



unicef 
for every child

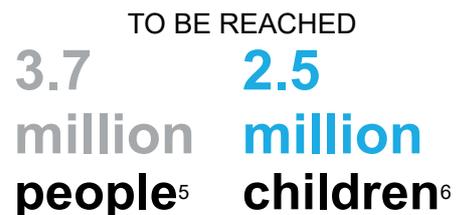
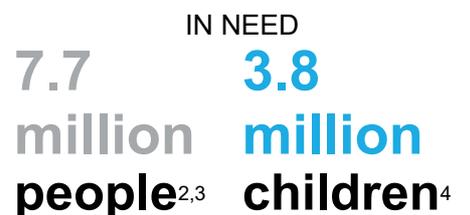
Humanitarian Action for Children

A UNICEF WASH Officer teaches hand-washing techniques to child at a UNICEF-supported school, where access to water, sanitation and hygiene is ensured through the rehabilitation of existing services.

Venezuela

HIGHLIGHTS¹

- Following eight consecutive years of economic contraction in the Bolivarian Republic of Venezuela, despite some macroeconomic stabilization the overlapping impacts of chronic inflation, global instability, sociopolitical tensions and natural hazards aggravated by climate change all continue to disproportionately affect children.
- In 2023, UNICEF will adopt an intersectoral approach and the geographic convergence of its programmes in remote rural areas and highly vulnerable urban concentrations. UNICEF will promote integrated services for children and adolescents that focus on health, nutrition and safe water, sanitation and hygiene (WASH). At the same time, UNICEF will facilitate child protection services, including gender-based violence prevention and response. Access to education and improved learning - prioritizing out-of-school children - will be supported, even as the organization supports schools as platforms for other services, including safe water and psychosocial support. UNICEF will also work to enhance national and local preparedness and emergency response capacities.
- UNICEF requires US\$223.4 million to meet the needs of Venezuelan children. Without adequate support, these children will continue struggling to survive and thrive, unable to build a better future for themselves and their families.



KEY PLANNED TARGETS



650,000

children and women accessing primary healthcare



510,000

children screened for wasting



160,000

children/caregivers accessing community-based mental health and psychosocial support



2.3 million

people accessing a sufficient quantity and quality of water



FUNDING REQUIREMENTS

US\$ 223.4 million



Figures are provisional and subject to change upon the update of the inter-agency planning documents.

HUMANITARIAN SITUATION AND NEEDS

Following eight consecutive years of economic contraction in the Bolivarian Republic of Venezuela, since 2021 there has been some macroeconomic stabilization, with moderate economic growth expected in 2022.⁷ Despite this positive economic outlook, the simultaneous impacts of chronic inflation, global economic instability, sociopolitical tensions and natural hazards aggravated by climate change continue to disproportionately affect children's lives and their futures.

Household purchasing power continues to be affected by inflation. While the availability of goods has improved, access to quality and diversified diets is limited due to high food costs, especially for the most vulnerable people. Estimates suggest that 22.9 per cent of the population is undernourished, while 1.9 million women aged 15-19 years are affected by anaemia.⁸ Additionally, UNICEF data suggest that around 6.8 to 8 per cent of children under age 5 are wasted.⁹

Deteriorated public infrastructure, constrained access to supplies and the loss of professionals (including health workers and teachers) who have left the country continue to stretch the capacity of the health system and jeopardize access to a quality education. Optimal nationwide immunization coverage has not been achieved,¹⁰ while early pregnancies, irregular antenatal consultations, infectious diseases and pregnancy or childbirth complications threaten the survival of newborns and mothers, particularly among indigenous groups. Additionally, since 2019 around 1.2 million children have dropped out of school, while 68 per cent of students lack foundational reading skills.¹¹

Poor water quality and quantity and intermittent access to safe water remain key concerns. Three quarters of households experience irregular water service provision, while 5.5 per cent do not have access at all.¹² Disasters associated with natural hazards, including heavy rains and floods, threaten to further aggravate the situation.

After a period of slowdown related to the coronavirus disease 2019 (COVID19) pandemic, internal and external population movements are increasing again. More than 7.1 million people have emigrated,¹³ representing a 16.5 per cent increase compared with 2021, while others are expected to return, using their own means or resorting to the government's Return to the Homeland Plan.¹⁴ Simultaneously, people continue to move within the country to escape violence or for economic purposes.¹⁵ Children and adolescents on the move, especially girls and those children who are separated or unaccompanied, face mounting protection risks, including trafficking and sexual exploitation and abuse.

Exposed to increasing distress, children and adolescents' mental health and psychosocial well-being is threatened. In the last three years, reported cases of sexual violence against children have tripled,¹⁶ while the risk of suicide among children and adolescents has increased.¹⁷

SECTOR NEEDS



560,660
children aged 12-23
months in need of
MMR vaccine¹⁸



1.1 million
people in need of
nutrition assistance¹⁹



1.4 million
children in need of
protection services²⁰



2.5 million
children in need of
education support²¹



4.3 million
in need of WASH
services²²

STORY FROM THE FIELD



Estefany, 10, lives in the 12 de Octubre neighborhood of Maracaibo, in Zulia State. She studies in a UNICEF-supported school.

Since in-person classes resumed in 2021, Estefany enjoys going to school because she learns math and plays with her classmates. "We didn't come before because they were fixing up the school, but when I came, I was happy because there was everything, there were water tanks, there were restrooms," she says.

UNICEF supports access to education and retention in school through the distribution of learning materials, training teachers and providing school meals, while ensuring access to safe water, protection services and nutritional support.

[Read more about this story here](#)

Estefany Márquez, 10, smiles at the camera while she shows her drawing at a UNICEF-supported school in Zulia State in March 2022. In this school, 280 children benefit from education support.

Uniquely positioned to work across the humanitarian-development nexus and with extensive field presence through four field offices and eight antennas,²⁶ UNICEF will adopt an intersectoral approach and the geographic convergence of its programmes in remote rural areas and highly vulnerable urban concentrations to reach those most in need, including adolescents, unaccompanied or separated children, children with disabilities and indigenous communities. This will include providing integrated life-saving interventions; strengthening monitoring and information systems; delivering incentives to retain skills;²⁷ enhancing accountability to affected populations and social and behavioural change; preventing and responding to sexual exploitation and abuse; and reinforcing local capacities together with government authorities. UNICEF will continue to lead the Nutrition, WASH and Education Clusters and the Child Protection Area of Responsibility; the organization will also participate in the Health Cluster and Gender-Based Violence Area of Responsibility.

Health system strengthening and high-impact health and nutrition interventions will focus on improving access to antenatal, delivery and postnatal services, including nutrition counselling and prevention of mother-to-child transmission of HIV/AIDS; essential newborn care; vaccination; and cold chain strengthening. UNICEF will train health-care professionals and community workers and provide breastfeeding and complementary feeding support to improve child survival; rehabilitate infrastructure and provide supplies to prevent and treat malnutrition and childhood diseases, including supporting paediatric HIV treatment; and ensure access to clean water and disinfecting products.

UNICEF will promote access to education, particularly for out-of-school children, and accelerate a recovery of learning outcomes, creating and adapting content to children's developmental and foundational needs and assisting on early childhood and adolescent education. Quality will be enhanced through the distribution of materials and teacher training, while strengthening the role of the school as a platform for other services, including psychosocial support. With the World Food Programme and the Food and Agriculture Organization of the United Nations, school feeding and WASH interventions will be supported to promote enrolment and retention.

UNICEF will enhance availability, access to and quality of child protection services, including case management, family tracing and reunification, alternative care, legal assistance, legal identity access (including birth registration) and mental health and psychosocial support. Violence, including gender-based violence, abuse, neglect and exploitation prevention and risk mitigation will also be promoted. An important aim is to build the resilience and capacity of communities, families, children and adolescents.

Sustainable water and sanitation services and systems will be strengthened, including urban and rural water networks, while empowering communities to adopt good hygiene and household water treatment and storage practices. UNICEF will also enhance national and local preparedness and emergency response capacities by increasing access to the knowledge, tools and supplies needed to cope with unexpected shocks.



Health

- **532,627** children vaccinated against measles²⁸
- **650,000** children and women accessing primary healthcare in UNICEF-supported facilities
- **1,400** children and adolescents living with HIV receiving ART²⁹
- **150,000** pregnant women tested for HIV during prenatal consultations



Nutrition

- **510,000** children 6-59 months screened for wasting
- **300,000** primary caregivers of children 0-23 months receiving infant and young child feeding counselling
- **35,400** children 6-59 months with severe and moderate acute malnutrition admitted for treatment³⁰



Child protection, GBVIE and PSEA

- **160,000** children, adolescents and caregivers accessing community-based mental health and psychosocial support
- **65,000** women, girls and boys accessing gender-based violence risk mitigation, prevention and/or response interventions
- **150,000** people with safe and accessible channels to report sexual exploitation and abuse by personnel who provide assistance to affected populations
- **1,000** unaccompanied and separated children provided with alternative care and/or reunified



Education

- **250,000** children accessing formal or non-formal education, including early learning³¹
- **377,000** children receiving individual learning materials
- **100,000** children benefitting from balanced school feeding programmes³²



Water, sanitation and hygiene

- **2,300,000** people accessing a sufficient quantity and quality of water for drinking and domestic needs³³
- **250,000** children using safe and appropriate WASH facilities and hygiene services in learning facilities and safe spaces³⁴
- **500,000** people reached with critical WASH supplies



Cross-sectoral (HCT, SBC, RCCE and AAP)

- **10,000,000** people reached through messaging on prevention and access to services³⁵
- **130,000** people who participate in engagement actions
- **229,000** people sharing their concerns and asking questions through established feedback mechanisms

FUNDING REQUIREMENTS IN 2023

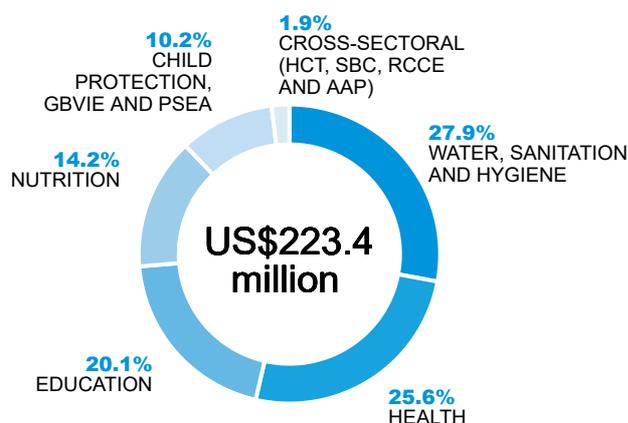
UNICEF requires US\$223.4 million to respond to the needs of 3.7 million people, including 2.5 million children, in the complex operating environment of the Bolivarian Republic of Venezuela.

As families increasingly struggle to cope with rising food prices and climate-driven floods that destroy and damage vital infrastructure that children rely on - including schools, water systems and health facilities - urgent support is needed to ensure children are protected and have uninterrupted access to education and clean water.

Children also require timely nutrition support in the community and at health-care facilities to prevent, detect and treat wasting, before it is too late. Funding is also urgently required to ensure children have access to safe, inclusive quality education to achieve learning outcomes. Without action, children and adolescents in the country who do not acquire basic learning skills may struggle for the rest of their lives, unable to build a better future for themselves and their families.

The overall funding requirement for the country has decreased compared with 2022, reflecting a change in the education component and reduced funding required for WASH.

UNICEF is uniquely positioned to ensure the most needed synergies between the humanitarian work that has been ongoing since the end of 2018 and the development work that we are expecting to accelerate under the United Nations Sustainable Development Cooperation Framework and the UNICEF country programme document. This is required to ensure children and adolescents in the Bolivarian Republic of Venezuela, including those who are most vulnerable, can realize their rights and reach their full potential.



Sector	2023 requirements (US\$)
Health	57,294,000
Nutrition	31,732,000
Child protection, GBVIE and PSEA	22,828,000
Education	44,871,000 ³⁶
Water, sanitation and hygiene	62,429,000
Cross-sectoral (HCT, SBC, RCCE and AAP)	4,220,000
Total	223,374,000

Who to contact for further information:

Abubacar Sultan
Representative, Bolivarian Republic of Venezuela
T +58 212 286 4094
asultan@unicef.org

Manuel Fontaine
Director, Office of Emergency Programmes (EMOPS)
T +1 212 326 7163
mfontaine@unicef.org

June Kunugi
Director, Public Partnerships Division (PPD)
T +1 212 326 7118
jkunugi@unicef.org

ENDNOTES

1. COVID-19 remains a Public Health Emergency of International Concern as declared by the World Health Organization in January 2020. On 1 July 2022, UNICEF deactivated its Level 3 Sustained Phase for the global COVID-19 pandemic response. All activities related to COVID-19 pandemic response, including programme targets and funding requirements, have been shifted into regular development programming and operations. While UNICEF's Level 3 emergency response phase of the COVID-19 pandemic was deactivated, the organization is continuing to respond to the COVID-19 pandemic and its impact on children, their families and their communities and on the social systems they rely on.
2. United Nations Office for the Coordination of Humanitarian Affairs (OCHA), Venezuela: 2022-2023 Humanitarian Needs Overview (draft), OCHA, 2022.
3. UNICEF is committed to needs-based targeting, which means covering the unmet needs of children; and will serve as the provider of last resort where it has cluster coordination responsibilities.
4. OCHA, Venezuela: 2022-2023 Humanitarian Needs Overview (draft), OCHA, 2022.
5. This figure was calculated based on the number of adults to receive infant and young child feeding counselling (300,000); children vaccinated against measles (529,741); people accessing a sufficient quantity of safe water for drinking and domestic needs (2,300,000); children to be reached with individual learning material kits (377,000); and children and parents/caregivers accessing mental health and psychosocial support services (160,000). The total figure includes 1,833,256 women/girls (50 per cent) and an estimated 439,981 people with disabilities (12 per cent). The people to be reached figure has decreased compared with 2022, as school feeding and WASH interventions are being increasingly supported by other stakeholders, including government authorities. UNICEF is committed to needs-based targeting, which means covering the unmet needs of children; and will serve as the provider of last resort where it has cluster coordination responsibilities.
6. This figure was calculated considering the various interventions planned for different age groups and locations to avoid double counting beneficiaries. This includes 529,741 children vaccinated against measles; 1,485,110 children accessing a sufficient quantity of safe water for drinking and domestic needs; 377,000 children to be reached with individual learning material kits; and 80,000 children accessing mental health and psychosocial support services. The total figure includes 1.2 million girls and 296,622 children with disabilities. UNICEF is committed to needs-based targeting, which means covering the unmet needs of children; and will serve as the provider of last resort where it has cluster coordination responsibilities.
7. Economic Commission for Latin America and the Caribbean (ECLAC), Economic Survey of Latin America and the Caribbean: Trends and challenges of investing for a sustainable and inclusive recovery, United Nations, Santiago, 2022, available at <www.cepal.org/en/publications/48078-economic-survey-latin-america-and-caribbean-2022-trends-and-challenges-investing>.
8. Food and Agricultural Organization of the United Nations (FAO), International Fund for Agricultural Development, UNICEF, World Food Programme (WFP) and World Health Organization (WHO), The State of Food Security and Nutrition in the World 2022: Repurposing food and agricultural policies to make healthy diets more affordable, FAO, Rome, 2022, available at <<https://doi.org/10.4060/cc0639en>>.
9. UNICEF programme data based on nutritional screening by implementing partners between January and June 2022.
10. WHO and Pan American Health Organization, Core Indicators Dashboard, immunization coverage data for the Bolivarian Republic of Venezuela based on official reports from 2021, available at <<https://opendata.paho.org/es/indicadores-basicos/tablero-de-los-indicadores-basicos>>. Since 2016, The Bolivarian Republic of Venezuela has had to reduce its expanded programme on immunization to a minimum, focusing on diseases most prone to vaccine-preventable epidemics. The pneumococcal conjugate, rotavirus and influenza vaccines have been discontinued because of lack of funds to purchase these vaccine doses.
11. DevTech Systems, Inc, Universidad Católica Andrés Bello, ANOVA and Fundación Carvajal, Diagnóstico de Educación Básica en Venezuela: Reporte Final, September 2021, available at <https://eneed-venezuela.org/wp-content/uploads/VN_Z_Education_Diagnostic_spanish.pdf>.
12. Observatorio Venezolano de Servicios Públicos, Percepción ciudadana sobre los servicios públicos: Resultados de encuesta a usuarios de fecha abril-mayo 2022, Bulletin no. 35, May 2022, available at <www.observatoriovsp.org/wp-content/uploads/Boletin-35.pdf>.
13. Inter-Agency Coordination Platform for Refugees and Migrants from Venezuela (R4V), Refugees and migrants from Venezuela, online information, available at <www.r4v.info/en/refugeemigrants>, accessed 13 October 2022.
14. R4V, RMNA 2022: Refugee and migrant needs analysis, R4V, November 2022, available at <<https://r4v.info/rmna/>>.
15. Office of the United Nations High Commissioner for Human Rights (OHCHR), Report of the independent international fact-finding mission on the Bolivarian Republic of Venezuela, OHCHR, 20 September 2022, available at <www.ohchr.org/es/hr-bodies/hrc/ffmv/report-ffmv-september2022>, accessed 27 September 2022.
16. Observatorio Venezolano de Violencia (OVV), Informe Anual de Violencia 2021, OVV, December 2021, available at <<https://observatoriodeviolencia.org.ve/wp-content/uploads/2021/12/INFORME-ANUAL-DE-VIOLENCIA-2021.pdf>>.
17. OVV, Suicidios en Venezuela aumentan y Mérida encabeza la lista, OVV, Caracas, August 2022, available at <<https://observatoriodeviolencia.org.ve/news/suicidios-en-venezuela-aumentan-y-merida-encabeza-la-lista/>>.
18. MMR is measles, mumps and rubella vaccine. Ministry of Health forecasting in line with Instituto Nacional de Estadísticas estimates based on 2011 National Population and Housing Census, October 2022.
19. Nutrition Cluster estimate. This figure includes 751,809 children and 322,191 pregnant and lactating women.
20. Child Protection Area of Responsibility estimate.
21. Education Cluster estimate.
22. WASH Cluster estimate.
23. UNICEF is committed to supporting the leadership and coordination of humanitarian response through its leadership or co-leadership of cluster coordination for the WASH, Nutrition and Education Clusters and the Child Protection Area of Responsibility. All cluster coordinators costs are included in sectoral programme budgets.
24. This appeal is aligned with the revised Core Commitments for Children in Humanitarian Action, which are based on global standards and norms for humanitarian action.
25. UNICEF is committed to empowering local responders in humanitarian crises in a variety of ways. The revised Core Commitments made investing in strengthening the capacities of local actors in the humanitarian response a mandatory benchmark for UNICEF action. A more localized response will improve humanitarian action and is fundamental to achieving better accountability to affected populations.
26. In addition to the central office in Caracas, UNICEF has four field offices operating in Maracaibo (Zulia), San Cristobal (Táchira), Puerto Ordaz (Bolívar) and Caracas (Miranda) which work on subnational planning, monitoring and implementation, and programmatic convergence at the field level, covering the west, east, northeast and central regions of the country. Moreover, in the last two years, with the objective of expanding the target population in the most vulnerable regions of the country, antennas (teams of one or two people) have been established in remote locations, including: Santa Elena de Uairén and Cedeño (Bolívar), Tucupita (Delta Amacuro), Barcelona (Anzoátegui), Sur del Lago (Zulia), Coro (Falcón), Guasdalito (Apure) and Puerto Ayacucho (Amazonas).
27. Incentives include in-kind/cash support to public servants, mainly health workers and teachers, to mitigate the impact of the economic crisis on professionals' decisions to migrate and ensure the continuity of services. This is designed as a scholarship programme conditional on attendance and performance of participants in training sessions and a commitment to stay on the job after the programme ends.
28. This indicator refers to children aged 12-23 months who receive a measles vaccination through UNICEF-supported measles immunization efforts, including technical and operational support for planning and microplanning; development of guidelines; training material; information, education and communication material; capacity building of health-care personnel at various levels; social mobilization and communication; and cold chain system strengthening.
29. This indicator refers to children and adolescents living with HIV and those exposed to HIV.
30. This indicator includes 5,370 children affected by severe wasting and 30,030 children affected by moderate wasting.
31. This indicator refers to children and adolescents receiving a package of integrated interventions, including learning materials, to improve access to education, but also address the learning losses due to school closures related to the coronavirus disease 2019 (COVID-19) pandemic because this is one of the biggest global threats to medium- and long-term recovery from the pandemic. UNICEF has a particular focus on out-of-school children.
32. Includes children benefitting from balanced school feeding interventions with hygiene standards. The target has decreased compared with 2022, because school feeding is increasingly supported by government authorities through the national school feeding programme (in Spanish, PAE) and WFP.
33. This indicator refers to people accessing and using new and existing drinking water sources as a result of resilient solutions such as chlorination and/or water systems' repair/rehabilitation, rather than temporary access including water trucking or distribution of water purification tablets. UNICEF is directly targeting a total of 3,050,000 people (75 per cent of people in need). The target has decreased compared with 2022, because WASH interventions in water supply systems are being increasingly maintained by government authorities with UNICEF's indirect support in the form of capacity building, technical assistance, and evidence-based advocacy.
34. This indicator refers to children and adolescents accessing and using new and existing drinking water sources in schools or other learning spaces supported by UNICEF. In line with education programme targets, this indicator target has been reduced to sustain assistance in currently supported schools with school feeding and adding others for the implementation of a package of integrated education interventions aimed at improving access and retention, and accelerating learning outcomes.
35. The population targeted is higher than the total number of people/children to be reached because the target includes mass media outreach.
36. The school feeding programme, based on daily food preparation in schools, is included in the total education funding requirement. In line with the reduction in school feeding target, the total education budget has also decreased.