

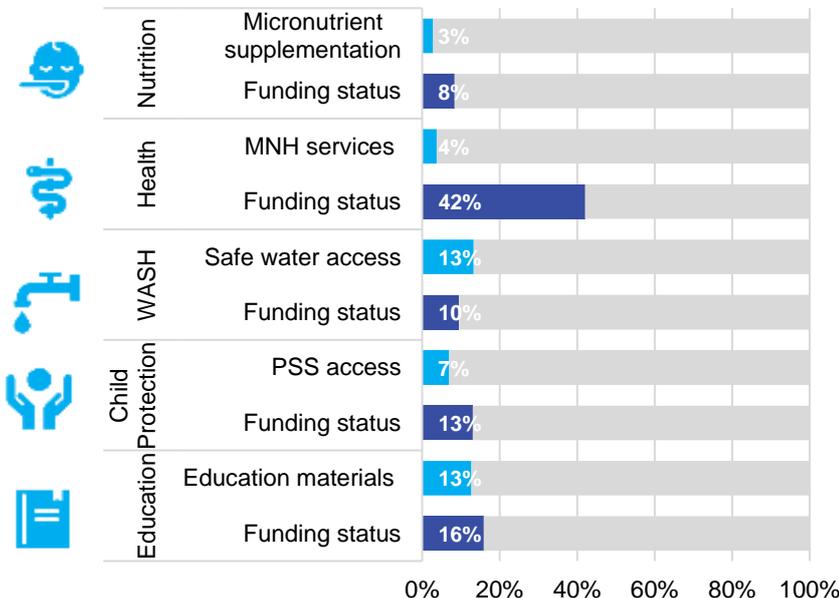


© UNICEF/UN0384255/Cañas. Children and UNICEF staff play with the recreational kits delivered by UNICEF during an activity in El Paraiso, Caracas. UNICEF supports a community approach for comprehensive care for children and adolescents in vulnerable situations.

Reporting Period: 1-28 February 2021

Highlights

- During February, UNICEF and PAHO led the coordination of the National Technical Group (*Mesa Técnica Nacional* - MTN), to support the drafting of the national vaccination development plan, the resource mobilization strategy and to increase COVID-19 vaccine availability in a shorter time through the COVAX mechanism.
- Preventive and curative nutritional services were provided to 10,392 children (5,393 girls and 4,999 boys), including 341 indigenous and 14 children with disabilities. In addition, 2,395 pregnant and lactating women (1,312 pregnant and 1,083 lactating, including 749 adolescents), received nutritional services.
- In Bolívar state, UNICEF finished rehabilitation works in Angostura's water treatment plant, providing safe water to 103,800 people (16,432 girls, 16,255 boys, 36,538 women, 34,576 men). Additionally, UNICEF also improved resilience in the Pemón indigenous community of Itopoykon by drilling a deep borehole and installing a 95m³ water storage tank, benefitting approximately 1,750 persons (277 girls, 274 boys, 616 women, 583 men).
- During February, the school feeding programme benefited 47,235 children (23,758 girls and 23,477 boys) in the states of Amazonas, Apure, Bolívar, Mérida, Miranda, Táchira and Zulia through the delivery of food bags to students, and in some educational centres in the state of Miranda, through take-home hot meals prepared and distributed daily to children and adolescents.



UNICEF VENEZUELA

Situation Report February 2021



Situation in Numbers



3,200,000 children in need of humanitarian assistance (OCHA, 2020 HRP, July 2020) *
* Will be updated with 2021 HRP

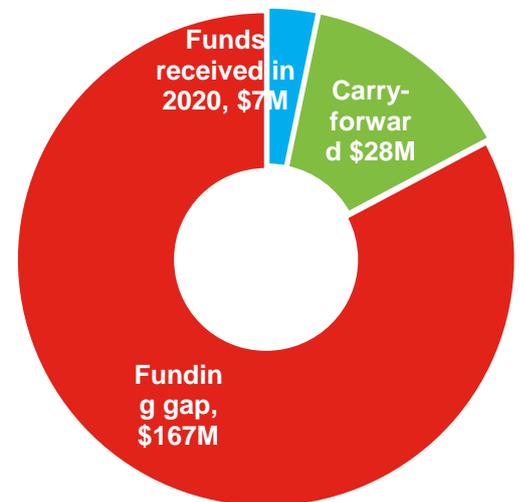


139,116 COVID-19 laboratory confirmed cases and **1,344 deaths** (WHO 28 February 2021)



1,300,000** Children and adolescents enrolled with access limitations to learning continuity due to COVID-19 (Education Cluster 2020)
**Estimates for pre-school, primary and secondary, public and private schools.

Funding Status HAC 2020 US\$ 201.8M



Funding Overview and Partnerships

In 2021, [UNICEF is appealing for US\\$ 201.8](#) million to continue providing life-saving services for women and children in Venezuela affected by a triple burden: the protracted socio-economic and political context, the COVID-19 pandemic, and mixed migration flows across international borders. This funding will enable UNICEF to reach 3.8 million people, including 2.2 million children, in the most vulnerable communities. As of February 2021, UNICEF had US\$ 34.7 million available to support the implementation of child protection, education, health, nutrition, and water, sanitation and hygiene (WASH) interventions. Of this amount, US\$ 28.2 million was carried over from 2020 and US\$ 6.5 million raised in 2021. UNICEF expresses its sincere gratitude to all public and private donors for contributions received. To reduce the 83 per cent funding gap for the 2021 HAC, UNICEF calls upon the international community to provide additional and flexible support to sustain UNICEF's response. Without sufficient funding, UNICEF will be unable to support critical activities such as school feeding, which is key for retention and good school performance. In addition, funds are required for interventions aimed at safeguarding essential health services, preventing and addressing malnutrition, mitigating and responding to protection risks, and facilitating access to safe water. UNICEF Venezuela underscores the urgent need of resources to purchase vaccines and strengthen the national cold chain system. Not only will this contribute to ensuring routine immunization vaccines are transported and stored at appropriate temperatures from the point of manufacture to the point of use, but will also support the critical preparatory work for Venezuela's COVID-19 vaccine readiness through a functioning cold chain system.

Situation Overview & Humanitarian Needs

On 13 February 2021, 100,000 doses of the Sputnik V vaccines arrived in Venezuela. Starting from 18 February vaccine administration began in Caracas Capital District, Miranda and La Guaira states, and then continued throughout the country.¹ Availability of additional vaccines has also been discussed by the government with other countries, including China and Cuba. On 2 March 2021, 500,000 doses of the Sinopharm vaccine are scheduled to arrive in the country, together with other supplies, and administration is scheduled to start on 8 March. Conversations on the possibility of having Venezuela purchase vaccines through the COVAX mechanism are ongoing, as UNICEF continues supporting the cold chain in the country. If resources are made available, Venezuela could access some 11.4 million doses through COVAX, for health and other frontline workers, and vulnerable population. During high-level technical negotiations promoted by PAHO and UNICEF with government authorities and experts, among others, resource mobilization issues have been on the top of the agenda, as once payments are made Venezuela could join the COVAX mechanisms through the Revolving Fund. Other issues such as the rollout of the vaccination schedule and preparedness of cold chain for reception and storage have also been discussed.

Throughout February, the humanitarian situation in the country continued to be depicted by interruptions in the electrical system, particularly in the western part of the country (Zulia, Trujillo, Falcon and Lara states), causing connectivity challenges for education and remote working. Together with gasoline shortages, scarcity of diesel has also been registered in the country, directly impacting both public transportation as well as transportation of goods and services.

In addition, UNICEF and partners continue to report displacements of people (*caminantes*), walking hundreds of kilometres to reach bordering states from different parts of the country, including increased numbers of children, adolescents and single mother *caminantes*. According to the [regional speaker of the United Nations High Commissioner for Refugees, \(UNHCR\)](#), an estimated 2,000 Venezuelan migrants leave the country through irregular paths daily, as borders continue to remain closed. As a result of COVID-19 restrictions being imposed in neighbouring countries, some Venezuelan migrants are returning, causing a mixed flux of migrants across the different borders of the country.

Humanitarian Leadership, Coordination and Strategy

During the reporting month, efforts have been undertaken by United Nations agencies and the United Nations Office for the Coordination of Humanitarian Affairs (OCHA) to advocate for restarting cash transfers programming with relevant authorities. The United Nations Humanitarian Country Team (UNHCT) members have analysed and discussed the importance of continuing to strengthen the link and communication channels with authorities, as well as ensuring transparency and exchange of information. Participation of NGOs in the Humanitarian Response Plan (HRP) and adherence to humanitarian principles are other key aspects allowing progress for the acceptance of humanitarian organizations. The publication of the Humanitarian Need Overview HNO/HRP 2021 planned for the end of February has been postponed to March 2021, with all members agreeing on a coordinated dissemination of the document.

UNICEF continues to support the coordination of the Prevention of Sexual Exploitation and Abuse (PSEA) inter-agency network. In February, the PSEA Interagency Network revised and pre-approved the Action Plan and Capacity Building Plan for 2021. Within UNICEF, an in-depth training for UNICEF PSEA focal points was conducted and four PSEA webinar sessions were delivered to 51 UNICEF suppliers.

¹ On 20 February: Táchira and Aragua; 21 February: Zulia, Barinas, Carabobo, Cojedes, Lara and Portuguesa; 22 February: Anzoátegui, Bolívar, Sucre and Yaracuy; 23 February: Falcón and Guárico; 24 February: Monagas, Nueva Esparta and Apure; 25 February: Mérida, Trujillo and Amazonas; 27 February: Delta Amacuro.

UNICEF also leads the implementation of the Accountability to Affected Populations (AAP) inter-agency framework and has continued to develop trainings and knowledge exchange forums to promote AAP compliant practices. Progress has also been made in the preparation of the interagency initiative to provide affected populations with a structured interagency feedback mechanism, to be implemented together with FAO, IOM, UNFPA, and OCHA. To date a risk assessment has been adapted to the changing scenario, high-level discussions with the authorities are under preparation and a service provider to run the contact centre has been selected.

UNICEF leads the Education, WASH and Nutrition Clusters as well as the Child Protection Area of Responsibility (AoR). Clusters have been involved in the evaluation of projects for the Venezuela Humanitarian Fund (VHF): a total of 17 projects were presented to the Steering Committee and 12 were approved for a total of US\$3.5million. The projects include an inter-sectorial approach with a focus on sexual and reproductive health and rights, especially for adolescent girls, and on vulnerable elderly persons, especially those taking care of children separated from their caregivers due to the migration situation. The VHF is mainly focused on the localization process which seeks to ensure that national and local partners have access to humanitarian funding, are involved in decision-making processes, and deliver assistance in accordance with humanitarian principles.

Summary of Programme Response

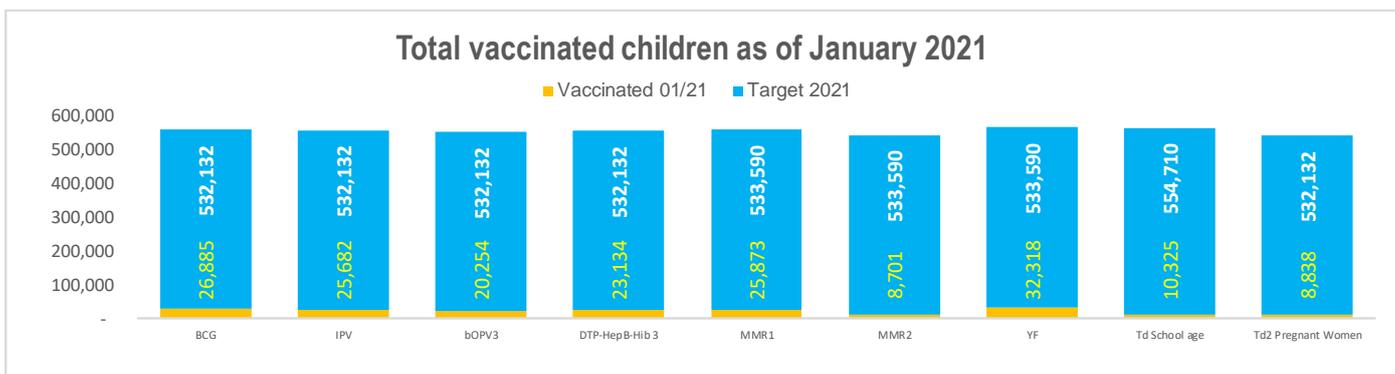
UNICEF continues to respond to the different needs and prevent the further deterioration of the humanitarian situation, keeping the humanitarian space open across the country. UNICEF and PAHO are evaluating the different options to receive COVID-19 vaccines. UNICEF has continued strengthening the health system to reduce the spread of COVID-19 and has adapted interventions to ensure uninterrupted access to essential services in the education, protection, nutrition and WASH sectors, while implementing an integrated, multi-sectoral response that targets the most in need groups, including adolescent girls, children with disabilities, people in remote areas and indigenous and Afro-descendent communities.

Health

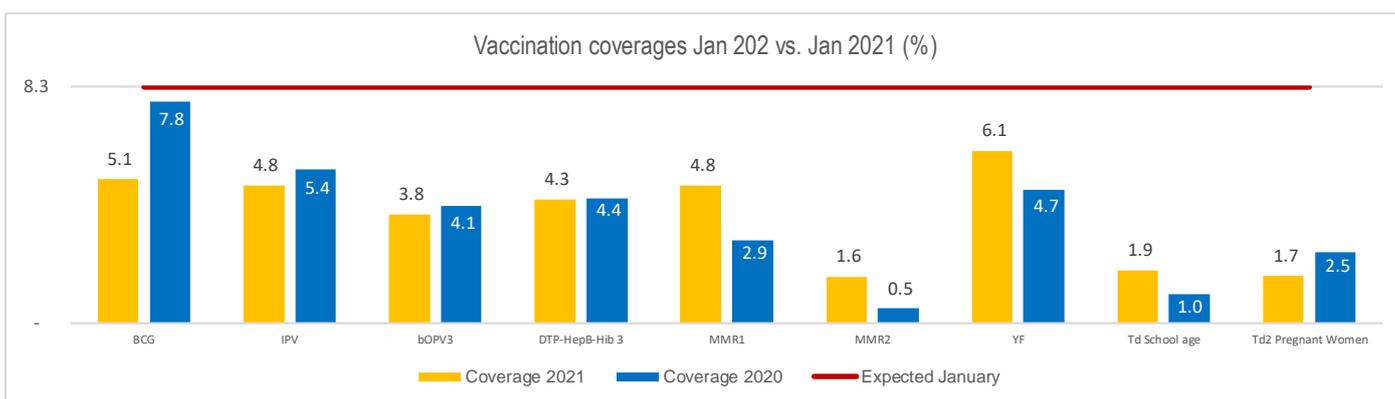
During February, UNICEF and PAHO led the coordination of the National Technical Group (Mesa Técnica Nacional-MTN), to support the drafting of the national vaccination development plan, the resource mobilization strategy and increasing COVID-19 vaccine availability in a shorter time through the COVAX mechanism. The MTN met several times in an unprecedented collective effort involving the National Government, representatives from the opposition, professional institutions and academia. In preparation for the arrival of vaccines, UNICEF has developed a plan to accelerate efforts to strengthen the cold chain, specifically a plan to ensure necessary equipment and procedures for an uninterrupted cold chain, address capacity gaps and reinforce assets at the national, regional and local level. With expected contributions, UNICEF will procure freezer rooms, solar powered refrigerators, power generators, isothermal boxes, vaccine carriers, fridge tag data loggers, boats and trucks embedded with refrigeration to guarantee quality vaccine access at all levels. Additionally, as part of the MTN activities, the national COVID-19 vaccine introduction and deployment plan was presented with UNICEF and PAHO, and feedback was received from academia and professional societies. The plan targets a 70 per cent national coverage, which translates into 22 million people vaccinated.

During February, 2,344 first prenatal consultations were carried out, 2,384 births were attended in health centres provided with supplies by UNICEF, and 156 critically ill new-borns (77 girls and 79 boys) were hospitalized at neonatal intensive care units. Also, some 1,070 children under 14 years living with HIV (513 girls and 557 boys) received full anti-retroviral treatment (ARVT), and 5,043 children under 19 years (2,420 females and 2,623 males) received treatment for opportunistic infections in HIV clinics at national level. Between January and February, 1,176 rapid diagnostic tests for HIV / Syphilis were performed on pregnant women. In addition, 177 health workers (133 females and 44 males) were trained in protocols for the early diagnosis and treatment of HIV in pregnant women, new-borns and children. UNICEF delivered personal protective equipment (PPE) to 3,436 frontline health workers (1,714 females and 1,722 males).

UNICEF continued supporting the Expanded Programme on Immunization (EPI) coverage, and according to data received from the Ministry of Health (MoH), as of January 2021 the number of vaccinated children versus the target, are shown in the graph below:



Some 32,318 children of one year were vaccinated against yellow fever (YF) and 25,873 against measles, mumps, and rubella (MMR); 26,885 children under one were vaccinated with the Bacillus Calmette–Guérin vaccine (BCG); 23,134 with the pentavalent vaccine and 20,254 with oral polio (OPV). Furthermore 8,834 women received two doses of the tetanus (Td) vaccine.



Compared to the same month in 2020, during 2021 there has been a reduction in the number of children vaccinated with BCG, IPV, OPV and pentavalent vaccines. Among the main reasons: (a) restriction of movement by the COVID-19 context that has decreased the demand for vaccination; (b) the irregular offer of services in some centres due to absenteeism of health workers as a result of illness; (c) fear of some parents to take their children to health centres due to the COVID-19 pandemic. To address low coverages UNICEF has planned, together with MoH and PAHO, a periodic intensification of routine immunization (PIRI) starting from April under the framework of the Campaign of the Americas.

Nutrition

In February UNICEF continued providing support to nutrition services in public health outpatient centres and in community centres through implementing partners. Preventive and curative nutritional services were provided nationwide to 10,392 children (5,393 girls and 4,999 boys), including 341 indigenous and 14 children with disabilities. In addition, 2,395 pregnant and lactating women -PLW- (1,312 pregnant and 1,083 lactating, including 749 pregnant and lactating adolescents) received nutritional services such as deworming, micronutrient supplementation, acute malnutrition prevention and treatment, and infant and young children feeding (IYCF) counseling.

According to UNICEF programme data, collected at the national level by implementing partners using anthropometric screenings in 3,308 children under five, 191 children under five were identified with acute malnutrition, including 64 with severe acute malnutrition (SAM) and 127 with moderate acute malnutrition (MAM). Identified cases received treatment through UNICEF implementing partners. While this information is not statistically representative at national level, and therefore does not reflect the situation of the country, it does provide guidance for UNICEF programmes. Furthermore, 2,635 children (1,293 girls and 1,342 boys) under five received multiple micronutrient powders, 389 children (192 girls and 197 boys) received lipid-based nutrients or nutritional supplement (LNS-MQ), an energy and protein supplement for the prevention of acute malnutrition, and 546 PLW received multiple micronutrient supplementation.

UNICEF has continued expanding its support to improve the nutritional status of pregnant women identified as undernourished with energy and protein supplementation, (Plumpy Mum LNS). Out of the 2,405 PLW screened, 601 pregnant (including 197 pregnant adolescents) were identified as undernourished and 119 received Plumpy Mum LNS to improve their nutritional status and to reduce the risk of low birth weight and infant and maternal morbidity and 2,064 received multiple micronutrient supplementation. Moreover, UNICEF trained 107 health professionals (69 women and 38 men) from the public health sector of the states of Guárico, Cojedes and Yaracuy, to strengthen their technical

capacities in the prevention and treatment of acute malnutrition without complications. Training was conducted by personnel previously trained by UNICEF staff in February.

UNICEF has consolidated interventions in vulnerable indigenous communities in Sinamaica and Guajira, Guajira municipality - Zulia state, through implementing partner Dividendo Voluntario para la Comunidad (DVC). During February, DVC provided essential nutrition services (prevention of malnutrition and IYCF counseling) to 6,809 boys and girls under five years of age (3,384 girls and 3,425 boys) and 2,187 PLW (819 pregnant and 1,368 lactating women). Also, preventive and curative nutrition services were offered in Anzoátegui state, targeting to 144 children under five (64 girls and 80 boys) and 42 PLW from the indigenous communities in the Pedro María Freites municipality. UNICEF supported the activation of nutrition services by providing anthropometric equipment, nutrition supplies, strengthening technical capacities of health personnel and disseminating nutrition information management in health staff from 16 outpatient centres in Falcón state, six in Trujillo state and three community centres in Zulia state.

In February the Nutrition Cluster completed the Cluster Coordination Performance Monitoring (CCPM) exercise with partners' participation where the Cluster's performance was assessed, and results discussed among members. Based on the outcomes, and to correct service delivery duplications, the Nutrition Cluster developed a dynamic mapping of partners' geographic presence and service delivery to enhance coordination among implementers in the field. The dynamic mapping is an online tool fed by the 5W partners' which will be available on HR.info for public use as of March.

Also, the Táchira state sub-national cluster carried its first meeting in San Cristobal, attended by national and international NGOs, OCHA, and Corposalud, a public health network organization. Zulia, Bolívar, and Gran Caracas sub-national clusters will be activated starting from March 2021.

With a first allocation of US\$ 3.5 million for the VHF, the Cluster formed the VHF committee to conduct the strategic and technical review of five projects submitted to the fund with nutrition components. The committee was comprised of the Nutrition Network of Lara, Save the Children, UNICEF, and the Cluster Coordinator.

WASH

During February, UNICEF continued focusing on the COVID-19 response with the provision of safe water and hygiene promotion, including distribution of essential hygiene items to the most vulnerable communities and key institutions, such as health care facilities, temporary shelters, child protection centres and schools. To continue supporting safe water access in the most vulnerable states, UNICEF and the Ministry of Water (MoW) have been working together on improving several facilities.

In Zulia state, works have started in Wuinpala water treatment plant (WTP) to rehabilitate its water disinfection system that will benefit three municipalities (Maracaibo, Mara and Almirante Padilla). In Bolívar state, UNICEF finished rehabilitation works in Angostura's WTP, located in Ciudad Bolivar, proving access to safe water to 103,800 people (16,432 girls, 16,255 boys, 36,538 women, 34,576 men). Additionally, UNICEF has also improved community resilience and WASH conditions in the Pemón indigenous community of Itopoykon by drilling a deep borehole and installing a 95m³ water storage tank, benefitting approximately 1,750 persons (277 girls, 274 boys, 616 women, 583 men). In Táchira state, UNICEF has improved access to safe water in its main network by rehabilitating two water pumping stations (Santa Barbara and La Fria) and improving the chlorine dosing systems in three stations (Pata Gallina, La Caricuena and La San Juana). Altogether these works have contributed to improve water availability to approximately 210,000 people (33,243 girls, 32,886 boys, 73,920 women, 69,951 men).



Left: © UNICEF Venezuela/2021/Tineo. Installation of a water tank in Itopoykon, located in Bolivar state.

Right: © UNICEF Venezuela/2021/Buitrago. Rehabilitation works in the Pata Gallina water treatment plant, located in Táchira state.



These interventions were complemented with operation and maintenance actions such as distribution of tools and equipment, capacity building, hygiene campaigns and technical assistance to 100 staff personnel of the MoW's²; and community-led hygiene promotion activities, through the distribution of household water treatment supplies, 2,200 hygiene kits, and hygiene campaigns to vulnerable communities, benefitting some 11,000 persons (1,741 girls, 1,723

² Personnel from water systems in Zulia (HidroLago), Delta Amacuro (HidroDelta), Bolívar (HidroBolívar), Miranda (HidroCapital/IMAS), and Táchira (HidroSuroeste).

boys, 3,872 women, 3,664 men). In addition, 600 individual hygiene kits were distributed by Miranda Civil Protection in Barlovento area to support communities affected by heavy floods.

UNICEF also continued its infection prevention and control (IPC) support strategy in 106 health care facilities across 10 states,³ through distribution of key cleaning and hygiene products, PPE, installation of handwashing points, and provision of technical assistance and capacity building on IPC-related subjects, such as handwashing, environmental cleaning, health care facilities waste management practices, correct use of PPE, among others. In rural areas, UNICEF has installed biodigesters in one primary health care facility in Cedeño municipality, benefitting 783 persons. Biodigesters allow safe disposal of excreta and support local agriculture by providing organic fertilizers. Interventions were complemented with other activities such as the provision of hygiene kits to patients, health, operations and maintenance staff, contributing to the sustainability of quality health services.

UNICEF and implementing partners have continued to support eight migrant temporary shelters, in Zulia and Bolívar states, for Venezuelan migrants returning from neighbouring countries. In February, UNICEF also supported seven protection centres across Caracas Capital District and Zulia state with daily access to water, through water trucking and/or rehabilitation works; as well as distribution of handwashing, cleaning and disinfection supplies, benefitting a total of 1,396 persons (221 girls, 219 boys, 491 women, 465 men). UNICEF also supported 135 schools across seven states with WASH infrastructure rehabilitation, distribution of hygiene, cleaning and disinfection supplies, providing 73,336 people (7,463 adults, 34,068 girls, 31,805 boys) access to adequate WASH services when schools re-open.

The WASH Cluster has been involved in the VHF selection process and in the consolidation and review of some internal systems, including the 5W dashboard for 2021, and various Kobo-based monitoring tools. These will serve as a basis to engage with other key clusters as a part of the HNO/HRP 2022 preparation to review WASH standards and analysis frameworks, as well as to identify other areas of potential collaboration and integration, improve the analysis of sectoral needs and provide a basis for tracking impact.

Child Protection and Gender-Based Violence

UNICEF continued strengthening local child protection systems in 15 states, benefitting 6,557 children (3,268 boys and 3,289 girls) with protection measures and specialized protection services such as legal support, psychosocial support, case management and alternative care. A total of 5,927 children (3,037 boys and 2,890 girls) and 1,118 caregivers were supported through integrated child protection programmes and services, including individual psychosocial support for children and their caregivers, legal assistance, case management, family support and referral to health and nutrition services. Some 251 people (124 girls, 79 women, 17 boys and 31 men) also received prevention or response care services for gender-based violence (GBV), including case management, psychosocial support and legal assistance, and 3,810 people were sensitized to prevent and mitigate GBV at community level, through workshops in different locations including health centres, community centres and institution's premises.

Some 11,420 parents, caregivers and community members (5,005 female and 6,415 male) have been trained on prevention of violence, prevention of sexual abuse and prevention of family separation, and 6,990 people (4,465 female and 2,525 male) have participated in awareness raising activities.

In Táchira state, the Integrated Service Centre (*CA/NNAM* by its Spanish acronym), located at the border area in San Antonio, provided support to 1,250 people (420 girls, 401 boys, 362 female and 67 male). Most of the services were provided to children and women on the move and people living in host communities around the centre. Services provided were related to psychosocial support, legal orientations, support and guidance for documentation and support for the accompaniment of separated children, among others. Also, UNICEF provided computers, printers and cameras to the first Child Protection Court located in San Antonio del Táchira, as a strategy to strengthen the protection response provided by the child protection system at the border area.

Ombudsman Offices established in four prioritized hospitals (*Defensorias Hospitalarias* in Spanish) provided assistance to 4,704 people (2,914 female and 1,790 male), mostly on GBV, documentation for children, birth registration, and psychosocial support. Activities also included training sessions for authorities of the Child Protection System. Moreover, as part of initiatives to improve UNICEF's AAP, a perception survey has been developed to assess beneficiaries' satisfaction with the psychosocial support services implemented by thirteen UNICEF partners. The survey will be implemented to a statistically significant sample in March and adaptive measures and lessons learnt will be drawn accordingly.

The humanitarian corridor for the return of Venezuelans via Zulia state was reactivated. Although the arrival of people has decreased compared to 2020, UNICEF kept services available through partners in the field and in alliance with the state for the assistance of unaccompanied and separated children (UASC). Identified UASC cases from Colombia (two boys and one girl) were supported by UNICEF partners in coordination with local authorities to guarantee family reunification, and services such as psychosocial support, PPE, hygiene kits and mosquito nets.

³ 106 Health Care Facilities (HCF): 80 primary HCFs and 26 hospitals, in Anzoátegui, Apure, Bolívar, Delta Amacuro, Distrito Capital, Mérida, Miranda, Táchira, Vargas, Zulia states.

UNICEF, through partners, ensured access to mental health and psychosocial support (MHPSS) for vulnerable people and communities in Maracaibo and a total of 84 people at risk were assisted (57 females and 27 males, including 6 people with disabilities) with individual psychosocial support. In addition, three community activities were carried out to provide group psychosocial support to 167 children, parents and caregivers (106 females and 61 males) in Maracaibo. Training activities were also carried out in three public schools located in Maracaibo, including technical assistance for case management and workshops on positive parenting, as well as awareness-raising for the prevention and response of GBV and PSEA, with 607 people participating (315 women and 292 men). In Lara state, UNICEF benefited 279 people (142 women and 137 men) with psychosocial support in communities. Some 21 children (12 female and 9 male) who are separated from their parents and in alternative care were also supported with protection services through the *Familias de Corazón* programme.⁴

During a vaccination brigade organized by UNICEF in CEPIN,⁵ with the health and C4D teams, the child protection sector provided awareness raising sessions on the importance of birth registration, as well as on the referral pathways in cases of child abuse. In total, 47 parents (46 female and 1 male) received information and the activity reached 97 children (49 female and 48 male).

The Child Protection AoR has been involved in the VHF selection process and in the mapping of child protection services in partnership with counterparts and allies. A capacity building process for AoR partners will be launched next month to strengthen local capacities and the main areas to be covered have already been identified. Cross-border actions with Colombia to enhance humanitarian response and protection of children in border areas have been coordinated through the Interagency Working Group on Mixed Migration.

Education

In February UNICEF delivered individual educational learning kits to 86,095 children (41,568 girls and 44,527 boys, including 2,716 children with disabilities and 162 children from indigenous populations) in vulnerable communities across eight states⁶ in order to support their educational continuity at home.



Fe y Alegría School activity didactic guide for distance education. February 2021

During February the school feeding programme benefited 47,235 children (23,758 girls and 23,477 boys) in the states of Amazonas, Apure, Bolívar, Mérida, Miranda, Táchira and Zulia through the delivery of food bags to students and, in some educational centres in the state of Miranda, through take-home hot meals prepared and distributed daily to children and adolescents. A total of 154 children belonging to indigenous populations were supported with this intervention.

In distance education, 89,216 children (44,367 girls and 44,849 boys) were supported across 17 states,⁷ through the implementation of learning guides in reading, writing and calculus and teacher follow-up, both remotely and face-to-face counselling in schools. The number of beneficiaries includes 703 children from indigenous

populations in Amazonas state. In addition, UNICEF continues to develop the educational radio program called 'The School on the Radio,' currently reaching 15 states in the country, indirectly reaching 2,243,180 children (1,091,464 girls and 1,151,716 boys).

Socio-emotional support was provided to 118,228 children (62,123 girls and 56,105 boys) in subsidized schools in vulnerable sectors in 16 states,⁸ through teaching guides containing strategies for self-care, promotion of values and socio-emotional activities to be carried out at home. The programme includes 2,612 children from indigenous populations and 940 children with disabilities. Also, a programme to promote a recreational culture called 'Aprendemos Jugando' (Let's Learn by Playing) was developed for 42,347 children (23,831 girls and 18,516 boys) in Amazonas, Bolívar, Miranda, Táchira and Zulia, through an educational and protective approach that promotes games, recreation, family gatherings, recognition of emotions and appreciation through recreational guides to be carried out at home.

Remote workshops were held with the participation of 2,756 teachers (2,252 women and 504 men) in 18 states aimed at developing a multimodal strategy for distance learning and promoting a recreational culture for learning.⁹ In addition, guidelines for the promotion of reading, writing and logical and mathematical thinking were developed, as well as

⁴ The *Familias de Corazón* programme is an alternative care programme with temporary substitute families for UASC children and adolescents who have been victims of exploitation, trafficking, GBV, among others.

⁵ The *Centro de Promoción Integral del Niño*, (CEPIN) is a non-profit foundation located in the Etnia Guajira community, in the suburbs of Maracaibo – Zulia state, which provides support to vulnerable indigenous children, primarily to address food insecurity and malnutrition. CEPIN is a UNICEF implementing partner.

⁶ Anzoátegui, Apure, Bolívar, Falcón, Miranda, Nueva Esparta, Sucre, Táchira and Zulia

⁷ Amazonas, Anzoátegui, Apure, Barinas, Bolívar, Carabobo, Caracas Capital District, Falcón, La Guaira, Lara, Mérida, Miranda, Monagas, Sucre, Táchira, Trujillo and Zulia.

⁸ Amazonas, Anzoátegui, Apure, Barinas, Bolívar, Carabobo, Distrito Capital, Falcón, La Guaira, Lara, Mérida, Miranda, Monagas, Sucre, Trujillo and Zulia.

⁹ The titles of distance learning and recreational culture activities: Recreational culture: psychoeducational and recreational activities; Multimodal strategies in the Teaching-Learning processes; Musical Braille signage for teachers of students with visual disabilities; Training for the educational use of UNICEF kits; Teacher training in the life skills program for adolescents.

technical-pedagogical strategies for children with visual disabilities. Other training sessions were provided on the use of learning kits within the framework of education in emergencies.

Some 1,198 teachers and school personnel (667 women and 531 men) in Amazonas, Bolívar, Apure, Táchira, Mérida and Zulia received incentives in the form of food bags to promote their continuous engagement in teaching; 100 indigenous personnel working in schools located on the Amazon were included. Also, as a contribution to school reopening -which has been announced for April-, UNICEF translated and published a didactic guide for teachers to support the safe return to school, based on [UNICEF's global framework for reopening of schools](#). Remote training sessions and radio podcasts to sensitize families and school communities are also being designed.

With UNICEF's Planning, Monitoring and Evaluation's support, during February the Education Cluster developed a training workshop with technical officers from 48 cluster partners on the use of the 5W tool and HRP 2021 action monitoring. A Secondary Desk Review to develop the operation's quality standards on topics such as out-of-school children, distance learning, school feeding, reopening of schools, psychosocial support, among others, was conducted with the support of the Global Education Cluster. Working joint groups linked to the WASH Cluster and the Child Protection AoR sector began to study common outcomes for the next HRP.

Communications for Development (C4D), Risk Communication and Community Engagement (RCCE), Accountability to Affected Populations (AAP)

In February 2021 support to education continued through the provision of COVID-19 related materials, including posters on preventive measures, handwashing and psychosocial support, as well as flyers with school schedules displayed in schools to promote the importance of maintaining the school routine at home for when parents attend for homework pick-up or drop-off. A total of 15,746 supplies were distributed to 146 schools in Bolívar state, benefiting 53,251 children and adolescents and approximately 1,350 teachers.

In Táchira state, 678 posters on COVID-19 prevention were distributed to implementing partners CISP, FUNREAVH, NRC and ADRA as well as to parents. Some 1,225 guides on COVID-19 prevention for frontline workers, 1,140 stickers on handwashing, 1,225 posters on the ten golden rules for preventing the spread of COVID-19, and 678 posters on correct hand washing techniques for children were distributed. In addition, some 1,350 items of printed material (1,050 on COVID-19 prevention and 300 on menstrual hygiene) were distributed in Maracaibo municipality, in the Centre for Comprehensive Care of Pregnant and Breastfeeding Women, and in schools and adjacent communities. Over four million people were reached with key messages on COVID-19 prevention, hygiene promotion, recommendations for safe travel (migrants) and the importance of a good environment that facilitates education at home, through daily broadcasts on IRFA radio network and Finampyme's 'Enlace Radial.'

Furthermore, with implementing partner Finampyme, 125 community promoters and people from targeted communities (77 female and 48 male) in the municipalities of San Cristóbal, Fernández Feo, Torbes, Rafael Urdaneta, Panamericano, García de Hevia, Ayacucho and Lobatera in Táchira state received training on planning community activities, good handwashing practices and the Tippy Tap method. Also, 41 promoters from Táchira and Amazonas states (22 women and 19 men) received clothing and working equipment as an incentive to strengthen their performance; while community promoters (four women, three men) from the Organization of Indigenous Peoples of Amazonas (ORPIA) were trained in C4D, Planning and New Community Leadership.

Since November 2020, UNICEF has been designing a country-wide mechanism for sensitive feedback to be launched in March 2021. UNICEF's reporting mechanisms (*Línea de Reporte*) builds on communication channels preferred by the population, such as phone, instant messaging application, SMS and emails. Two dedicated staff members received extensive training to run the helpline and manage sensitive issues, including reports of Sexual Exploitation and Abuse (SEA). The helpline operating procedures include feedback management flows, pre-established pathways to refer feedback to focal points in UNICEF, and specific guidance on how to address different types of sensitive reports. Operators have a library of key messages available to inform and refer callers who do not want to report sensitive issues. This pilot aims to inform the establishment of an inter-agency complaints and feedback mechanisms in the county.

Special Projects

Delta Amacuro is an isolated state on the Eastern coast, distant and independent from the rest of the country. It is considered one of the most vulnerable states in the country and includes some of the most unfavorable socio-economic conditions, highest extreme poverty and fertility rates, in addition to one of the lowest literacy rates, and many rural and indigenous populations. According to the study 'Territorial Inequality in Venezuela,'¹⁰ communication channels are very limited, and interrelations are constrained by rural areas. The 2019 National Survey of Living Conditions (ENCOVI by its Spanish acronym), indicated an extreme poverty of 70 per cent. Poverty rates, poor condition of households, and low economic development are among the aspects that describe the population living in the state. In addition, the distance from the main urban centres has condemned this population to live as an independent area, and the state is barely considered when resources are allocated and when economic and social plans are developed, reducing the chances of improving the living conditions of inhabitants.



© UNICEF Venezuela/2020/Tineo. River ambulance rehabilitated by UNICEF, located on the Orinoco river in Delta Amacuro state.

To improve maternal and child health in Delta Amacuro state, UNICEF is implementing a project that includes the rehabilitation of two fluvial ambulances and two ground ambulances to provide the Warao indigenous population living in remote fluvial communities within Antonio Diaz and Pedernales municipalities transportation to reach health care facilities. Normally the journey to transport patients from the communities of San Francisco de Guayo, Navasanuka or Curiapo can last up to eight hours by *Curiara* – typical indigenous boats. Through this initiative, UNICEF is benefitting 33,388 inhabitants in Antonio Diaz municipality and 7,996 inhabitants in Pedernales municipality with faster transportation to access health care. Main beneficiaries include indigenous pregnant women, children under five and adolescents, who represent 65 per cent of the population. Since the beginning of the project at the end of 2020, women and children have been transported across the Orinoco River, from the most remote places in Delta Amacuro to the dock in Tucupita, the capital of Delta Amacuro state, from where they are immediately transferred to the Luis Razetti Hospital, in Tucupita. In addition, ground ambulances benefit patients with complicated cases with transportation from Tucupita to Maturín (Monagas state) and Ciudad Bolívar (Bolívar state), where type III and IV level hospitals can be found.

Planning, Monitoring and Evaluation

During February, 315 monitoring activities were carried out in 181 different establishments within 15 federal entities in the country. Most of this monitoring focused on health, WASH and nutrition supplies (88.5 per cent of activities). As part of monitoring activities, UNICEF Venezuela obtained information regarding supply needs within health establishments. In addition, UNICEF began reviewing new information requirements and designing new instruments for the data recollection process. New and adjusted instruments will begin to be applied during March.

Supply and Logistics

In February 2021 UNICEF Venezuela ordered goods for a total value of US\$ 4.1 million, of which 99 per cent were for international procurement, mainly vaccines and cold chain equipment (US\$ 3.8 million international and US\$36,000 local procurement).

Additionally, UNICEF has received in country 126.1 tonnes of goods, including medical material, WASH and nutrition items for a total value of US\$ 892K by sea, and two air cargo with communication equipment and medical kits for US\$ 34,971.

During the reporting period, UNICEF distributed a total amount of US\$ 810,366 of relief supplies representing 178 tonnes, specifically in direct delivery of syringes to SEFAR (MoH's main warehouse) and from UNICEF warehouses to various partners through the whole country.

Finally, US\$ 22,858 of WASH equipment and stationaries were sent directly from local providers to Bolívar implementing partners.

¹⁰ Cesar Siso. 'Trabajo de Grado Desigualdad Socioeconomica, Caso de Estudio Venezuela Año 2011.' Universidad Central de Venezuela, October 2017.

Human Interest Stories and External Media

UNICEF communication efforts have continued focusing on disseminating life-saving messages about COVID-19 prevention. Messages have also informed communities on UNICEF's work in the field with interventions like education and psychosocial support for children and adolescents. During February, and as part of a comprehensive communication strategy for transparency, advocacy, and resource mobilization purposes, UNICEF produced over 150 multimedia assets (photos and videos).

In February UNICEF Venezuela's social media channels reached over 3.1 million. At the same time, 59,474 interactions such as comments, likes, and retweets were received. Social media posts included messages on psychosocial and educational support, violence prevention, COVID-19 prevention, and the humanitarian principles that guide UNICEF's work for every child.

Human interest stories and multimedia stories:

- [UNICEF supports the councils for the protection of the rights of children and adolescents](#)
- Activities to do at home with recyclable material: [1 - Collage](#), [2- Valentine's day](#), [3 – Photo-camera](#), and [4-board game](#).
- [UNICEF reaches to the most vulnerable children in Delta Amacuro through educational kits and school feeding](#)

UNICEF Venezuela: <https://www.unicef.org/venezuela/>

UNICEF Venezuela Facebook: <https://www.facebook.com/unicefvenezuela/>

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Annex A

Summary of Programme Results (HAC)

Sector	UNICEF and Partners		Sector Response ¹¹	
	Jan-Dec 2021 target	Total results (Jan-Feb)	Cluster Jan-Dec 2021 target	Cluster Results (Jan-Feb)
Health				
Children aged 0 to 12 months vaccinated against measles	533,600	25,873 ¹²		
Children aged 0 to 12 months fully vaccinated with three doses of pentavalent vaccine	532,192	23,134 ²		
Pregnant women & new-born babies receiving maternal/neonatal life-saving services in UNICEF-supported facilities	246,900	9,272		
Healthcare workers in healthcare facilities and communities provided with personal protective equipment (PPE)	60,000	3,691		
Nutrition				
Primary caregivers of children aged 0 to 23 months receiving infant and young child feeding counselling	155,500	6,880	313,333	8,408
Children aged 6 to 59 months with severe and moderate acute malnutrition admitted for treatment.	51,447	920	67,747	1,236
Children aged 6 to 59 months and pregnant and lactating women receiving micronutrient supplementation	688,100	19,542	787,010	20,580
WASH				
People accessing a sufficient quantity of safe water for drinking, cooking and personal hygiene	3,000,000	398,621	3,840,000	401,527
Children accessing appropriate water, sanitation and hygiene facilities and hygiene services in learning facilities and safe spaces	300,000	58,065	580,500	63,895
People receiving basic hygiene information and/or essential hygiene products ¹³	1,540,000	82,548	3,526,800	104,765
Child Protection, Gender-based Violence & PSEA				
Children and caregivers accessing mental health and psychosocial support	150,250	10,527	455,363	10,545
Women, girls and boys accessing gender-based violence risk mitigation, prevention or response interventions	60,000	4,154	886,364	10,936
People with access to safe channels to report sexual exploitation and abuse	10,000	⁻¹⁴	-	⁻¹⁵
Education				
Children accessing formal or non-formal education, including early learning ¹⁶	150,000	119	191,362	400
Children receiving individual learning materials	1,180,000	150,052	1,487,622	150,233
Children benefiting from balanced school feeding programmes with hygiene standards	400,000	57,841	594,130	57,841
C4D, Community Participation & AAP				
People participating in engagement actions for social and behavioural change	25,000	9,314		
People who shared their concerns and asked questions/clarifications to address their needs through established feedback mechanisms	52,000	⁻¹⁷		
People reached with messages on access to services and life-saving behaviours	4,800,000	3,869,702 ¹⁸		

¹¹ Sector Response includes UNICEF implementing partners and cluster response.

¹² Data from January 2021, since the MoH reports have a month delay.

¹³ This indicator is changed because it focuses only on people reached with information and basic hygiene products.

¹⁴ This indicator will be reported starting from March 2021.

¹⁵ This indicator will be reported starting from March 2021.

¹⁶ This indicator only applies to out-of-school children.

¹⁷ This indicator will be reported starting from March 2021.

¹⁸ It is expected that the people reached by this mass communication activity on a monthly basis will be approximately the same. For that reason, the results reported for this indicator will always be the maximum number of beneficiaries reported in a given month up until the current month of report.

Annex B

HAC Funding Status¹⁹

Sector	Requirements	Funds available			Funding gap	
		Humanitarian resources received in 2021	Other resources used in 2021	Resources available from 2020 (Carry-over)	\$	per cent
Nutrition	26,960,000	27,201	0	2,212,372	24,720,428	92
Health	34,915,000	564,164	1,960,000	12,154,830	20,236,006	58
WASH	70,200,000	0	0	6,701,673	63,498,327	90
Child Protection	16,255,000	30,747	63,552	2,026,646	14,134,055	87
Education	50,260,000	3,887,822	0	4,086,194	42,285,984	84
C4D	3,200,000	4,435	0	997,206	2,198,360	69
Total	201,790,000	4,514,368	2,023,552	28,178,921	167,073,159	83

¹⁹ As defined in [Venezuela 2021 Humanitarian Appeal](#) launched on 3 December 2020 for a period of 12 months.