Highlights

- In February and March, access of women and children to basic services further deteriorated. The border closure with Colombia and Brazil affected access to education and health services. Adolescents were reportedly detained and wounded during demonstrations.

- In March, repeated power outages across the entire country limited access to safe water and increased the risk of water-borne diseases. Health centers without generators operated at very low capacity. Schooling was disrupted during blackout periods.

- The UN System is currently working on the development of an inter-agency response plan which is expected to be finalized by mid-May 2019. UNICEF’s targets and funding requirements are expected to increase significantly in the coming months.

- UNICEF accelerated its response with additional resources and through new partnerships. Midwifery Kits were delivered by UNICEF to assist 3,243 deliveries in five hospitals. More than 25,700 people gained access to safe drinking water and hygiene supplies. Over 32,500 school children received educational and recreational materials.

UNICEF’s Response with Partners

<table>
<thead>
<tr>
<th>Sectors</th>
<th>UNICEF Target</th>
<th>Total Results 2019</th>
</tr>
</thead>
<tbody>
<tr>
<td>Health: # of pregnant women and new-born children receiving maternal and neonatal services</td>
<td>99,376</td>
<td>4,134</td>
</tr>
<tr>
<td>Nutrition: # of children, pregnant and breastfeeding women receiving micronutrient supplementation</td>
<td>251,483</td>
<td>13,836</td>
</tr>
<tr>
<td>WASH: # of people provided with access to safe drinking water</td>
<td>341,000</td>
<td>28,700</td>
</tr>
<tr>
<td>Education: # of girls and boys reached with educational and recreational materials</td>
<td>131,000</td>
<td>33,397</td>
</tr>
<tr>
<td>Child Protection: # of children provided with psychosocial support including access CFSs</td>
<td>70,723</td>
<td>5,958</td>
</tr>
</tbody>
</table>

February-March 2019

Inside Venezuela:*

3.2 million
# of children in need of assistance (Internal UN estimate)

7 million
# of people in need of assistance (Internal UN estimate)

* the UN Country Team is working through the sectors to finalize the estimates in preparation for the inter-agency response plan.

Outside Venezuela:

3.4 million
# of refugees and migrants from Venezuela worldwide (Regional Inter-Agency Coordination Platform, Feb. 2019)

US$ 32 million

2018-2019 Funding requirement: US$ 32M

Funded 2018 US$ 17.9M

Funded 2019 US$ 8.3 M

Funding gap US$ 9.4 M

*Funds available include funding received in 2019 as well as funds raised in 2018. Funding requirements are currently under revision as part of the ongoing inter-agency response plan development.
In February and March, multiple events resulted in reduced access to basic services for women and children. In February, the border closure between Venezuela and the neighbouring countries of Colombia and Brazil affected access to education and health services for border populations using cross-national facilities. For several days, Venezuelan children registered in Colombian schools could not access classes or had to use illegal crossings (trochas). Schools in Táchira state remained closed for several days.

The border with Colombia was later reopened only to allow passage for school children, elderly and people with severe health conditions seeking healthcare in Colombia. As the border in Santa Elena de Uairén (Bolivar state) remains closed, children are still not able to cross to attend school in Brazil.

In March, multiple power outages affected the entire country and then repeatedly extensive areas of the country. Lack of electricity led to reduced access to social services such as safe water, severely increasing the risk of water-borne diseases, and disruption of schooling for days. The ability of health centres without a functioning generator to provide services was significantly affected during blackout periods. Disruption in banking and commerce due to power cuts severely hindered access to purchasing food and any other goods and services.

In terms of UNICEF’s programmatic reach, the power outages limited the operational capacity of partners and the information flow.

The socio-political and economic situation and recently the blackouts have affected school attendance and increased the risk of school dropout. Prior to February 2019, 17 per cent of people living in poverty had no access to potable water or received it only every 15 days, both in rural and urban areas (2018 ENCOVI data). With the blackout, some areas are reporting being without water for a month. Many services with regards to sanitation, including solid waste management, have been affected.

In terms of nutrition, data on the situation of vulnerable groups is scarce and outdated. Latest official statistics (INN, 2014) indicated a Global Acute Malnutrition (GAM) prevalence of 4.9%, and 9.9% stunting among children under 5 years. The ENCOVI, a nation-wide survey on living conditions, reported in 2017 a GAM of 4.3% and a stunting prevalence of 22% in the same age group. The 2018 results are expected to be released soon. On the other hand, Caritas' nutrition surveillance system based on 46 most deprived parishes in 7 states, recently reported a proportion of 7.3% acutely malnourished children among those screened (CARITAS, Nov 2018).

Leadership and Coordination

The Resident Coordinator of the UN system has established a coordination team named Coordination for Cooperation and Assistance Team (ECCA) convening UN agencies, NGOs and Red Cross. Additionally, the UNETE (an UN in-country technical team focused on emergency preparedness and response) has expanded its role to work also as an inter-sectorial coordination team.

To support the coordination at the sectoral level, working groups have been set up with the participation of UN agencies and NGOs. UNICEF leads the response in Nutrition, working closely with UNHCR, FAO, Caritas and the IFRC; as well as in Child Protection, in coordination with UNHCR. Leading the response in WASH, UNICEF also started the coordination at local level in Táchira and initiated the early stage of the response in Zulia and Bolivar. In Education, a UNICEF-led coordination mechanism has been established with national and international sector partners. At local level, sectorial coordination is being activated around the Scale-Up Plan, particularly in Táchira and Zulia.

Programme Response Strategy

UNICEF is one of the UN agencies with the largest operational footprint in Venezuela, with currently almost 100 staff on the ground and four offices (Caracas, Bolivar, Táchira and Zulia). As part of the UN Venezuela Scale-Up Strategy, UNICEF revised its Country Programme Document with a Scale-up Plan valued at US$ 32 million for 2018-2019. This plan, endorsed by the Government of Venezuela in October 2018, expanded the scope and reach of its cooperation to address the emerging needs of children and women.

UNICEF operations are aligned and complementary to other agencies’ efforts (PAHO/WHO, UNAIDS, UNHCR, FAO, IOM, UNFPA and UNDP). UNICEF works to strengthen national systems and expand the capacity of civil society organizations to respond to priority needs in maternal and neonatal health, WASH, education, child protection and nutrition.
UNICEF is working with a large range of partners, including technical line ministries, local-level authorities, national and international NGOs and other partners to implement its activities, through different operational modalities:

- Procurement and logistical support for the distribution of supplies in-country to partners and service delivery facilities.
- Provision of essential services for the most vulnerable people in WASH, Protection, Nutrition, Health and Protection.
- Technical cooperation and capacity building at central and local levels, with Government and other implementing partners.
- Promotion of the rights of children and assistance aligned with the humanitarian principles of independence, neutrality, impartiality and humanity.

UNICEF opened three field offices in the States of Táchira, Zulia and Bolivar. The States of Caracas and Miranda are currently covered by a team from the main office. UNICEF’s strengthened field presence enables its programme response to be coordinated and implemented with local governments and civil society partners directly.

Map 1: UNICEF Field presence in Venezuela

This map is stylized and not to scale. It does not reflect a position by UNICEF on the legal status of any country or area or the delimitation of any borders.

Summary Analysis of Programme Response

Health

UNICEF provides support to priority health facilities in Caracas, Miranda, Zulia, Bolivar and Táchira. During the reporting period, 3,243 deliveries were assisted with UNICEF midwifery Kits in five hospitals in Caracas and Miranda. Other 125 midwifery kits were received by hospitals in San Cristobal, Táchira, Zulia and Bolivar to ensure safe deliveries for 6,250 women.

To reduce the impact of repeated power cuts, UNICEF provided 6 power generators to hospitals in Táchira, Bolívar, Zulia, Miranda, and Distrito Capital. More than 24,000 people are expected to benefit from these generators that were distributed in coordination with the Ministry of Popular Power for Health and Corposalud Táchira.

A total of 17,735 children and pregnant women received antimalarial medicines during the reporting period. Antibiotics (30,000 units) were also delivered to hospitals in Zulia, Táchira and Bolivar. UNICEF is also providing support to the HIV treatment of 990 children and 160 pregnant women.

1 Data for February 2019
About 50,000 people are expected to benefit from five Emergency Health Kits (IEHK 2011) that were distributed among hospitals in Bolivar, Tachira and Zulia.

UNICEF is participating in the coordination meetings of the health technical group coordinated by PAHO.

Nutrition

In February, UNICEF trained 60 paediatricians, physicians, nurses and nutritionists in Caracas; and 36 health workers in Táchira (specialized hospitals and primary health services), in essential nutritional interventions and management of children with acute malnutrition with and without complications.

In March, UNICEF distributed supplies for a 3-month nutrition coverage to partners (CARITAS, Corporusalud Táchira, National Nutrition Institute, IFRC, Fe y Alegria).

As a result of the provision of these nutrition supplies, 69,000 children under 5 will undergo the screening; 66,050 children 6-59 months will be reached with multiple micronutrient powders; 3,900 pregnant and lactating women will receive micronutrient supplementation; 2,250 children under 5 will be treated for management of moderate and severe acute malnutrition; 400,000 children from 2 to 14 years will receive deworming treatment, and 11,200 families will receive oral rehydration salts for the treatment of diarrheal disease.

About 20,000 children and 8,000 pregnant and lactating women will receive micronutrient supplementation, screening and treatment of severe and moderate acute malnutrition (with and without complications), deworming and support to Infant and young child feeding (IYCF), through a partnership with IFRC signed in March.

About 13,000 children, and 3,640 pregnant and lactating women will enjoy with the same activities through a work plan with Corporusalud Táchira, the state health authority. Upcoming partnership agreements include Project Hope (Miranda state), Fundación Bengoa (location to be determined), CESAP-local NGO (in eight states including Zulia, Táchira, Bolivar and Vargas), and CISP-international NGO (Táchira, Apure).

In addition, during the reporting period, UNICEF strongly supported Nutrition coordination: The National Nutrition Working Group was set up at the end of February and included partners such as PAHO, FAO, Caritas, MSF-Venezuela, ACF, UNHCR, CESAP, IFRC, NRC, HIAS Venezuela and Esperanza Venezuela.

WASH

In February and March, UNICEF reached more than 25,700 people with access to safe drinking water and hygiene supplies. Priority was given to border and heavily populated areas in Táchira and Zulia states as well as hospitals, bus terminals and protection centres in Caracas.

Distribution of water purification tablets is ongoing with partners (Red Cross, Cáritas, Miranda Civil Protection and Táchira Civil Protection) to scale up immediate access to safe water to at least 12,000 families (60,000 people) for a period of 2 months.

During power blackouts, UNICEF provided 5-litres of bottled water to 1,438 children in 4 protection centres. Additionally, UNICEF installed eight 1,500 litres capacity water tanks in 4 priority hospitals and trained health centre focal points on water quality monitoring and water chlorination. The Ministry of Health ensures water trucking for these points on a daily basis.

Water purification tablets were distributed to more than 14,000 people. Needs assessments were carried out in February and March for 15 hospitals. Local procurement for large amount of cleaning and hygiene supplies is ongoing. Additionally, UNICEF assessed the water and sanitation systems in Táchira, Zulia and Bolivar states and prepared an action plan to address water shortages, sanitation and hygiene needs.

In March, UNICEF established key contacts with the national and state government partners such as HidroVen (National Water and Sanitation Management company), HidroBolivar (Bolivar state) and Hidrosuroeste (Táchira state) . Several meetings were held with the government authorities to discuss UNICEF engagement in the water and sanitation sector.

Sector coordination has been initiated at the national and local levels in Caracas, Táchira, Zulia and Bolivar states. UNICEF is working closely with the sectoral partners, including national and international NGOs, as well as UNHCR, IFRC, ICRC and MSF.
Education

6,313 children (3,202 boys and 3,111 girls) in 14 schools of Anzoátegui received educational and recreational materials through UNICEF and with the support of the ‘La red Circuital de Supervisión Educativa’. In April, UNICEF plans to reach an additional 35 schools (totalling 49 out of 52 schools in this municipality). In addition, two recreational spaces at community level provided psychosocial support to 55 children and adolescents. Also, 240 children and adolescents attended four community feeding centres to encourage school attendance.

In the Municipality of Libertador of the Capital District, 656 children and adolescents received recreational kits through support from UNICEF and its partners.

In Amazonas state (Municipalities of Atures y Alto Orinoco), 3,417 children and adolescents (including 2,416 indigenous children) in 10 schools gained access to education materials through UNICEF in cooperation with a Church-based organization (Vicariato Apostólico of Puerto Ayacucho) in . In addition, 159 young people and adults participated in UNICEF-supported catch-up literacy programs.

In Libertador municipality (Capital District) and in Sucre municipality (Miranda State), 4,770 children and adolescents received school supplies from pre-school and primary education attending eight Fe y Alegría schools.

In February and March, UNICEF distributed 33 recreational kits, 20 Early Childhood Development (ECD) kits, 3,200 backpacks (with notebooks and pencils), in cooperation with Fe y Alegría. UNICEF also contributed to the training of 47 community educational promoters, benefiting 17,635 children and adolescents (9,068 boys and 8,567 girls) in 26 schools.

In the municipalities of Sifontes, Caroni and Heres, in Bolívar state, 16,965 children (including 2,105 indigenous children) received educational supplies through UNICEF.

UNICEF is planning on scaling up its activities to provide educational materials, teacher trainings and psychosocial support to 72,000 children and adolescents in the states of Apure, Táchira, Bolivar, Zulia, Distrito Capital and Miranda,. New agreements have been signed with NGO HIAS to reach 20,000 children and adolescents in Amazonas, Anzoátegui, Miranda, Distrito Capital, Bolívar and Delta Amacuro.

The education sector working group has been set up and coordination is ongoing with participation from at least 10 civil society partners.

Child Protection

In Distrito Capital, Miranda, Lara, Yaracuy, Anzoátegui and Zulia States, 1,633 children and adolescents (790 girls and 843 boys) attended psychosocial and recreational activities in UNICEF-supported child-friendly spaces, which included identification of child protection needs as well as referrals to national authorities.

UNICEF has started the training process of community promoters to prevent family separation at the family level,. 59 promoters from partner organizations in Zulia and Miranda were trained. They will reach 7,080 persons in communities.

In February, UNICEF signed an agreement with Venezuelan Penal Forum (Foro Penal) to begin monitoring of adolescents detained during the demonstrations. All adolescents identified by the partner received legal assistance and a formal communication was submitted to Venezuelan authorities (Ministry of Foreign Affairs) calling for the compliance with the Convention on the Rights of the Child.

Scale up child protection activities in priority municipalities will take place through new partnerships developed in March with ASONACOP, Asoviluz, Red Cross, Hias, Otro Enfoque, and De Familia en Familia.

The Child Protection sub-sector was established in March, as UNICEF also continues to work towards strengthening coordination efforts. The group started working in identifying Child Protection needs and priorities in Venezuela and contributing to the overall Protection Needs Analysis framed in the upcoming HRP.

Communications for Development (C4D), Community Engagement and Accountability to Affected Population

In February, campaigns to promote children’s rights were adjusted to the context of the country and digital communications component was strengthened. UNICEF social media accounts (Instagram, Twitter and Facebook) were used to highlight children’s rights.
Educational messages aiming to reduce violence against children through dialogue among family members and messages with advice for migrant families were disseminated through 33 social media posts, with a reach of 67,924 people.

During the blackout, UNICEF, through its partner Fe y Alegria, disseminated 12 posts through social media with the aim to provide tips to parents on how to reduce children’s stress through games and dialogue. These posts were seen 44,379 times.

Ten UNICEF social media posts on nutrition (particularly breastfeeding practices) were accessed 130,790 times, while four key messages on health and WASH on safe drinking and hygiene practices were accessed 48,961 times.

UNICEF social media reached 24,435 users with 8 posts promoting child protection; 4,083 people were reached through 2 posts on nutrition and 2,372 users with the message on education.

During the blackout, UNICEF, through its partner Fe y Alegria, disseminated 12 posts through social media with the aim to provide tips to parents on how to reduce children’s stress through games and dialogue. These posts were seen 44,379 times.

In March, UNICEF established an alliance with 24 radio stations affiliated to Fe y Alegria as well as its social media accounts, with a potential reach of 8,995,000 listeners.

Due to the lack of running water and the use of unsafe water sources, UNICEF produced a multimedia campaign targeting improved hand washing practices and water purification, to be rolled out in April. Through UNICEF social media accounts, 7 posts were published and reached 19,417 people.

For child protection, a multimedia plan for message dissemination through bus terminals was designed, and materials are under production. Activities are expected to start in April in one school (Miranda) and one bus station (Táchira migration point) with the objective to share information on immunisation, nutrition, protection, and improved WASH behaviour targeting families for a total of 1,099 people, among them 702 children.

Supply and Logistics

Education, WASH, Health, and Nutrition supplies worth over $640,000 were distributed by UNICEF to implementing partners. A total of 29 trucks were dispatched from the central warehouse of Caracas to implementing partners in Caracas, Zulia, Táchira, and Bolivar provinces. Most commodities distributed were related to nutrition and health activities. Education supplies were distributed in these locations as well as in Amazonas and Anzoátegui.

Regional procurement of customized education kits (Schools in a box, Recreation kits and ECD kits) has been placed while local procurement for education and pharmaceutical devices is ongoing.

Over 405,000 vials of 10 doses of Td vaccines (Typhoid and Diphtheria) have been imported in the past two months. UNICEF and PAHO are working with the Ministry of Health (MoH) to assess vaccine efficacy and set up a contingency distribution plan for Td, Yellow fever and IPV vaccines which are in the MoH cold rooms and in UNICEF warehouse.

Media and External Communication

Until recently, Venezuela CO had focused its external communication efforts on social media. However, the presence in traditional media has increased after February and March demonstrations and blackouts. In February and March, three press releases were issued to highlight UNICEF’s contribution to children affected by the emergency.

https://www.unicef.org/venezuela/spanish/media_39516.html
https://www.unicef.org/venezuela/spanish/media_39536.html
https://www.unicef.org/venezuela/spanish/media_39410.html

In total, five interviews and information requests from national and international media were handled (Radio Nacional de España, Venezuelan- American Chamber’s business magazine, Exitos 93.1 FM, Le Courier, TNO digital radio). Selected prominent journalists and major media outlets in states were UNICEF Venezuela just opened field offices were approached to coordinate the coverage of children’s rights. An alliance with 24 radio stations affiliated to a nationwide NGO (Fe y Alegria) was established as a first step to implement an advocacy strategy with national and international NGOs to promote children’s rights and UNICEF work in an emergency context.

The dissemination of messaging on children’s rights (protection, education, health and nutrition) in an emergency has continued through social media channels in Venezuela:
• Special social media pack on WASH, nutrition and protection was developed and disseminated during the blackouts periods (infographics and recommendations).
• Social media pack on migration (based on the Ecuador campaign and with Venezuela photos).
• Ad hoc social media pack on supplies delivery during blackouts.
• Ad hoc social media packs on UNICEF activities in field offices.

Video content was gathered by the multimedia crew in Caracas and field offices to highlight UNICEF results in supply delivery (installation of water tanks in hospitals, distribution of water purification tablets, vaccines, recreational kits for schools, installation of power generators in hospitals). In total, eleven professional quality video clips were produced and will be progressively released through social media.

Early June a mission led by the Division of Communication will take place in Caracas to document UNICEF’s humanitarian assistance to Venezuelan children. Another mission to collect human interest stories at the border is being planned with the regional office. With the aim to increase the visibility of the humanitarian response, a new communication and advocacy strategy will be designed and implemented with support from regional office and HQ and in alignment with global and regional priorities.

Funding

In late 2018, the Venezuela CO scaled up its Country Programme Document (CPD) with an updated budget of US$ 32 million for 2018 and 2019. As of end March 2019, UNICEF had received US$ 26 million for the Venezuela programme and operations. UNICEF is deeply grateful for the generous contributions from bilateral and multilateral donors, funds raised through UNICEF National Committees as well as funding from UNICEF internal resources enabling the programmatic scale up. UNICEF thematic flexible funding has been critical to boost the humanitarian response, allowing for flexibility in terms of geographic and thematic scope. Urgent gaps remain particularly against education and WASH, amounting to more than US$ 5 million.

With the increasing needs related to the most recent developments of early 2019, and with the ongoing development of the inter-agency response plan expected to be finalized by mid-May, UNICEF’s sectoral funding requirements and targets are currently under review and will reflect UNICEF’s contribution to inter-agency sector plans.

<table>
<thead>
<tr>
<th>Appeal Sector</th>
<th>Requirements*</th>
<th>Funds available (excluding EPF advance funding)</th>
<th>Funding gap</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td>Funded 2018</td>
<td>Funded 2019</td>
</tr>
<tr>
<td>WASH</td>
<td>5,561,822</td>
<td>1,611,837</td>
<td>1,359,283</td>
</tr>
<tr>
<td>Education</td>
<td>3,651,192</td>
<td>1,088,299</td>
<td>0</td>
</tr>
<tr>
<td>Health</td>
<td>7,945,198</td>
<td>6,232,142</td>
<td>5,266,583</td>
</tr>
<tr>
<td>Nutrition</td>
<td>10,971,690</td>
<td>6,750,194</td>
<td>388,721</td>
</tr>
<tr>
<td>Child Protection</td>
<td>3,870,098</td>
<td>2,210,459</td>
<td>1,287,732</td>
</tr>
<tr>
<td>TOTAL</td>
<td>32,000,000</td>
<td>17,892,931</td>
<td>8,302,319</td>
</tr>
</tbody>
</table>

* Funding requirements are currently under revision with the ongoing inter-agency response plan development.
** Sectoral requirements include a proportion for Monitoring and Evaluation activities.

Next SitRep: 17/05/2019

UNICEF Venezuela: [https://www.unicef.org/venezuela/spanish/](https://www.unicef.org/venezuela/spanish/)

UNICEF Venezuela Facebook: [https://www.facebook.com/unicefvenezuela/](https://www.facebook.com/unicefvenezuela/)

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Annex A
SUMMARY OF PROGRAMME RESULTS

<table>
<thead>
<tr>
<th>UNICEF and Partners</th>
<th>2019 Target</th>
<th>Total Results (1 Jan-31 Mar)</th>
<th>Progress last 2 months (1 Feb-31Mar)</th>
</tr>
</thead>
<tbody>
<tr>
<td>HEALTH</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td># of pregnant women and new-born children receiving maternal and neonatal services in UNICEF-supported facilities</td>
<td>99,376</td>
<td>4,134</td>
<td>3,243</td>
</tr>
<tr>
<td># of boys and girls vaccinated against Polio</td>
<td>3,246,322</td>
<td>0</td>
<td>0</td>
</tr>
<tr>
<td># of boys and girls from 7 to 15 years old vaccinated against diphtheria</td>
<td>4,823,288</td>
<td>0</td>
<td>0</td>
</tr>
<tr>
<td># of children and pregnant women receiving malarial diagnosis and treatment</td>
<td>60,000</td>
<td>19,893</td>
<td>17,735</td>
</tr>
<tr>
<td># of children, girls and pregnant women (PW) receiving antiretroviral treatment for HIV</td>
<td>4,000 (PW) 2,000 children</td>
<td>160 (PW) 990 children</td>
<td>0</td>
</tr>
<tr>
<td>NUTRITION</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td># of children under 5 years accessing UNICEF-supported primary healthcare services for management of MAM and SAM uncomplicated cases</td>
<td>13,580</td>
<td>493</td>
<td>340</td>
</tr>
<tr>
<td># of children under 5 years accessing UNICEF-supported specialized health services for management of MAM and SAM complicated cases</td>
<td>2,397</td>
<td>61</td>
<td>41</td>
</tr>
<tr>
<td># of targeted caregivers of children 0-23 months with access to IYCF counselling for appropriate feeding</td>
<td>69,216</td>
<td>1,025</td>
<td>765</td>
</tr>
<tr>
<td># of boys and girls (6-59 months), pregnant and breastfeeding women receiving micronutrient supplementation</td>
<td>254,483</td>
<td>11,836</td>
<td>7,050</td>
</tr>
<tr>
<td># of people with increased knowledge on life saving skills, good practices and available services (Nutrition)</td>
<td>26,546</td>
<td>5,600</td>
<td>4,200</td>
</tr>
<tr>
<td>WATER, SANITATION &amp; HYGIENE</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td># of people provided with hygiene kits or key hygiene items or access to hand washing points with soap or similar items</td>
<td>115,500</td>
<td>400</td>
<td>400</td>
</tr>
<tr>
<td># of people reached with messages on life saving skills, good practices (Health, Nut, hygiene) and protective practices or information on available services</td>
<td>200,000</td>
<td>400</td>
<td>400</td>
</tr>
<tr>
<td># of people provided with access to drinking water</td>
<td>91,000</td>
<td>28,700</td>
<td>35,700</td>
</tr>
<tr>
<td># of people with access to WASH services in health centers, schools, learning spaces, child friendly spaces and shelters</td>
<td>40,000</td>
<td>9800</td>
<td>9800</td>
</tr>
<tr>
<td>EDUCATION</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td># of girls and boys regularly attending Unicef-supported schools</td>
<td>131,000</td>
<td>0</td>
<td>0</td>
</tr>
<tr>
<td># of girls and boys reached with educational and recreational materials</td>
<td>133,000</td>
<td>33,307</td>
<td>32,587</td>
</tr>
<tr>
<td># of girls and boys receiving psychosocial support in schools</td>
<td>60,000</td>
<td>0</td>
<td>0</td>
</tr>
<tr>
<td># of people reached with messages on relevance of Education</td>
<td>17,831</td>
<td>0</td>
<td>0</td>
</tr>
<tr>
<td>CHILD PROTECTION</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td># of girls and boys provided with psychosocial support including access to Child-friendly Spaces (CFSs) with intersectoral programming interventions</td>
<td>70,723</td>
<td>5,958</td>
<td>1,633</td>
</tr>
<tr>
<td># of people reached in communities where social support networks to prevent and address violence, abuse and exploitation (including GBV) - with emphasis on migrant routes - have being mobilized and strengthened with UNICEF support.</td>
<td>32,735</td>
<td>500</td>
<td>0</td>
</tr>
<tr>
<td># of children under 1 year receiving birth certification</td>
<td>453,600</td>
<td>79,000</td>
<td>0</td>
</tr>
<tr>
<td># of people reached with messages on life saving skills and protective practices or information on uptake of services in UNICEF-supported facilities</td>
<td>23,706</td>
<td>0</td>
<td>0</td>
</tr>
</tbody>
</table>

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2 The UN Country Team is developing an inter-agency response plan which is expected to be finalized at mid May 2019 and may result in an adjustment of these indicators in line with the sectoral priorities and targets.

3 This target will be achieved when the national vaccination campaign is carried out. This is expected to start by May.

4 Results from January 2019 received in March due to delayed partner reporting.

5 Total figure includes results from January 2019 which were not included previously due to delayed partner reporting.

6 Result for Jan-March has been revised based on updated information received

7 Result for Jan-March has been revised based on updated information received

8 This indicator will be reported as of May