

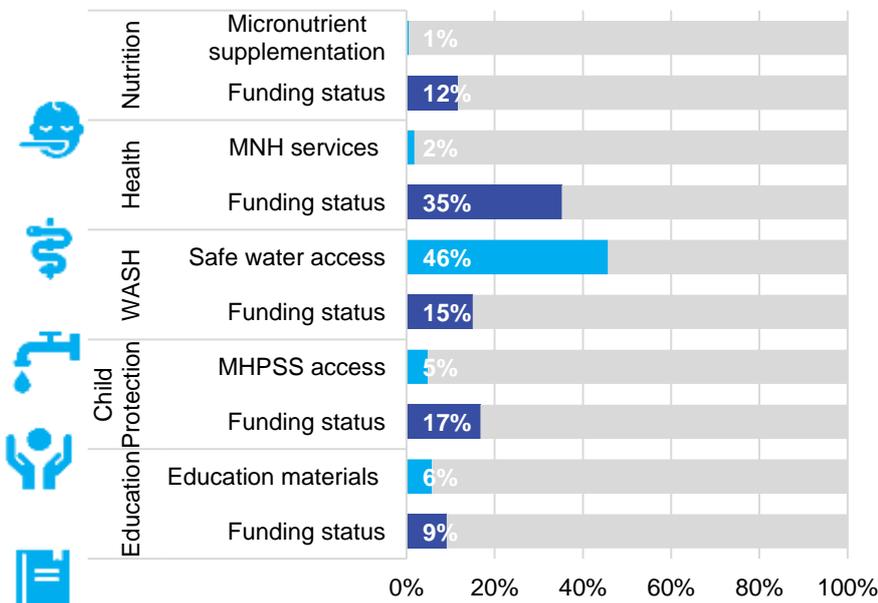


© UNICEF/UN0403837/Cabral. A violinist from Venezuela's National System of Children and Youth Orchestras. With millions of children and adolescents enrolled in the 'System' it has been renewed as a UNICEF Venezuela Goodwill Ambassador.

Reporting Period: 1-31 January 2021

## Highlights

- High level and technical negotiations have taken place to assess feasibility and options to receive vaccines through COVAX in Venezuela. Planning meetings have been conducted with authorities and stakeholders regarding Venezuela's access to the COVAX facility and the increase in number of vaccines.
- During January, anthropometric screenings were performed on 4,172 children under five (2,103 girls and 2,069 boys). Some 2,882 children (1,428 girls and 1,454 boys) received multiple micronutrients powders, 760 children (401 girls and 359 boys) were treated for acute malnutrition and 2,245 children (1,103 girls and 1,142 boys) received deworming treatment.
- In Bolívar state, UNICEF installed one 95m<sup>3</sup> water tank, and supported existing ones with water trucking in Warao and Itoyponkon communities, reaching 2,000 indigenous people.
- 9,723 children (4,813 boys and 4,910 girls) and 2,464 caregivers, were supported through integrated child protection programmes and services, including individual psychosocial support, legal assistance, case management, family support and referral to health and nutrition services.
- During January, the school feeding programme benefited 47,461 children and adolescents, including 1,156 indigenous children, (23,898 girls and 23,563 boys) in the states of Amazonas, Apure, Bolívar, Miranda, Táchira and Zulia.



# UNICEF VENEZUELA

## Situation Report January 2021



### Situation in Numbers



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

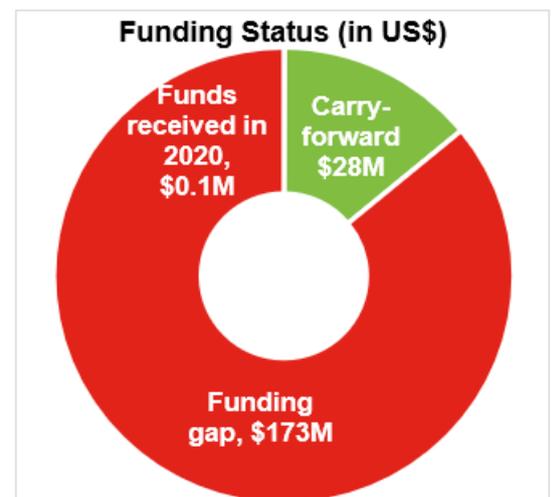


**126,927** COVID-19 laboratory confirmed cases and **1,189 deaths** (WHO 31 January 2021)



**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.

## UNICEF Appeal 2021 US\$ 201.8 million



## 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 January 2021, UNICEF had US\$ 28.3 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\$ 0.1 million raised in 2021. UNICEF expresses its sincere gratitude to all public and private donors for contributions received. To reduce the 85 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 safeguarding essential health services, preventing and addressing malnutrition, mitigating and responding to protection risks, and facilitating access to safe water. Finally, 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

Following the December 2020 holiday break, students resumed classes during the first week of January under a distance education modality. Nonetheless, the ministry of education (MoE) is evaluating reopening of schools and beginning face-to-face educational activities starting from March, as announced by Government authorities. In Venezuela, irregular power services and unreliable internet services have continued impacting access to education services. Fuel shortages have also worsened, especially in Bolívar state, due to fuel requirements for mining sector activities and machinery, which is in turn impacting transportation and mobility.

By the end of January Venezuela had reached almost 127,000 confirmed cases of COVID-19, with 11,263 positive cases registered in December, a month declared as 'flexible,' meaning no quarantine or restrictions were imposed for infection prevention and control, and 13,043 new confirmed cases registered in January. The minister of health (MoH) declared that during the third week of December Venezuela had entered a phase of 'slow increase' of COVID-19 cases, registering on average some 17 active cases per 100,000 inhabitants. That said, it is important to highlight there are only three triage centres in the country performing polymerase chain reaction (PCR) tests to detect COVID-19. Venezuelan authorities have also announced that a first cargo of 100,000 Sputnik V vaccines has arrived in the country.

Lastly, as bus terminals and borders remain closed, migration flows have decreased and, with that, the number of active temporary shelters in border locations hosting returning migrants in compliance with quarantine protocols.

## Humanitarian Leadership, Coordination and Strategy

The first United Nations Humanitarian Country Team (UNHCT) meeting for 2021 was held in January and addressed issues related to humanitarian space and restarting cash transfers programming. In addition, humanitarian partners are developing the inter-agency analysis for the 2021 Humanitarian Needs Overview (HNO) and Humanitarian Response Plan (HRP). UNICEF leads the WASH, Nutrition and Education Clusters and the Child Protection Area of Responsibility in the Protection Cluster. UNHCT members agreed on general next steps as well as the communication and dissemination strategy.

UNICEF continues to support the coordination of the Prevention of Sexual Exploitation and Abuse (PSEA) inter-agency network. In January, PSEA priorities were incorporated into the draft of the first PSEA Action Plan for the Venezuelan Humanitarian System. Within UNICEF a webinar was conducted for the operators of the UNICEF Report Line. The training focused on PSEA, trauma sensitive approach, stress management and listening skills applied to persons undergoing traumatic processes. The PSEA training plan for 2021 was revised and in-depth training PSEA materials for focal points developed. PSEA sections focal points carried out a PSEA Evaluation of Partners under the guidance of the PSEA Coordinator and the HACT Specialist and based on outcomes continuous support will be provided to partners that have submitted an Action Plan for improvement.

UNICEF is leading 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. During January sessions, a UNICEF-led practice of engagement through communication and video making was disseminated to humanitarian partners. Also, progress has 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. High-level discussions with authorities are under preparation and a service provider to run the contact centre is being selected.

## Summary of Programme Response

Despite the challenging humanitarian environment in Venezuela, UNICEF continues to respond to different needs to prevent the further deterioration of the humanitarian situation, keeping the humanitarian space open across the country. In response to COVID-19, UNICEF has continued strengthening the health system by scaling up priority health, WASH and communication for development (C4D) actions to reduce the spread of the disease and adapting critical interventions to ensure uninterrupted access to essential services. In addition, UNICEF, together with Pan American Health Organization (PAHO), has been coordinating Venezuela's access to the COVAX facility with authorities and stakeholders, and has carried out negotiations to evaluate the different options to receive COVID-19 vaccines. UNICEF has adapted to the constant evolving environment and continues implementing an integrated, multi-sectoral response, targeting the most in need, including adolescent girls, children with disabilities, people in remote areas and indigenous and Afro-descendent communities.

### Health

During the reporting period, essential health services for mothers and children were provided in UNICEF-supported facilities. Some 4,501 antenatal consultations and deliveries were attended, representing an increase in neonatal and maternal health compared to the last quarter of 2020. The increase in neonatal and maternal health is the result of an increase in partners' reporting capacity as well as the stabilization of activities, under the COVID-19 pandemic, across 160 health centres nationwide.

Furthermore, Expanded Programme on Immunization (EPI) activities have been sustained and UNICEF has held several meetings with health authorities to agree on the mutual support required throughout 2021. Priorities have been set as follows: procurement of vaccines, immunization support, Mumps, Measles and Rubella (MMR) + polio campaigns support and cold chain strengthening. In addition, negotiations and regular communication at national and regional level with PAHO and the MoH have continued in preparation of Venezuela's deployment of the different COVID-19 vaccines and the segregation of duties of key stakeholders.

UNICEF has identified three different cold chain scenarios: (a) positive cold chain (2 to 8 °C); (b) negative cold chain (-15 to -20 °C); and (c) ultra-negative cold chain (-75 to -80 °C), including two for different COVID-19 vaccines. It is important to highlight that some options include procurement of positive cold chain for regular immunization and COVID-19 vaccines; reinforcement of negative cold chain, through procurement of dual system equipment, that can be switched into positive; and third, a temporary lease of properly equipped warehouses (least preferred option), for vaccine storage purposes.

High-level and technical negotiations with different stakeholders have taken place to assess feasibility and different options to receive vaccines through COVAX in Venezuela. Planning meetings have been conducted with authorities and stakeholders regarding Venezuela's access to the COVAX facility and the increase in number of vaccines the country will be able to access. Currently the government has committed vaccines for 10 million people with the Russian Government. Through COVAX access to vaccines for 5.7 million people would be possible.

Moreover, monitoring of end-user utilization of the paediatric anti-retroviral treatment (ARVT) distributed is ongoing through the network of paediatricians providing direct assistance to the 1,023 children living with HIV.

### Nutrition

In January 2021, UNICEF provided therapeutic formulas (specialized supplies F-75, F-100 and RESOMAL) for the treatment of children under five with acute malnutrition with complications in 30 prioritized hospitals within the public network across 16 states, ensuring the continuity of treatment of cases detected by partners and through outreach by the public health network. Also, as part of the expansion strategy for nutrition services, UNICEF provided technical



© DVC/2021/Galicia. UNICEF partner DVC providing nutrition services in La Guajira community, Paraguipoa and Sinamaica Lagoon, Zulia state.

training to basic health teams on Community Management of Acute Malnutrition (CMAM) in Guárico and Cojedes states, activating 19 community monitoring programme (CMPs) in Guárico and 15 in Cojedes.

UNICEF, through implementing partner Dividendo Voluntario para la Comunidad (DVC), conducted nutrition screening and malnutrition treatment in highly vulnerable communities in La Guajira municipality, Zulia state, Paraguaipoa and Sinamaica, benefitting 1,721 children under five years of age (723 girls and 998 boys) and 447 pregnant and lactating women (PLW). Benefitted communities included Laguna de Sinamaica, Los Robles, Palawauipou, Corazón de la Guajira, and Mariche I and Mariche II.

During the reporting period, UNICEF, together with other United Nations agencies, has promoted a planning process for people on the move in Táchira state to integrate activities

through an intersectoral and interagency approach. Efforts aim to reinforce basic nutrition services available during the transit to and from the Colombian border, including nutritional screening, micronutrient supplementation, deworming, attention to low maternal weight with Plumpy Mum, and identification and ambulatory treatment of acute malnutrition in children under five. Multisectoral service points will be installed, and nutritional actions will be complemented with health, WASH, and child protection activities, including prevention of trafficking and gender-based violence (GBV) prevention and response.

Furthermore, nutrition services for children under five, including treatment and follow up of acute malnutrition, were provided in the Santa Ines outpatient centre, Valencia municipality, Carabobo state. Preventive nutrition services, such as micronutrient supplementation, were provided to 104 pregnant and 109 lactating adolescents. Also, 91 pregnant and 32 lactating adolescents were identified as being undernourished (out of 758 pregnant and 555 lactating adolescents screened) and received Plumpy Mum. Finally, 231 pregnant and lactating adolescents received micronutrient supplementation and 173 received deworming medication.

Preventive and curative nutrition services were provided to 4,172 children under five (2,103 girls and 2,069 boys) including 662 indigenous, and 40 children with disabilities. In addition, 1,313 PLW received nutritional services. A total of 283 pregnant women, out of 758 pregnant women screened, were identified as being undernourished. UNICEF also provided treatment to 248 undernourished pregnant women to improve their nutritional status with Plumpy Mum and to reduce the risks of babies with low birth weight and infant maternal morbidity. Additionally, 1,912 caregivers received infant and young children feeding (IYCF) counselling.

In January, anthropometric screenings were performed on 4,172 children under five (2,103 girls and 2,069 boys), across 16 states.<sup>1</sup> In total, 357 children (181 girls and 176 boys) were identified with acute malnutrition, including 100 with severe acute malnutrition (SAM) and 257 with moderate acute malnutrition (MAM) and received treatment and are being followed-up. 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. Also, 2,882 children (1,428 girls and 1,454 boys) under five received multiple micronutrient powders, 760 children (401 girls and 359 boys) received an energy and protein supplement for the prevention of acute malnutrition in the form of lipid-based nutrients (LNS-MQ), and 2,245 children (1,103 girls and 1,142 boys) 2-14 years old received deworming treatment.

During the reporting period, the UNICEF-led Nutrition Cluster conducted the Cluster Coordination Performance Monitoring (CCPM) as an indication of the Global Nutrition Cluster to self-assess the cluster performance based on the six core functions and AAP, as follows: 1) Support service delivery considering gender and inclusion, 2) Inform the HC/HCT's strategic decision-making, 3) Develop a gender and GBV responsive strategy, 4) Monitor and evaluate performance including initiatives on gender equality and GBV protection and prevention, 5) Build capacities on preparedness and contingency planning including initiatives to empower women and girls and reduce GBV and 6) Advocate for gender equality and protection against sexual exploitation, abuse and GBV. Sixteen cluster partners participated in the exercise and results will be shared at a workshop in February to receive feedback from partners and develop a workplan to improve the cluster functioning.

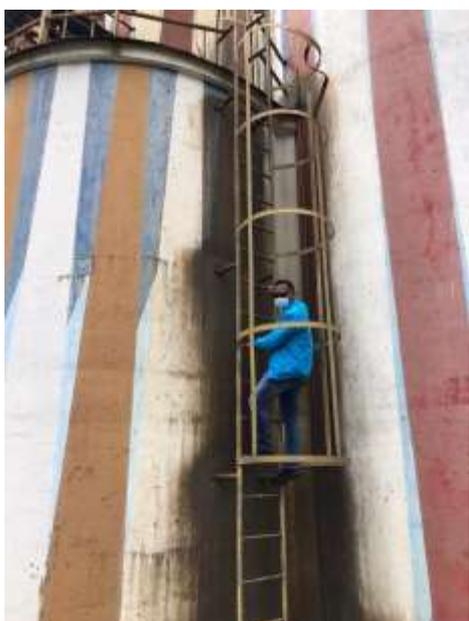
In addition, the Nutrition Cluster consolidated the 5W reports and progress from sector partners' response, to produce the [Nutrition Cluster Response Dashboard for 2020](#). According to data collected, the Nutrition Cluster reached 62 per cent of the HRP 2020 target population, including 328,389 children under five, 4,286 children above five and 103,788 PLW in 280 municipalities across 24 states. A total of 33 sector partners contributed to these results, including UNICEF partners.

## WASH

During January, UNICEF focused on safe water provision 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.

UNICEF continues collaborating with the ministry of water (MoW) to support safe water access in the most vulnerable states. In Táchira, UNICEF continued building resilience through ongoing projects, in particular the Cordero water treatment plant, through the rehabilitation of its main generator and purchasing of maintenance supplies in order to ensure continued access to safe water for some 1.3 million people across 13 municipalities. In Bolívar, UNICEF installed one 95m<sup>3</sup> tank, and supported existing tanks with water trucking in Warao and Itoyonkon communities, reaching 2,000 indigenous people. These interventions were complemented with community-led hygiene promotion activities, through the distribution of household water treatment and storage supplies and hygiene items, and hygiene campaigns benefitting 14,282 people (1,780 girls, 2,101 boys, 6,021 women, 4,380 men). In addition, UNICEF and partners distributed a total of 123 mosquito nets in Bolívar and Delta Amacuro, benefitting a total of 410 people.

<sup>1</sup> Anzoátegui, Apure, Aragua, Barinas, Bolívar, Carabobo, Distrito Capital, Falcón, Mérida, La Guaira, Miranda, Portuguesa, Sucre, Táchira, Yaracuy and Zulia.



©UNICEF/2020. UNICEF Venezuela Country Representative, inspecting the main water system in Táchira and Mérida states.

UNICEF also provided infection prevention and control (IPC) support in 77 health care facilities (HCFs) across seven states,<sup>2</sup> through the distribution of key cleaning and hygiene products and personal protective equipment (PPE), installation of handwashing points and provision of technical assistance and capacity building on IPC-related subjects such as handwashing, environmental cleaning, HCFs waste management practices and use of PPE. UNICEF is scaling up infrastructure works through a newly drilled borehole in Domingo Luciani Hospital, Caracas. Furthermore, UNICEF also installed 16 saline electrolytic chlorine generators in 16 main hospitals across seven states, allowing production of enough chlorine for water disinfection, cleaning/disinfection and handwashing purposes, using table salt. Interventions were complemented with the provision of hygiene kits to patients, health, operations and maintenance staff,<sup>3</sup> also contributing to the sustainability of quality health services, by promoting ownership and community engagement.

UNICEF and implementing partners continued supporting protection centres and migrant temporary shelters<sup>4</sup> for returning Venezuelans from neighboring countries. In January, UNICEF supported four centres across Bolívar and Zulia states with daily access to water, through water trucking and/or rehabilitation works, and distribution of handwashing, cleaning and disinfection supplies, benefiting 2,363 people (487 girls, 358 boys, 352 men and 1,166 women). UNICEF also supported 50 schools in Apure, Bolívar, Miranda and Zulia states with WASH infrastructure rehabilitation, distribution of hygiene, cleaning and disinfection supplies, which will ensure 28,134 people (12,794 girls, 12,875 boys children, 1,257 women and 1,208 men) have access to adequate WASH services when schools re-open.

Under UNICEF leadership, the WASH Cluster focused on completing an internal review to inform the sectoral work-planning, relaunching pending action points from the national cluster and associated working groups in order to consolidate progress made in 2020. To this end, preparations are underway within the Strategic Advisory Group for a workshop to present, define and prioritise key sectoral plans of action in various branches of work. In addition, the WASH Cluster provided briefings to donor and other focal points with regards to sectoral analyses, priorities and challenges, and sought to ensure that end of year reporting provides a basis for improved response tracking over 2021, notably through an updated sectoral dashboard.

### **Child Protection and Gender-Based Violence**

In January, UNICEF continued strengthening local child protection systems in 15 states, benefitting 5,606 children (2,703 boys and 2,903 girls) with protection measures and specialized protection services such as legal support, psychosocial support, case management and alternative care. A total of 9,723 children (4,813 boys and 4,910 girls) and 2,464 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 459 women (277 women and 79 men) and children (70 girls and 33 boys) also received prevention or response care services for GBV, including case management, psychosocial support and legal assistance.

Some 3,425 parents, caregivers and community members (2,622 female and 803 male) have been trained on prevention of violence, prevention of sexual abuse and prevention of family separation, and 6,454 people (3,692 female and 2,762

<sup>2</sup> Anzoátegui, Bolívar, Delta Amacuro, Distrito Capital, Miranda, La Guaira and Zulia

<sup>3</sup> To support COVID-19 patients and their families, and other families with malnutrition, disabilities, other illnesses, based on criteria established by the WASH Cluster; and empower and motivate health care staff to keep working in these facilities.

<sup>4</sup> PASI by its Spanish acronym, also includes centres across the Venezuela/Brazil border.

male) have participated in awareness raising activities. In Bolívar state, UNICEF's counterpart established integrated services for vulnerable children and families in the border city of Santa Elena de Uairén and supported the accreditation of new child protection council's civil servants in the municipality of El Callao, a mining area in that state.

During the reporting period, child protection counsellors provided services to adolescent girl survivors of human trafficking in Delta Amacuro state. With UNICEF's support, these adolescent girls gained access to specialized multidisciplinary services, including health and psychosocial support, among others. In Táchira state, the Integrated Care Service Centre for children and women in human mobility, located in the border area in San Antonio provided support to 290 people (197 female and 93 male). Most of the services provided were related to psychosocial support, support and guidance for documentation and separated children. Also, in Táchira state, one of the newly established Ombudsman Offices in four prioritized hospitals (*Defensorias Hospitalarias*) provided assistance to four children involved in a car accident that affected 19 people on the move at the border area.

In Zulia state, UNICEF provided workshops on child protection risks for children on the move for 18 civilian and military personnel working in the PASI in La Guajira. UNICEF also supported children and families who returned to Venezuela, providing hygiene kits, COVID-19 prevention kits and mosquito nets. In Maracaibo (Zulia state), a number of activities such as workshops on self-care for children, recognition of emotions and affirmative parenting sessions were launched as part of the response interventions in urban communities under the framework of UNICEF's prevention strategy against violence and child abuse reaching a total of 134 people (91 female and 43 male). In Lara state, 424 children and their caregivers (316 female and 108 male) received child protection services including family reunification, training on alternative care and awareness activities to prevent family separation.

The Child Protection Area of Responsibility (AoR) and the Nutrition Cluster developed the Regional Inter-Cluster Coordination Mechanism, a direct channel for partners to report alerts of sectoral needs or cases which need immediate assistance, to deliver response through the partners' presence and capacity. In addition, 144 people participated in mental health and psychosocial support (MHPPS) workshops, promoted by the AoR in Geneva, which the participation of international specialists.

## Education

The second quarter of the school year began in January under the distance modality, but spaces for pedagogical counselling are available in schools during the weeks the Government allows quarantine flexibilization. During that time families and students receive face to face services, including counselling. UNICEF is preparing a teacher training programme for the safe reopening of schools based on UNICEF's global guidelines to be used by the ministry of education (MoE) and other implementing partners. Likewise, under the technical leadership of UNICEF, MoE technical teams are currently designing an accelerated education programme for overaged out-of-school children.



© UNICEF/2021/ Tablante. A child benefits from the school feeding programme in Peñón de Tapipa school, Acevedo municipality, Miranda state.

In January, as part of the strategy to support educational continuity, UNICEF distributed school kits to 67,506 children and adolescents (34,048 girls and 33,459 boys) in 189 schools in the states of Anzoátegui, Bolívar, Falcón, Lara, Mérida and Miranda. Out of this group, 1,781 are children with disabilities in special education schools and 480 are indigenous from Amazonas, Anzoátegui, Delta Amacuro and Zulia states. During January, the school feeding programme benefited 47,461 children and adolescents (23,898 girls and 23,563 boys) in the states of Amazonas, Apure, Bolívar, Miranda, Táchira and Zulia, including 1,156 indigenous children. The programme was implemented in two modalities: preparation of hot meals in schools and delivery of non-perishable food bags. Similarly, direct educational assistance was provided to 74,116 children and adolescents (37,047 girls and 37,069 boys) in subsidized schools across 16 states, through the design and delivery of didactic guides containing activities by grades and educational levels, together with academic follow-up by school teachers. Through radio, 15 educational programmes called 'School on the Radio,' were designed and broadcast, with didactic content that indirectly benefited 2,738,343<sup>5</sup> children and adolescents (1,462,108 girls and 1,276,235 boys) and included the participation of 47 children (22 girls and 25 boys) as presenters of the radio programme. This UNICEF-supported education service was complemented with psycho-educational support interventions for 60,666 children and adolescents (33,456 girls and 27,210 boys) through specific guides with topics on self-care, healthy

routines at home, coexistence and values for families in times of quarantine. A total of 119 out-of-school children (52

<sup>5</sup> Fe y Alegría audience estimates are calculated through the radio platform, under an audience measurement methodology. This audience is counted as indirect beneficiaries.

girls and 67 boys) in the state of Zulia, all belonging to indigenous groups, were benefitted with levelling activities. Additionally, 199 teachers (151 females and 48 males) were trained in a training of trainers' (ToT) programme on (a) education in emergencies and (b) UNICEF's life skills development programme for adolescents, who will in turn build capacities among other teachers nationwide.

During January, the Education Cluster created the Thematic Working Group 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. Under the framework of 'Teacher's Week,' the Cluster organized two international workshops: (a) "Resources for learning and teaching practice" with the participation of the UNESCO Latin-American Laboratory for Assessment of the Quality of Education (LLECE) and (b) "Inclusion in a diverse world" with international experts and national public officers. Over 2,000 people participated on-line to both events and 7,000 interactions and views to date were received. Cluster members also participated in the Core Skills Coordination Training led by the Regional Education Group and the Global Education Cluster.

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

As part of the promotion of positive life-saving practices, and in preparation for a return to school, 139,502 C4D materials, regarding prevention of COVID-19 and that included IPC messages, psychosocial support in pandemic times, hand washing and preventive measures directed to children and adolescents were distributed to 158 schools in Miranda and Capital District. Schools are opened every other week for parents seeking pedagogical counselling. Flyers and posters of school schedules for students and teachers were also distributed to promote the creation of school activities routines from home.

UNICEF also supported the delivery of 5,000 handwashing stickers to hospitals and the dissemination of two radio spots on Salmonella prevention, reaching 185,817 people in the state of Anzoátegui. In Zulia state, 2,702 people were reached by 30 CEPIN<sup>6</sup> community promoters with intersectoral messages and family practices for life.

In Táchira state, FUNREAHV's 63 community promoters received equipment (clothing, materials and other equipment) for their work in the municipalities of Junín, San Cristóbal, Pedro María Ureña and Bolívar to strengthen C4D's community participation strategy. This team of promoters disseminates COVID-19 prevention messages via instant messaging, reaching 6,047 people. Simultaneously, promoters have visited their communities, raising awareness among 2,258 people (402 girls, 367 boys, 868 women, 621 men) with different messages. Also, 45 FINAMPYME community promoters working in San Cristóbal, García de Hevia, Rafael Urdaneta, Pedro María Ureña, Fernández Feo, Bolívar, Lobatera, Ayacucho, Junín, Torbes and Panamericano municipalities, participated in the



© UNICEF/2021/ García. FUNREAVH Community promoters gathered in Urena, Táchira state, around a tank installed by UNICEF for the community bordering Colombia.

workshop "Sharing Knowledge to Strengthen the Performance of the Community Social Promoter." In Bolívar state, 427 community promoters who will disseminate intersectoral messages and family life practices have been selected from seven implementing partners: ALINCA, Paragüero, RET, Protección Civil Caroní, NRC, Kapékapé and Fe y Alegría.

In terms of AAP, a national report line has been set up: workflows and standard operating procedures have been defined, staff has been trained on management of incoming cases, a network of focal points has been set up, and a communication strategy has been prepared. In addition, the in-place community feedback mechanism system established in a migrant centre in San Antonio Bus Terminal has proved to be working, and feedback on users' satisfaction and suggestions on how to improve services are being analysed on a monthly basis to incorporate them in programmes.

### **Planning, Monitoring and Evaluation**

During the month of January, UNICEF Venezuela performed 268 monitoring activities, carried out entirely by staff members from different field offices. The effort focused mostly on health, WASH and nutrition supplies (86.5 per cent of activities) which had been delivered to 204 health facilities in 13 federal entities. As part of monitoring activities, UNICEF also obtained information regarding supply needs in those same facilities. Most facilities required PPE for frontline workers, which has been a consistent need during the past months due to the pandemic.

<sup>6</sup> CEPIN: An UNICEF implementing partner, *Centro de Promoción Integral del Niño*.

## Supply and Logistics

In January 2021, UNICEF Venezuela ordered goods for a total value of US\$ 3.9 million, of which 98 per cent were for international procurement, mainly vaccines and cold chain equipment. Local procurement of goods and services amounted to a total of US\$ 82K.

Also, UNICEF has received in country 219.7 tons of goods, mainly medical material and nutrition items for a total value of US\$ 639K by sea, and one air cargo as well as information, communication and technology equipment for US\$ 4,788.

In January 2021, UNICEF distributed US\$ 969,544 of relief supplies, split between US\$ 112,636 direct delivery of syringes to SEFAR (MoH's main warehouse) and US\$ 856,908 coming from UNICEF warehouses.

## Human Interest Stories and External Media

External communication activities during January focused on following some December initiatives such a press release to inform the winners of the writing contest, 'School that is home - [La escuela que es mi casa](#),' aimed to promote adolescents' participation and motivate them to express their feelings about home schooling. Also, in support to resource mobilization activities, a video about UNICEF Venezuela's comprehensive response was registered and disseminated among international donors. Other multimedia material for accountability and visibility purposes included 44 photos, one human interest story and one video produced and disseminated through social media and internal channels.

On digital, UNICEF Venezuela social media accounts received over 156,592 interactions (comments, likes and re-tweets) and 12,148,526 impressions with messages on COVID-19 prevention, immunization response, education and general UNICEF programmatic response.

### Human interest stories and multimedia stories:

- Video: [UNICEF contributes to the national immunization programme in Venezuela](#)
- Video: [UNICEF Venezuela response](#)
- HIS: [¿Cómo se conservan las vacunas que llegan a Venezuela?](#)
- Press Release: [Niños, niñas y adolescentes de 10 estados del país ganaron el concurso La escuela que es mi casa](#)

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## Annex A

### Summary of Programme Results (HAC)

Sector	UNICEF and Partners		Sector Response <sup>7</sup>	
	Jan-Dec 2021 target	Total results (Jan)	Cluster Jan-Dec 2021 target	Cluster Results (Jan)
<b>Health</b>				
Children aged 0 to 12 months vaccinated against measles	533,600	25,873		
Children aged 0 to 12 months fully vaccinated with three doses of pentavalent vaccine	532,192	23,134		
Pregnant women & newborn babies receiving maternal/neonatal life-saving services in UNICEF-supported facilities	246,900	4,501		
Healthcare workers in healthcare facilities and communities provided with personal protective equipment (PPE)	60,000	294		
<b>Nutrition</b>				
Primary caregivers of children aged 0 to 23 months receiving infant and young child feeding counselling	155,500	1,912	313,333	1,972
Children aged 6 to 59 months with severe and moderate acute malnutrition admitted for treatment.	51,447	426	67,747	456
Children aged 6 to 59 months and pregnant and lactating women receiving micronutrient supplementation	688,100	3,933	787,010	3,933
<b>WASH</b>				
People accessing a sufficient quantity of safe water for drinking, cooking and personal hygiene	3,000,000	35,115	3,840,000	37,880
Children accessing appropriate water, sanitation and hygiene facilities and hygiene services in learning facilities and safe spaces	300,000	24,424	580,500	29,424
People receiving basic hygiene information and/or essential hygiene products <sup>8</sup>	1,540,000	40,907	3,526,800	49,602
<b>Child Protection, Gender-based Violence &amp; PSEA</b>				
Children and caregivers accessing mental health and psychosocial support	150,250	7,265	455,363	7,270
Women, girls and boys accessing gender-based violence risk mitigation, prevention or response interventions	60,000	459	886,364	4,410
People with access to safe channels to report sexual exploitation and abuse	10,000	- <sup>9</sup>		
<b>Education</b>				
Children accessing formal or non-formal education, including early learning <sup>10</sup>	150,000	119	191,362	400
Children receiving individual learning materials	1,180,000	67,507	1,487,622	67,587
Children benefiting from balanced school feeding programmes with hygiene standards	400,000	47,461	594,130	50,215
<b>C4D, Community Participation &amp; AAP</b>				
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	- <sup>11</sup>		
People reached with messages on access to services and life-saving behaviours	4,800,000	3,869,702 <sup>12</sup>		

<sup>7</sup> Sector Response includes UNICEF implementing partners and cluster response.

<sup>8</sup> This indicator is changed because it focuses only on people reached with information and basic hygiene products.

<sup>9</sup> This indicator will be reported starting from February 2021.

<sup>10</sup> This indicator only applies to out-of-school children.

<sup>11</sup> This indicator will be reported starting from February 2021.

<sup>12</sup> To calculate the number of beneficiaries for this indicator, we look at 4 types of documents: 1) reports on the number of messages broadcast by telecommunication companies (Radio and TV); 2) outreach metrics for own social networks and reported by Partners; 3) reports of messages sent by mobile operators; and 4) reports of Implementing Partners / Promoters, of people to whom messages are disseminated (Instant Messaging, SMS). The public monthly reached by these mass communication activities is expected to be roughly the same. In other words, the accumulated number of beneficiaries will always be the maximum number reached in any given month of the year. For instance, if we reach 3,5 million beneficiaries with this activity next month, the accumulated number will continue to be 3,8 million.

## Annex B

### HAC Funding Status<sup>13</sup>

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	36,664	0	12,154,830	22,723,506	65
WASH	70,200,000	0	0	6,701,673	63,498,327	90
Child Protection	16,255,000	30,747	0	2,026,646	14,197,607	87
Education	50,260,000	23,653	0	4,086,194	46,150,153	92
C4D	3,200,000	4,435	0	997,206	2,198,360	69
<b>Total</b>	<b>201,790,000</b>	<b>122,699</b>	<b>0</b>	<b>28,178,921</b>	<b>171,290,020</b>	<b>85</b>

<sup>13</sup> As defined in [Venezuela 2021 Humanitarian Appeal](#) launched on 3 December 2020 for a period of 12 months.