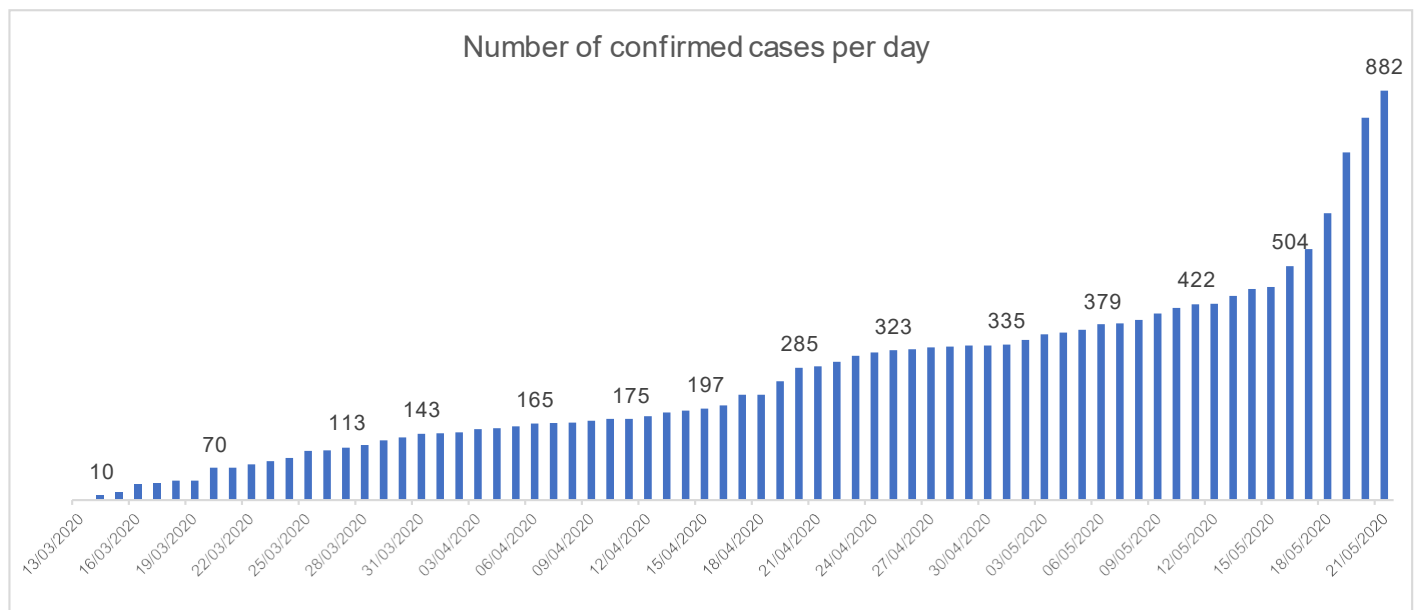


KEY MESSAGES

- As of 21 May, the Venezuelan authorities confirmed 882 COVID-19 cases in 25 territories.¹ This number includes 10 deaths as well as 262 people who have recovered. The most affected states are Nueva Esparta, Miranda, Tachira, the Capital District and Bolivar.
- The Government has extended the State of Emergency decree, quarantine and social distancing measures, in place since 13 March, for an additional 30 days until 12 June.
- As of 8 May, 36 humanitarian organizations have reported the implementation of 557 activities in 16 states, reaching 1,020,877 people with assistance. In addition to the COVID-19 response and assistance to returnees, several organizations continued their activities in the Education, Nutrition, Food Security and Protection Clusters, albeit at a reduced level.
- Returnees from neighbouring countries continue entering Venezuela via border crossings and/or 'special flights' provided by the authorities. Over 80,000 people have returned to Venezuela: some 40,000 persons have been reported to have returned since the beginning of the quarantine and the closing of the Colombian border in mid-March, and 45,905 returned between 6 April and 21 May, of whom 510 have tested positive for COVID-19.

OVERVIEW

- As of 21 May, 882 COVID-19 cases (482 men and 400 women) had been officially confirmed at the national level. Of these, 262 people have reportedly recovered, and 10 deaths associated with COVID-19 were reported (a 1.1 per cent mortality rate). Between 15 and 22 May, a 92 per cent increase in cases has been reported. The most affected states are Nueva Esparta, Miranda, Tachira, the Capital District and Bolivar.



- According to official sources, as of 21 May, 58 per cent of the confirmed cases were imported (510 cases), while 29 per cent resulted from community transmission and 13 per cent from contact with international travellers. Of the imported cases, 303 arrived from Colombia, 65 from Brazil, 49 from Peru, 35 from Ecuador, 29 from Spain and 29 from other countries.

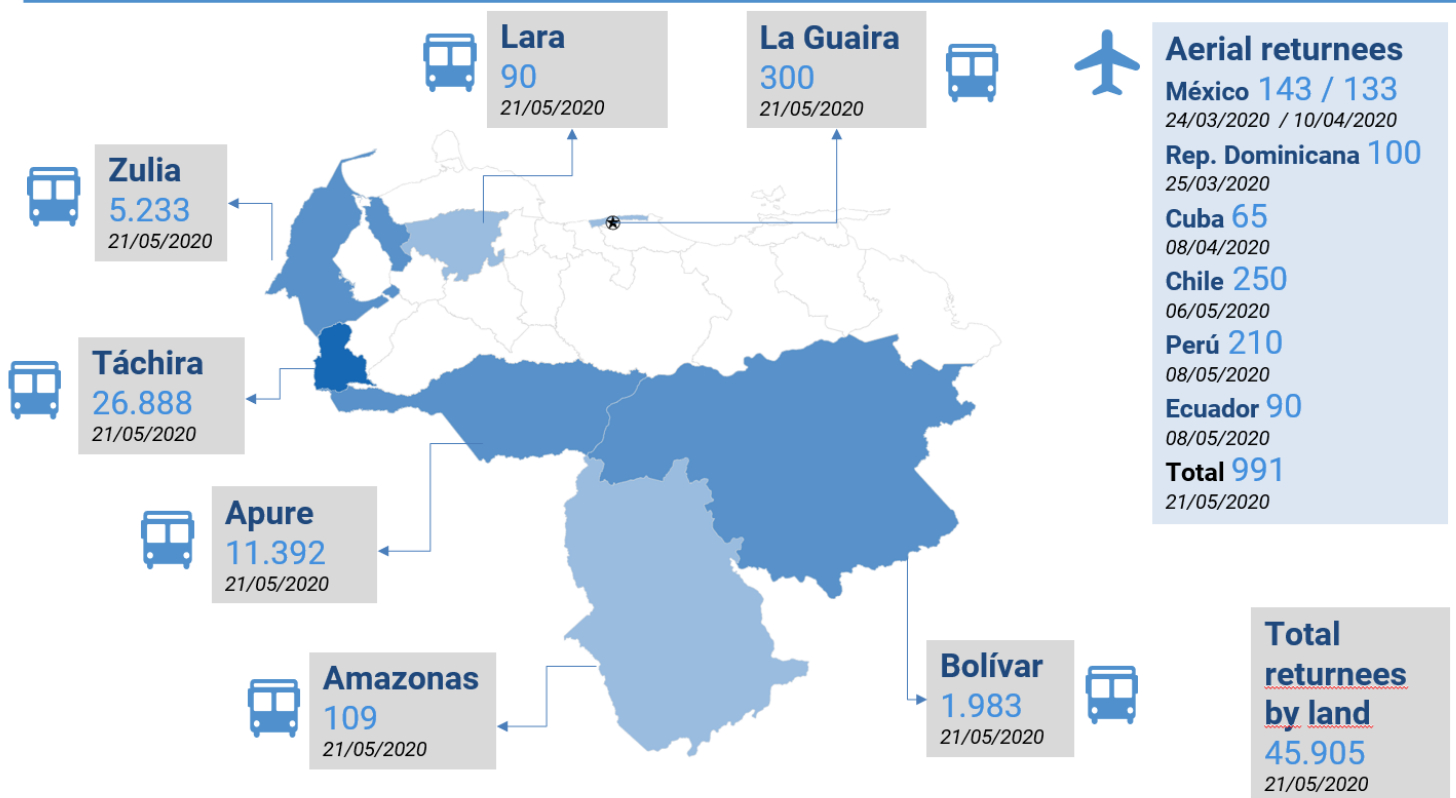
¹ Twenty-three states, the Capital District and the Los Roques archipelago in the Francisco de Miranda Insular Territory.

- As of 21 May, authorities reported having carried out 697,691 diagnostic tests, of which at least 16,577 were PCR tests. Increasing the capacity to undertake PCR tests is a priority considering that rapid test accuracy is limited when performed on people infected for less than 5-8 days. The laboratory at the Rafael Rangel National Institute of Hygiene in Caracas has increased its capacity, performing some 600 PCR tests daily with plans to further increase capacity. The mobile laboratory in Tachira state processes some 300 PCR tests daily.
- On 12 May, the Government extended the State of Emergency decree as well as quarantine and social distancing measures, in place since March 13th, until 12 June. The National Institute of Civil Aviation extended the restriction on air operations for the same period throughout the country excluding cargo, humanitarian, repatriation, postal, or UN-authorized flights.
- PAHO/WHO has recommended that the relaxation of quarantine measures takes place gradually and following epidemiological criteria. PAHO/WHO also recommend increasing the number of diagnostic tests to identify cases, isolate positive cases, and place persons that were in contact with positive cases in quarantine. Likewise, emphasis on social distancing measures, handwashing and surface disinfection should continue.



Number of returnees during COVID-19 pandemic

From April 6 to May 21, 2020



Fuente: Presidential Commission for the Follow-up, Control and Prevention of COVID-19 and Ministry of the People's Power for Foreign Affairs. Report date: May 21, 2020

- The authorities reported the donation of more than 46 tons of medical supplies and equipment as part of cooperation with China, including protective equipment and diagnostic kits, among other items.
- The health and epidemiological surveillance protocol currently employed by the authorities to assist returnees includes rapid screening tests at points of entry. Returnees who test negative are transferred to the Points of Comprehensive Social Assistance (PASI) to complete their quarantine. Previously in Tachira state, returnees remained at the temporary accommodation shelters for five days before being transferred to their final destinations elsewhere in the country. In other border states, such as Apure, Bolivar and Zulia, returnees were required to complete 14 days of preventive quarantine. On 18 May, as a result of the increasing number of COVID-19 cases among returnees, the protocols were revised to require all returnees to complete 14 days of quarantine in the state through which they entered the country. Returnees who test positive are to receive medical assistance and are kept in isolation. National authorities will coordinate the transfer of returnees to their destination states after a second rapid negative test. Each state has implemented protocols to prevent the spread of COVID-19 during the reception of returnees.

- The movement of people returning to Venezuela continued due to the economic and social challenges resulting from the COVID-19 outbreak in the region, as well as from an increase of xenophobia in host communities. Many people also return because of unmet expectations and the promise of greater support from their families and communities during the crisis. Between 6 April, the day on which the mandatory quarantine for returnees was established, and 21 May, 45,905 people (an average of 1,000 people per day) returned to Venezuela by land, mostly through Tachira. Additionally, some 40,000 people have been reported to have returned since the beginning of the national quarantine and the closing of the Colombian border in mid-March, including pendular crossings, bringing the total number of returnees to more than 80,000.
 - Between 6 April and 21 May, 26,888 people completed the mandatory quarantine in temporary shelters in Tachira state. Up until 21 May 11,392 people entered the country via the Jose Antonio Paez International Bridge, in Apure state. On 18 May, the municipality of Paez imposed a curfew from 4 to 10PM. in response to a recent increase in COVID-19 cases.
 - In Zulia state, despite the border closure, partners report that Venezuelan and Colombian authorities allow the return of around 300 people per week, depending on the capacity of the five PASIs to accommodate them. However, reports also speak of cases of returnees using irregular crossings, thereby avoiding monitoring and screening, with an estimated 100 people crossing daily at the La Guajira area, as well as the pendular crossings in Guajira and Sierra de Perija. As of 21 May, 5,233 people have returned to the country via Zulia state.
 - As of 21 May, 1,983 people had returned via Santa Elena de Uairen from Pacaraima (on the border with Brazil) and 109 people through the state of Amazonas.
 - A total of 510 returnees have tested positive for COVID-19, with a significant increase reported in the days prior to the publication of this report. Some cases have been diagnosed after their transfer to the destination states, highlighting the importance of conclusive diagnoses at the points of entry and adequate treatment of the infected and epidemiological surveillance protocols to prevent the spread of COVID-19 in other states.
 - The Government implemented a humanitarian flight plan benefiting at least 991 returnees from Chile, Cuba, Ecuador, Mexico, Peru and the Dominican Republic. Authorities have provided temporary accommodation in La Guaira state for quarantine compliance and the implementation of sanitary controls.
 - There is no official information on the number of returnees from Guyana and Trinidad and Tobago to Delta Amacuro and Sucre states.
 - Logistical constraints for humanitarian organizations include restrictions on movement and access to quarantine centres, and the disruption of the global supply chain. Fuel shortages constitute a major obstacle to humanitarian organizations throughout the country.
 - At the national level, there are continuing shortfalls in the availability of electricity, water and domestic gas. Some communities in the western part of the country and the Andean region report extended power shortages, prolonged water supply interruptions and telecommunications network failures. In some communities, there have been protests demanding reliable basic services.
 - In the context of COVID-19 prevention, it is important that humanitarian operations continue to provide comprehensive responses to affected populations. While initiatives in the health and WASH sectors are vital in response to the Covid-19 pandemic, it is essential that a multi-sectoral response beyond COVID-19 be implemented that protects the well-being of the most vulnerable and promotes long-term development.
 - On 7 May, the UN published the updated [COVID-19 Global Humanitarian Response Plan](#) (GHRP) with a revised financial requirement of US\$6.7 billion, which includes the \$72 million corresponding to the Intersectoral COVID-19 Preparedness and Response Plan in Venezuela. Since the launch of the first edition of the GHRP, \$1 billion has been pledged.
 - On 7 and 8 May, the Humanitarian Coordinator (HC) and representatives from UNICEF, UNHCR and IOM visited Tachira state to inform themselves about the situation of the returnees, conditions at the temporary shelters that accommodate them during quarantine, sanitary protocols implemented at the border and operations to contain the spread of COVID-19. The delegation met with local civilian and military authorities to review the operational protocols, identify collaboration and support pathways, and seek ways to strengthen humanitarian assistance to collective shelters (PASIs).
 - On 13 May, representatives from UNHCR, IOM, UNICEF, and OCHA visited the temporary shelter at Complejo Los Caracas in La Guaira state, which accommodates returnees arriving with humanitarian flights organized by the Ministry of Foreign Affairs and from border states. Local authorities informed the delegation about the response; UNHCR and UNICEF delivered relief and WASH supplies.
 - AS of 8 May, though the COVID-19 monitoring tool, 36 organizations reported the implementation of 557 activities in 16 states reaching 1,020,877 people. Thirty-five per cent of the activities corresponded to the WASH Cluster, 20 per cent the Health Cluster, 14 per cent corresponded to actions in the Shelter, energy and Non-Food Items (NFI), Logistics and Nutrition clusters, and to cross-cutting themes and communications issues.
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RESPONSE (as of 14 May)

Epidemiological surveillance and laboratory services

Key actions

- PAHO/WHO continued to advise national authorities on the development of guidelines for surveillance, laboratory protocols, patient care and risk of infection transmission. PAHO/WHO supported the dissemination and translation of WHO guidelines, protocols and documents with information on COVID-19.
- PAHO/WHO continued to support case load projections, including severe and complicated cases, for planning purposes.
- From their field offices, PAHO/WHO supported Ministry of the People's Power for Health (MPPS) by investigating suspicious cases and following-up on travellers.

Points of entry

Key actions

- Shelter, Energy and NFI cluster partners supported the strengthening of the temporary shelter network with the distribution of solar lamps and kits adapted to people with special needs, including returnees, people on the move and host communities.
- The UN and its humanitarian partners have organized trainings on the administration and coordination of temporary shelters for local authorities and personnel at the PASIs in Apure, Tachira and Zulia states. UNHCR has conducted information sharing sessions on communication with communities and people with specific needs. IOM, PAHO/WHO, UNICEF and UNFPA have organized trainings on WASH-related issues, adherence to Sphere standards, sanitary protocols and gender-based violence prevention.
- Between 20 March and 12 May, UNHCR, through partners, delivered 9,318 NFIs (including hygiene kits, water filters, buckets, jerry cans, mosquito nets, menstrual cups, mats, lamps and solar poles), benefiting 3,531 vulnerable people including children and adolescents, women, people with disabilities and the elderly in Tachira state. UNHCR also delivered 14 tons of charcoal reaching over 14,600 people through communal kitchen programmes.
- UNICEF continued supporting the daily delivery of 18,000 litres of trucked water at the San Antonio Passenger Terminal, in Tachira state, reaching some 2,000 people that use the handwashing point. Two hand-washing points for chemical toilets were installed: one at the San Antonio Terminal and another at the PASI in San Antonio National High School, serving 957 people every week. With the support of San Antonio Civil Protection, a hydration point with 1,500-liter portable tanks was provided at 3 PASI, serving 1,100 people daily.
- UNICEF delivered 475,000 litres of trucked water to communities and to the PASI in San Antonio and Ureña, benefiting 10,242 people. UNICEF also delivered 282,000 litres of drinking water to six tanks in the municipalities of Bolivar and Pedro Maria Ureña in Tachira state, serving 11,280 people monthly.
- UNICEF activated the Comprehensive Assistance Centre for Children, Adolescents and Women (CAINNAM) at the San Antonio Terminal. As of 14 May, the CAINNAM reached over 1,840 people (916 women, 759 children and 167 pregnant women) with assistance. UNICEF also delivered deworming and micronutrients to children and pregnant and lactating women at the CAINNAM.
- Between 9 and 11 May, IOM delivered 200 food kits serving over 720 people at the temporary shelters it supports in Ureña and San Antonio, in Tachira state.
- At Ciudad Guayana, in Bolivar state, UNHCR supported local authorities with 20 bunk beds, 40 bed sets, personal hygiene products, disinfectants, gloves, antibacterial gel and facemasks for returnees accommodated at the shelters. UNICEF reached more than 900 people with individual and family hygiene kits, chlorine tablets, flyers on water purification using chlorine tablets and posters on COVID-19 prevention, at 15 PASI in Bolivar state.
- At the PASI at Santa Elena de Uairen, IOM offered daily medical visits including psychological support, referral services, and educational sessions on COVID-19 prevention. On May 9th, these activities reached 67 vulnerable people.
- Between 14 April and 5 May, UNHCR, in coordination with the mayor's office of Paez in Apure state, and the "Ombudsman" (*Defensoría del Pueblo*), delivered 734 hygiene kits, 1,128 bamboo mats and 1,000 mats for returnees quarantined at the PASI.
- IOM and UNHCR organized trainings on planning, the installation, opening, maintenance and aftercare of accommodation spaces for the military detachments responsible for PASI security in Apure state.

Infection prevention and control and case management

Key actions

- Health Cluster partners reported on their initiatives to strengthen community capacity for health promotion and COVID-19 prevention and response. Partners purchased and distributed equipment, supplies, medicines, personal protective equipment to hospitals and outpatient clinics.
- PAHO/WHO provided advice to senior technical staff and the MPPS on clinical COVID-19 case management.
- UNHCR delivered 5,073 medical supplies to INSALUD-Apure to support health-care centres in Apure state.
- UNICEF rehabilitated the electrical generators of the Hospital Peñuela Ruiz Hospital, in San Cristobal, and the Dr. Samuel Dario Maldonado Hospital at San Antonio, both in Tachira state. It also supported the installation of five 1,500-litre foldable tanks for handwashing within the health network, to serve 15,000 people.
- In Bolivar state, UNICEF delivered 20 manometers and spirometers to the Public Health Institute to support hospitals and sentinel centres.
- UNICEF, through its partners, delivered personal protection equipment (PPE) to the Municipal Councils for the Rights of Children and Adolescents in Baruta and Chacao, which provide monthly assistance to 4,500 children and adolescents, and at least 2,015 adults in Baruta and 1,377 in Chacao.
- WASH cluster partners provided water treatment, cleaning and hand washing supplies and materials, and distributed hygiene and infection prevention and control (IPC) kits.
- UNICEF delivered 23 tons of health and WASH supplies to 8 hospitals, 15 outpatient clinics, 17 comprehensive diagnosis centres and 3 health-care centres in Lara, Trujillo and Zulia states. During the first half of May, UNICEF served 1,500 people in the Sierra Nevada community with the distribution of water through an Australian water tank installed jointly with the Mayor's Office of Maracaibo, in Zulia state.
- In the José Antonio Páez, Sabanita and Agua Salada parishes of Bolivar state, UNICEF supported the distribution of 460,000 litres of water benefiting more than 25,000 people. UNICEF also leased four water cisterns and rehabilitated a fifth cistern at HidroBolivar, which will give over 5,550 people access trucked water in Angostura del Orinoco (Agua Salada and Sabanita parishes) and Caroní (Vista el Sol, Unare and Universidad parishes). UNICEF also provided 80 hygiene kits to 400 people in the indigenous community of Pijiguaos, in Cedeño municipality.
- UNICEF through a partner, delivered 19,732 NFI, including masks, antibacterial gel, gloves, water purification tablets, hygiene kits and soaps, for over 17,200 people in protection centres, communities and outpatient clinics in Baruta municipality (Miranda state).

Risk communication and social mobilization

Key actions

- UNICEF supported the Tippy Tap campaign on handwashing and key messages on COVID-19 prevention reaching over 25,660 people in the communities 12 de marzo, 12 de febrero, Etnia Guajira I, II and III and Filuos Norte, in Zulia state.
- UNICEF delivered more than 800 posters, including posters in the wayuunaiki indigenous language, to two outpatient clinics and four CDI, in the Maracaibo and Mara municipalities, as well as to the San Alfonso Niños Cantores del Zulia, Misael Vilchez, Manuel Ángel Puchi Fonseca and María Reina educational centres, in Zulia state. UNICEF delivered 100 posters with information on COVID-19 prevention to the Dr. Adolfo D'Empaire Hospital in Cabimas, in Zulia state.
- At the La Unidad and El Roble CDIs in the Simon Bolivar de San Felix parish of the Caroni municipality, UNICEF delivered 1,400 posters with information on COVID-19 prevention to the reaching 1,500 people.
- UNFPA disseminated messages on radio, television and social networks aimed at preventing and reducing the risks of gender-based violence in the specific context of preventive quarantine.
- UNHCR coordinated a campaign on COVID-19 information via instant messaging and community radio channels targeting vulnerable people in priority communities in Zulia state. Up until May 14th, the campaign had reached more than 30,000 people.
- UNFPA, jointly with PAHO/WHO and the MPPS, designed key messages for dissemination through home visits and social networks among pregnant and lactating women.
- UNHCR continued disseminating key messages on COVID-19 prevention in indigenous languages (Jiwi, Wotuja, Warao, Yekuana, Wayuunaiki and Yukpa), through radio infomercials and instant messaging in Apure, Amazonas, Bolivar and Zulia states.
- The UN published a regularly updated Trello platform focused on communication products for social media. The Trello page is widely disseminated among partners, influencers, journalists and humanitarian personnel. The information products have been translated into indigenous languages.

- OCHA has created a COVID-19 information platform using an interactive dashboard that includes sex- and age-disaggregated data on confirmed cases reported by hospitals and sentinel sites designated for the response, with distribution by state.

Coordination and humanitarian access

Key actions

- There has been regular collaboration with national authorities for the coordination of joint actions. This has included high-level meetings with the Presidential Commission for the Follow-up, Control and Prevention of COVID-19, the Ministries of the People's Power for Health, Foreign Affairs, Defense, Planning and Water Management as well as state and municipal authorities.
- PAHO/WHO organized a meeting with authorities and other sectors, including the scientific and academic community, on how best to prepare for and respond to COVID-19.
- The Humanitarian Team met regularly with national and international NGOs and donors. Regular communication is maintained with legislators, private sector actors and other Venezuelan stakeholders.
- At the national level, communication channels to coordinate COVID-19 response, including for returnees, have been established.
- The evolution of the Covid-19 response and the resulting humanitarian needs have been monitored on a daily basis, including a [situation and response](#) dashboard.
- Jointly with the Ministry of the People's Power for Defense, a mechanism to allow access to fuel for UN vehicles, was established. At the field level, due to shortages of fuel, efforts focused on facilitating its availability for humanitarian partners thus enabling their access to the PASIs.
- Thus far, the Presidential Commission has processed 276 *salvoconductos* (special movement authorizations). The UN advocated for the issuance of additional *salvoconductos* for humanitarian organisations that are part of the Humanitarian Response Plan and require fuel and safe passage for the implementation of their programmes.

Adaptation and continuity of humanitarian operations

Key actions

- Protection Cluster partners' activities included the establishment of hotlines for personal advice on protection cases, monitoring and dissemination of reports on protection trends on the borders and in neighbouring communities and the coordination with counterparts to ensure an appropriate response for vulnerable groups and to mitigate protection risks.
 - UNICEF, through a partner, delivered material for awareness-raising on child and adolescent protection, reaching 2,000 people in Delta Amacuro state.
 - UNICEF organized the first forum for representatives from the states of Apure and Táchira on coping with the COVID-19 quarantine. A total of 132 participants, including child and adolescent protection authorities and personnel from other humanitarian organizations in the region, joined the forum.
 - Through the Health Cluster, UNFPA monitored the availability of sexual and reproductive health services in the context of COVID-19 and advocated for their availability and access.
 - UNFPA worked in 15 hospitals and 30 centres of the community care network, focusing on the application of protocols for the care of obstetric patients during the COVID-19 emergency. UNFPA also provided technical assistance on prevention and care in sexual and reproductive health services during the outbreak, with emphasis on pregnancy and breastfeeding.
 - With UNICEF's support, the Luis Razzetti Hospital in Delta Amacuro increased the number of deliveries and C-sections by 25 per cent since February.
 - UNFPA supported the MPPS during the home visits to provide counselling to pregnant women, conducting vaccination sessions and distributing and injecting contraceptives.
 - Nutrition Cluster partners supported nutritional care centres, health-care centres, outpatient clinics and hospitals with nutritional assistance, and delivered malnutrition supplements to households.
 - In Falcon state, UNICEF supported the delivery of nutritional supplies to the Garcia Coello Hospital, the National Institute of Nutrition, the Jose Maria Espinoza Maternal and Child Hospital and the outpatient clinic in Urumaco. UNICEF visited households to follow-up on patients with nutritional disorders, reaching more than 350 children.
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- In the Etnia Guajira neighbourhood and surrounding areas in Zulia state, UNICEF supported the food distribution to 804 children, pregnant and lactating women and carried out the nutritional assessment and provision of nutritional supplies to 132 vulnerable children.
- UNICEF supported the Mayor's Office in Maracaibo with nutritional assessments, advice and the provision of micronutrients to more than 100 pregnant and lactating women.
- In Bolivar and Anzoategui states, in addition to providing micronutrients to 742 under-five children and 218 pregnant and lactating women, UNICEF also dewormed 911 children between the ages of 2 and 14 and 80 pregnant and lactating women.
- Education Cluster partners disseminated key messages and activities on health and hygiene practices, provided psychosocial support, and education at home. Ongoing activities related to the distribution of school meals (dry or warm, while respecting Covid-19 prevention, protection and hygiene standards) were reported.
- The Education Cluster organized a webinar entitled "Television and education in times of COVID-19: Lessons learned to ensure quality, equity and inclusion", with the participation of educational television teams from the Ministries of Education of Argentina, Cuba and Mexico and specialists from UNICEF, UNESCO and Save The Children.
- In the municipalities of Paz Castillo, Independencia, Tomas Lander, Cristóbal Rojas, Baruta, Hatillo, Sucre, Zamora and Plaza in Miranda state, UNICEF continued supporting the School Feeding Programme by delivering food packages and supplies and preparing hot meals, serving 36,340 children and adolescents.
- UNICEF, through the "Education Cannot Wait" programme, distributed 67 food packages to 268 people in Tachira state as well as food, hygiene kits and self-education guides to 440 adolescents in Zulia state. A total of 1,410 students received school kits in Tachira and Zulia states.
- Food Security Cluster partners distributed non-prepared meals and vouchers to families. Delivery of prepared meals to school and hospital kitchens was also reported.
- The Logistics Cluster disseminates information on accessing logistics services and global guidelines on supporting the supply chain.

ADDITIONAL INFORMATION

- [OCHA platform on the COVID-19 epidemic in Venezuela](#)
- [Power BI Dashboard on the COVID-19 epidemic in Venezuela](#)
- [Trello platform of communication products for social media](#)
- [General COVID-19 information](#)
- [WHO Situation Reports](#)
- [Global monitoring board for COVID-19 cases](#)
- **Social media:** @OCHA_Venezuela; @opsoms; @unicefvenezuela

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www.humanitarianresponse.info/en/operations/venezuela