SITUATION IN NUMBERS

©UNICEF-ECU/2018/Arcos. Mariangelys is 8 months old and just arrived with her family at the Colombia/Ecuador border where they spend the night before taking off towards Peru. In Rumichaca crossing site, where temperatures can descend to 6°C, UNICEF distributes thermal blankets for families arriving.

Migration flows in Latin America and the Caribbean
Situation Report No. 2

8 Sept – 8 Oct 2018

2.6 million
No. of Venezuelans living abroad, including:

2 million
No. of Venezuelans in countries within Latin America and the Caribbean
(Source: IOM, Migration Trends in the Americas, Sept 2018)

430,000
Approx. No. of children in need of assistance as a consequence of the crisis in Colombia, Brazil, Guyana, Trinidad and Tobago, Ecuador, Peru and Panama.
(Preliminary estimations at transit/receiving country level.)

UNICEF Appeal 2018
US$ 28,050,000

Highlights

• The latest official reports indicate that as of September 2018, around 2.6 million Venezuelans are currently living abroad, including 2 million across countries within Latin America and the Caribbean (LAC). Nearly 70 per cent of them have left the country between 2015 and 2018.

• UNICEF estimates that around 430,000 children in Colombia, Brazil, Guyana, Trinidad and Tobago, Ecuador, Peru and Panama, need some form of assistance, including Venezuelan children migrating to or in transit through other LAC countries, non-Venezuelans returning to their countries of origin and children living in host communities where basic services are under extreme pressure due to the increased demand.

• During the past month, governments in the region have made considerable progress in articulating a regional approach to the migratory crisis. Through the Declaration of Quito signed on 3 September, 11 States agreed to receive expired travel documents for immigration purposes and decided to establish a regional programme, with UN support, for exchanging information.

• UNICEF’s Country Offices in Colombia, Brazil, Guyana, Trinidad and Tobago, Ecuador, Peru and Panama continue implementing and further expanding response interventions, focusing on migrant arrival points, along routes and in destination settlements.

• In Colombia, over 8,000 children have been reached with psychosocial support and thousands are expected to benefit from the installation of water and sanitation infrastructure at the Arauca Migrant Center and the Nariño border site (Ecuador border).

• In Brazil, child friendly spaces established at shelters are benefiting more than 3,600 children with specialized services, including for indigenous children.

• Essential non-food items have been distributed to 110 Venezuelan and host families in border communities in Guyana.

• At the main border crossing site from Colombia to Ecuador, Rumichaca, UNICEF has installed tents to temporarily host families crossing into Ecuador. Prioritized families also receive blankets, jerrycans, hygiene supplies for babies, and cash transfers.

• In Peru, a child friendly space is functioning at the main border control site, where 2,163 children and adolescents in transit have received psychosocial support and more than 500 children under 5 have been reached by nutritional assessments and counselling.

• In Trinidad and Tobago, UNICEF has partnered with the main local NGO to reinforce local capacities for addressing the needs of migrant children. A nutrition assessment has started with 32 children screened thus far. Coverage of the Temporary Learning Centre for migrant children has been increased to reach 170 children.

• UNICEF and IOM partnership allowed the conduction of Displacement Tracking Matrix (DTM) rounds in Brazil and Panama. Results of these exercises are central for adjusting ongoing actions and planning for the next year’s interventions.

Funding requirements: US$28M

Funding Gap
US$ 12.4 M
44%

Funded
US$ 15.6 M
56%

*‘Funds received to date’ includes Emergency funds received for the current revised appeal.
Situation Overview & Needs

According to the latest official estimates - considering only regular migration numbers1 - around 2.6 million Venezuelans are currently living abroad, 2 million of them in countries within Latin America and the Caribbean. 2 Based on preliminary information, UNICEF estimates that around 430,000 children are in need of assistance in Colombia, Brazil, Guyana, Trinidad and Tobago, Ecuador, Peru and Panama. Among children in need are Venezuelan children migrating to or in transit through the mentioned countries, non-Venezuelans returning to their countries of origin (mainly Colombia or Guyana), and children living in host communities with pre-existing conditions of vulnerability, where basic services are under extreme pressure due to the increased demand (mainly Colombia and Guyana).

Neighbouring countries continue receiving the highest numbers of Venezuelan migrants and serve as the first stop for those in transit to other locations in South America. This is the case of Colombia where authorities report that over 438,000 Venezuelans have travelled across the country towards the Ecuadorian border, their main destinations being Ecuador, Peru, Chile and Argentina. In Ecuador, flows have remained steady during the reporting period after peaks observed in July and during the first half of August. The reason for this possibly being the measures announced by the Ecuadorian Government regarding entry requirements.

Despite the fact the situation of migrants, and particularly children, remains dire, great progress has been made during the past month in terms of advocacy and regional cohesion focused on the best interest of the most vulnerable. On 3 September, a "Regional Meeting on Human Mobility of Venezuelan Citizens in the Americas" was held in Quito. Representatives of 13 Latin American countries met to exchange information and good practices fostering better regional coordination mechanisms. 11 countries3 signed the 'Declaration of Quito' and agreed to receive expired travel documents as identity documents of Venezuelan citizens for immigration purposes and decided to establish a regional programme with the support of the United Nations System, for the timely exchange of pertinent information of Venezuelan migrants, aimed at providing aid and achieving an orderly and secure migration.4 On 19 September, Mr. Eduardo Stein was appointed as UN Joint Special Representative for Venezuelan refugees and migrants in the region to promote a coherent and harmonized regional approach, in coordination with national governments, international organizations and other relevant stakeholders.

During the reporting period, as UNICEF Country Offices (COs) advance in implementing tailored immediate response strategies, with noticeable progress in reaching children and families from migrant and host communities, COs are already planning for medium- and long-term approaches, considering the impact that the situation may have for national and local social systems.

Within the framework of the IOM/UNHCR-led Regional Coordination Platform for Refugees and Migrants from Venezuela, humanitarian and development partners at country level – starting with Colombia, Ecuador, Peru, Brazil and Dominican Republic - are currently undertaking joint analysis exercises to build a shared vision of the situation and to better estimate the extent of needs and vulnerabilities of the affected population.

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1 Except for Colombia where authorities have estimated figures for irregular migration.
3 Republic of Argentina, the Federative Republic of Brazil, the Republic of Chile, the Republic of Colombia, the Republic of Costa Rica, the Republic of Ecuador, the United Mexican States, the Republic of Panama, and the Oriental Republic of Uruguay.
4 Representatives of the Governments of the Republic of Argentina, the Federative Republic of Brazil, the Republic of Chile, the Republic of Colombia, the Republic of Costa Rica, the Republic of Ecuador, the United Mexican States, the Republic of Panama, the Republic of Paraguay, the Republic of Peru and the Oriental Republic of Uruguay; Declaration of Quito on human mobility of Venezuelan citizens in the region; Quito, 4 September 2018; <http://bit.ly/2yaUrHo>
Regional Response Strategy

UNICEF’s support is key to monitor, assess and respond to the specific needs and challenges that children and their families face. UNICEF comparative advantage relies on: i) presence in 24 Country Offices across the region, including in the seven countries currently the focus of the response, with long lasting partnerships of upstream and humanitarian work in close coordination with national and local authorities; ii) integral capacity to provide multi-sectoral support in the areas of: Social Inclusion, Health, Nutrition, Water, sanitation and hygiene (WASH), Child Protection and Education for the most vulnerable population regardless of their migration status; iii) a holistic mandate to address human rights, humanitarian action and development.

UNICEF’s strategy for the attention to migrant populations in receiving countries includes the following three pillars:

<table>
<thead>
<tr>
<th>Comprehensive Child Protection</th>
<th>1. Advocate to ensure that the rights of children and their families are at the core of national and regional stakeholders’ actions, including national authorities, civil society organizations and humanitarian actors.</th>
</tr>
</thead>
<tbody>
<tr>
<td>Humanitarian Action</td>
<td>2. Ensure access to services for affected populations - with special focus on children and host communities related to: child protections services, inclusive education, holistic health and nutrition services, safe water, sanitation and hygiene. Response actions must be in fulfilment of humanitarian principles and the framework of international protection applicable to migrant children and their families.</td>
</tr>
<tr>
<td>Development and Social Policy</td>
<td>3. Appropriate articulation between rights-based humanitarian action and development processes, promoting the enhancement of relevant national and subnational social policies and mechanisms to address key gaps.</td>
</tr>
</tbody>
</table>

UNICEF’s Regional Strategy contributes to:

- Protection, Gender, Equity Focus and Rights Up Front approaches.
- Quality access to child protection services, inclusive education, holistic health and nutrition services, safe water sanitation and hygiene for migrant population and host communities.
- Tell the story of children and to communicate the needs, challenges and risks they are exposed to.
- Reinforce existing and new partnerships, multiplying impact and efficiency.
- Urgent humanitarian actions that are linked to medium- and long-term development strategies.

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*People in need figures are adjusted to align with interagency estimations once available.*


**Brazil:** Estimated by UNICEF Brazil, considering that the total population of Venezuelans remaining in Brazil – according to reports for Federal Police, as of December 2017 - had unfulfilled needs in at least one sector.

**Guyana:** Estimates based on IOM/UNHCR Displacement Tracking Matrix (DTM), as of May 2018. Includes Venezuelans and Guyanese returning from Venezuela who have settled in Guyana and require assistance. Figures are currently being revised based on findings of recent field missions.

**Trinidad and Tobago:** Based on UNHCR estimations considering all persons of concern, including 2,243 Venezuelans registered with UNHCR, May 2018. Including Venezuelans in irregular migratory situation.

**Ecuador:** Estimated by UNCT, considering that around 20 per cent of migrants entering Ecuador (approx. 553,000 as of July 2018) are in situation of vulnerability. Number of children in need estimated by UNICEF.

**Peru:** Estimates based on WFP preliminary results for people in food insecurity situation. Number of children based on Migration Office data until July 2018 and Ministry of Internal Affairs of Ecuador data from August to 3 October 2018.

**Panama:** Estimated by UNICEF, considering the annual number of people crossing the Darién frontier plus others in need. UNICEF is working to improve this and other statistics.
UNICEF’s response needs to fit each context. Key areas/modalities of intervention and cross-sectoral priorities have been identified.

Regional Response Actions

Humanitarian Action for Children (HAC) appeal: UNICEF adjusted its Regional HAC in May 2018, increasing its original appeal from US$ 9 million to US$ 28 million to scale up its field presence and programme activities in 2018, including delivery activities, advocacy actions and technical assistance in neighbouring countries (Colombia, Brazil, Guyana and Trinidad and Tobago) and in other receiving countries in LAC. Additionally, UNICEF activated its Emergency Programme Fund (EPF) loan and allocated global thematic funds to scale up the response in the region. Contributions received during the reporting period, have contributed greatly to reduce the funding gap, currently at 44 per cent.

UNICEF also established a Regional Migration Team and activated its Regional Rapid Response Roster to ensure timely remote and in-country support to transit/receiving countries in the following activities:

- **Situation Analysis and Monitoring.** Support COs and governments’ efforts for the analysis and monitor the situation of migrant children and their families.
- **Response Planning.** Support response planning in line with UNICEF Core Commitments for Children in Humanitarian Action as well as the international legal framework, with a coherent regional perspective.
- **Advocacy.** Develop coherent advocacy strategies to promote social inclusion, protect the rights of children and their families and reduce the risk of violence, xenophobia, and other ways of discrimination in all countries receiving the migration influx.
- **Technical Assistance.** Develop technical guidance for actions in each sector and cross-sectoral areas.
- **Partners Mobilization.** Partner with other UN Agencies, Governments, The Red Cross Movement, NGOs and other key stakeholders to support migrant and host communities to leverage resources.
- **Community Engagement and Communications for Development (C4D).** Develop strategies and tailored evidence-based two-way communication processes to engage migrant and host communities, including children and adolescents, as agents of behavioral change to promote social inclusion and protect the rights of children.
- **Capacity building.** Build capacity for country-level response, including community engagement, sectoral and operational skills.
- **Innovation.** Contribute to the development of innovative strategies to increase the capacity of governments to address the urgent and long-term needs of migrants and host communities.

Regional Communication Strategy: UNICEF has developed a flexible global communication strategy aimed at advocating for children and their families’ rights. From 20 to 31 October, UNICEF will conduct a multi-country mission to produce multimedia material as part of a Child Alert to be launched in the coming months.

Technical guidance and in-country support. Regional Sectorial Technical Notes have been developed in the areas of Child Protection, Social Protection, WASH, and Communication for Development. Since February 2018, 29 technical support missions have been completed in the region in support to COs (including Ecuador, Colombia, Eastern Caribbean CO, Brazil, Peru, Guyana), for a total of 436 days of deployments.

Regional Coordination. UNICEF is actively engaged in the IOM/UNHCR-led Regional Coordination Platform for Refugees and Migrants from Venezuela, leading / co-leading three of the four key products of the Platform. UNICEF is currently active in the preparation of the joint Regional Refugee and Migrant Response Plan, to be included in the Global Humanitarian Overview in November 2018. LACRO is providing guidance to COs to ensure a coherent approach is applied at country level to incorporate children and women’s rights in the country-specific chapters of the Regional Plan.
Colombia
Situation Overview & Needs

Colombia remains the main destination for Venezuelans in South America. According to Colombian authorities, the number of Venezuelans in Colombia is currently close to 936,000, of which 50 per cent have regular migration status, 39 per cent are in the process of regularizing their situation and 11 per cent are considered to have irregular status (see Table 1). Moreover, it has been estimated that at least 250,000 Colombians have returned from Venezuela during the past year and a half. The Government’s Administrative Registration of Venezuelan Migrants (RAMV in Spanish) found that children and adolescents under 17 years of age accounted for nearly 27 per cent of Venezuelan migrants remaining in Colombia in an irregular migratory situation as of June 2018.

Colombia is also the first stop for those migrants in transit to countries further south. The national migration authority reports that since January 2018, over 438,000 Venezuelans have left Colombia through the Rumichaca border crossing (Ecuadorian border), their main destinations being Ecuador, Peru, Chile and Argentina. Their journey from Cucuta (Colombia/Venezuela border) to Ecuador can take up to 26 hours using public transportation and up to 15 days traveling by foot, the latter being the only option for many.

The situation of the migrant population is exceedingly precarious. Residing in improvised housing and lacking safe drinking water, toilets and basic hygiene items, many migrants face increased risks of waterborne and other diseases. Cases imported from Venezuela of diseases such as malaria, tuberculosis, measles and congenital syphilis have been reported by health authorities. Partners have reported high numbers of visible cases of malnutrition, and maternal and child health services are not regularly accessible to the migrant population. As found by the RAMV, among the registered population, 98 per cent of pregnant women did not have access to health insurance and 77 per cent did not have antenatal check-ups. A recent evaluation of the nutrition situation among Venezuelan migrants and host communities, conducted by UNICEF together with WFP and FAO in rural areas of La Guajira, Arauca and Norte de Santander found that the biggest malnutrition burden at the moment is found in children under 5 at risk of acute malnutrition (46 per cent of children surveyed) who require comprehensive access to feeding programs, safe water and preventive health care services. According to the national system of epidemiological surveillance (SIVIGILA), as of August 2018, mortality due to malnutrition among migrant children was confirmed at 11 deaths (from 1 death in 2017). The same source reported an increase in the number of cases of acute malnutrition, from 18 in 2017 to 129 in 2018, through August.

Leadership and Coordination

The National Unit for Disaster Risk Management (UNGRD) continues leading the national response with unified command posts (PMUs in Spanish) established in each of the most-affected departments. An advisor to the President of Colombia for the Colombian-Venezuelan Border has been appointed to lead the response. The Ministry of Foreign Affairs plays a pivotal role at the strategic level. Most of the key line ministries—health and nutrition, education, water and sanitation, and the Colombian Institute for Family Welfare (ICBF in Spanish)—have local representation in departmental capitals and several major municipalities and are responsible for developing sectoral response plans. In the international arena, the Government of Colombia has been active in positioning the migrants’ situation, appealing for a concerted approach at regional level while proposing the creation of a regional fund to address the situation.

The operationalization of the UN Regional Platform for the response to the migration situation, led by UNHCR and IOM, is already in process. Since 2016, the HCT, in conjunction with the Interagency Migration Group (GIFMM) led by UNHCR and IOM, has worked to support the Colombian Government analysis and response to the migration situation. In April 2018, the HCT made an addendum to the HRP to include the needs of persons engaged in the mixed migration influx.

UNICEF leads the Water, Sanitation and Hygiene (WASH), and Education in Emergencies clusters, and is a key member of the Food Security and Nutrition, Health, and Protection clusters. Mine Action and Gender-based Violence sub-clusters have also been established. While there is no sub-cluster on Child Protection, UNICEF and a group of national and international NGOs are very active.

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6 Special Stay Permit holders have access to the public health system and can legally work and study in Colombia.
9 Ibid.
in this sector. UNICEF participates in various working groups and maintains an agenda of cooperation, coordination and information exchange with the Ministries of Foreign Affairs, Health and Education, with the Colombian Institute for Family Welfare (ICBF) and the Office of the Ombudsman.

Response strategy

In line with the HRP priorities, UNICEF has prioritized sectors in which girls, boys, adolescents and their families are most affected: WASH, health/nutrition, education - including Early Childhood Development (ECD) - and child protection. UNICEF’s efforts focus on ensuring access to WASH services for affected populations; nutritional screening and emergency assistance; support to hospitals and mobile health teams (especially in rural, isolated areas); local coordination of the Regional Committee of Education in Emergencies to promote an effective use of resources and coordination among partners in the field, in alliance with local education authorities; provision of supplies and educational kits - including for ECD; technical assistance to education authorities for the implementation of regulations that allow undocumented children from all grades to access and remain in schools; and the establishment of protective environments to prevent sexual violence, abuse and exploitation, recruitment and the use of children by armed groups, as well as activities to prevent the impact of landmines, unexploded ordinance and improvised explosive devices in contaminated parts of the country where migrants transit.

UNICEF is actively operating in seven departments: La Guajira, Norte de Santander and Arauca along the Venezuelan border; Bolivar, Atlántico and Magdalena departments along the Caribbean coast; and the department of Nariño along the southern border with Ecuador. In addition, in Bogota – the country’s capital – UNICEF is carrying out direct activities in protection, WASH and health benefiting 400 Venezuelan migrants settled near the bus terminal. Since October, UNICEF has expanded its reach to the department of Putumayo (near the Ecuador border). UNICEF includes both migrants and host communities in its target population considering that some communities receiving the migratory influx are underserved.

Summary Analysis of Programme Response

Health and Nutrition

UNICEF is contributing to the Government’s efforts to reduce mortality from and associated with malnutrition, and to improve the nutritional status of children under 5 by means of capacity building of families, communities and authorities; behavioural change promotion on hygiene and breastfeeding; and supporting mobile outreach health/nutrition brigades that can better access the affected population. Aiming at enhancing the local capacities to manage acute malnutrition, UNICEF has provided hands-on training and institutional support to extramural teams and nutritional officials in eight departments, including Arauca, Norte de Santander, La Guajira, Cesar, Atlántico, Magdalena, Vichada and Guainía. In Norte de Santander and Arauca, 92 people have been trained in SAM/MAM management. In the other six departments, trainings are taking place between October and November 2018.

As agreed with the Ministry of Health, and to ensure access to basic maternal and child health information and services for the affected and host population, UNICEF has signed contracts with the main primary care public hospitals in Arauca and Nariño departments to support extramural health teams, including pre and post-natal care, curative and preventive services for children under 5. The teams also support immunization through regular health services as well as via mobile outreach health/nutrition brigades. This will soon be expanded to the primary care public hospital in Norte de Santander department (Villa del Rosario municipality).

Support to maternal and child nutrition is done through collaboration with public-private hospitals on primary care, particularly on prenatal check-ups (including the provision of micronutrient tablets for pregnant women and antenal counselling on breastfeeding) and growth monitoring for children under 5 (including nutrition assessment and counselling on breastfeeding, provision of micronutrient supplements and deworming medications). In addition, UNICEF is supporting capacity development on the management of malnutrition through training of paediatricians and through clinical observation in emergency care settings across affected departments. Through these activities, around 700 women and children have been reached in Arauca, roughly 50 paediatricians have been trained in Arauca and Norte de Santander in SAM/MAM management.

At the two main border municipalities with the highest influx of people - Maicao (La Guajira) and Villa del Rosario (Norte de Santander) - UNICEF is working with Action Against Hunger (ACF) to ensure medical and nutrition assessment of children under 5 as well as pregnant and lactating women through anthropometric measurements and haemoglobin tests. In case additional support is needed, cases are referred to health services. Services are including also micronutrient supplementation for pregnant and lactating women and children under 5, and home visits and awareness raising activities about healthy community practices.

WASH

With the aim of improving access to safe water for migrant families and host communities, UNICEF has procured and delivered 500 household water filters in urban communities in Riohacha (La Guajira department), benefiting approximately 2,130 people, including 780 children. UNICEF installed a 34,000-litre water tank with electric pump in the Migrant Centre of Maicao city, also in La Guajira, to ensure the centre provides access to adequate water supply for drinking, washing and hygiene. Rehabilitation of water points and latrination in migrant-impacted communities is ongoing in six municipalities in Arauca and Norte de Santander.

14 Centro de Migrantes has capacity to host 60 persons/children in transit.
In coordination with Norte de Santander authorities, UNICEF supported the activation of a local WASH coordination group. At the border crossing in Nariño department (on the Ecuadorian border), UNICEF has started rehabilitation and maintenance works for 24 toilets, installation of storage capacity for up to 20,000 litres of drinking water, and activities for the promotion of hygiene practices, including training and key messages outreach.

Through UNICEF’s ongoing WASH interventions in La Guajira, Arauca, Norte de Santander and Nariño, the number of girls, boys, adolescents and women accessing safe water, WASH facilities and hygiene promotion activities is gradually increasing and expected to reach at least 95,700 people.

**Education**

Approximately 800 children have been enrolled in temporary classrooms in Cucuta (Norte de Santander), Arauca City (Arauca) and Maicao (La Guajira) and are benefiting from school supplies, recreational and didactic kits distributed by UNICEF. Moreover, at least 275 teachers have been trained in the management of temporary classrooms. Nearly 980 children in Norte de Santander are enrolled in educational programmes that include basic life skills building and psychosocial support.

In coordination with the Ministry of Education and partners of the National Board of Education in Emergency, UNICEF continues supporting the application of the ministerial directive that allows undocumented children from all grades to access schools, through advocacy and capacity building with local authorities in five departments (Arauca, Norte de Santander, La Guajira, Atlántico and Bolivar).

An agreement has been established with the Colombian Institute of Family Welfare for capacity building, targeting caregivers and families with children under 5, aimed at promoting healthy and protective child development practices.

**Child Protection**

Since June 2018, UNICEF has been carrying out activities aimed at ensuring that children from both migrant and host communities are protected from risks to their safety and security, namely landmines and other explosive devices, sexual exploitation and gender-based violence, recruitment and use by non-state actors and organized violence, and family separation. These activities are carried out in established child-friendly spaces and community workshops, and through advocacy with authorities to ensure that official protocols are activated, and services are provided. UNICEF currently runs ten fixed child friendly spaces (CFS) (5 in La Guajira, 4 in Arauca, and 1 in Norte de Santander) as well as two mobile CFS that function in tandem with other public activities (in Atlántico and Arauca departments).

UNICEF has reached an estimated 1,318 children and their families in Arauca and Norte de Santander, with key messages on Mine Risk Education; 7,019 children and adolescents in six departments have been trained on the prevention of recruitment and use by non-state actors - via UNICEF’s “Somos Paz” methodology. Nearly 10,000 girls, boys and women in six departments are aware of sexual exploitation risks and gender-based violence. Identified cases were referred to local services. A total of 47 cases of children unaccompanied or at risk of separation have been identified and referred to government services.

As part of UNICEF’s priorities and in order to build capacities for the provision of psychosocial support for children, volunteers - including adolescents and adults - across targeted communities, are being trained on UNICEF’s “Return to Happiness” model for psychosocial support (PSS), including distribution of kits for trained volunteers. At least 8,422 children are currently benefitting from activities led by trained volunteers.

Since October, UNICEF has expanded its reach to Putumayo department (Ecuador border), with Mine Risk Education activities in locations where migrant crossings through mine-contaminated areas have increased.

**Media and External Communication**

UNICEF’s work was profiled in a special supplement to the influential weekly magazine “Semana”, including a three-page spread. The article covered UNICEF’s work in an informal settlement outside of Riohacha (La Guajira), and focused on protection, WASH and ECD activities, with special reference to the anti-xenophobia programme “Super-Panas,” aimed at Colombian adolescents between 10 and 17 years of age, to generate empathy for migrant children and reduce discrimination.

**Brazil**

**Situation Overview & Needs**

As of August 2018, the Brazil Federal Police estimated 75,560 Venezuelans were in Brazil, most entering through the Roraima state border and concentrating in Pacaraima and Boa Vista. Eleven official shelters have been established hosting about 5,000 people – including approximately 1,361 children, while the majority of migrants are living either in private accommodations, spontaneous shelters or on the streets. Between February and August 2018, a total of 2,009 Venezuelan migrants, approximately 30 per cent of

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10. The “Somos Paz” methodology seeks to develop / strengthen children’s capacities through art, communication, music and sports activities.

14. An extract from the spread is available in the following link <http://bit.ly/2ODZWau>

them children, have been voluntarily transferred from Roraima to other states through the ‘interiorization plan’ launched by the Brazilian Government.

According to official records, an average of 500 people are crossing daily into Brazil, many of them with the intention of staying. The recently concluded Displacement Tracking Matrix (DTM) round,¹⁶ found that among interviewees at transit sites (border crossing site and Boa Vista bus terminal), 77 per cent mentioned Brazil was their final destination, while among respondents already settled in Boa Vista and Pacaraima neighbourhoods, 90 per cent expressed their intention of staying in the country.

Conducted by IOM in collaboration with UNICEF, the DTM second round focused on garnering information on the characteristics, needs and vulnerabilities of migrant children. Among 3,285 interviewees, 425 were accompanying children (a total of 726 children), 222 said they were accompanying children other than their own. Nearly a third of the DTM respondents claimed being aware of discrimination or abuse cases, xenophobia and labour exploitation being the most common. Violent events and demonstrations taking place in August and September in Boa Vista, Pacaraima and other municipalities, are evidence of an increasingly tense situation between migrant and host communities.

For migrant children, access to education remains a challenge. According to the education authorities, approximately 3,625 Venezuelan children are enrolled in public schools in Roraima state. Nonetheless, the system is not fully prepared to accommodate large numbers of migrant students, and the quality and type of services provided depend on the school/teachers’ initiatives; a standard system-wide approach is lacking. The DTM found that, among respondents settled in Boa Vista and Pacaraima neighbourhoods, nearly 60 per cent of children between 5 and 14 years of age, were not enrolled in school.

Leadership and Coordination

In February 2018, the Brazilian Government declared a social emergency status in the state of Roraima. The National Army has been designated to lead the response, establishing official shelters in Pacaraima and Boa Vista. The Government of Brazil has adopted a four-stream approach to respond to the upsurge of Venezuelan migrants: 1) provision of accommodation and basic humanitarian assistance in shelters in Roraima; 2) relocation of migrants to other states (interiorization); 3) integration of migrants into the Brazilian society, and 4) support to migrants willing to return to Venezuela.

Authorities at federal, state and municipal levels, are working hand-in-hand with UN agencies and non-governmental organizations to provide basic assistance, including with UNICEF - present in the field since mid-April. UN agencies and humanitarian partners with field presence are: UNHCR, UNFPA, IOM, UNICEF, World Vision, Fraternidade International, Casa de los Niños, NRC, ADRA, CRS, AVSI, Fraternidade Without Borders, Brazilian Catholic Church, Church of the Mormons, International Red Cross, among others. UNHCR is currently leading the coordination of the UN response. The group is formed by 25 organizations, including NGOs, the Judiciary, Public Ministry, Public Defender, UN agencies, the Rights Council and Guardianship Council, Governmental Organizations for Social Assistance, Health and Education.

In Boa Vista, UNICEF leads a Technical Working Group on Children to coordinate the sectoral response in support to the local authorities. Led by UNHCR, a Communication Technical Group was formed with UNICEF participation. UNICEF is also leading the Coordination Committee of Water, Hygiene and Sanitation (CGCAHSA-RR) set up in Roraima, comprised of Armed Forces (main service provider for Roraima shelters), UNHCR, ADRA, National Health Foundation (FUNASA), Fraternidade International, Environmental Boa Vista Municipal Secretariat and the Infrastructure Roraima State Secretariat.

Response Strategy

Building on its development programme to support the most vulnerable and disadvantaged in Brazil, UNICEF’s response to the needs of children and families in the context of migration is focused on ensuring access to essential services and programmes. UNICEF aims at building the capacity of actors responsible for providing protection, education, health/nutrition, water and sanitation (including Government, non-governmental and community organizations), so that they are fully equipped to assist migrant children and families. UNICEF advocates for the rights and voices of children and women as an integral component of the response.

UNICEF has a technical team and a field office in Roraima, cooperation agreements have been established with strategic partners to implement activities, and for strengthening coordination with authorities responsible for guaranteeing the rights of migrant children.

Summary Analysis of Programme Response

Health and Nutrition

With UNICEF support, the vaccination schedule of migrant children, adolescents and pregnant women has been monitored in accordance with the Brazilian vaccination schedule. Children’s health books were distributed to monitor the health, growth and development status of children from birth to age 9.

UNICEF has procured and delivered 12 anthropometric kits¹⁷ for all official shelters. Six additional kits will be provided to the municipal public health facilities closest to shelters. In addition, UNICEF supported the State Government in carrying out a nutritional assessment, screening 279 children under 5 years of age in six shelters. Children identified at nutritional risk were referred to health services. Additional assessments will be conducted in the coming months.

¹⁷ Anthropometric kits include paediatric electronic digital scale, digital anthropometric scale, portable infant anthropometer (infantometer), portable stadiometer and anthropometric tape.
UNICEF, in partnership with the Ministry of Health, ensured the start of food fortification with micronutrients (vitamins and minerals) for all children aged between 6 and 48 months living in shelters. The first 60-days administration cycle has been completed. In addition, in partnership with health teams in two shelters hosting indigenous families, UNICEF is supporting the implementation of family medical records, thus contributing to the reorganization and qualification of health care for migrant children and families.

In Boa Vista, staff involved in the response, including health professionals (doctors and nurses) from local health secretariats, Indigenous Special Sanitary District and military, have been trained on Integrated Management of Childhood Illness (IMCI).

Health and nutrition actions will be further reinforced with a new Programme Cooperation Agreement (PCA) signed with ADRA, focusing on health and nutrition promotion activities and inclusion of migrant children in regular health interventions including childhood surveillance and vaccination.

In October, UNICEF Brazil received funds from the Central Emergency Response Fund (CERF) for multi-sectoral response interventions. These funds will allow UNICEF to provide improved access to basic health and nutrition care for approximately 1,400 children in shelters in Roraima state. Planned actions include training of local health monitors, health and hygiene promotion among migrant and local community, routine Expanded Programme on Immunisation and breastfeeding activities, among others.

**WASH**

UNICEF continues working with national and local partners to ensure that water and sanitation facilities in shelters meet international standards (i.e. SPHERE). Technical support is being provided by UNICEF to the Brazilian Armed Forces and UNHCR, who are currently working on the improvement of WASH facilities in shelters. UNICEF is also strengthening water management and identifying specific hygiene and sanitation interventions with the cooperation of the shelters managers - such as Fraternidade International.

A UNICEF Communications for Development (C4D) consultant has been deployed to Boa Vista to start implementing a C4D plan for the promotion of WASH-related behaviour changes among other issues.

**Education**

At least 600 children are being reached by three UNICEF-supported learning spaces, including through recreational activities, reinforcement of math, Portuguese language, lifesaving messages on hygiene, health and protection, with specific cultural and language approach for indigenous children. An additional seven learning spaces are also in the process of being established.

With UNICEF support, aimed at the enhancing the quality of education for children in shelters, 47 teachers - including 38 Venezuelans (21 from indigenous community) and nine Brazilians - have been trained to operate temporary learning spaces. The Armed Forces in coordination with UNHCR are adapting 28 containers to be used as temporary learning spaces for shelters.

To further strengthen UNICEF’s capacities in the field, local staff is being recruited with the additional objective of reinforcing sector coordination with education representatives, NGOs and the Federal University of Roraima. In late October, UNICEF and Fraternidade International will conduct a workshop to share experiences and develop proposals for education programmes focused on the inclusion of Venezuelan children and adolescents into the formal education system, with participation from representatives from schools and other relevant authorities.

The CERF project will enable UNICEF to operate, for 6 months, temporary Learning Spaces for Venezuelan children and adolescents living in shelters in Boa Vista and Pacaraima.

**Child Protection**

In partnership with World Vision International, UNICEF has established six Child Friendly Spaces (CFSs) including: 3 shelters, 1 Reference Centre, 1 Screening Centre in Boa Vista and 1 in Screening Centre in Pacaraima. At least 3,655 children are being reached with CFS activities. Between October and December 2018, nine additional CFSs will be established in partnership with Fraternidade International.

The UNICEF-led Technical Working Group on Children has conducted data collection on the situation of children living outside shelters, mapping the capacity of the local protection network and the most recurrent rights violations. A report will be released in October.

UNICEF is contributing to the interiorization process by reinforcing the importance of childcare in the process and identifying special/individual needs of children. Initially, UNICEF has been involved in the process in Manaus, Amazonas.

In coordination with Núcleo de Estudos da Criança e do Adolescente (Neca), UNICEF is preparing 14 training workshops on topics such as human trafficking, care routes and protection of migrant children. About 1,000 people are expected to attend those training sessions, mainly professionals working in national protection systems working with children and adolescents at risk.

Recently received CERF funds will contribute to ensure the functioning of Child Friendly Spaces, including provision of psychosocial support, as well as identification, registration, referral and follow-up of extremely vulnerable children, among other actions.

**Communications for Development (C4D), Community Engagement & Accountability**

UNICEF carried out a rapid assessment, developed a C4D strategic response plan and is gradually implementing six main lines of action: 1) Promotion of healthy behaviours, including breastfeeding; 2) Participation of adolescents as peer educators to promote hygiene, and dissemination of education and protection-related messages; 3) Capacity building of partners to disseminate UNICEF’s C4D messages among the migrant population; 4) Dissemination of information about children’s rights and access to services; 5) C4D
for advocacy to influence attitudes and behaviours of civil servants towards the migrant population; 6) Establish feedback mechanisms on child-related issues to ensure that the migrant population can regularly report back on the quality and relevance of support services. UNICEF has developed partnerships with grassroots organisations and works closely with implementing partners to promote communication, social mobilization and community engagement in the areas of nutrition, health, education and protection, addressing the related behavioural risks. Activities are currently focusing on water, sanitation and hygiene in order to prevent waterborne and other communicable diseases. UNICEF is developing information material on access to education and public health services, as well as on protective behaviour for children and adolescents.

Supply and Logistics

Supplies procured by UNICEF and delivered via partners include:

- School furniture to improve learning spaces for children in Boa Vista and Pacaraima, including: 70 wooden tables, 180 chairs, 30 white boards, 10 cabinets and learning toys.
- 10 kits for teachers including computers, sound equipment and projector.
- 12 anthropometric kits for shelters.
- 15 CFSs and 10 kits for learning spaces.
- School material for 500 children, reached by activities in Boa Vista shelters.

Media and External Communication

With the established presence of UNICEF in Roraima, in coordination with UN agencies and partners, the CO has produced press releases other communication materials, and has successfully engaged with national and international media outlets to raise awareness about the situation of migrant children in Brazil and to highlight progress made in the response.¹⁸ UNICEF plans to produce communication materials including human interest stories, press releases, social media posts as well as a quality images and a newsletter in English, Portuguese and Spanish. The newsletter will be used as a tool to keep other UN agencies, partners, governments and beneficiaries informed about UNICEF’s response.

Guyana

Situation Overview & Needs

Given the limited capacities of the Guyana Government to register and process all arrivals, particularly considering the numerous informal entry points across the Guyana/Venezuela border (Regions 1 and 7), official figures do not fully reflect the migration inflows of Venezuelans and returning Guyanese. In addition, it has been reported that Venezuelans are also entering the country through the Brazilian border (Regions 8 and 9). The Ministry of Citizenship has reported official entries from Venezuela as follows: 892 (2016), 1,136 (2017) and 2,220 (as of September 2018), including 50 per cent women and 15 per cent children. Nevertheless, it has been estimated that only two out of ten entries are registered.

Acknowledging the existing gaps in terms of access to accurate information, and based on IOM-supported DTM rounds, UN agencies made an initial estimation of some 10,500 - 14,500 Venezuelans settling in Guyana. Moreover, as part of the dynamic mobility patterns, between 40,000 and 60,000 Venezuelans could be entering Guyana on a short-term basis. Venezuelans are settling in communities already facing significant strains on basic social services. In this scenario, according to preliminary estimations, up to 12,000 people - including 4,800 children - are in need of assistance, considering host communities at a 1:1 basis.

At the request of the Civil Defence Commission (CDC) and as lead for the UN Emergency Technical Team (UNETT), UNICEF is sourcing technical surge capacity to further increase national capacities for child-centred information management, in order to develop a more precise analysis of the actual flows, and to better inform and support the national response coordination mechanisms.

UNICEF has conducted five field assessments to the Administrative Regions bordering Venezuela, focusing on the needs of children, including child protection, WASH, nutrition and education sectors. These missions have been conducted with participation of Government partners and UN sister agencies. Additional missions are scheduled along migrant routes and in settlement sites to profile caseloads and fast track a referee system for undernourished children or cases of abuse.

Education is currently one of the main concerns. Village councils are encouraging parents to send children to schools and headmasters are reporting receiving Venezuelan students. However, the schools’ absorption capacity is stretched, and accommodation is now inadequate due to intense heat and overcrowded conditions.

Leadership and Coordination

As part of the country risk management system, the CDC - with the Department of Citizenship - is the national platform to coordinate and manage the emergency response. CDC is gathering data on the impacts of the outflows from Venezuela to inform the development of a response plan which is linked with a DTM exercise led by IOM, currently under review.

The UN system has an active Emergency Technical Team (UNETT) that supports the Resident Coordinator. Chaired by UNICEF, UNETT has developed an Inter-Agency response plan for the emergency.

Response strategy

UNICEF has developed a response plan with interventions envisaged for equal numbers of migrant children and their host communities, mainly indigenous populations. Targeted locations are in the four regions receiving the migration influx (1, 7, 8, 9) and focus is on providing technical, financial and logistical support to key partners to address the most urgent needs in health, nutrition, WASH, non-food items, education and protection sectors.

Summary Analysis of Programme Response

Health and Nutrition

By the end of September 2018, at least 103 Venezuelan migrants and 148 Guyanese from their communities have been reached by field assessments and interventions, jointly conducted by UNICEF and Government partners. In Khan’s Hill community near Maburama (Region 1), 50 caregivers of children between 0 and 23 months benefited from UNICEF-supported infant and young child feeding counselling for appropriate feeding.

In addition to technical assistance for the National Nutrition in Emergency Coordination Platform, UNICEF will promote counselling for parents and other care givers on issues of stimulation, child care, protection, nutrition, prevention of childhood illnesses and WASH. Key information on nutrition services (including how and where to access them) is being developed in relevant languages, including Spanish and indigenous dialects. Nutrition services in Region 1 will be strengthened through training of health care staff on breastfeeding counselling and nutrition support.

Qualitative interviews are on-going to assess the nutritional situation of the incoming migrants, and anthropometric measurements will be taken by a team from the Food Policy Division of the Ministry of Public Health (MoPH) to assess the nutritional status of migrant and host communities. A medium-term strategy is under development based on the findings of an upcoming UNICEF/MoPH field assessment in Region 1.

UNICEF and nutritionists from the Food Policy Division/MoPH have developed a Food Distribution Guide for food donors, including recommendations on locally available food items based on the dietary preferences of both migrants and host communities.

WASH and Non-Food items (NFI)

Through the CDC, UNICEF has procured essential WASH and shelter items for 180 families, currently prepositioned in the sub-national Emergency Operation Centres in Regions 1, 7 and 9. As of 24 September, two rounds of distribution have been conducted, reaching 110 families (approx. 550 people). Coordinated distributions include NFIs from sister UN agencies and the private sector.

Education

Field assessments on the education sector situation are ongoing, while negotiations with the Ministry of Education continue regarding a joint plan for increased coverage in targeted regions.

Child Protection / Social Protection

With UNICEF support, two social workers and two paraprofessional social workers are being recruited to improve local authorities’ capacities for service delivery in Region 1, including deployment of mobile teams for service outreach namely birth registration, child protection and other social services.

UNICEF is providing technical support to the Ministry of Legal Affairs in drafting policy related to statelessness and with moving forward on the ratification of the Hague Conventions on Intercountry Adoption and Child Abduction.

Trinidad and Tobago

Situation Overview & Needs

Trinidad and Tobago is said to have the highest population of Venezuelans in the Caribbean territories, with an estimated total of 40,000 in the country by the end of 2017, nearly 10 per cent of them children. As many remain in an irregular migrant situation, they are unable to obtain basic services and are therefore exposed to exploitation, extortion, trafficking, abuse, manipulation and a range of other risks, including psychosocial distress, discrimination and xenophobia.

In November 2000, Trinidad and Tobago acceded to the 1951 Convention relating to the Status of Refugees, however it has not been incorporated it into local law and there is no national legislation governing asylum matters. The Government is in the process of
drafting enabling legislation (the ‘Refugee Bill’) with the technical assistance of UNHCR and Living Water Community (LWC) - UNHCR’s local partner organisation and the main NGO working on refugee and migrant issues in the country. It is envisioned that the Refugee Bill will incorporate all the rights and duties of asylum-seekers, refugees and best practices in the region. UNICEF Eastern Caribbean Area Office (ECA) has advocated at the highest level for the Government to expedite the passage of the legislation as part of efforts to respond to the needs of the migrant community.

Leadership and Coordination

IOM and UNHCR are leading the UNCT response, working closely with the Ministry of National Security and the Immigration Division and providing technical assistance to bolster national capacities. The UNETT, chaired by UNHCR, is in the process of developing an inter-agency contingency plan. Joint UN and donor combined efforts are contributing to support the Government efforts to meet its international protection obligations to ensure effective access to basic rights and services to those in need.

UNICEF will provide support to UNHCR and IOM for the country level workshop in October, towards the development of a Regional Refugee and Migrant Response Plan.

The Office for Disaster Preparedness and Management (ODPM) is in the process of gathering data to analyse the impacts of the outflows from Venezuela, in order to inform the development of a contingency plan. Trinidad and Tobago has a vibrant civil society community committed to human rights, including the NGO LWC whose capacity is critical in the current situation and is currently being boosted.

Response strategy

UNICEF has developed a response plan focusing on key interventions in nutrition, education, child protection with a mainstreamed Communications for Development (C4D) component. UNICEF is supporting children by enhancing their access to education (including ECD), psychosocial support, adequate nutrition, and a safe space for socialising, learning and play. It focuses on strengthening networks and building the capacity of key national actors to better respond to and address the needs of affected children. UNICEF’s plan targets duty bearers, including parents and caregivers to ensure healthy protective environments, necessary support and respect for children’s rights.

UNICEF ECA works closely with UNHCR to strengthen community-based protection mechanisms. In addition, UNICEF engages and works closely with other national and non-governmental partners to build their capacity and create conditions for strengthening on going interventions and ensuring sustainability. UNICEF works with other UN Agencies, national and non-governmental partners to ensure all children, regardless of legal status, nationality or statelessness, have the right to be protected from harm, obtain essential services and be with their families. Furthermore, UNICEF and partners advocate at the highest level to guarantee the proper implementation of legal frameworks and provide technical support to national authorities.

Summary Analysis of Programme Response

Health and Nutrition

UNICEF has partnered with the local NGO LWC to conduct an assessment of the nutrition situation of migrant population, in particular children under 5 and pregnant and lactating women. The assessment comprises of screening of children for malnutrition and evaluation of factors contributing to the deterioration of the nutritional status. Information collected will shed light on the nutritional situation of most vulnerable groups and will be used for advocacy and awareness raising purposes, while informing a specific programmatic response. A total of 32 children have been assessed, none showing signs of malnutrition. Partnerships have been established with the local health authority to provide vaccination where needed. In addition, UNICEF has supported 170 children with access to school-feeding programme.

Education

Through a UNICEF partnership agreement with LWC, the coverage of the Temporary Learning Centre located in Port of Spain has been expanded from 86 to 170 children. In collaboration with LWC, a 2-day training was conducted reaching 27 teachers and staff from LWC Temporary Learning Centre. The training touched on topics including rights-based child-centred teaching and Positive Behaviour Management techniques aimed at providing strategies to better manage difficult behaviours, engage students for improved learning, and to help affected students cope with dislocation challenges. UNICEF has also provided school supplies and transportation for the children to and from the learning centre.

Child Protection

A Child Protection Officer was engaged in August 2018 to support child protection activities. Ongoing actions under the child protection umbrella include the development of a child protection strategy, referral mechanism for case management, internal child protection protocols, and child protection workshops for LWC staff.

A total of 28 local facilitators have been trained on the “Return to Happiness” programme for psychosocial support (PSS) and the roll-out of the RTH programme for children and their caregivers is planned for the 3rd week in October 2018.

Design and development of child-friendly community spaces is in progress in collaboration with partners, including the Archdiocese Ministry for Migrant and Refugees (AMMR) and Catholic Education Board of Management. Five spaces have been located thus far to be used to extend educational, ECD, nutritional and psychosocial services to children unable to access the temporary learning space and those who are unregistered.
Seven cases of unaccompanied children between 14 and 17 years of age (4 girls/3 boys) have been registered by UNHCR. LWC and the Children’s Authority are working together in the management of these cases, all children have been provided with alternative care arrangements.

Communications for Development (C4D), Community Engagement & Accountability

UNICEF is working with LWC to develop a draft C4D strategy targeting children and their parents. In collaboration with the NGO, UNICEF also engaged children, adolescents and their parents to understand any issues in terms of health, education, WASH and child protection. They were also consulted in the development of key messages for their peers. In addition, UNICEF engaged with teachers to get their inputs in the development of culturally relevant communication messages and materials for refugee children. Communication materials promoting good handwashing habits targeting children and their parents are currently being disseminated to migrant population in collaboration with Living Water Community and UNHCR.

Materials promoting good nutrition, child protection and positive parenting including how to cope with xenophobia have also been developed and are currently being translated into Spanish for dissemination.

Ecuador

Situation Overview & Needs

Around 677,000 Venezuelans have entered Ecuador through the Colombian border since January 2018 (including approx. 120,000 people under 19 years of age), at a daily average of around 2,600 people. After months of steady increase, the influx has slightly decreased since mid-August. Due to the high migration influx, on 28 September 2018, the Ecuadorian Government extended the state of emergency in the provinces of Carchi, Pichincha and El Oro for an additional month.

After measures taken by authorities in order to control the peak in migration flows registered in August (i.e. request of valid passports and IDs), at the behest of the Ombudsperson, a judge resolved to cease the application of such measures and set a 45-day period for the Ministry of Foreign Affairs to come up with a response plan that guarantees the rights of migrants. On 4 September, governments of the region issued the Declaration of Quito in which, among other resolutions, governments agreed to accept expired passports and identification documents as valid travel documents.

The precarious conditions of Venezuelans staying or transitioning through Ecuador, require a response that addresses their most urgent needs, particularly around the creation of protection protocols for unaccompanied and undocumented children on the move and their families; social protection mechanisms (including cash transfer); safe spaces for children and families in transit; assistance in migration registry for families with children, information and legal assistance.

The health situation of Venezuelans arriving in Ecuador is also poor. Field reports by UNICEF have identified a series of health issues amongst this population, including acute illnesses such as diarrhoea, respiratory diseases, asthma and bronchospasm, parasitosis and dehydration. There has also been an increased risk of reintroduction of communicable diseases such as measles, yellow fever, diphtheria, malaria, HIV, TB, and other illnesses transmitted by water and food. As of September 2018, the Ecuadorian Ministry of Health has registered 19 new cases of measles in the country, 11 of these cases correspond to individuals of Venezuelan nationality. These are the first recorded cases of measles in Ecuador in 12 years.

In addition to the epidemiological shifts of a mobile population, the lack of economic resources often limits the ability of Venezuelan migrants to access suitable, and nutritious food for young children and their families, and this pushes families to reduce their meals, or to consume over-processed food with low nutritional value. Although not yet assessed through a situational assessment, it is understood that food insecurity often increases the likelihood of malnutrition amongst children and pregnant women. In light of this situation, it is pivotal to build a response that supports migrants’ access to food assistance and continuing medical attention, immunization, prevention of disease outbreaks and dehydration; non-food items and adequate shelter and housing facilities with special attention to children, pregnant women and nursing mothers; adequate and sufficient sanitation facilities, access to safe water supply, hygiene and solid waste management in concentration sites.

Leadership and Coordination

Since August 2018, given the peaks in arrivals of Venezuelans in Ecuador, the Ministry of Foreign Affairs and Human Mobility declared a state of emergency in three provinces most impacted by the migration flows: Carchi (northern border), Pichincha and El Oro (southern border) provinces, in order to allow authorities to develop a contingency plan and establish mechanisms for the provision of humanitarian assistance. The Ministry has instructed local Human Mobility Boards, the National Secretariat for Risk Management (institution responsible for humanitarian assistance), Ministry of the Interior, Ministry of Economic and Social Inclusion, and all authorities at national level to take action in order to mitigate the risk and respond to the current emergency. The National Secretariat for Risk Management has prepared an action plan and in turn, the Ministry of Foreign Affairs is working on a response plan intended to attract donors.

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20 Government of Ecuador, Migration Registries, January – September 2018. The source does not provide figures for children, but for people under 19 years of age.
21 Representatives of the Governments of the Republic of Argentina, the Federative Republic of Brazil, the Republic of Chile, the Republic of Colombia, the Republic of Costa Rica, the Republic of Ecuador, the United Mexican States, the Republic of Panama, the Republic of Paraguay, the Republic of Peru and the Oriental Republic of Uruguay, Declaration of Quito on human mobility of Venezuelan citizens in the region, Quito, 4 September 2018, <http://bit.ly/2yaUrH0>
22 Ministerio de Salud Pública del Ecuador. Dirección Nacional de Vigilancia Epidemiológica. Gaceta Epidemiológica Semanal No. 37, 18 September 2018
In Rumichaca (Carchi province), San Miguel (Sucumbios province) and Huaquillas (southern border crossing), there are local interinstitutional boards working on coordination to strengthen the provision of basic services. However, resources and capacities of public institutions are being overstretched and coordination between national authorities and local services is deficient.

UN agencies are holding regular meetings to coordinate response efforts, share information, and establish joint response interventions. UNICEF continues leading the WASH response both in Rumichaca and in San Miguel, and child protection efforts at national and local level. The Regional Coordination Platform led by UNHCR and IOM has been launched at country-level and UNICEF is contributing to the development of the country response plan following the regional strategic objectives proposed by the platform.

Response strategy

UNICEF has deployed additional staff at the borders to support coordination efforts and to monitor vulnerability situations that may arise. UNICEF has designed a coordinated response plan focused on addressing the most pressing needs of children and families on the move, both at the crossing points (being implemented) and along the route (in planning phase). The five main pillars are: 1) advocacy and communication at the national level; 2) child protection procedures for unaccompanied children and to avoid family separation due to lack of documents; 3) strengthen local child protection systems; 4) family support hubs along the route / main destination cities; and 5) provision of humanitarian supplies.

At the same time, given border restrictions more families will opt to remain in Ecuador and therefore integration of Venezuelan children and families will become a priority for UNICEF’s regular programming. The response will then focus on the transition to development interventions to be mainstreamed across all sectors.

Summary Analysis of Programme Response

Health and Nutrition

The Ministry of Health, in collaboration with partners, has been conducting several health and nutrition related interventions to address the emerging needs of the Venezuelan populations. UNICEF is actively supporting these actions by providing timely treatment of prevalent childhood and adolescent diseases of arriving children and adolescents through:

- The provision of kits at the northern border for the care of children under 4, containing diapers, anti-rash cream, baby beanies for the cold weather, thermal blankets, wipes. 300 of these kits have been delivered to the Southern border of Ecuador and Peru.
- Training of health care workers on the integrated management of childhood illness (IMCI)
- Temporary safe spaces for children, adolescents, pregnant and lactating women.
- Clean water points.

As a way forward, UNICEF will also mobilize nutritional supplements such as Ready To Use Therapeutic Food “RUTF” to prevent acute malnutrition, vitamin A, Zinc, and ORS for rehydration. To respond to respiratory diseases and parasitosis, UNICEF will also supply Salbutamol and Albendazole. In addition to this, the distribution of baby kits will continue, and RUTFs (Plumpy Doz) will be included as part of the kits. Supplies have already arrived in the country and soon will be distributed across health posts in the emergency zone.

UNICEF has recruited a Health and Nutrition National UNV to support coordination at local level in Túcán, specifically supporting the distribution of supplies in the health posts in the northern border.

With CERF funds received in October, UNICEF expects to reach around 10,000 children with health and nutrition services, including provision of life saving supplies (e.g. Oral rehydration salts, ready-to-use therapeutic food and nutritional supplements), in addition to communication activities on health and nutrition (hygiene promotion, breastfeeding, etc).

WASH

A WASH specialist currently supports the coordination of the WASH response in Túcán (Carchi province). UNICEF is working with its partner ADRA to rehabilitate sanitation facilities near the migration entrance point. Water filters are regularly replaced to ensure access to safe drinking water. During days in which more than 3,000 people enter through Rumichaca, UNICEF has delivered 224 jerry cans and aquatabs to families in transit.

UNICEF is delivering baby kits that contain basic hygiene supplies for 2,500 children under 3 years of age. In addition, more than 1,000 packs of diapers were distributed in August to families with children under 3 years of age.

At local level, UNICEF holds regular meetings with the Túcán local government in charge of safe water provision and sanitation services. UNICEF has drafted a project plan for a wastewater treatment system that is currently under review of local authorities.

Education

UNICEF provided technical assistance to the Ministry of Education to identify the gaps and barriers of inclusion of Venezuelan children and adolescents in formal education, to estimate the new demand for educational services and calculate the current capacity of the system. Technical assistance was also provided for strengthening of norms and principles to guarantee a rights-based approach to education for all vulnerable children, with special emphasis on children in humanitarian situation and mobility.

Early childhood development kits were distributed, and a national team was trained to apply ECD materials adequately in child-friendly spaces at border crossings.
Child Protection
UNICEF is advocating at local and national levels for the fulfilment of rights of Venezuelan children and adolescents entering the country. As part of these advocacy efforts, UNICEF is working on child protection procedures for unaccompanied children and to prevent family separation. With this procedure in place, children will be able to continue their journey safely with proper registration, despite issues with their original documentation. UNICEF continues working with the Ministry of Social Inclusion on strengthening and adapting national regulations for handling these cases.

UNICEF and its partners are currently collecting data through Kobo Toolbox on children and adolescents that have been denied regular migration registration upon entering the country and have continued their journey. As of 30 September, UNICEF has identified and registered more than 1,000 children and adolescents who have not been registered through the formal migration process.

Through counterparts, UNICEF is providing support for children at CFSs in Rumichaca and San Miguel. Each CFS receives approximately 700 children per month. CERF funds will contribute to run both CFSs.

UNICEF is also currently working with UNHCR and other partners in drafting a proposal for Family Support Hubs to be set up along the route. These hubs will offer services that include family reunification services, CFS, first aid, psychosocial and emotional attention, legal advice, among others.

Shelter and NFI
UNICEF has provided eight tents that have been set up at both border crossings, serving as temporary shelter for families with children who need to spend the night at the border, either because they do not meet the documentation requirements, need time to gather enough money to continue their journey or must wait long hours to complete the immigration process. To ensure proper administration of the tents and adequate monitoring of the status of people using the service, UNICEF has signed an agreement with ADRA. In addition, approximately 3,800 blankets have been distributed to families who spend the night at Rumichaca, where temperatures can reach 6°C at night.

Social Protection
UNICEF, with its partner HIAS, is providing cash transfers for families on the move. By the end of September, at least 122 families have benefitted from this intervention. Cash transfers are intended to cover costs of transportation, food or accommodation services for children during the journey.

Communications for Development (C4D), Community Engagement & Accountability
DTM assessments indicate that 19 per cent of families on the move do not have access to information that allows them to continue their journey safely. UNICEF will provide life-saving information through social media and printed material for Venezuelans who enter the country to address these information gaps. Furthermore, UNICEF has developed a national communication strategy in coordination with the Ministry of Education that includes promotion of solidarity and respect towards migrant children and adolescents’ rights.

Supply and Logistics
UNICEF has relied on its prepositioned contingency stock to respond to the emergency, delivering more than 3,400 blankets (benefitting over 5,200 children), 224 jerry cans, aqua tabs to families in transit; and setting up tents in both border crossings that provide shelter to approximately 90 families in transit every night. In addition, UNICEF has purchased thermic blankets, CFS supplies and baby hygiene kits locally. The delivery of these lifesaving supplies is being carried out in coordination with the Ministry of Social Inclusion and local partners. In addition, 24 ECD kits have been distributed to northern and southern border locations.

UNICEF still has several inputs stored in the warehouse according to the internal Strategy and Contingency Planning. Supplies available are: 1 tent (72m²), 5 collapsible water tanks (5,000 l.), 1 collapsible water tank (10,000 l.), more than 17,000 jerrycans (10 l.), 550 tarpaulin plastic sheets (4x5 m.), 239 tarpaulin rolls (4x50 m).

UNICEF has acquired nutritional and health supplies to respond to the health needs of the Venezuelan population. At the moment these supplies are stored in the warehouse waiting to be delivered to the different health posts. Supplies available are: middle-upper arm circumference (MUAC) strips, thermometers, pulsi oximeters, 30 000 Ready to Use Therapeutic Food “RUTF”, 30 000 Zinc tablets, 15 000 ORS packages, 5 000 doses of Salbutamol, 2 500 tablets of Albendazole. Supplies available for baby kits are: 2 500 fabric bags, 1 200 diapers packs size M, 800 diaper packs size G, 500 diaper packs size XG, 2 500 thermal blankets, 2 500 glycerine soaps, 2 500 baby combs, 2 500 wipes packs, 2 500 anti-rash cream.

Media and External Communication
UNICEF will disseminate information such as human-interest stories, information on the rights of children on the move and the ECO response actions through social media and other traditional media sources.
Peru

Situation Overview & Needs

Peru has witnessed increased numbers of migrants from Venezuela in 2018. In August, the number of daily admissions, primarily through Peru’s northern border with Ecuador, peaked at nearly 3,000. Currently, around 2,000 Venezuelans are entering Peru on a daily basis.

Various government migration measures have impacted the flow of migrants in Peru. The measures put in place by the Chilean government to limit migration drastically reduced the movement of people through Tacna on Peru’s southern border with Chile, leaving migrants stranded in Peru. On 25 August, Peru started requiring a valid passport for all Venezuelans entering the country. However, on 5 October, a court suspended the measure, instructing Peru’s Ministry of the Interior and Migration Office to develop a national strategic plan within 30 days to regulate the migration of Venezuelans in a way that guarantees their basic rights. While the passport requirement resulted in an initial decrease in Venezuelan entries, the numbers had steadily started to increase. The measure also triggered an increase in the number of Venezuelan refugee claims.

According to Peruvian and Ecuadorian authorities’ estimations, nearly 580,000 Venezuelan migrants and asylum seekers remain in the country as of 3 October 2018. The exact number of migrant children is unknown but estimated to be approximately 74,000.

At the entry point on the northern border, authorities are struggling to provide services to increasing transitory and settled populations. Services provided by the Government of Peru and UN implementing partners at the CEBAF (border control site) are not permanent, leaving gaps in the identification of particularly vulnerable cases in terms of protection, health and nutrition.

While most migrants move on to other regions of Peru, those who stay in Tumbes face precarious living conditions, staying in overcrowded dwellings and exposed to health risks. Children in particular are exposed to abuse, exploitation, violence, xenophobia and lack of access to health, education and other basic services. The Government of Peru has declared an emergency in border districts of Tumbes to respond to risks related to health and sanitation. By the time of this report, 270 Venezuelan children and adolescents were enrolled in schools in Zarumilla, Zorrito and Tumbes provinces. There were 44 unaccompanied migrant children placed in residential care in August and September.

More information is required on the situation and needs of Venezuelan migrant children and their families settling in main cities such as Lima. With the influx of migrants, public services are facing higher demand and the need to strengthen their capacity to respond to the specific needs of migrants, particularly on the northern outskirts of Lima. In August, regional education authorities reported 24,000 Venezuelan primary and secondary students in Lima, including 3,000 students who are conditionally enrolled due to a lack of documentation.

Leadership and Coordination

The Government of Peru is leading the response through the Special Commission for Refugees of the Ministry of Foreign Affairs. This entity processes asylum cases while the National Migration Office processes migrant cases.

UNICEF participates in the Refugees and Migrants Working Group (GTRM in Spanish), led by UNHCR and IOM. This group serves as a national response coordination platform. IOM and UNHCR are implementing initial response actions funded by a regional CERF. Both agencies are working on the northern and southern borders.

UNICEF is coordinating daily with IOM, UNHCR and other NGOs in Tumbes. UNICEF is also coordinating with local authorities in Tumbes through existing and ad-hoc government platforms.

Response strategy

UNICEF will focus on protection issues (including trafficking, separated children, lack of identification documents, lack of access to protection mechanisms), nutrition status, health conditions, and will support the strengthening of national services (including health, education, social protection, etc.) to cope with the influx. UNICEF’s response considers both the arrival of migrants at the northern border in Tumbes and the settlement process in main cities such as Lima. UNICEF’s response strategy targets vulnerable migrants and refugees, particularly children and adolescents travelling with families, unaccompanied or separated from their parents and pregnant and breastfeeding women. At the same time, UNICEF is working with host communities and organized migrant communities to improve settlement conditions and networks.

Summary Analysis of Programme Response

Health and Nutrition

UNICEF conducted a nutrition assessment of children under 5 at the CEBAF in Tumbes from 22 August to 29 August, screening 317 children. The assessment found that infant and young child feeding practices were inadequate, putting them at risk of undernutrition. Furthermore, 3.2 per cent of children under 5 had moderate acute malnutrition, reaching more than 5 per cent in children aged 2 and 4 years. In response, the Regional Health Directorate of Tumbes, in coordination with UNICEF, is delivering preventive multi-micronutrients to the children screened.

Since 17 September, UNICEF is providing health and nutritional screening and counselling at the CEBAF, reaching a further 294 children under 5 (511 in total, including the assessment). In parallel, UNICEF is providing psychological counselling to families, serving an average of 20 cases per day. UNICEF is also coordinating with and assisting IOM in the definition of nutritional recommendations for food distributions at the CEBAF.
buting hygiene items (e.g. socks, toothbrush, soap) to each child served at the child friendly space in Tumbes. UNICEF is regularly revising the content of these items to respond to evolving needs. Additionally, UNICEF is in the process of procuring hygiene kit supplies customized for travellers, to be distributed to migrant families.

**Child Protection**

UNICEF is providing support for the resolution of cases of unaccompanied or separated children in Tumbes, through coordination with the Migration Office, the Special Protection Unit of the Ministry of Women and Vulnerable Populations, judge, and other local actors; and by promoting measures that avoid the institutionalization of minors.

Since 29 August, UNICEF has implemented a child friendly space within the CEBAF, where 2,163 children and adolescents in transit (1,117 girls and 1,046 boys) have received psychosocial support. Also, at the CEBAF, UNICEF is providing psychological counselling for families, serving an average of 20 cases per day.

**Education**

UNICEF is providing technical assistance to the Ministry of Education to define strategies to monitor access of migrant students to school and to ensure appropriate guidelines and resources to accommodate services for them. UNICEF has worked with the Ministry of Education and regional education authorities to collect and report data on the number of Venezuelan students enrolled in schools at national and sub-national levels. These actions have provided information on the scale of enrolment and the current needs for materials and will help inform planning for the 2019 school year.

**Communications for Development (C4D), Community Engagement & Accountability**

UNICEF is developing a C4D strategy, with government participation, that will support planning, implementation, monitoring and assessment of interventions. UNICEF is working to align the strategy across implementing partners.

**Supply and Logistics**

UNICEF is in the process of procuring two tents that will support triage and vaccination activities at the CEBAF in Tumbes. In addition, UNICEF and the government are coordinating the procurement of RUTF to provide nutritional support to children under the age of 5 at high risk of acute malnutrition.

**Media and External Communication**

UNICEF is running a social media campaign of micro-stories with the hashtag #RecibelonConAmor to raise awareness about the situation of Venezuelan child migrants and their families. The campaign has had a reach of over 182,000 and engagement of 7,050 people on Facebook, Instagram and Twitter, and was featured by national media.19 Human interest video stories are currently in production.

UNICEF – with input from migrant children and families, and the Ministries of Education, Health, and Women and Vulnerable Populations, and the Migration Office, among others – is developing a practical guide for migrants on procedures and requirements for accessing basic services and regularizing their migration status in Peru.

Additionally, UNHCR and IOM are developing a communication campaign to build empathy between the Peruvian population and Venezuelan migrants with the participation of other agencies, including UNICEF.

**Panama**

**Situation Overview & Needs**

According to the National Migration Service, the number of Venezuelans in Panama is approximately 60,000. Nevertheless, IOM estimates that at least 88,000 regular and irregular migrants remain in Panama, 90 per cent of them in Panama province. Partners report a concerning deterioration in living conditions of Venezuelans in Panama, including overcrowding, restrictions to access to health services, discrimination and xenophobia.

There is no official information available on separated or unaccompanied children, children left behind in Venezuela by migrant parents, or about children who may need international protection. Information is also unavailable on whether lack of spaces, economic restrictions, expiration of passports or other documents or discrimination have impacted school attendance. However, preliminary results of the DTM Survey of Needs and Vulnerabilities – conducted by IOM with UNICEF support - reveal that based on a sample of 1,200 households of Venezuelan nationals living in Panama, 21 per cent of children between 6-11 years old are out of school (primary education) while the national percentage for this cycle is 12.3 per cent (UNESCO 2015). It is also important to note that 66 per cent of children in preschool age are out of school, while the national percentage is 46.4 per cent (UNESCO 2015). The survey gathered information about 263 children who comprise 17 per cent of the members of the 1,200 surveyed households.

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Gaps have been identified in official and monitoring procedures for the migration flow. Authorities’ records do not collect disaggregated data and no mechanisms are in place to identify cases in need of special protection, except for unaccompanied children who are directed to SENNIAF (National Secretariat for Children and Adolescents). By February 2018, the Panamanian Government projected a migrant flow of 60,000 people entering the country through the eastern border. On average, the flow has remained around 100-150 persons a day.

In late September, a joint mission was conducted with participation from UNICEF, IOM, ICRC and the Spanish Agency for International Cooperation (AECID) to visit the ETAH (Temporary Humanitarian Station) in Darién province, the main reception and registration centre for migrants arriving thorough the Colombian border. At the time of the visit, 120 migrants from 14 nationalities were staying at the ETAH, including 11 children - all of them of Haitian parents coming from Venezuela.

As observed during the mission, ETAH's accommodation is insufficient, inadequate and unhealthy, and washing facilities are not secure, sanitary, user-friendly nor age/gender-appropriate. The site lacks safe spaces for families and children and gaps in terms of authorities’ capacities for registration and monitoring were also evident.

Leadership and Coordination

The Government of Panama is the pro tempore President of the 19th Migration Regional Conference to take place in October 2018. Seizing this opportunity, UNICEF is intensifying its efforts to raise awareness on key issues, such as child protection. UNICEF is leading efforts to promote the approval and implementation of national child protection protocols.

UNICEF participates in the Interagency Support Group for Border Territories (ISGBT), and coordinates with IOM and UNHCR on a strategy to fill information gaps about Venezuelan migrants in the country. In case the situation escalates, UNICEF will lead Education and Child Protection sectors.

Response Strategy

UNICEF is collaborating with IOM and UNHCR in a situation analysis of Venezuelans in the country (DTM plus quality study) that will provide more information about the conditions of Venezuelan migrants in Panama, and about the vulnerabilities and barriers that children and adolescents might be facing. Results will be available by the end of October, with the preliminary results pointing to the need to reduce the barriers to education for Venezuelan children out of school.

UNICEF response in Panama will also prioritize addressing potential discrimination in schools through the implementation of protocols on bullying already approved by the Ministry of Education.

It will also focus on strengthening capacities of key local actors at the Colombian border, improving the ETAH (Temporary Humanitarian Station) and making sure adequate protocols are implemented to protect migrant children and adolescents. If the situation escalates, the CO will implement a combined strategy of advocacy and C4D, in accordance with the Regional Platform for Communication with Communities.

Summary Analysis of Programme Response

Child Protection

UNICEF contributed to the development of protocols aiming to protect migrant children and adolescents and those in need of international protection, and leads advocacy efforts to ensure the approval and institutionalization of these protocols.

In collaboration with IOM, UNICEF will enhance capacities of government and civil society organizations to ensure protection of vulnerable children and adolescents at risk, through capacity building and training of local staff at the border with Colombia. UNICEF is also monitoring the northern border with Costa Rica through an IOM liaison.

Education

UNICEF is working with the Ministry of Education to estimate the demand for educational services and the necessary mechanisms to guarantee the inclusion of Venezuelan children and adolescents in schools. Moreover, UNICEF will maintain advocacy efforts to guarantee access to education services, and will adapt and implement - in prioritized schools - the Protocol against Bullying, to promote safe and inclusive learning environments.

WASH

UNICEF will support access to safe and appropriate toilets at the Temporary Humanitarian Assistance Station, through the rehabilitation of latrines, and – if needed - will contribute to improve hygiene conditions through the provision of hygiene kits. Based on findings of the joint mission to the Darien ETAH, UNICEF and partners are contemplating an intervention, with focus on the WASH component.

Social Protection

UNICEF is considering providing cash transfers through a partnership with an international NGO experienced in this field for families in need of transportation, hygiene products, or accommodation services, among others.

Supply and Logistics

UNICEF is assessing the needs of the ETAH for hygiene kits and recreational kits in addition to considering cash transfer to the families in urban areas.
In response to the increased migration flows, UNICEF LACRO revised its HAC appeal with an additional US$ 28,050,000 to address the most pressing needs of children and their families in receiving countries and on the move within the region, until the end of 2018. To adapt to the continuous evolving situation impacting children on the move, UNICEF is requesting flexible funding and including rapid reaction support, focusing initially in bordering countries and currently extending support in other countries where the situation has deteriorated, i.e. Ecuador and Peru, and locations where recent assessment are revealing increasing needs, as is the case in Panama. To cover the immediate needs of children and families for the remainder of 2018, UNICEF Ecuador estimates a funding requirement of US$ 1.5 million; Peru requires US$ 1.4 million while Panama needs approximately US$ 173,000.

The additional appeal is currently covered at 56 per cent by emergency resources (US$ 15.6 million). Additional non-emergency resources have been allocated to help scale up response efforts, including Regional thematic funds (US$ 350,000) and other resources made available at country level.

Fundraising efforts have scaled up at country, regional and HQ level. UNICEF’s Global Humanitarian Thematic Funds have been allocated to country offices and generous funding support has been received from the US Bureau of Population, Refugees and Migration (BPRM), the Central Emergency Response Fund (CERF), Sweden, New Zealand, UNICEF USA and UNICEF Ireland. In addition, to ensure timely scale up of programmes, UNICEF issued loans for US$ 4.1 million to the response from the UNICEF Emergency Programme Fund (EPF) mechanism. Allocations have been made to Colombia, Brazil, Trinidad and Tobago, Ecuador, Peru and Panama.

Flexible funds are fundamental for UNICEF COs to adapt their response strategies to the changing contexts and needs, particularly considering that the current situation is likely to have long-term impacts. Funds are still needed to support the region, to increase the knowledge of the situation of migrant children and to adapt the response strategies. In addition, considering the evolving context, other countries in the region are likely to see increased influx of Venezuelan migrants.

### Funding Requirements (as defined in Humanitarian Appeal of May 2018 for a period of 8 months)*

<table>
<thead>
<tr>
<th>Appeal sector</th>
<th>Colombia</th>
<th>Brazil</th>
<th>Guyana</th>
<th>Trinidad and Tobago</th>
<th>RO and other countries**</th>
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</thead>
<tbody>
<tr>
<td>Nutrition</td>
<td>1,500,000</td>
<td>252,260</td>
<td>1,247,740</td>
<td>83%</td>
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<td>Health</td>
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<td>0</td>
<td>800,000</td>
<td>100%</td>
<td>250,000</td>
<td>20,000</td>
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<tr>
<td>Water, sanitation and hygiene</td>
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<td>500,000</td>
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<tr>
<td>Child Protection</td>
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<td>1,622,919</td>
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<td>800,000</td>
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</tr>
<tr>
<td>Education</td>
<td>3,200,000</td>
<td>1,198,568</td>
<td>2,301,432</td>
<td>66%</td>
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<tr>
<td>Cross-sectoral support</td>
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<td>190,284</td>
<td>309,716</td>
<td>62%</td>
<td>300,000</td>
<td>0</td>
</tr>
<tr>
<td>Regional + 9 countries</td>
<td>4,311,129</td>
<td>1,394,338</td>
<td>1,896,491</td>
<td>14%</td>
<td>2,100,000</td>
<td>2,100,000</td>
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<tr>
<td>*Unallocated / to be allocated to sectors</td>
<td>4,311,129</td>
<td>1,394,338</td>
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*Funded amounts include emergency resources received against the current HAC as of 8 October 2018, excluding the EPF loan amount (US$ 4.1 million). Colombia CO—after approval—has allocated 2017 carry over available funds for the current response. Country Response Plans have evolved and adapted based on the fluid situation since the launch of the revised LACRO HAC in May and therefore COs may adjust sectorial budgets in order to better match the proposed targets.

**Emergency funds have been received by Ecuador (US$ 1.6 million), Peru (US$ 2 million) and Panama (US$ 200,000) Country Offices.

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<table>
<thead>
<tr>
<th>Requirement</th>
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<th>Funding gap</th>
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<tr>
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<td>%</td>
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