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Reporting Period: 11 June 2020 –22 July 2020*

Latin America and the Caribbean

COVID-19 Response Progress Report No. 3



Highlights

- By 31 August, the Latin America and the Caribbean (LAC) region, the COVID-19 global epicentre, surpassed seven million COVID-19 confirmed cases and over 276,000 deaths. Brazil had more than half of these cases (3.9 million) while Peru, Mexico and Colombia each exceeded 600,000 confirmed cases. By 31 August, Brazil, Peru, Colombia, Mexico and Argentina were among the ten countries with the highest numbers of confirmed cases globally.^a The pandemic is still growing fast in parts of the region. The number of cases doubled from three million to six million in just over a month. Four countries in South America and two in Central America had some of the highest three-day rolling average of new cases per million in the world (in the same category as the United States and Spain).^b
- Despite prevention and containment measures that most countries implemented in the first months of the outbreak, many countries are facing severe challenges trying to gradually reopen their economies to mitigate further socioeconomic impacts, while the virus continues to spread. The risk of political instability and civil unrest has increased due to the prolonged period of strict prevention measures and loss of livelihoods. With the region's GDP expected to contract 5.3 per cent in 2020 and unemployment on the rise, children are among the most affected by the socioeconomic effects of COVID-19.^c
- Schools remain closed in most countries of the region, impacting an estimated 138 million children and adolescents. Nicaragua and Uruguay have their schools open, while in Anguilla, Brazil, Chile and Haiti, schools are partially open. Where schools are still closed, authorities are preparing for the safe reopening. At regional and country level, UNICEF is supporting governments and partners on this endeavour.
- Across the region, 24 UNICEF Country Offices continue delivering multi-sectoral response to the needs created by the pandemic. Over 314 million people have been reached with information on prevention and access to services, particularly critical as containment measures start to soften. More than 267,000 health workers have received protective equipment and 4.7 million people have received WASH supplies and services. Psychosocial support services, provided not only face-to-face but also through remote channels, have benefited over 3.1 million children and caregivers.

Situation in Numbers

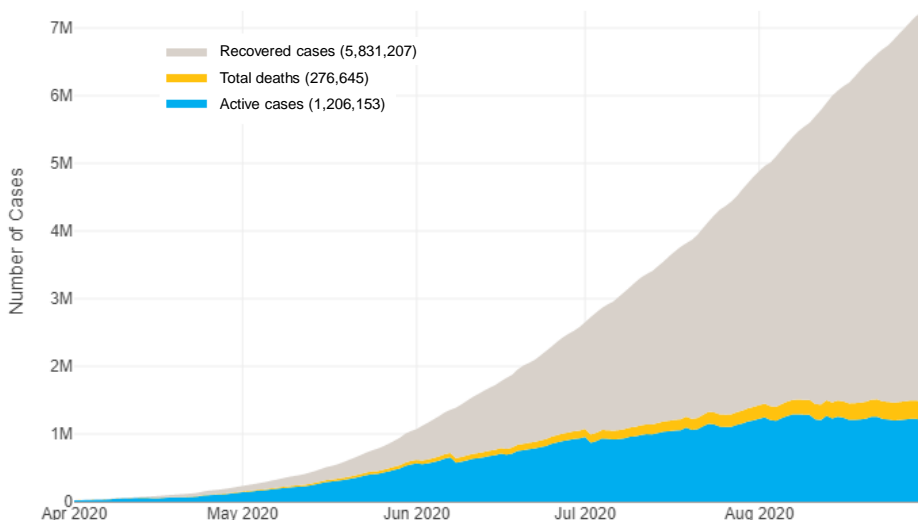
7,314,005
Confirmed COVID-19 cases
(31 August 2020, CSSE Johns Hopkins University)

276,645
COVID-19 deaths
(31 August 2020, CSSE Johns Hopkins University)

138 million
Children out of school due to school closure
(August 2020, UNESCO)

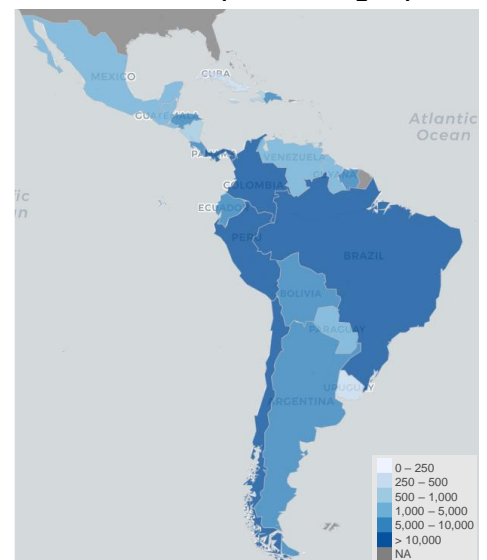
15.6 million
Additional children pushed into monetary poverty
(June 2020, estimated by UNICEF)

Active cases, recovered cases and deaths due to COVID-19 in LAC (as of 31 August)



Source: Coronavirus COVID-19, Center for Systems Science and Engineering (CSSE) at Johns Hopkins University, 31 August 2020.

Reported cases of COVID-19 per million inhabitants (as of 31 August)



Source: Coronavirus COVID-19, Center for Systems Science and Engineering (CSSE) at Johns Hopkins University, 31 August 2020.

*Situation figures as of 31 August 2020, programme results as of 22 July, unless otherwise stated.

a. Coronavirus COVID-19, Center for Systems Science and Engineering (CSSE) at Johns Hopkins University, 31 August 2020.

b. Incl. Argentina, Bolivia, Brazil, Colombia, Costa Rica, Panama, Peru, Suriname. Daily confirmed COVID-19 cases per million, 3-day rolling average, 31 August 2020. Our World in Data, based on ECDC, <<https://bit.ly/32i0o32>>.

c. UNICEF, 'Protección social y respuesta al COVID-19 en América Latina y el Caribe', April 2020.

Funding Overview and Partnership

In line with the July COVID-19 Global Humanitarian Response Plan (GHRP) update,ⁱ UNICEF revised the Humanitarian Action for Children (HAC) Global appeal requirements.ⁱⁱ Under the revised HAC, the funding needs for the response in LAC countries have increased to US\$177.8 million, including increases in the Bolivia, Brazil, Colombia, Guyana, Mexico and Nicaragua requirements to better reflect the needs in the field.

By July 2020, UNICEF LAC had received US\$64 million, leaving a 65 per cent funding gap. New contributions during the reporting period included funds from ECHO, Germany, Global Partnership for Education (GPE), Malta, the World Bank and USAID/OFDA. Additional private contributions, including in-kind support, were raised through the United Kingdom Committee for UNICEF and the US Fund for UNICEF. Despite the valuable support from public and private partners, for most of Country Offices (COs) resources received against the HAC have funded less than 50 per cent of their appeals. Against this backdrop, COs have been bound to utilize regular resources and repurpose other resources to be able to sustain the response.

Ongoing in-country fundraising efforts remain a lifeline to ensure interventions in countries such as Argentina, Brazil, Chile and Dominican Republic.

Humanitarian Leadership, Coordination and Strategy

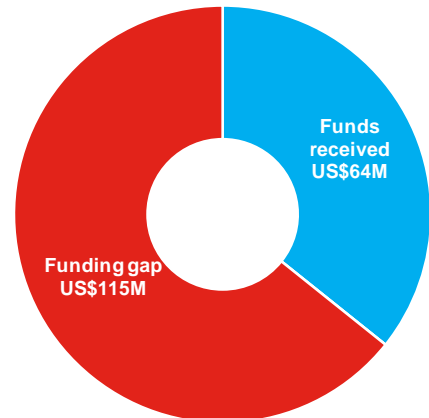
Guided by the Core Commitments for Children (CCCs), UNICEF's response strategy in LAC is aligned with the OCHA-led COVID-19 GHRP and with the WHO-led Strategic Preparedness and Response Plan. At regional and CO level, UNICEF is focused on ensuring that adequate and robust preparedness and response measures, that are gender-sensitive as well as innovative, are in place throughout countries in the region; in coordination with PAHO/WHO and Government counterparts, as well as NGOs and UN partners. UNICEF's response strategy for LAC is grounded in the Country Response Plans prepared by UNICEF COs, and is adjusted over time, in line with the evolution of the epidemic.

UNICEF LAC Appeal 2020

(under the Global COVID-19 HAC)

US\$177.8 million

Funding Status (in US\$)



*'Funds received' includes only funds received in 2020 against the Global COVID-19 HAC, by July 2020. 'Funding gap' is the sum of all COs' funding gap amounts.

UNICEF priority areas of engagement

Support sectoral and interagency coordination at country and regional level.

Limit human-to-human transmission and protect individuals from exposure to COVID-19 by providing guidance on engaging on risk communication and community engagement (RCCE), to inform decision-making related to personal risk, and mitigate rumours and xenophobia.

Infection prevention and control (IPC) in health care facilities, schools, early childhood development (ECD) centres and communities through health, water, sanitation and hygiene (WASH), RCCE and Education programmes.

Minimize morbidity and mortality due to COVID-19 by working with both PAHO and national governments by supporting procurement of supplies, equipment and capacity building efforts for appropriate case management, with a focus on children and pregnant and lactating women nutrition care, and mental health and psychosocial support (MHPSS).

Advocate for systematic collection and analysis of age and sex disaggregated data, as appropriate.

Continuity of safe delivery of essential health and other social services, while advocating and providing support for strengthening of social protection services. This also entails ensuring the continuity of key services to promote child and adolescent wellbeing, including the provision of mental health and psychosocial support services.

Data collection, Humanitarian Performance Monitoring (HPM), monitoring and evaluation, and analysis of the socio-economic impacts of the outbreak, to be able to advocate for and support mitigation measures.

At regional level, the Risk Emergency Disaster Working Group for Latin America and the Caribbean (REDLAC), chaired by OCHA, is the main inter-agency coordination mechanism, with WHO/PAHO playing a key advisory role. Eleven regional sectoral working groups have been activated to support sectorial guidelines and coordinated support to countries. UNICEF participates in eight of these groups, leading in WASH, Education (with Save the Children), Nutrition as well as in Child Protection (Area of Responsibility). The Regional WASH Sector Group together with the Global WASH Cluster (GWC) offered Accountability to Affected Population webinars in Spanish and English, a 'Market-based Programming in WASH' webinar together with CashCAP and the GWC, and a webinar on Services by Water Operators and Utilities with presentations from the Peru Ministry of Housing and Sanitation and Sanitation and Water For All. To enhance monitoring and analysis of the WASH sector in LAC, a monitoring framework was developed and presented to countries, REDLAC and the Platform for Refugees and Migrants from Venezuela (R4V) coordination teams, and is currently being piloted in Paraguay, Honduras and Brazil. In light of the hurricane season, UNICEF as co-lead of the Regional WASH LAC Group has established regular calls with Caribbean WASH organizations and associations for preparedness and response.

At country level, the COVID-19 response is coordinated through the pre-established inter-agency coordination mechanisms led by the RC/HCs and OCHA.ⁱⁱⁱ In addition, across 17 countries, specific COVID-19 issues related to the response to the Venezuela migration crisis are also addressed in the country/sub-regional chapters of the R4V.^{iv}

The July revision of the COVID-19 GHRP considers four countries from LAC given their pre-existing humanitarian needs an inter-agency humanitarian response plans: Colombia, Ecuador, Haiti and Venezuela; while 15 additional countries^v - in South America, parts of the Caribbean and Central America - are included as part of the Regional Refugee and Migration Response Plan (RMRP) for migrants and refugees from Venezuela. Nevertheless, needs are critical in some of these 15 countries as well as in other countries outside of this scope, not only for Venezuelan migrants but for the overall population, hence UNICEF's HAC comprises the whole region.

Summary Analysis of Programme Response

Risk communication and community engagement (RCCE)

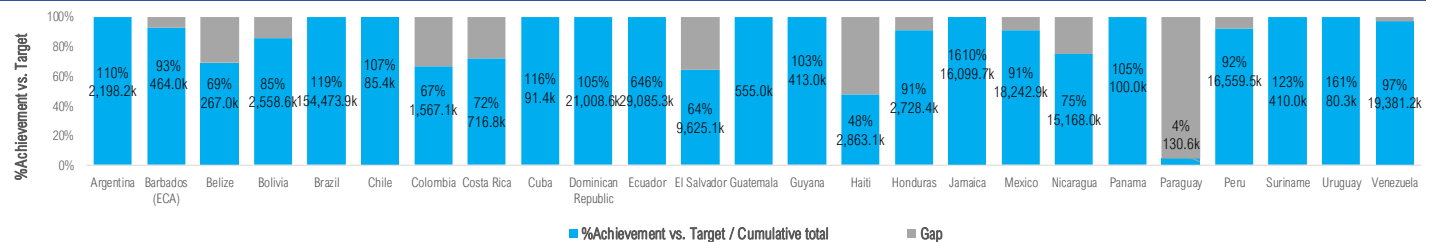
Through UNICEF-supported activities, over 314 million people have been reached with information on COVID-19 prevention and access to services across 36 countries and territories through social media and digital channels, and traditional means such as TV, radio spots and printed materials. Moreover, 21 COs have promoted participation of 6.7 million people in COVID-19 engagement activities like data collection efforts or interactive social media initiatives. Through feedback mechanisms supported by UNICEF, like U-Report, nearly 549,000 people have shared concerns about access to or quality of support services. UNICEF continues promoting the use of mobile communication and data collection platforms such as U-Report and Internet of Good Things to support evidence-based response.

Recent initiatives at country level have achieved outstanding results reaching indigenous communities and amplifying the voices of children. In Mexico, with partners, UNICEF translated risk communication and behavioural change messages into indigenous languages reaching an estimated population of 1.8 million people (see text box). In Guyana and Suriname, in partnership with ArtBlok, UNICEF promoted an awareness initiative by children and for children through art. Participants, assisted by their parents, presenting their artworks through videos as they would show them to their classmates. The [compilation of videos](#) was broadcasted by the government TV station and the Youth TV Journal for over a month, reaching over 160,000 viewers. Throughout the region, COs have produced nearly 700 content products, including web notes, social media messages, special reports and a significant number of communication products that contributed to the achievement of outstanding results such as having reached nearly seven million followers on all social networks.

During the reporting period, LACRO carried out a U-Report survey on gender and violence, involving nearly 4,000 adolescents and young people aged 13-29, from Argentina, Bolivia, Honduras, Guatemala and México. Among the main findings, participants noted the greater participation of women in household tasks (57 per cent women vs 35 per cent men), the increase of calls to domestic violence hotlines, as well as the increased caregiving burdens on women and girls (more details in the Child Protection section).

In terms of capacity building, LACRO conducted the first regional survey on Accountability to Affected Populations (AAP) aimed at strengthening and scaling up people-centred response at country level. Among the main findings, 51 per cent of the participants said that social media monitoring platforms, focus group discussions with communities, perception /satisfaction surveys and U-Report are the main methods used to engage with, receive feedback and respond to at-risk and affected populations in the field.

314,872,992 People reached through messaging on COVID-19 prevention and access to services (in 25 countries)*



(* Cumulative results as of 22 July 2020. Targets set to be achieved by the end of December 2020. Targets may be revised in line with changes in response plans. Bolivia, Brazil, Chile, Colombia, Cuba, Ecuador, Nicaragua and Venezuela targets have been revised.



Mexico: Reaching the most vulnerable through radio messages in indigenous languages



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Communication for behavioural change plays a fundamental role, not only in the dissemination of messages to promote COVID-19 prevention measures, but also in delivering messages that mitigate some of the secondary effects derived from the confinement and closure of schools. In Mexico, official messages for behavioural change have been widely disseminated in Spanish and some indigenous languages, while many monolingual indigenous communities, speaking other languages, were not being reached.

With the Center for Anthropological Research and Studies (CIESAS), UNICEF translated 22 risk communication and behavioural change messages into 42 indigenous languages encouraging hygiene practices, psychosocial support for managing emotions, prevention of malnutrition, prevention of domestic violence, and emotional support to ensure continuity of education. The project engaged 43 translators and 25 indigenous girls, boys and adolescents, who also recorded messages in their languages. A total of 45 indigenous and community radio stations have joined this effort supporting the dissemination of messages across 15 states, reaching an estimated population of 1.8 million people.

"When I recorded the message, I liked saying it and transmitting it because some children do not know what to do when they are locked up at home, sometimes they give us homework, but after doing all the homework we say to ourselves: Now what shall we do? We cannot leave our house. When I recorded the messages I was very happy because the children heard it, I got a bit nervous but what I liked the most was that they disseminated it the next day on the radio and I did it in Mixe, which is the language that has been spoken here for a long time", says Xuu'kx Xapaa, 8 year old girl from the Mixe community, in Santa Maria Tlailuitpec. More information: <https://uni.cf/2PP0auD>

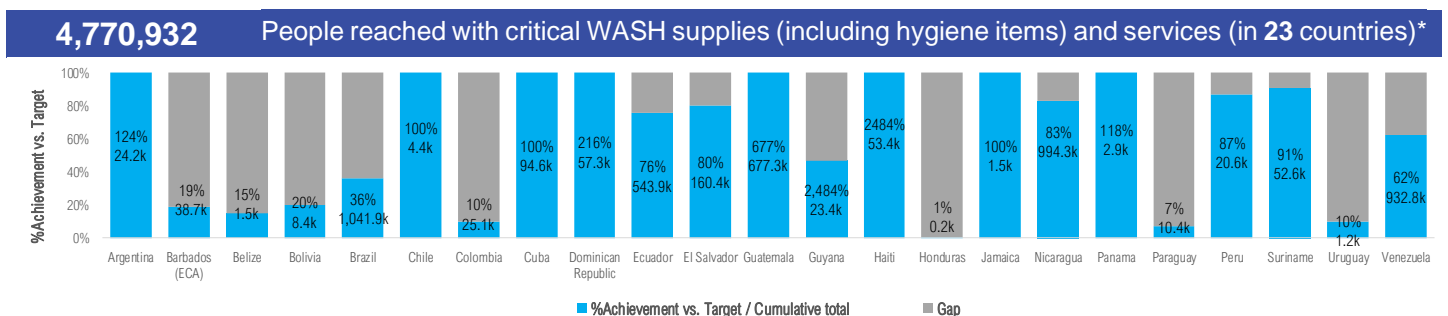
Provision of critical medical and water, sanitation and hygiene (WASH) supplies and improving infection and prevention control (IPC)

Water, sanitation and hygiene (WASH)

In 23 countries, over 4.7 million people received critical WASH supplies and services, with almost one million of them reached in Nicaragua - where the work is delivered in close collaboration with the ministries of health, education, and family - including distribution of supplies and key prevention messages - reaching adolescents, children and youth in child protection institutions and centres for children with disabilities. In Colombia, WASH services are also being delivered and improved across the country, including in child protection centres and for indigenous populations. The Brazil WASH programme is scaling up considerably, and reached over one million people with hygiene kits, with six WASH staff deployed to upscale and implement WASH programmes across the country.

In Ecuador, the WASH and Education clusters have established a joint sub-group for WASH in schools and, with the respective ministries, conducted a national “WASH in schools” assessment (covering over 16,000 schools) based on the Joint Monitoring Programme (JMP)^{vi} core questions and indicators for monitoring WASH-related SDGs in schools,^{vii} with consideration to children with special needs and gender. A group of experts from the WASH cluster is currently providing technical assistance to the ministry of education (MoE) to estimate the total cost of covering the gaps of access to WASH in schools nationally, considering alternative technologies, quality and sustainability of services. UNICEF and partners are also designing, upon request from the MoE, a national WASH in schools training that will be mandatory for all teachers at national level. Moreover, UNICEF Ecuador and the MoE presented this work to Paraguay authorities for its potential replication.

At regional level, UNICEF is leading an agreement with private partner ORBIA, installing handwashing facilities¹ in public spaces and schools in five LAC countries plus India and South Africa. Although WASH supplies and services represent 40 per cent of the COVID-19 Response Plans budgets in LAC, the funding gap remains a key challenge for the sector. Also of concern are the inclusion of WASH in the school reopening plans, the gaps in the region in terms of WASH coverage in schools, and the lack of long term and sustainable approaches such as the use of soap in schools. UNICEF LACRO is working on a market-shaping study for wall-mounted soap in schools that has generated interest from key potential donors.



(*) Cumulative results as of 22 July 2020. Targets set to be achieved by the end of December 2020. Other countries will be included in future reports once updated information is available. Targets may be revised in line with changes in response plans. Belize, Bolivia, Brazil, Colombia, Cuba, Dominican Republic, Panama and Venezuela targets have been revised.



Venezuela: Ensuring access to safe water, key to prevent COVID-19 spread



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Since the beginning of the outbreak, UNICEF’s WASH response in Venezuela has focused on: supporting efforts to prevent further spread of the virus - at community level and in health care facilities, increasing access to safe water and sanitation, distributing Personal Protective Equipment (PPE) and hygiene and cleaning products, and enabling protective behaviours and building IPC capacities in communities and institutions.

Since hand washing is one of the most important measures to prevent COVID-19, access to safe water is a priority for UNICEF’s work in Venezuela.

In the most vulnerable areas of the country, UNICEF works with partners and authorities to strengthen the WASH response, not only ensuring the availability of soap and water, but also supporting the rehabilitation of pumping systems and plants that supply water to the population. Through this work, UNICEF has been able to improve the quality and quantity of water access for over 1.4 million people through the rehabilitation of water supply systems and by providing water-trucking in targeted communities.

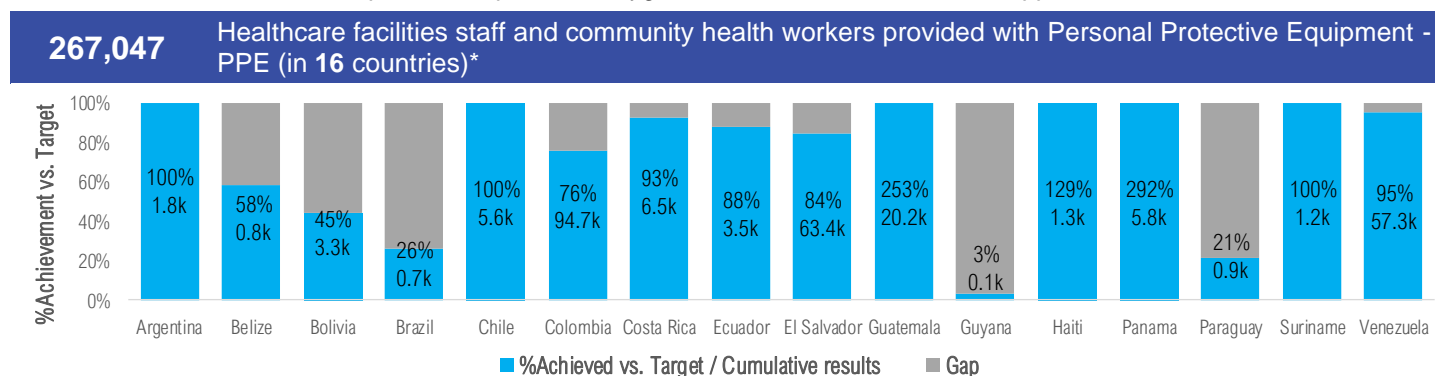
More Information: [UNICEF Venezuela SitReps; https://uni.cf/2Y7k34w](https://uni.cf/2Y7k34w).

Improving infection and prevention control (IPC)

A total of six COs in the region have supported the training of nearly 6,000 health and community workers on IPC topics. In Haiti, UNICEF and partners organized capacity building activities for community health workers with strong focus in community surveillance. UNICEF has procured and provided PPE for over 267,000 priority health workers in health facilities and communities in 16 countries across the region. For instance, in Nicaragua, UNICEF provided 200,000 KF94 face masks for frontline health workers in dedicated COVID-19 hospitals. In Brazil, Ecuador and Colombia, UNICEF supported capacity building in PPE and IPC for health staff working with refugees and migrants. In Brazil, UNICEF is working to support community health workers with the installation of sanitary barriers and isolation areas in the indigenous territories of Roraima.


Furthermore, Bolivia and Argentina COs are procuring COVID-19 diagnostic tests at the request of national health authorities. This aims to improve detection of infection particularly among pregnant women and children. In Colombia and Peru, UNICEF supports primary health care among vulnerable groups through innovative efforts such as telemedicine and capacity building through digital platforms.

In Peru, lifesaving equipment such as oxygen concentrators and medical supplies were procured for health facilities in the Amazon area, to support the management of severe COVID-19 infection in remote and underserved rural areas. UNICEF COs in El Salvador and the Dominican Republic also procured oxygen concentrators and medical supplies for the ministries of health.



(* Including countries reporting cumulative results as of 10 June 2020. Targets set to be achieved by the end of December 2020. Other countries will be included in future reports once updated information is available. Targets may be revised in line with changes in response plans. Argentina, Bolivia, Brazil, Colombia, Honduras and Venezuela targets have been revised.

Peru: Getting oxygen to the heart of the Amazon as the pandemic reaches the most remote parts of the country



While COVID-19 affects everyone, not everyone is affected in the same way. In Peru, one of the pandemic's hotspots, indigenous communities have been hit particularly hard. In communities that have had historically limited investment in public services, many local health centres have just one health worker and minimal intensive care capacity. Though surrounded by forests, medical oxygen is in short supply.

To help indigenous communities cope with the crisis, UNICEF delivered 40 oxygen concentrators to Peruvian Ministry of Health for distribution to local health centres in Amazonas, Loreto and Ucayali regions. These are critical to treat patients with respiratory illnesses, including COVID-19. The equipment not only provides life-saving oxygen therapy, but also keeps patients closer to home. *“Now they’ll be able to treat mild and moderate cases in the same facility without having to transfer them to hospitals. By treating patients on site, we avoid separating them from their families”*, said Hugo Rázuri, UNICEF’s Health Specialist.

More information: <https://uni.cf/2Y3TGfB>; [Video](#).

Continuity of health and nutrition care for women and children

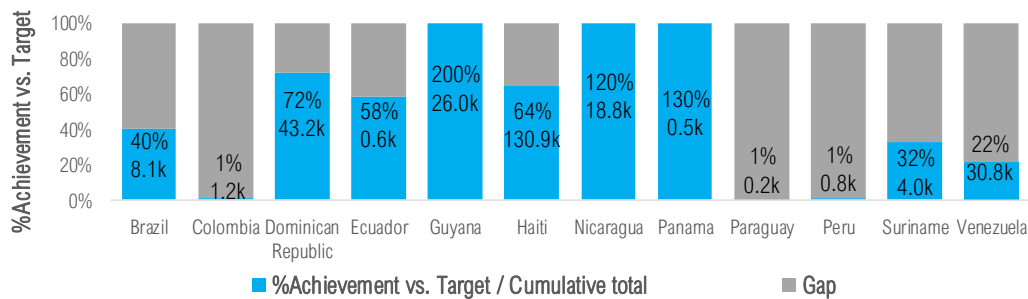
Aiming at ensuring the continuity of basic health services, UNICEF has trained 20,775 healthcare providers in six countries, and nearly 265,000 children and women in 12 countries have received essential health services in UNICEF supported facilities. In Bolivia, Venezuela, Guyana and Haiti, COs remained engaged in promoting and delivering key health services with a focus on maintaining routine immunization, including through strengthening the cold chain and increasing vaccination coverage. Colombia and Ecuador offices supported adapted service provision modalities like home based prenatal care and vaccination, telemedicine and telehealth.

Some COs are generating evidence through surveys. In Nicaragua, studies found that routine immunization has dropped 15 per cent. In Paraguay, UNICEF implemented a survey to gather perceptions on the prevention and impact of COVID-19 among families with children. El Salvador and Argentina conducted advocacy efforts with health authorities on the disruption of immunization services and the impact of the pandemic on children and women’s health.

Over 123,000 caregivers of children under two years old in ten countries have received messages on breastfeeding, infant and young child feeding or healthy diets through national communication campaigns. In Peru, UNICEF developed communication materials on health and nutrition for 1,000 indigenous families in the Ucayali region and provided technical support to the ministry of health to continue growth and development monitoring through telemonitoring in primary health care services. In Mexico, a communication campaign on breastfeeding, healthy diets and physical activity during COVID-19 reached about 14 million people through social media and radio. In addition, in coordination with national health authorities, FAO and WHO, UNICEF Mexico developed [12 recommendations to policymakers](#) on prevention of malnutrition among children.

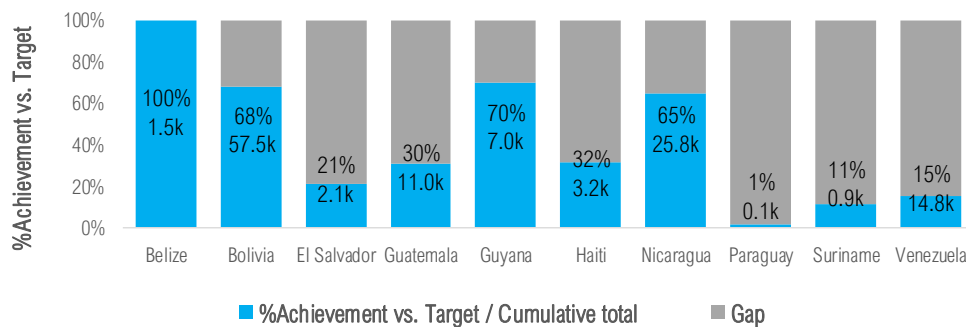
Venezuela and Haiti saw a decrease in admissions of malnourished children due to health service interruptions and mobility restrictions. Despite the challenges in Venezuela, UNICEF has provided support to reach more than 158,000 children aged 6 to 59 months for the prevention of acute malnutrition, including with micronutrient powders. In Haiti, UNICEF raises awareness on COVID-19 prevention measures and scale up the family Mid-upper arm circumference (MUAC) measurement approach to detect and refer malnutrition cases.

264,977 Children and women receiving essential healthcare in UNICEF-supported facilities (in 12 countries)*



(* Including countries reporting cumulative results as of 22 July 2020. Targets set to be achieved by the end of December 2020. Other countries will be included in future reports once updated information is available. Targets may be revised in line with changes in response plans. Brazil, Colombia, Dominican Republic, Ecuador and Peru targets have been revised.

123,744 Caregivers of children aged 0-23 months reached with messages aiming to protect breastfeeding, young child feeding or healthy diets in the context of COVID through national communication campaigns (in 10 countries)*



(* Including countries reporting cumulative results as of 22 July 2020. Targets set to be achieved by the end of December 2020. Other countries will be included in future reports once updated information is available. Targets may be revised in line with changes in response plans.

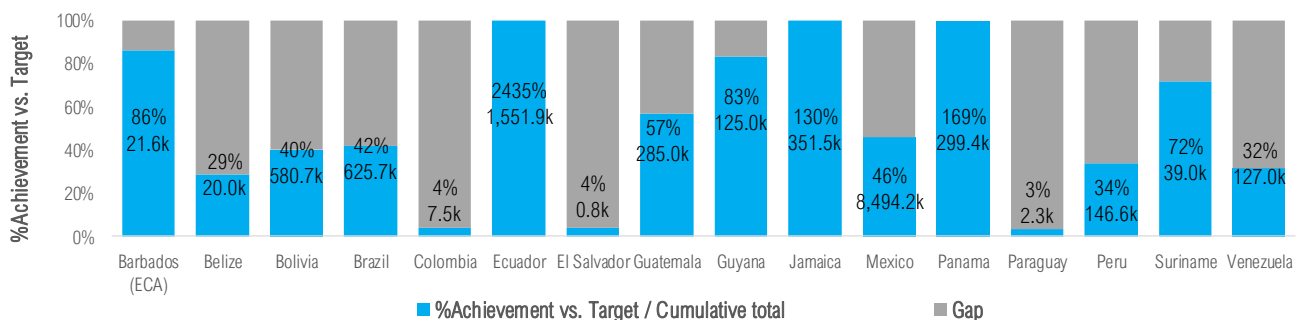
Access to continuous education, social protection, child protection and GBV services

Education

Since the start of the outbreak in the region, all 24 UNICEF COs have supported MoEs in their response to COVID-19 challenges. More than 12.6 million children have benefited from UNICEF's direct and indirect support to distance and home-based learning in 16 countries. In addition, over 16,000 schools have been supported in the implementation of safe school protocols (prevention and control). By the end of July, schools remained closed in most countries, Uruguay and other Caribbean countries and territories have started to reopen schools.

At regional level, efforts have focused in the process of developing two intersectoral guidance notes, one for national authorities and another for schools' administrators and directors, to ensure the safe reopening of schools. Each guidance note includes a checklist to support the reopening process, available both in English and Spanish. In addition, four videos with key information on the reopening of schools have been produced, and will be disseminated with captioning and sign language to make sure they are available to all children.^{viii}

12,678,122 Children supported with distance / home-based learning (in 16 countries)*



(* Including countries reporting cumulative results as of 22 July 2020. Targets set to be achieved by the end of December 2020. Other countries will be included in future reports once updated information is available. Targets may be revised in line with changes in response plans. Barbados/Eastern Caribbean Area (ECA), Brazil and Dominican Republic targets have been revised.



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In Bolivia, the pandemic has revealed structural problems in the educational system, exposing significant access gaps and the enormous risk that these gaps deepen even further.

To enhance teacher’s capacity to deliver virtual education to their students, under the framework of an existing partnership with Tigo Millicom – one of the leading telecommunications companies in Latin America - UNICEF Bolivia has joined efforts with Tigo Bolivia to provide teachers with trainings on digital skills. Contents include Internet safety, e-rights and how to reach every child, among others. By the end of July, nearly 8,000 teachers had completed the intermediate level of the digital skills training.

At least 512,000 children had been reached by these trained teachers and have benefited from better virtual education, including early learning (6 per cent), primary education (58 per cent) and secondary education (36 per cent). Upcoming courses will include advanced digital skills, psychosocial support and prevention of violence.

More information: <https://bit.ly/3kN4pVP>

Child Protection

Since the beginning of the response, over 3.1 million children, parents and primary caregivers in 22 countries have received community-based mental health and psychosocial support. In addition, with UNICEF support, appropriate alternative care arrangements have been provided for 6,300 children without parental or family care in 15 countries. In Uruguay, UNICEF supported authorities in strengthening protocols and guidelines to ensure continuity of family visits, at the extent possible, and for adapting sanitary guidelines in residential centres. In Colombia, UNICEF has advocated to ensure that migrant children have access to more flexible alternative care modalities.

At regional level, UNICEF continued providing timely technical assistance to COs and promoting knowledge-sharing and good practices, engaging regional partners. As part of these efforts, UNICEF held an exchange on interventions in alternative care, challenges and opportunities; and a Facebook live session on the prevention of domestic violence with nearly 30,000 reproductions throughout the region. In addition, LACRO contributed to the REDLAC [Inter-agency advocacy document on the protection risks associated with violence](#) in the framework of the pandemic, which has a multi-sector approach. Jointly with UNHCR, IOM, Mercosur Institute of Public Policies on Human Rights (IPPDH), OAS Inter-American Children’s Institute (IIN) and the Global Movement for Children of Latin America and Caribbean (MMI-LAC), UNICEF continues to promote a regional protocol for the transnational protection of migrant children in the framework of the Quito Process,^{ix} along with the elaboration and dissemination of a technical note to promote the regularization of migrant children during the pandemic to ensure their access to basic services and social programmes. In addition, UNICEF has developed information materials for Venezuelan migrant families, adapted to the COVID-19 context.

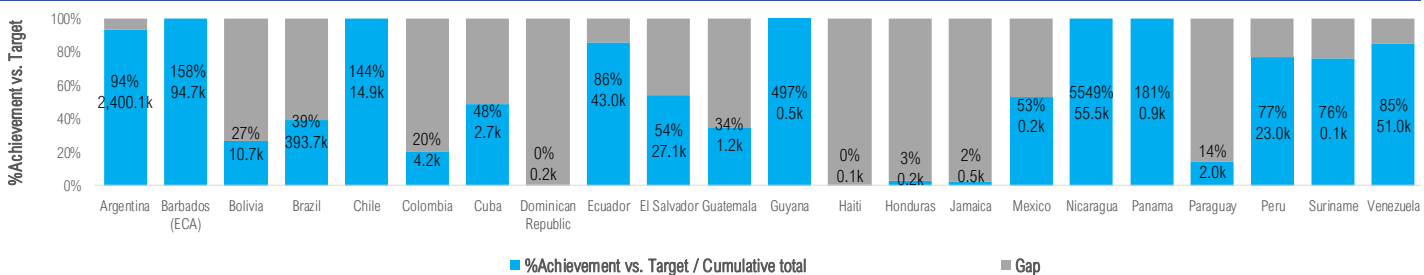
U-Report survey on gender and violence: Key findings

Some of the findings of the U-Report survey led by LACRO on gender and violence, with nearly 4,000 adolescents and young people from Argentina, Bolivia, Honduras, Guatemala and México, include:

- 57 per cent of women and girls spend more time on household chores during quarantine.
- 21 per cent of adolescents aged 13-17 report more home discussions during quarantine.
- When there is tension at home, 31 per cent of the young participants mentioned coping strategies such as generating spaces for family conversation.
- Women and adolescents perceive more violence when there is tension, 29 per cent of women and 31 per cent of adolescents mentioned loud arguments and shouting.
- 47 per cent consider that children and adolescents are the most affected by stress at home.
- 53 per cent consider that it is safer to ask for help by calling helplines.

Despite progress made in ensuring continuity of child protection services, some challenges remain, including funding resources for sustainability of new helplines supported by UNICEF, further promotion of good practices for supporting children in conflict with the law, effective responses to the increasing violence against children in the context of COVID-19, implementation of national and local guidelines for assisting stranded and returned migrant children, and the need for effective monitoring of the quality of remote psychosocial support and case management services.

3,126,254 Children, parents and primary caregivers provided with community-based mental health and psychosocial support (in 22 countries)*



(* Including countries reporting cumulative results as of 22 July 2020. Targets set to be achieved by the end of December 2020. Other countries will be included in future reports once updated information is available. Targets may be revised in line with changes in response plans. Cuba, Dominican Republic, Ecuador, El Salvador, Haiti, Mexico and Peru targets have been revised.



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playing does not only have a recreational purpose for children in this context, but also acts as a catalyst for emotions, relieves stress and allows these children, who have gone through many difficulties, to continue learning. By the end of July, 31 families had been assisted, including 47 children and adolescents, and the programme continues to advance in its implementation. UNICEF has distributed 25 cribs, 20 baby kits with clothing, hygiene and food supplies, beds and other basic supplies.

More Information: <https://uni.cf/2Y7pT5J>

The arrival of COVID-19 in Uruguay affected many migrant families. In the context of the health emergency, the vulnerability of migrant families deepened, and many lost their jobs and their main sources of income. In addition, recently arrived migrants have not been able to obtain their documentation or start their regularization process, complicating even further their integration into the labour market.

In this context, with IOM, UNICEF developed a programme to assist migrant families with children, a population that became even more vulnerable in the face of the pandemic. The work comprises three components: the incorporation of a psychologist specialized in childhood and adolescence to the IOM Migrant Assistance and Protection team; accommodation and food assistance for migrant families with children; and delivery of educational and recreational materials to protect children and adolescents. This last component responds to the fact that

Gender and Gender-based Violence (GBV)

Preventing, addressing and raising awareness about violence, exploitation and abuse of children and women, including GBV, remain at the core of UNICEF's COVID-19 response. Through UNICEF-supported actions in 13 countries, over 15,000 UNICEF personnel and partners have been trained on GBV risk mitigation and referrals for survivors. In countries like El Salvador, within the EU-UN Spotlight Initiative, via [Facebook Live session](#), UNICEF raised awareness around violence against women and girls (VAWG), including its roots in gender inequality, VAWG prevention and information on where to seek support. UNICEF Guyana conducted a Knowledge, Attitude and Practices (KAP) survey that enabled a more ample understanding of the gendered impacts of COVID-19, in addition to the main sources of information by sex and age. The findings of the survey will be used to develop targeted messaging.

At regional level, UNICEF continued supporting COs in the COVID-19 Response, guided by the Gender Equality CCCs:

- **End to Gender-Based Violence.** LACRO published Safety Planning Guidelines ([English/Spanish](#)) for women and adolescent girls in case of domestic violence. These guidelines can be adapted to local contexts. Within the framework of the R4V platform work, UNICEF joined forces with partner HIAS to develop a toolkit and training materials for remote GBV service delivery, focused on the needs of adolescent migrant girls.
- **Community Engagement with and for women and adolescent girls and boys.** LACRO promoted discussions between COs, RO and HQ on the complementarity of AAP and Gender Equality strategies, a key area for growth within the response strategies.
- **Quality assurance on Gender-responsive programming and intersectoral support.** LACRO has mapped COs response according to the three CCCs, identifying key areas for enhanced investment and strengthening, including: ensuring that gender and AAP strategies are complementary; strengthening collection, analysis and reporting of sex and age disaggregated data; and ensure balance between GBV prevention and service strengthening. In addition, UNICEF published guidelines for strengthening gender equality in the context of COVID-19 ([English/Spanish](#)).

Social Policy / Social Protection

At country level, UNICEF is supporting new or additional social assistance measures provided by governments to respond to the COVID-19 consequences, reaching 1.7 million of the most vulnerable households in eight countries, most of them in Guatemala where UNICEF supports a cash grant programme operated through the national social protection system.

At regional level, LACRO's work has continued focusing on three main workstreams: i) providing timely and sound technical assistance to COs, ii) developing a research agenda for a better understanding of the effects and responses to COVID-19, and iii) engaging in strategic representation with national counterparts and regional partners. LACRO has supported technically and financially Guatemala CO's efforts to design the cash grant programme, aiming at reaching 2.1 million vulnerable households. Likewise, LACRO and HQ supported the design of Colombia CO cash-based intervention (CBI), a parallel programme aligned to the national system, targeting 1,000 migrant children and their families. Additionally, the Peru CO CBI design is in progress, which will provide cash assistance to 400 migrant families with children.

As part of the COVID-19 research agenda, the Mexico CO conducted a [survey](#) to understand and analyse the socioeconomic effects of the pandemics in households with children. This study will be replicated by the Colombia CO. In addition, LACRO issued the [II Edition of the Technical Note on the social protection responses](#) by LAC countries to the emergency, which focused on social assistance and the adaptation of school feeding programmes.

UNICEF LACRO, with the Inter-American Dialogue and the Early Childhood Development Action Network (ECDAN), hosted a [webinar on social protection for early childhood in Latin America](#), featuring Peruvian Minister of Development and Social Inclusion, Mexico's Executive Director of the National System of the Protection of children and adolescents (SIPINNA), and Dominican Republic's deputy director of Plan Quisqueya Empieza Contigo (QEC) -a national social protection system for early childhood. The panellists acknowledged decreases in national budgets and emphasized the importance and protection of these services during the pandemic. Additionally, they agreed on the importance of strong leadership in development programmes.

Planning, monitoring and evaluation (PM&E), data collection, social science research for public health decision making

LACRO has continued providing technical support to COs on humanitarian performance monitoring, including alignment with guidelines, analysis of progress and constraints, identification of main bottlenecks for implementing and reporting activities.

While progress is observed across most areas, several COs have faced challenges for implementing certain activities, mainly due to insufficient funding while in some cases, COs are still in planning phase - particularly in the implementation of school protocols.

LACRO has led webinars on sectoral indicators in order to improve quality of reporting across COs, and specific support has been given to Haiti and Venezuela COs, two of the largest operations in the region, to increase and strengthen their monitoring capacity.

Supply and logistics

Aiming at supporting local and national response efforts, COs in LAC have forecasted the need for international sourcing of COVID-19 related supplies such as PPE, therapeutic treatments and diagnostics products for the following nine months. There has been an increased availability in PPE supplies together with reduced prices as UNICEF Supply Division has engaged with new suppliers.

To complement COs' local sourcing efforts, throughout August, UNICEF has managed to land offshore PPE, oxygen aid and other essential commodities in countries in the region in excess of \$6 million, with a confirmed additional pipeline of COVID-19 related commodities and other essential supplies, in excess of \$8 million that will be arriving in LAC countries over the coming months. UNICEF is working with suppliers and logistic companies in China to increase both the availability of supplies and the transportation.

As the situation continues evolving in the region, LACRO is considering, together with UNICEF Supply Division, the creation of a COVID-19 contingency stockpile in the UNICEF Panama Hub for the coming months.



Guyana: UNICEF provides critical COVID-19 prevention supplies to the most deprived and hotspots communities



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Providing critical WASH supplies has been a key part of UNICEF's response in Guyana with a focus on high-risk and the most deprived communities, with a gender lens. UNICEF has procured and distributed critical WASH supplies, including hygiene and COVID-19 prevention items, including soap, hand-sanitizer, masks, safe drinking water containers, disinfectant and cleaning equipment, in high risk communities and hot spots.

UNICEF has procured locally 1,200 UNICEF IPC WASH and Menstrual Hygiene Management kits, which were handed over to partner Guyana Water Inc (GWI) for distribution to Venezuelan migrant children/families and host community families, in communities hosting migrants in Region 1 (Mabaruma sub-District), Region 2, Region 4 and Region 7 (Bartica, Puruni, Goshen). In addition, 1,000 IPC locally procured WASH kits were handed over to the national agency coordinating the COVID-19 response and the Civil Defence Commission (CDC), for distribution in other hotspots communities.

UNICEF donated supplies including WASH items to support children who were diagnosed with COVID-19 and were in state isolation facilities. Other donations of WASH and PPE items were made to support children in residential care and for children in detention.

Furthermore, UNICEF Guyana has procured, through Supply Division, one metric ton of PPE items, to be handed over to the ministry of health, the Georgetown Mayor and City Council (including also locally-procured protective equipment for 150 front line staff), and the ministry of education (1,944 Face Masks).

Human Interest Stories and External Media

UNICEF LAC websites presence has grown significantly, compared to the same period in 2019. Pageviews increased more than 153 per cent, with more than 91,000 pageviews in June 2020. This growth is also seen in the long term compared to the first half of 2019, showing a prolonged demand for reliable information. Users in the LAC region are increasingly looking for UNICEF digital content on COVID-19, a rise of more than 76 per cent compared to the first half of 2019. The digital presence of UNICEF in the region is constantly increasing, reporting nearly seven million followers in COs and LACRO Twitter, Facebook, Instagram, LinkedIn, YouTube and TikTok channels.

Some of the most viewed contents are the Facebook Live sessions on protection issues. Two sessions, one on tips for dealing with lockdown and the other about online violence, reported more than 55,000 views and was aired simultaneously on more than 11 fan pages in the region.

By end of July, over 65 regional and national press releases were issued by COs and LACRO, focusing on the impact of the pandemic on children and adolescents, supplies delivery, violence against children - including online violence, education, nutrition and children's health - focusing on vaccination. Dozens of interviews and UNICEF mentions have been recorded in key international, regional and local media outlets, as O Globo, EFE, AFP, Infobae and VOA. On 12 June, World Day Against Child Labour, an Op-ed by UNICEF Representative in Brazil coordinated by RO, was published on El País for advocacy purposes.

During the reporting period, multimedia packages produced by LACRO included: Inclusive family art workshop "[A House with many Windows](#)", [Plan 12/Youth Engagement - Empathy](#), [UNICEF opinion poll](#), [inter-agency messages for social media on violence against women and children in the COVID-19 context](#), Youth and Climate Change - [We are HEY!](#) video message of hope in the midst of the COVID-19 pandemic, amplification of the [#ChildhoodChallenge](#) in LACRO channels, COVID-19 Facebook Live (Let's talk about digital security for children and adolescents, conversation with a digital security expert), [Plan 12: how adolescents in the region are re-imagining and building a better world?](#), [Plan 12: Strengthening gender equality in the context of COVID-19.](#)

Key links:

- **[Press release - ILO and UNICEF]:** [COVID-19 may push millions more children into child labour.](#)
- **[Interview VOA]:** #RefugeeDay Broadcast. [The challenges that refugee children face.](#) Interview with Monica Darer, Child Protection Specialist UNICEF LACRO.
- **[Human interest story - Peru]:** [Ariadna's story – “The designer”](#), 17-year-old Ariadna, Venezuelan migrant girl living in Peru.
- **[Photo Essay - Paraguay]:** [Thobias' story: A boy for whom inclusive education is very much a reality.](#)
- **[Video testimony - Panama]:** [“A Day before we arrived, I thought we were going to die”.](#)
- **[Press release/social media - Venezuela]:** [Third humanitarian aid shipment arrives in Venezuela to continue the fight against coronavirus and save lives – Press Release](#)
- **[Social media]:** [Weekly Updates: What UNICEF is doing in Latin America and the Caribbean for #COVID-19](#)
- **[Press release]:** [UNICEF's education response to the challenges during the pandemic also has its virtual space](#)
- **[Press release]:** [40 million children miss out on early education in critical pre-school year due to COVID-19](#)
- **[Article]:** [How parents can support their child through COVID-19 losses](#)

UNICEF Latin America and the Caribbean Regional Office: www.unicef.org/lac

UNICEF LAC Facebook: www.facebook.com/uniceflac

UNICEF Global Humanitarian Action for Children Appeal: <https://www.unicef.org/appeals/covid-2019.html>

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Annex A

Funding Status

CO	2020 Requirement (US\$)	Funds received (US\$)*	Funding gap (US\$)**	
			US\$	%
Argentina	7,300,000	1,423,609	5,876,391	80%
Belize	1,787,674	353,500	1,434,174	80%
Bolivia	6,000,000	2,388,891	3,611,109	60%
Brazil	12,001,714	10,244,794	1,756,920	15%
Chile	130,000	95,887	34,113	26%
Colombia	10,536,580	2,354,355	8,182,225	78%
Costa Rica	864,500	852,250	12,250	1%
Cuba	1,605,933	178,500	1,427,433	89%
Dominican Republic	1,610,000	2,370,340	-	-
Eastern Caribbean (ECA) ^x	9,281,240	799,600	8,481,640	91%
Ecuador	15,115,650	2,624,912	12,490,738	83%
El Salvador	2,500,000	1,398,940	1,101,060	44%
Guatemala	2,278,000	503,150	1,774,850	78%
Guyana / Suriname	4,500,000	3,969,900	530,100	12%
Haiti	51,713,000	15,644,131	36,068,869	70%
Honduras	600,001	127,640	472,361	79%
Jamaica	1,050,000	426,000	624,000	59%
Mexico	5,000,001	344,002	4,656,000	93%
Nicaragua	3,500,000	2,103,546	1,396,454	40%
Panama	1,500,000	312,500	1,187,500	79%
Paraguay	3,320,700	855,973	2,464,727	74%
Peru	3,520,000	1,261,690	2,258,310	64%
Uruguay	1,216,500	221,366	995,134	82%
Venezuela	26,828,520	12,022,988	14,805,532	55%
LACRO	4,055,550	939,036	3,116,514	77%
TOTAL	177,815,563	63,817,499	114,758,404	65%

* Funds received by the end of July 2020, against the Global COVID-19 HAC.

** 'Funding gap' is the sum of all COs' funding gap amounts.

Annex B

Summary of Selected Regional Programme Results (as of 22 July 2020)

Areas of response	Target (2020)	Total UNICEF results	% Target achieved	Change since last report
Risk Communication and Community Engagement				
Number of people reached on COVID19 through messaging on prevention and access to services	271,496,180	314,872,992	116%	118,765,353
Number of people engaged on COVID-19 through RCCE actions	12,528,714	6,732,190	54%	3,013,541
Number of people sharing their concerns and asking questions/clarifications for available support services to address their needs through established feedback mechanisms	1,614,119	548,755	34%	76,021
Critical medical and (WASH) supplies, IPC				
Number of people reached with critical WASH supplies (including hygiene items) and services	7,665,192	4,770,932	62%	2,393,186
Number of healthcare facilities staff and community health workers provided with Personal Protective Equipment (PPE)	317,634	267,047	84%	50,878
Continuity of health and nutrition care for women and children				
Number of children and women receiving essential healthcare, including prenatal, delivery and postnatal care, essential new-born care, immunization, treatment of childhood illnesses, HIV care and Gender-Based Violence (GBV) response care in UNICEF supported facilities.	1,192,665	264,977	22%	135,070
Number of primary caregivers of children aged 0-23 months reached with messages on breastfeeding	381,069	123,744	32%	30,680
Continuous education, social protection, child protection and GBV services				
Number of children supported with distance/home-based learning	38,930,527	12,678,122	33%	(8,006,046) ^{xi}
Number of schools implementing safe school protocols (COVID-19 prevention and control)	41,783	16,283	39%	5,053
Number of children without parental or family care provided with appropriate alternative care arrangements	9,530	6,300	66%	1,341
Number of children, parents and primary caregivers provided with community based mental health and psychosocial support	5,016,682	3,126,254	62%	2,506,064
Number of UNICEF personnel and partners that have completed training on GBV risk mitigation and referrals for survivors	2,418 ^{xii}	15,165	627%	14,392
Access to social protection services				
number of households benefitting from new or additional social assistance measures provided by governments to respond to COVID-19, with UNICEF support	2,297,703	1,683,814	73%	374,142

Endnotes

ⁱ OCHA, 'Global Humanitarian Response Plan: COVID-19 (April – December 2020) GHRP July Update', July 2020, <<https://reliefweb.int/report/world/global-humanitarian-response-plan-covid-19-april-december-2020-ghrp-july-update-enar>>.

ⁱⁱ UNICEF, 'Humanitarian Action for Children (HAC). Coronavirus (COVID-19) Global Response 2020', 22 July 2020, <<https://www.unicef.org/appeals/covid-2019.html>>.

ⁱⁱⁱ Including around pre-existing Humanitarian Response Plans (HRPs) and coordination structures in Colombia, Haiti and Venezuela. These HRPs have been adapted to incorporate the COVID-19 humanitarian response.

^{iv} The Regional Refugee and Migration Response Plan (RMRP) 2020 has been revised to identify/add actions contributing to the COVID-19 response, within the migration outflow response framework. The RMRP 2020 Review is available in the following link: <<https://r4v.info/en/documents/details/76210>>.

^v Argentina, Aruba, Brazil, the Plurinational State of Bolivia, Chile, Costa Rica, Curaçao, the Dominican Republic, Ecuador, Guyana, Mexico, Panama, Paraguay, Peru, Trinidad and Tobago and Uruguay.

^{vi} WHO/UNICEF Joint Monitoring Programme for Water Supply, Sanitation and Hygiene (JMP).

^{vii} Sustainable Development Goal (SDG) 6.1 target: By 2030, achieve universal and equitable access to safe and affordable drinking water for all. SDG 6.2 target: By 2030, achieve access to adequate and equitable sanitation and hygiene for all and end open defecation, paying special attention to the needs of women and girls and those in vulnerable situations.

^{viii} Guidance notes on reopening schools in the context of COVID-19 for ministries of education in Latin America and the Caribbean ([English](#) / [Spanish](#)); Guidance Notes on reopening schools in the context of COVID-19 for school administrators and principals in Latin America and the Caribbean ([English](#) / [Spanish](#)); Back-to-school videos with recommendations aimed at preschool, primary and secondary students, as well as teachers and parents ([YouTube playlist](#)); information repository ([English](#) / [Spanish](#)).

^{ix} The Quito Process is a state-led initiative to promote consensus and dialogue between countries receiving Venezuelan migrants and refugees in Latin America and the Caribbean.

^x Eastern Caribbean Area (ECA) office covers Anguilla, Antigua and Barbuda, Barbados, British Virgin Islands, Dominica, Grenada, Montserrat, St. Kitts and Nevis, Saint Lucia, St. Vincent and the Grenadines, Trinidad and Tobago, Turks and Caicos Islands.

^{xi} Reporting methodology under review.

^{xii} Targets under review.