

## Venezuela

### Update on the context and situation of children

In 2019, the Bolivarian Republic of Venezuela experienced significant changes due to the unfolding economic and political crisis that has undermined the ability of many Venezuelans to meet basic needs. The 2019 Humanitarian Needs Overview (HNO) estimates 7 million people, including 3.2 million children, in humanitarian need.

Venezuela is an oil exporting country, yet its oil production has registered a 49 per cent decrease, from 2017 to 2019, as per direct communication to the Organization of Petroleum Exporting Countries. In 2019, the Economic Commission for Latin America and the Caribbean estimated that Venezuela will register the deepest economic contraction of the region, with a gross domestic product of -25.5 per cent, and -14 per cent during 2020. Additionally, Venezuela's Central Bank reported a 2019 January-September variation of consumer price index of 1,511.3 per cent, while the International Monetary Fund predicts a 10 million per cent inflation rate for 2019. This economic situation has affected household's purchasing power, as salaries are unable to balance currency devaluation and rising prices. Unable to meet basic needs, 4.8 million people have left the country, including many professionals, provoking an outflow of expertise and knowledge with critical effects on quality social service delivery.

Moreover, the ongoing political crisis further degraded after 23 January 2019, when the leader of the opposition-led National Assembly, declared himself Interim President of Venezuela. This declaration divided the international community as a group of member States endorsed it while another group continued recognizing Nicolas Maduro as President of the Republic.

The political context, protracted economic recession and decline in investment – both public and private – have deteriorated infrastructure and services, including public transportation, energy, water supply, health care, education and social protection. Fuel shortage remained unabated in 2019 with critical consequences on the ability of the population to access life-saving services. In March 2019, a national blackout took place and affected the whole country. Despite ongoing efforts to return to normalcy, many parts of the nation are still experiencing continuous shortage of electricity and affecting health care and the electrical-powered national water supply systems.

The United Nations Inter-Agency Group for Child Mortality estimates Venezuela's 2018 median infant mortality rate at 21.4 deaths per 1,000 live births (1996 level), an increase of 47 per cent since 2010. Neonatal mortality rate is estimated at 15.06 per 1,000 live births, 5.2 points higher than the lowest rate achieved in 2003 (9.87 per 1,000 live births). Outbreaks of vaccine-preventable diseases like diphtheria have been reported in 2019, and 552 cases of measles were confirmed. The diphtheria outbreak, that began in July 2016, is ongoing and through 2019, 3,033 suspected cases were reported, with 291 deaths. Malaria transmission has been rising rapidly especially in areas close to mining activities. The seriousness of the situation is best depicted when the Venezuela International Health Regulations National and Venezuela PAHO/WHO Country Office, reported the first confirmed case of yellow fever in Bolivar state, in November 2019.

The 'State of Food Nutrition and Security' report, by the United Nations Food and Agriculture Organization (FAO), affirms that in Venezuela the prevalence of undernourishment has increased primarily due to the economic slowdown, going from 6.4 per cent in 2012-2014 to 21.2 per cent in 2016-2018. Likewise, the FAO report 'Crop Prospects and Food Situation', catalogues Venezuela as a country in need of external assistance for food. The report highlights that *"hyperinflation has severely eroded local purchasing power, generating acute constraints on households' access to food, while cereal production is expected to decline due to lack of agricultural inputs."* Anthropometric information collected, from June to December 2019, in 20 states by UNICEF and partners, suggests average rates for Severe Acute Malnutrition (SAM) and Moderate Acute Malnutrition (MAM) among children under five to be respectively 1.8 per cent and 4.5 per cent in assessed areas.

Potable water supply (access and quality) has been critical in Venezuela, with direct replication on the medical services system and the health of the population. The 2019 HNO estimates that 4.3 million people require water and sanitation assistance. According to some non-UN sources, a survey conducted in October 2019 indicated that 22.1 per cent of households declared to have 'sufficient' water access and 5.3 per cent no water at all. One fifth of households stated that their water supply depends on bottled water (32.8 per cent), water tanks (28.3 per cent) and water trucks (17.1 per cent), among others. Securing water through alternative sources than the public grid often leads to diseases due to micro-organisms or contaminants. As of 16 May 2019, over 275,000 cases of acute water-borne diseases were reported of which 76 led to loss of life with the highest incidence on children under one-year old (6,816 cases per 100,000 people).

The HNO calculated that 2.2 million children and adolescents need assistance in education, including 1.1 million children who are out of school, and 1.1 million children at risk of dropping out of the education system. An inter-played of conjunctural and structural constraints have seriously restrained equitable access to educational services and quality of teaching. According to an academic research, published in November 2018, low school attendance is due to lack of water

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(28 per cent); home food shortages (22 per cent); lack of electricity (15 per cent); absence of school feeding schemes (13 per cent) and absence of public transport (17 per cent). As a side-effect, the year 2019 witnessed an increase in primary school drop-out and more children entering the labor market or taking responsibilities at home to help support family's income.

Lastly, the HNO also determines that one million children are in need of protection, as national child protection systems are inoperative in most parts of the country. According to data from UNICEF's partners, the number of children affected by violence, insecurity and human rights violations rose and the deterioration of the protective environment is best reflected in the difficulties (personnel, equipment, supplies and state of infrastructures) faced by care givers to secure registration and issuance of birth certificates.

### Major contributions and drivers of results

To respond to the rising critical needs of the most vulnerable population, UNICEF leveraged its 5-year Cooperation Agreement 2015-2019 to adjust its strategic focus and humanitarian response and formulating a Scale-Up Plan that was endorsed by the Government in October 2018 and implemented throughout 2019. Under this agreement UNICEF was able to adopt a new posture that significantly enhanced its response across key sectors (education, child protection, water, health and nutrition) by increasing its field presence and proximity to beneficiaries; strengthening its leadership; expanding its technical capacity; deploying and broadening supply distribution; and, scaffolding its ability to emergency preparedness and response to new emerging needs. New programmes, including Water Sanitation and Hygiene (WASH) and Communications for Development (C4D), were also launched in 2019 to provide a comprehensive response to this Level 2 humanitarian situation.

The work of the national country office of UNICEF (Caracas) was strengthened through the opening of four field offices, namely, in Maracaibo (Zulia state), San Cristobal (Táchira state) Puerto Ordaz (Bolívar state) and Gran Caracas. These field offices have allowed UNICEF to gain greater proximity to beneficiaries and local partners allowing its ability to effectively and efficiently address the needs of vulnerable children, pregnant and lactating women (PLW), and adolescents across the country.

By strengthening its geographic operational footprint, UNICEF better understands the local context which allowed the organization to establish vulnerability-focused mechanisms to identify and provide to life-saving actions, with a heavy focus on supply delivery and renovation of key facilities for children. In 2019, local and offshore orders represented a total value of US\$ 12.4 million or 22 per cent of total program budget. It included a wide range of activities spanning from light renovation of critical infrastructures to logistic support for the distribution of vaccines and treatments across the country, hence clearly demonstrating the role of the UN in responding to this humanitarian situation. Likewise, in cooperation with the Ministry of Health (MoH), UNICEF made improvements in several public hospitals and primary health care facilities to provide better attention to mothers and children, including -but not limited to- supply cold chain repairs, provision of equipment and provision of basic drugs consumables and hygiene supplies.

With regard to inter-agency coordination, UNICEF led the clusters of Education, WASH, Nutrition and the Area of Responsibility (AoR) of Child Protection within the Protection Cluster. The main outcome of this dedicated contribution is best assessed by UNICEF's active participation in the HNO of Venezuela, the Humanitarian Response Plan (HRP) and the formulation of the first Humanitarian Action for Children (HAC) launched in August 2019. The HAC appealed for US\$ 70.4 million to reach those mothers and children most in need of immediate assistance and has mobilized US\$ 56.4 million.

Driven by the core principles of neutrality, impartiality, humanity and independence, UNICEF's decentralized presence has allowed the organization to contribute to the larger advocacy endeavor of the UN in Venezuela. Continuous efforts to provide technical assistance, to engage with all stakeholder and to bring concrete results through the use of supplies helped open, maintain and broaden a positive operational space needed to access mothers and children.

To upkeep the highest standards of accountability to beneficiaries and donors, UNICEF has prioritized response monitoring across its geographic and sectoral areas of intervention and thus far has invested up to US\$ 500,000 to strengthen its monitoring and evaluation systems; entered into cooperative agreements with 32 partners to keep track of the impact and end-use of every resource invested for children; and, tapped into effective solutions to continuously gathered impact assessment from the vantage point of children, care givers and communities. In the reporting period, efforts focused on strengthening program monitoring mechanisms including humanitarian programme monitoring (HPM), the UNICEF Venezuela Scale-Up, enhancing planning processes to ensure that UNICEF Scale Up Plan and HAC are fully aligned with the HRP.

The year 2019 was therefore a milestone in setting in motion the Scale-Up plan by undertaking strategic and organizational restructuring needed with the aim of producing concrete and measurable results for women and children, and laying a

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robust foundation for further expansion of the humanitarian response in 2020 and beyond. Notwithstanding the technical assistance provided through consultants, to date UNICEF is the UN agency with the largest footprint in Venezuela with 140 staff members and operating field offices.

Major contributions and drivers of results were:

**In Health**, UNICEF response was marked by establishing humanitarian cooperation with different public and non-public stakeholders in Venezuela, to support the needs of mothers, newborn children and infants, primarily by strengthening technical capacities and providing essential commodities for new-born child health (MNCH), malaria, syphilis, HIV and routine and supplementary immunization services, as part of its emergency response. This assistance benefited over 42,000 people and contributed to reduce preventable deaths and diseases, thus improving the environment for children and mothers to survive and thrive despite the harsh living conditions.

UNICEF has improved immunization management through renovation of cold chain, procurement and supplies, logistics support and training to providers. For instance, the central vaccine in Caracas Capital District and key decentralized vaccine storage facilities of priority states, were repaired to ensure safety of vaccines.

UNICEF supported procurement of vaccines to cover the needs for epidemics response and routine immunization. To support implementation of the national polio campaign, UNICEF distributed 4.9 million doses of bOPV, reaching 95 per cent of the children under five target population, and carried out a communication and C4D campaign to promote polio vaccinations. In addition, to responding to diphtheria and measles outbreaks, UNICEF supplied 6.7 million doses of Td and provided 2.3 million doses of MR, reaching a coverage of 90 per cent of the target population. In support of routine activities of the expanded program of immunization (EPI), UNICEF supplied 2.6 million doses of BCG, MMR, bOPV, IPV, Td and Yellow Fever.

UNICEF' contribution to essential MNCH services including treatment for pneumonia, sepsis and other severe conditions related to prematurity and labor and delivery-related complications. UNICEF distributed 84 modules of Interagency Emergency Humanitarian Kits (IEHKS) of different types in five targeted hospitals, 21 primary healthcare centres (PHC), and the Bolívar Municipality firefighters. Kit delivery was complemented with training of staff on use of the kits, mechanisms to report their use, and capacity building on maternal and new-born management in primary health care centre.

In 2019, UNICEF procured and distributed HIV/Syphilis tests, pediatric anti-retrovirals (ARVs) and drugs for treatment of opportunistic infection to cover the needs of over 2,000 children.

**In Nutrition**, the prevention of severe acute malnutrition, treatment for children diagnosed with acute malnutrition, both at health services and at community level allowed UNICEF to increase the access of children under five years of age and PLW to quality nutrition services. UNICEF' interventions focused on preventing micronutrient deficiencies and acute malnutrition, treating acute malnutrition, and promoting behavior change among health staff, families and communities.

UNICEF has strengthened capacity of health workers and disseminated knowledge on international protocols and standards for nutrition management, with the aim of using efficient tools to improve local capacities in nutritional assessment of children, early detection of malnutrition and adequate remitting of severe cases including hospital referrals. For practitioners, these trainings built the level of familiarity needed by service providers to assess the nutritional status of children, to identify early cases, prevent further deterioration of nutritional status and refer to adequate facilities including hospitals -if/when needed. As part of its change strategy, UNICEF leveraged its engagement with the Ministry of Health and the Ministry of Education to distribute treatments for malnutrition, and conduct a national deworming campaign that reached over 2.6 million children.

Throughout 2019, global acute malnutrition (GAM) has been addressed by implementing extensive deployment of nutritional screenings throughout the country and increasing its cooperation agreements from 2 to 17 partners to ensure proper coverage of all states, and outreach capacity to the most hard-to-reach mothers and children.

UNICEF complemented this beneficiary-focused interventions by improving the quality of anthropometric data collected; conducting nutritional diagnosis; promoting interventions based on actual nutritional status of children; strengthening monitoring; underscoring the interplay of economic and geographic on access to primary health services and the impact on vulnerable children, pregnant or lactating women; advocating for policy and system reforms through the design and validation of a national protocol for management of acute malnutrition that meet international standards and, leading sectorial coordination at national and local levels, to ensure coherent strategic focus, efficient delivery of nutrition assistance, exchange of knowledge among the 42 participating organizations, efficient use of information collected by 17 monitoring partners and, stronger synergy with other sectors such as water and sanitation or food security.

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In **WASH**, UNICEF adapted its response to the context of Venezuela by combining emergency interventions with recovery activities whilst ensuring coordination with other key sectors such as health, nutrition, education and protection; and leveraged cross-sectorial strategies such as communication and advocacy, community engagement and accountability to affected populations. In 2019, the WASH sector was established to enhance access to safe water and sanitation, promote positive hygiene practices and deliver essential supplies to schools, child protection services and health care facilities and build synergies with health and nutrition activities. UNICEF procured over 255,000 items of supplies for hospitals, schools, communities and other facilities, while repairing systems to allow access to safe water, hygiene and sanitation. An important achievement was the agreement signed with the Ministry of Water, which provided the framework to enhance cooperation for rehabilitation of selected water systems and the provision of safe water using trucks in the states of Táchira, Zulia and Bolívar and the area of Gran Caracas, that covers parts of the Miranda and La Guaira states.

Besides providing chlorinated water trucking to over 250,000 people, an important component of UNICEF interventions has been the rehabilitation of pumping systems, electric generators, water collection systems, sanitary batteries in land bus terminals, emergency water supply to respond to power outages, in different states of the country. Emergency in sanitary conditions and water supply, have been performed in hospitals and health care centres to prevent and control infections, including two well drilling and equipment of boreholes (in vulnerable areas in Zulia and Bolívar), emergency hydration points and chlorinated safe water in hospitals, disinfection of water tanks, installation of four electrolytic chlorinators, tank installations, rehabilitation of eight water pumping systems, chlorine and cleaning products distribution. Rehabilitation interventions have benefited over 100,000 people daily.

These interventions have included training to health personnel in 46 hospitals, on the proper use of supplies, cleaning and handwashing, benefiting over 332,000 people of the last four months, which translated into clear improvement of sanitation indicators in health centres that benefited from UNICEF's assistance. To offset the consequences of the blackouts, UNICEF provided emergency response through distribution of chlorine tabs for safe water, among other interventions.

In WASH, over 12 implementation agreements have been signed with NGOs at national and sub-national level and over 981,000 people, in different sectors, including education, health, protection and nutrition, have been reached with key messages on water treatment and hand washing. UNICEF supported the WASH Cluster Coordination at national and subnational level (Bolívar, Táchira and Miranda) and contributed to HNO-HRP process. In border areas, UNICEF Venezuela WASH response has been coordinated with Colombia and Brazil through reinforced situation monitoring. WASH interventions (hydration points, access to sanitation and adapted hygiene kits distribution and key hygiene promotion) contributed to child protection in the bus terminals of San Antonio and San Cristobal (Táchira state) bordering Colombia.

As part of the strategy to assist local authorities in the provision of context-sensitive educational responses, the **Education** sector, signed a work plan with the Ministry of Education to establish a roadmap and implement activities (technical assistance and supplies), raise awareness and prepare guidelines to adapt educational response to current conditions.

Moreover, in line with UNICEF's strategy to deploy and expand its support nationwide, UNICEF education team has strengthened interventions in priority zones to develop capacities of education civil servants and partners through training, pilot incentives and educational material distribution, among others. The identification and creation of new strategic alliances created the trust required to expand UNICEF's coverage, impact and ability to promote new initiatives. The creation and strengthening of the Education Cluster through standardized coordination processes accelerated capacity building of participating partners hence allowing the cluster to openly discuss forward-looking and child focused strategic and operational consensus. To better advocate for humanitarian response before all stakeholders, UNICEF has developed coordination mechanisms to engage with the Ministry of Education and other partners of the civil society in support of the most vulnerable children in selected priority states.

In 2019, UNICEF promoted two pilot initiatives, to address specific needs, such as school feeding and teacher retention. The school feeding program alone, has benefited over 7,600 children (3,842 girls and 3,851 boys) in Miranda state. This intervention was further complemented by the distribution of educational material in seven states reaching close to 5,800 teachers and over 285,000 children (146,724 girls and 139,050 boys), which has had direct and documented impact on school attendance of learners and retention of teachers.

Also, institutional and technical capacities of the education community have been strengthened through the focus placed on education in emergencies, protection of human rights, promotion of resilience and raising awareness of risks faced by children. In the areas of intervention, this capacity building effort has guaranteed the continuity of educational services and helped teachers, families and children to mitigate the impact of the deeply deteriorated living conditions. Finally, in the spirit of leaving no child behind, UNICEF strengthened the bilingual intercultural education system to Yanomami and Warao children, by providing bilingual educational materials, and carried out activities to re-insert vulnerable children into the education system reaching up to 340 out-of-school children (164 girls and 174 boys).

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Throughout 2019, for the benefit of 7,235 children in more than ten prioritized states, UNICEF supported summer break and after school activities, to promote schools as a safe space for children and increase the capacity of partners to offer children more opportunities to play and make good use of their free time. To offset the impact of limited teaching capacity and overcrowded classrooms on learning ability, school reinforcement activities were offered to 24,000 children along with psychosocial care program in 194 educational centres.

In **Child Protection**, UNICEF shifted from the regular development programming to a more Child Protection in Emergency (CPIE) approach. This has entailed strengthening technical expertise of national NGOs on CPIE topics, and enhancing the Child Protection System taking into account the motives and perception of the different stakeholders.

Under this framework, the strategy carried out by UNICEF Venezuela focused on enhancing protection of girls and boys, by improving quality and access to integrated child protection services, in prioritized states and municipalities. This approach was jointly implemented with a tailored response to address the immediate child protection needs of the most vulnerable children, deliver quality services, build up resilience in communities and strengthen the capacity of national and sub-national child protection public institutions, civil society and humanitarian actors to identify, monitor, prevent and respond to child protection concerns.

UNICEF carried out a pilot cash-incentive program, that documented the direct impact of this approach on the retention of personnel in protection systems and the quality of services provided. In addition, to improve its programming capacity, UNICEF developed a monitoring and data collection system for the Supreme Court of Justice to improve the availability and quality of statistical information on judicial child protection.

During 2019, UNICEF Venezuela contributed to the harmonization and development of minimum standards indicators for juvenile justice among seven countries. Taking stock of the assessed needs of the country, UNICEF identified three priorities namely, offering care services to adolescents in detention centres, providing legal support and training to judicial personnel, and developing information systems. Additionally, UNICEF developed with the support of the UNICEF Regional Office a set of new monitoring tools that improved data collection done by the Child Protection Councils on violence against children.

UNICEF supported over 74,000 people (46,414 women and girls; 28,447 men and boys) through participation in awareness sessions and 6,801 people (4,100 female and 2,701 male) were trained on prevention and response to violence against children, exploitation, abuse and neglect including gender-based violence. Guidance has been given to 6,223 caregivers (4,947 female and 1,276 male) to increase positive parenting skills and, a protocol to prevent and reduce violence among peers in schools was promoted in selected schools.

In cooperation with the MoH, UNICEF promoted and provided in-kind support to birth registration in hospitals which benefited over 325,000 newborns and children, a critical protective action.

By leveraging the humanitarian architecture in general and playing an active role in the AoR of child protection in the Protection Cluster, UNICEF contributed to the needs assessment of the HNO and the development of HRP, The activation of the CP AoR in the states of Táchira and Bolívar, allowed routine consultation with local government authorities and partners.

The implementation of 19 'Days with children,' led by C4D section has been instrumental in broadening a protective environment through enhanced community engagement and onsite feedback mechanisms that will help the way for the implementation of the Accountability for Affected Population (AAP) initiative scheduled in 2020.

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### Lessons Learned and Innovations

UNICEF's 2019 main drivers of results have been the continued dialogue with national and local authorities, and other stakeholders; the capacity to leverage humanitarian space opened by the HNO and HRP process, as the humanitarian architecture put in place; the activation of UNICEF's Level 2 support mechanisms, the expansion of the field presence, and agile programming.

All along 2019, UNICEF faced a fluid and ever evolving context that forced the organization to adjust its operational resilience and relevancy by responding rapidly to information provided by internal feedback mechanisms and interactions with key stakeholders; leveraging any opportunity and venturing into new approaches to deliver better and more for children in a resource stringent environment; upholding core humanitarian principles and core commitments for children in emergency as the main drivers of the humanitarian response.

As a result, despite a highly politicized environment, UNICEF has built and maintained good, impartial and neutral relations with all stakeholders, including Government entities, opposition groups, donors and NGOs, which have translated into agreements with decision-makers to streamline programmatic work, swift expansion of interventions across the country, continuous donor support although not at the scale needed and, no limitation on humanitarian access. Additionally, UNICEF has aligned its priorities with those of other partners and factored in feedback from beneficiaries which have proven to be an effective approach to robust implementation, mobilization of local support and, creation of the level of trust needed for community ownership and acceptance of services provided by UNICEF and its partners.

Discrete influencing at national level with focused networking at local level, combined with enhanced field presence, integrated cross-sectoral planning and response to child needs, robust monitoring systems, reinforced internal program and operations management capacity and, relationship building with all actors at all levels have shown to be winning strategies to: (a) build a trustworthy working environment; (b) establish the necessary proximity required to obtain premium information for programming; (c) trigger behavior change needed to maximize the impact of interventions; (d) leverage coordination for an effective and efficient response; (e) engage donor's based on human interest stories and facts and figures that best described the realities faced by children; (f) redirect UNICEF's attention and efforts to narrow neglected or silent unmet needs such as school feeding, pediatric HIV-AIDS or specific protection needs of children from minority groups; and, (g) nurture the critical buy-in of all stakeholders needed to ensure routine access to children in need.

To maximize the resources dedicated to life-saving intervention in a context marked by a vast range of diverse needs scattered across the country, the attitude of the ruling Government regarding humanitarian assistance, the challenge to mobilize resources, and a set of operational constraints (energy, fuel, in-country suppliers), UNICEF has adopted a two-fold strategic posture, namely, an integrated and decentralized approach that links the different sectoral components of its program (water, sanitation, hygiene, education, protection, nutrition and health) and a capacity-building effort that internally focused on mobilizing additional leadership, managerial and technical expertise, while leveraging the capacity of the State without providing direct funding to government institutions, promoting knowledge acquisition for care givers, broadening partnership, procuring and distributing critical supplies and renovating infrastructure.

As a way forward, UNICEF in Venezuela will continue its effort to leverage all resources available inside and outside the country to meet the needs of mothers and children, reinforce its current investment in accountability for resources and results, and advocate for the respect of the rights of the child of Venezuela living inside, on the move or settled outside the country.