

HUMANITARIAN RESPONSE PLAN

HUMANITARIAN
PROGRAMME CYCLE
2021
JUNE

Update 2021 VENEZUELA



About this document

This document is consolidated by OCHA on behalf of the Humanitarian Country Team (HCT) and partners. It presents a prioritized joint strategic response plan, based on a common understanding of the main humanitarian needs.

COVER PHOTO

Returnees in San Antonio de Táchira.
Photo: OCHA/Gema Cortés

Get the latest updates



OCHA coordinates humanitarian action to ensure crisis-affected people receive the assistance and protection they need. It works to overcome obstacles that impede humanitarian assistance from reaching people affected by crises, and provides leadership in mobilizing assistance and resources on behalf of the humanitarian system.

www.unocha.org/venezuela

twitter.com/OCHA_Venezuela

Humanitarian RESPONSE

Humanitarian Response aims to be the central website for Information Management tools and services, enabling information exchange between clusters and IASC members operating within a protracted or sudden onset crisis.

www.humanitarianresponse.info/en/operations/venezuela



Humanitarian InSight supports decision-makers by giving them access to key humanitarian data. It provides the latest verified information on needs and delivery of the humanitarian response as well as financial contributions.

<https://hum-insight.info/>



The Financial Tracking Service (FTS) is the primary provider of continuously updated data on global humanitarian funding, and is a major contributor to strategic decision making by highlighting gaps and priorities, thus contributing to effective, efficient and principled humanitarian assistance.

fts.unocha.org/

[countries/242/summary/2021](http://fts.unocha.org/countries/242/summary/2021)

Table of Contents

05	Response Plan Overview
08	Evolution of the context
10	Focus of the response in 2021
16	Objectives of the humanitarian response
18	Overview of the sectoral response
19	Humanitarian access and operational capacity
27	Accountability to Affected Populations and Protection from Sexual Exploitation and Abuse
32	Monitoring
33	Annexes

MARACAIBO/ZULIA STATE, VENEZUELA

The Wayuu are an indigenous group from the Guajira peninsula in northwestern Venezuela. Families living on the outskirts of Maracaibo benefited from CEPIN's (Centro de Promoción Integral del Niño) support to cover their food needs.
Photo: OCHA/Naomi Frerotte



Response Plan Overview

TARGET POPULATION OF THE 2021 HRP	FINANCIAL REQUIREMENTS (US\$)	PARTNERS	PROJECTS
4.5M	708.1M	144	223

This document is an update of the 2020 Humanitarian Response Plan (HRP), given the Plan was published in July 2020 and the main considerations and trends remain valid. It is based on a revised analysis of the five critical issues identified in 2020: health, malnutrition and food insecurity, human mobility and protection risks, provision of and access to essential services, and coping mechanisms of those affected. It considers the impact of the COVID-19 pandemic on those critical issues according to new sources of information available, and takes into account the necessary adjustments to the response modalities, based on the actual humanitarian response since March 2020.

Based on the demonstrated operational capacity of the partners, the Plan will seek to provide assistance to 4.5 million of the most vulnerable people in 2021, of which 56 per cent are women and girls, and 44 per cent are men and boys. Children and adolescents represent 35 per cent of this target population.

The three strategic objectives of the 2020 Plan remain valid: 1) to ensure the survival and well-being of the most vulnerable people; 2) contribute to the sustainability of essential services and strengthen resilience and livelihoods; and 3) strengthen institutional and community mechanisms to prevent, mitigate and respond to protection risks.

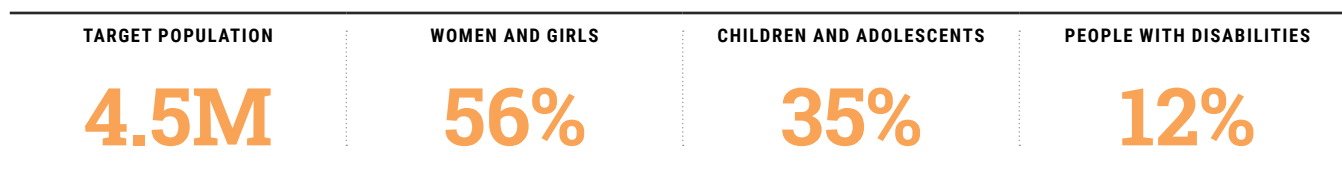
To achieve these objectives, the 2021 Plan includes 223 projects from 144 organizations,

including the United Nations Agencies, Funds and Programmes (AFPs) and national and international non-governmental organizations (NGOs), which will work in a coordinated manner through eight Clusters and two Areas of Responsibility (AoR), and under the leadership of the Humanitarian Country Team (HCT).

Implementation of these projects requires the mobilization of US\$708.1 million, and efforts are ongoing with the donor community to facilitate resource mobilization in a timely manner and increase funding for the response. The implementation of the Plan also requires maximum support from and coordination with the authorities to ensure humanitarian access to the most vulnerable people and promote an operational environment that facilitates and protects humanitarian work.

The 2021 update should be considered in the light of the 2020 HRP and other key documents such as the Joint Operating Principles for Venezuela, which outlines common standards for humanitarian organizations and the commitment to the humanitarian principles of humanity, impartiality, neutrality and independence.

Target Population of the 2021 HRP



STATE	TARGET POPULATION
Zulia	1,0 M
Tachira	745 K
Distrito Capital	675 K
Miranda	665 K
Bolivar	569 K
Anzoategui	373 K
Apure	276 K
Sucre	227 K
Monagas	204 K
Carabobo	189 K
Lara	171 K
Guarico	159 K
Merida	142 K
Falcon	140 K
La Guaira	99 K
Trujillo	98 K
Barinas	95 K
Amazonas	94 K
Aragua	88 K
Portuguesa	66 K
Delta Amacuro	60 K
Yaracuy	46 K
Nueva Esparta	41 K
Cojedes	17 K

HUMANITARIAN RESPONSE BY SEX

SEX	TARGET POPULATION	% TOTAL
Boys	765 k	17%
Girls	810 k	18%
Men	1,22 k	27%
Women	1,71 k	38%

HUMANITARIAN RESPONSE BY AGE

AGE GROUP	TARGET POPULATION	% TOTAL
Children and adolescents (0-17)	1,57 M	35%
Adults (18-60)	2,52 M	56%
Elderly (60+)	440 k	9%

HUMANITARIAN RESPONSE FOR PEOPLE WITH DISABILITIES

	TARGET POPULATION	% TOTAL
People with disabilities	540 k	12%

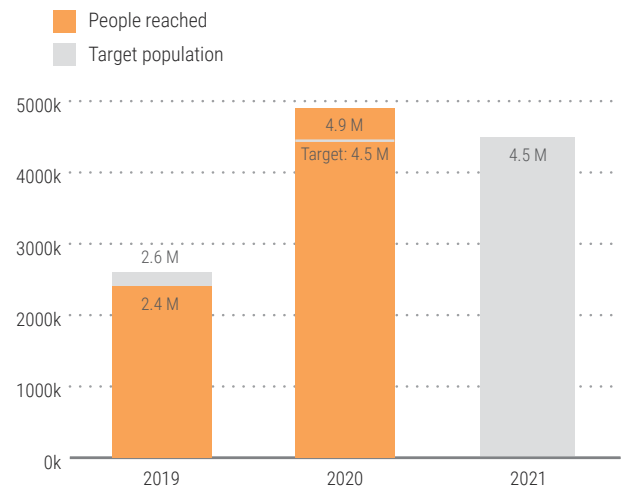
HRP Key Figures

FINANCIAL REQUIREMENTS BY CLUSTER

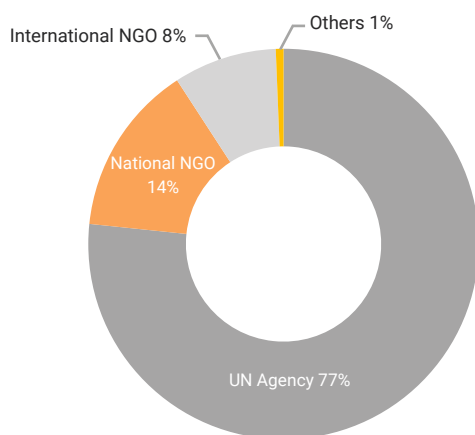
CLUSTER	FINANCIAL REQUIREMENTS (US\$)
Health	\$234.3 M
Water, Sanitation and Hygiene	\$119.1 M
Education	\$104.8 M
Food Security and Livelihoods	\$89.4 M
Protection*	\$75.7 M
General Protection	\$26.5 M
AoR Child Protection	\$22.5 M
AoR Gender Based Violence	\$26.7 M
Shelter, Energy and Non-food items	\$45.0 M
Nutrition	\$32.7 M
Coordination and Logistics	\$7.0 M

* The Protection funding requirement includes all the AoR requirements which form part of the Protection Cluster (Child Protection and Gender-based Violence)

PEOPLE REACHED AND TARGET POPULATION 2019-2021



FUNDING REQUIRED BY TYPE OF ORGANIZATION



1. Evolution of the context

The humanitarian situation presented in the Humanitarian Response Plan with Humanitarian Needs Overview 2020 has been affected by the COVID-19 pandemic.

As of 16 May 2021, the authorities had confirmed 215,301 cases of COVID-19. As soon as the first positive cases were reported in Venezuela, the Government responded in a timely manner and established a nationwide 'State of Alarm' starting on 13 March 2020, which initially contributed to reducing the spread of the virus. After an exponential increase of cases in August and September, the rate of confirmed cases stabilized, although experienced a new acceleration in March 2021¹. The situation has been managed within existing institutional response capacities, with the support of humanitarian action and a focus on preventive measures, procurement of supplies and vaccines, and the strengthening of the health system response capacity. However, limited access to personal protective equipment (PPE), safe water services and hygiene products, as well as limited testing capacity for COVID-19 and difficulties in accessing vaccines, have been a challenge for the country and the response, especially since the increase in cases from March 2021.

As in other countries in the region, measures to prevent the pandemic have had an impact on the economy and people's livelihoods. The Economic Commission for Latin America and the Caribbean (ECLAC) estimated that Venezuela's Gross Domestic Product (GDP) would contract by 30 per cent by the end of 2020². This is due, in part, to a decline in oil production, a reduction in global oil prices and the impact of international sanctions, among others³. With restrictions on gasoline imports and affected local production capacity, fuel supply problems observed since 2019 intensified during 2020. Lack of sufficient fuel availability remains a priority issue, affecting all sectors of the economy, including food production and transportation. The loss

of revenue has limited investment in public services and continues to impact the supply of electricity, water, domestic gas and telecommunications. As a result, these services have experienced greater failures during the pandemic.

The pandemic has forced many businesses to close or reduce activities and has also led to a contraction in the volume of remittances from Venezuelan migrants abroad. Additionally, household income has been affected as the cost of living continues to rise due to inflation, which has increased by a cumulative 2,960 per cent between January and December 2020⁴. The trend mentioned in the 2020 HRP continues: frequent revisions of the minimum wage and the State cash transfer programs are not able to compensate for the increase in prices for the most vulnerable that do not have access to other sources of income or foreign currency.

Due to the economic impact of the pandemic in the region, loss of livelihoods, evictions and growing displays of xenophobia, thousands of Venezuelans decided to return to their country. The United Nations System (UNS) estimates that 151,000 people entered Venezuela from mid-March 2020 to early March 2021⁵. As the flow of returnees increased in April 2020, the Government established Comprehensive Social Service Points (*Puntos de Atención Social Integral* or PASI), preventive isolation centers for people entering the country. The PASI were part of the health protocol to prevent the spread of COVID-19 and each returnee was required to remain in quarantine for 14 days in one of these shelters. The humanitarian community adapted its response to improve the conditions and services at the PASI, particularly in border areas and in La Guaira.

In September 2020, the flow of people entering Venezuela decreased. At the same time, due to the reactivation due to the reactivation of economies in the region, there has been a documented movement

of people from the center of the country towards border areas in order to cross into Colombia and/or other neighboring countries or to conduct pendular migrations. As the borders have been officially closed since March 2020, most of the people who leave the country cross through irregular routes, exposing themselves to protection risks, especially women, children and adolescents.

During the intense rainy season (May to November 2020), there were more than 63 tropical storms reported, some of them causing rivers and streams to overflow, as well as flooding in several communities

in states such as Aragua, Falcon, Lara, Portuguesa, Sucre, Tachira and Zulia. According to reports from authorities and information from local media, people in these communities suffered from the partial or total loss of their homes, personal belongings and crops. Another season of heavy rain is forecast for 2021.

GUASDUALITO/APURE STATE, VENEZUELA

A doctor explains to a group of returnees how to maintain social distance while waiting for a consultation at a PASI, where they must quarantine for COVID-19 upon returning to Venezuela.

Photo: OCHA/Gema Cortés



2. Focus of the response in 2021

Based on increased operational capacity, the humanitarian community in Venezuela will seek to provide assistance to 4.5 million of the most vulnerable people in 2021, of which 56 per cent are women and girls, and 44 per cent are men and boys. Children and adolescents represent 35 per cent of this target population.

With the implementation of the 2020 Plan, some form of assistance or services were provided to 4.9 million people between January and December. This number is based on the monthly monitoring reports provided by humanitarian organizations with regards to the people reached by their activities, which are collected and analyzed at the cluster and intersectoral level, avoiding overlaps. While all the targeted population was reached with some form of assistance, which was mainly due to interventions at scale in health (4.9 million people reached by Cluster partners until December) and WASH (4.1 million people reached by Cluster partners until December), this does not mean that all of their multi-sectoral needs have been met. There are humanitarian activities that need to be provided on a regular basis to be effective, such as food assistance and the distribution of medicines or medical supplies. It is also important to consider that people who benefited from one activity, such as the rehabilitation of drinking water facilities, may have needs in other areas such as access to distance learning or sexual and reproductive health services. The gap between funding and needs is still considerable as the humanitarian response in 2020 received US\$257.9 million with the HRP 23.1 per cent funded. This impacted the humanitarian community's ability to provide an effective response in all critical areas identified in the Plan, including food security, shelter, energy and non-food items, and education.

INTERSECTORAL NATURE OF THE RESPONSE

NUMBER OF CLUSTERS	NUMBER OF PROJECTS	% OF THE TOTAL OF PROJECTS
Response activities in 1 cluster	165	74%
Response activities in 2 clusters	27	12%
Response activities in 3 clusters	18	8%
Response activities in 4 clusters	9	4%
Response activities in 5 clusters	2	1%
Response activities in 6 clusters	0	0%
Response activities in 7 clusters	2	1%
TOTAL	223	100%

The number of people targeted in the 2021 Plan corresponds to the number of people that would receive multi-sectoral assistance in 2021 with the required funding and access. Each Cluster identified the population target based on their partner's projects⁶. The aim in 2021 is to reach the target population through large-scale infrastructure interventions that reach a significant number of people (e.g., in the Health and WASH clusters), and through the increased operational capacity and number of humanitarian organizations contributing to the coordinated and prioritized response in the Plan. The total target population does not include the population that would be reached with the support of the UNS for the deployment of the COVID-19 vaccine through the COVAX mechanism, which is currently estimated to be approximately 5.7 million people⁷. The Venezuelan State, for its part, aims to vaccinate 23 million people in 2021, including the efforts of the UNS.

Increased operational costs to sustain and expand the humanitarian response in the context of the pandemic resulted in a limited increase in financial requirements for many projects in 2021. However, the total financial requirements for the 2021 HRP decreased compared to last year due to adjustments to the World Food Program (WFP) project. On 19 April 2021, WFP announced its entry in the country, a step forward to increase response capacity, especially for food security. The operation aims to reach 185,000 children in 2021, particularly in preschool and special education facilities, and to progressively increase its reach to 1.5 million students by the 2022-2023 school year.

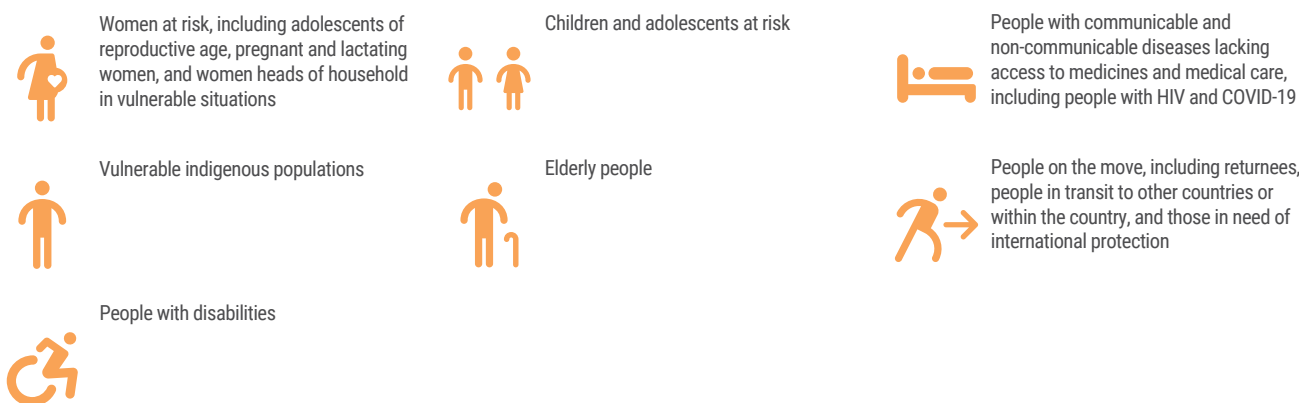
The three inter-related strategic objectives of the humanitarian response set out in the 2020 HRP remain: 1) to ensure the survival and well-being of the most vulnerable people; 2) to contribute to the sustainability of essential services and to strengthen resilience and livelihoods; and 3) to strengthen institutional and community mechanisms to prevent, mitigate and respond to protection risks. In addition, there are 11 specific objectives to strengthen the link between the strategic level and sector interventions (see section 3). Ensuring an integrated approach to interventions is key to responding to the multisectoral needs of the affected population, and in 2021 efforts will be strengthened to design and implement intersectoral interventions with more impact. The intersectoral nature of the humanitarian response will be implemented in accordance with humanitarian principles, under a rights-based approach and

taking into consideration the differentiated needs of age groups, gender and diversity. The centrality of protection will be mainstreamed in all sectors of the response, promoting effective access, security and dignity in humanitarian aid, ensuring accountability to affected populations and their participation and empowerment.

Priority population groups

In terms of priority population groups, this strategy takes into account new aspects related to the impact of COVID-19 in addition to the variables of age, gender and diversity included in the 2020 HRP, as well as the global commitment to leave no one behind.

Within these target populations, the humanitarian response will focus on the most vulnerable people. Some additional vulnerable groups require particular attention from some clusters, such as health workers who face higher risks of infection from COVID-19, people deprived of their liberty and/or LGBTI people.



Geographic Prioritization

The intersectoral prioritization analysis of the 2020 Plan remains in effect, and therefore, in 2021, the response will focus on the states where a greater intersectoral severity of needs and/or a greater percentage of people with different humanitarian requirements.

The geographic prioritization of the plan will be regularly updated in coordination with the Venezuelan State.

Some activities in other states are also included, based on the needs identified by each cluster in its sectoral prioritization process.

GEOGRAPHIC PRIORITIZATION

PRIORITY	STATE
Priority 1	Amazonas, Bolivar, Delta Amacuro, Monagas, Sucre, Tachira, Zulia.
Priority 2	Anzoategui, Apure, Capital District, Falcon, Guarico, La Guaira, Lara, Merida, Miranda, Nueva Esparta

Source: EHP estimate based on multiple sources, 2020.

The geographical prioritization of the Humanitarian Response Plan 2020 remains in effect. For more information see:

https://www.humanitarianresponse.info/sites/www.humanitarianresponse.info/files/documents/files/venezuela_hrp_2020_es_vf.pdf

URBANIZATION GUAYANA, UNARE, BOLÍVAR STATE, VENEZUELA

Paulina, 10 years old, is vaccinated at a health center located in the state of Bolívar where UNICEF distributes vaccines against polio, yellow fever, tetanus toxoid and tuberculosis (BCG). Part of the response focused on providing basic health services for mothers, girls and boys, particularly in prenatal care, deliveries in health facilities and immunization activities.

Photo: UNICEF/2020/Urdaneta



Humanitarian Principles

The humanitarian organizations in Venezuela that are part of the Humanitarian Response Plan will continue to operate in 2021 under the humanitarian principles of humanity, neutrality, impartiality and independence and the Joint Operating Principles for Venezuela.

To improve understanding of the humanitarian principles and strengthen their practical application, six workshops were held in September and October 2020, in which 115 people from 86 humanitarian organizations participated. In 2021, these trainings will be extended to humanitarian actors and other stakeholders, with the objective of strengthening the implementation of these principles and facilitating access and acceptance of humanitarian action. Strengthening all stakeholders' understanding of the functioning and implementation methods of humanitarian aid will be critical.

Humanitarian Communication

In 2021, the HCT communication strategy will be further implemented. This initiative has gradually increased the visibility of the humanitarian response in Venezuela and the acceptance of principled humanitarian action, as well as promoted and advocated for the non-politicization of humanitarian aid. Some of the activities carried out include joint campaigns on social media networks, high level visits by UN officials, press releases and workshops on humanitarian communication.

The Humanitarian Communication Group has developed a series of recommendations for updating the communication strategy in 2021, including strengthening the focus on communicating with communities or providing workshops on communication based on humanitarian principles. In addition, greater visibility will be given to the action of local humanitarian organizations.

Joint information and sensitization efforts for the prevention of COVID-19 will also be maintained. The activities carried out in 2020 made it possible to disseminate information about the pandemic and address fake news with SMS campaigns, reaching 9 million and 2.6 million people respectively. There

will be greater focus on high-risk groups for COVID-19, including people with disabilities and indigenous populations without access to telecommunications or information in their own languages.

Gender, age and diversity in the humanitarian response

In the 2020 humanitarian programme cycle, the UNS and partners continued strengthening the incorporation of a gender-based approach in humanitarian needs analysis and project design. This was achieved through trainings dedicated to mainstreaming gender in humanitarian action and the use of the Gender and Age Marker (GAM). GAM is a tool that encourages humanitarian actors to reflect on the specific needs of the population based on their gender and age and allows for planning a differentiated and inclusive response for women and men, girls and boys and LGBTI people.

Of the 223 projects approved for the 2021 HRP, 99 per cent (221 projects) used this marker. Of the 221 projects that applied GAM, 86 per cent (191) plan to respond to identified gender and age differences.

Inclusive Humanitarian Action

In 2021, efforts will be redoubled to strengthen the inclusion of people with disabilities in humanitarian action. Of all the projects included in the 2021 HRP, 87.1 per cent report consulting with people with disabilities and/or their representative organizations as part of the needs assessment for project design. According to the consolidated data of the Plan's projects, it is estimated that people with disabilities represent 12 per cent of the target population, and efforts will be made to strengthen their visibility in the tools that monitor the response.

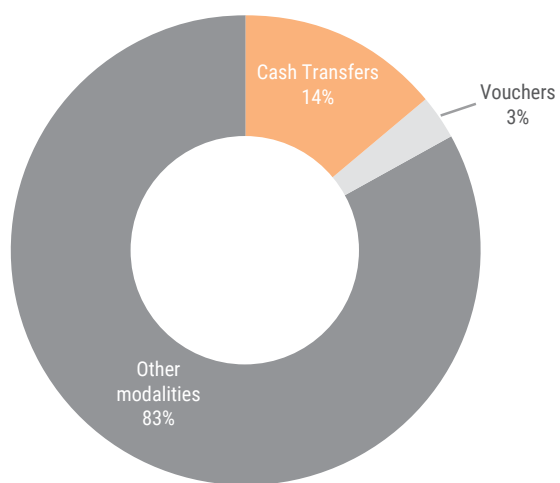
Cash Transfer Programs

Globally, cash-based interventions (CBIs) are a response modality recognized by the Inter-Agency Standing Committee (IASC). During the pandemic, they have had a key role in several countries to ensure continuity of the response and offer safe options for humanitarian interventions. Plus, CBIs have contributed to mitigate the socioeconomic impact of COVID-19.

Since early 2021, efforts are underway with the authorities to resume CBIs, ensuring current legislation is respected, and coordination takes place in their implementation.

If there is an agreement with the authorities to implement CBIs, the 2021 HRP will include 56 projects with cash as the proposed implementation modality, including 47 that would use cash transfers and 25 vouchers.

PERCENTAGE OF THE 2021 HRP BUDGET FOR CASH-BASED INTERVENTIONS (PENDING APPROVAL)



Source: CBI analysis from the projects on HPC tools 2021

NUMBER OF PROJECTS WITH A CASH COMPONENT (PENDING APPROVAL)

CLUSTER	NUMBER OF PROJECTS	% OF THE TOTAL OF PROJECTS
Food Security and Livelihoods	22	9.8%
Protection	21	8.4%
Education	18	8.1%
Water, Sanitation and Hygiene	11	4.9%
Health	8	3.6%
Nutrition	8	3.6%
Shelter, Energy and Non-food items	4	1.8%
Coordination and Logistics	1	0.4%
TOTAL	56/223	25%

Risk Management, Disaster Preparedness and Response

In 2020, cooperation efforts continued with the National Risk Management System through the implementation of a plan of action aimed at strengthening Civil Protection capacities. Among other UNS actions, the United Nations Office for the Coordination of Humanitarian Affairs (OCHA) facilitated national trainings on logistics in emergencies and the humanitarian architecture for 110 civil protection for 110 civil protection, firefighting and armed forces officials.

In July 2020, within the framework of the National Rain Plan, the National Risk Management System in Venezuela identified 3,621 vulnerable areas nationwide⁹. In the context of the rainy season (May to November 2020) and its impact on communities

in states such as Aragua, Falcon, Tachira and Zulia, support was provided to local authorities through coordination and complementarity of the response by humanitarian partners.

In 2021, supporting the preparedness and risk management efforts will be a priority. This includes reinforcing liaison and coordination with Civil Protection by strengthening its institutional capacities and those of the volunteer corps with response capacity. The UN and partners will also work together in the design of contingency plans that will allow to respond to the main disaster risks identified in the different geographical areas of the country.

ZORCA/TACHIRA STATE, VENEZUELA

Many municipalities such as Zorca, Junin, Bolivar or San Cristobal suffered the effects of the November 2020 floods. To assist the needs of families, different humanitarian organizations delivered basic necessities kits.

Photo: UNHCR/Hugo Quintero



3. Objectives of the humanitarian response

La respuesta en 2021 se mantendrá enfocada en los problemas críticos identificados en el 2020, a los cuales corresponden los 11 objetivos específicos detallados abajo.

Strategic Objective 1

Ensure the survival and well-being of the most vulnerable people through a multi-sectoral response under a rights-based approach, including age, gender and diversity dimensions.

#	SPECIFIC OBJECTIVES	TARGET POPULATION 2021 PLAN
SO 1.1	Reduce the vulnerability of affected people to mortality and morbidity risks from communicable, non-communicable and mental health diseases by improving their access to basic goods and services related to health, water and sanitation, incorporating age, gender and diversity dimensions.	3.5 M
SO 1.2	Enhance sexual and reproductive health with special emphasis on maternal and child health by strengthening access to referral goods and services with attention to the age, gender and diversity dimensions.	500 k
SO 1.3	Reduce the prevalence of malnutrition and severe food insecurity in children under age five, pregnant and lactating women and other vulnerable groups.	875 k
SO 1.4	Strengthen the physical, mental and psychosocial well-being of people suffering from different forms of violence, exploitation, neglect and abuse, with attention to age, gender and diversity dimensions.	460 k

Strategic Objective 2

Contribute to the sustainability of essential services and strengthen the resilience and livelihoods of the most vulnerable people incorporating age, gender and diversity dimensions.

#	SPECIFIC OBJECTIVES	TARGET POPULATION 2021 PLAN
SO 2.1	Strengthen food security of the most vulnerable people by improving their access to food and supporting the restoration, maintenance and protection of livelihoods, incorporating gender, age and diversity dimensions.	160 k
SO 2.2	Improve equal and safe access to essential goods and services in the areas of health, water and sanitation, education, electricity and energy for cooking for the most vulnerable populations, seeking appropriate quantity, quality and sustainability of service provision, incorporating age, gender and diversity dimensions.	3.8 M
SO 2.3	Guarantee access to adequate and age-gender sensitive shelter and energy provision for people on the move who are in informal settlements, homeless people and those at risk of displacement.	300 k
SO 2.4	Facilitate access to legal documentation for affected people, incorporating age, gender and diversity dimensions.	530 k

Strategic Objective 3

Strengthen institutional and community mechanisms to prevent, mitigate and respond to protection risks faced by affected people, in accordance with humanitarian principles and respect for human rights.

#	SPECIFIC OBJECTIVES	TARGET POPULATION 2021 PLAN
SO 3.1	Prevent, mitigate and respond to the protection risks associated with human mobility.	650 k
SO 3.2	Prevent, mitigate and respond to risks associated with gender-based violence, with a focus on sexual exploitation and abuse.	900 k
SO 3.3	Prevent, mitigate and respond to violence, abuse, neglect and exploitation of children and adolescents.	730 k

* The target population of specific objectives is the maximum target population of the indicators related to the corresponding sectoral indicators. For more information, please consult the annexes.

SAN CRISTOBAL/TACHIRA STATE, VENEZUELA

To respond to the humanitarian needs of people returning to Venezuela from other countries, portable showers have been installed at the PASIs, among other basic services. The water tanks must be refilled periodically.

Photo: OCHA/Gema Cortés




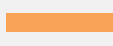
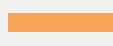





























4. Overview of sectoral response

The eight active clusters of the 2020 HRP are maintained: Shelter, Energy and Non-food items; Water, Sanitation and Hygiene; Education; Logistics; Nutrition; Protection (with the AoRs of Child Protection and Gender-based Violence); Health; and Food Security

and Livelihoods. The Cluster plans of the 2020 HRP will remain similar in 2021. Only a few changes will be included at the activity and indicator levels to take into account the operational adjustments needed in the COVID-19 context.

FINANCIAL REQUIREMENTS (US\$)	PARTNERS	PROJECTS	TARGET POPULATION OF THE 2021 HRP
708,1 M	144	223	4,5 M*

PROJECTS AND FINANCIAL REQUIREMENTS BY CLUSTER

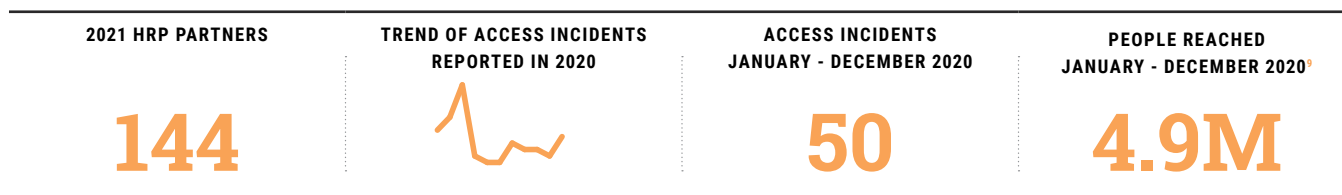
CLUSTER	REQUIREMENTS	PARTNERS**	NUMBER OF PROJECTS	TARGET POPULATION OF THE 2021 HRP*
 Health	\$234.3 M 	38	53	4,4 M 
 Water, Sanitation and Hygiene	\$119.1 M 	37	40	4,0 M 
 Education	\$104.8 M 	40	44	1,5 M 
 Food Security and Livelihoods	\$89.4 M 	54	61	0,7 M 
 Protection***	\$75.6 M 	61	67	2,4 M 
 General Protection	\$26.5 M 	53	50	0,8 M 
 AoR Child Protection	\$22.5 M 	44	40	1,1 M 
 AoR Gender Based Violence	\$26.7 M 	48	48	0,5 M 
 Shelter, Energy and NFI	\$45.0 M 	24	25	1,4 M 
 Nutrition	\$32.7 M 	35	34	0,9 M 
 Coordination and Logistics	\$7.0 M 	8	9	

* The target population of the 2021 HRP corresponds to the number of people that would receive inter-sectoral assistance in 2021 with the required funding and access. Each cluster identified its target population based on the projects presented by humanitarian partners, focused on direct assistance to beneficiaries.

** Some partners participate in more than one project

*** The Protection funding requirement includes all the AoR requirements which form part of the Protection Cluster (Child Protection and Gender-based Violence)

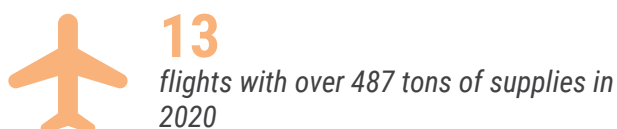
5. Humanitarian access and operational capacity



Humanitarian Access

Access challenges

In December 2020, airspace for commercial flights reopened after being closed for more than eight months. During the pandemic, humanitarian flights organized by WFP from Panama and Mexico facilitated the entry and exit of humanitarian personnel from the UNS and Red Cross / Red Crescent movement. In terms of cargo, 13 humanitarian flights were organized with over 487 tons of supplies in 2020.



Source: information from humanitarian partners

For movements within the country during the weeks of strict quarantine, a mechanism was set up at the national level to request authorization. In addition, in some states, military authorities at the state level also managed the issuance of 'salvoconductos' (movement permits). To address fuel shortages, agreements have been reached in some states with local authorities.

Despite these joint solutions, challenges to the mobility of humanitarian actors due to COVID-19 containment measures persist. Fuel shortages, one of the main challenges in the country, continue to generate delays

and suspension of some activities or services, as well as an increase in operational costs, especially outside Caracas. Of the 50 access incidents reported by humanitarian partners (most of them NGOs), between January and December 2020, through the OCHA reporting tool, many are related to the delay or suspension of humanitarian activities due to mobility restrictions or additional controls associated with the preventative COVID-19 measures or the lack of the transit permits required by the authorities in the context of the pandemic.

The COVID-19 pandemic and some of the measures established to contain it have impacted the bureaucratic and administrative procedures related to humanitarian partners. Staff reduction in the institutions in charge of carrying out these procedures has delayed since mid-2020 the entry of international civil servants. On the other hand, international NGO staff face specific challenges, which have been exacerbated by the suspension / reduction of commercial flights during the pandemic. As of December 2020, more than 85 people from 21 international NGOs were awaiting to enter the country. The situation has, however, improved with the resumption of some commercial flights. Beyond this challenge, international NGOs, a key actor in the Plan's implementation, continue to face limitations

in importing humanitarian supplies, obtaining *salvoconductos*, accessing gasoline for mobility within the country, and getting visas for the entry of their personnel, among others. National NGOs also have difficulties in registering and updating their legal documents.

Several cases of monitoring and investigation of NGO activities and offices have been reported to UN leadership, especially in the last months of 2020 and beginning of 2021, concerning NGOs with projects in the HRP. A liaison system has been established with the relevant authorities to elevate these situations and mitigate them, and efforts to strengthen trust and dialogue among all stakeholders have continued in order to avoid this type of incident in 2021. As highlighted in the Joint Operating Principles for Venezuela, ensuring the respect and protection of humanitarian personnel by all stakeholders is critical for them to perform their functions and for the implementation of the Humanitarian Response Plan.

Access Strategy

In September 2020, and within the framework of the 2020 HRP, the HCT adopted an Access Strategy that guides continued efforts to preserve and increase the operational space of humanitarian actors, including the UNS and national and international NGOs.

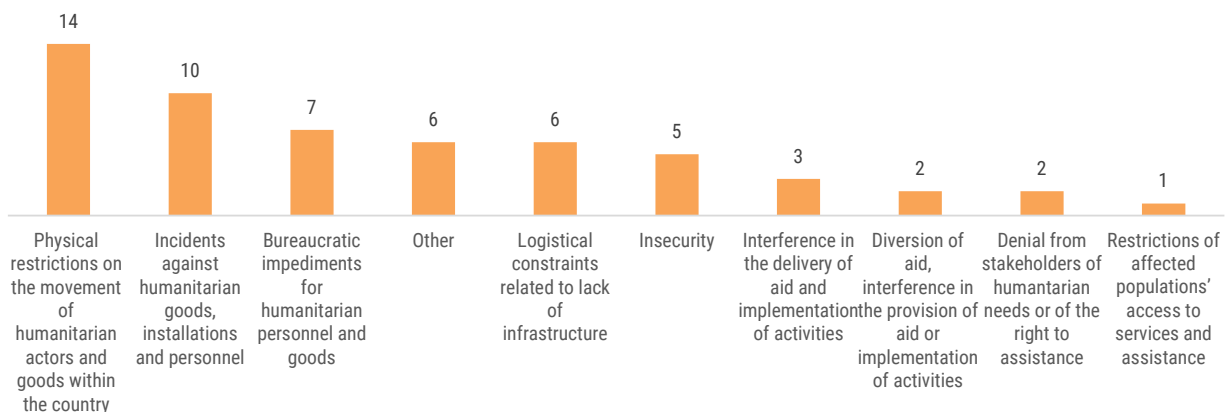
The Strategy focuses on four main areas: politicization of humanitarian assistance; bureaucratic impediments; physical constraints and infrastructure; and mobility restrictions due to COVID-19. This initiative also emphasizes the need to strengthen analytical capacity on humanitarian access at the national level and in the field, especially in priority states.

At the national and local levels, the Resident Coordinator/Humanitarian Coordinator and OCHA work with authorities and other stakeholders to facilitate both access to target populations and the movement of humanitarian goods and personnel, including national and international NGOs.

International NGOs Registration

On October 27, 2020, a Joint Resolution was published in the Official Gazette indicating the special norms for the registration of non-governmental associative organizations not based in Venezuela. The Resolution will authorize international NGOs to legally register in the country through the Ministry of Popular Power for Foreign Affairs. This is an important step to provide an operational framework with clear legal principles for international NGOs. It is expected that its prompt implementation in 2021 will facilitate entry visas for international humanitarian personnel, procedures for the import of humanitarian material and equipment, and access to communities to implement projects,

NUMBER OF INCIDENTS REPORTED BY TYPE FROM JANUARY - DECEMBER 2020*



Source: Access monitoring too

*An incident can be reported in more than one category

NUMBER OF INCIDENTS BY STATE FROM JANUARY - DECEMBER 2020

INCIDENTS	STATE
More than 5 incident reports	Bolivar, Tachira, Zulia
2- 5 incident reports	Amazonas, Capital District, Merida, Lara
1 incident report	Barinas, Carabobo, Miranda, Portuguesa

Source: Access Monitoring Tool

AEROPUERTO DE MAIQUETIA, LA GUAIRA, VENEZUELA

Arrival of a flight carrying humanitarian aid.

19 June 2020

Photo: OCHA/Gema Cortés



Operational Capacity

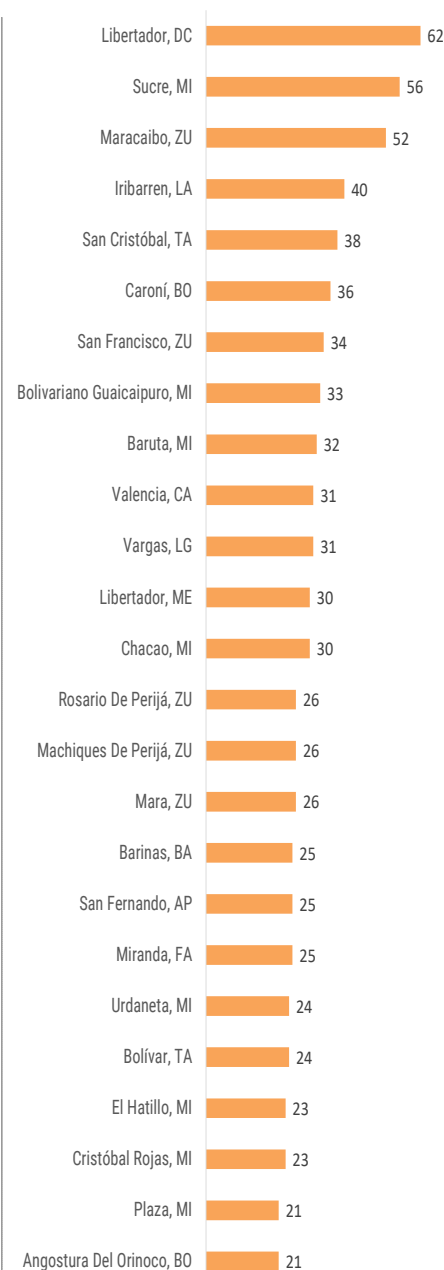
Despite limited resources and the difficulties of operating during the pandemic, humanitarian actors in Venezuela have managed to reach around 4.9 million people with some form of assistance up to December 2020. This figure includes the 3.4 million people who have benefited from COVID-19 response activities,

although, as mentioned previously, this does not mean that all their humanitarian needs have been met. In terms of geographic scope, there have been activities in all the country's municipalities, with the largest number of people reached in Bolivar, Capital District, Miranda and Tachira¹⁰.

ORGANIZATIONS BY CLUSTER / AOR PER STATE IN 2020

	Shelter, Energy & NFIs	Water, Sanitation & Hygiene	Education	Nutrition	General Protection	Child Protection AoR	Gender Based Violence AoR	Food Security & Livelihoods	Health	Total by State
Distrito Capital	3	20	7	13	14	18	15	18	15	64
Amazonas	2	3	4	4	3	5	4		5	17
Anzoategui		6	4	8	5	14	6	4	7	33
Apure	4	6	4	5	9	10	7	5	10	31
Aragua		11	5	6		10	5	6	6	34
Barinas	3	7	8	8	6	7	2	4	8	29
Bolivar	3	15	9	11	7	17	10	8	14	46
Carabobo	1	8	4	9	5	9	8	9	11	36
Cojedes			3	3		8	1	1	6	18
Delta Amacuro		6	4	6	2	11	4	1	7	22
Falcon	2	3	5	6	4	7	8	5	6	29
Guarico		5	2	5		8	1	4	6	22
Lara		6	7	8	1	13	7	11	8	43
Merida	1	5	5	8	8	10	5	8	11	34
Miranda	7	23	10	14	15	20	16	25	15	74
Monagas		3	2	5	1	8	1	2	5	20
Nueva Esparta			3	3	2	9	1	2	3	18
Portuguesa		2	4	8	2	8	1	6	5	24
Sucre	2	4	5	5	1	8	1	5	4	23
Tachira	5	15	10	8	11	17	12	6	13	43
Trujillo		4	6	5	2	6	1	3	8	23
Yaracuy		2	2	5	1	7	1	2	5	16
Zulia	6	20	11	15	18	18	14	19	19	62
La Guaira	3	7	5	8	1	9	5	6	8	32
	14	46	24	31	36	36	31	41	32	123

MUNICIPALITIES WITH HIGHEST PRESENCE OF ORGANIZATIONS IN 2020



For more information on the operational capacity of the response in 2020 see:

<https://www.humanitarianresponse.info/en/infographic/venezuela-5w-humanitarian-operational-presence-31-december-2020>

Examples of key interventions are:

- Support from **health** partners to increase testing capacity and strengthen the epidemiological surveillance system. Also, provision of PPE, training of health personnel, and facilitating access to health care for people at risk or with COVID-19. From January to December 2020, 4.9 million people have been reached by health activities. More than 700 health establishments were supported with deliveries of medicines, supplies, and biomedical equipment, and 380 health and nutrition facilities and service delivery centers have received WASH services and supplies. Several organizations developed remote assistance modalities to continue providing health care, benefiting an estimated number of more than 7,400 people.
- **WASH** activities were carried out in more than 1,372 temporary shelters, learning and protection centers, and canteens. In vulnerable communities, access to clean water was ensured for 2.6 million people and access to hygiene information and products for 907,400 people.
- The response in temporary **shelters**, especially in the PASI, has focused on improving the WASH infrastructure, carrying out electrical repairs and expanding its capacity through the adaptation of refugee housing units. Likewise, non-food items have been distributed, benefiting more than 25,600 people. Intersectoral trainings were held at the PASI (with 763 local authorities and PASI managers participating) to share guidelines (including on prevention and mitigation of gender-based violence, and sexual and reproductive health services¹¹) and to strengthen capacities in the management of temporary shelters in accordance with humanitarian response standards.
- **Protection** partners have adapted to remote response modalities, providing psychosocial assistance, legal counseling and case management for cases of family and gender-based violence¹² through hotlines or mobile messaging services such as WhatsApp. Their interventions have benefited more than 76,000 people, mostly women, and 93,000 children and their caregivers. Additional efforts have been made to increase

accessibility and risk communication for people with disabilities and their caregivers.

- Support for distance **education** provided through a variety of technological platforms (such as radio podcasts), reaching almost 188,000 children and adolescents.
- Adjustments to **nutrition** interventions focused on adapting protocols for screening, identification and treatment of acute malnutrition to the context of the COVID-19.

Humanitarian partners demonstrated their ability to adapt to changes in the humanitarian context in the midst of a pandemic and to scale up operations in geographic areas with emerging needs. However, it is important to note that changes in response modalities, such as take-away food deliveries or home distribution, raised the costs of operations.

Despite efforts, that allowed to overcome the population targeted for Health and WASH, important gaps and unmet needs remain in the response, particularly in terms of food assistance. The Food Security and Livelihoods Cluster will increase its capacity with WFP beginning operations. The current scope of the response could also be amplified with increased funding for existing partner networks and with the registration of international NGOs and the resolution of the operational challenges they face.

PARTNERS AND TARGET POPULATION BY STATE

STATE	TARGET POPULATION	NUMBER OF PARTNERS
Distrito Capital	675k	56
Amazonas	94k	19
Anzoategui	373k	37
Apure	276k	31
Aragua	88k	21
Barinas	95k	18
Bolivar	569k	47
Carabobo	189k	39
Cojedes	17k	12
Delta Amacuro	60k	22
Falcon	140k	21
Guarico	159k	19

STATE	TARGET POPULATION	NUMBER OF PARTNERS
Lara	171k	44
Merida	142k	27
Miranda	656k	66
Monagas	204k	26
Nueva Esparta	41k	13
Portuguesa	66k	22
Sucre	227k	31
Tachira	745k	41
Trujillo	98k	16
Yaracuy	46k	15
Zulia	1,04M	57
La Guaira	99k	25

PARTNERS AND TARGET POPULATION BY CLUSTER

CLÚSTER	TARGET POPULATION	NUMBER OF PARTNERS
Health	4,4 M	38
Water, Sanitation and Hygiene	4,0 M	37
Protection	2,7 M	61
Education	1,5 M	40
Shelter, Energy and Non-food items	1,4 M	24
Nutrition	0,9 M	35
Food Security and Livelihoods	0,7 M	54
Coordination and Logistics		8

PARTNERS AND NUMBER OF PROJECTS BY TYPE OF ORGANIZATION

TYPE OF ORGANIZATION	NUMBER OF PROJECTS	NUMBER OF PARTNERS
International NGOs	46	24
National NGOs	137	103
UN Agencies	40	10
Other	10	7

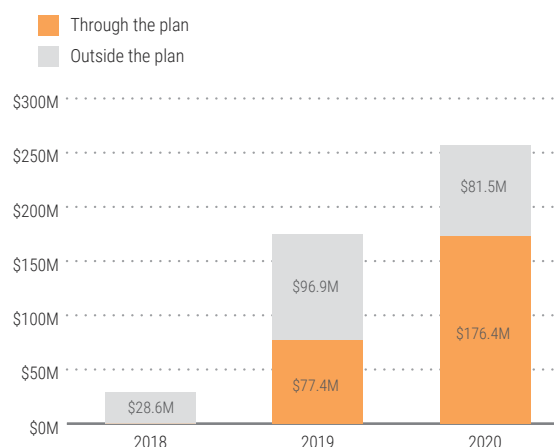
Financing the response

Over the past three years, funding received towards the humanitarian response has increased, demonstrating donors' confidence in humanitarian coordination mechanisms. From US\$28.6 million reported in 2018, it increased to US\$174.3 million in 2019 and US\$257.9 million in 2020. These resources have enabled a scale up of the humanitarian and facilitated a response to the COVID-19 pandemic in 2020. However, the gap between required and received funds is significant, increasing from 65 per cent in 2019 to 77 per cent in 2020, and it is the main limitation faced by the humanitarian community to reach more people in need.

In 2021, it will be critical to increase efforts to mobilize more resources from donors, and those to improve monitoring, operational capacity and humanitarian access. A significant increase in donor support will be fundamental to expand operational capacity and scale up the achievements demonstrated in 2019 and 2020.

In addition, complementary mechanisms that enable the use of domestic resources to fund the humanitarian response will be explored. An important step in this regard was the agreement facilitated by the Pan-American Health Organization (PAHO), in July 2020, between the Ministry of the People's Power for Health (MPPS by its Spanish acronym) and the

HUMANITARIAN FUNDING 2018 - 2020 (US\$)



* Reported funding data as of 10 June 2021
Source: Financial Tracking Service (FTS)

advisory team of the 2015-elect National Assembly to allocate US\$12.5 million to the COVID-19 response. Specifically, the funds were directed to critical actions such as protecting health workers, implementing measures to reduce transmission, and strengthening care and testing capacity in the most affected states.

On October 26, 2020, the UN Under-Secretary-General for Humanitarian Affairs and Emergency Relief Coordinator, Mr. Mark Lowcock, informed

FUNDING OF THE HUMANITARIAN RESPONSE PLAN 2018-2020 (US\$)

YEAR	TARGET POPULATION	REQUIRED FUNDING	FUNDING RECEIVED THROUGH THE PLAN	% OF THE PLAN FUNDED	TOTAL FUNDING RECEIVED*
2018					28.6 M
2019	2,6 M	222.7 M	77.4 M	35%	174.3 M
2020	4,5 M	762.5 M	176.4 M	23%	257.9 M
2021	4,5 M	708.1 M			

* Reported funding data as of 10 June 2021
Source: Financial Tracking Service (FTS)

Member States of the establishment of the Venezuela Humanitarian Fund. The Fund is a humanitarian funding mechanism managed at the country level by OCHA under the leadership of the Humanitarian Coordinator and in consultation with the humanitarian coordination structures. Donor contributions are pooled into a single, common fund, through which allocations are made to humanitarian organizations linked to the Humanitarian Response Plan. For each allocation, there is a selective and transparent process to fund priorities in the delivery of life-saving assistance to the people most in need. The Venezuelan Humanitarian Fund has collected around US\$10 million from seven donors since its constitution by the end of 2020¹³. The Fund's first allocation, focused on responding to the needs of vulnerable women and adolescents of reproductive age, as well as of vulnerable older people, disbursed US\$3.5 million for the implementation of 12 projects.

6. Accountability to Affected Populations and Protection from Sexual Exploitation and Abuse

Protection from Sexual Exploitation and Abuse (PSEA) and Accountability to Affected Populations (AAP) complement and reinforce each other. To report complaints, communities need to understand and have access to reliable and efficient feedback mechanisms. Both are active responsibilities of the HCT and the partners that participate under the Humanitarian Response Plan in Venezuela.

PARAGUACHÓN/ZULIA STATE, VENEZUELA

UNHCR's officer talks with two Venezuelan children in a PASI, where they must quarantine before leaving for their final destination after returning from Colombia with their families.

Photo: OCHA/Naomi Frerotte



Accountability to Affected Populations

In September 2020, the HCT adopted the **Collective AAP Framework**, a guide of 44 minimum actions to put the seven AAP commitments into practice throughout the Humanitarian Programme Cycle [see box]. The purpose is to facilitate better alignment of individual approaches with the common goal of accountability to affected communities and populations within the Humanitarian Response Plan.

The three key components of the Framework are:

- **Communication with communities** - provide clear, transparent and timely information on humanitarian action and interventions/projects
- Encourage **community engagement** in all phases of the project cycle.
- Establish **community feedback and complaint mechanisms**.

THE 7 COMMITMENTS OF THE COLLECTIVE AAP FRAMEWORK VENEZUELA

- 1 Strengthen the capacities of HRP partners to adopt a comprehensive accountability process that includes communication with the communities, community engagement and feedback.
- 2 Ensure that affected communities and populations have access to information about humanitarian aid and are aware of their rights.
- 3 Ensure that affected communities participate in decisions that concern them at all stages of the humanitarian programme cycle, including women, men, children, adolescents, youth, the elderly, people with disabilities and LGBTI people.
- 4 Create a safe and accessible interagency community feedback mechanism complementary to the mechanisms established by partner agencies and organizations.
- 5 Provide feedback to affected communities on the changes that have been implemented based on the opinions and perspectives received and considered.
- 6 Strengthen inter-institutional and interagency coordination for AAP.
- 7 Strengthen coordination between AAP and the Interagency Protocol for Complaints and Reports of Sexual Exploitation and Abuse.

Capacity Building in AAP

In October 2020, OCHA and UNICEF held a five-week virtual course, 17.5 hours in duration on an integrated approach of Accountability to Affected Communities and Populations in Venezuela. Humanitarian personnel from more than 61 organizations reviewed global concepts and guidelines and shared good practices. The course enabled the dissemination of the Collective AAP Framework in Venezuela and will lay the groundwork for the implementation of AAP commitments in 2021. This training will be the basis for capacity building programs to be developed in 2021 at the sectoral and subnational levels.

Interagency Community Feedback Mechanism

In 2020, phones have been the most widely used bidirectional communication channel to maintain contact with priority communities despite mobility restrictions. Their use is expected to continue throughout 2021.

In line with Commitment 4 of the Framework, several UN agencies are piloting an interagency community feedback mechanism for 2021. Its objective is to

receive community feedback in an efficient and safe manner, enabling confidential channels to receive and appropriately refer sensitive complaints, including PSEA.

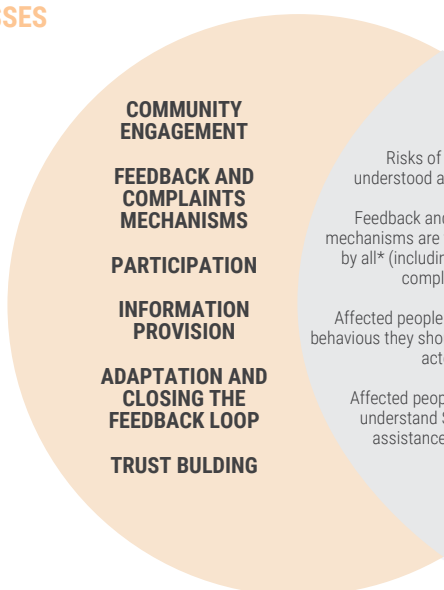
This effort will help identify and analyze trends regarding the information needs on humanitarian assistance and unmet needs. It will foster a continuous dialogue with people by enabling the community to be heard through engagement, thus helping to close the feedback loop so that community voices can help improve humanitarian action.

The implementation and monitoring of community feedback mechanisms will be prioritized according to the preferences of each community. These will likely include face-to-face modalities (information desks, among others), telephone lines, and physical and digital suggestion boxes (e-mail).

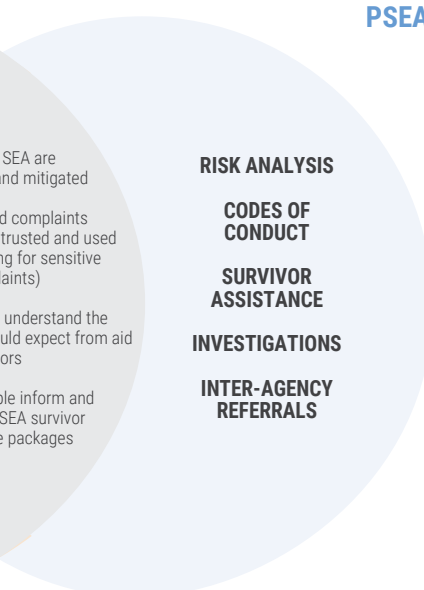
Based on this effort, in 2021 there will be collaboration with relevant institutions to strengthen and broaden the AAP work, including the expansion of dialogues and feedback mechanisms at the community level.

RESULTS OF COLLABORATION / LINKAGES BETWEEN AAP AND PSEA

AAP PROCESSES



PSEA PROCESSES



Risks of SEA are understood and mitigated
Feedback and complaints mechanisms are trusted and used by all* (including for sensitive complaints)
Affected people understand the behaviour they should expect from aid actors
Affected people inform and understand SEA survivor assistance packages

Adapted from a chart created by the IASC Task Force on Accountability to Affected Populations and Protection from Sexual Exploitation and Abuse.

* The term "all" intends to capture all groups in the community: women, men, girls, boys, youth, and older persons, as well as persons with disabilities and specific minority groups without any such distinction.

Protection from Sexual Exploitation and Abuse (PSEA)

The 2020 HRP recognized the importance of establishing prevention and response mechanisms for sexual exploitation and abuse, in line with IASC guidelines, especially as these risks are common in humanitarian contexts. It should also be noted that the Venezuelan context has specific elements to consider: the presence of people on the move, the rapid increase in the number of humanitarian workers since the launch of the 2019 HRP, and the delivery of humanitarian aid in remote and difficult-to-access areas of the country, among others.

The PSEA Network was established in 2019. It currently includes the participation of nine UN organizations (UNHCR, FAO, OCHA, IOM, UNAIDS, UNDP, UNFPA, UNICEF and PAHO/WHO), the Protection Cluster and AoRs for Child Protection and Gender-Based Violence, four focal points for the Field Coordination Hubs, one representative of international NGOs, one observer from a national NGO, and one from the Office of the Resident Coordinator.

Thanks to the work of the Network, in July 2020 the HCT approved the Protocol that defines standard procedures and tools for reporting and referring complaints and allegations of SEA.

In addition, the Network defined its Terms of Reference and work plan, which has been adapted to the restrictions and needs related to COVID-19. Workshops were held for protection professionals, service providers, and humanitarian personnel on case management and reporting, in which 52 organizations participated; and inter-agency communication materials on PSEA were developed for communities and will be disseminated in 2021.

In 2021, a greater focus is expected on strengthening both the complaint mechanism through awareness-raising and communication action in communities, including a pilot of the Interagency Community

Feedback Mechanism. The Network will continue conducting workshops for clusters, focal points and partners. It will also coordinate data collection for the global PSEA indicator, supporting members to identify areas of operation, reporting mechanisms and their scope.

GUANA, LA GUAJIRA/ZULIA STATE, VENEZUELA

UNHCR staff explain how to properly use a jerrycan during the distribution of solar lamps and charcoal to the Wayúu indigenous community. The Wayúu live in the arid Guajira peninsula, which straddles the Venezuela-Colombia border on the Caribbean coast.

Photo: OCHA/Gema Cortés



7. Monitoring

During 2020, OCHA, under the guidance of the HCT, the Inter-Cluster Coordination Group (ICCG) and the Information Management Working Group (IMWG), developed a platform to improve the response monitoring process, simplifying the reporting of activities and improving the availability of real-time information. The information required is based on the system known as 5W (who, what, where, when and for whom). This platform will allow better tracking of the number of people reached by activities implemented by humanitarian partners, as well as identifying gaps and avoiding duplication in humanitarian response. It is expected to be rolled out in 2021.

In 2021, the preparation and publication of biannual Periodic Monitoring Reports will allow for improved monitoring at the inter-sectoral level of indicators used to measure progress against the Plan's Specific Objectives, and for monitoring of indicators at a cluster level.

The network of community monitors established by OCHA in 2020 will continue to provide more accurate information to the humanitarian community, to the extent available, on needs and response in priority areas with a small permanent UNS presence.

Work has also been done on implementing, launching, and supporting various digital platforms to improve coordination and increase the effectiveness of the response. This includes public and private interactive panels to improve information management and inter-sectoral coordination on humanitarian presence, temporary shelters and returnees. Tools and platforms based on the ArcGIS Enterprise suite, available to all clusters, improve the transparency of humanitarian response by visually representing the information collected.

By 2021, it will be essential to conduct multi-sectoral humanitarian needs assessments in a coordinated

manner, and in collaboration with authorities and other stakeholders, in order to have an up-to-date and accurate picture of humanitarian needs in the country, including the most critical needs, the number of people in need, the most vulnerable groups, and the work with the Ministry of Popular Power for Planning will be strengthened in the development of methodologies, indicators and information of the National Geographic Statistics System.

Finally, the use of OCHA's online tools (HPC Tools) will continue to be promoted and improved, in particular the reporting of funds received by humanitarian actors to the Financial Tracking Service (FTS), which aims to monitor the level of funding and identify potential gaps that may limit the humanitarian response and the achievement of expected results.

Annexes

SAN ANTONIO DEL TACHIRA/TACHIRA STATE, VENEZUELA

Elena, 60, arrived more than two decades ago in a southern border town searching for a better life. After some hardship, she is receiving assistance from NRC at a community center.



How to contribute?

Contribute to the Response Plan

The best way to contribute to the Plan is to guarantee funding for the projects prioritized by the clusters in this Response Plan. Donor support is essential to ensure that funds directed to their partners contribute to the Plan.

To see the list of projects, visit:

<https://fts.unocha.org/>

Contribute through the CERF

The Central Emergency Response Fund (CERF) is a humanitarian fund managed by OCHA globally to enable fast and effective humanitarian assistance to people affected by natural disasters and armed conflict, and for under-funded emergencies.

For more information, visit: <https://cerf.un.org/donate>

Contribute through the Venezuelan Humanitarian Fund

The Venezuelan Humanitarian Fund, established in October 2020, is a humanitarian funding mechanism managed at the national level by OCHA under the leadership of the Humanitarian Coordinator and in consultation with humanitarian coordination structures. Donor contributions are pooled into a single, common fund, through which allocations are made to humanitarian organizations linked to the Humanitarian Response Plan.

For more information, contact:

ocha-vhf@un.org

SAN ANTONIO DEL TÁCHIRA/TÁCHIRA STATE, VENEZUELA

Juan Arauco, 41, traveled, mostly on foot, more than 2,100 miles from Lima, Perú, to the border crossing at Cúcuta, Colombia. In the picture, he is returning to Venezuela through the Simón Bolívar International Bridge.

Photo: OCHA/Gema Cortés



Acronyms

AAP	Accountability to Affected Populations	UNFPA	United Nations Population Fund
AoR	Area of Responsibility	UNHCR	United Nations High Commissioner for Refugees
CBI	Cash Based Intervention	UNICEF	United Nations Children's Fund
CCT	Field Coordination Hub (Spanish acronym)	UNS	United Nations System
CERF	Central Emergency Response Fund	WASH	Water, Sanitation and Hygiene
CWG	Cash Working Group	WFP	World Food Program
ECLAC	Economic Commission for Latin America and the Caribbean	WHO	World Health Organization
FAO	Food and Agriculture Organization of the United Nations		
FTS	Financial Tracking System		
GAM	Gender and Age Marker		
GBV	Gender-based violence		
GDP	Gross Domestic Product		
HCT	Humanitarian Country Team		
HIV	Human Immunodeficiency Virus		
HRP	Humanitarian Response Plan		
IASC	Inter-Agency Standing Committee		
ICCG	Inter-Cluster Coordination Group		
IMWG	Information Management Working Group		
IOM	International Organization for Migration		
LGBTI	Lesbian, Gay, Bisexual, Transgender, Intersex People		
MPPS	Ministry of the People's Power for Health (Spanish acronym)		
NGO	Non-Governmental Organization		
NRC	Norwegian Refugee Council		
OCHA	United Nations Office for the Coordination of Humanitarian Affairs		
PAHO	Pan American Health Organization		
PASI	Comprehensive Social Service Point (Spanish acronym)		
PPE	Personal Protective Equipment		
PSEA	Protection from Sexual Exploitation and Abuse		
UN	United Nations		
UNAIDS	Joint United Nations Program on HIV/AIDS		
UNDP	United Nations Development Program		

Endnotes

- 1 National News. P1 variant. <http://vicepresidencia.gob.ve/?p=2291>
- 2 Economic Commission for Latin America and the Caribbean (ECLAC). Preliminary Overview of the Economies of Latin America and the Caribbean. (LC/PUB.2020/17-P/Rev.1), Santiago, 2021. Available in Spanish at: https://repositorio.cepal.org/bitstream/handle/11362/46501/1/S2000990_es.pdf
- 3 Ibid.
- 4 Central Bank of Venezuela.
- 5 These figures include people who entered Venezuela by land, water and air. The latest official figures published as of November 30 report more than 136,000 returnees, most of them entering through Táchira (more than 50,000 people) and Apure (more than 20,000 people). For more information, please refer to the COVID-19 Bulletins of the Ministry of People's Power for Foreign Affairs: <http://mppre.gob.ve/temas/coronavirus/>
- 6 In order to avoid possible duplication of people targeted, the projects with the greatest geographic and programmatic coverage, either by age group or by state, were taken into account. Once the target populations per cluster were defined, OCHA at the intersectoral level calculated the maximum number per state, age group and gender to determine the total target population.
- 7 According to the National Vaccination Plan, currently under review, the Ministry of the People's Power for Health plans to vaccinate in a first phase 5.7 million people, corresponding to approximately 20 per cent of the population. The initial focus will include the following vulnerable groups: the elderly (3.7 million people), frontline healthcare workers, adults with co-morbidities, and other vulnerable groups (indigenous communities, among others).
- 8 Ministerio del Poder Popular para Relaciones Interiores, Justicia y Paz. Plan Nacional de Lluvias busca controlar los eventos hidrometeorológicos. Venezuela, July 2020. Available in Spanish at: <http://www.pcivil.gob.ve/?p=5475>
- 9 Estimated number of people who have been reached by humanitarian assistance at least once. This does not mean that their needs have been fully met.
- 10 OCHA, 5W until 31 December 2020. Available at: https://www.humanitarianresponse.info/sites/www.humanitarianresponse.info/files/documents/files/20201231-ve00-5w_5pager_en_public_.pdf
- 11 Protection Cluster in Venezuela. Guía rápida para la prevención y mitigación de la VBG y la integración de servicios esenciales de salud sexual y reproductiva en alojamientos temporales de respuesta al retorno de personas migrantes venezolanas durante la pandemia de la COVID-19. Venezuela, May 2020. Available at: <https://reliefweb.int/report/venezuela-bolivarian-republic/gu-r-pida-para-la-prevenci-n-y-mitigaci-n-de-la-vbg-y-la>
- 12 UNFPA. Guía técnica de servicios remotos: Atención psicosocial especializada para sobrevivientes de violencia basada en género. August 2020. Available at: <https://lac.unfpa.org/es/publications/gu%C3%ADa-t%C3%A9cnica-de-servicios-remotos-atenci%C3%B3n-psicosocial-especializada-para>
- 13 Canada, Spain, Ireland, Norway, Switzerland, United Kingdom and Republic of Korea.

HRP Monitoring Framework

Strategic Objective 1

Ensure the survival and well-being of the most vulnerable people through a multi-sectoral response under a rights-based approach, including age, gender and diversity dimensions.

STRATEGIC OBJECTIVE 1 SPECIFIC AND SECTORIAL OBJECTIVES	INDICATORS	INDICATOR TARGET 2021
Specific Objective 1.1: Reduce the vulnerability of affected people to mortality and morbidity risks from communicable, non-communicable and mental health diseases by improving their access to basic goods and services related to health, water and sanitation, incorporating age, gender and diversity dimensions		
<u>Health</u> Sectoral Objective 1: Strengthen operational and functional capacity of the basic and critical services in prioritized hospitals	# persons who have benefited from treatments and/or procedures provided in prioritized hospitals (estimate)	3,5 M
<u>Health</u> Sectoral Objective 2: Strengthen access to a comprehensive and integrated quality health services network to meet priority needs related to communicable and non-communicable diseases, mental health and sexual and reproductive health, integrating a life-course and differential approach and with the participation of communities	# most vulnerable persons (disaggregated by sex and age) receiving medicines and health care in the comprehensive and integrated health services network (estimate)	2,4 M
	# vaccinated persons against COVID-19 (disaggregated by sex and age) through the COVAX mechanism	5,7 M
<u>WASH</u> Sectoral Objective 1: Ensure access to basic water, sanitation, hygiene and environmental sanitation services for vulnerable populations (especially children, adolescents, pregnant and lactating women) in health and nutrition facilities, education institutions, learning spaces, community centers and temporary shelters	# health and nutrition facilities, educational institutions, learning spaces and community spaces/centres benefiting from WASH interventions	2.300
Specific Objective 1.2: Enhance sexual and reproductive health, with special emphasis on maternal and child health by strengthening access to referral goods and services with attention to the age, gender and diversity dimensions		
<u>Health</u> Sectoral Objective 1: Strengthen operational and functional capacity of the basic and critical services in prioritized hospitals	# persons who have benefited from sexual and reproductive health treatments and/or procedures provided and/or contraceptive methods provided in prioritized hospitals (estimate)	500 k
<u>Health</u> Sectoral Objective 2: Strengthen quality access to the comprehensive and integrated health services network to meet priority needs related to communicable and non-communicable diseases, mental health and sexual and reproductive health, with a gender, age and diversity focus, and community participation	# most vulnerable persons (disaggregated by sex and age) who have received sexual and reproductive health care and medicines	200 k

STRATEGIC OBJECTIVE 1 SPECIFIC AND SECTORIAL OBJECTIVES	INDICATORS	INDICATOR TARGET 2021
Specific Objective 1.3: Reduce malnutrition and severe food insecurity in children under age 5, pregnant and lactating women, and other vulnerable groups		
<p><u>Nutrition</u> Sectoral Objective 1: Enhance access to outpatient health services and nutrition programmes at community level for children under age 5 and pregnant and lactating women, for the prevention of acute malnutrition and micronutrient deficiencies</p>	# children under age 5, pregnant and lactating women with access to services for the prevention of acute malnutrition and micronutrient deficiencies	850 k
<p><u>Nutrition</u> Sectoral Objective 2: Enhance access to and the provision of health services for the treatment of acute malnutrition as part of the efforts to reduce child morbidity and mortality</p>	# children and pregnant women who receive adequate treatment in healthcare centers as part of the Management of Acute Malnutrition and Low Gestational Weight Programme	113 k
<p><u>Nutrition</u> Sectoral Objective 3: Promote and support Infant and Young Child Feeding in Emergencies (IYCF-E) practices under a multi-sectoral approach by establishing effective coordination mechanisms and providing high quality services and qualified technical support</p>	# pregnant women, mothers, fathers and caregivers of children 0-23 months receiving counselling on infant and child feeding	313 k
<p><u>Nutrition</u> Sectoral Objective 4: Enhance access to outpatient health services and nutrition programmes at community level for children ages 5-15, for the prevention of thinness and micronutrient deficiencies</p>	# children ages 5 - 15 with access to services for the prevention of thinness and micronutrient deficiencies	64 k
<p><u>Food Security and Livelihoods</u> Sectoral Objective 1: Provide immediate food assistance and support short-cycle food production to ensure access to food for the most vulnerable people with a gender, age and diversity focus</p>	# people who received food assistance / cash / vouchers	875 k
<p><u>Food Security and Livelihoods</u> Sectoral Objective 1: Proporcionar asistencia alimentaria inmediata y apoyo a actividades productivas de corto plazo para garantizar acceso a los alimentos de las personas más vulnerables, asegurando los enfoques de género, edad y diversidad</p>	# households that received support for emergency food production	90 k
Specific Objective 1.4: The physical, mental and psychosocial well-being of people suffering from violence, exploitation, negligence and abuse, with a gender, age and diversity focus		
<p><u>Protection</u> Sectoral Objective 1: Ensure physical, mental and psychosocial well-being by providing specialized assistance to people affected by all forms of violence, exploitation, neglect and abuse</p>	# affected persons who have received required specialized services	50 k
	# people who receive specialized protection services for GBV risks and/or for GBV survivors	140 k
	# affected and at-risk children and caregivers with access to individual and group psychosocial support activities with a gender, age and diversity focus	460 k

Strategic Objective 2

Contribute to the sustainability of essential services and strengthen the resilience and livelihoods of the most vulnerable people incorporating age, gender and diversity dimensions

STRATEGIC OBJECTIVE 2 SPECIFIC AND SECTORIAL OBJECTIVES	INDICATORS	INDICATOR TARGET 2021
Specific Objective 2.1: Strengthen food security of the most vulnerable people by increasing access to food and supporting the restoration, maintenance and protection of livelihoods with a gender, age and diversity focus		
<u>Food Security and Livelihoods</u> Sectoral Objective 2: Contribute to the restoration, maintenance and protection of livelihoods and enhance the resilience of affected households and communities through activities that protect or create productive assets and/or basic infrastructure, without harming local practices and habitat, taking into account ethnic and gender dimensions	# people who received equipment and/or supplies and/or technical support and/or training to strengthen their resilience	161 k
Specific Objective 2.2: Improve equal and safe access to essential goods and services in the areas of health, water and sanitation, education, electricity and energy for cooking for the most vulnerable populations, seeking appropriate quantity, quality and sustainability of the provision of the services with a gender, age and diversity focus		
<u>Health</u> Sectoral Objective 1: Strengthen operational and functional capacity of the basic and critical services in prioritized hospitals	# prioritized health-care facilities receiving equipment, supplies and/or essential medicines (prioritized hospitals)	360
<u>Health</u> Sectoral Objective 2: quality access to the comprehensive and integrated health services network to meet priority needs related to communicable and non-communicable diseases, mental health and sexual and reproductive health with a gender, age and diversity focus, and community participation	# facilities that are part of the health network, including community health actors, receiving equipment, supplies or essential medicines	200
	# health personnel (disaggregated by gender and age) trained in priority themes, emergency situations, risk communication, IPC and/or prevention and clinical management of COVID-19 and SRH (emergency obstetric care, contraception and STIs), HIV with a gender, age and diversity focus	30 k
<u>WASH</u> Sectoral objective 2: Ensure access to safe water, sanitation and hygiene in vulnerable communities, and empower people to adopt appropriate evidence-based practices for access to safe water, hygiene, environmental hygiene, and household water treatment and storage	# people with access to basic safe water and sanitation services in communities	2,8 M
	# people who have access to basic household hygiene information and/or products	3,5 M
	# people benefiting from interventions to reduce environmental sanitation risks in communities	220 k

STRATEGIC OBJECTIVE 2 SPECIFIC AND SECTORIAL OBJECTIVES	INDICATORS	INDICATOR TARGET 2021
<u>Food Security and Livelihoods</u> Sectoral Objective 3: Improve food security for vulnerable groups, to ensure equitable and safe access to basic services such as health and education, without harming local practices and habitat	# children and adolescents benefiting from adequate school feeding programs in line with hygiene standards	1,4 M
	# men, women, boys and girls who received food assistance in community centers/spaces	73 k
	# men, women, boys and girls who received food assistance in health facilities	7 k
<u>Education</u> Sectoral Objective 1: Enhance the conditions and provision of educational services to guarantee inclusive access, retention and quality learning for children and adolescents in areas most affected by school dropouts	# out-of-school children reintegrated into the formal or non-formal education system	191 k
	# adolescents benefitting from educational catch-up programmes, life skills initiatives and technical training	164 k
	# children and adolescents who receive school kits	1,5 M
	# children and adolescents benefiting from adequate school feeding programs in line with hygiene standards	1,4 k
	# people who receive messages on the importance of school attendance and retention	4 M
	# children and adolescents participating in psycho-educational support activities in educational spaces	529 k
<u>Education</u> Sectoral Objective 2: Strengthen institutional and technical capacities of the educational community to ensure equal access and continuity of education in areas most affected by student dropouts and teacher departures	# people participating in spaces to accompany the remote learning process of children and adolescents	97 k
	# children and adolescents participating in remote education activities	587 k
	# teachers and other educators participating in training activities	51 k
	# education personnel who benefit from incentives to ensure teaching continuity and functionality of education services	47 k

STRATEGIC OBJECTIVE 2 SPECIFIC AND SECTORIAL OBJECTIVES	INDICATORS	INDICATOR TARGET 2021
<u>Shelter, Energy and NFI</u> Sectoral Objective 1: Support institutions and organizations by improving basic infrastructure, including small works to maximize the impact on affected vulnerable people.	# persons benefiting from improved access to electricity or energy sources in community centers or institutions that provide essential services to the target population	275 k
<u>Shelter, Energy and NFI</u> Sectoral Objective 2: Support health centers, schools, and other community spaces or institutions that deliver services to affected populations, with repairs and construction work	# persons benefiting from repairs, constructions and improvements in community centers or institutions providing basic services, with a gender, age and diversity focus	811 k
	# women, men, girls and boys benefiting from training at community centers and in indigenous communities	18 k
<u>Shelter, Energy and NFI</u> Sectoral Objective 3: Assist the target population through distributions of basic items	# persons receiving material assistance through NFIs, which respond to their specific needs, with a gender, age and diversity focus	248 k
Specific Objective 2.3: Guarantee access to adequate and age-gender sensitive shelter and energy provision for people on the move who are in informal settlements, homeless people, and those at risk of displacement		
<u>Shelter, Energy and NFI</u> Sectoral Objective 4: Provide shelter to the target population and improve their housing and energy conditions in collective shelters, including the PASIs for returnees	# persons on the move, including returnees, whose access to accommodation in collective shelters is improved	300 k
	# persons on the move who benefit from awareness of the sustainability of the activity (safety protocols, maintenance and optimal functionality)	155 k
<u>Shelter, Energy and NFI</u> Sectoral Objective 5: Improve housing and energy conditions for the target population in individual shelters.	# persons whose housing conditions in individual shelters are improved	59 k
Specific Objective 2.4: Facilitate access to legal documentation for affected people, incorporating age, gender and diversity dimensions		
<u>Protection</u> Sectoral Objective 2: Facilitate access to legal documentation for affected people	# persons benefitting from necessary legal documentation	530 k

Strategic Objective 3

Strengthen institutional and community mechanisms to prevent, mitigate and respond to protection risks faced by affected people, according to humanitarian principles and with respect for human rights.

STRATEGIC OBJECTIVE 3 SPECIFIC AND SECTORIAL OBJECTIVES	INDICATORS	INDICATOR TARGET 2021
Specific Objective 3.1: Prevent, reduce and respond to protection risks associated with human mobility		
<p><u>Protection</u> Sectoral Objective 3: Strengthen the empowerment of communities to prevent and mitigate protection risks including those associated with human mobility</p>	# persons in communities trained on prevention and mitigation of protection risks	650 k
	# persons benefiting from specialized protection services and material assistance provided in response to protection risks	23 k
	# solidarity projects or initiatives established in communities	4 k
<p><u>Protection</u> Sectoral Objective 4: Strengthen the capacities of public and civil society institutions to prevent and mitigate the protection risks that cause human mobility</p>	# public institutions and civil society staff trained on protection and human rights	80 k
	# relevant public and civil society institutions receiving material assistance to strengthen their capacity to ensure the rights of people with specific needs	2 k
Specific Objective 3.2: Prevent, reduce and respond to risks associated with gender-based violence, with a focus on sexual exploitation and abuse		
<p><u>Protection</u> Sectoral Objective 5: Strengthen the empowerment of communities to prevent, mitigate and respond to GBV risks, with an emphasis on sexual exploitation and abuse</p>	# persons in the community empowered to prevent and mitigate gender-based violence	900 k
<p><u>Protection</u> Sectoral Objective 6: Strengthen the capacities of public and civil society institutions to prevent and mitigate protection risks including GBV, with emphasis on sexual exploitation and abuse</p>	# public institutions and civil society staff trained on prevention, mitigation and response to GBV	30 k
	# persons benefitted through material assistance to public institutions with competence in the area of GBV	10 k

STRATEGIC OBJECTIVE 3 SPECIFIC AND SECTORIAL OBJECTIVES	INDICATORS	INDICATOR TARGET 2021
Specific Objective 3.3: Prevent, reduce and respond to violence, abuse, neglect and exploitation of children and adolescents		
<u>Protection</u> Sectoral Objective 7: Strengthen the empowerment of communities and families to prevent, mitigate and respond to violence, abuse, neglect and exploitation risks to affected children and adolescents	# affected and at-risk children and adolescents whose access to child protection services is established and/or strengthened	170 k
	# people in the communities trained on child protection	730 k
<u>Protection</u> Sectoral Objective 8: Strengthen the capacities of public and civil society institutions to prevent and mitigate the risks associated with children and adolescents at risk or in situations of abandonment, separation or unaccompanied minors	# public and civil society institutions staff trained on and supported with technical assistance in child protection	30 k

SAN CRISTOBAL/TACHIRA STATE, VENEZUELA

Hand washing is essential to prevent COVID-19. Therefore, one of the activities carried out in the temporary accommodation spaces has been the installation of handwash with soap and water so that returnees have access to prevention measures. Foto: OCHA/Gema Cortés.



Participating Organizations

ORGANIZATION	CLUSTERS	PROJECTS
1001 Ideas Para Mi País	Protection	1
Acción Humanitaria por Venezuela	Education	1
Adventist Development and Relief Agency	Food Security and Livelihoods	1
Agency for Technical Cooperation and Development	Coordination and Logistics	2
Aid for Aids Venezuela	Nutrition	1
Aliadas en Cadena A.C.	Protection	1
Alianza Internacional Cielos Abiertos	Education / Protection / Food Security and Livelihoods	2
Alimenta La Solidaridad	Nutrition / Protection	1
Asociación Civil Acción Campesina	Food Security and Livelihoods	1
Asociación Civil Auyantepuy	Education / Protection / Salud	3
Asociación Civil Centro de Animación Juvenil	Protection / Salud / Food Security and Livelihoods	1
Asociación Civil de Planificación Familiar	Protection / Health	1
Asociación Civil El Paraguero	Food Security and Livelihoods	1
Asociación Civil Esperanza Activa	Education	1
Asociación Civil Fe y Alegría Venezuela	Education	2
Asociación Civil Huellas	Education	1
Asociación Civil Kinyivi Tere por los DDHH	Protection	2
Asociación Civil NILO (Naciones Indígenas Libres y Organizadas)	Agua, Saneamiento e Higiene / Education / Food Security and Livelihoods	1
Asociación Civil Opción Venezuela	Education	1
Asociación Civil Pastoral Social CARITAS San Felipe	Nutrition	1
Asociación Civil Tinta Violeta	Shelter, Energy and Non-food items / Education / Protection / Health / Food Security and Livelihoods	4
Asociación Civil Uniandes	Education / Protection / Food Security and Livelihoods	1
Asociación Civil Unidad de Recuperación Nutricional La Casa Grande - Centro de Lactancia	Nutrition	1
Asociación Civil Vida y Luz	Protection	3
Asociación Cooperativa Quebrada Azul	Food Security and Livelihoods	1

ORGANIZATION	CLUSTERS	PROJECTS
Asociación Cruzada de Ayuda Comunal	Nutrition	1
Asociación de Mujeres por la Igualdad de Género Ambiente y Sostenibilidad	Protection	1
Asociación Nacional de Consejeros y Consejeras de Protection de Niños Niñas y Adolescentes	Nutrition / Protection	2
Asociación para el Desarrollo de la Education Integral y Comunitaria	Education / Protection / Food Security and Livelihoods	1
Asociación Venezolana de Agricultura Familiar	Food Security and Livelihoods	1
Asociación Venezolana de Education Católica	Education / Protection	2
Asociación Venezolana para la Conservación de Áreas Naturales	Nutrition / Health / Food Security and Livelihoods	1
Asociación Venezolana Para la Hemofilia	Health	1
Asociación Civil Atravesando	Health	1
CARITAS BARQUISIMETO	Agua, Saneamiento e Higiene / Nutrition / Protection	1
Caritas Venezuela	Agua, Saneamiento e Higiene / Health / Food Security and Livelihoods	3
Catedra de la Paz y Derechos Humanos	Protection / Health	2
Centro Comunitario de Investigaciones Sociales	Education	1
Centro de Desarrollo Social	Protection	1
Centro de Desarrollo Sucre Integral	Water, Sanitation and Hygiene / Protection / Food Security and Livelihoods	2
Centro de Formación Popular Renaciendo Juntos	Water, Sanitation and Hygiene / Food Security and Livelihoods	2
Centro de Justicia y Paz	Protection	1
Centro de Resolución de Conflictos del Colegio de Abogados del Estado Lara	Education	1
Comisión para los Derechos Humanos y la Ciudadanía	Protection	1
Comitato Internazionale per lo Sviluppo dei Popoli	Water, Sanitation and Hygiene / Education / Protection / Health	1
Convite Asociación Civil	Water, Sanitation and Hygiene	1
Cooperativa dos Trabalhadores da Reforma Agrária Terra Livre LTDA	Food Security and Livelihoods	1
Cooperazione E Sviluppo - CESVI	Protection	1
Cooperazione Internazionale - COOPI	Water, Sanitation and Hygiene / Shelter, Energy and Non-food items / Education / Protection / Health / Food Security and Livelihoods	5

ORGANIZATION	CLUSTERS	PROJECTS
Danish Refugee Council	Water, Sanitation and Hygiene / Protection / Food Security and Livelihoods	3
Dividendo Voluntario para la Comunidad	Food Security and Livelihoods	1
Equipo de Proyectos y Asesoría Social A.C.	Food Security and Livelihoods	1
Éxodo Asociación Civil	Protection / Health	2
Federación Venezolana de Instituciones de Ciegos	Education	1
Fomento del Desarrollo Popular	Water, Sanitation and Hygiene / Education / Nutrition	1
Food & Agriculture Organization of the United Nations	Water, Sanitation and Hygiene / Food Security and Livelihoods	5
Fundación Acción Contra el Hambre	Water, Sanitation and Hygiene / Coordination and Logistics / Education / Nutrition / Protection / Health / Food Security and Livelihoods	1
Fundación Agroinlaca	Education	1
Fundación Amigos del Adolescente	Education	1
Fundación Amigos del Niño que Amerita Protection	Nutrition / Protection / Food Security and Livelihoods	1
Fundación Casa Bonita	Shelter, Energy and Non-food items / Education	2
Fundación Centro de Formación Guayana	Water, Sanitation and Hygiene / Protection / Food Security and Livelihoods	1
Fundación Comparte Por Una Vida	Nutrition / Food Security and Livelihoods	1
Fundación de Aprendizaje Integral y Producción Social	Water, Sanitation and Hygiene / Education / Nutrition / Protection / Food Security and Livelihoods	2
Fundación de Atención Social "Habla"	Protection	3
Fundación de Derechos Humanos de los Llanos	Nutrition	1
Fundación Degania	Shelter, Energy and Non-food items / Nutrition / Protection / Food Security and Livelihoods	1
Fundación Don Bosco Mérida	Water, Sanitation and Hygiene / Shelter, Energy and Non-food items / Education / Food Security and Livelihoods	1
Fundación Econciencia	Shelter, Energy and Non-food items / Education / Food Security and Livelihoods	1
Fundación Emprendedores Solidarios	Food Security and Livelihoods	1
Fundación EnSanaPaz	Nutrition / Food Security and Livelihoods	1
Fundación Flor de Luz	Nutrition	1
Fundación Género con Clase	Protection	1
Fundación Hábitat LUZ	Water, Sanitation and Hygiene / Shelter, Energy and Non-food items / Nutrition / Health / Food Security and Livelihoods	3

ORGANIZATION	CLUSTERS	PROJECTS
Fundacion Huellas de Bondad	Education	3
Fundación Jose Gabriel Iriarte Saudin	Water, Sanitation and Hygiene / Shelter, Energy and Non-food items / Education / Nutrition / Protection / Health / Food Security and Livelihoods	1
Fundación Latinoamericana por los Derechos Humanos y el Desarrollo Social	Food Security and Livelihoods	1
Fundación Musical Kantoría	Education / Health	2
Fundación Nativo	Shelter, Energy and Non-food items / Food Security and Livelihoods	1
Fundación Nena	Nutrition / Health	2
Fundación Privada Techo	Water, Sanitation and Hygiene / Shelter, Energy and Non-food items / Nutrition / Protection / Food Security and Livelihoods	2
Fundación Profesor Luis Diaz	Protection	1
Fundación Proyecto Buena Nueva	Water, Sanitation and Hygiene / Education / Nutrition / Protection	1
Fundacion Proyecto Maniapure	Water, Sanitation and Hygiene / Health	1
Fundación Renaciendo en Familia	Nutrition / Protection / Food Security and Livelihoods	1
Fundación S4V	Coordination and Logistics	1
Fundacion Samaritana de Venezuela	Nutrition	1
Fundación Sembrando Esperanza	Water, Sanitation and Hygiene / Education / Health	1
FUNDACION SENDEROS	Shelter, Energy and Non-food items	1
Fundación Sólo Faltas Tú	Education / Protection	1
Fundación Vanessa Peretti	Protection	1
Fundación Venezolana por el Derecho a la Vivienda	Shelter, Energy and Non-food items / Education	2
Fundación Vivienda Popular	Shelter, Energy and Non-food items	1
Gente y Ciudad A.C	Coordination and Logistics / Education	2
Handicap International / Humanity & Inclusion	Protection	1
HEKS - Hilfswerk der Evangelischen Kirchen Schweiz	Water, Sanitation and Hygiene / Shelter, Energy and Non-food items / Food Security and Livelihoods	3
iMMAP	Coordination and Logistics	1
Independent Cultural Foundation	Protection	1
Instituto Radiofónico Fe y Alegría	Shelter, Energy and Non-food items / Education / Food Security and Livelihoods	2
International Medical Corps	Health	3

ORGANIZATION	CLUSTERS	PROJECTS
International Organization for Migration	Water, Sanitation and Hygiene / Shelter, Energy and Non-food items / Coordination and Logistics / Protection / Health / Food Security and Livelihoods	6
INTERSOS Humanitarian Aid Organization	Nutrition / Protection / Health	2
Latam Freedom Development Foundation	Food Security and Livelihoods	1
Madres y Padres Por Los Niños En Venezuela	Nutrition / Protection	1
Malteser International Order of Malta World Relief	Nutrition / Health	1
Meals4Hope	Water, Sanitation and Hygiene / Shelter, Energy and Non-food items / Nutrition / Protection / Food Security and Livelihoods	3
Médicos del Mundo Spain	Health	1
Mercy Corps	Health	1
Movimiento SOMOS	Water, Sanitation and Hygiene / Shelter, Energy and Non-food items / Protection / Health / Food Security and Livelihoods	2
Mundo Solidario	Nutrition / Protection	1
Norwegian Refugee Council	Water, Sanitation and Hygiene / Shelter, Energy and Non-food items / Education / Protection / Food Security and Livelihoods	4
Office for the Coordination of Humanitarian Affairs	Coordination and Logistics	1
Ojo Ciudadano Asociación Civil	Water, Sanitation and Hygiene / Food Security and Livelihoods	6
Otro Enfoque	Protection	1
OXFAM	Water, Sanitation and Hygiene / Protection / Food Security and Livelihoods	3
Pan-American Health Organization (World Health Organization)	Health	14
Première Urgence Internationale	Protection / Health	1
Prepara Familia	Water, Sanitation and Hygiene / Nutrition / Protection	1
Primeros Auxilios LUZ	Nutrition	1
Primeros Auxilios Margarita	Water, Sanitation and Hygiene / Nutrition / Health	1
Proyecto Esperanza	Water, Sanitation and Hygiene / Health	1
Red de Casas Don Bosco	Water, Sanitation and Hygiene / Shelter, Energy and Non-food items / Protection / Food Security and Livelihoods	4
Redes Integrales de Health - Venezuela	Health	1
Rescate Venezuela	Water, Sanitation and Hygiene	1

ORGANIZATION	CLUSTERS	PROJECTS
RET International (Former The Foundation for the Refugee Education Trust till 2014)	Health / Food Security and Livelihoods	2
Save the Children	Nutrition / Protection	2
Sociedad Anticancerosa de Venezuela	Health	1
Sociedad Anticancerosa Del Estado Trujillo	Health	1
Sociedad Venezolana de Ingenieros Agrónomos y Afines	Food Security and Livelihoods	1
Sociedad Wills Wilde AC	Protection	1
Superación Personal a través de la Tecnología	Education	1
TECHO	Shelter, Energy and Non-food items	1
United Nations Children's Fund	Water, Sanitation and Hygiene / Education / Nutrition / Protection / Health	8
United Nations Development Programme	Water, Sanitation and Hygiene / Shelter, Energy and Non-food items / Health / Food Security and Livelihoods	3
United Nations High Commissioner for Refugees	Water, Sanitation and Hygiene / Shelter, Energy and Non-food items / Education / Protection	1
United Nations Joint Programme on HIV/AIDS	Protection / Health	3
United Nations Population Fund	Protection / Health	2
Universidad del Zulia - Escuela de Nutrition y Dietética	Water, Sanitation and Hygiene / Nutrition / Food Security and Livelihoods	1
Universidad del Zulia - Unidad de Investigaciones Zootécnicas	Food Security and Livelihoods	3
Universidad Simón Bolívar	Education	1
Venezuelan Youth Organization for the United Nations	Shelter, Energy and Non-food items / Education	2
Voces de Género Venezuela A.C / A.C. Soy Mujer	Protection	1
World Food Programme	Coordination and Logistics / Food Security and Livelihoods	2
World Vision International	Food Security and Livelihoods	1

**HUMANITARIAN
RESPONSE PLAN
Update 2021**
VENEZUELA

PUBLISHED IN JUNE 2021