

# MIXED MIGRATORY FLOWS AND HEALTH CONDITIONS IN NECOCLÍ, ANTIOQUIA – COLOMBIA

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**Migration in the Americas Project** is a policy and research collective of the **University of Wisconsin-Madison** focused on assessing migration policy and developing ways to reduce risk and harm to make movement and residence safer for migrants throughout the Western Hemisphere.



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# HEALTH AND MIGRATION IN NECOCLÍ

The migration through the Darien Gap, particularly the transit through the municipality of Necoclí, has created a complex situation regarding health conditions and has heightened vulnerability for both migrants and local residents.



The insufficient infrastructure of sewage and other public services, and the basic capacities of the local hospital to serve residents, is aggravated by the exponential increase in people moving through the area which, according to the figures, in some cases is almost double the total population in the region. That, added to the settlement of people on the beach in Necoclí, leads to the inadequate disposal of solid waste and excreta, increasing the risk of clinical conditions that require medical attention.

In terms of mental health, 80% of migrants in transit presented symptoms related to mental health, defining fear, anxiety, and uncertainty as the main symptoms (R4V GIFMM, 2023).

Psychoactive substance abuse and schizophrenia are also common. There are also challenges in sexual and reproductive health, maternal mortality, and access to treatment for people with chronic diseases. In terms of infectious and vector-borne diseases, between 2021 and 2023, the National Public Health Surveillance System (SIVIGILA) reported 5,825 cases of malaria, 3,763 cases of dengue, 2,334 cases of tuberculosis, and 39,595 cases of HIV. The most common symptoms of consultation by migrants and refugees through emergency care are fever, abdominal pains, headaches, and nausea (R4V GIFMM, 2023).

At the municipal level, in 2022, Necoclí reported 22 events of mandatory notification to SIVIGILA in the migrant population, an alert which is produced when there is known presence of an infectious disease. Specifically, malaria (32%), gestational syphilis (9%), chickenpox (5%), HIV/AIDS (5%), leptospirosis (5%) and acute respiratory infection by new viruses (4%) were the communicable diseases reported (Rangel, 2023).

No less important is children's health. Children comprise a significant percentage of the population on the move. According to data from the Joint Needs Assessment carried out at the national level, 80 children between the ages of zero and five have not received any vaccine. Coupling lack of access to vaccines with the overcrowding and precarious sanitary conditions, puts at risk not only the health of migrant children but also of the population in general.

It is worth noting that the movement of people does not alone represent a public health risk. Yet, given the inadequate infrastructure in the region, situations of health risk increase for all people in the region with the increased human migration.

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# A PHOTOGRAPH OF A BIODIVERSITY TREASURE TURNED INTO HELL

The Darien Isthmus is a verdant region characterized by its rich biodiversity and has long been home to indigenous communities whose customs, practices, and languages contribute significantly to the environment. Covering an expanse of 17,014 square kilometers, the Darien jungle stands as one of the largest forests in Central America (Green Climate Fund, 2024). Its tropical rainforest ecosystem hosts unique animal species, including various reptiles, amphibians, mammals, and birds, alongside countless plant species. Additionally, the area possesses notable archaeological and historical significance as one of the earliest settlements established during the Spanish colonization.

In recent years, the area has garnered attention not solely for its ecological and cultural wealth but rather due to harrowing images depicting hundreds of individuals traversing its borders as a last resort on their journey northward across the American continent, which typically spans five days and covers 112 kilometers (Walsh et al., n.d.). Consequently, many portray the jungle as a perilous and intimidating environment, primarily due to its severe climatic conditions, lack of infrastructure, the presence of armed groups, and the burgeoning illegal economy linked to the irregular transit of migrants seeking to cross the border between Colombia and Panama. In 2023, it is estimated that over 500,000 individuals crossed the Darien. However, there is no definitive data on the mortality rate along this route, as the challenging terrain complicates the recovery of bodies. One report indicated that 138 individuals perished, including nine children and eight adolescents (Lucio et al., 2023). Meanwhile, the Missing Migrant Project (2023) identified 48 migrants as missing or deceased. Both sources imply significant underreporting of the actual mortality rate.

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One of the temporary transit sites for individuals traversing the Darien is the municipality of Necoclí, situated 382 kilometers from Medellín in the Urabá region of the Antioquia department, Colombia.

The Unsatisfied Basic Needs Index (UBNI) serves as a metric for identifying structural poverty groups, providing an alternative perspective to merely assessing poverty through insufficient income. In Necoclí, the UBNI stands at 57.43, indicating that over half of the population lacks access to essential needs. Notably, the coverage of public services, particularly in aqueduct and sewage systems, is inadequate. This deficiency results in improper treatment of wastewater, significantly affecting the migrant population residing along the beach, who often have limited or no access to sanitation facilities. Consequently, many are compelled to relieve themselves in public spaces, such as on the beach.

#### Information on Necoclí:

- 1,361 square kilometers
- 44,118 inhabitants
- 73% of population is in rural areas
- 27% of population is in urban areas
  
- 48% of population is Afro-Colombian
  - The origins of the Afro-descendant population (1) connects to the time of slavery (17th century) and (2) internal migratory processes from the departments of Choco and Cauca in the 20th century

The primary economic activities of the municipality revolve around agriculture, notably the cultivation of bananas, coconuts, rice, corn, and various fruits. Additionally, cattle ranching in Cebu, along with milk and cheese production, plays a vital role in supporting the local community. Tourism also serves as a significant source of income, particularly due to the municipality's extensive 95 kilometers of coastline. Furthermore, fishing, mining, and timber exploitation contribute to the area's economic landscape.

Necoclí is designated as a PDET (Development Programs with a Territorial Focus established by the Havana Peace Accords) municipality in Colombia, indicating it is a region significantly impacted by violence, poverty, illicit economies, and institutional fragility. According to the Victims Unit, between 1984 and 2017, the municipality recorded a cumulative total of 47,093 displaced persons expelled and 22,370 displaced individuals received (National Planning Department of Colombia, 2020). In terms of living conditions, health coverage in subsidized healthcare services was reported at 88% in 2020, and vaccination coverage for children under one year of age stood at 87% in 2016. This suggests that residents have access to the public healthcare system with minimal or no out-of-pocket costs, and vaccination rates for children are commendably high.

The flow of migrants through Necoclí towards the Darien region has fluctuated considerably over the past four years. Prior to 2020, approximately 30,000 migrants traversed the municipality annually. However, due to the pandemic and subsequent border closures, the latter half of 2021 saw the number of individuals stranded in the municipality peak at 22,000, nearly doubling the urban area's population (Secretaría de Salud de Necoclí, n.d.).

Regarding healthcare infrastructure, the municipality is served by the San Sebastián de Urabá Public Hospital, which not only provides essential emergency services but also offers prenatal care to support healthy deliveries for expectant mothers. Non-emergency services are accessible through the health system, with insurance coverage for the migrant population reported at 55.5% via the PEP (Special Protection Permit) and the PTP (Temporary Protection Permit), both of which are exclusively available to Venezuelans (Government of Antioquia, 2023).

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In addition to local initiatives, international agencies operating within the municipality, such as the Colombian Red Cross, the International Organization for Migration (IOM), and HIAS, have established mobile centers offering outpatient care, rapid diagnostics, laboratory sampling, and basic dental services. It is important to emphasize that migrants with regular status and formal employment enjoy full access to the healthcare system, whereas undocumented migrants are limited to urgent care services. Conversely, migrants in transit primarily rely on humanitarian agencies for their healthcare needs.

**There are many barriers to effective access to health services, the main ones being:**

- the inability to access insurance (40%)
- inability to pay for services and medicines (24%)
- lack of access to transport (11 %)
- unavailability of services (11 %)

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# HEALTH AS A RIGHT AND RESPONSIBILITY OF ALL

Given the significant interaction between humans and nature during this transit, as well as during the temporary stay in the municipality of Necoclí, it is essential to adopt an approach that integrates the understanding of human, environmental, and animal health. This is crucial for addressing the complexities of human migration through the Darien region.

To this end, pursuing comprehensive solutions to meet the basic sanitation needs of the population will undoubtedly enhance conditions for migrants in the municipality. Furthermore, it is imperative to establish coordinated and collaborative efforts among agencies, government entities, and non-governmental organizations (NGOs) to optimize resources, facilitate access to data, and improve service efficiency.

Indeed, one of the primary recommendations from agencies operating in the area is to foster coordinated efforts that enable access to unified, structured, reliable, and timely information. A recent report by the International Organization for Migration (IOM) highlights that one of the significant challenges in improving health outcomes in the Darien is the management of migratory health data, which is currently fragmented and hindered by access barriers. Consequently, one proposal that warrants discussion and implementation advocates for enhanced and more cohesive information sharing among organizations addressing health issues within the territory (Situational Report on Migration and Health Data in the Darien, 2023).



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With regard to other barriers to healthcare access within the territory, empirical observations reveal that some migrants experience apprehension concerning the presence of law enforcement near healthcare facilities. This fear acts as a deterrent to seeking medical services, as individuals worry about being questioned about their immigration status. Consequently, the migrant population often refrains from approaching health facilities or service points. Therefore, health campaigns aimed at disseminating information about available services must reassure individuals that they will not face legal repercussions or moral judgment for seeking care.

Additionally, tailoring health campaigns to the socio-cultural characteristics of the transient population, particularly in terms of promotion and prevention, is essential for effectively communicating risks, rights, and healthcare options available to migrants. Initiatives aimed at promoting preventive measures against infectious and communicable diseases—such as self-care education, vaccination programs for children and pregnant women, and access to diagnostic services—could significantly enhance existing health communication efforts.

Lastly, ensuring non-discrimination of the migrant population in healthcare settings is crucial. It is imperative to avoid stigmatization based on health conditions, nationality, vulnerability, or access to information regarding their rights and safe mobility channels. Addressing these issues is fundamental to mitigating mental health challenges within this population.

# MANAGEMENT, COOPERATION, AND SELF-CARE

International agreements guarantee free mobility as a human right; therefore, such mobility should be fair and healthy. However, the reality of people's daily lives in transit shows that the lack of access to health and information about their right to access health systems increases migrants' vulnerability. An approach to this situation from the perspective of global health, provides an interesting framework to approach the context of the migrants in transit, especially in places like Necoclí, due to the necessity to solve issues such as equity in health; infectious diseases; social, economic, and cultural equity; access to safe drinking water, food, among others.

From this point of view, health in migration contexts is a challenge for everyone. In other words, access to health care for migrants in transit is the responsibility of the Colombian state in the specific case of Necoclí, but it is evident that, due to the characteristics and limitations of the available infrastructure, the inputs for the delivery of services, the human talent available, among other factors, it makes the participation of non-governmental organizations and multilateral agencies indispensable.

Although Colombia has a legal framework that guarantees human rights, a universal health system, and a political constitution that guarantees the right to equality for all people who inhabit its territory, the material conditions in crisis situations such as the one in Necoclí make it difficult for migrants and even locals to access and exercise their rights.

That is why the offer of multilateral agencies such as United Nations agencies and non-governmental organizations has become an essential component for people on the move to access health care. According to recent data, 24% of travel groups that have accessed health services have done so through one of these organizations (R4V GIFMM, 2023). Likewise, it is important to recognize that part of the responsibility is also on the people themselves. Self-care and prevention, to the extent that circumstances allow, through individual actions such as personal hygiene, going to the clinic early, accessing infant and childcare, vaccinations, avoiding the consumption of psychoactive substances, accessing mental health care support resources, among others, are self-management measures that would contribute to improving health conditions.

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# A TASK IN A CONTINUOUS PROCESS

In conclusion, health is recognized as a fundamental right in Colombia; however, its effective realization for both local residents and migrants is constrained by the complex challenges associated with mobility, particularly through the Darien and within the municipality of Necoclí.

An interdisciplinary approach is crucial for addressing the current health challenges. This necessitates a focus that extends beyond primary care, which is undoubtedly essential, to include structural solutions that benefit both the host community and migrants.

Human migration is a natural phenomenon, and with it comes a diverse array of health needs. It is imperative to acknowledge that migration can expose individuals to conditions that significantly and adversely affect their health. Therefore, collaborative efforts are vital, recognizing our shared responsibility in this process—whether as individuals, members of civil society, non-governmental organizations, or government entities. Migration should be viewed as a phenomenon rather than a problem, and we must unite our efforts to ensure that those compelled to migrate due to violence or adverse socio-economic conditions in their home regions are afforded the fundamental guarantees necessary for the protection of their human rights.

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