From January to June 2023, UNICEF Venezuela reached around 623,315 people, including 384,808 children (49.2 per cent girls) with integrated lifesaving interventions.

During the first semester, 101,751 children under five (50.2 per cent girls) were screened for acute malnutrition, of which 6,819 children identified with moderate acute malnutrition (MAM) and 1,749 children with severe acute malnutrition (SAM), were admitted for RUTF treatment. As of 30 June, 67.8 per cent of the children admitted into MAM and SAM treatment in 2023 have been discharged as cured.

Approximately, 256,500 people (31.6 per cent children) gained access to safe water in five priority states thanks to UNICEF support to water treatment plants, including through the rehabilitation of water pumping, treatment, disinfection, and distribution systems, as well as installation of solar-powered technologies.

3,279 out-of-school children (45.8 per cent girls) gained access to alternative learning opportunities supported by UNICEF and its implementing partners in six states.

**SITUATION IN NUMBERS**

- **3,800,000** Children in need of assistance
- **7,700,000** People in need of assistance

**FUNDING STATUS (IN US$)**

<table>
<thead>
<tr>
<th>Sector</th>
<th>Funding Available</th>
<th>Status</th>
</tr>
</thead>
<tbody>
<tr>
<td>Health</td>
<td>$9.4M</td>
<td>$3M</td>
</tr>
<tr>
<td>Nutrition</td>
<td>$59.1M</td>
<td>$151.9M</td>
</tr>
<tr>
<td>Child protection, GBV, and PSEA</td>
<td>$151.9M</td>
<td>$223.4M</td>
</tr>
<tr>
<td>Education</td>
<td>$151.9M</td>
<td>$223.4M</td>
</tr>
<tr>
<td>Water, sanitation, and hygiene</td>
<td>$151.9M</td>
<td>$223.4M</td>
</tr>
<tr>
<td>Community engagement</td>
<td>$151.9M</td>
<td>$223.4M</td>
</tr>
</tbody>
</table>

* UNICEF response % is only for the indicator, the funding status is for the entire sector.
FUNDING OVERVIEW AND PARTNERSHIPS

In 2023, UNICEF appealed for US$223.4 million to reach 3.7 million people in need – including 2.5 million children – in Venezuela. Thanks to generous contributions from partners, the appeal is funded at around 32 per cent by the end of June 2023. This includes flexible emergency funding from strategic partners, which has allowed UNICEF to respond to sudden needs. UNICEF expresses its sincere gratitude to all public and private donors for their continued support in 2023, including the Governments of Canada, France, Spain, Sweden, the United States of America (USA), the European Commission, and Gavi, The Vaccine Alliance for their generous contributions.

On 8th February, the new Country Programme Document (CPD) for the period 2023-2026 between UNICEF Venezuela, and the Government of the Republic of Venezuela (CPD 2023-2026), was approved by UNICEF Executive Board. The CPD sets out programme priorities and strategies, under a triple nexus approach, aligned with the new UN Sustainable Development Cooperation Framework (UNSDCF) 2023-2026.

SITUATION OVERVIEW

Venezuela’s economy is expected to continue to grow throughout 2023, albeit at a slower pace compared to 2022 figures. Despite this positive macroeconomic outlook, the first half of the year has been marked by raising inflation, social tensions, and weather-related concerns that continue to disproportionately affect children’s lives and their futures.

Year-on-year inflation reached 404 per cent in June 2023, continuing to challenge household’s purchasing power. Venezuelans required 112 times the minimum wage of US$ 4.55 per month to access a basic needs basket of vital commodities.

During the first semester, protests have continued, often centered around demands for economic and social rights, as well as better working conditions and wages. The education sector has been particularly challenged as teachers have increasingly joined these demonstrations since January, impacting the schools’ capacity to provide uninterrupted classes with the required number of learning hours to students nationwide. The Venezuelan teachers’ federation has warned about a modality called “horario mosaico” being implemented by some educational institutions. This measure is based on teachers giving classes only two days a week to have additional time to engage in other income-generating activities.

The early beginning of the rainy season in April has been marked by heavy rains with floods and landslides nationwide. The National Institute of Meteorology and Hydrology (INAMEH by its Spanish acronym) has forecasted between 55 and 65 tropical waves until the end of the year and announced the 1st of June as the official start date of the tropical cyclone season in Venezuela.

Following an invitation from the Government of Venezuelan, the UN High Commissioner for Human Rights, Volker Türk, visited the country from 26-28 January. Mr. Türk met a wide range of actors, including government authorities, civil society representatives, human rights defenders, representatives of victims’ groups, heads of UN agencies, funds and programmes and diplomats. More recently, the International Criminal Court (ICC), Prosecutor Karim A.A. Khan, visited the country from 8-10 June. During this visit, Mr. Khan signed a memorandum of understanding with President Nicolás Maduro establishing an in-country office.

UNICEF continued to support the national health system to attend to the leading causes of maternal and neonatal morbidity and mortality in Venezuela as well as to reduce the risk of pregnancy and labor complications through the distribution of essential medicines, life-saving commodities, and equipment.

Between January and June, 23,768 pregnant women (including 7,370 adolescents) gained access to obstetric care and 142,713 children (70,836 girls and 71,877 boys) to pediatric and critical care in 189 healthcare facilities supported by UNICEF nationwide (72 hospitals and 117 primary healthcare). Moreover, 4,262 critically ill newborns (1,962 girls and 2,300 boys) received timely attention to treat complications related to preterm birth and intrapartum events such as birth asphyxia, congenital abnormalities, and lower respiratory infections in 29 referral hospitals. UNICEF also supported the implementation of 41 health community outreach activities, benefiting 6,915 people located in hard-to-reach and underserved areas in 11 municipalities in five states.

Moreover, during the reporting period, UNICEF in coordination with academic institutions and scientific societies, supported the improvement of quality services at the national level through capacity-building interventions. As a result, 2,799 healthcare workers (1,983 female and 796 male) enhanced their capacities through virtual and in-person trainings on topics related to maternal and neonatal morbidity and mortality; management of adolescent pregnancy; humanized childbirth; care of critical newborns; prevention, timely identification, and treatment of the most prevalent diseases in childhood, among others.

During the first semester of 2023, UNICEF also supported 11 healthcare facilities in the Capital District, Bolivar, Delta Amacuro, Falcon and Miranda states with basic infrastructure rehabilitations, including conditioning and repairs in delivery care areas to ensure safe births attention, emergency areas for pediatric attentions, and critical neonatal care spaces. This has contributed to ensuring the delivery of improved maternal, neonatal and child healthcare, in compliance with national and international standards. An estimated 26,753 people (11,126 girls, 7,957 boys and 7,670 pregnant women)
have indirectly benefited from this support. Additionally, UNICEF completed the rehabilitation of oxygen therapy systems in seven priority referral hospitals in six states. As a result, an estimated 6,135 children with respiratory problems received the necessary attention in a timely manner. Similarly, UNICEF also completed the solarization of nine primary healthcare facilities located in Amazonas, Bolivar, Delta Amacuro, and Sucre states to ensure the uninterrupted delivery of immunization and essential public health services in remote and hard-to-reach indigenous communities.

UNICEF provided 1.6 million doses of four essential vaccines against tuberculosis, diphtheria, whooping cough, tetanus, hepatitis B and Haemophilus influenzae type b, contributing to the uninterrupted delivery of immunization services in the country. An estimated 227,000 children under five years old and 416,000 pregnant women will benefit from this support. Additionally, UNICEF ongoing support to strengthen the national vaccine cold chain system, contributed to increasing the storage capacity of more than 25.6 million vaccine doses at national and regional levels through the installation of six walk-in cold rooms. UNICEF also conducted preventive and corrective maintenance for 49 walk-in cold rooms, 1,226 electrical/solar powered freezers, and 35 back-up power generators in 24 states. To strengthen national capacities, UNICEF trained 944 Ministry of Health (MoH) staff and 150 cold chain technicians through digital platforms on the use and maintenance of the cold chain equipment and remote temperature monitoring devices provided, contributing to the sustainability of interventions.

Nutrition

UNICEF continued to play a key role in strengthening the supply chain for nutrition-related commodities and supported the training of personnel at both healthcare facilities and community levels, contributing to the implementation of the "Venezuela Free of Nutritional Vulnerability" national programme. This initiative launched in 2022 by national authorities aims at achieving nutritional improvement of affected populations, including children under five years old and pregnant and lactating women (PLW), by providing assistance that meets their food requirements coupled with integrated social care services.

During the reporting period, UNICEF and implementing partners reached 101,751 children under five (51,079 girls and 50,672 boys) and 29,552 PLW in 22 out of 24 states with essential nutrition services and procured/prepositioned 20,000 cartons of ready-to-use therapeutic food (RUTF) to respond to the existing needs. Thanks to this support, out of the 101,751 children under five screened for acute malnutrition, 6,819 children identified with moderate acute malnutrition (MAM) and 1,749 children with severe acute malnutrition (SAM) were admitted for RUTF treatment. As of 30 June, 67.8 per cent of the children admitted into MAM and SAM treatment in 2023 have been discharged as cured. Moreover, out of the 29,552 PLW screened, 2,010 identified as undernourished received treatment with Lipid-Based Nutrition Supplement (LNS-MQ).

Interventions focused on the prevention of intestinal parasites are essential to decrease the rates of malnourished children. Between January and July, 3,764,169 children aged 4 to 12 years (1,894,588 girls and 1,869,581 boys) benefitted from the implementation of the national deworming campaign coordinated between the Ministry of Education (MoE), MoH with support from UNICEF as well as the National Institute of Nutrition at community level. Moreover, complementing deworming activities and to reinforce the adoption of good nutritional practices, UNICEF and its partners conducted awareness raising sessions on household water treatment, safe storage and personal hygiene and nutritional education at community level.

UNICEF supported capacity building activities for 1,723 health professionals and community workers in 10 states focused on topics related to the management of acute malnutrition and promotion of optimal Infant and Young Child Feeding (IYCF) practices. Additionally, 183 community promoters received guidance and training on utilizing the mid-upper arm circumference (MUAC) tape for nutritional screening, identifying children under five years with acute malnutrition, knowing when to seek treatment support, and monitoring treatment progress at home in six states. These actions play a crucial role in strengthening capacities for early detection of malnutrition cases within communities and facilitating appropriate referrals to health centers for nutritional care.

Education

UNICEF and implementing partners reached 101,751 children under five (51,079 girls and 50,672 boys) and 29,552 PLW in 22 out of 24 states with essential nutrition services and procured/prepositioned 20,000 cartons of ready-to-use therapeutic food (RUTF) to respond to the existing needs. Thanks to this support, out of the 101,751 children under five screened for acute malnutrition, 6,819 children identified with moderate acute malnutrition (MAM) and 1,749 children with severe acute malnutrition (SAM) were admitted for RUTF treatment. As of 30 June, 67.8 per cent of the children admitted into MAM and SAM treatment in 2023 have been discharged as cured. Moreover, out of the 29,552 PLW screened, 2,010 identified as undernourished received treatment with Lipid-Based Nutrition Supplement (LNS-MQ).

Interventions focused on the prevention of intestinal parasites are essential to decrease the rates of malnourished children. Between January and July, 3,764,169 children aged 4 to 12 years (1,894,588 girls and 1,869,581 boys) benefitted from the implementation of the national deworming campaign coordinated between the Ministry of Education (MoE), MoH with support from UNICEF as well as the National Institute of Nutrition at community level. Moreover, complementing deworming activities and to reinforce the adoption of good nutritional practices, UNICEF and its partners conducted awareness raising sessions on household water treatment, safe storage and personal hygiene and nutritional education at community level.

UNICEF supported capacity building activities for 1,723 health professionals and community workers in 10 states focused on topics related to the management of acute malnutrition and promotion of optimal Infant and Young Child Feeding (IYCF) practices. Additionally, 183 community promoters received guidance and training on utilizing the mid-upper arm circumference (MUAC) tape for nutritional screening, identifying children under five years with acute malnutrition, knowing when to seek treatment support, and monitoring treatment progress at home in six states. These actions play a crucial role in strengthening capacities for early detection of malnutrition cases within communities and facilitating appropriate referrals to health centers for nutritional care.

Early childhood development (ECD) presents a crucial opportunity to shape a child’s overall growth and lay the groundwork for their future. In partnership with the MoE, UNICEF conducted training sessions for service providers in seven states on ECD and related themes such as prevention of violence and the role of caregivers to enhance the quality of care and early stimulation provided to children aged 0 to 3 years old. As a result, 228 teachers and other service providers (212 women and 16 men), including healthcare personnel and staff from child development centers for children with disabilities have improved their capacity to promote the integral development of young children as well as share this knowledge and skills with parents and caregivers.
Moreover, during the reporting period, UNICEF supported 3,279 out-of-school children (1,502 girls and 1,777 boys), including 435 from indigenous communities and 41 children with disabilities, to access education opportunities in alternative learning centers in nine states.  This intervention has been particularly important for the delivery of specialized education services to children and adolescents identified with disabilities, helping them to gain basic literacy and numeracy skills. At the same time, the intervention has contributed to the delivery of an integrated response to this vulnerable population, ensuring out-of-school children do not only access education opportunities, but also benefit from other UNICEF supported interventions, including immunization and birth registration.

Engaging in sports has a positive impact on children's education and skill development, fostering empowerment, leadership, and self-esteem, which ultimately enhances their well-being and future opportunities. UNICEF collaborated with the MoW to establish a National Sports for Development programme in 634 schools, aiming to build sustainable capacities and enhance children's learning and skill development. Between January and June 2023, approximately 239,558 children and 1,167 teachers have indirectly benefited from this innovative approach.

### Water, sanitation and hygiene

UNICEF continued to provide technical assistance and programmatic support to increase access to safe, dignified, equitable, and sustainable WASH services, contributing to the reduction of water-related diseases risks, including cholera and diarrhea.

During the reporting period, UNICEF in coordination with the Ministry of Water (MoW) consolidated existing initiatives and scaled-up high impact water and sanitation interventions, enabling access to safe water for 256,500 people (40,733 girls, 40,284 boys, 90,158 women and 85,325 men) in five states.  For example, in the indigenous community of “San Francisco del Guayo” (Delta Amacuro state), where access is limited to the river, UNICEF built a solar-powered water treatment plant benefitting approximately 10,000 people (1,583 boys, 1,566 girls, 3,520 women and 3,331 men). Similarly, in Amazonas state, an estimated 70,000 people (10,962 boys, 11,081 girls, 24,640 women and 23,317 men) gained access to safe water thanks to UNICEF support to the “Cerro Avion” water treatment plant, which included the rehabilitation of the water pumping, treatment, disinfection, and distribution systems. Additionally, UNICEF also supported the MoW and its local service providers, by conducting joint operational and maintenance activities for water supply and treatment plants, which included the provision of technical assistance, distribution of tools, equipment, and personal protective equipment, and the rehabilitation of spaces to improve workers morale and performance.

To reinforce the impact and sustainability of the above-mentioned results, UNICEF provided WASH supplies to 94,485 people (14,957 girls, 14,796 boys, 33,259 women, and 31,473 men) nationwide to facilitate the adoption of safe water treatment and storage, and hygiene practices (e.g., hand soap, chlorinator tabs). Moreover, UNICEF targeted families with children diagnosed with acute malnutrition with social and behavior change strategies (e.g., providing regular household visits to SAM/MAM children, and their families, together with community-based hygiene promotion activities) for malnutrition prevention, reaching 19,850 children and 43,185 family members (9,978 girls, 9,871 boys, 22,188 women and 20,997 men).

As part of UNICEF and implementing partners efforts to ensure a safe return to schools, 41,480 children (22,814 girls and 18,666 boys) in 97 schools located in 8 states gained access to water and hygiene. This result was achieved thanks to UNICEF and its partners support with WASH infrastructure rehabilitation works; distribution of hygiene, cleaning, and disinfection supplies to reduce the risk of disease infections; and the promotion of hygiene behaviors and practices among children, teachers, and other school personnel.

At the same time, UNICEF reached four new healthcare facilities in Bolivar state with WASH support contributing to the delivery of improved health services, through the installation of handwashing points, rehabilitation of water and sanitation infrastructure, and the provision of key WASH supplies, while maintaining technical assistance on WASH-FIT and IPC in 63 health care facilities across 12 states. A total of 1,500 healthcare staff and IPC committee members (825 women, 675 men) received IPC-related trainings that contributed to the adoption and implementation of key protocols with the aim of improving patient and health workers safety.

On the commemoration of World Water Day (22nd March) and Menstrual Hygiene Day (28th May), UNICEF and 33 partners, including the Ministry of Health, the MoW and the MoE reached more than 3 million people through several activities in schools, healthcare centers and communities, including roundtable discussions, puppet shows, etc., as well as through messages in social media and radio interviews. This contributed to raising awareness on the risks caused by the lack of adequate safe water and key hygiene services and practices.
During the reporting period, UNICEF strengthened its partnership with the Prosecutor’s Office to better support the entity’s efforts to handle criminal proceedings and investigations related to various child protection risks, including sexual exploitation, physical violence, and trafficking. Through this partnership, between January and June 2023, 314 child protection staff and community members (228 women and 86 men) in the Capital District and Táchira, Zulia, and Sucre states, enhanced their knowledge on the prevention, detection and reporting of the above-mentioned child protection risks. This contributed to improving the quality of case management services delivered at the community level. Moreover, UNICEF and the local implementing partner Fundación Vanessa Peretti conducted a capacity building programme in the Capital District and Falcon, Miranda, and Zulia states to respond to the stigma, discrimination, and isolation of people with disabilities. As result, 600 child protection frontline workers (450 women and 150 men) strengthened their capacities on inclusive approach.

UNICEF remained committed to advocating for and strengthening the national and local capacities to safeguard children’s right to an identity. Specifically, in the Cedeño, Sifontes, and Gran Sabana municipalities of Bolivar state, UNICEF collaborated with local implementing partner Fe y Alegria and regional authorities to conduct strategies that facilitated the promotion and issuance of identity documents for children and adolescents belonging to indigenous communities. The implementation of multicultural and multilingual approaches proved to be highly effective in ensuring access to proper identity documentation for 488 children and adolescents (consisting of 243 girls and 245 boys) from the Pemón, Eñepá, Hüütuja, Kariña, Jivi, and Mapoyo indigenous groups.

UNICEF also focused on the transformation of social norms and inequalities that tolerate and sustain gender-based violence (GBV) implementing the national campaign “Hablemos de Frente” aimed at empowering adolescents and raising awareness on life-skills, self-esteem, gender, identity, and the promotion of gender-sensitive masculinities. To foster gender transformations through influential channels like music, UNICEF launched the #HablemosDeFrente competition, targeting Venezuelan adolescents and young people aimed at using musical artworks to prevent and raise awareness about GBV. The winning music theme “No es normal y no está bien” speaks to girls, adolescents, and women to question social conventions behind gender dynamics, such as the myths of romantic love.
UNICEF continued its active engagement in the Humanitarian Country Team (HCT), working to coordinate efforts among humanitarian actors operating in Venezuela, including UN agencies, and national and international civil society organizations (CSOs). Efforts to coordinate at the national level were replicated and strengthened locally, fostering close collaboration among partners and government authorities, particularly through the leadership of sectoral groups in Education, Nutrition, WASH, and Child Protection (CP) Areas of Responsibility (AoR).

During the reporting period, the Child Protection AoR facilitated access to specialized protection services for 19,286 children nationwide (9,783 girls and 9,503 boys), encompassing alternative care and case management support. Additionally, 18,733 children (9,928 girls and 8,805 boys) and 24,113 caregivers (18,085 women and 6,028 men) actively participated in awareness initiatives aimed at preventing all forms of violence against children. When faced with the flooding emergency in Sur del Lago (Zulia state), the Child Protection AoR demonstrated exceptional coordination, successfully mobilizing its members and collaborating closely with the National Protection System (SPINNA as per its Spanish acronym). The collective response included comprehensive psychosocial support, identification, and assistance for separated and unaccompanied children, as well as measures for protection and family reunification. This combined effort reached 69,834 people, including 18,773 girls and 15,960 boys.

The education sector reached approximately 30,600 children and adolescents (51 per cent girls) and 4,400 adults (79 per cent women) with (i) better conditions for learning (i.e., school kits, school feeding and socio-emotional learning); (ii) strengthened staff capacities (i.e., teacher training and scholarships); and (iii) alternative and flexible learning opportunities (reinforcement, leveling, life skills and technical training programs). Also, the Cluster actively contributed to strengthening the socio-productive Education policy by providing technical assistance to the MoE. This assistance targeted teacher training, evidence generation, and project support methodology within the sector. Through the Venezuelan Humanitarian Fund (FHV) 66 productive educational centers in Bolivar and Apure states, including 10 special education centers, were positively transformed, equipping 6,600 children (3,498 girls and 3,102 boys) with essential life skills, entrepreneurial capabilities, and creating an improved learning environment. During the reporting period, the Cluster developed and initiated implementation of a holistic integrated monitoring system for the humanitarian response with OCHA.

In the nutrition sector, 139,235 people (52,896 girls, 52,563 boys and 31,933 PLW) received services in 146 municipalities nationwide. These efforts complemented the health and nutrition network services in 296 centers and 29 hospitals for the treatment of severe malnutrition cases. Particularly, in Sucre state eight new nutritional care centers were established in communities, enhancing the access of the most vulnerable and hardest to reach population to life saving services. Moreover, the WASH cluster successfully restored sanitation and hygiene practices and water services in 414 schools nationwide (17 per cent of the target) and 193 health care facilities (44 per cent of the target), increasing its support by 22 per cent compared to 2022 figures.

Dahir Franco is a 10-year-old boy who belongs to the Warao indigenous community. He lives in San Francisco de Guayo situated six hours away by boat from Tucupita, the capital of Delta Amacuro state. Lack of access to safe water led the community to consume water directly from the Orinoco River, increasing the prevalence of waterborne diseases. In collaboration with local authorities, UNICEF installed a solar-powered treatment plant that does not only benefit the 10,000 inhabitants of San Francisco de Guayo, but also the neighboring fluvial communities.

"My parents tell me that the water from the hospital is clean, and if we drink water from the river we get stomach pain, diarrhea, and vomiting," explains Dahir. He is proud to guide his community members to take safe water. "If someone does not know, I say: go to the hospital to get clean water" he explains.

The operation of this plant also serves as a gathering point for the community, promoting hygiene, protection, health, and educational activities—a crucial part of UNICEF’s initiatives to bring positive behavior changes.


- UNICEF supports the strengthening of the oxygen therapy service in hospitals in the country  
  [https://www.youtube.com/watch?v=0-tMgYl5u5c](https://www.youtube.com/watch?v=0-tMgYl5u5c)
- UNICEF supports the reinforcement of the cold chain with solar refrigerators  
  [https://www.youtube.com/watch?v=fCYJMblyl1g](https://www.youtube.com/watch?v=fCYJMblyl1g)
- UNICEF contributes to education programmes in vulnerable and remote areas  
  [https://www.youtube.com/watch?v=pdVhEcQ1J2c&t=1s](https://www.youtube.com/watch?v=pdVhEcQ1J2c&t=1s)
- UNICEF contributes with supplies to strengthen life skills workshops for adolescents  
  [https://www.youtube.com/watch?v=NsgLG8HeKY4](https://www.youtube.com/watch?v=NsgLG8HeKY4)
UNICEF supports alternative care programmes in Venezuela
https://www.youtube.com/watch?v=zi4QEEmJbdgQ

UNICEF contributes so that every child and adolescent can have access to all their rights
https://www.youtube.com/watch?v=foAu6-JAahk&t=1s

UNICEF supports nutrition services in health centers
https://www.youtube.com/watch?v=KVIzdiVL07w

UNICEF Venezuela presents the video of the winning song of the #HablemosDeFrente contest
https://www.youtube.com/watch?v=GtlRFhORCno

HAC APPEALS AND SITREPS

Venezuela Appeals
https://www.unicef.org/appeals/venezuela

Venezuela Situation Reports
https://www.unicef.org/appeals/venezuela/situation-reports

All Humanitarian Action for Children Appeals
https://www.unicef.org/appeals

All Situation Reports
https://www.unicef.org/appeals/situation-reports

NEXT SITREP: DECEMBER 2023
<table>
<thead>
<tr>
<th>Sector</th>
<th>Indicator</th>
<th>Disaggregation</th>
<th>Total needs</th>
<th>2023 targets</th>
<th>Total results</th>
<th>Progress*</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Health</strong></td>
<td>Children vaccinated against measles</td>
<td>Total</td>
<td>-</td>
<td>532,627^25</td>
<td>26</td>
<td>0%</td>
</tr>
<tr>
<td></td>
<td>Children and women accessing primary healthcare in UNICEF-supported facilities</td>
<td>Total</td>
<td>-</td>
<td>650,000</td>
<td>174,895</td>
<td>▲ 27%</td>
</tr>
<tr>
<td></td>
<td>Children and adolescents living with HIV receiving ART</td>
<td>Total</td>
<td>-</td>
<td>1,400^27</td>
<td>1,340^28</td>
<td>▲ 98%</td>
</tr>
<tr>
<td></td>
<td>Pregnant women tested for HIV during prenatal consultations</td>
<td>Total</td>
<td>-</td>
<td>150,000</td>
<td>23,768</td>
<td>▲ 16%</td>
</tr>
<tr>
<td><strong>Nutrition</strong></td>
<td>Children 6-59 months screened for wasting</td>
<td>Total</td>
<td>-</td>
<td>510,000</td>
<td>101,751^29</td>
<td>▲ 20%</td>
</tr>
<tr>
<td></td>
<td>Primary caregivers of children 0-23 months receiving infant and young child feeding counselling</td>
<td>Total</td>
<td>-</td>
<td>300,000</td>
<td>97,311</td>
<td>▲ 32%</td>
</tr>
<tr>
<td></td>
<td>Children 6-59 months with severe and moderate acute malnutrition admitted for treatment</td>
<td>Total</td>
<td>-</td>
<td>35,400^30</td>
<td>8,107</td>
<td>▲ 23%</td>
</tr>
<tr>
<td><strong>Child protection, GBViE and PSEA</strong></td>
<td>Children, adolescents and caregivers accessing community-based mental health and psychosocial support</td>
<td>Total</td>
<td>-</td>
<td>160,000</td>
<td>18,435</td>
<td>▲ 12%</td>
</tr>
<tr>
<td></td>
<td>Women, girls and boys accessing gender-based violence risk mitigation, prevention and/or response interventions</td>
<td>Total</td>
<td>-</td>
<td>65,000</td>
<td>17,339</td>
<td>▲ 27%</td>
</tr>
<tr>
<td></td>
<td>People with safe and accessible channels to report sexual exploitation and abuse by personnel who provide assistance to affected populations</td>
<td>Total</td>
<td>-</td>
<td>150,000</td>
<td>146,565^31</td>
<td>▲ 98%</td>
</tr>
<tr>
<td></td>
<td>Unaccompanied and separated children provided with alternative care and/or reunified</td>
<td>Total</td>
<td>-</td>
<td>1,000</td>
<td>38</td>
<td>▲ 4%</td>
</tr>
<tr>
<td><strong>Education</strong></td>
<td>Children benefitting from balanced school feeding programmes</td>
<td>Total</td>
<td>-</td>
<td>100,000^32</td>
<td>8,897^33</td>
<td>▲ 9%</td>
</tr>
<tr>
<td></td>
<td>Children accessing formal or non-formal education, including early learning</td>
<td>Total</td>
<td>-</td>
<td>250,000^34</td>
<td>3,279^35</td>
<td>▲ 1%</td>
</tr>
<tr>
<td></td>
<td>Children receiving individual learning materials</td>
<td>Total</td>
<td>-</td>
<td>377,000</td>
<td>8,056^36</td>
<td>▲ 2%</td>
</tr>
<tr>
<td><strong>Water, sanitation and hygiene</strong></td>
<td>People accessing a sufficient quantity and quality of water for drinking and domestic needs</td>
<td>Total</td>
<td>-</td>
<td>2.3 million^37</td>
<td>330,045</td>
<td>▲ 14%</td>
</tr>
<tr>
<td></td>
<td>Children using safe and appropriate WASH facilities and hygiene services in learning facilities and safe spaces</td>
<td>Total</td>
<td>-</td>
<td>250,000^38</td>
<td>41,480</td>
<td>▲ 17%</td>
</tr>
<tr>
<td></td>
<td>People reached with critical WASH supplies</td>
<td>Total</td>
<td>-</td>
<td>500,000</td>
<td>64,445^39</td>
<td>▲ 13%</td>
</tr>
<tr>
<td><strong>Cross-sectoral (HCT, SBC, RCCE and AAP)</strong></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>People reached through messaging on prevention and access to services</td>
<td>Total</td>
<td>-</td>
<td>10 million</td>
<td>2.5 million</td>
<td>+25%</td>
<td></td>
</tr>
<tr>
<td>People who participate in engagement actions</td>
<td>Total</td>
<td>-</td>
<td>130,000</td>
<td>233,305</td>
<td>+179%</td>
<td></td>
</tr>
<tr>
<td>People sharing their concerns and asking questions through established feedback mechanisms</td>
<td>Total</td>
<td>-</td>
<td>229,000</td>
<td>13,384</td>
<td>+6%</td>
<td></td>
</tr>
</tbody>
</table>

*Progress in the reporting period 1 January to 30 June 2023*
## ANNEX B — FUNDING STATUS

### Consolidated funding by sector

<table>
<thead>
<tr>
<th>Sector</th>
<th>Requirements</th>
<th>Humanitarian resources received in 2023</th>
<th>Other resources used in 2023</th>
<th>Resources available from 2022 (carry over)</th>
<th>Funding gap (US$)</th>
<th>Funding gap (%)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Health</td>
<td>57,294,000</td>
<td>1,571,735</td>
<td>1,989,700</td>
<td>6,154,244</td>
<td>47,578,321</td>
<td>83%</td>
</tr>
<tr>
<td>Nutrition</td>
<td>31,732,000</td>
<td>568,049</td>
<td>-</td>
<td>15,385,351</td>
<td>15,778,600</td>
<td>50%</td>
</tr>
<tr>
<td>Child protection, GBVIE and PSEA</td>
<td>22,828,000</td>
<td>1,092,394</td>
<td>463,522</td>
<td>10,185,287</td>
<td>11,086,797</td>
<td>49%</td>
</tr>
<tr>
<td>Education</td>
<td>44,871,000</td>
<td>3,911,716</td>
<td>352,276</td>
<td>12,307,901</td>
<td>28,299,107</td>
<td>63%</td>
</tr>
<tr>
<td>Water, sanitation and hygiene</td>
<td>62,429,000</td>
<td>2,162,105</td>
<td>157,556</td>
<td>14,556,091</td>
<td>45,553,248</td>
<td>73%</td>
</tr>
<tr>
<td>Cross-sectoral (HCT, SBC, RCCE and AAP)</td>
<td>4,220,000</td>
<td>78,138</td>
<td>48,245</td>
<td>525,570</td>
<td>3,568,047</td>
<td>85%</td>
</tr>
<tr>
<td><strong>Total</strong></td>
<td><strong>223,374,000</strong></td>
<td><strong>9,384,137</strong></td>
<td><strong>3,011,299</strong></td>
<td><strong>59,114,444</strong></td>
<td><strong>151,864,120</strong></td>
<td><strong>68%</strong></td>
</tr>
</tbody>
</table>

*repurposed other resources with agreement from donors

---

**Who to contact for further information:**

- **Abubacar Sultan**
  - Representative
  - T +58 424 237 1027
  - asultan@unicef.org

- **Jose Ramon Espinoza**
  - Deputy Representative Programmes
  - T +58 424 271 3296
  - jespinoza@unicef.org

- **Veronica Argudo**
  - Resource Mobilization Specialist
  - T +58 424 275 4973
  - veargudo@unicef.org
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 personnel at various levels; social mobilization and communication; and cold chain system strengthening.

Delays are being experienced in data reporting, and UNICEF is continuing to follow up to overcome this challenge for the next reporting period.


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

ENDNOTES


4. UN Resident Coordinator Office, Marco de Coordinación de las Naciones Unidas para el Desarrollo Sostenible con la República Bolivariana de Venezuela (2023-2026) (October 2022), available at: venezuela.un.org/vz/202319-marcodo-cooperac%C3%B3n-de-las-naciones-unidas-para-el-desarrollo-sostenible-2023-2026


7. Centro de Documentación y Análisis Social de la Federación Venezolana de Maestros (CENDAS-FVM), Canasta Alimentaria Familiar Junio 2023 (July 2023), available at: https://twitter.com/CENDASFVmin/status/1682621229042114561/photo/1


13. Apure, Bolivar, Capital District, Miranda and Portuguesa


15. Miranda, Distrito Capital, La Guaira, Merida, Zulia and Bolivar

16. BCG, Hepatitis-B pediatric, Pentavalent and Tetanus-Diphtheria

17. The Capital District and the states of Anzoátegui, Carabobo, Cojedes, Falcón, Guárico, Miranda, Monagas, Portuguesa and Zulia.

18. The Capital District and the states of Carabobo, Miranda, Portuguesa and Zulia.

19. Trujillo, Yaraçuy, Delta Amacuro, Aragua, La Guaira, and Miranda, and the Capital District

20. Amazonas, Apure, Bolivar, Capital District, Carabobo, Delta Amacuro, Falcón, Sucre, and Zulia

21. Anzoátegui, Bolivar, Zulia, Delta Amacuro, and Amazonas

22. The Capital District and Bolivar, Sucre, Miranda, Amazonas, Falcón, Zulia and Delta Amacuro states.

23. The Capital District and Bolivar, Monagas, Sucre, Anzoátegui, Delta Amacuro, Miranda, La Guaira, Tachira, Apure, Amazonas, Zulia and Falcon states.

24. “No es normal y no está bien-Esther”, available at: https://www.youtube.com/watch?v=K9BYUJURYy

25. 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.

26. As of reporting period, MoH data has not yet been reported.

27. This indicator refers to children and adolescents living with HIV and those exposed to HIV.

28. From January to June 2023, a total of 43,875 tests have been distributed and 23,768 pregnant women have been reported as tested for HIV during prenatal consultations. Delays are being experienced in data reporting, and UNICEF is continuing to follow up to overcome this challenge for the next reporting period.

29. National Nutrition Institute data being processed and will be included in next report.

30. This indicator includes 5,370 children affected by severe wasting and 30,030 children affected by moderate wasting.

31. Aligned with UNICEF global standards, specific channels to report sexual exploitation and abuse by aid workers have been included in all interventions since the beginning of 2022. UNICEF has also increased the efforts to disseminate information at community levels on PSEA and on the existing reporting channels. All UNICEF partners have been trained in PSEA and are currently raising awareness on the existing reporting mechanisms, including the UNICEF supported reporting line (or contact center – línea de contacto/ línea de reporte in Spanish). All of these factors contributed to increase the number of people that have access to a safe and accessible SEAR reporting channel.

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. Under the new CPD 2023-2026, school feeding has not been prioritized, thus for the first semester of the year, UNICEF has accelerated efforts to discontinue the school feeding programme, while maintaining support to other sector interventions in schools, including WASH. UNICEF will not continue to report on this indicator during the second semester of the year.

34. 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.

35. The complexity of working with this population requires advocacy and technical work with educational authorities, community authorities, and implementing partners for the identification and placement of out-of-school children.

36. The delivery of learning materials is prioritized for the second semester of the year, aligned with the beginning of the school year in Venezuela (October-December).

37. 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, available at: https://www.unicef.org/executiveboard/media/14636/file/2023-PL7-Venezuela_CPDN-ENG.pdf

38. 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.

39. These results were low for the first semester of the year, as UNICEF is shifting its hygiene promotion activities to include new implementation strategies that are more related to “nexus” programming, such as CLTS (“SAHTOSO”), HWTS and “WASH’Em”.

40. The population targeted is higher than the total number of people/children to be reached because the target includes mass media outreach. This indicator has been met and surpassed due to the effectiveness of social mobilization campaigns, particularly during the World Water Day.

41. 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.

42. 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.