Highlights

- On 22 November, UNICEF Venezuela received a charter flight carrying a total of 31 tonnes of health, PPE and vaccines supplies valued at US$ 3,148,000.

- In response to the floods in the northern regions of Zulia and Falcón states, UNICEF supported 2,527 families (12,636 people including 2,186 boys, 2,060 girls, 4,334 women and 4,056 men) with safe drinking water, WASH supplies, and vector control services.

- During November, 1,364 pregnant adolescents received preventive nutrition services and treatment for being underweight, and 328 received micronutrient supplementation.

- A total of 22,508 children between 2 and 14 years (11,549 girls and 10,959) and 1,602 pregnant and lactating women (PLW) have been reached with antiparasitic treatment and key messages in primary health care centres through the UNICEF-supported National Deworming Campaign.

- Following the commemoration of the ‘International Day on the Elimination of Violence against Women’ on 25 November, and the 16 days of activism against gender-based violence (GBV), UNICEF launched awareness activities with communities and on social media, with a reach of more than 22,600 interactions and around 1.5 million views.

- During November, the school feeding programme benefited 68,555 children (33,793 girls and 34,762 boys) in seven states reaching a total of 85,865 children since the beginning of the year.

Funding Overview and Partnerships

UNICEF continues its efforts to meet the health; water, sanitation and hygiene (WASH); education; child protection; and nutrition needs of vulnerable Venezuelan girls, boys and adolescents, which have been further exacerbated by COVID-19. The UNICEF 2020 Venezuela Humanitarian Action for Children (HAC) appeals for US$ 153.2 million to address the needs of 2.6 million people, including 1.7 million children and adolescents. As of 30 November 2020, UNICEF has US$ 75 million available to support implementation of much needed child protection, including gender-based violence (GBV); education; health; nutrition; and WASH interventions, as well as to cover operational and logistics costs related to the delivery of this assistance. Of this amount, US$ 38 million has been carried over from 2019, and US$ 37 million has been raised in 2020.

Additionally, to address the imminent health risks posed by the COVID-19 pandemic, UNICEF launched an appeal for an additional US$ 26.8 million under the UNICEF Global COVID-19 HAC. To date, UNICEF Venezuela has raised US$ 13 million for the COVID-19 response, primarily to: (i) provide health workers and other staff

engaged in the response with personal protective equipment (PPE); (ii) provide hospitals and clinics with medical supplies and equipment, WASH supplies (including soap, hand-sanitizer, chlorine, masks, drinking water dispensers and disinfectant), safe water, and capacity strengthening on hygiene practices; (iii) strengthen Risk Communication and Community Engagement (RCCE) programming, by promoting effective COVID-19 prevention measures, such as hand washing, hygiene practices, physical distancing and other behavioural changes to curb the transmission of the virus; (iv) provide remote psychosocial support and ensure continuity of child protection and GBV services; (v) combat stigmatization; and (vi) contribute to mitigating the collateral impact of the outbreak on children.

UNICEF expresses its sincere gratitude to all public and private donors for the contributions received to date. Nevertheless, UNICEF calls upon the international community to provide additional and flexible support to reduce the remaining 51 per cent gap of the Venezuela HAC and the 51 per cent gap of the COVID-19 appeal, for a total gap of more than US$ 93 million. Potential prolonged funding gaps hinder UNICEF’s capacity to respond to pre-existing and urgent needs emerging from the COVID-19 pandemic and to ensure continuity of critical services, including WASH and education for children, women and vulnerable populations, for whom urgent support is needed.

**Situation Overview & Humanitarian Needs**

According to official sources, during November Venezuela surpassed the 100,000 confirmed COVID-19 cases threshold, going from 91,589 at the end of October to 102,394 at the end of November, constituting a monthly increase of 10,805 cases. Despite the number of cases, the Government announced the lifting of the restriction/quarantine measures for the entire month of December as a way to stimulate the national economy. During the announcement, the population was urged to maintain infection prevention and control (IPC) protocols, including the use of masks during flexibilization. Starting from 1 January 2021, the 7+7 quarantine/flexibilization scheme\(^1\) will be put in place again. As of November, the states with the highest number of cases include border states Zulia and Táchira (over 9,000 and 8,500 cases respectively), together with Caracas Capital District with over 20,000 confirmed cases and Miranda state with more than 13,000 confirmed cases.

Furthermore, in November four international air routes were opened from Caracas airport after seven months of closure to commercial flights, during which only humanitarian and cargo flights were allowed.

Heavy rains in the states of Zulia, Lara, Falcón, Trujillo and Táchira have caused flooding that has impacted thousands of families. In Zulia state, the flooding of several streams of the Limon river affected over 25 communities and over 5,000 families, including 10,000 children, as reported by the Maracaibo Civil Protection and Fire Department. In Táchira state, 1,500 families in Junín, Bolívar, Cárdenas, San Cristóbal, Sucre, Torres and Francisco de Miranda municipalities have also been affected and several schools suffered damages to their infrastructure. In Lara state, over 1,700 families have also been affected by heavy rains, particularly in the capital Barquisimeto where most of the flooding took place. According to the local protection system, 62 per cent of the affected population are children and adolescents, and at least one quarter under five years of age.

Lastly, shortages of cooking gas and fuel have been reported in different states of the country. Scattered protests demanding cooking gas were registered in Zulia, Bolívar, Delta Amacuro, Monagas and Sucre. Fuel supply has been irregular in Bolívar, Zulia, Lara and Trujillo, affecting operations from implementing partners. Electricity has also been reported as unreliable in Zulia, Trujillo, Falcón, Lara, Táchira, Mérida and Barinas, impacting connectivity for working or educational purposes. Water services have also been random, as lack of power is limiting water pumping to different states.

**Humanitarian Leadership, Coordination and Strategy**

During November the United Nations Humanitarian Country Team (UNHCT) discussed priorities for the 2021 Humanitarian Response Plan (HRP). UNICEF guided the discussion on the provision of essential services, emphasizing the impact of COVID-19, which is exacerbating humanitarian needs and vulnerabilities across sectors. Decrease in prenatal care consultations; a drop-in nutritional care in outpatient centres and hospitals; reduction in the supply of water, electricity and fuel; increased violence at community and domestic level; and disruption and difficulty in accessing protection services are some of the issues that were discussed. Another key priority identified by UNHCT members for 2021 is to jointly ensure that humanitarian personnel have unimpeded access to affected people, and that vulnerable populations can access humanitarian assistance and protection services in a safe, timely and sustained manner. UNHCT members are committed to disseminate key messages on access and operational challenges; strengthen joint advocacy that guarantees the expansion of humanitarian access and humanitarian presence; advocate to facilitate the registration of international non-governmental organizations (NGOs) through clear and expeditious mechanisms; and strengthen communication with local authorities on humanitarian activities to guarantee access on the ground.

\(^1\) Scheme imposed by the Government, which consists of a seven-day quarantine followed by a seven-day opening as a way to mitigate the effects of the COVID-19 pandemic on the national economy.
Throughout the reporting period, UNICEF continued to support the coordination of the Prevention of Sexual Exploitation and Abuse (PSEA) inter-agency network. A PSEA webinar was conducted for all PSEA field coordination inter-agency focal points and alternates on PSEA basic terminology and the Inter-Agency Standing Committee (IASC) Six Core Principles. Seventy-seven people participated in two Accountability for Affected Populations (AAP) trainings for the cash working group and food security cluster. Trainings included PSEA basic terminology, the six IASC core principles and the Zero Tolerance Policy.

In line with the AAP inter-agency framework, UNICEF is leading the setting-up of an interagency initiative to provide affected populations with a structured feedback mechanism. Together with the United Nations Food and Agriculture Organization (FAO), International Organization for Migration (IOM), United Nations Population Fund (UNFPA) and the United Nations Office for the Coordination of Humanitarian Affairs (OCHA) the secretariat and two governing bodies (a steering committee and a technical board) of the initiative were established. Key documents such as terms of reference, a participatory risk assessment and a timeline for the implementation and the launch of the initiative during the first quarter of 2021 were validated by the Humanitarian Coordinator.

**Summary of Programme Response**

UNICEF continues to ensure the uninterrupted delivery of health, education, WASH, nutrition and child protection and GBV services under the current COVID-19 pandemic. During November heavy rains required a scale-up of the response to address not only the impact of the protracted humanitarian situation, the COVID-19 pandemic and the migration in/out flux, but also natural disasters.

**Health**

Despite uncertainty regarding Venezuela’s membership to the COVAX facility, PAHO and UNICEF are actively engaging at different levels to define a governance structure and the roles of different actors under this initiative, including on the implementation of the COVID-19 Vaccine Introduction Readiness Assessment Tool (VIRAT/VRAF), in addition to the technical assistance required. UNICEF’s responsibilities will include, but not be limited to, communications, monitoring, supply and logistics.

As part of the COVID-19 response, 68 ventilators were distributed to COVID-19 reference hospitals after UNICEF supported them with spare parts and maintenance. Works for improvement and maintenance of the national central cold chain storage room (SEFAR) were completed. Additionally, a UNICEF chartered plane arrived with vaccines and dry goods worth US$ 2.8 million to ensure the stocks for the Expanded Programme on Immunization (EPI) are within a safe range, allowing for continuation of the Periodic Intensification of the Regular Immunization (PIRI) and its results. As of 15 November, the national average coverage for all antigens increased to 43 per cent (from 34 per cent the previous month), with the second doses of the measles, mumps, rubella (MMR) vaccine constituting the lowest national coverage (19 per cent) this year.

Furthermore, UNICEF’s HIV programming reached and treated opportunistic infections in over 5,000 children. Currently, 1,023 children and adolescents under 15 years of age, all beneficiaries of the National HIV / AIDS Program of the Venezuelan Ministry of Health (MoH), are in anti-retroviral treatment (ARVT) across all 24 states. UNICEF is the only provider of paediatric ARVT in Venezuela.

UNICEF’s health team worked closely with the PAHO-led health cluster to define the 2021 HRP projects. Priorities identified include: provision of comprehensive care to people on the move; delivery of medicines, supplies and medical materials; strengthen health services and personnel’s capacities with a special focus on maternal and neonatal health; strengthen prevention and control of infections, as well as the WASH component in outpatient centres and hospitals; strengthen mental health and psychosocial support actions and information management systems.

In addition, following the floods in the Western part of the country, UNICEF distributed six inter-agency emergency health kits (IEHKs) to the Táchira state health entity, together with mosquito nets and oral rehydration salts (ORS) to provide assistance to over 600 affected families, including 720 children and adolescents. In Zulia state, three IEHKs were distributed to the Sinamaica Hospital (Guajira), San Rafael de Moján Hospital (Mara), and the Paraguaiapoa Hospital (Guajira) to endow facilities with required medical supplies and provide assistance to floods’ victims.

**WASH**

During November, UNICEF continued to focus on the provision of safe water and hygiene promotion, including distribution of essential hygiene items to the most vulnerable communities and key institutions, such as health care facilities, temporary shelters, child protection centres and schools.

UNICEF has been collaborating with the Ministry of Water (MoW) to support safe water access in the most vulnerable states. In Bolivar state, two 90 m³ tanks were installed in Itopoikon and Cedeño municipalities; while in Zulia state, rehabilitation works initiated in the Zanzibar water treatment plant and Puerto Cuervito pumping station (Guajira municipality).
UNICEF has also responded to the floods, which affected 5,500 families in Zulia and Falcón states. In coordination with local authorities, UNICEF and local partners, FUDEP and PALUZ, supported the provision of safe drinking water, WASH supplies, and vector control services to benefit 2,527 families (12,636 people, including 2,186 boys, 2,060 girls, 4,334 women, 4,056 men).

Additionally, UNICEF and ten WASH in health partners, provided ongoing IPC support to 119 health care facilities across ten states through the distribution of key cleaning and hygiene products and PPE, installation of handwashing points, and provision of technical assistance and capacity building on IPC-related subjects, such as handwashing, environmental cleaning, health care facilities waste management practices, use of PPE, etc. In those health care facilities, UNICEF is scaling up infrastructure works through the construction of two new boreholes, installation of 16 chlorinators and implementation of waste management solutions; and providing hygiene kits to patients, health, operations and maintenance staff, in the states of Miranda, Zulia, Táchira, Bolívar, Delta Amacuro and Caracas Capital District. Hygiene kits were distributed to (a) provide support to COVID-19 patients and their families, and other families with malnutrition, disabilities, other illnesses, based on criteria established by the WASH Cluster; and (b) empower and motivate health care staff to keep working in these facilities, thus contributing to the sustainability of quality health services.

UNICEF and implementing partners have continued to support protection centres and migrant temporary shelters (PASI by its Spanish acronym) for Venezuelans returning from neighbouring countries. In November, UNICEF supported 25 centres across six states with daily access to water, through water trucking and/or rehabilitation works; and distribution of handwashing, cleaning and disinfection supplies, benefiting a total of 5,815 people (989 girls, 930 boys, 1,861 men and 2,035 women).

UNICEF and partners (ALINCA, DVC, FUNDAINIL, FUNDANA, FUNREHAV and RET) have also supported 75 schools across five states (Bolívar, Delta Amacuro, Distrito Capital, Miranda, and Táchira), with WASH infrastructure rehabilitation, distribution of hygiene, cleaning and disinfection supplies, which will ensure 9,466 boys and 10,121 girls (and 3,610 adults) have access to adequate WASH services when schools re-open.

In addition to the processes undertaken within the WASH cluster to ensure adequate analysis and appropriate adjustments, as part of the HRP revision the cluster coordination started a gap analysis exercise -as part of a global study to identify technical areas/priorities for attention-, and also a revision of the findings of various Post-Distribution Monitoring studies to (a) refine and improve internal WASH cluster guidance; and (b) ensure a solid evidence base to inform both the Joint Monitoring Initiative's second round and current discussions around the definition of a Minimum Expenditure Basket in collaboration with other clusters. Other key areas of work are also being advanced by the Cluster Lead Agency, notably with regards to a compendium of contextualized handwashing options, and an eventual compendium of options with regards to household water treatment.

Nutrition
UNICEF continued providing support to nutrition services in outpatient health centres, hospitals, as well as in community centres. Preventive and curative nutritional services were provided nationwide to 10,195 children under five (5,116 girls and 5,079 boys) including 111 indigenous, 5 afro-descendants children, and 48 children with disabilities.

In addition, 2,935 pregnant and lactating women (PLW) received nutritional services. 670 pregnant women were identified as undernourished, out of 1,428 pregnant women screened, representing 33 per cent of the data collected during the reporting period. UNICEF provided treatment to 210 undernourished pregnant women to improve nutritional status with Plumpy Mom and to reduce the risks of babies with low birth weight and infant maternal morbidity.

Pregnant adolescents are a highly vulnerable group targeted by UNICEF due to their special and increased nutrient needs. During November, 1,364 pregnant adolescents received preventive nutrition services, 450 treatment for being underweight, and 328 received micronutrient supplementation. Some 134 pregnant adolescents, in their second or third

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2 WASH in health refers to partners that work in WASH in health care facilities.

3 Waste management solutions include proving adequate bins and labels for proper waste segregation, specific PPEs for waste handling, setting handwashing stations no further than 5m from waste generation spots, etc.
gestational trimester, received deworming treatment and 345 received counselling for underweight prevention, best feeding practices and breastfeeding promotion.\(^4\)

According to programme data collected by implementing partners using anthropometric screening in 9,590 children under five (4,839 girls and 4,751 boys), UNICEF registered global acute malnutrition (GAM) in 439 children (190 girls and 249 boys), including 105 with severe acute malnutrition (SAM) and 334 with moderate acute malnutrition (MAM).

While this information is not statistically representative at national level, and therefore does not reflect the situation of the country, it does provide guidance for decision-making and for strengthening and designing nutrition interventions integrated with other UNICEF programmes, including WASH. Some 6,782 children (3,352 girls and 3,430 boys) under five received powered micronutrients and 1,774 children (948 girls and 826 boys) received treatment for prevention of acute malnutrition in the form of lipid-based nutrients (LNS-MQ).

Furthermore, UNICEF provided support to the communities of Zorca, Santa Elena, Rubio and San Antonio (Táchira state), particularly to families affected by the flooding, with nutrition support through multiple micronutrient supplementation, deworming and prevention of acute malnutrition with LNS-MQ, benefitting 122 children under five (62 girls and 60 boys), and 180 children between 5 and 10 years (91 girls and 89 boys), providing a rapid response to this population at risk. Also, capacities in the prevention and treatment of acute malnutrition were strengthened among paediatric and nutrition professionals of IAHULA -the main health centre in the state of Mérida. Thanks to that intervention, nutrition services are now being provided to 1,248 children and PLW per month in the Alberto Adriani municipality. In the state of Barinas, nutrition services were extended to the communities of El Cantón, Andres Eloy Blanco municipality and Socopó in Antonio Jose de Sucre municipality, now reaching a full nutrition coverage in the whole state, with at least one service centre with enhanced nutrition capacities and nutritional supplies in place. Some 32 health and nutrition professionals in Mérida and 162 in Barinas were trained on prevention and treatment of wasting.

The MoH health and nutrition teams reported that 1,128 children under five received nutrition services, of whom 228 were diagnosed with moderate or severe acute malnutrition and are receiving treatment; 36 PLW and 623 children under five and 3,856 children between 5 and 14 years received deworming medication in Miranda state. Acute malnutrition cases were referred to the Luis Razzetti Hospital.

In coordination with the MoH and other local implementing partners, UNICEF is supporting the National Deworming Campaign by providing deworming supplies, technical assistance in planning, PPE material, logistic support and a communication for development (C4D) campaign to disseminate key messages on the prevention of intestinal parasitosis for children between 2 and 14 years and PLW nationwide. As of the end of November, 22,508 children between 2 and 14 years (11,549 girls and 10,959 boys) and 1,602 PLW have been reached with antiparasitic treatment and key messages in primary health care centres.

**Child Protection and Gender-Based Violence**

In response to the flooding in Táchira, UNICEF participated in rapid assessments in the affected areas in the municipalities of Junin and San Cristobal, and in collaboration with NGO partners and the Child Protection Council, provided 104 psychological interventions and 59 legal orientations to children and affected families. Also, in La Guajira (Zulia state) UNICEF organized rapid assessments, one for non-food items (NFIs) needs and the other one for protection services. Findings suggested major needs included: psychosocial support, birth registration services, hygiene kits, PPE, and mosquito nets. UNICEF and its implementing partners distributed PPE to 1,131 people (including 230 boys and 271 girls), all from the Wayuu ethnic group.

During the reporting period, UNICEF continued strengthening local child protection systems in 15 states, benefitting 8,825 children (6,883 boys and 1,942 girls) with protection measures and specialized protection services, such as legal support, psychosocial support, case management, and alternative care.

Furthermore, 10,710 children (4,493 boys and 6,217 girls) were supported through integrated child protection programmes and services, including individual psychosocial support for children and their caregivers, legal assistance, case management, family support and referral to health and nutrition services. In Táchira state, four Defensorias (Ombudsman offices) were activated in prioritized hospitals in Panamericano, Fernandez Feo, Ayacucho and San Cristobal municipalities, providing specialized services, including GBV response, to 238 people. In Bolívar state, 107 at-

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\(^4\) Plumpy Mom is a Ready-to-Use Supplementary Food (LNS-PLW) paste, high-energy fortified food used for the treatment of malnutrition in pregnant and lactating women. It contains approximately 560 calories per 100g. During the period of supplementation, LNS-PLW is used as a supplement to family foods. It is ready to eat directly from the sachet and does not require cooking, mixing or dilution. LNS-PLW paste is portion controlled: each sachet has the same nutritional value for control and monitoring of dietary intake.
risk and vulnerable children and adolescents were supported by Mobile Protection Services\(^5\) in Caroni, Angostura del Orinoco, Bolivariano de Angostura and Piar municipalities through implementing partners.

Under the framework of World’s Children Day, UNICEF supported the establishment of the first Child Protection Judicial Court in Táchira, at the border with Colombia. The Judicial Court has the competency to oversee legal procedures in the border area where many protection risks for children have been identified. In Zulia state, UNICEF organized a session on the rights of the child at CEPIN (Centro de Promoción Integral del Niño), where 47 girls and 53 boys received information on child abuse prevention and self-care. The session was organized together with the child protection area of responsibility (AoR). Also, the Ombudsman’s Office gave a session on cultural rights of the Wayuu ethnic group.

Thanks to the coordinated work among partners, state institutions, and UNICEF, birth registration of 82 children (42 boys and 40 girls) from the Warao indigenous group was achieved in Bolivar state. UNICEF supported two civil registry offices with supplies to guarantee continuity of these services.

In the state of Anzoátegui, 33 state institutions members, including from the protection system and security bodies, were trained to improve protection and communication with children and adolescents in situations of vulnerability. Child protection and GBV civil society organizations have been mapped to promote access to protection services.

A national-level monitoring initiative to understand children’s and parents’ satisfaction with psychosocial support services provided by UNICEF partners has been established. The first phase has been launched, and informed consent collected from service users who will eventually participate in the survey to be conducted at the beginning of next year. The results will be used to improve access and quality of psychosocial support services for children and caregivers.

Furthermore, following the commemoration of the ‘International Day on the Elimination of Violence against Women,’ on 25 November, and the 16 days of activism against GBV, UNICEF launched awareness activities with communities and on social media, with a reach of more than 22,600 interactions and around 1.5 million views. UNICEF conducted a series of interviews, in different national and local radio stations and one national TV show, to explain the importance of the commemoration, the campaign and the impact of GBV against children and women. In addition, UNICEF supported strengthening referral pathways for sexual exploitation and abuse against children, by updating the institutional referral pathway and developing a specific referral pathway for the education sector in collaboration with partner AVESA.

Education

In November the Venezuelan educational system continued schooling through distance learning, with schools gradually opening for personalized pedagogic services to parents, representatives and students, as well as to serve as community service platforms, centres for the government-sponsored school feeding programme and other activities.

During the reporting period, UNICEF, in collaboration with implementing partners and state educational authorities, developed activities to improve learning conditions, while offering education services (including school feeding, distance educational activities, family assistance, and school materials distribution), capacity strengthening for teachers and contributing to equitable access and continuity of education in 22 states, 776 schools (67 per cent public and 33 per cent subsidized), 141 educational radio stations to support distance learning and 104 non-formal educational centres (of which 72 are temporary learning spaces and 32 are vocational learning institutions). The main intervention was the distribution of school material in 13 states, benefiting 188,994 children (92,378 girls and 96,616 boys), among which ten per cent belong to indigenous population.\(^6\)

Some 99,994 children (49,783 girls and 50,212 boys) benefitted from distance learning activities provided through multimodal strategies, didactic guides and teacher follow-up. Fe y Alegría’s, radio programme ‘School on the Radio’ transmitted daily classes by educational levels, indirectly benefitting 3,010,318 (girls 1,467,031 and 1,543,287 children). Activities with 3,958 out-of-school children took place from community learning spaces.

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\(^5\) Mobile Protection Services: multidisciplinary teams, that include psychologists, social workers, lawyers and community promoters, that go through communities in Bolivar state, providing assistance.

\(^6\) Amazonas, Apure, Monagas, Carabobo, Anzoátegui, Lara, Capital District, Zulia, Bolivar, Delta Amacuro, Miranda, La Guaira and Táchira
Some 3,563 adolescents (2,006 girls and 1,557 boys) participated in life skills courses and a technical training programme. Adolescents can choose between various subjects, including carpentry, sewing, baking, car mechanics, pharmacy, indigenous leadership, computer science, electricity and accounting, among others. During November, the school feeding programme benefited 68,555 children (33,793 girls and 34,762 boys) in seven states7, through two modalities: (a) preparation of hot meals at school and delivery to students’ homes, or (b) distribution of food bags for the household, benefiting an additional 21,194 adults. A total of ten per cent of beneficiaries belong to indigenous populations. Since the beginning of the year, 85,865 children (45,346 girls and 40,519 boys) have been reached with school feeding. Furthermore, in collaboration with the UNICEF C4D programme, an educational guide for families called ‘Pedagogical First Aid’ was developed to disseminate tools for educational support at home, including guidance for early child development.

In November 2,511 teachers (1,577 women and 934 men) were motivated through incentives as a way to encourage their continuity in schools and educational improvement. Among the incentives provided, 1,717 teachers (926 females and 791 males) received economic incentives, 606 teachers (507 females and 99 males) received food bags, and 109 teachers received technological devices (tablets, telephones, pen drives). Likewise, 577 teachers participated in training activities, of whom 544 attended the distance learning course entitled ‘The right to education in times of crisis.’

Technical support to the Ministry of Education (MoE) and implementing partners has continued through interventions that provide advice and promote safe school reopening. A package of training materials for school reopening is currently being designed to be shared with the MoE and implementing partners.

In November, as part of the efforts to establish the Country-Based Pooled Fund (CBPF) in Venezuela, the education cluster developed common selection criteria, including geographic coverage, technical capacities, cost per beneficiary, the existence of mechanism for PSEA and AAP, to determine the eligibility of civil society organizations to receive financial resources through this donor funding mechanism. At the same time, the cluster is designing material and interventions to help education sector organizations meet the required CBPF criteria and incorporate qualified organizations into the mechanism every six months. Additionally, together with the sub-national clusters, the education cluster at national level initiated the development of local contingency plans for 2021 to address the needs of people on the move and affected by natural disasters in the education sector.

Communications for Development (C4D), Risk Communication and Community Engagement (RCCE), Accountability for Affected Populations (AAP)

In November the fourth training course on C4D, carried out in partnership with the Catholic University Andres Bello, took place. The C4D remote training lasted four weeks and was completed by 42 people from 37 partner organizations at the national level who were certified in C4D. In addition, 87 community promoters from implementing partners received training on hygiene promotion and practices, humanitarian principles and leadership. Trained community promoters are located Zulia (30), Bolívar (36) and Táchira (21) states.

Also, some 30 community promoters from Táchira state were identified and selected to disseminate key IPC messages, with partner Finampyme.8 Some 337 community promoters, from seven implementing partners in Bolívar state, disseminated messages to 17,552 people on different topics, including GBV prevention and awareness, breastfeeding promotion, hygiene practices, sanitation and safe water consumption.

During the reporting period, a total of 2,924 posters on COVID-19 prevention were distributed to hospitals, schools and public spaces in the states of Zulia (1,611) and Bolívar (1,313). Additionally, 1,410 so-called ‘bacteria stickers’ were distributed to 99 health centres nationwide to be placed in doorknobs. This material has been produced to remind health centre personnel, and the general population, about continuous handwashing as a way to prevent COVID-19.

In Zulia 1,950 pocket guides on GBV were distributed to humanitarian organizations9 that provide assistance to GBV survivors. During distribution to end users, each organization will provide a briefing on survivor-centred standards and GBV response, as part of the activities related to the 16 days of activism against GBV.

In Táchira, 300 directors of educational institutions received, via messaging app, the ‘Pedagogical First Aid Guide’, aimed at providing parents, representatives and caregivers with simple tools for the pedagogical school from home accompanied of children and adolescents. Also, some 40 managers of Táchira state’s hospital network received nine

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7 State receiving school feeding: Miranda, Distrito Capital, Zulia, Táchira, Bolívar, Delta Amacuro and Anzoátegui.
8 In the municipalities of San Cristobal, Panamericano, García de Hevia, Ayacucho, Lobatera, Torbes, Fernández Feo, Bolívar, Pedro María Ureña and Junín.
9 Among the benefitted organizations ASONACOP, OCHA, UNFPA, Public Prosecutor’s Office, and the Protection Council.
key care and COVID-19 prevention messages, also through a messaging app, under the framework of hygiene promotion campaign.

Under the framework of hygiene promotion, and as a continuation of the ‘Global Handwashing Day’ campaign, three 2D videos were produced: (a) the first one targeted teenagers; (b) the second one mothers, fathers, caregivers and children under eight years and (c) the third one the general public on alternative handwashing techniques in times of emergency, as well as proper food handling. A total of 21,968 views were achieved with the three videos through social media.

In support of the national vaccination campaign, UNICEF produced two videos: one targeting pregnant women and the other one with vaccination messages for children from 0 to 10 years. As of November, 9,590 views had been registered on UNICEF’s social networks. Additionally, in support of nutrition interventions, a Graphics Interchange Format (GIF) on the correct handling of food was produced, which had registered 278 visualizations by end November.

To raise awareness on AAP, a survey was conducted to estimate UNICEF staff and implementing partner’s perception of AAP standards compliance. Out of 136 answers, clear takeaways worth highlighting include: there is a common belief that humanitarian aid serves the most needed; humanitarian actors believe the population is treated with respect; activities do have to foster participation to make sure all different groups are represented and feedback mechanisms must be further developed together with affected populations. The results of the survey will be used internally and with partners to strengthen skills and capacity in the areas where the need for improvement has been perceived as higher. This will be done in close collaboration between UNICEF C4D-AAP programmes, focusing mainly on community engagement and community feedback mechanisms.

Planning, Monitoring and Evaluation
In November UNICEF Venezuela implemented 850 monitoring activities, all carried out by staff members from different field offices. Monitoring focused mainly on verifying the distribution of educational kits to schools (77.1 per cent of activities) and checking whether educational materials were being delivered to mothers, fathers or guardians for students to carry out activities at home. UNICEF also carried out supply monitoring activities in health facilities (20.5 per cent). This remote monitoring also served to stress to educational staff that kits and their components can only be used for educational purposes.

Monitoring a sample of families with children and adolescents who received educational materials, hygiene kits and food through the Education Cannot Wait project was completed and 1,305 surveys were obtained. Data analysis and the final report are expected to be finalized by the end of December 2020.

Supply and Logistics
In November, UNICEF Venezuela ordered goods for a total value of US$ 5,169,252, of which US$ 2,939,713 were used to purchase supplies offshore and US$ 2,229,539 for local purchases. At the same time, a charter flight fully funded by UNICEF international donor partners with a total of 31 tonnes of health, PPE and vaccines supplies valued at US$ 3.14 million arrived in Venezuela on 22 November.

In addition, UNICEF received 31 tonnes of nutrition supplies (valued at US$ 128,824) by sea freight. In November alone UNICEF distributed approximately 192 tonnes of supplies valued at US$ 1,327,243 to 409 partners across the country. Finally, UNICEF Venezuela received an in-kind contribution of 24,064,704 bars of soap (78 tons) from UNILEVER worth EUR 178,670.

Human Interest Stories and External Media
Communication efforts for advocacy, transparency, and resource mobilization purposes continued during November with the production of 187 photos and five videos, that were disseminated at local, regional, and global level via UNICEF’s social media accounts.

UNICEF Venezuela had active participation in two global communication initiatives: World Children's Day (WCD) and the UN 16 Days of Activism Against Gender-Based Violence. As part of the WCD's initiative, a multimedia pack on adolescents reimagining the world after the pandemic was produced and disseminated through UNICEF Venezuela and partners’ social networks, with a reach of more than 120,000 and over 3,000 interactions. Also, a writing contest for children, called ‘The school that is my home,’ (La Escuela que es mi casa in Spanish) was kicked off, aiming to motivate children to express their feeling on home school and how they imagine the return to school. Finally, an Op-Ed by the CO Representative about the importance of promoting and achieving children's rights was published in one of the most important newspapers in the country. As for the 16 Days of Activism Against Gender-Based Violence, UNICEF Venezuela continued disseminating new content of the campaign ‘It's not a joke, it's violence’ and media interviews; in November UNICEF’s Gender-Based Violence specialist was interviewed in national TV.

On digital communication, UNICEF Venezuela social media accounts received over 108,000 interactions (comments, likes, and re-tweets) and 7.1 million impressions with messages on immunization, psychosocial and educational support, violence prevention, and humanitarian principles that guide UNICEF’s work for every child.
Human interest stories and multimedia stories:

- **Video:**
  WCD – Adolescents reimagine how the future will be like after the pandemic

- **Campaign prevention Gender-based violence:** ‘No es broma, es violencia’ (It’s not a joke, it’s violence)
  TV Spot available here
  Radio spots available here
  Arts available here

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

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Annex A

Summary of Programme Results (HAC)

<table>
<thead>
<tr>
<th>Sector</th>
<th>UNICEF and Partners</th>
<th>Sector Response&lt;sup&gt;10&lt;/sup&gt;</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>Jan-Dec 2020 target</td>
<td>Total results (Jan-Nov)</td>
</tr>
<tr>
<td>Health</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Pregnant women &amp; new-born babies receiving maternal/neonatal life-saving services in UNICEF-supported facilities</td>
<td>246,900</td>
<td>147,291</td>
</tr>
<tr>
<td>Children under 1 year vaccinated against measles</td>
<td>534,100</td>
<td>101,138&lt;sup&gt;11&lt;/sup&gt;</td>
</tr>
<tr>
<td>Nutrition</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Children under 5 years affected by severe and moderate acute malnutrition (with or without complications) admitted for treatment</td>
<td>20,400</td>
<td>4,585&lt;sup&gt;12&lt;/sup&gt;</td>
</tr>
<tr>
<td>Caregivers receiving infant and young child feeding counselling for appropriate feeding of children under 2 years</td>
<td>155,500</td>
<td>39,457&lt;sup&gt;13&lt;/sup&gt;</td>
</tr>
<tr>
<td>WASH</td>
<td></td>
<td></td>
</tr>
<tr>
<td>People accessing basic WASH (safe water and sanitation) services at the community level</td>
<td>2,000,000</td>
<td>2,312,030</td>
</tr>
<tr>
<td>People receiving basic hygiene information and/or essential hygiene products</td>
<td>1,275,000</td>
<td>677,855&lt;sup&gt;14&lt;/sup&gt;</td>
</tr>
<tr>
<td>Health and nutritional care facilities, benefiting from WASH interventions</td>
<td>225</td>
<td>194&lt;sup&gt;15&lt;/sup&gt;</td>
</tr>
<tr>
<td>Child Protection and Gender Based Violence</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Girls and boys supported through integrated individual child protection services</td>
<td>95,500</td>
<td>112,844</td>
</tr>
<tr>
<td>Education</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Children aged 4-18 years in schools who received education materials</td>
<td>1,180,000&lt;sup&gt;16&lt;/sup&gt;</td>
<td>564,798&lt;sup&gt;17&lt;/sup&gt;</td>
</tr>
</tbody>
</table>

<sup>10</sup> Sector Response includes UNICEF implementing partners and cluster response.

<sup>11</sup> It should be noted that vaccination campaigns have been affected by the COVID-19 pandemic and will not be attained by the end of 2020. The UNICEF health sector still aims to revert some of trend by supporting and intensifying the mobilization of vaccination brigades throughout the country.

<sup>12</sup> When the target for this indicator was calculated, UNICEF Venezuela had no access restrictions related to the COVID-19 pandemic. As a result of restrictions, UNICEF Venezuela and partners have had to shift its implementation methodology to more individualized services, which will most likely result in an underachievement of the target by the end of the year.

<sup>13</sup> UNICEF has trained a network of community agents who will help to increase the report of activities to reach this indicator. The training of community agents took longer than expected due to COVID-19 restrictions.

<sup>14</sup> This indicator’s target is linked to UNICEF Venezuela’s HAC appeal. Since less than 50% of the desired resources have been received, the target is likely to be half than originally expected. In addition, due to COVID-19 response, access to water and support to health facilities have been prioritized, rather than hygiene item provision/distribution. These factors lead to the underachievement of the target by the end of the year.

<sup>15</sup> This indicator’s target is linked to UNICEF Venezuela’s HAC appeal. Since less than 50% of the desired resources have been received, it is expected that the target will not be reached by the end of the year.

<sup>16</sup> In previous reports, the education cluster’s target for this indicator was being reported as the planned annual target for both UNICEF and the cluster. This was a mistake and has been corrected to ensure alignment with UNICEF Venezuela 2020 HAC appeal.

<sup>17</sup> Given the beginning of a new school year, UNICEF’s education sector has planned the distribution of school materials to 450,000 children in 16 states. These have been taking place since September and will end in December. Due to insufficient funding, it is estimated that only 63 per cent of the target for this indicator will be reached by the end of the year.
## Annex B

### Summary of Programme Results (COVID-19)

<table>
<thead>
<tr>
<th>COVID 19 Response Pillar&lt;sup&gt;18&lt;/sup&gt;</th>
<th>UNICEF and Partners</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>Apr-Dec 2020 target</td>
</tr>
<tr>
<td>Provision of critical medical and water, sanitation and hygiene (WASH) supplies and improving Infection Prevention and Control (IPC)</td>
<td></td>
</tr>
<tr>
<td>Number of healthcare workers within health facilities and communities provided with Personal Protective Equipment (PPE)</td>
<td>60,000</td>
</tr>
<tr>
<td>Continuity of health care for women and children</td>
<td></td>
</tr>
<tr>
<td>Health care workers trained in detecting, referral and appropriate management of COVID-19 cases</td>
<td>20,000&lt;sup&gt;20&lt;/sup&gt;</td>
</tr>
<tr>
<td>Number of children and women receiving essential healthcare, including prenatal, delivery and postnatal care, essential new-born care, immunization, treatment of childhood illnesses and HIV care in UNICEF supported facilities.</td>
<td>142,000</td>
</tr>
<tr>
<td>WASH Services</td>
<td></td>
</tr>
<tr>
<td>Number of people reached with critical WASH supplies (including hygiene items) and services</td>
<td>1,500,000</td>
</tr>
<tr>
<td>Access to continuous education, child protection and GBV services</td>
<td></td>
</tr>
<tr>
<td>Number of children, parents and primary caregivers provided with community based mental health and psychosocial support</td>
<td>60,000&lt;sup&gt;22&lt;/sup&gt;</td>
</tr>
<tr>
<td>Children supported with distance/home-based learning</td>
<td>400,000&lt;sup&gt;24&lt;/sup&gt;</td>
</tr>
<tr>
<td>Risk Communication and Community Engagement (RCCE)</td>
<td></td>
</tr>
<tr>
<td>Number of people engaged on COVID-19 through RCCE actions</td>
<td>1,000,000</td>
</tr>
</tbody>
</table>

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<sup>18</sup> Indicators have been adapted to reflect UNICEF Global COVID-19 indicators.

<sup>19</sup> The overachievement is due to the inclusion of new health facilities in the response, which were not foreseen in the prioritization initially agreed with the Ministry of Health.

<sup>20</sup> The internal target was increased to 30,000 to reflect changes in HRP/HNO. The target reported in the global SitRep is 20,000 as UNICEF Venezuela cannot modify the global target.

<sup>21</sup> The overachievement is due to the expansion to new territories which were not foreseen in the initial prioritization.

<sup>22</sup> The internal target was increased to 100,000 to reflect changes in HRP/HNO. The target reported in the global SitRep is 60,000 as UNICEF Venezuela cannot modify the global target.

<sup>23</sup> The overachievement is due to the inclusion of new health facilities and communities in the response, which were not foreseen in the initial prioritization.

<sup>24</sup> This indicator includes people reached in health services, including those in new health facilities included in the response. The overachievement is due to the inclusion of new health facilities and communities in the response, which were not foreseen in the initial prioritization.

<sup>25</sup> This target covers only children reached in a direct way.

<sup>26</sup> Since the SitRep of September, indirect reach is being reported in addition to the direct reach reported in previous months. The number of children supported with distance / home-based learning reached indirectly is 3,945,094 and this figure has not changed since September report. Therefore, the variation in the reported data is due to the progress in the number of children reached directly (141,819 as of the date of this report).
# Annex C

## HAC Funding Status

<table>
<thead>
<tr>
<th>Sector</th>
<th>Requirements</th>
<th>Funds available</th>
<th>Funding gap</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td>Humanitarian resources received in 2020</td>
<td>Other resources used in 2020</td>
</tr>
<tr>
<td>Nutrition</td>
<td>12,745,000</td>
<td>4,061,274</td>
<td>0</td>
</tr>
<tr>
<td>Health</td>
<td>22,290,000</td>
<td>10,810,250</td>
<td>80,400</td>
</tr>
<tr>
<td>WASH</td>
<td>58,300,000</td>
<td>10,525,392</td>
<td>369,957</td>
</tr>
<tr>
<td>Child Protection</td>
<td>14,400,000</td>
<td>4,557,677</td>
<td>0</td>
</tr>
<tr>
<td>Education</td>
<td>45,512,000</td>
<td>6,598,875</td>
<td>444,050</td>
</tr>
<tr>
<td><strong>Total</strong></td>
<td><strong>153,247,000</strong></td>
<td><strong>36,553,469</strong></td>
<td><strong>894,407</strong></td>
</tr>
</tbody>
</table>

## COVID-19 Funding Status

<table>
<thead>
<tr>
<th>Sector</th>
<th>Requirements</th>
<th>Funds available</th>
<th>Funding gap</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td>Humanitarian resources received in 2020</td>
<td>Other resources used in 2020</td>
</tr>
<tr>
<td>Risk communication and community engagement (RCCE)</td>
<td>2,288,940</td>
<td>872,895</td>
<td>44,204</td>
</tr>
<tr>
<td>Infection Prevention and Control (IPC)</td>
<td>21,321,144</td>
<td>7,812,804</td>
<td>0</td>
</tr>
<tr>
<td>Continuity of Health Care and Nutrition Services</td>
<td>2,372,985</td>
<td>1,930,304</td>
<td>0</td>
</tr>
<tr>
<td>Access to continuous education, child protection and GBV services</td>
<td>627,870</td>
<td>1,493,186</td>
<td>1,026,134</td>
</tr>
<tr>
<td>Data collection social science research for public health decision making</td>
<td>217,581</td>
<td>86,330</td>
<td>4,372</td>
</tr>
<tr>
<td><strong>Total</strong></td>
<td><strong>26,828,520</strong></td>
<td><strong>12,195,519</strong></td>
<td><strong>1,074,710</strong></td>
</tr>
</tbody>
</table>

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26 As defined in [Venezuela 2020 Humanitarian Appeal](#) launched on 05 December 2019 for a period of 12 months.

27 As defined by [UNICEF COVID-19 Global Response 2020 requirements](#) launched on 15 March 2020, for a period of nine months.