its stay period for up to two months, and Caritas did the same for cases of single women. The Hospital Order shelter, since day one of the pandemic, hosted thirty vulnerable and homeless people *"{…} who stayed {…}, for five to six months"*. Jubasca also made their stay time more flexible. Both the San Juan de Dios shelters and the Nuestros Jovenes Foundation shelter differ from the others in that they permanently host older adults facing extreme vulnerabilities.

2.3. Water, sanitation and hygiene (WASH)

Personal hygiene kits are provided in all shelters, which include items such as soap, toothpaste, toothbrush, shampoo, sanitary napkins (for women), and toilet paper. The frequency of delivery of these products varies (weekly, biweekly, and monthly) depending on the resources available in each shelter, which are usually provided by International Organizations and NGOs. The shelters with the better conditions are under the administration of international organizations that provide more stable supply cycles and differentiated attention for populations with special needs, such as mothers with children under one year. Other shelters such as Jubasca and the San Antonio de Pichincha Temporary Accommodation Shelter provide these supplies only when available, prioritizing certain groups of the resident population. These provisioning cycles are irregular and span longer periods.

Access to safe water for consumption, personal hygiene, sanitation of housing areas, and food preparation (when this service is offered) is available in 100% of the shelters surveyed, through

conventional supply channels. Several shelters have carried out infrastructure maintenance and other investments to expand access to water and sanitation. The drinking water comes from the same supply source as that destined for other activities. For this reason, the beneficiaries show distrust of the quality and safety of the drinking water.

OUR VOICES

"We drink the tap water that sometimes comes with dirt or a yellowish color. I don't feel that it is safe for us, there are people with stomach aches, and I think that it is due to the bugs contained in the water, but we have no other option "(San Antonio de Pichincha Shelter House Beneficiary).

In a general sense, health services are considered good by the administrations, since the facilities' privacy has been improved, including division of spaces for males and females, as well as the conditions of the bathroom furniture (showers, sinks, and toilets). The guest population ratified this information, and 91.8% of those surveyed rated the services provided by these shelters as good. However, they stress the need to continue expanding the capacity and carrying out preventive maintenance to avoid deterioration of the infrastructure. The Temporary Shelter in San Antonio de Pichincha is the one with the worst conditions in this regard. Due to the need to enable more emergency spaces, many of the sanitary facilities have leaks and deterioration in the water structure.

Based on observation, only 25% of shelters have access ramps for people with disabilities. Neither bathrooms nor common areas have infrastructure for the disabled, the elderly, and children. The Casa Buen Samaritano shelter is the only one with emergency exit doors that consider the particular conditions of children and adolescents, disabled people, and older adults.

The research found that, in 80% of the facilities, the shared bathrooms found in social and administrative areas are in good condition, with locking mechanisms from the inside. The sanitary facilities enabled for women and men have internal locks and other conditions such as high windows and ventilation systems without visual access from the outside to allow for privacy and intimacy of people and prevent occurrence of harassment and sexual violence. 75% of the men and women's restrooms are in good condition. Only the Casa Linda shelter and the San Antonio de Pichincha Temporary shelter (25% of the total shelters) report having restrooms in poor condition, especially in the showers.

Sanitization of the spaces is carried out daily by guests and occasionally by salaried personnel.

2.4. Emergency measures in the context of COVID-19

Some of the measures implemented in the context of COVID 19 include constant sanitation of spaces, provision of sinks for regular hand washing, disinfection points at the entrance and exit of the shelter, and provision of isolated spaces for people with symptoms. Among the people surveyed, 90.9% stated that the shelter had provided them with biosafety materials during COVID-19, including masks, antibacterial gel, and alcohol.

A common problem was the lack of spaces for quarantine of new arrivals. However, some institutions have mechanisms in place with public health authorities to apply rapid tests and PCR or symptomatic assessment upon entry.

2.5. Shelters rules, protocols, and violence prevention

All shelters have disciplinary protocols and violence prevention mechanisms, as well as ways to communicate these rules to residents. The protocols are applied by the managers of each institution and address an array of situations and forms of violence and its effects. In all cases, all guests must read and accept these norms to access temporary accommodation agreements. The administrations highlight other organizations' roles in holding workshops, talks, and courses on violence prevention, particularly on gender-based violence.

Despite the regulatory mechanisms, 100% of the administrative staff surveyed stated to have witness occurrence of violence inside of shelters, including verbal abuse and physical violence. Only one shelter reported public violence (San Antonio de Pichincha Shelter), including threat and confrontation with local public officials that have encouraged xenophobic and discriminatory reactions against residents among the host community. However, the perpetrators of violent acts tend to be mostly the residents of the shelters themselves.

2.6 Food services

Not all shelters provide food services. Only 88% of the shelters sampled provide catering (ranging from 3 meals with snacks to just one meal a day). Of those providing this service, only 50% have some type of special diet for cancer patients, pregnant women, and people with diabetes and living with HIV. The shelters that provide food services obtain the required resources through Organizations such as the World Food Programme, Public Assistance Programs or Church Organizations, and self-management mechanisms. In general, these services are deemed adequate by the administrative staff, based on the nutritional balance of the dishes and the rations.

2.7. Health care services

None of the shelters have internal health services, although, in 100% of the cases, the need for a service that meets emergency healthcare needs was acknowledged. However, 30% of shelter have coordination mechanisms with the Ministry of Public Health, the Red Cross, and rapid response protocols with 911. Only 30% of shelters reported having supplies for emergency healthcare, such as stretchers, first aid kits, and a limited stock of drugs. Despite the high number of beneficiaries living with chronic diseases, only the House of San Antonio de Pichincha Temporary Shelter acknowledges the presence of chronic patients who require access to permanent medications, which are provided - in part - by the Public Health System.

In the current COVID-19 context, the shelters have implemented protocols to address new entrances and treating of people with symptoms. These were coordinated with various public and/or private institutions. Furthermore, the Sucumbíos shelter, alongside the MoH, organized a plan to attend people with COVID-19 symptoms, while guests have to undergo a rapid test with the Red Cross before entering the shelter. The cost of the rapid test is covered by various NGOs depending on the availability of resources.

Likewise, the Rumichaca center, based on other shelters' experience, put together a protocol alongside the MoH and the ADRA health officer. The psychosocial team has specific biosecurity measures to enter the rooms and when boarding a vehicle. People who want to enter this space, must do triage at the Rumichaca health point. Once inside, mask use and social distancing are mandatory, and users are constantly being asked to wash their hands.

The Machala shelter is working to gain the Ministry's support for spaces cleaning and fumigation. Internally, they follow a protocol for everyone who enters, including temperature control, alcohol use, wearing a mask, and disinfection. For new admissions, they isolate the beneficiaries for several days until it is verified that they have no symptoms.

The San Juan de Dios shelter has portable sinks and provides gel for people who go to place a donation; a mechanism the shelter manages as means for funding. A group of nurses who take care of the elderly who have lived in this space for many years always cares for the elders' hand hygiene. The rest of the shelters' population receives a mask when the shelter can provide them. They are given food on a disposable food plate and use separate, assigned booths. There is staff permanently overseeing the use of masks. These actions were developed from the training provided by public and private institutions.

In the case of the organization run by the Nuestro Jovenes Foundation, the testimonies collected reveal the absence of any type of training by the public sector on how to prevent and address cases of COVID-19. This shelter has not closed its doors to newcomers during the pandemic. They took prevention measures, and designated a special area in a shed for new guests, where they carried out quarantine.

The actions and/or biosafety measures implemented include temperature checking at the entrance, the use of alcohol or gel, use of a mask, and social distancing. The staff of these various shelters cares for the beneficiary groups' constant hand washing.

On the other hand, the various testimonies of shelters managers evidence the great challenges that they faced during the beginning of the pandemic and their big efforts to implement biosafety measures.

"COVID is a virus we know little of. It continues to be a challenge for everyone due to its uncertain behavior. Thanks to the biosecurity protocols, we have not had cases in the shelter. The population that we serve does not wear masks. They are agglomerated because they are in a street situation when we approach them and what we have identified is that they are not COVID positive. So it is a bit difficult to know what the real behavior of this disease is "(Shelter Coordinator September 8).

"The main challenge has been handlig that amount of population. At first, guests were forbidden to leave. They were confined for us to comply with the government health measures, but we continued to receive people. Of course, it was a danger for everyone, but that is why we designated the warehouse as a special area for those who came to quarantine there. For me, not closing and continue receiving people in the midst of the pandemic was a great challenge" (Manager of the San Antonio de Pichincha Temporary Shelter).
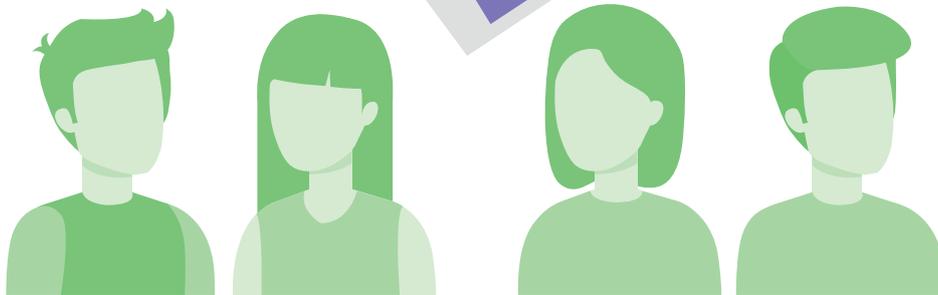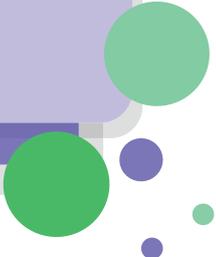
The scarcity of information and a protocol to be executed immediately, linked to the lack of training, implements, and economic resources to face this new context, plus the fear of contagion felt by both the beneficiaries and the staff are common denominators in the testimonies collected.

"If the staff memebers get infected, it will puts us all in trouble. If one gets infected and has contact with another team member, both have to isolate themselves for prevention, and that limits our operational capacity" ("8 de septiembre" Shelter Coordinator).

2.8. Education services

The testimonies confirm that no shelter or foster home has education services available for children and adolescents in an institutionalized way. The Good Samaritan shelter house articulates with HIAS and Alas de Colibrí to cover this need, based on its expertise in health and education.

The Rumichaca and Huaquillas centers, run by ADRA, provide information to those with children and adolescents on the process to be follow to enter the Ecuadorian education system. On the other hand, the San Antonio de Pichincha temporary shelter and the Casa Linda institutional shelter manage the children's and adolescents enrolling into the education system with the zonal coordination office of the Ministry of Education. However, in the case of the San Antonio shelter, the person in charge of the hostel indicates that the registration platform does not allow entry when the arrival occurs outside the registration time. When the student's entry is possible, the rest of the process must be done directly by the father or mother of the family. Yet, shelters help hosted families with the school supplies the student will require.

"{…} Well, the last ones we've had, we printed the sheets directly for them. So, for us, it is also an expense on office materials. The teacher is the one who prints everything here and gives them so that they can do their homework" (Manager of the San Antonio de Pichincha Shelter House).

Casa Linda, due to the population it manages, also has beneficiaries from other provinces. Once the time stipulated by the judge for them to live in the center has passed, "social work connects with the Education District and makes the corresponding transfer so that, once the adolescent graduates from the center, she can continue with her education". Likewise, these beneficiaries' children under three years of age are in the process of early stimulation in the child development centers or in the Creciendo por Nuestros Hijos (CNH) centers (MIES).

In terms of training, 100% of the sampled population carried out some training activity with the assistance of other organizations. Among the main topics are: 1. entrepreneurship and productive empowerment, 2. cooking, 3. hairdressing, 4. masonry, and 5. pastry and bakery.

2.9. Possibilities for conducting livelihood activities

67% of the administrations surveyed mentioned they allow the exit of the beneficiaries for them to generate livelihoods, while 33% expressly prohibit the exit of the facilities during the period of stay. Generating their own income is a fundamental aspect for people in a human mobility situation and any vulnerable group found in these centers. However, of the shelters that were part of this study, the Nuestros Jovenes Foundation shelter, the Scalabrinian Mission shelter, and the San Juan de Dios Hospital Order shelter are the only ones that allow the beneficiaries to enter and exit do some income-generating activity. But, for this, they must comply with a schedule determined by each shelter.

In the case of the center that belongs to Caritas, it allowed exit before the pandemic. However, *"{…} now it is complicated. We cannot let people go out to find some economic means {…}. {…} We have said that {…} once the person enters, they leave when they have resolved their situation and have where to go".* ADRA centers, due to being spaces of passage, do not permit the beneficiaries to exit and re-enter.

Training is a tool that helps beneficiaries to generate income independently, through their own ventures. Along these lines, both the San Antonio de Pichincha Temporary Shelter House and the San Juan de Dios Shelter provide training for income generating. Sometimes they also provide implements such as:

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"{...} The kitchenette, the pan, the oil, we give these to them so they can undertake business, {...}. This follow-up is done through Social Work because it has happened to us that many people come with that expectation of staring their businesses {...}. It is for them to do their informal work outside. As a shelter, there is definitely nothing more we can do apart from encouraging them to seek an economic path" (General Manager of the San Juan de Dios Hospital Order).

In the same way, the Good Samaritan Shelter provides training to its recipients. It enrolles them in programs on livelihoods that other organizations manage. Although they have these programs available, "{...} there is a lack of work in this matter, although here a livelihood table is organized and we are monitoring the economic development of the recipients." Additionally, the Municipal Shelter of Ibarra manages two routes: on the one hand, it conducts sewing entrepreneurship workshops aimed at women and LGBTIQ+ people. On the other, the Municipal shelter refers men *"{...} to different organizations to collaborate with his programs, such as OIM's secure income program. To access this program, they need to have a job, and this encourages them to get a livelihood {...} "*(GAD Ibarra).

On the other hand, the Casa Linda institutional shelter has autonomy plans through "activities coordinated with the academia so that they study short careers. Among them is a program to access jobs such as in a beauty salon {...} or a pharmacy ".

In this context, it cannot be considered that carrying out entrepreneurial activities, which lead to income generation for the migrant and/or refugee population, implies leaving that "safe space" that the shelter symbolizes. Day by day, forced-to-migrate people must face factors that limit or hinder their labor insertion. Limitations vary from legal to the negative perceptions that the host population has, not only towards migrant people but also towards their own nationals.

Lacking identification documents such as a valid passport implies inconveniences for the regularization process in Ecuador and, therefore, to be hired legally. "Local personnel takes advantage of migrants' lack

of documents or legal status, so making employment precarious and, on the other hand, Ecuadorian citizens are displaced from their sources of work because foreigners are poorly paid for doing double the work" (Jubasca shelter coordinator).

Another element that hinders labor insertion, according to what the head of the Rumichaca Accommodation Center points out, "{...} is that there is a large population of Venezuelans within this city or this province, and there are no work sources for all of them. There not enough work sources, neither for nationals and nor for foreigners {...} ". At this point, it should be noted that before the pandemic, the labor market was already in a difficult situation that has deepened even more in the context of the COVID-19 health emergency.

> *"The first economic figures for 2021 do not indicate the beginning of the expected recovery. On the one hand, tax collection in January was the lowest since 2018, and, on the other, based on information from the Ministry of Labor, 44,278 formal contracts have been lost in the labor market this year. While 43,373 new jobs were signed, at the same time 87,592 were terminated"* (La Hora Newspaper, February 2021).

Xenophobia, that is, the fear and rejection of the foreigner or immigrant, also slows down job placemen, through various manifestations, "{...} there are professionals with a lot of knowledge, but because they are Venezuelans, they don't get the jobs" (September 8).

OUR VOICES

"It is the case of street dwellers who, at some point, and I am not talking about adults but young people, have tried to do something different, but our preconceptions and paradigms have caused them to be rejected. They are seen with tattoos, badly dressed, and they are not given the slightest opportunity" (Manager of the Hospital San Juan de Dios).

2.10. Protection services: Services offered and their limitations

Except for Casa Linda, due to the profile of beneficiaries it hosts, the rest of the shelter does not offer protection services directly. To provide minimum guarantees of access to protection rights, the institutions deploy various strategies such as follow-up and monitoring, comprehensive protection routes, referral mechanisms, referral of cases, and provision of information to residents to self-manage their protection requirements. All hostels share a strong orientation towards roof/security and exit plan services, particularly related to short-term stays. Issues such as access to legal, psychosocial, and psychological care, and advice on immigration regularization services are, in most cases, provided in alliance with external actors.

It is important to insist on an idea raised earlier. Not all shelters conceive their role in the same way concerning the protection services. The institutions administered by ADRA, Caritas Sucumbios, and the municipal shelter of Ibarra stated that they perform a 6-month follow-up to once guests because they dont have the chance to be granted accommodation service once they have left the shelter. Hence, they establish systematic coordination mechanisms with the actors that provide protection and, thus, achieve effective responses in the short term. For its part, the Nuestro Jovenes Foundation, from a guarantee perspective, ensures that the departure of people from the accommodation occurs adequately, and, for this, it establishes exit in coordination with the Foundation team (for psychosocial, psychological, and legal assistance) and with other organizations for assistance in safe and long-term accommodation and livelihoods. Other organizations such as Jubasca and San Juan de Dios only offer information regarding protection organizations, their services, and their contact details.

Once the need for shelter/security has been covered, there is a second moment that takes to leaving the shelter. In this sense, the Municipal Shelter of Ibarra monitors the people who leave "by contacting the organizations that served them" and, likewise, the Caritas Sucumbios team has a monitoring and accompaniment strategy.

OUR VOICES

"{...} For at least two or three months to see how the person develops because if they do not have any income at all, they are helped with a home kit, kitchen kit, and food. All managed so that the person -if they really want to stay in this province- receives help [...] " (Caritas Sucumbios Manager).

On the other hand, in the two ADRA centers, they work with the ideas or exit plans of the beneficiaries. In Huaquillas, however, if they wish to settle in the host community, the center coordinates with the organizations to give them rent, a food card, and some cash-based intervention (CBI).

In the same way, the shelter of the Nuestro Jovenes Foundation provides the necessary connections for the recipients to leave the shelter and manage to reside adequately. They make sure that beneficiaries received help for *"the rent, the mattress or the kitchenette so that they have the minimum necessary to survive, and from there they leave {...} they have a "window period" in which they receive aid, and at the fourth month they already have to cover for their expenses."* Jubasca follows a similar dynamic: it provides the beneficiary with a contact that will help them with the rent for three months, and they continue to sustain follow-up.

Based on these considerations, it is worth noting that, from the accounts provided by those responsible, three scenarios are the most common at the time of departure from the center. In the first scenario, recipients fulfill their objective and go to the targeted host country; in the second scenario, they are unable to stabilize their situation and find themselves on the streets; and, in the third scenario, once outside the center, the people who have received assistance cannot return ("8 de Septiembre" Shelter).

Before closing this point and due to the particularity of the target group managed by Casa Linda, it should be noted that:

"The care unit must guarantee the psychological and social follow-up of the C&A during the first six months after the initial resolution of reintegration to the family or autonomy pursue. And {…} watch over their emotional environment, and support to guaranteeing their integral development based on the best interests " (MIES District Division Official).

The shelter sector has accumulated notable experiences in matters of inter-institutional coordination. In this way, although most do not provide direct protection services, they coordinate and provide contact information to residents to access other protection services, including services in matters of legal assistance, advice for migratory regularization, and psychological and psychosocial care.

Regarding special protection services for GBV survivors, all the institutions mentioned that faced with the highly specialized nature of the demands associated with these population groups, they are addressed based on protection routes established at the territorial level, made up of multidisciplinary working groups. The population with these highly specialized demands is referred to other centers with the necessary tools to guarantee the management of crises, restitution of rights, physical and emotional rehabilitation, and economic and social insertion. The Network of Shelter Homes, managed by civil society organizations, constitutes a strategic ally in this regard.

2.11. Access to recreational spaces and activities with the host community

Another scenario is visible within the host communities where the organization of cultural interchange dynamics that promote social cohesion are scarce. Relations are classified as tense in all the institutions except in the "8 de Septiembre" shelter in Huaquillas, which has managed to generate a good practice in its relationship with the community, partly thanks to a joint advocacy to improve the quality of life and access to basic services of the people who live in areas surrounding the shelter. For her part, the coordinator of the San Antonio de Pichincha Shelter House comments that:

... *"Efforts are made to improve relationships despite having suffered all kinds of aggressions: community members are invited to carry out joint training and awareness-raising activities with residents, plus they enjoy the services the foundation provides."*

However, much more than this is required. Without the actors' commitment and political will, it will not be possible to reduce the scourge of xenophobia.

"When the October events took place, the residents of this shelter guarded the neighborhood along with other members of the community. The need, in that case, favored cohesion, but after time everything went back to being as before" (Coordinator of the Shelter House of San Antonio de Pichincha).
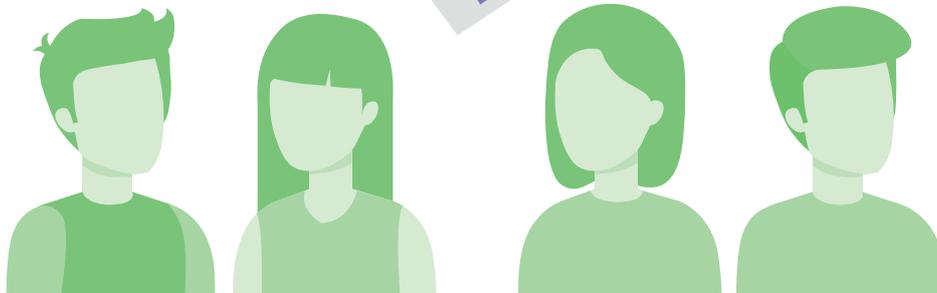
2.12. Demand for access to temporary accommodation services for the migrant and refugee population and needs for access to protection services, GBV prevention, health, WASH, education, and livelihoods for the migrant and refugee population

Arrival at hostels and perceptions about the accommodation service. Possibilities of communication and family contact

Upon arrival at the shelter, 95% of the beneficiaries reported having received basic items such as duvets, blankets, sheets, and pillows whose quality is judged as good by 94.79%. It is important to highlight that not all guests receive basic equipment in the Jubasca, San Juan de Dios, and Ibarra Municipal shelters. Most of the beneficiaries who received it were satisfied with the quality of the basic utensils and personal hygiene items received.

Graph No. 2. Main demands of residents regarding sanitary services in accommodation, April 2021
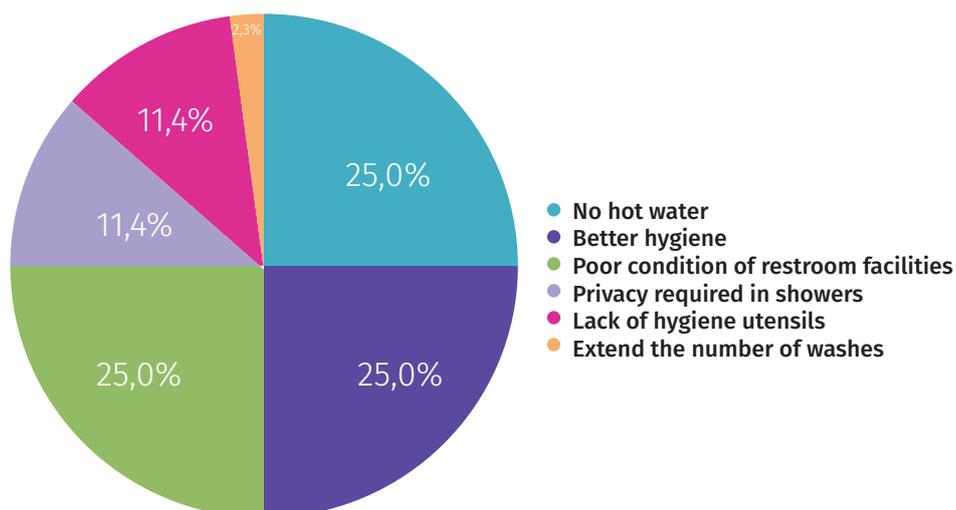
Pie chart with the following values:
- No hot water — 25,0%
- Better hygiene — 25,0%
- Poor condition of restroom facilities — 25,0%
- Privacy required in showers — 11,4%
- Lack of hygiene utensils — 11,4%
- Extend the number of washes — 2,3%

Source: Survey of the accommodation sites' occupants (migrants and refugees) in Quito, Machala, Huaquillas, Tulcán, Manta, and Ibarra in Ecuador April 2021. Elaborated by the author.

68.55% of the people surveyed report maintaining communications with their family members through their own means such as cellular devices, computer, and access to Wi-Fi networks. On the other hand, 31.45% report not having means of communication at their disposal or communication facilitation within the shelters.

In general, 92% of the surveys show a level of satisfaction with the provided accommodation service. The causes of satisfaction focus on the possibility of having a shelter, the cleanliness of the place, the possibility of finding safety together with their families, among other motivations. The 8% who report not feeling satisfied with the service indicate inadequate treatment by the administrative staff and deterioration in the facilities.

The sanitary services are generally considered adequate, except for 12.50% of the cases that show negative perceptions regarding the deterioration in bathrooms, problems in the operation of pipes and hydraulic installations, and spaces disabled by crevices, specifically in the Casa Linda shelter, the Ibarra Municipal Shelter, and Nuestro Jovenes Foundation shelter. In this sense, it is important to point out that it is vital to provide hot water services in showers in the Ecuadorian Sierra shelters and enable bathrooms in the rooms, considering the low temperatures experienced at night. Observations made evident that there were no changing tables for babies in the bathrooms to make these spaces inclusive for families with young children and adolescents.

It is also important to highlight that MIES and the municipal government are responsible for the Casa Linda shelter and the Ibarra's Municipal shelter, respectively. In both cases, it is the state that must guarantee access to all services due. The other spaces are under the administration of private entities, NGOs, and International Organizations. It would be expected that the institutional framework subordinated to state management would have better conditions for providing services to the Venezuelan migrant and refugee population or those living on the streets. Yet, problems here are similar to those in the other organizational forms.

On the other hand, for garbage disposal and laundry services (if this service is provided), positive opinions are wielded except for the 5% who present adverse criteria, fundamentally regarding the

low availability of spaces and equipment to carry out the laundry, specifically in Casa Linda shelter, Ibarra's Municipal shelter, and Nuestro Jovenes Foundation shelter.

Knowledge of the rights of migrant and refugee people

Regarding the knowledge of the rights that assist migrant and refugee people, it is worrying that only 26% of the surveyed group stated knowing all their rights, 32% indicated knowing some rights. In comparison, 43% say they do not know any of their rights. 100% of the Samaritan house accommodation site residents do not know their rights. In the San Juan de Dios accommodation and the Ibarra Municipal shelter, more than 50% of its residents are unaware of their rights as migrants, as observed in Graph 3. Of the people who indicate they know their rights or at least some of them, it is stated that the main forms of access to information on the subject have been public and/or social media, and institutional personnel at their arrival at the hostel. Of the total of people surveyed, only about 37% have received some type of legal advice, the priority issues being documentation, human rights, immigration regularization, and access to justice.

Graph No. 3 Percentage of the migrant population residing in accommodation sites who do not know their rights as migrants, April 2021
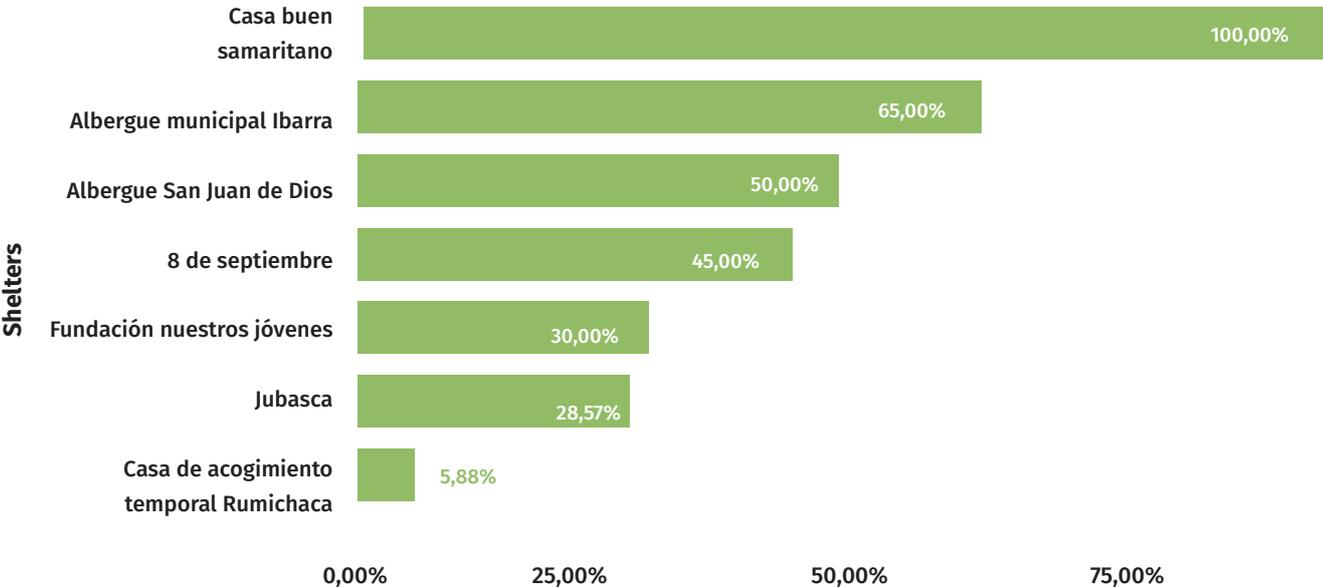
Source: Survey of the accommodation sites' occupants (migrants and refugees) in Quito, Machala, Huaquillas, Tulcan, Manta, and Ibarra in Ecuador April 2021. Elaborated by the author.

Acts of violence, GBV, and its causes. Perceptions of security and insecurity inside and outside the shelters

Among the interviewees sampled, 28 people report having known of cases of violence within the shelter. 57% belong to the Nuestro Jovenes Foundation shelter, a lower percentage were reported in the Municipal Accommodation of Ibarra, the San Juan de Dios shelter, and the "8 de septiembre" shelter. The violence modalities reported (as typified) are verbal violence, psychological violence, physical violence, and sexual violence. When people were asked about the causes that generated violence, they expressed that national origin constitutes the first cause of violence, followed by "being a woman" and "being LGBTIQ+." This data has been corroborated by the LGBTIQ+ focus group, where they confirmed that they felt more discrimination due to stigmas related to xenophobia than due to their sex-gender identity.

The research also identified that only in 48% of violence cases, some type of procedure was carried out: most regularly, the identity protection services in anonymous complaints, the medical services, and the psychological services; administrative complaints had a lower prevalence. Despite these elements, 75% of the beneficiaries interviewed (45 men, 39 women, and one LGTBIQ+ person) report feeling safer since their arrival in the country; 94% of this group consider the shelter a secure and adequate place for their personal and family comfort.

Graph No. 4. Percentage of residents who know of some type of violence inside the shelter, according to the accommodation site, April 2021

- Fundación nuestros jóvenes
- Albergue Municipal Ibarra
- Albergues San Juan de Dios
- 8 de Septiembre
- Casa de Acogimiento Temporal Rumichaca

5,3%
5,3%
15,8%
15,8%
57,9%
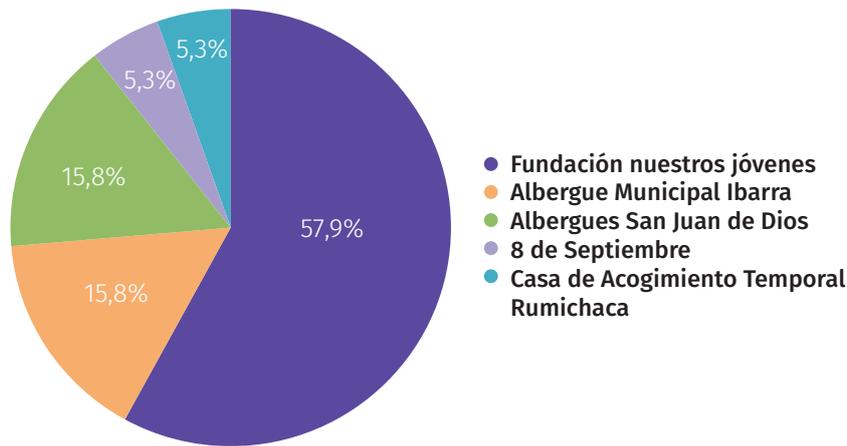
Source: Survey Survey of the accommodation sites' occupants (migrants and refugees) in Quito, Machala, Huaquillas, Tulcán, Manta, and Ibarra in Ecuador April 2021. Elaborated by the author.

Graph No. 5 Cases of Violence in the accommodation site, known by residents, April 2021
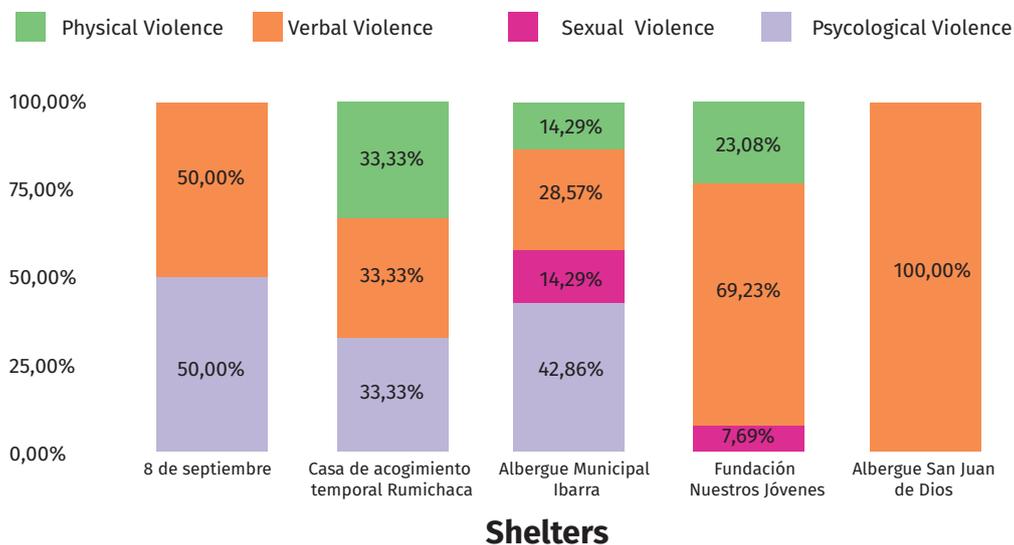
Physical Violence   Verbal Violence   Sexual Violence   Psycological Violence

Shelters

Source: Survey of the accommodation sites' occupants (migrants and refugees) in Quito, Machala, Huaquillas, Tulcán, Manta, and Ibarra in Ecuador April 2021. Elaborated by the author.

Of the 28 beneficiaries who feel unsafe in the country, 57% identify xenophobia as the main cause, followed by insecurity, as seen in Graph 23. Women in the sample have especially highlighted this issue. Those who indicate that they perceive insecurity inside the shelters point out the cause in their coexistence with potentially conflictive beneficiary groups, among them those who consume narcotics

and/or alcohol or those who resist the removal of the knives they carry upon arrival at installation. An important note stems from the conditions of Colombian refugees in the country, who represent the second-largest group after Venezuelan citizens.

The perception of risk of these people derives from traumatic events associated with patterns of systematic guerrilla violence and the imminent fear that they may be relocated through information networks. As part of this study, two Colombian refugee citizens in Ecuador who were victims of kidnapping were surveyed. For them living with Venezuelans that traveled through Colombia is perceived as a threat to their individual security and emotional stability.

From the perspectives of the majority of the beneficiary actors, the shelter is constituted not only as a refuge but also as a therapeutic space for peace, for the reconstruction of life projects, and for the strengthening of affective bonds:

OUR VOICES

{...} I feel safer because, with all the technical team, everything they offer us allows us to build upon ideas that help us. {...} They give us protection, they give us care, and much more. {...} They help us create bonds with the family and better relate with one another. Psychological support helps me because it strengthens and makes my self-esteem stable (Beneficiary, Casa Linda).

The trajectories of people in mobility and their journeys on foot through the regional geography generate situations of systematic wear-out, confrontation of risk, and suffering severe climatic conditions:

{...} "I feel very safe. Because I came walking from Venezuela, many days, and I slept in the gasoline pumps, and we arrived at the Quitumbe terminal. We slept in the terminal, and then they told us about the shelter. We arrived here, and they gave us accommodation, they gave us clothes, food, shelter, and thanks to that we didn't get cold... and obviously, now we feel safe "(San Juan de Dios Shelter Beneficiary).
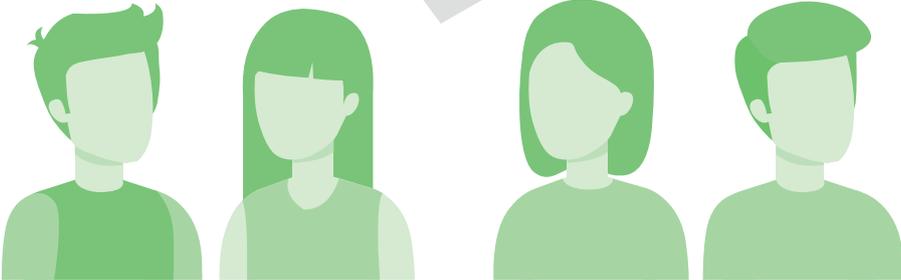
Regarding the perceptions of insecurity in the internal settings of the shelters, it is observed -albeit exceptionally- that the spaces are susceptible to the reproduction of schemes of violence carried out by the residents before entry. According to the administrators, in most cases, the interveners are young men who mostly resort to verbal and sometimes physical violence. This derives from coexistence conflicts and activities that contravene the disciplinary norms of the shelters.

To a lesser extent, GBV attacks have occurred. This is because residents know that this appears as serious indiscipline, punished with the immediate cessation of residence in the shelter and taking legal actions against the perpetrator. It is important to note that, given the scope of the study on the country shelters' state of the art, GBV data and analysis are limited, and an in-depth study is required to understand more closely how and when these cases occur and whether or not they are being reported.

The major presence of men in the shelters is consistent with these findings. 100% of the administrations acknowledge having dealt with GBV incidents on some occasion, although they are not the main manifestation of conflict within the spaces. Conflict management, violence prevention, training in masculinities and archetypes, education for peace and leadership within the refuge space become necessary strategies to deal with potential confrontations:

{…} some of the population that comes to the shelter bring knives with them because they come walking and feel they must have weapons to defend themselves, although here they are checked and knives taken from them at their entry. But, sometimes, they resist and then become aggressive. Some of the residents consume drugs and want to pass drugs in here. They have vices; they attack each other. There have been situations in which, at 1 or 2 in the morning, some people residing here have used substances and caused problems. So we have had to call the police at the UPC (Communitarian Police Unit in Spanish), the coordinator leaves, and then there is a lot of aggressiveness, especially by the residing population, not all, but we have had some of these cases (San Antonio de Pichincha Shelter House).

Access to food and nutrition

In the case of food services, users state that at least 82% have access to between 3 daily dishes with a snack and 3 dishes of food without snacks. Specifically, 100% of the residents of Casa Linda and Casa Buen Samaritano receive this benefit. The remaining 18% mentioned they consume between two daily dishes with a snack, 1 daily dish without a snack, or between 1 and 2 dishes on intermittent days. This information is consistent with what is expressed by the shelter administrations on that some of them (Jubasca shelter and Ibarra's Municipal shelter) do not provide food services or provide these services, but not exclusively for the migrant and refugee population (San Juan de Dios shelter). The vast majority, 95% of the shetlers' population access the food service without paying any value for the food they consume. The remaining 5% travels from the shelters to other institutions that provide the service for a reasonable price or purchase their food through the local stores.

Assistance and access to Health

Beneficiaries reported that, since their arrival in the country, 45% of them had requested health care, yet only 74% of those requested finally received it. Regarding sexual and reproductive health, 79% said they had received this service through the provision of condoms, access to the morning-after pill, and training and information on rights. No entity reported carrying out other activities such as pre and postnatal controls, STI screening, etc. Only in the case of the shelter of the Nuestro Jovenes Foundation, the residents mentioned there were efforts of the Center Coordinator with the zonal health authorities to carry out campaigns to review the health status of women, in particular cytological tests, and care for pregnant women. In this sense, the beneficiaries point out the relevance of coordination with other institutions and the need for supply flows in hygiene products.

The comments of the beneficiaries are consistent with the problems raised in the instruments applied to the administrations. Instability in providing materials and hygiene supplies is a crucial problem that the residents face.

The response regarding the provision of biosafety supplies and materials for COVID-19 prevention matches the efforts made both at the institutional level and by international cooperation actors, public authorities, and multilateral organizations. 91% of people reported having received protective materials such as masks, alcohol, antibacterial gel and, to a lesser extent, protective masks.

Access to educational services

Only 30% of the population sampled are in charge of children and adolescents of school age, of which 47% have access to formal school services. The figure is also consistent with what was reported by the shelters since, except for Casa Linda shelter, none have comprehensive educational activities or the regular presence of educators within the institutions. The shelters where the stay is longer and whose residents have plans to establish themselves in the locality manage to insert their children into the public education system through inter-institutional coordination with the Ministry of Education zonal directorates. 100% of people with children and adolescents of school age under their care reported not having support for delivering basic school materials, supplies for carrying out activities, and other needs that parents must meet, and in some cases, are finally provided by the hostel management.

Graph No. 6 Percentages of children and adolescents residing in accommodation sites that do not have access to educational services, April 2021
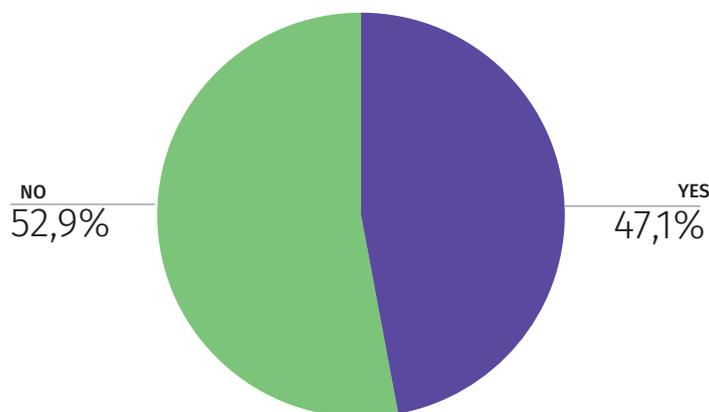
NO
52,9%

YES
47,1%

Source: Survey of the accommodation sites' occupants (migrants and refugees) in Quito, Machala, Huaquillas, Tulcán, Manta, and Ibarra in Ecuador April 2021. Elaborated by the author.

Despite the lack of emergent education services, in many cases, there are relevant efforts to facilitate coordination with the education directorates for the admission of children and adolescents to schools. But even these efforts are not exempt from problems associated with issues such as the distances students must travel when they are located far from where education is available:

"{...} When a child arrives, Darwin (referring to a volunteer resident) does the interview and asks if he is in school, in what grade he is, and then they see if he can enroll the kid in a school here. They get to enroll the kids, and then they can take the classes online like the rest of the children amid the pandemic. They allow them to have their classes in the cyber and do their homework. So far, I have not seen major problems. The only difficulty is that sometimes they do not consider the location of the shelter and send them to schools very far away" (Beneficiary of the Shelter House San Antonio de Pichincha).

Even the school, sometimes, becomes a space where violence, stigmatization, and xenophobia are reproduced:

"{...} I have learned that there have been cases of children from here who have been discriminated against in schools for being Venezuelans and even more so when they are told that they live in a shelter and they take it as if it were that we slept on mattresses on the floor or in other type of hostels that are not as organized as this one. Until now, there have only been verbal attacks." (Beneficiary of the San Antonio de Pichincha Shelter House).

Perceptions on Livelihood Training: Usefulness, and Limitations. Access to the labor market

In terms of training, several topics are highlighted as part of the support programs of other NGOs. These activities focus on developing livelihoods through trades (cooking, bakery, pastry, sewing, masonry, among others), entrepreneurship, and productive empowerment (see graph 26).

Graph No. 7 Main training activities that residents have received within the accommodation sites, April 2021
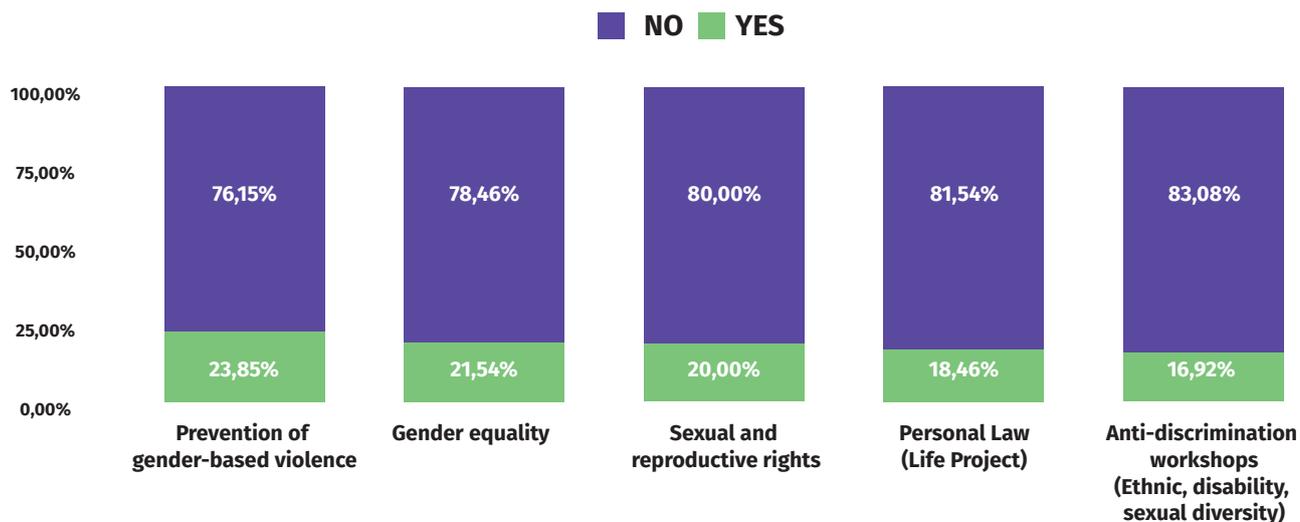
NO ■ YES ■

	Prevention of gender-based violence	Gender equality	Sexual and reproductive rights	Personal Law (Life Project)	Anti-discrimination workshops (Ethnic, disability, sexual diversity)
NO	76,15%	78,46%	80,00%	81,54%	83,08%
YES	23,85%	21,54%	20,00%	18,46%	16,92%

Source: Survey of the accommodation sites' occupants (migrants and refugees) in Quito, Machala, Huaquillas, Tulcán, Manta, and Ibarra in Ecuador April 2021. Elaborated by the author.

Beneficiaries state their employability is enhanced due to designing life plans based on the full development of capacities for entrepreneurship and economic self-management. Training in trades constitutes an important link for insertion in the job market:

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"{...} I present a life project where I have to propose some strategies. One could say this is to help myself financially. So, I consider myself a person with many abilities and skills, as I have developed more ability to paint nails, which would be a good undertaking. Here came a lady who taught us about it, and then I put some effort into it and learned " (Casa Linda shelter beneficiary).

It is important to note that there are great capacities and experiences in the professional field within the beneficiary population. However, the arrival in a new context is a starting point in which reinventing oneself by learning new trades and skills are key to adapting to the environment. The importance of these spaces opens up expectations in the population that commonly face serious limitations for the material execution of new projects:

"{…} the majority of Venezuelans who left their country without documentation and could not apostille their education degree in Venezuela have a challenge because of the price they charge: up to $ 180; a lot of money. Right now, I was doing an entrepreneurship course with COOPI, and everything is fine. Still, they ask me to have the RUC or the RISE (diferents modes of taxpayer registry) to give me the seed capital. I can not get the RUC for professional services because I have to have my titles apostilled and registered by the Senescyt (Secretariat of Higher Education, Science, Technology and Innovation, for its acronym in Spanish). Then the question falls to me {…} Then some people are disappointed because they spend hours on the computer, they go to face-to-face meetings, they do the homework so that later we all get disappointed because they do not give us the capital seed. In the end, you say, well then why did I do all this? " (Beneficiary San Antonio de Pichincha).

Training in livelihoods is vital to ensure the socio-economic insertion of people. However, these actions by themselves are not enough to address other structural limitations that affect access to the labor market and self-employment in Ecuador. The issue of regularization and access to documents and the xenophobic positions that prevent the performance of regular work activities stand as crucial issues that are pointed out by a significant number of the people contacted:

"{…} We are Venezuelans, and we don't have our papers up to date and other stuff. It is difficult to get a job like this because we are Venezuelans and few people want to help us {…} Many people on the street have discriminated against us for being Venezuelans" (Rumichaca Temporary Housing Center).

Recreational and participation spaces

Among the group of shelters sampled, the situations are variable. All facilities have social areas, but only 80% of these spaces carry out recreational and therapeutic activities. Among the main activities are sports (soccer, softball, and basketball) and board games (such as dominoes, parcheesi, among others). To a lesser extent, socio-family leisure activities are carried out with a higher prevalence of self-organized birthdays by the resident population. In Huaquillas, there was evidence of tent spaces next to the shelter, with recreational and educational activities for children and adolescents.

Regarding these spaces, 84% of the beneficiaries value these services as satisfactory, denoting that sports have an essential role, as well as carrying out collective socialization activities such as birthdays, workshops, talks, and conversations. The spaces in which these activities are carried out are green areas, sports fields, multipurpose rooms, and social areas such as mini-libraries and a television room. Casa Linda shelter, San Antonio de Pichincha shelter, 8 de Septiembre shelter, and Rumichaca shelter have other type of spaces such as maternal and infant breastfeeding rooms.

Although this type of service is still very far from responding to the demands, they are a significant example of the resilience mechanisms that people seek in the face of their complex situation. In many cases, the game implements are managed and/or manufactured by the residents themselves, who make money collections to buy soccer balls and organize fully self-managed birthday activities.

The nursery service demands a separate analysis. Inside the shelters, there are no spaces of this type. On the contrary, among the co-existence rules, it is expressly stated that parents will be responsible for the care and custody of their minor children in all the spaces of the shelter and at all moments. This constitutes a device for the prevention of issues related to child abuse and harassment, but at the same time reveals the insufficient capacities to assist the safe care of infants, which as a result, are overexposed to subsistence activities in the streets when their parents or close relatives are allowed to go out to carry out some activity that earns them economic income. Many parents are forced to ask passersby for money or sell sweets in public spaces and with them stand children of early ages, subjected to pollution, inclement weather, and the risks of spending so many hours in areas of high human and car traffic. In the same sense, the pre-assigned caregiving roles to mothers constantly inhibit their effective chances of finding employment.

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"I cleaned in a house, but I always had to carry my little boy until they asked me not to take him anymore. They paid me $ 15 a week, which is little, but not even that I have anymore." (Survey of the San Antonio de Pichincha Shelter).

This makes women easy prey for exploitation and job insecurity, above all those who perform paid domestic work. However, the lack of alternatives that allow them to generate income operates in favor of a perverse vote of silence that inhibits the complaints in this regard.

"There was a time when I cleaned three houses at the same time, and I didn't earn even 50 dollars between the three, but to my mind, the ladies helped me with other things and with food. I knew they were exploiting me, and reporting is necessary, but, clearly speaking, we are Venezuelans, and no one gives us work. What was I going to live on?" (Surveyed San Antonio de Pichincha Shelter House).
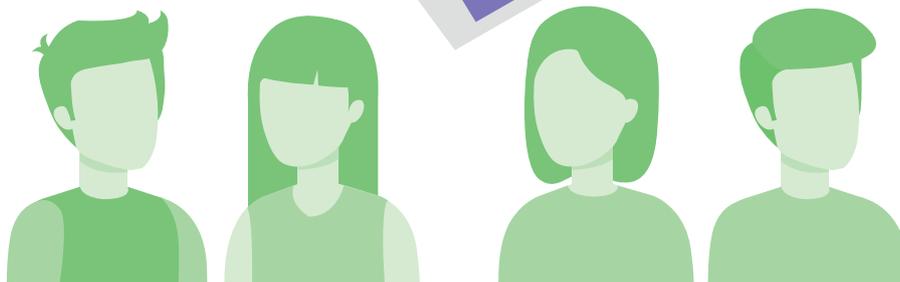
In the focus groups, participants expressed interest in having workshops to motivate inclusion, learning, and sports. Additionally, the adolescents who participated in the focus groups would like to have organized activities related to cooking workshops, music, games, and sports.

Relations with the host community

Perceptions regarding the relations with the host community vary based on the input. Survey responses regarding the reception of the host community are mostly positive (96%). However, it is important to mention that this assessment contradicts others, such as the perception of insecurity, and facing first-hand violence and discrimination based on nationality, as well as other xenophobic acts. It is important to note that the vision of the respondents is based on their proximity with the shelter and its personnel, as well as with the group of residents who welcomes the new arrivals.

Exit Strategies

The exit strategies of participants include post-shelter support, which depends on funding to provide a more durable housing solution and sustainable livelihoods to allow stabilization of their projects:

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{…} One needs to get a job quickly because it is not easy to sleep on the street: it is very cold in here, it is not a hot place, that is what worried me, but thank God we were provided with rent. It hasn't been easy but here we are. (San Juan de Dios Shelter beneficiary) {…} To have means to afford the rent and settle here in Lago Agrio, my husband will look for a job while we find out what I can do (Casa el Buen Samaritano beneficiary) {…} I am currently living with a friend. The IOM already called me and told me that the rental support for two months arrives on Monday (Ibarra Municipal Shelter beneficiary).

The type of aid to be provided to beneficiaries so they can sustained their life plans outside the shelter depends on the income mechanisms they are able to put in place to ensure they are not returning to the aid system or are left homeless. In this sense, support strategies for the youth segment, which currently do not fit into the profile of any organization, are needed.

Priority attention groups (female GBV survivors, children and adolescents, LGBTIQ+ people, and unaccompanied adolescents, among others).

Priority attention groups, including C&A, GBV survivors, and LGBTIQ+ individuals reported to feel safe in shelters. They consider shelter safer than other places where they have lived, particularly where they have faced abuse.

LGBTIQ+ individuals reported having experienced micro-assaults within the shelter and by the host community, because of their gender-sex orientation. However, in the focus group discussion aimed at the LGBTIQ + population, the participants agreed that the discrimination they have had to face relates mainly to xenophobia than of any other type.

The unaccompanied C&A mostly comprise young men close to the age of majority, who travel without their legal guardians, but are often accompanied by relatives or other people from their close family network. Shelters often face a dilemma in this regard, as minors do not voluntarily agree to get away from their trusted networks.

"I do not want to get away from my uncle, I know that it would be better elsewhere, but I would not feel good with strangers and knowing that he is in need. I prefer to work as long as we are together" (Beneficiary at San Juan de Dios Shelter. Age 16)

As long as there are no special demands by "unaccompanied" adolescents, shelters apply flexible criteria for their admission, guaranteeing they are under the supervision of an adult and have the authorization of their legal guardians. No cases of unaccompanied infants were reported in any of the institutions.

Regarding unmet needs, participants of focus group discussions, including priority attention groups, mentioned that they need to have timely and effective access to appointments with gynecology, cardiology, neurology, urology, and rheumatology and dentistry specialists, among others.

Another unmet need is education, since the majority of children cannot attend school on a regular basis due to lack of access to technology and lack of awareness of their rights, despite the fact that several schools manage the demands of children and adolescents in matter of access to education. There are two main problems in this sense: shelters' technological deficit that prevents users from accessing online classes on a regular basis and lack of school supplies, since most C&A do not have enough to carry out their homework.

A more structural issue also emerged: adolescents who cannot continue studying or finding a job once they finish high school; since they do not have the documents requested, there are no options for continuing studies, neither technical nor university studies, nor to access employment opportunities. As previously expressed, the administrations show a general concern regarding the situation of young NEETs and the lack of opportunities for this segment, as well as the risks and vulnerabilities they face.

3. Conclusions

Making visible the gaps regarding services supply in shelters and demands of people in human mobility

Problems have been identified at different levels and with varying degrees of impact for the beneficiaries, which require different advocacy strategies in the short, medium and long term. At a strategic level, the problem lies in the gap between the demands of people in human mobility and the services provided by the public shelters in the country. As evidenced by data analysis (qualitative and quantitative) of preceding sections, the shelters have insufficient capacities regarding infrastructure, material and human resources, institutional dimness unable to favor networks, articulation and synergies that allow the enjoyment of rights and guarantees of the beneficiary populations; these populations face a sum of general problems derived from their mobility situation, as well as specific problems related to the special needs of the Priority Attention Groups, particularly C&A, Women Survivors of Gender-Based Violence and gender-diverse individuals. Each shelter is part of a multi-stakeholder network that promotes support, assistance and protection for migrant people. However, coordination and responses to requests for assistance are variable and sometimes lengthy. **We call for a greater role for agencies, organizations and other humanitarian institutions to solve vital problems, especially the needs of children and adolescents, people who survived forms of violence, particularly women survivors of GBV; pregnant women, mothers of children 0-3 years old and gender-diverse individuals.**

The COVID-19 crisis has increased demands for support, assistance and protection, while the capacity of shelters was reduced in accordance with biosafety regulations. The closure of borders and the resulting militarization of border areas have substantially increased territorial pressures to address the migratory crisis, which include increased presence of migrant population living on the streets, conflicts with host communities, acts of xenophobia, discrimination and fundamental rights violations. All this happens under an economic, social and institutional crisis that widens the inequality gaps in the Ecuadorian society and increases rivalry between nationals and migrants regarding access to goods, resources and fundamental rights.

3.1. Shared concerns

The COVID-19 crisis has been catastrophic for host communities. An increasing number of the local population is deprived of their fundamental rights. Cities such as Manta and Quito register a stark increase of population living on the streets, because of massive evictions. This situation calls for urgent public intervention, since the demands of the local citizens add to the needs of the migrant population. The struggle to access the labor market increases unemployment for locals, while the migrant workforce faces extreme precariousness and exploitation. Under the Humanitarian Law and in the face of the Public Health System's collapse, access for the Ecuadorian population to comprehensive health services is prioritized, while migrant people are prevented from accessing consultations and medications; this is particularly worrying for people living with chronic and degenerative diseases. Likewise, attention for children and adolescents as well as non-existence of support mechanisms for the youth are concerning, particularly for single young men who do not fit into the assistance profile of any Organization, whom are exposed to great threats and vulnerabilities, such as alcoholism, drug use or recruitment in local criminal networks.

All private and local institutions are concerned about the sustainability of the services provided by shelters and the financial management schemes that allow them to "keep alive". We stress the risks involved in assuming a welfare approach for addressing shelters' problems without generating medium-long-term strategies that allow the development of all human and institutional potential.

The migration crisis caused by the recent Venezuelan exodus has challenged the state's response capacity and the inter-institutional, multi-stakeholder and inter-sectoral coordination mechanisms of shelters. The gaps between the services supply available and the demands / needs of the migrant population is evident: there is impossibility of responding to growing demands for attention at facilities that, in the context of COVID 19, have had to reduce their capacity, following the guidelines of the policies adopted in response to the health crisis in the country. The reductions in the original capacities of shelters require systematic leverage through protection actions, which strengthen support networks and multi-stakeholder articulations at the local and national level.

Improving the information conveyance and communication channels and the spaces for agreement becomes a priority for the humanitarian response. The data collected regarding the ways people learn about the existence of institutional shelters, leave two important lessons: the effectiveness of mechanisms of resilience and support generated within migrants' networks, including the communication and information conveyance channels that allow them to find safe refuge during their transit and stay in Ecuador; as well as **the absence of official institutions that convey information to people**, especially at border points and regular crossings to enter the country.

According to the results of the study, the role of the State in the resolution of public questions is imperative. 100% of the shelters' management states that only sporadic meetings with public officials occur, despite their role in supporting access to Education or Health. Until now, the State intervention in shelters has occurred by contingencies, such as the stark increase in migratory flows. Interviews with public officials reveal their capacities to face emerging situations through the regional coordination of the Ecuadorian Secretariat for Risk Management (governing body of shelters).

These capacities include provision of spaces, delivery of supplies for the night, and others related to emergency humanitarian assistance in disasters, which should be leveraged in the current conditions. **The competencies in Human Mobility issues of the Secretariat for Risk Management, the Ministry of Economic and Social Inclusion and the Foreign Ministry should go beyond controlling and supervising compliance with regulations in force. Consolidating joint action mechanisms is required to guarantee enjoyment of the fundamental rights enshrined in Ecuadorian law.**

The indifference of the State to resolve such a notorious and wide-ranging public issue, such as Venezuelan migration, merits a systematic effort to guarantee rights, such as **the right to request an immigration status; the right to be provided with information on immigration; the right to participation and social organization; the right to access justice under equal conditions; the right of children and adolescents to protection, health and education**. These are enshrined as fundamental rights of the migrant people by the Ecuadorian Constitution.

Additionally, the officials interviewed acknowledge the leading role of the third sector and the International Organizations in Ecuador, in response to the Venezuelan migration. They point out some of the main challenges faced in territories where there are unique circumstances, derived from the context. These challenges include the gap on shelters´ reception capacity, needs for increased supervision, training of staff, lack of protocols to ensure permanent attention of psychological, psychoeducational and GBV prevention.

Regarding the main subjects addressed in this study, we can affirm that:

1. In Health / Psychological Care / Sexual and Reproductive Health, the migrant population arrives at shelters with significant deterioration of their physical and emotional health. Therefore, emergency health care is required in the shelters to manage the most urgent needs of the migrant population. The pandemic has obstructed access to consultations and the provision of medicines to patients of severe or chronic illnesses. To address this situation, it is essential to **prepare basic health care spaces with full-time professionals, as well as providing supplies and drugs. Moreover, professionals such as psychologists and psychosocial specialists** would contribute to the consolidation of new projects and life plans that allow restructuring family and social dynamics.

2. In children and adolescents' Access to Education, it is evident that although coordination and communication with the Zonal Directorates of MINEDUC have facilitated access to the public school system, other factors significantly obstruct the enjoyment of this right for many C&A. Their arrival and stay times prevent them to access the academic term, since students who do not arrive for the opening of the school year are not admitted; if they do not have a medium or long-term place to stay or residence, they are not admitted. Other problems include non-access to technology and internet and the inability to purchase school supplies.

   These last three elements are considered crucial at the present time. Despite the temporary solutions generated to solve the occupational and educational demands of the school-age population, **strategies are required for the implementation of emergency education actions**, which include permanent presence of specialists in the subject, with adequate methodologies for the development of capacities, skills and competences, as well as the acquisition of inputs and means necessary to facilitate the teaching-educational process.

3. In protection services, it is necessary to strengthen and increase coordination and networks to provide timely responses to the protection needs and demands of people in human mobility, particularly unaccompanied C&A and survivors of GBV. The establishment of exit strategies and plans for shelter residents must generate sustainable mechanisms of cooperation between the institutions, to facilitate the support required by the population before, during and after their arrival, guaranteeing their right to legal assistance, to migration regularization, to psychological and psychosocial care and special protection services for C&A and survivors of GBV. It is important to mention that with the exception of *Casa Linda* - due to the type of population it hosts - **no other institution provides direct protection services**. Nonetheless, all the institutions carry out coordination, support and information conveyance actions for the referral of cases.

4. Monitoring, follow-up and evaluation of protection actions and their impact on the target population is necessary to assess the efficacy, effectiveness and sustainability of interventions aimed at priority groups. Humanitarian organizations can support rights protection by creating policies and good practices for monitoring and training, as well as for safe spaces within shelters. Regarding protection after stays in shelters, the **rental support is a definite boost** so that people can restructure their plans and life projects, while achieving socio-economic insertion; however, finishing dependence on protection support **depends on aspects such as regularization, documentation and accessing sustainable livelihoods**.

5. Food is a sensitive issue for shelters' guests, as well as for their personnel. Most of the institutions that provide this service have the support of the World Food Programme, with a few cases of self-management mechanisms. Sometimes critical junctures occur due to unplanned

migration flow increase. Despite the support of International Organizations, **it is necessary to diversify the food supply market** (products are only purchased in the AKI supermarket chain) for which acquisitions through local production chains could be feasible. **This would contribute to the revitalization of the local economy and would allow broadening the staple food**. On the other hand, three of the institutions that took part in the study do not provide this service or do so partially (one or two meals on indistinct days). In the current situation, the people residing in these shelters must generate income to purchase food, even without having any type of livelihoods, many of them beg in the streets to meet basic food needs.

6. Regarding Access to Water, Sanitation and Hygiene, all the shelters have these services, although the coverage of hygiene supplies and its stability is still distant; additionally, the sample evidences different situations. Despite the availability of facilities for these purposes, **the rehabilitation and maintenance of the hydro-sanitary infrastructure is necessary** to provide quality services to the population.

All shelters have developed plans, protocols and procedures for COVID-19 prevention that have been largely effective, considering there have been no massive contagion events inside the shelters. In this sense, **it is vital to enable quarantine spaces for new arrivals, or carrying out PCR tests prior to entering the shelters**. Coordination with the Health institutions and the Red Cross is important to ensure free "safe entry mechanisms", since migrant people cannot afford these tests.

7. **Vocational or technical training is futile if no actions are carried out, to contribute to people's social, economic and labor insertion**. All the shelters provide training on various themes that prioritize entrepreneurship and productive empowerment, development of technical and productive capacities, as well as trades. Despite this training and the enormous expectations created on the population, many cannot enter the labor market. Seed capital is a necessary, while linked to other services (loans system, for example) to create more opportunities.

The process of removing red tape in the access to this capital implies understanding that the majority of beneficiaries of these projects, do not have documents that allow regular access. Additionally, **the design of training plans and programs must follow the demands and needs of people, while avoiding the reinforcement of gender stereotypes.**

8. Finally, recreational spaces are a therapeutic and social cohesion tool, which allow strengthening community ties, self-confidence and establishing healthy relationship dynamics through culture, sports and participation.

All the shelters in the sample have spaces for sports and culture, but not all implement strategies to pursue regular practice among guests. Fundamentally, **having differentiated activities for C&A become a fundamental pillar for psychic development and greatly contribute to social skills, as well as intelligence and emotional stability**. A mechanism of resilience evidenced in the resident population is the making of artisan games and acquisition of means for recreation with their own resources. However, the shelters recognize that there is much to be done in this regard and demand the involvement of public (Ministries of Sports, Culture and Education) and international authorities (UNICEF, UNDP, UNESCO) to promote the collective recreational spaces, especially for C&A.

3.2. The shared dream

All shelters call for greater involvement and support from the State, as well as affirmative action towards migrants/refugees regarding their economic and social insertion in Ecuador. Addressing the issues of regularization, access to the labor market, the reduction of xenophobia and stigmatizing messages in the media and public spaces are crucial. The shelters have strengths and good practices learned over the years. In this sense, all shelters consulted would like to strengthen local networks and articulations, make the social function of the shelters visible and undertake massive community awareness actions. The relationship with the host communities has been so tense, that the only way to overcome these situations relies on recognition, mutual respect and social and political advocacy.

The application of quality standards is also a shared dream, as well as the increase in services and benefits that assure comfort and habitability through friendly spaces. Each shelter would like to undertake its guests' entrepreneurial project (bakeries, pastry shops, artisanal elaboration of products, multi-service centers) which would become the first window for their economic emancipation and for their integration into the institutional management model.

4. Recommendations

4.1. NGOs, Humanitarian Assistance Organizations and International Organizations

- Accompany the design and implementation of protocols for emergency Healthcare, Education and Psychology attention in the shelters.

- Provide tailored support (based on request) including access to psychological and psychosocial support, to restructure life plans and address the demands for special protection of C&A and survivors of GBV.

- Guarantee access to medicines for patients with chronic and degenerative diseases, as well as equipment, supplies and other resources for people with disabilities.

- Warrant access to educational supplies and material, as well as supporting connectivity and access to technologies for children and adolescents in the public education system.

- Extend food projects to all shelters. Provide foods for specific nutritional needs (pregnant women, sick people, children and adolescents, etc.)

- Promote the diversification of suppliers for the acquisition of food, prioritizing other vendors, mainly local suppliers, small and medium-sized producers, to contribute to the revitalization of the local economy.

- Design and execute projects to support Urban and Family Agriculture in shelters, through the promotion of orchards, plots, breeding sheds and other spaces such as hydroponics, cultivation houses, etc. for self-consumption and therapeutic rehabilitation.

- Design and implement participatory projects to address social problems faced by migrant people, including xenophobia, violence and GBV; work hand in hand with the migrant population to achieve tangible solutions.

- Considering that more than 60% of shelters' residents are men, and the cases of violence reported by the shelters' administration mostly occurred among these, it is recommended that programs aimed at beneficiaries on gender issues focus not only on preventing GBV towards women, but also towards men, focusing on masculinities, archetypes and violent behaviors. These matters are currently absent from the training activities carried out in the shelters.

- Contribute to the sustained and regular allocation of WASH supplies, as well as to the preventive maintenance of shelter facilities.

- Support the modernization of the information management system of shelters, to control residents and monitor their subsequent situation.

- Support for the formation of networks and linkages at the local, national and regional level.

- Contribute to systematize and making visible good practices and quality standards.

- Design training plans based on assessment of people's needs and the demands of the local productive sectors. Support the implementation of initiatives with seed capital, as well as mechanisms for monitoring, follow-up and evaluation of the impacts of trainings.

- Cut red tape to access humanitarian assistance, providing rapid response to shelters' requests for support.

- Support intra and inter institutional coordination and timely access to COVID19 tests, as well as safe spaces for quarantine inside shelters and temporary accommodations.

4.2. Local Organizations and Accommodation Agents

- Promote coordination and agreement spaces among local multi-stakeholder.

- Promote timely communication, conveyance of information and referral of cases.

- Promote local joint action for the design of comprehensive programs and projects with a sustainability approach.

- Carry out actions to promote cooperation and exchange activities between the migrant population and host communities. (Community unpaid joint work or "Minga", cultural activities, awareness-raising campaigns, joint training, shelter-community joint advocacy plans aimed at local authorities).

- Design programs and projects that allow the provision of a basic ground of comprehensive services in shelters.

- Train shelter staff in conflict management, leadership, emotional intelligence, communication, proper treatment, prevention of GBV and norms of coexistence, as well as migration issues.

- Promote strategic planning processes and institutional management models aimed at adopting international protocols and standards for assistance to migrant people.

4.3. Public authorities and decision makers

- Increase involvement of public authorities on matters and problems faced by shelters.

- Take a more active role in guaranteeing enjoyment of basic rights, including health, work, education and a life free from violence.

- Issue clear public policy guidelines based on affirmative action in favor of the economic and social integration of the migrant population.

- Generate incentives to increase the employability of migrant people; warrant access to dignified employments and social benefits based on the contributions to social security.

- Promote a culture of support, surveillance and control for shelters.

- Mobilize resources at the local level (provision of shelter and basic goods) for emergent situations such as increase of migration flows.

- Carry out awareness-raising actions aimed at state institutions and public and private media. This includes censorship of messages that denigrate or stigmatize the migrant persons, and instead highlight their contribution to Society.

- Strengthen and reinforce early prevention and response systems for human trafficking and smuggling of migrants.

ANNEX:

Plan to minimize the gaps between the shelters' services supply regarding access to fundamental rights vs the demand of migrant people, especially children and adolescents, women survivors of GBV and LGBTIQ+ people.

Specific objectives

I. Strengthen networks, associations and synergies that enable multi-stakeholder and inter-sectoral coordination for humanitarian response, with active participation of the State and Public Administration Bodies.

II. Develop the infrastructural, technical and managerial capacities of shelters and other temporary accommodation buildings.

III. Develop multi- stakeholder and multi-level actions aimed at raising awareness on xenophobia and discrimination towards migrants, as well as their rights and potential contribution to Society.

SWOT analysis

STRENGTHS	WEAKNESSES
A. Experience and good practices gathered over the years by shelters. B. Committed, trained and sensitized personnel, dedicated to the population they serve. C. Cooperation with a network of partner organizations that provide resources, training, assistance and protection to the beneficiaries. D. Infrastructure, supplies and equipment available to provide basic habitability conditions. E. Disciplinary procedures to prevent and address violence (particularly GBV) within shelters. F. Biosafety measures and supplies for COVID-19 prevention. G. Communication with local public institutions. (MINEDUC, MoH, Police, Ombudsman).	A. Insufficient infrastructure and resources to meet the demands of migrant people. B. Poor coordination with other local shelters to facilitate joint action and referral of cases. C. Absence of full-time specialized professionals to provide emergency health and education assistance. D. Unavailability of sufficient specialized personnel for protection issues (psychologists, psycho-educators and social workers) E. Nonexistence of protocols and quality standards to assess the services provided by shelters. F. Absence of exit strategies that allow joint action with other organizations aimed at the socio-economic integration of migrants and refugees. G. Nonexistence of an institutional management model and mechanisms that contribute to self-sustainability.
OPPORTUNITIES	THREATS
A. NGOs and International Organizations committed to supporting the shelters collectively. B. Existence of support, assistance and protection programs and projects for residents of temporary accommodation. C. Creation of shelters specialized on children and adolescents, GBV and human trafficking survivors. D. Recognition of the shelters by public entities and other actors that approach people and families living on the street by referring them to, or directly contacting the shelter, so people in vulnerability have access to temporary accommodation. E. Quick response from ECU911 when emergency protocols on health and safety are triggered within shelters. F. Good infrastructure and access to basic services in the communities (paved streets, labor market, hospitals and / or health centers, food supply markets, etc.)	A. Xenophobia, discrimination and strained relations with host communities. B. Inexistent coordination with governing bodies on local management, shelter, humanitarian work and human mobility (local governments, MIES, Foreign Relations Ministry, Secretariat for Risk Management, etc.) C. Negative preconceptions of migrants and refugees, systematically entrenched by mass media. D. Border closure and militarization. E. Welfare approach in projects and programs promoted by International Cooperation. F. Inadequate monitoring and follow-up mechanisms regarding the conditions and life projects of migrant people. G. Absence of clear public policy guidelines for the socio-economic integration of the migrant population. H. Excessive focus to provide attention, assistance and protection to some population groups, while neglecting others (i.e. unaccompanied young people).

Actor Mapping

Allies		Undecided
- International Organization for Migration - UNHCR - World Food Programme - ADRA - CARE - Alas de Colibrí Foundation - Norwegian Refugee Council - Jesuit Refugee Service - Caritas Internationalis - HIAS - COOPI - Lunita Lunera Foundation - Nuestros Jóvenes Foundation - Brothers Hospitallers of Saint John of God - Misión Scalabriniana - GIZ - Red Cross - Global Network of Women's Shelters - PAHO / WHO - UNICEF		- Provincial Governments - Secretariat for Risk Management - Ministry of Economic and Social Inclusion - Chancellery - Business and artisan associations
Sympathizers		**Detractors**
- Cantonal Governments - Ministry of Education - Ministry of Health - National Service for Risk and Emergency Management (SNGRE)		- Media (Misinformed) Host communities

General problem structure, causes and strategies

Problem	Causes	Strategies	Key Actors / Responsible Parties
Gap between the demand of migrant people (particularly children and adolescents, women survivors of GBV, and gender-diverse people) and supply of the shelter services available in the country.	1. Weak networks and associations providing support, assistance and protection to people in human mobility.	1.1 Systematization of Good Practices within alliances to provide support, assistance and protection to migrant people (particularly for priority attention groups) in different parts of the country.	NGOs, International Organizations, local governments, shelters and other temporary accommodation buildings.
		1.2 Give more space for discussion to the problems faced by shelters in The Refugee and Migrant Working Group's roundtables, as well as discussions with the state.	Partners in The Refugee and Migrant Working Group's Roundtables.
	2. Insufficient capacities (human and financial) to satisfy demands regarding enjoyment of rights, as well as self-sustainability mechanisms of the services provided by shelters.	2.1 Strengthening human and infrastructure capacities in temporary shelters.	NGOs, International Organizations, State Bodies and Organizations.
	3. Limited State intervention to address the problems faced by people in human mobility, particularly for priority attention groups.	3.1 Generation of accountability and social control mechanisms (advocacy).	NGOs, International Organizations, State Bodies and Organizations, Local Governments.
	4. Xenophobia and discrimination.	4.1 Design and implement a multidimensional awareness-raising campaign to reduce xenophobia and discrimination against migrants and refugees in Ecuador, and promote their rights and contributions to the development of society.	NGOs, International Organizations, State Bodies and Organizations, Local Governments.
		4.2 Regulation of content and messages aired in mass media.	Media, Council for the Regulation, Development and Promotion of Information and Communication, National Federation of Journalists of Ecuador (FENAPE), Ombudsman's Office, Fundamedios.

Strategies for addressing the Problem, Activities and Results

Strategy	Activities	Results	Time	Resources	Responsible Parties
1.1 Systematization of Good Practices within alliances to provide support, assistance and protection to migrant people (particularly for priority attention groups) in different parts of the country.	1.1.1 Carry out a study to identify Successful Experiences and Good Practices regarding provision of protection services, local articulation, positive relationships with host communities and self-sustainability of shelters.	Publication and popularisation of the results of the study on Successful Experiences and Good Practices, to promote its replication and extension through context-appropriate methodological instruments.	Short Term	Professional consulting for the participatory construction of Good Practices.	NGOs and International Organizations.
1.2 Give more space for discussion to the problems faced by shelters in The Refugee and Migrant Working Group's roundtables.	1.2.1 Assessment of shelter provision, to design programs and projects that enable shelters for the provision of appropriate and quality services.	The problems faced by the institutionality of shelters in the country are made visible. Programs and projects for institutional strengthening are designed.	Short / Medium Term	Workshops with key actors / Financing for the execution of programs and projects.	Key partners in the Water, Sanitation and Hygiene, Temporary accommodation, Health and Nutrition, Education, Livelihoods and Protection sectors. The Refugee and Migrant Working Group (GTRM)

Water, Sanitation and Hygiene (WASH)					
	Water, Sanitation and Hygiene (WASH)				
1 Strengthening human and infrastructural capacity of shelters.	2.1.1 Stable allocation of supplies based on generational and gender needs (personal hygiene kits)	Supply of personal hygiene kits to beneficiary residents of shelters and other temporary accommodation buildings is constant.	Short Term	Personal hygiene supplies and kits	Key Partners in the Water and Sanitation and Non-Food Products sector. GTRM
	2.1.2 Preventive Maintenance and upgrading of hydro sanitary facilities and restoration of hot water in showers (*Sierra* Region)	Rehabilitated water supply systems, leakage reduction, renewed facilities that are currently in poor condition, hot water in the shelters of the Ecuadorian Sierra (showers, sinks)	Short Term	Construction Supplies and Expenditures	Main partners in the Temporary Accommodation and Water and Sanitation sectors. GTRM.
	2.1.3 Enabling safe drinking water facilities.	Increased supply capacity of safe drinking water.	Short Term	Purchase of bottled water dispensers and / or portable water purifiers.	Main partners in the Temporary Accommodation and Water and Sanitation sectors. GTRM.

Nutrition				
2.1.4 Promote the implementation of free and quality food programs and projects throughout shelters.	Free and quality food services in shelters and other temporary accommodation venues implemented.	Short / Medium Term	Delivery of vouchers to purchase food, enabling of kitchens and dining rooms, purchase of kitchen supplies (tables, chairs, cutlery, etc.)	Main partners in the Health and Nutrition and Food Security sectors. GTRM.
2.1.5 Promote provision of differentiated diets for Priority Attention Groups (pregnant and breastfeeding women, children and adolescents, elderly, people with various pathologies that require special regimes)	Differentiated diets are provided to beneficiaries based on their nutritional demands.	Immediate	Preparation of nutritional requirements for people with differentiated needs.	Main partners in the Health and Nutrition and Food Security sectors. GTRM. MoH
2.1.6 Promote the diversification of the supply market of food products.	Expanded supply market of food products, which favour the reactivation of the local economy and agriculture.	Medium / Long Term	Agreements with local producers and local entrepreneurs and artisans' associations.	Main partners in the Health and Nutrition and Food Security sectors. GTRM

Health and Sexual and Reproductive Health Assistance				
2.1.7 Enable emergency primary health services in shelters and other temporary accommodation venues.	Emergency primary health services are available in shelters and other temporary accommodation buildings.	Medium / Long Term	- Full-time staff specialized in Comprehensive Internal Medicine in shelters. - Provision of broad-spectrum drugs, supplies and basic equipment to enable health services.	Key partners in the Health and Nutrition sector. GTRM. MoH.
2.1.8 Guarantee permanent access to medicines for patients of chronic and/or with catastrophic illnesses.	Permanent access to medicines for patients of chronic and/or with catastrophic illnesses is guaranteed	Immediate	- Delivery of vouchers for medications, supplies, and medical examinations, with a prescription or diagnosis made by MoH authorities.	Key partners in the Health and Nutrition sector. GTRM. MoH
2.1.9 Guarantee access to Public Health for pre and post-natal care for pregnant and breastfeeding women, and for children aged 0-3 (settling or in transit)	Follow-up mechanisms for pre and post-natal care for pregnant and breastfeeding women, and for children aged 0-3 (settling or in transit) implemented.	Immediate	Provision of comprehensive health care.	Key partners in the Health and Nutrition sector. GTRM. MoH
2.2.1 Carry out awareness-raising campaigns and deliver Sexual and Reproductive Health supplies.	People's sexual and reproductive rights are realized in shelters. Campaigns to provide contraception and family planning supplies are carried out regularly.	Immediate	Distribution of informational banners, condoms, lubricants, morning after pill.	Key partners in the Health and Nutrition sector. GTRM. MoH
2.2.2 Provide STI and HIV detection tests	Regular informational and screening campaigns for the prevention and detection of STIs and HIV.	Immediate	Purchase of detection tests; procedures are carried out in suitable spaces. Beneficiaries are provided vouchers to access these services.	Key partners in the Health and Nutrition, and Protection sectors. GTRM. MoH
2.2.3 Carry out cytology campaigns for the prevention and detection of cervical cancer for women over 21.	Cytology campaigns for the prevention and detection of cervical cancer for women over 21 are carried out recurrently.	Immediate	Purchase of detection tests; procedures are carried out in suitable spaces. Beneficiaries are provided vouchers to access these services.	Key partners in the Health and Nutrition and Protection sectors. GTRM. MoH
2.2.4 Guarantee free access to PCR tests for COVID-19; progressively reach the migrant population.	Shelters are able to receive new beneficiaries, while providing security guarantees to the rest of residents. People in human mobility access massive vaccination campaigns in the country.	Short / Medium Term	Procurement of PCR tests or antigens tests through vouchers to make them available to shelters. Propose the Government to carry out COVID-19 vaccination campaigns inside of shelters.	Key partners in the Health and Nutrition and Protection sectors. GTRM. MoH

Education				
2.2.5 Enable emergency education services in short-stay shelters that cater to families with children and adolescents.	Emergency education services and occupational education activities are provided in short-stay shelters that cater to families with children and adolescents.	Immediate	Hire personnel specialized in education, procurement of supplies for homework and other teaching materials. Enabling teaching space (chairs, tables, desks, blackboard, etc.)	Key Partners in the Education, Protection and Non-Food Items sectors. MINEDUC.
2.2.6 Promote access of children and adolescents in the public education system to technologies and connectivity, as well as school supplies and teaching materials.	Mechanisms for Children and adolescents in the public education system to access technologies and connectivity, as well as school supplies and teaching materials are created or expanded.	Short term	Installation of Wi-Fi networks where currently there is no connectivity. Development of plans to improve connectivity. Improvement of infrastructure, including computers and tablets. Support for the purchase of teaching materials and school supplies.	Key Partners in the Education, Protection, Temporary Accommodation and Non-Food Items sectors. GTRM. MINEDUC.
2.2.7 Promote the allocation of scholarships for the continuity in education (technical and higher) of young high school graduates (NEET)	Support mechanisms for the continuity in education (technical and higher) for young high school graduates exist, including scholarships and government support programs.	Medium Term	Allocation of scholarships for the continuity in education.	Key Partners in the Education and Protection sectors. GTRM. MINEDUC, SENESCYT, other key actors of international cooperation.

Access to decent employment and livelihoods				
2.2.8 Promote guidelines on labour issues, including an affirmative action approach and incentives to increase employability	Increased employment of migrants / refugees in Ecuador.	Medium Term	Incentives to business and artisan associations to grant decent jobs to migrants and refugees in the country.	Key partners in the Livelihoods, Integration and Protection sectors. GTRM. Foreign Ministry, Ministry of Labour, ILO, IOM, Business and Craftsmen Associations in Ecuador.
2.2.9 Design trainings based on the needs of each context, while avoiding reinforcement of gender roles stereotypes, GBV and masculinities.	Design of training plans based on the local employment market and the skills and competencies of the beneficiaries.	Short Term	Market Studies and Diagnostics of Training Needs.	Key partners in the Livelihoods sector. GTRM. Other NGOs of International Cooperation that carry out trainings on livelihoods.
2.2.10 Cut red tape to access seed capital for business ventures.	Increased number of entrepreneurship projects in execution.	Immediate	Seed Capital	Key partners in the Livelihoods sector. GTRM. ONGs de la International Cooperation that grant seed capital for the business ventures.
2.2.11 Litheness of conditions for migratory regularization.	Improved conditions to access the job market and for the socio-economic insertion of migrants.	Short / Medium Term	Law Modification Processes	Foreign Relations Ministry

		Protection				
	2.2.12 Promote best-proven practices and training plans for the protection of the rights of women, children, and LGBTIQ+ people in safe spaces.	Training plans for shelter administrators on GBV protocols and attention routes are designed and implemented.	Immedi-ate	Situational Studies, compilation of good practices and Diagnostics of Training Needs. Multidisciplinary technical teams. Access to special protection services.	Local Authorities (Protection Boards), NGOs and other international cooperation actors.
	2.2.13 Raising awareness on types of GBV and protection routes for the migrant and refugee population, particularly for women, the LGBTIQ+ population and children and adolescents.	Informed migrant and refugee population, particularly women and LGBTIQ+ individuals on types of GBV and protection routes.	Immedi-ate	Awareness raising plans. Protection routes of the MoH and the Secretariat for Human Rights. Material to raise visibility.	Local Authorities (Protection Boards), NGOs and other international co-operation actors. Global Network of Women's Shelter. MoH, Secretariat for Human Rights. Shelter managers.
	2.2.14 Carry out workshops on masculinity for migrant and refugee men, to deconstruct hegemonic masculinity and patterns that maintain GBV.	Migrant and refugee men sensitized on hegemonic masculinities and archetypes. Alliances for GBV prevention.	Immedi-ate	Multidisciplinary technical teams. Trainers. - Outreach materials and other means of popularization.	Local Authorities (Protection Boards), NGOs and other international cooperation actors.
	2.2.15 Accompany the design and update of attention protocols for cases of GBV in temporary accommodation buildings, in accordance with existing regulations (MoH technical standard, 2018 Law for the prevention and eradication of violence against women)	All shelters implement attention protocols for cases of GBV in accordance with existing regulations.	Short Term	Advice, protocols and current guides, Training.	Local Authorities (Protection Boards), NGOs and other international cooperation actors. MoH, Secretariat for Human Rights
3.1 Creation of accountability and social control mechanisms.	3.1.1 Generation of citizen Observatories at the territorial level, to establish monitoring and social control mechanisms regarding compliance with the rights of migrant people (especially Priority Attention Groups; survivors of GBV, children and adolescents, gender-diverse individuals)	Citizen Observatories created for surveillance and social control of compliance with the rights of migrant people.	Long Term	Design of open access platforms, resources and data.	Local governments, MIES, MoH, MINEDUC, INIEC, International organizations.

4.1 Design and implementation of a multidimensional awareness raising campaign (institutions providing services and host communities) to reduce xenophobia and discrimination against migrants and refugees in Ecuador and promote their rights and contributions to Society.	4.1.1 Carry out campaigns against xenophobia in schools, to favour the rights of migrant children and adolescents.	Minimized occurrence of xenophobia and discrimination in schools.	Immediate	Ads, commercials, Life Stories in public spaces and media.	MINEDUC, NGOs and other international cooperation actors.
	4.1.2 Carry out campaigns against xenophobia and favour migrant peoples' right to access healthcare.	Minimized occurrence of xenophobia and discrimination in Health care centres.	Immediate	Ads, commercials, Life Stories in public spaces and media	MoH, NGOs and other international cooperation actors.
	4.1.3 Engage local cultural and sports actors to carry out joint activities between the host and migrant communities.	Stronger mechanisms of social cohesion through culture and sports, which reduce tensions between host and migrant communities.	Short Term	Annual Activity Plan in each Territory.	Sports Secretariat, Ministry of Culture, UNESCO, Local governments.
4.2 Regulation of content and messages in mass media.	4.2.1 Establish control and regulation mechanisms for media content that denigrate and affect social perceptions of the migrant population.	Clear policy guidelines regarding content that addresses the perceptions of the migrant population are established.	Short Term	Design of policy guidelines for content related to the perception of the migrant population, both in local and national media. (Municipal and Provincial Ordinances)	Council for the Regulation, Development and Promotion of Information and Communication, FENAPE, Fundamedios.

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