



© UNICEF/2020/Poveda. Yermaris, age four, learns proper handwashing techniques during an activity for Global Handwashing Day in Antonio Pinto Salinas neighbourhood, Táchira, Venezuela.

Reporting Period: 1-31 October 2020

Highlights

- As part of the 'Global Handwashing Day' celebration on 15 October, UNICEF distributed over 30,000 soap bars; installed handwashing points in four protection centres, five schools, four communities and 26 prioritized health care facilities (HCFs); and distributed 13,008 hygiene kits.
- During 'Global Handwashing Day', five million people were reached via radio broadcasting with handwashing messages. With support from the private sector, key messages were disseminated via SMS, reaching over 2.6 million people.
- In coordination with the Ministry of Health and other local implementing partners, UNICEF is supporting the National Deworming Campaign. Twelve states have already initiated large-scale deworming, reaching 11,625 children 2 to 14 years old and 939 pregnant and lactating women (PLW) with antiparasitic treatment.
- As part of its activities to commemorate the 'International Day of the Girl Child,' UNICEF launched a nationwide campaign entitled "It's not a joke, it's violence" (*No es broma, es violencia* in Spanish). The campaign aims at raising awareness on the risks and impact of gender-based violence (GBV) on the life of women, children and adolescents.
- In October 453 teachers (383 women and 70 men) received cash transfers as incentives in six prioritized states to support retention and reduce the risk of educational service delivery disruption.

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 31 October 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

UNICEF HAC Appeal 2020
US\$ 153.2 million

UNICEF COVID-19 Appeal 2020
US\$ 26.8 million

UNICEF VENEZUELA

Situation Report October 2020

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Situation in Numbers

3,200,000

children in need of humanitarian assistance (OCHA July 2020)



91,589

COVID-19 laboratory confirmed cases and **793 deaths** (WHO 30 October 2020)



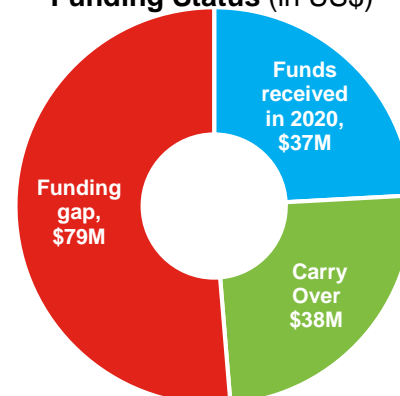
1,300,000*

Children and adolescents enrolled with access limitations to learning continuity (Education Cluster 2020)

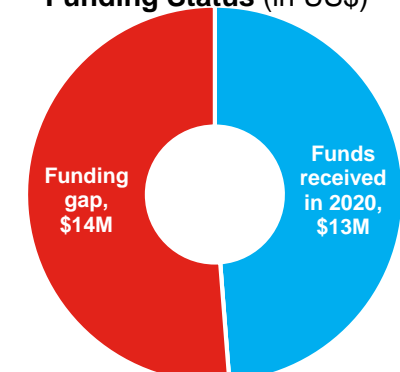


*estimations for pre-school, primary and secondary, public and private schools.

Funding Status (in US\$)



Funding Status (in US\$)



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

After the new academic year for preschool and elementary school officially began nationwide under a remote modality on 16 September 2020, secondary schools started on 1 October following the same approach. Starting from 5 October 2020, and in coordination with school districts, over 6,000 schools began opening gradually for personalized pedagogic services to parents, representatives and students, in the form of consultancies. The objective of the consultancies is to provide orientation, improvement and assistance regarding quality education, as part of a new modality for a return to school amid the pandemic. As part of this strategy, children equipped with PPE and following the correct infection prevention and control (IPC) protocols, have been invited to meet their teachers, while parents and caregivers received pedagogical assistance. Despite the remote beginning of the school year, many schools have not been completely closed and have been serving as community service platforms, centres for the government-sponsored school feeding programme and other activities.

Simultaneously, on 5 October (which is also Teacher's Day) the Venezuelan Teacher's Federation, [called for a nationwide protest](#), to demand better contractual services and higher wages. Correspondingly, according to the October report by the Venezuelan Teacher's Federation Central Analysis and Documentation (CENDAS by its Spanish acronym), in September, over [285 minimum monthly wages of US\\$ 0.88](#) (a total of US\$253.39) are required to meet basic needs. In addition, from January to September 2020, the Venezuelan Central Bank reported an inflation rate of [844.1 per cent](#), while the National Assembly's Financial and Economic Development Commission disclosed a [1,433.58 per cent](#) inflation for 2020.

On 18 October 2020, the Government announced an economic flexibilization that includes the opening of social clubs, beaches, hotels, shops and events in open-air spaces after the curve of confirmed cases reverted its increasing trend, according to official announcements. Despite the opening of some sectors, fuel shortages and irregular power and water provision persist across the country, limiting mobility and access to services.

Lastly, with the opening of the San Cristobal bus terminal after over six months of closure, UNICEF implementing partners have reported a significant number of families on the move coming from different parts of the country. Families walk to reach the border city of San Antonio, waiting for means to reach Colombia. A large number of children have been reported among the families on the move migrating to and through Colombia. However, illegal crossings ('*trochas*' in Spanish) have been closed and are under control, particularly on the Colombian side of the border, leaving families on the border for an indefinite time, thereby increasing their vulnerability and their need for basic goods and services.

Humanitarian Leadership, Coordination and Strategy

During October, the United Nations Humanitarian Country Team (UNHCT) discussed aligning the Venezuela Humanitarian Needs Overview (HNO) and Humanitarian Response Plan (HRP) process with the timeline of the global Humanitarian Program Cycle (HPC), including the publication date of the Global Humanitarian Overview (GHO) scheduled for December. The objective is to update the current HRP, highlighting the impact of the COVID-19 pandemic and reviewing the projects reflected in the 2020 HRP, including additional interventions, projects by new organizations or new areas of work covered.

Considering the mixed migratory movements observed across the country, the UNHCT has highlighted the need to have the capacity and flexibility to respond to these dynamics of human mobility. Following interactive discussions among UNHCT member agencies, a workplan has been developed with priority actions based on a prioritization exercise carried out in December 2019, which includes response priorities and a strategic approach concerning people on the move.

UNICEF continues to support the coordination of the Prevention of Sexual Exploitation and Abuse (PSEA) inter-agency network. In October, PSEA priorities were incorporated in the 2021 HRP/HNO. A PSEA webinar on basic terminology, guiding principles, zero tolerance policy, PSEA risks and action plan, was conducted during the coordination meeting

for Ciudad Guayana, Bolívar state. The webinar included the participation of 18 people (10 women and 8 men) from 11 organizations, including six United Nations agencies, and six UNICEF implementing partners.

Within UNICEF, programme and operations sections finalized the nomination of PSEA resource persons who will help implement PSEA action plans and programme initiatives, including supporting risk evaluations and capacity building. PSEA messages were identified for the joint GBV campaign involving child protection, communications and communications for development (C4D).

UNICEF has played a key role in the implementation and mainstreaming of the Collective Accountability to Affected Populations (AAP) Framework that provides organisations that are part of the humanitarian response in Venezuela with a guide of minimum actions to include AAP commitments throughout the HPC of the response in Venezuela; and a feedback flowchart to foster the harmonisation of how to handle community feedback.

Additionally, UNICEF and OCHA have concluded the first interagency course on AAP in Venezuela on 22 October, the first of its kind in Latin America. The course was divided into 10 webinars and registered a participation of 80 staff from 61 national and international organizations, grounding the basis for a collective shift aimed at developing a more people-centred approach to the humanitarian response.

Summary of Programme Response

UNICEF has continued to respond to the needs resulting from the triple burden present in the country that includes the effects of the protracted humanitarian situation, the COVID-19 pandemic and the inbound and outbound migratory flows. IPC activities continue to be scaled up and efforts strengthened to ensure the uninterrupted delivery of health, education, WASH, nutrition and child protection services under the current COVID-19 pandemic.

Health

During October, UNICEF and the Pan American Health Organization (PAHO) coordinated assessments and preparations for the potential reception of a COVID-19 vaccine, while the country's engagement with the [COVAX](#) platform is ongoing.

Furthermore, the nationwide Periodic Intensification of the Regular Immunization (PIRI) continued with varied results, both by antigen and state. By 15 October, the global national average coverage for all antigens was 34 per cent, with coverages ranging from 3 per cent to 100 per cent, for all antigens and by states. Targets are 541,957 infants under 1 year old, 455,785 children 1-2 years old, 269,506 pregnant women (among which 24 per cent are adolescents) and 240,006 children under 10 years old. UNICEF is supporting the PIRI by providing vaccines and immunization supplies, technical assistance in planning, distribution of PPE and a C4D campaign to promote vaccination and increase its demand. Lack of PPE for frontline workers and transportation shortages have been the most significant factors hampering achievement of effective coverages.

As opposed to the downward trend reported to UNICEF regarding demand for maternal neonatal children health (MNCH), new data from hospitals and health centres shows an improvement on the continuation of essential services for pregnant women, new-borns and children. UNICEF has begun witnessing an increase in the utilization of antenatal care and institutional deliveries as compared to the previous months.

UNICEF continued with massive distributions of PPE to frontline workers, implementing partners and some beneficiaries, reaching over 144,700 health staff in 360 medical facilities across the country.

WASH

During the month of October, UNICEF focused on the provision of safe water and hygiene promotion, including distribution of essential hygiene items, to the most vulnerable communities and key institutions, including health care facilities, temporary shelters, child protection centres and schools. In Bolívar state, new chlorine injection systems were rehabilitated in two water distribution networks, Macagua and Caicara del Orinoco, ensuring the supply of safe drinking water to approximately 100,000 people, including 36,000 children.

Additionally, UNICEF continued working together with the Venezuelan Ministry of Water to support the emergency response during the 'El Limon' river flooding in Aragua state, which took place in September. As part of the response, UNICEF and partners distributed 941 family hygiene kits, benefitting 4,705 people -including 2,823 children; and supported environmental hygiene actions.



© UNICEF/UN0353357/Tineo. Hendri, three years, learns proper handwashing techniques during an activity under the framework of 'Global Handwashing Day' in Cambalache community, Bolívar state, on 15 October 2020.

During the celebration of 'Global Handwashing Day' on 15 October UNICEF prioritized promotion of hygiene practices across the country. Under the global message 'hand hygiene for all,' UNICEF partnered with three ministries -ministry of water, ministry of education and ministry of health-, the British Embassy, 15 private-sector companies and 25 civil society organizations (CSOs) to help raise awareness on hand-hygiene during the COVID-19 pandemic. UNICEF and partners worked in healthcare facilities and households, through mass media events -radio interviews, messaging applications, social media and SMS messages-, and handwashing trainings and activities. UNICEF also distributed over 30,000 soap bars (27,134 in schools, 1,620 in communities, and 2,317 in health care facilities -HCFs). Handwashing points were also installed in four protection centres, five schools, four communities and 26 prioritized HCFs. To support hygiene practices, UNICEF also distributed 13,008 family hygiene kits: 1,100 in protection centres, 1,644 in schools, 7,375 for vulnerable families¹, and 2,889 kits for HCFs staff. With these activities, over 52,000 people were reached, including 31,200 children.

Additionally, UNICEF provided ongoing IPC support to 78 HCFs across nine states², 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. In health care facilities, UNICEF is scaling up infrastructure works through new boreholes, chlorinators and waste management solutions and providing hygiene kits to patients, health, operations and maintenance staff.

UNICEF continued to support protection centres and migrant temporary shelters (PASI by its Spanish acronym) for Venezuelans returning from neighbouring countries. During the reporting period, UNICEF supported a total of 22 centres across five states³ with daily access to water, including through water trucking and/or rehabilitation works, and distribution of handwashing, cleaning and disinfection supplies (including 1,100 hygiene kits).

UNICEF has also supported a total of 82 schools in six states⁴, with WASH infrastructure rehabilitation, distribution of hygiene, cleaning and disinfection supplies, which will ensure 12,204 boys and 12,132 girls have access to adequate WASH services in schools when these re-open.

Lastly, the WASH Cluster focused on the 2021 HNO and HRP preparations, ensuring an analysis of available primary and secondary data to inform and adjust sectoral prioritization. It has also facilitated a series of discussions among WASH sector actors, to assess the response to date, exchange practical experiences and challenges, and identify priority areas of action for the cluster in the months to come.

Nutrition

In October UNICEF continued providing support to nutrition services in outpatient health centres, hospitals, as well as in community centres, including the implementation of a house-to-house screening approach.⁵ During the reporting



© UNICEF Venezuela/2020/Cabral. Katerin Rivero (R) with her son Wuikleman Solórzano and daughter Wileyne Solórzano (L) during a nutrition screening in a school located in La Bombilla neighbourhood, Petare, Venezuela.

period, preventive and curative nutritional services were provided nationwide to a total of 9,313 children under five (4,654 girls and 4,659 boys, including 70 indigenous and 7 afro-descendants children). In addition, 2,312 PLW, including 267 pregnant adolescents, representing 19.9 per cent of all pregnant women, also received nutritional services.

According to programme data, collected by implementing partners using anthropometric screenings in 4,625 children under five, UNICEF registered [global acute malnutrition](#) (GAM) in 700 children, including 184 with [severe acute malnutrition](#) (SAM) and 516 with [moderate acute malnutrition](#) (MAM). While this information is not statistically representative at the national level, and therefore does not reflect the situation of the country, it provides guidance for decision-making and prioritization of interventions⁶. Furthermore, some 6,036 children (2,972 girls and 3,064 boys) under five received powered micronutrients, 1,851 PLW received multiples micronutrients and 1,687 children (893 girls and 794

¹ Vulnerable families with malnutrition, at risk of malnutrition, with one parent only, with children with disabilities, among others.

² 1 Anzoátegui, 1 Apure, 27 Bolívar, 1 Delta Amacuro, 8 Distrito Capital, 2 La Guaira, 12 Miranda, 6 Táchira, 20 Zulia.

³ Bolívar, Distrito Capital, Miranda, Táchira and Zulia.

⁴ Bolívar, Delta Amacuro, Distrito Capital, Miranda, Táchira and Zulia.

⁵ Some 443 active outpatient health centers provided services such as identification of cases and treatment of uncomplicated acute malnutrition; 24 hospitals treated acute malnutrition with complications and 76 sites were made available for the community management of acute malnutrition (CMAM) approach.

⁶ Interventions in specific municipalities of 18 states, including Anzoátegui, Apure, Aragua, Barinas, Bolívar, Carabobo, Delta Amacuro, Capital District, Falcón, Lara, Mérida, Miranda, Monagas, Portuguesa, Sucre, Táchira, Yaracuy and La Guaira.

boys) received treatment for the prevention of acute malnutrition in the form of lipid-based nutrients or nutritional supplement (LNS-MQ).

unicef | para cada niño

EVITA los parásitos en tu cuerpo siguiendo estos sencillos consejos

1	<p>Toma agua SEGURA</p>  <p>que haya sido hervida o potabilizada.</p>
2	<p>LAVA tus manos con agua y jabón</p>  <p>antes de comer y después de ir al baño.</p>
3	<p>LAVA las frutas y verduras</p>  <p>antes de consumirlas y come alimentos bien cocidos.</p>
4	<p>Evita andar DESCALZO</p>  <p>porque los parásitos pueden entrar por los pies.</p>
5	<p>BAÑATE diariamente y ponte ropa limpia</p>  <p>porque los parásitos pueden estar en la ropa sucia.</p>

por una vida **SIN** parásitos

Breastfeeding in times of COVID19, developed by UNICEF to improve care for mothers and children. This programme is expected to benefit 14,000 PLW and caregivers who will receive breastfeeding and IYCF counseling in the next four months in 152 hospitals, 19 maternity centres, 114 outpatient centres, and 54 private clinics. The objective of the training is to improve the proportion of exclusive breastfeeding among mothers of babies under six months⁸, currently at 10.7 per cent, as per information collected by UNICEF. [UNICEF's recommendation is that at least 80 per cent of children under six months are exclusively breastfed.](#)

With UNICEF's support, Nutrition Cluster partners continued strengthening capacities of technical teams, community workers and families on early detection and referral for the treatment of wasting among children under five in the COVID-19 context. Additionally, the Nutrition Cluster continues to prepare the next 2021 HNO and HRP projects.

Child Protection and Gender-Based Violence

As part of its activities to commemorate the 'International Day of the Girl Child,' UNICEF launched a nationwide campaign entitled "It's not a joke, it's violence" (*No es broma, es violencia* in Spanish). This campaign aims at creating awareness on the risks and impact of GBV in the life of women and children. Besides audio-visual material on social media, radio, and TV, UNICEF has been actively providing information and interviews on these topics in national and local radios, as well as in TV channels.

During the reporting period, UNICEF continued strengthening local child protection systems in 15 states, benefitting 8,296 children (6,222 boys and 2,074 girls) with protection measures and specialized protection services, such as legal support, psychosocial support, case management, and alternative care. In addition, UNICEF trained 27 members of the Baruta Municipality, Miranda state on Child Protection Minimum Standards in Humanitarian Action. In PASI's located in the Capital District and Miranda state, information materials were distributed for prevention of family separation, to sensitize at least 4,800 families. Guidelines for Communication with Children and Adolescents were also distributed to officials in charge of these temporary shelters.

Furthermore, 4,240 children (2,109 boys and 2,131 girls) were supported through integrated child protection programmes and services, including psychosocial support, legal assistance, case management, family support and referral to health and nutrition services. Some 261 women and children received GBV services, case management,

During screenings, 409 pregnant women (including 68 pregnant adolescents) were identified as undernourished, out of 1,714 pregnant women screened (including 267 pregnant adolescents), representing 23.9 per cent of the data collected (and 25.5 per cent for adolescents) during the reporting period. As part of its response, UNICEF provided treatment for undernourished pregnant women to improve nutritional status and reduce the risks of babies with low birth weight and infant maternal morbidity⁷.

In coordination with the ministry of health 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 C4D campaign for promotion and dissemination of key messages on prevention of intestinal parasitosis, targeting over 4.1 million children from 2 to 14 years old and 600,000 PLW nationwide from October 2020 to March 2021. During the campaign's first phase, 12 states have already initiated large-scale deworming, reaching 11,625 children from 2 to 14 years old (5,931 girls and 5,694 boys) and 939 PLW, with antiparasitic treatment and key messages in primary health care centres.

Some 1,435 health professionals (1,280 women and 155 men) from the public health sector across 24 states, completed the training of trainers programme (TOT) on Infant and Young Child Feeding Counseling (IYCF) and the virtual update course on

⁷ Tang, A.M. et al. 2016. Determining a Global Mid-Upper Arm Circumference Cut-off to Assess Malnutrition in Pregnant Women. Washington, DC: FHI 360/Food and Nutrition Technical Assistance III Project (FANTA).

⁸ WHO, 2010. Library Cataloguing-in-Publication Data Indicators for assessing infant and young child feeding practices part 3: country profiles. Exclusive breastfeeding under 6 months: Proportion of infants 0–5 months of age who are fed exclusively with breast milk.

psychosocial support and legal assistance. More than 100 children and their families have been assisted through Mobile Protection Services⁹ in vulnerable and hard-to-reach communities in four municipalities in Bolívar state.

As part of the COVID-19 response, UNICEF provided individual and remote community-based psychosocial support to children and families through its implementing partners, identifying and referring child-abuse and GBV cases to specialized programmes and services. Hotlines and online mental health and psychosocial support services, put in place by UNICEF partners, reached 29,772 children, parents and caregivers.

The Child Protection Area of Responsibility (CP AoR) is participating in the updating of the 2021 HNO and HRP. Partners have been filling a data collection survey to identify needs and child protection risks. Survey results are being used to guide analysis on the situation and for the development of the response project for the coming year.

Education



© 2020/ Teacher María Montiel. Education personnel delivering UNICEF educational supplies to the Escuela Laguna de Sinamaica located in the Sinamaica Lagoon, Guajira municipality Zulia state.

Schools continued providing distance learning¹⁰ opportunities for children at home. Lack of school materials, irregular access to connectivity and electricity services, lack of electronic devices (phones, tablets), and lack of access to other school services such as school feeding, are some of the challenges faced by families in supporting their children's education during the quarantine at home. During October, UNICEF continued supporting children and their families in educational interventions, with emphasis on feeding programmes, distribution of school materials, remote education activities and psycho-educational care. A plan was developed to distribute kits with school materials in 529 educational centres, across 10 states,¹¹ so schools can provide children with individual bags filled with notebooks, pencils, colours, geometry sets and other school supplies. To date, 163,806 children (80,241 girls and 83,565 boys) received individual school bags, of whom 12 per cent are children from indigenous populations and one per cent are children with disabilities.

Remote education activities were carried out through implementing partners benefitting 16,354 children (8,045 girls and 8,309 boys) through the delivery of guides with printed educational activities, daily

radio educational programmes, telephone follow-up and individualized attention from teachers to prioritized groups. Through the radio broadcasting programme called '[School on the Radio](#),' educational content is being disseminated daily for early childhood, primary and secondary education, reaching an audience of 3,000,392 children (1,461,100 girls and 1,538,292 boys) and 5,579,104 adults indirectly, in 19 states. Educational content is done by sharing key educational messages [informative radio capsules](#) on a daily basis. Among the population reached with radio programme, three per cent belong to indigenous populations.

In October the school feeding programme benefited 33,859 children (16,837 girls and 17,022 boys) in the states of Miranda, Capital District and Zulia. The programme currently operates through two modalities: (a) preparation of hot meals at school and delivery to students' homes, or (b) distribution of food bags for the household. In addition to children, the school feeding programme has also reached 4,785 adults (3,584 women and 1,201 men). A total of 3 per cent of beneficiaries belong to indigenous populations in Zulia state. Since the beginning of the year, 81,492 children have been reached with school feeding.

The education programme for out-of-school children provided support to 3,885 children (1,759 girls and 2,126 boys) in school leveling activities across five states: Bolívar, Capital District, Zulia, Táchira and Miranda. Among the benefitted children, 15 per cent belong to indigenous populations in Zulia state. Likewise, 2,516 vulnerable adolescents¹² (1,457 children and 1,059 children) received didactic guides and individual follow-up from a tutor in the areas of computing, administrative assistant, marketing, baking, tax accounting, computer maintenance and repair, clerical techniques, sewing, barbering, electricity and life planning.

⁹ Mobile Protection Services: multidisciplinary teams, that include psychologists, social workers, lawyers and community promoters, that go through communities in Bolívar state, providing assistance.

¹⁰ Distance learning is provided through multimodal strategies of massive diffusion: educational programming on television and radio, social networks, websites, plan of activities the press; and also activities from schools: weekly didactic guides, educational follow-up by telephone, home visits, community posters, virtual classrooms and individual attention in schools.

¹¹ Apure, Merida, Miranda, Capital District, Falcon, Lara, Zulia, Delta Amacuro, Bolivar and La Guaira.

¹² Vulnerable adolescents supported by AVEC in this programme live in vulnerable sectors of high poverty (urban, rural and indigenous) and have dropped out of school. Because of their age and surrounding context (poverty, no schooling, complex family situation) they are at risk of labour exploitation, recruitment by gangs or early motherhood/paternity. The programme provides them with the opportunity to learn job and life skills, receive social-emotional support, learning materials, food bags and options to return to the educational system in accelerated adult education programs (from age 15).

In October, 453 teachers (383 women and 70 men) received cash transfers as incentives in six prioritized states to support retention and reduce the risk of educational service delivery disruption. Also, 42 tablets were given to the regional technical teams, affiliated to the Ministry of Education in Capital District and La Guaira, to strengthen the distance education modality. Distance training sessions were held with 734 teachers (658 women and 76 men) from seven states on distance education, planning and evaluation of learning, educational use of UNICEF kits and youth training in soft skills.

For 'Mental Health Day' -celebrated on 10 October- the Education Cluster, with the support of CP AoR and partners, launched the [transmedia learning box](#), with open resources on mental health, psychosocial support and protection of children and adolescents, targeting teachers, public officials and learning communities. On 12 October, an event called 'The centrality of education for the post-pandemic world' was organized with the participation of the Global and Regional Cluster, authorities from OCHA, UNICEF and UNESCO in the country, as well as representative from CSOs. The objective of this event was to advocate for prioritizing the education sector in the 2021 humanitarian response. Additionally, the second phase of the course '[Right to Education in times of crisis](#)' organized by Save The Children and with support for the Education Cannot Wait (ECW) fund, was launched with new modules on the safe reopening of schools and humanitarian managing for civil society.

For the 2021 HRP, the Education Cluster updated the humanitarian log frame based on a Secondary Data Review (SDR) developed with the support of the Global Cluster and the annual review workshop with the Strategic Advisory Group (SAG).

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



As part of 'Global Handwashing Day' C4D coordinated a cross-sectoral campaign involving WASH and other programmes to increase the impact of hygiene promotion. As a result of the advocacy promoted by UNICEF, the ministry of education published a decree, involving teachers from all schools, to promote cultural activities with children under the framework of the event. The handwashing campaign reached all schools across the country and messages were disseminated through various channels, including radio, short text messages, instant messaging, social networks and printed material.

During 'Global Handwashing Day,' five million people were reached with handwashing messages, through radio

broadcasting, and in social media UNICEF was trending topic. With support from the private sector, key messages were disseminated via SMS, reaching over 2.6 million people.

Through remote and face-to-face activities, partners mobilized 34,530 people, including 13,032 children and adolescents. Among the activities, UNICEF's partner CEPIN (*Centro de Promoción Integral del Niño*), targeted and worked directly with 222 children from the Wayúú indigenous population; and through implementing partner Kape Kapé, material on hand washing was generated in different indigenous languages, including Pemón, Warao, Baré and Yanomami, reaching 1,541 people.

Implementing partner ASONACOP created and published 14 videos involving children on handwashing and hygiene practices from different states. ASEINC reported an active participation of 86 children with *special needs*. FUNREAV carried out a story on hand washing with sign language. Printed material was distributed in PASIs located in Gran Caracas, including 4,624 flyers promoting menstrual hygiene -bearing in mind that UNICEF WASH kits contain sanitary pads-, and 1,500 flyers guiding families on the return to distance school. More than 2,657 people received messages via instant messaging and a total of 10,637 printed material items were delivered in priority



© UNICEF/2020/Espulga. As part of activities during Handwashing Day, UNICEF -together with members of the community Ojo de Agua and partner FUNDAN -, painted a wall with key hygiene messages in the community, Baruta, Miranda state.

states including Gran Caracas (4,624), Táchira (3,378) and Zulia (2,635). This campaign is still on going as a sustainable process under the hygiene behaviour change strategy.

UNICEF also started the fourth C4D training, which aims to strengthen implementing partners' capacities on community engagement and reinforcement and generation of capacities. The training included the participation of 62 people from 37 organizations in the states of Zulia, Bolívar, Táchira, Capital District and Miranda. Additionally, 13 members of implementing partner ALINCA, Bolívar state, were trained in theory of change.

In Táchira state, 40 directors of the hospital network received key messages and materials to disseminate in the *Red Hospitalaria*. A total of 36,550 printed material items, such as posters and flyers, were distributed to the migrant attention centre (CAINNAM), as well as to implementing partners INTERSOS, ASONACOP, CISP and the Ombudsperson's office to support the implementation of the protection programmes in Táchira state. In Zulia, 33 community promoters are actively participating in community radio broadcasting and programming, promoting key family practices, reaching 900 people through radio and 2,857 people (including 917 children) face-to-face in communities in Maracaibo.

In coordination with UNICEF's health and communications sectors, UNICEF has promoted a plan to intensify the vaccination of children from 0 to 10 years old through audio-visual material, disseminated through UNICEF's social networks. With this campaign, UNICEF has reached 2,307 people through Facebook, 7,147 through Instagram and 7,495 through Twitter. One hundred and twenty-nine (129) UNICEF partners and allies in Táchira state received information in ForoChat¹³ via messaging apps, called '*Let's talk about COVID-19*' to clarify doubts about the virus, its features, myths and prevention measures.

UNICEF prepared and validated, in a participatory manner, the UNICEF Venezuela's AAP Framework, including an 18-month work plan to scale it up. In line with the work plan, a feedback mechanism for the education sector was established to allow supported schools to express their suggestions, concerns and complaints regarding the school kit distribution process.

Planning, Monitoring and Evaluation

UNICEF Venezuela's detailed reports on supplies distribution, are available through the interactive dashboard in [Tableau](#). UNICEF is using a combination of onsite follow-up, through local implementing partners, as well as other remote monitoring tools, jointly developed with UNICEF partners. Monitoring tools include tailor-made end-user monitoring surveys, to assess beneficiaries' feedback in terms of relevance, quality, timeliness and impact of specific programmes, services or supplies delivered. When face-to-face visits cannot be performed due to quarantine and restriction measures, UNICEF staff communicates with health facilities via mobile phones and messaging applications.

During October, UNICEF implemented 398 monitoring activities, 93 per cent of them carried out by staff members from the different field offices. Monitoring focused mainly on distributed supplies (79.1 per cent of activities). Most monitoring activities were conducted in health facilities (98.7 per cent). Through Third Party Monitoring (TPM), the monitoring of a sample of families with children or adolescents who have received educational materials, hygiene kits and food through the Education Cannot Wait project, was initiated - it is expected that information from approximately 1,300 families will be collected.

Supply and Logistics

In October UNICEF Venezuela ordered goods for a total value of US\$ 3.2 million, of which US\$ 2.9 million were used to purchase supplies offshore and US\$ 0.3 million for local purchases. At the same time, UNICEF Venezuela received a total of 20.1 tons of health and PPE supplies delivered by air and a total of 168.9 tons delivered by sea, including 110 tons of nutrition supplies; 7.9 tons of health supplies; 49.4 tons of education kits, and 1.6 tons of communication and visibility supplies.

UNICEF distributed 312 tons of supplies, for a total value of US\$ 1.4 million to 703 partners across the country.

Human Interest Stories and External Media

During the reporting period, UNICEF produced 464 photos and four videos to document field response and to disseminate information for resource mobilization purposes. Produced materials were posted through local, regional, and global social media channels, as well as National Committees for UNICEF.

In October, UNICEF Venezuela launched a communications campaign to prevent GBV: [#NoEsBromaEsViolencia](#) (It's not a joke, it's violence). UNICEF disseminated a [press release](#) and assets that included TV and radio spots released through a nationwide TV and radio networks reaching over 19 million people.

¹³ A ForoChat is a group created on WhatsApp, where participants are trained through submission of content, which then is complemented through the exchange of opinions and Q&A sessions among participants.

On digital channels, UNICEF Venezuela social media accounts received over 152,000 interactions (comments, likes and retweets) and 10 million impressions with messages on immunization and education response, psychosocial support, GBV prevention, and at-home learning activities. Under the framework of 'Global Handwashing Day,' a social media pack was distributed among partners and assets material received over 3,700 interactions and 216,000 impressions, in the UNICEF Venezuela channels.

Furthermore, UNICEF Venezuela launched an online campaign on humanitarian aid and the United Nations principles of neutrality, impartiality, humanitarian, and independence through the hashtag [#AsíTrabajamos](#), aimed at raising awareness on the humanitarian working principles. A series of webinars on the United Nations' humanitarian principles, were conducted by the external communication section aimed to reach staff members, civil society organizations and government partners.

Human interest stories and multimedia stories:

- Video: [UNICEF works with community promoters to identify vulnerable children and families](#)
- Video: [Clean hands save lives](#)
- Video gender-based violence campaign: [There are words that kill #NoEsBromaEsViolencia](#)
- Video gender-based violence campaign: [Words also mark #NoEsBromaEsViolencia](#)

UNICEF Venezuela: <https://www.unicef.org/venezuela/>

UNICEF Venezuela Facebook: <https://www.facebook.com/unicefvenezuela/>

UNICEF Venezuela Twitter: [@unicefvenezuela](#)

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Annex A

Summary of Programme Results (HAC)

Sector	UNICEF and Partners		Sector Response ¹⁴	
	Jan-Dec 2020 target	Total results (Jan-Oct)	Cluster Jan-Dec 2020 target	Cluster Results (Jan-Oct)
Health				
Pregnant women & new-born babies receiving maternal/neonatal life-saving services in UNICEF-supported facilities	246,900	127,324		
Children under 1 year vaccinated against measles	534,100	79,123 ¹⁵		
Nutrition				
Children under 5 years affected by severe and moderate acute malnutrition (with or without complications) admitted for treatment.	20,400	3,296 ¹⁶	31,370	3,798
Caregivers receiving infant and young child feeding counselling for appropriate feeding of children under 2 years	155,500	32,410 ¹⁷	483,235	32,829
WASH				
People accessing basic WASH (safe water and sanitation) services at the community level	2,000,000	1,920,118	2,214,000	1,938,797
People receiving basic hygiene information and/or essential hygiene products	1,275,000	615,652 ¹⁸	1,567,200	710,155
Health and nutritional care facilities, benefiting from WASH interventions	225	182	281	242
Child Protection and Gender Based Violence				
Girls and boys supported through integrated individual child protection services	95,500	99,854	99,755	114,823
Education				
Children aged 4-18 years in schools who received education materials	1,521,000 ¹⁹	375,804 ²⁰	1,521,000	387,564

¹⁴ Sector Response includes UNICEF implementing partners and cluster response.

¹⁵ It should be noted that vaccination campaigns have also been affected by the COVID-19 pandemic. UNICEF's health sector aims at reverting the trend by supporting and intensifying the mobilization of vaccination brigades throughout the country. A retrospective loading of vaccination data was carried out.

¹⁶ 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, the nutrition sector has 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.

¹⁷ This indicator's target is expected to be reached by December 2020 as the sector will be reporting several activities of information dissemination on radio and social networks in the coming months. The sector has also only recently trained a network of community agents who will help to significantly increase the report of this indicator. The training of community agents took longer than expected due to COVID-19 restrictions.

¹⁸ This indicator's target was linked to UNICEF Venezuela's HAC appeal. Less than 50 per cent of the resources needed to carry out the activity and reach the target have been mobilized. Also, access to water and support to health facilities have been prioritized. These factors will likely lead to an underachievement of the target by the end of the year.

¹⁹ The target for this indicator was revised in late January, after the HAC was launched, reason why is different to the one that appears on the UNICEF Venezuela 2020 HAC.

²⁰ 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 starting from 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)

COVID 19 Response Pillar ²¹	UNICEF and Partners	
	Apr-Dec 2020 target	Total results
Provision of critical medical and water, sanitation and hygiene (WASH) supplies and improving Infection Prevention and Control (IPC)		
Number of healthcare workers within health facilities and communities provided with Personal Protective Equipment (PPE)	60,000	90,587 ²²
Continuity of health care for women and children		
Health care workers trained in detecting, referral and appropriate management of COVID-19 cases	20,000 ²³	25,208
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.	142,000	86,404
WASH Services		
Number of people reached with critical WASH supplies (including hygiene items) and services	1,500,000	1,583,628 ²⁴
Access to continuous education, child protection and GBV services		
Number of children, parents and primary caregivers provided with community based mental health and psychosocial support	60,000 ²⁵	106,542
Children supported with distance/home-based learning	400,000 ²⁶	4,084,255 ²⁷
Risk Communication and Community Engagement (RCCE)		
Number of people engaged on COVID-19 through RCCE actions	1,000,000	455,342

²¹ Indicators have been adapted to reflect UNICEF Global COVID-19 indicators.

²² 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.

²³ 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.

²⁴ This indicator includes people reached in health services, including those in new health facilities included in the response.

²⁵ 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.

²⁶ This target covers only children reached in a direct way.

²⁷ As of past month, indirect reach is being reported in addition to the direct reach that had been reported in previous months. The number of children supported with distance / home-based learning reached indirectly is 3,945,094.

Annex C

HAC Funding Status²⁸

Sector	Requirements	Funds available			Funding gap	
		Humanitarian resources received in 2020	Other resources used in 2020	Resources available from 2019 (Carry-over)	\$	per cent
Nutrition	12,745,000	4,061,274	0	4,712,222	3,971,504	31
Health	22,290,000	10,810,250	80,400	7,895,080	3,504,270	16
WASH	58,300,000	10,525,392	369,957	11,327,694	36,076,957	62
Child Protection	14,400,000	4,557,677	0	4,856,750	4,985,573	35
Education	45,512,000	6,598,875	0	8,823,452	30,089,673	66
Total	153,247,000	36,553,469	450,357	37,615,198	78,627,976	51

COVID-19 Funding Status²⁹

Sector	Requirements	Funds available		Funding gap	
		Humanitarian resources received in 2020	Other resources used in 2020	\$	per cent
Risk communication and community engagement (RCCE)	2,288,940	866,730	44,204	1,378,006	60
Infection Prevention and Control (IPC)	21,321,144	7,726,932	0	13,594,212	64
Continuity of Health Care and Nutrition Services	2,372,985	1,890,159	0	482,826	20
Access to continuous education, child protection and GBV services	627,870	1,439,178	1,026,134	0	0
Data collection social science research for public health decision making	217,581	85,721	4,372	127,489	59
Total	26,828,520	12,008,719	1,074,710	13,745,091	51

²⁸ As defined in [Venezuela 2020 Humanitarian Appeal](#) launched on 05 December 2019 for a period of 12 months.

²⁹ As defined by [UNICEF COVID-19 Global Response 2020 requirements](#) launched on 15 March 2020, for a period of nine months.