UNICEF VENEZUELA
Situation Report
Annual 2021

Highlights

- **The complex humanitarian situation in Venezuela continued in 2021**, exacerbated by the COVID-19 pandemic, clashes in border states and heavy rains that led to more than 54,000 people being affected by flooding and landslides in 10 states. With the generous support from donors, between January and December, UNICEF reached around 1 million children with essential services and life-saving support.

- **Timely and appropriate treatment** was provided to 15,786 children with global acute malnutrition (GAM), including 11,554 children with moderate acute malnutrition (MAM) and 4,232 children with severe acute malnutrition (SAM), and 18,497 underweight pregnant and lactating women (PLW).

- **UNICEF supported the strengthening of the cold chain system** to improve vaccines’ appropriate storage and transportation, and together with the Pan American Health Organization (PAHO), coordinated Venezuela’s access to the COVID-19 Vaccines Global Access (COVAX) facility.

- In partnership with the Ministry of Education (MoE), **UNICEF led successfully the reopening of schools for face-to-face education nationwide**. 304,408 children received education materials and 110,272 children were provided with nutritious meals, in an effort to promote a safe return to school, continued attendance and retention.

- **UNICEF responded to vulnerable communities impacted by floods** in Apure and Merida states in August through the provision of health and water and sanitation assistance, benefiting more than 50,000 inhabitants.

**UNICEF’s Response and Funding Status**

<table>
<thead>
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<th>Funding status</th>
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*Funding available includes: funds received in the current year; carry-over from the previous year; and repurposed funds with agreement from donors.

© UNICEF Venezuela/2021/Pocaterra. Luciano Díaz (3), and her mother Javielis Gómez poses to the picture when Luciano is eating ready to use therapeutic food (RUFT) provided by UNICEF in Coro municipality in Falcón state, on September 22, 2021.

Situation in Numbers

- **3,200,000** children in need of humanitarian assistance (OCHA, 2021 Humanitarian Response Plan, June 2021)

- **446,427** COVID-19 laboratory-confirmed cases and **5,348 deaths** (WHO, 3 January 2022)

- **1,300,000** estimates for pre-school, primary and secondary, public, and private schools.

UNICEF’s Response and Funding Status
Funding Overview and Partnerships

In 2021, UNICEF appealed for US$201.8 million to reach 3.8 million people – including 2.2 million children – in Venezuela affected by the protracted socio-economic and political context, the Coronavirus disease (COVID-19) pandemic, mixed migration flows across international borders, and natural disasters. As of December 2021, UNICEF had received contributions totaling US$ 118.1 million to support the implementation of child protection, education, health, nutrition, and water, sanitation and hygiene (WASH) interventions throughout the year. Of this amount, US$28.2 million was carried over from 2020, and US$89.9 million was raised in 2021. Nevertheless, UNICEF closed the year with a funding gap of US$89 million (44 per cent of the total appeal for 2021) to cover the needs of children in Venezuela.

UNICEF expresses its sincere gratitude to all public and private donors for their generous contributions. Without this support, UNICEF would not have been able to reach 1.9 million people, including 1 million children, with critical support that contributed to save lives, alleviate urgent needs, help build resilience and ensure local communities are empowered to lead their own response efforts. While these significant results were achieved in 2021, more remains to be done in order to better assist the needs of children and their families affected by the complex humanitarian situation. Flexible and suitable funding continues to be critical to consolidate ongoing efforts under the 2022 Venezuela HAC appeal to protect children and leverage opportunities for preventing the deterioration of the situation and mitigating the risk of a lost generation.

Situation Overview & Humanitarian Needs

The harmful effects of the COVID-19 pandemic have disproportionally affected children throughout 2021, threatening child survival and health, increasing the risk of acute malnutrition, limiting access to life-saving vaccines and antiretroviral treatment, challenging school enrolment and retention, as well as mounting the risks of violence, exploitation and abuse. During the first half of 2021, UNICEF and partners reported displacements of people (caminantes) originating from different parts of the country who walked hundreds of kilometers to cross the border through states bordering with Colombia and Brazil, including increased numbers of children, adolescents, and single mothers. Similarly, COVID-19 restrictions introduced in neighboring countries caused some Venezuelan migrants to return, resulting on a mixed flux of migrants across different border locations. Violent clashes in the state of Apure worsened the humanitarian situation on the Colombia-Venezuela border during the first quarter of 2021, forcing the displacement of around 5,000 Venezuelans into Colombian territory. The internal and external movements exposed vulnerable groups such as separated and unaccompanied children, PLW, adolescents, and people without legal identity documents, to additional protection risks, including gender-based violence (GBV) and risks of human trafficking.

Throughout the year, gasoline shortages and scarcity of diesel directly impacted both public transportation as well as transportation of goods and services. Interruptions in the electrical system, particularly in the western part of the country (Zulia, Trujillo, Falcon, and Lara states), negatively impacted services delivery, including internet connectivity, affecting distance education.

Heavy rains in July and August caused rivers to overflow and landslides, affecting more than 54,000 people in ten out of 24 states, with communities in Merida state being the most affected. As a result, on 25 August, the national government declared a 90-day emergency decree for Merida, Apure, Bolivar, Yaracuy, and Zulia. The United Nations system, together with non-governmental organizations (NGOs), local authorities, and communities of the affected areas, provided immediate lifesaving support to meet urgent needs in food, health, WASH, infrastructure, roads, essential services, housing and security.

In October 2021, the main official Venezuela-Colombia border posts opened for the first time since February 2019, allowing commerce channels between both countries. Similarly, schools reopened on 25th October for presentential education after more than 18 months of being partially closed as a COVID-19 containment measure.

Though the year, according to the national authorities, Venezuela registered 446,427 COVID-19 cases and 5,348 deaths, with a trend of over 1,000 patients per day. In late December 2021, the trend of new infections raised sharply, as the government confirmed the first cases of the omicron variant in the Capital District, Miranda, and Lara states. According to

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1 This was calculated using the highest coverage programme targets of HAC indicators for education, health, nutrition and WASH, without double counting the same age cohorts.

2 Merida, Tachira, Zulia, Amazonas, Bolivar, Delta Amacuro, Monagas, Apure, Aragua and Yaracuy.

the World Health Organization (WHO) and PAHO, by the end of the year, more than 30 million doses of COVID-19 vaccines had been administered in the country and approximately 11.6 million people had completed the two-dose schedule.

**Humanitarian Leadership, Coordination and Strategy**

During the reporting year, UNICEF provided strategic inputs and support to the Humanitarian Country Team (HCT) and the overall humanitarian response, ensuring leadership of the WASH, Nutrition and Education clusters and the Child Protection Area of Responsibility (AoR), technical capacity to the Protection from Sexual Exploitation and Abuse (PSEA) inter-agency network, co-leadership of the Accountability to Affected Populations (AAP) Working Group, and the Access Working Group.

In July, UNICEF in coordination with the Food and Agricultural Organization (FAO), International Organization for Migration (IOM), United Nations Population Fund (UNFPA), United Nations Office for the Coordination of Humanitarian Affairs (OCHA), United Nations High Commissioner for Refugees (UNHCR), World Food Program (WFP), and more than 50 Civil Society Organizations (CSOs) launched the pilot phase of the Contact Line, an inter-agency feedback mechanism, in Mara and Maracaibo municipalities in Zulia state. Under this mechanism, feedback and complaints can be provided through phone calls, WhatsApp messages, Short Message Service (SMS), and emails in Spanish and Wayuu language, ensuring privacy and confidentiality. This inter-agency project responded to the UNICEF AAP strategy.

The pilot was welcomed positively by assisted communities and as of 31 December 2021, 228 feedback from the affected populations has been collected and followed-up, with a resolution rate of 98 per cent. The Contact Line Steering Committee and Technical Board have been respectively keeping oversight and facilitating the implementation of the initiative as well as planning a scale-up in early 2022 that will expand the coverage from the two current municipalities to the states of Zulia, Falcon, Trujillo and Lara.

**Summary of Programme Response**

During 2021, UNICEF implemented its activities through an integrated, multisectoral response, targeting the groups most in need, including adolescent girls, children with disabilities, people in remote areas, and indigenous and Afro-descendent communities. As the United Nations agency with the largest footprint in the country, UNICEF carried out interventions nationwide, including in hard-to-reach areas. UNICEF strengthened the cold chain system in Venezuela, both for the regular immunization programme and the COVID-19 vaccines. It also provided capacity building and biosafety supplies to the national health system workers to reduce the spread of COVID-19. UNICEF support remained vital for the human immunodeficiency virus (HIV) response as the only provider of antiretroviral treatment for children under 15 years of age living with HIV and in the treatment of SAM and MAM in children under 5 years of age and PLW, particularly adolescents.

Following the school’s shutdown due to the pandemic, UNICEF played a key role in promoting access to learning through provision of support to retain children and teachers as well as in encouraging enrollment and a safe return to the classrooms. In 2021, UNICEF carried out innovative and lifesaving WASH projects strengthening the resilience of indigenous communities and providing access to safe water to urban and rural communities. UNICEF expanded its GBV programme with prevention, mitigation, response, and capacity building activities. Under its cross-sectoral vision and approach, UNICEF reinforced its strategy of collaboration with community leaders and promoters who play a key role to strengthen community engagement and ownership.

**Health**

UNICEF provided an instrumental contribution in the expansion and rehabilitation of the cold chain system and the training of health personnel for its management and maintenance and on effective infection prevention control (IPC), as well as provision of immunization supplies to improve quality and ensure the continuity of the services. Together with PAHO, UNICEF participated in the National Technical Consultative Committee, established to address the inclusion of Venezuela

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4 In July, United Nations High Commissioner for Refugees (UNHCR) and the World Food Program (WFP) joined the pilot.
in the COVAX mechanism for the introduction and deployment of COVID-19 vaccines nationwide and strengthening of the cold chain. As a result, Venezuela accessed 12 million doses of COVID-19 vaccines for health personnel and other frontline workers and vulnerable populations. In 2021, UNICEF provided 100 freezers and completed their installation according to WHO guidelines in 100 mass vaccination centers nationwide to fight the COVID-19 pandemic. Furthermore, UNICEF contributed with 176 dual solar refrigerator/freezers to strengthen the vaccine storage for routine immunization and COVID-19 vaccination.

UNICEF procured around 6.5 million doses of **seven essential vaccines**\(^5\) to reach over 2 million children under 10 years old and more than 530,000 pregnant women. The broader impact of COVID-19 pandemic such as the lockdown measures and the "stay at home" campaign to prevent infections, the shortage of staff and the reduction of activities at the community level impacted the access to, and demand of immunization services, leading to a suboptimal vaccine coverage (Figure 1). UNICEF, however, reinforced the promotion of access to essential vaccines under the Expanded Program on Immunization (EPI) to guarantee the continuity of routine immunization services nationwide.

**Figure 1. Beneficiaries and Vaccination coverage, January-November 2021**

In 2021, 82,135 prenatal consultations (30 per cent adolescents and 9 per cent indigenous women) were held in 157 UNICEF-supported facilities in 16 states\(^6\). At the same time, 96,441 births were attended in 90 UNICEF supported facilities, of which 24 per cent were adolescent pregnancies, 8 per cent were preterm, and 6 per cent were low birth weight. In addition, 8,473 newborns received lifesaving treatments in neonatal intensive care units (4,056 girls and 4,417 boys). Six thousand nine hundred one health professionals (5,295 women and 1,606 men) received technical training sessions on different topics, including COVID-19 prevention, IPC, use of personal protective equipment (PPE), obstetric attention, prenatal control, GBV, clinic diagnostic, vaccination, and promotion of water, hygiene, and sanitation (WASH) in nine hospitals and 10 outpatient clinics. UNICEF also supported the MoH in the rehabilitation of one hospital ship and two fluvial ambulances to improve maternal and child health, including through access to clean water, in Delta Amacuro state. These innovations benefited the Warao indigenous population from the most remote areas with faster transportation to access health care.

UNICEF remained a key actor for the **HIV response** as the only provider of pediatric antiretroviral treatment for 1,022 children under 15 years of age living with HIV. Between June and November 2021, UNICEF worked with the Ministry of Health (MoH), PAHO, Joint United Nations Programme on HIV/AIDS (UNAIDS), and civil society to support transportation and distribution of antiretrovirals nationwide. As part of UNICEF efforts to prevent mother-to-child transmission, 1.6 million doses of pentavalent vaccines, 1.3 million doses of oral polio and 729,400 doses of polio injectable vaccines, 1.2 million doses of tetanus and diphtheria (Td) vaccines, 769,200 doses of measles, mumps and rubella (MMR) vaccines, 400,000 doses of Bacille Calmette-Guérin (BCG) vaccines and 318,400 doses of yellow fever vaccines.

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\(^{6}\) Amazonas, Anzoátegui, Apure, Barinas, Bolivar, Delta Amacuro, Capital District, Falcon, La Guaira, Lara, Merida, Miranda, Nueva Esparta, Sucre, Táchira, Trujillo and Zulia.
pregnant women were diagnosed with syphilis (three percent of the total tested) and 234 with HIV (4 percent of the total tested). Additionally, to strengthen the HIV early infant diagnosis at the point of care, 226 health workers from 17 states received training on taking samples of dried blood for HIV, Deoxyribonucleic Acid (DNA) and Polymerase Chain Reaction (PCR) from exposed new-borns.

**Nutrition**

UNICEF and implementing partners expanded and continued the provision of curative nutrition services to children and women in 23 states (96 percent of the total) and 245 municipalities (73 percent of the total). In 2021, UNICEF increased the coverage of the targeted population through a collaborative effort with 18 implementing partners, the National Institute of Nutrition (INN as per its Spanish acronym) and the MoH in 699 health and nutrition services.

UNICEF reached 1,038,291 children under five, school age children, caregivers and PLW with essential nutrition services, namely prevention, identification and treatment of global acute malnutrition (GAM). Between January and December 2021, 233,449 children under 5 (117,622 girls and 115,827 boys), including 3,768 Afro-descendants (1901 girls and 1867 boys), 16,329 indigenous (8,220 girls and 8109 boys) and 1,046 children with disabilities (446 girls and 600 boys) were screened for the detection of acute malnutrition. Among those screened, 15,786 children (7,759 girls, 8,207 boys) were identified with GAM, including 11,554 children (5,633 girls and 5,921 boys) with MAM and 4,232 children (1,946 girls and 2,286 boys) with SAM. They received treatment with ready-to-use therapeutic food (RUTF). Simultaneously, 85,682 PLW were screened to identify undernutrition during pregnancy and lactation: of these, 18,497 (22 percent) were diagnosed with underweight, including 2,800 pregnant adolescents (37 percent of the total screened adolescents), and received treatment with a Lipid-based Nutritional Supplement (LNS). The data collected suggests that adolescent girls are among the most at-risk groups of malnutrition due to early pregnancies and inability to fulfill the nutritional requirements they need to be healthy and give their babies the best chance to survive, grow and develop.

In terms of prevention, 184,997 children (91,598 girls and 93,399 boys) aged between 2-5, 131,373 children (66,896 girls and 64,477 boys) aged between 5-14 and 15,549 PLW received prophylactic deworming while 426,601 children (207,755 girls and 218,846 boys) and 69,294 PLW received micronutrient supplements supplied by UNICEF. Moreover, 2,158,406 (1,096,310 girls, 1,062,096 boys) 2-14 years old had received one dose of Albendazole 400 mg as part of the National Campaign for prophylactic deworming implemented by the MoH in coordination with UNICEF between April-October 2022.

**Figure 2. Pregnant and Lactating women and adolescents with underweight, January-December 2021.**

As a key lifesaving strategy for children, UNICEF Venezuela worked throughout 2021 to address myths and cultural beliefs related to breastfeeding and to promote the Kangaroo Mother Care programme through the provision of capacity building and cross-sectoral activities. UNICEF provided essential supplies (professional electric milk extractors, disposable front closure gown and chairs) for hospital waiting rooms and training rooms in five hospitals, namely at Concepción Palacios Maternity (Capital District), Dr. Pastor Oropeza Maternal and Child Hospital (Capital District), Dr. Joel Valencia Parpacén Maternal and Child Hospital (Miranda state), Dr. Armando Castillo Plaza Maternity Hospital (Zulia state) and Ruiz y Páez Hospital (Bolivar state).

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7 Nutritional data collected by UNICEF, implementing partners and government counterparts throughout the country has provided information on nutritional status, treatment and follow-up provided to children under five years and PLW. Information collection and corresponding analysis is an important reference source on acute malnutrition in children under five and underweight PLW. It is important to highlight this information represents results obtained during the nutritional screening of children benefited from UNICEF essential nutritional activities for the first time in outpatient clinics, hospitals, and community centers. Therefore, this data is not statistically representative and should not be taken as a national/population reference.

8 Fe y Alegría, Afroamiga, FUNDANA, Acción Contra el Hambre, Caritas, Dividendo Voluntario para la Comunidad, ALINCA, Paraguero, Otro Enfoque, Caritas Carúpano, PALUZ, CEPIN, CISP, FUNREAHV, Intersos, Familia a Familia and Save the Children,
The nutritional data collected by UNICEF and partners in 2021 suggests a mean rate of 6.8 percent of Global Acute Malnutrition (GAM) among the children under five who participated in the nutrition program supported by UNICEF. This represents a 0.4 percent increase when compared to 2020 programme data. Seven out of 22 states are above the mean rate of GAM, of which four states could be classified as PHASE 3: Serious/Severe (according Severity Scale), with a GAM of over 11 per cent. It is important to highlight that this information represents results obtained during the nutritional screening of children who benefitted from UNICEF essential nutritional activities for the first time in outpatient clinics, hospitals, and community centres. Therefore, this data is not statistically representative and should not be taken as a national/population reference.

Between January-November 2021, the Nutrition cluster reached 653,000 people, which represents 77 per cent of the 2021 Humanitarian Response Plan (HRP) target population (850,000 people), including 480,000 children under 5 years of age and 153,000 PLW with prevention and treatment services for acute malnutrition and micronutrient deficiencies. Additionally, the cluster reached 21,000 children above 5 years of age and adolescents with health services and food security interventions for the prevention and treatment of malnutrition. Over one million children, adolescents and PLW were dewormed. During 2021, partners’ presence covered 100 per cent of the states in the country, including 305 municipalities assisted (out of 333 nationwide). Moreover, the subnational structures for the Nutrition Cluster were activated in Zulia, Tachira and Bolivar states to strengthen operational coordination and the referral system in the field. In the first quarter of 2021 the cluster enhanced the monitoring of the ‘cluster’s achievements against the HRP targets and the visualization of ‘partners’ presence and interventions through the development of the Partners Mapping and Achievements Tool.

### Water, Sanitation and Hygiene (WASH)

In 2021, UNICEF provided vital support to the most-vulnerable communities, including those affected by floods and landslide by focusing its work on two main programmatic pillars. First, maintaining efforts to respond to the COVID-19 outbreak, through safe access to water and hygiene, particularly in urban areas and key institutions, and enabling adequate WASH/IPC practices. Second, scaling-up its interventions in schools to ensure a safe return to school, for teachers and students, and to support ongoing school feeding programmes, under IPC protocols including COVID-19 prevention. At the same time, as a pivotal WASH actor in the country, UNICEF updated and extended its cooperation with the Ministry of Water (MoW) until 2023, with an increased focus on high-impact decentralized water access and sanitation infrastructure projects.

In terms of results, despite funding shortfalls for the sector, considerable results have been achieved. Throughout the year, UNICEF worked with the MoW (including its local subsidiaries), and national and international NGOs on 15 medium-to-small-scale water and sanitation rehabilitation projects (through resilient solutions) in Bolivar, Delta Amacuro, Zulia, Tachira, Apure, Merida states and the Capital District. Main activities included the rehabilitation of water treatment plants, pumping stations, community boreholes and water intake systems, reaching 1,786,155 people (354,705 girls, 340,795 boys, 577,001 women and 513,654 men). Based on needs, construction and rehabilitation interventions were complemented with temporary water trucking services. This solution was also implemented to reach the most vulnerable communities not connected to the main water networks. UNICEF provided regular support to the MoW staff with technical assistance,

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9 Guarico state’s figures are under revision.

10 Data from UNICEF supported programs.
capacity building, distribution of tools and in-kind incentives to reinforce the sustainability of water provision services and to dignify working spaces.

Through the construction of a solar generated water intake and filtration platform in the indigenous community of Zaruma in Bolivar state, approximately 1,200 people per day (190 women, 188 men, 422 girls, 400 boys) gained access to safe water. As part of the efforts to support a safe return to schools, in 2021, 88 schools across 11 states benefitted from WASH infrastructure rehabilitations, distribution of hygiene, cleaning and disinfection supplies, which ensured that 21,319 children (11,939 girls and 9,380 boys) have access to adequate WASH services in schools when re-opened. UNICEF also contributed to the sustainability of quality health services through the installation of handwashing points, provision of technical assistance, promotion of IPC practices and distribution of hygiene kits in 15 health care facilities in the Capital District, Miranda, Delta Amacuro, and Bolivar states.

The activities of UNICEF and its partners played a key role in decreasing health-care-associated infections thus improving mother and childcare health and nutritional services in 67 healthcare facilities across eight states. UNICEF also guaranteed the sustainability of quality health services through the construction of boreholes, installation of chlorinators and reparation of water supply systems, the distribution of cleaning and hygiene products and PPE, installation of handwashing points and the provision of technical assistance and capacity building on IPC-related subjects.

**Child Protection and Gender-Based Violence**

In 2021, the pandemic added an extra layer of complexity to an already very critical child protection situation. The confinement increased considerably the exposure of children to risks of violence, abuse, neglect and exploitation, adding psychological distress as an extra challenge. Despite the challenges, the decentralized approach as an extra challenge. Despite the challenges, the decentralized approach adopted in Venezuela by UNICEF and the installation of antennas in hard-to-reach areas, allowed the delivery of services amidst the limitations imposed by the pandemic. Throughout 2021, UNICEF strengthened the collaboration with local NGOs and government authorities through technical and institutional capacity building thus allowing a smooth implementation of Child Protection interventions and the possibility to address bottlenecks when encountered. As a result of these actions, UNICEF, in collaboration with national and international NGOs and government authorities, reached 157,282 children and adolescents (88,559 girls and 68,723 boys) with specialized Child Protection services including mental health and psychosocial support (MHPSS) and GBV risk mitigation, prevention, or response interventions. This number represents a 16 per cent increase when compared to 2020 and 40 per cent of the people in need of child protection services according to the 2021 Humanitarian Needs Overview.

UNICEF expanded the GBV program, reaching a total of 55,458 people (8,660 girls, 5,805 boys, 31,170 women and 9,823 men) with prevention, mitigation, response, and capacity building activities. This allowed children and women who are survivors or at risk of GBV to have access to protection services, legal orientation, mental health and psychosocial support and referrals to other services such as health and shelter. Moreover, the intersectoral work led by UNICEF and other United Nations agencies allowed a more holistic approach to children's needs.

During 2021, UNICEF and its partners continued to implement MHPSS activities that protect and promote children's wellbeing and full participation within the family and community systems that surround and support them reaching 52,360 children and caregivers (16,397 girls, 15,247 boys, 15,668 women and 2,829 men).

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11 Action Against Hunger, AFROAMIGA, ALINCA, Comité Internacional para el Desarrollo de los Pueblos, Dividendo Voluntario para la Comunidad, Fundación FINAMPYME Internacional, Fundación de Atención Integral Juvenil, Proyecto Esperanza, REDISALUD and RET International.
UNICEF coordinated an interagency response involving CSOs, the Child Protection AoR and the Inter-institutional Working Group for Migration to develop Standard Operating Procedures (POE as per its Spanish acronym) for coordinated and multi-disciplinary protection services. The implementation of the POE will improve emerging formal and informal child protection services structures and the integration of long-term activities of social workers with those implemented by humanitarian actors in the country.

To ensure that affected populations receive relevant and timely information on the organization and the services provided, participate in decisions that affect their lives, and have access to reliable feedback mechanisms, UNICEF conducted the first end-user monitoring exercise for the Child Protection MHPSS program which included the coordinated work of 11 NGOs. This activity measured the quality of care offered by the organizations, through the application of instruments and methodologies adapted to the Venezuelan context. Data collected showed overall satisfaction where 96.8 per cent of children felt they were listened and 97.4 per cent said they received good information on the services provided. In addition, 97.6 per cent of the adolescents and 99.3 per cent of parents reached said they would recommend the services.

In 2021, the Child Protection AoR at the subnational level in Bolivar state set up a working group to improve assistance for unaccompanied and separated children (UASC) at the border with Brazil. Local, national, and international NGOs, UNFPA, UNHCR, OCHA, UNICEF Venezuela and UNICEF Brazil have participated in this working group. The coordination mechanism has provided support to UASC reunification cases from Brazil with protection services offered by NGOs and institutions. These children had access to case management, psychosocial support, legal orientation, and medical care, while institutions received operational assistance during the reunification process, including shelter, transportation, and meals. In June, local organizations and child protection institutions participated in a webinar organized by UNICEF Venezuela in coordination with UNICEF Brazil and the regional office, where an independent specialist presented the Brazilian child protection system to Venezuelan institutions and humanitarian actors.

Education

UNICEF focused its efforts on supporting the continuity of learning for children from the most vulnerable communities. Despite various COVID-19 related challenges in 2021, UNICEF and partners supported 304,408 children (152,716 girls and 151,692 boys), including 8,319 children from indigenous populations and 7,353 children with disabilities in 19 states of the country. Between January and December 2021, UNICEF school feeding programme promoted education enrolment and attendance of 110,272 children, who were reached with balanced meals in the form of food baskets and daily meals prepared in 355 schools in 11 states, and fostered the link between families and schools during the distance learning process. With schools being partially closed for most of the year, pedagogical follow-up of students and the dissemination of key messages was ensured during the delivery of balanced meals. To ensure uninterrupted access to educational services, UNICEF engaged 304,408 children (152,716 girls and 151,692 boys), of whom 8,319 are from indigenous populations and 7,353 are children with disabilities, in the education process through the provision of learning kits and supported 219,416 children (112,079 girls and 107,337 boys) with remote learning strategies and materials.

UNICEF strengthened the capacities of 10,528 teachers (8,867 women and 1,661 men) for teaching in the context of emergency situations, focusing on methods and resources for distance learning, early childhood development, psycho-educational support, strategies for distance care for children with disabilities, life skills development with adolescents, and preparation for the safe reopening of schools. UNICEF reached 7,794 teachers (112 from indigenous populations) through the delivery of incentives in 11 states. This intervention contributed to maintaining teachers engaged in the educational process, improve their motivation, and help them support their families.

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12 Fe y Alegría, Asociación Venezolana de Educación Católica, Construyendo Futuros, Centro de Promoción Integral del Niño, Afroamiga, Federación Venezolana de Instituciones de Ciegos, Asociación para el desarrollo de la educación integral y comunitaria, Cooperazione Internazionale, Otro Enfoque and Dividendo Voluntario para la Comunidad.
13 Amazonas, Anzoategui, Apure, Barinas, Bolivar, Carabobo, Capital District, Delta Amacuro, Falcon, Lara, La Guaira, Miranda, Merida, Monagas, Nueva Esparta, Sucre, Tachira, Trujillo and Zulia.
14 Amazonas, Anzoategui, Apure, Bolivar, Delta Amacuro, Capital District, Falcon, Merida, Miranda, Tachira and Zulia.
15 Amazonas, Anzoategui, Apure, Bolivar, Delta Amacuro, Capital District, Falcon, Merida, Miranda, Tachira and Zulia.
UNICEF, alongside the education cluster, provided technical advice to the MoE to promote and guide the route and protocols for the safe school reopening, mitigating impacts of COVID-19, ensuring continued delivery of education to children with disabilities, early childhood education and life skills for adolescents. Together with the MoE and in coordination with CSOs, UNICEF designed a “Back to School” campaign, which included the development of products for dissemination in digital and audio-visual media platforms, aiming to inform about the importance of children returning to the classrooms and following measures to prevent COVID-19 infection.

UNICEF improved self-expression, relationship building skills and community engagement of 53,913 adolescents (28,342 girls and 25,571 boys) from vulnerable communities in 16 states through the “Life Skills” program. The results led the MoE to incorporate the program in the secondary education curriculum, allowing UNICEF to contribute to the creation of long-term capacity within the MoE and helping to bridge the humanitarian-development nexus. This action will benefit 380,000 adolescents during the 2021-2022 school year nationwide.

Communication for Development (C4D)

Between January-December 2021, UNICEF registered significant progress in the implementation of the C4D strategy by disseminating life-saving practices through key messages. The key pillar for growth during 2021 was the strengthening of social mobilization on key dates (e.g., World Water Day and Global Handwashing Day) which enabled the engagement of a wider range of key stakeholders (e.g., communities, implementing partners, government authorities, private companies). UNICEF implemented a multi-platform strategy, including radio, social networks, face-to-face and online activities, in 18 states. As a result, UNICEF reached more than 7 million people with messages about access to services and life-saving behaviors.

UNICEF continued developing a cross-sectoral vision and reinforcing the strategy of work with community leaders and promoters who play a key role to strengthen community engagement and ownership. UNICEF and partners trained community leaders and promoters on C4D, humanitarian principles, essential family practices, prevention of violence against children and positive parenting, and GBV in Miranda, Capital District, Zulia, Tachira, Bolivar and Delta Amacuro states. In 2021, the activities of change and social commitment carried out by 646 promoters (486 women and 160 men) were key to reach 113,893 people (71,718 women, 14,988 men, 14,396 girls, 12,971 boys) in Bolivar, the Capital District, Zulia and Tachira states.

Through the educational communication program "Toc Toc. Youth narratives in times of pandemic" adolescent boys and girls actively participated in the design and implementation of C4D activities such as the radio programs “Radiotubers” and “Remando caño adentro”. During the reporting period, 450 adolescents from eight states were trained in topics such as communication and social behavior change, childhood and adolescence, and the production of radio content. This program will improve the empowerment and engagement of children and adolescents from targeted populations through the increase of knowledge of key themes and own elaboration of messages for dissemination in their communities.

Throughout 2021, 612 people (489 women, 123 men) from 38 organizations participated in hygiene promotion workshops and 257 people (203 women, 54 men) were trained on promotion of essential life practices. These activities will support the implementation of cross-sectoral interventions thus enhancing its quality.

UNICEF enhanced the visibility of programmatic implementations and reinforced key messages to vulnerable populations through printed materials and digital publications. In 2021, UNICEF distributed 498,926 (Bolivar 68,081, Gran Caracas

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16 Anzoategui, Apure, Barinas, Bolivar, Carabobo, Capital District, Falcon, La Guaira, Lara, Merida, Miranda, Monagas, Sucre, Tachira, Trujillo and Zulia.

17 Positive parenting, education, breastfeeding, vaccination, GBV and child abuse, mental health, COVID-19 prevention, family coexistence and nutrition. The latter were translated into the Pemon, Warao and Wayuunaiki indigenous languages for better reach and dissemination through local communication channels. UNICEF and partners also carried out face-to-face discussions, forum chats and Zoom trainings on the mentioned themes.

18 Anzoategui, Apure, Bolivar, Caracas, Delta Amacuro, Sucre, Tachira and Zulia.


20 COVID-19 prevention, immunization, breastfeeding, deworming, complementary feeding, hand washing, water treatment, promotion of menstrual hygiene, school enrollment and continuation, Civil Birth Registration, prevention of GBV and prevention of violence against children and adolescents.
Planning, Monitoring & Evaluation and Accountability to Affected Populations (PME & AAP)

During 2021, UNICEF ensured that children's rights were fulfilled with the provision of guidance, structure, and relevant information and knowledge, aimed at enhancing programme planning, implementation, monitoring and evaluation. An average of 24 organizations and 67 people were trained in 29 workshops carried out by UNICEF for key stakeholders on topics covering programming and cross-cutting issues (e.g., the gender approach, harmonized approach to cash transfers, AAP, information management, monitoring, programmatic visits, purchases).

In 2021, UNICEF provided financial and operational assistance to promote understanding of UNICEF's partnership principles, processes and practices among both current and prospective civil society partners. By December 2021, UNICEF established 35 new partnerships with civil society organizations for programme implementation. Additionally, an Intersectoral Indicators Manual was developed and disseminated among UNICEF implementing partners to improve coherence to the results reporting cycle by consolidating definitions and calculation methods, as well as equipping and enabling civil society organization to collect and present continuously more trustworthy data.

In terms of monitoring, UNICEF carried out a total of 3,267 activities in 2021. Most monitoring activities were implemented remotely (through phone calls and WhatsApp messages) during the first half of the year due to a high number of COVID-19 cases, lockdown measures and restrictions caused by fuel shortages. Continued partnership with the Social Research Center (CISOR) allowed UNICEF to complement its work with third party monitoring. Through this collaboration, opinions and recommendations were collected from 10,120 people who directly benefited from UNICEF and ‘partners’ activities and supplies distributed in 2021.

In 2021, UNICEF strengthened its work on Communication with Communities (CwC) and participation. UNICEF ensured the following of specific activities and the inclusions of indicators in all new program documents signed in 2021. As a result, staff and partners have provided systematic information prior to and during the development of the projects to 111,758 people. Assessments of preferred communication channels were developed in different communities to establish sounding CwC strategies; and community promoters are trained on humanitarian principles and tools to better engage with different population groups. Moreover, UNICEF provided a toolkit available to staff, partners and community promoters to help engage them through participatory activities. In this sense, at least 458 consultations, focus group discussions, and meetings of local structures/networks were held. In addition, UNICEF identified key ‘communities’ role for the intervention (e.g., processing mothers, hygiene committees, adolescent assemblies, community mapping, organization of health and nutrition-days), ensuring and promoting community participation during activities.

Supply and Logistics

During the reporting period, the overall procurement value for goods and services, including procurement services on behalf of partners, was US$ 27.1 million UNICEF procured program supplies for health, nutrition, WASH and education programs as well as PPE for a total value of US$ 19.43 million (84 per cent for international procurement, 16 per cent for national procurement). Throughout 2021, UNICEF operated its main warehouse in the Capital District and two warehouses in Bolivar and Tachira states. The average warehouse inventory was US$ 1.6 million with a warehouse rotation of 5.9 times during the year. Only 1.2 per cent of the current stock at the end of 2021 was older than 6 months.

UNICEF delivered a total of US$9.8 million worth of relief supplies from its warehouses to implementing partners nationwide in support of C4D, child protection, communications, education, health, nutrition, and WASH programs. US$ 7.9 million were directly delivered to Implementing Partners, thereof, US$ 5.5 million worth in vaccines were directly delivered to the National Corporation of Technological Services for Health Equipment (VENSAH).

UNICEF received 115 tons of air cargo for a total value of US$8.6 million and 796 tons of sea freight at a value of US$5.6 million. In 2021, the import of goods has been heavily impacted by the global transport constraints stemming from the long-term logistical consequences of the COVID-19 pandemic, such as longer transit times, higher transport cost, lack of containers, inactive container ships, booking cancellations, etc. Prices for containers have increased by as much as +300 times the original prices, while air cargo rates have also increased two-, or in some instances three-fold, and higher, compared to pre-COVID-19 levels. UNICEF at global level has adopted a flexible and agile strategy to overcome some of these difficulties, while working with its logistics partners to look for longer-term solutions. In Venezuela, UNICEF identified

21 Information of interest is presented on UNICEF Venezuela’s home page.
22 For further quantitative information on the monitoring activities carried out in 2021, see UNICEF Venezuela’s monitoring activities dashboard.
alternative solutions, such as procurement in the local market, as well as planning procurement as early as possible. Nonetheless, delays impacted timely implementation and operational costs.

In 2021, 102 (80%) local suppliers received training on PSEA. Furthermore, 30 implementing partners (representing 77% of the CSO with whom UNICEF has active work plans) received training on basic procurement principles and ethics in public procurement.

**Human Interest Stories and External Media**

In 2021, the Venezuela Country Office’s comprehensive communication and public advocacy strategy contributed to position UNICEF as the lead agency on the humanitarian response for children and families, strengthening the awareness on children's rights.

UNICEF’s communication, aiming at advocacy and fundraising purposes continued to disseminate lifesaving messages about COVID-19 prevention, children's rights and showcase the organization’s response in the field. Eighteen videos were produced, as well as over 1,200 photos, and 11 Human Interest Stories (HIS). Those assets were disseminated through local, regional, and global social media channels. UNICEF’s social media reached over 485,000 followers, exceeding 0.76% the growth goal for 2021. Number of impressions in 2021 were 60,650,868 and engagement reached 1,002,942.

UNICEF carried out a series of public engagement activities during World Children's Day, among them a written contest to motivate children to express their feelings about distance learning. UNICEF also partnered up with the national soccer team to promote children’s right with a focus on adolescents’ participation. For the World Children’s Day celebration, UNICEF Venezuela joined global advocacy efforts for children’s rights by illuminating with blue lights iconic buildings in the country, while for the UNICEF 75 global anniversary celebration the country office organized a virtual race to support mental health, with over 1,500 people registered. More than 100 people posted their participation in social media tagging UNICEF Venezuela, which shows a decent level of engagement. To promote donor familiarization and support to UNICEF two virtual field trips were conducted for donors and international audiences with the participation of more than 100 people on each.

As part of its brand positioning strategy, the CO consolidated and started 10 partnerships with national and private organizations, to disseminate key information about children's rights, the role of UNICEF in Venezuela, and additional helpful information for children and families. Among new branding and communication partners are pharmacies, shopping centers, supermarkets, museums, cinemas, cultural centers and other spaces that allow UNICEF to bring key messages for massive audiences. Digital and Below The Line Marketing (BTL) campaigns were launched with those allies to spread information around topics such as COVID-19 prevention, national children's day, breastfeeding, handwashing day, and gender-based violence. Around 1,650 people participated in hand washing, breastfeeding and other face-to-face activities, while thousands received messages through videos and BTL material disseminated by our allies. Three massive campaigns were produced and broadcasted nationwide, namely against GBV, promotion of immunization and promotion of back to school after the COVID-19 pandemic restrictions. The latter was adopted by the Ministry of Education, the Presidency and by NGOs under the slogan “Digamos Presente”, which was a trending topic for several days. Measurement of knowledge and in some way of impact will be conducted this year by a professional monitoring agency.

**Human interest stories and multimedia stories are available here:**

1. Photos
2. Videos
3. Human-interest stories
4. Hagamos la tarea juntos written contest
5. Press releases

UNICEF Venezuela: [www.unicef.org/venezuela](http://www.unicef.org/venezuela/)
UNICEF Venezuela Facebook: [www.facebook.com/unicefvenezuela/](http://www.facebook.com/unicefvenezuela/)
UNICEF Venezuela Twitter: [@unicefvenezuela](http://@unicefvenezuela)
UNICEF Venezuela Instagram: [@unicefvenezuela](http://@unicefvenezuela)

Who to contact for further information:

- Abubacar Sultan
  Representative
  UNICEF Venezuela
  Tel: +58 424 237 1027
  Email: asultan@unicef.org

- Javier Alvarez
  Deputy Representative
  Programmes
  UNICEF Venezuela
  Tel: +58 414 221 8897
  Email: jalvarez@unicef.org

- Veronica Argudo
  Resource Mobilization Specialist
  UNICEF Venezuela
  Tel: +58 424 275 4973
  Email: veargudo@unicef.org

- Rocio Ortega
  Chief of Communication
  UNICEF Venezuela
  Tel: +58 414 230 6342
  Email: rortega@unicef.org
### Annex A

#### Summary of Programme Results (HAC)

<table>
<thead>
<tr>
<th>Sector</th>
<th>UNICEF and Partners Jan – Dec 2021 target</th>
<th>Total results (Jan-June)</th>
<th>Sector Response</th>
<th>Cluster Jan – Dec 2021 target</th>
<th>Cluster Results (Jan-Nov)</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Health</strong></td>
<td></td>
<td></td>
<td></td>
<td></td>
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</tr>
<tr>
<td>Children aged 0 to 12 months vaccinated against measles</td>
<td>533,600</td>
<td>340,888&lt;sup&gt;a&lt;/sup&gt;</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Children aged 0 to 12 months fully vaccinated with three doses of pentavalent vaccine</td>
<td>532,192</td>
<td>278,457&lt;sup&gt;b&lt;/sup&gt;</td>
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<td></td>
<td></td>
</tr>
<tr>
<td>Pregnant women and new-born babies receiving maternal/neonatal life-saving services in UNICEF-supported facilities</td>
<td>246,900</td>
<td>283,490</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Health-care workers in health-care facilities and communities provided with personal protective equipment</td>
<td>60,000</td>
<td>33,361</td>
<td></td>
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<tr>
<td><strong>Nutrition</strong></td>
<td></td>
<td></td>
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<tr>
<td>Primary caregivers of children aged 0 to 23 months receiving infant and young child feeding counselling</td>
<td>155,500</td>
<td>111,534</td>
<td>313,333</td>
<td>100,062</td>
<td></td>
</tr>
<tr>
<td>Children aged 6 to 59 months with severe or moderate acute malnutrition admitted for treatment</td>
<td>51,447</td>
<td>15,786</td>
<td>67,747</td>
<td>13,312</td>
<td></td>
</tr>
<tr>
<td>Children aged 6 to 59 months and pregnant and lactating women receiving micronutrient supplementation</td>
<td>688,100</td>
<td>495,895</td>
<td>787,010</td>
<td>311,215</td>
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</tr>
<tr>
<td><strong>WASH</strong></td>
<td></td>
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<tr>
<td>People accessing a sufficient quantity of safe water for drinking, cooking and personal hygiene</td>
<td>3,000,000</td>
<td>1,786,155&lt;sup&gt;c&lt;/sup&gt;</td>
<td>3,840,000</td>
<td>1,841,751</td>
<td></td>
</tr>
<tr>
<td>Children accessing appropriate water, sanitation and hygiene facilities and hygiene services in learning facilities and safe spaces</td>
<td>300,000</td>
<td>38,487&lt;sup&gt;d&lt;/sup&gt;</td>
<td>580,500</td>
<td>53,852</td>
<td></td>
</tr>
<tr>
<td>People receiving basic hygiene information and/or essential hygiene products&lt;sup&gt;e&lt;/sup&gt;</td>
<td>1,540,000</td>
<td>531,400</td>
<td>3,526,800</td>
<td>632,703</td>
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</tr>
<tr>
<td><strong>Child Protection, Gender-based Violence &amp; PSEA</strong></td>
<td></td>
<td></td>
<td></td>
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</tr>
<tr>
<td>Children and caregivers accessing mental health and psychosocial support</td>
<td>150,250</td>
<td>53,798</td>
<td>455,363</td>
<td>58,467</td>
<td></td>
</tr>
<tr>
<td>Women, girls and boys accessing gender-based violence risk mitigation, prevention, or response interventions</td>
<td>60,000</td>
<td>51,141</td>
<td></td>
<td></td>
<td></td>
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<tr>
<td>People with access to safe channels to report sexual exploitation and abuse</td>
<td>10,000</td>
<td>9,236</td>
<td></td>
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</tr>
<tr>
<td><strong>Education</strong></td>
<td></td>
<td></td>
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<td></td>
</tr>
<tr>
<td>Children accessing formal or non-formal education, including early learning&lt;sup&gt;f&lt;/sup&gt;</td>
<td>150,000</td>
<td>309</td>
<td>191,362</td>
<td>814</td>
<td></td>
</tr>
<tr>
<td>Children receiving individual learning materials</td>
<td>1,180,000</td>
<td>304,408</td>
<td>1,487,622</td>
<td>317,078</td>
<td></td>
</tr>
<tr>
<td>Children benefiting from balanced school feeding programmes with hygiene standards</td>
<td>400,000</td>
<td>110,272</td>
<td>594,130</td>
<td>111,672</td>
<td></td>
</tr>
<tr>
<td><strong>C4D, Community Participation &amp; AAP</strong></td>
<td></td>
<td></td>
<td></td>
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<td></td>
</tr>
<tr>
<td>People participating in engagement actions for social and behavioural change</td>
<td>25,000&lt;sup&gt;a&lt;/sup&gt;</td>
<td>113,896</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>People who shared their concerns and asked questions/clarifications to address their needs through established feedback mechanisms</td>
<td>52,000</td>
<td>20,434</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>People reached with messages on access to services and lifesaving behaviours</td>
<td>4,800,000&lt;sup&gt;a&lt;/sup&gt;</td>
<td>7,593,237&lt;sup&gt;e&lt;/sup&gt;</td>
<td></td>
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</tbody>
</table>
### Annex B

#### HAC Funding Status

<table>
<thead>
<tr>
<th>Sector</th>
<th>Requirements</th>
<th>Funds available</th>
<th>Funding gap</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td>Humanitarian resources received in 2021</td>
<td>Other resources used in 2021</td>
</tr>
<tr>
<td>Nutrition</td>
<td>26,960,000</td>
<td>10,571,530</td>
<td>146,092</td>
</tr>
<tr>
<td>Health</td>
<td>34,915,000</td>
<td>16,301,202</td>
<td>1,975,037</td>
</tr>
<tr>
<td>WASH</td>
<td>70,200,000</td>
<td>19,766,805</td>
<td>0</td>
</tr>
<tr>
<td>Child Protection</td>
<td>16,255,000</td>
<td>9,647,345</td>
<td>63,552</td>
</tr>
<tr>
<td>Education</td>
<td>50,260,000</td>
<td>28,403,462</td>
<td>0</td>
</tr>
<tr>
<td>C4D</td>
<td>3,200,000</td>
<td>2,927,802</td>
<td>74,063</td>
</tr>
<tr>
<td><strong>Total</strong></td>
<td><strong>201,790,000</strong></td>
<td><strong>87,618,146</strong></td>
<td><strong>2,258,744</strong></td>
</tr>
</tbody>
</table>