



Venezuela – UN Humanitarian Scale-Up

Situation Report

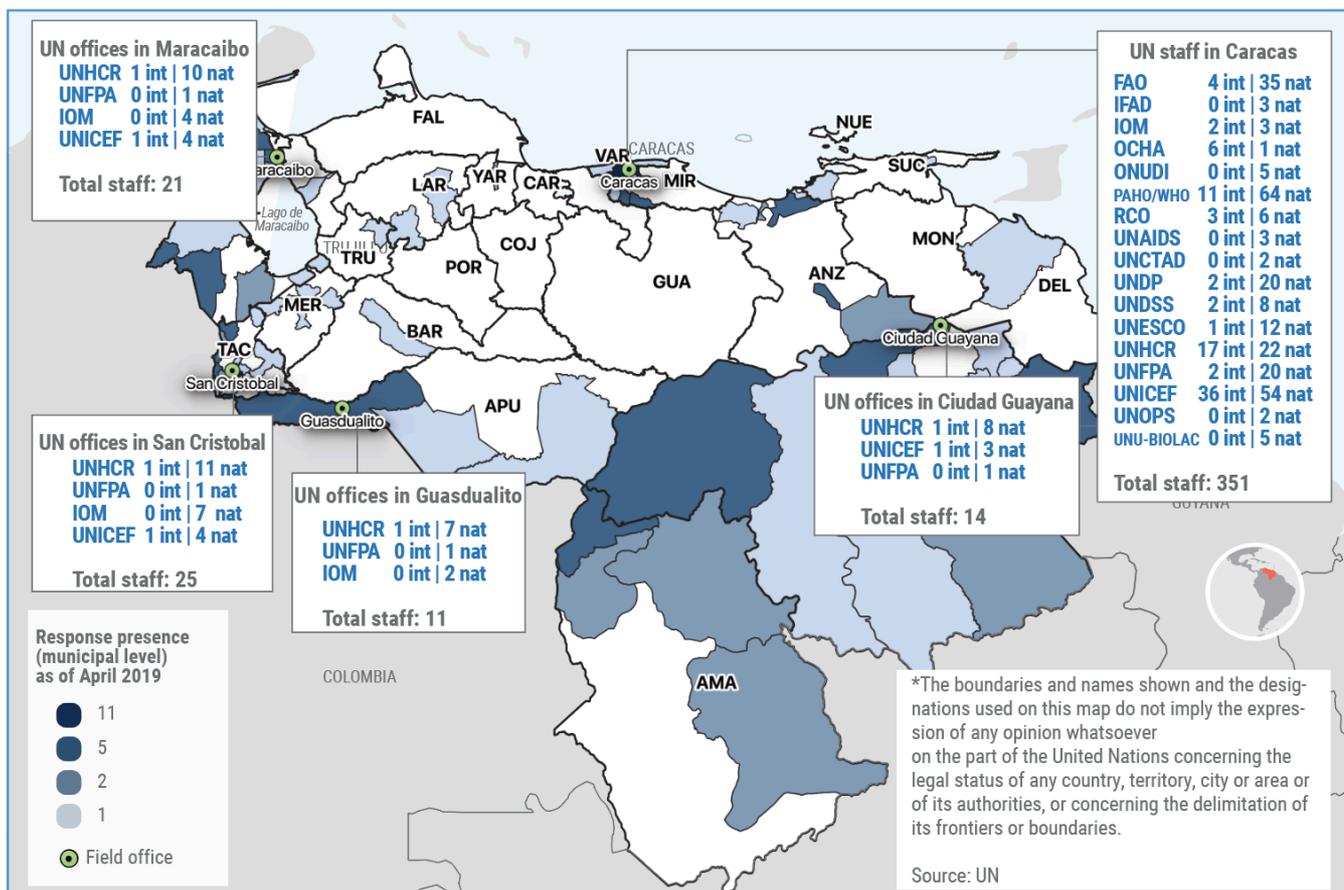
January - April 2019

This situation report is produced by the Office for the Resident Coordinator in Venezuela with support from the UN Office for the Coordination of Humanitarian Affairs (OCHA) and the UNETE Intersectoral coordination group. It focuses on the UN led Scale Up Strategy launched in November 2018 and covers the period January-April 2019.

HIGHLIGHTS

- The Cooperation and Assistance Coordination Team (ECCA for its acronym in Spanish), led by the UN Resident Coordinator was established in February 2019 to facilitate national level coordination on humanitarian issues.
- A draft needs overview for Venezuela has been developed and shared with key stakeholders. The overview indicates significant humanitarian needs across sectors, including health, water, sanitation and hygiene, protection, nutrition, food security and education.
- Since 2018, with a focus on life-saving assistance, the UN and partners have made progress in scaling up their activities, including large scale vaccination coverage for communicable diseases, the provision of generators for hospitals, over 189,000 preventative and curative treatments for acute malnutrition, the strengthening of cross-border protection networks and provision of child protection and Gender Based Violence services, the provision of safe water and hygiene products to over 28,000 people and education support to almost 50,000 children.
- The number of UN staff in country has doubled since 2017, with 422 staff in Venezuela as of 29 April. To coordinate the effort closest to people in need, the UN has set up regional hubs in San Cristobal, Maracaibo and Ciudad Guayana, as well as having offices in other locations such as Guasqualito. The Scale Up has received US\$61.5 million and is almost 50 percent funded. The ECCA is in the process of developing a Humanitarian Response Plan for Venezuela.

UN Presence in Venezuela - April 2019

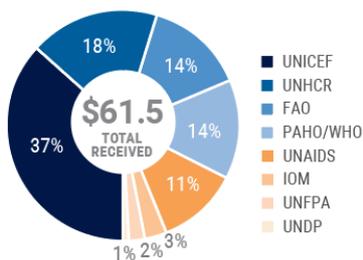
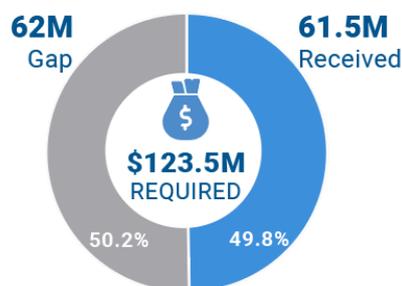


SITUATION OVERVIEW

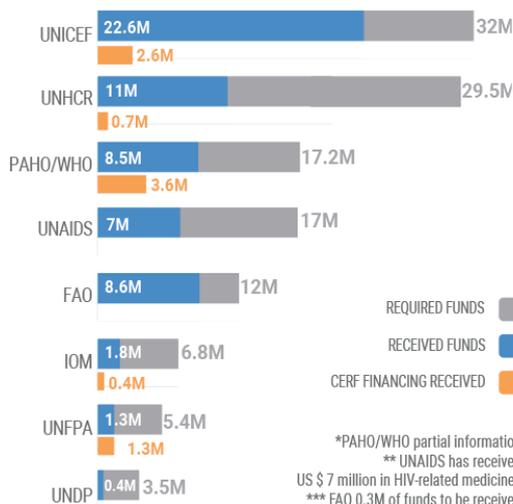
- Throughout the reporting period, the humanitarian situation in country has worsened, due to continued economic challenges, political instability, power outages and a subsequent deterioration in the provision of essential services. The most vulnerable groups include people with chronic health conditions and serious illnesses, pregnant and nursing women, newborns and children under five, indigenous people, people on the move, older persons, women and children at risk and people with disabilities among others. States along the border are those with some of the highest needs, such as Bolivar, Delta Amacuro, Amazonas, Zulia, Táchira and Apure.
- The humanitarian situation was impacted further by electricity blackouts during March, which left all states of the country without electricity. Other services such as water, education, healthcare, fuel supply and telecommunications were also affected, and some areas witnessed heightened insecurity. States along the border were the most affected, including Zulia, Táchira and Bolivar, with many hospitals not having fully functioning generators. Whilst power has been restored in many parts of the country, rationing in many states continues to take place.
- Since 23 February, the country's borders have been closed, impacting the livelihoods and well-being of the population in Amazonas, Apure, Bolivar, Táchira and Zulia states. Many communities in these areas traditionally depend on access to cross the border for trade, employment, medical facilities and supplies and education. The closure of the borders has also forced people to use informal crossings, increasing their vulnerability to protection risks.
- Building on the existing Scale Up effort, the UN and partners are currently in the process of developing a Humanitarian Response Plan (HRP) for Venezuela, focused on six sectors and two sub-sectors: health, food security and agriculture, nutrition, water, sanitation and hygiene, protection (including child protection and Gender Based Violence) and education. The HRP will build on the draft needs overview developed in March.

UN SCALE UP AND FUNDING

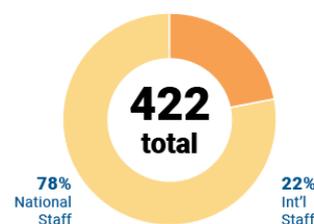
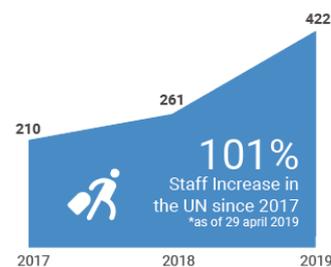
SCALE UP TOTAL FUNDING



FUNDING BY AGENCY



UN STAFF PRESENCE IN-COUNTRY



Source: UN

HUMANITARIAN RESPONSE



Health

- In response to the electricity blackouts and continued power cuts, and in coordination with the Ministry of Popular Power for Health (MPPS) and state health authorities, UNICEF sent six generators, donated by WFP, to priority hospitals in different states. These will benefit an estimated 24,000 people.
- UNICEF has delivered 176,000 doses of vaccines against measles, mumps and rubella, 6.7 million doses of vaccines against diphtheria for girls and boys in their first year of life, and to boost immunization in children under five. The agency has also provided technical guidance in supply chain and logistics for the safe management of the vaccines in order to minimize possible losses.
- About 90,000 people are expected to benefit from nine Emergency Health Kits (IEHK 2011) that were distributed in hospitals in Caracas, Miranda, Bolívar, Táchira and Zulia.
- National vaccination coverage has reached figures above 95 percent, thus helping to reduce measles and diphtheria. PAHO/WHO currently has 33 consultants deployed in all states, leading immunization campaigns against measles and diphtheria, overseeing rapid monitoring of coverage and building local capacity through trainings on prevention and detection. Furthermore, PAHO/WHO has been supporting efforts on biologicals and cold chain.
- WHO and UNAIDS, in support of the Ministry of Health, jointly distributed 1.6 million tablets to specialized HIV pharmacies in all 24 states. This will facilitate the start or reactivation of treatments for at least 30,000 people living with HIV in the next few months. This is an initial phase that will be scaled up in the coming months until reach some 50,000 people on a regular basis. Civil society organizations provide valuable support to this strategy through their active monitoring and reporting of the multiple gaps that still prevent treatments to reach all those in need.
- PAHO/WHO has distributed 135.6 tons of medicines and supplies for emergency assistance to populations affected by disease outbreaks. The distribution of another 89 tonnes of medicines and supplies is under way.
- PAHO/WHO has been working to strengthen the capacity of health practitioners across the country. Trainings have been carried out in six states (Sucre, Bolívar, Anzoátegui, Delta Amacuro, Bolívar and Amazonas) for doctors including indigenous and integral community doctors. This has been accompanied by a widespread information campaign, with 5,000 manuals of clinical epidemiological diphtheria management, 2,500 posters of pediatric clinical management of diphtheria and 2,500 posters of clinical management of diphtheria in adults have been printed and distributed to regional health directorates in the prioritized states.
- Training activities in surveillance and rapid response were carried out for technical teams in 24 states, 593 *Áreas de Salud Integral Comunitaria* (ASIC) and the central level of the MPPS. Likewise, 5,000 health practitioners have been trained for vaccination activities, surveillance and rapid vaccination monitoring.
- UNFPA has trained 339 health facility staff on health and hygiene promotion, providing cleaning techniques and products that reduce the likeliness of infections. Training workshops on hospital hygiene, HIV infections and safe blood, were performed to strengthen capacities in health centers, targeting 817 health practitioners. Five of the seven courses planned on sexual and reproductive health have been rolled out, reaching 1,442 people.

OVER 95%
national vaccination
coverage



Nutrition

- As of April, UNICEF and its partners provided 189,000 preventative and curative treatments of acute malnutrition in children under five and those at risk. UNICEF also distributed three months of supplies to partners for prevention of severe and moderate acute malnutrition, including Ready-to-Use Therapeutic Food, multiple micronutrient powders for pregnant and lactating women, anthropometric equipment and oral rehydration salts. This will enable the screening of 137,196 children under 5; 75,175 children 6-59 months to be reached with multiple micronutrient powders; 12,168 pregnant and lactating women to be reached with micronutrient supplementation; 29,525 treatments delivered for management of moderate and severe acute malnutrition; 257,732 children from 2 to 14 years to receive deworming treatment, and 15,775 families to receive oral rehydration salts of programmatic supply needs for the treatment of diarrheal disease.
- UNICEF trained 60 paediatricians, physicians, nurses and nutritionists in Caracas; and 36 health workers in Táchira (specialized hospitals and primary health services), in (i) essential nutritional interventions and (ii) management of children with acute malnutrition with and without complications. A total of 240 health workers (paediatricians, neonatologists, doctors, nurses, nutritionists and students of the health area) were trained in ambulatory and intra-hospital management of acute malnutrition in Maracaibo (Zulia) and San Cristobal (Táchira).

189K
preventative and curative
treatments of acute
malnutrition

- UNICEF, in collaboration with the IFRC, will provide support to 20,000 children and 8,000 pregnant and lactating women in Zulia, Táchira, Bolívar, Vargas, Miranda, Distrito Capital, Anzoátegui and Apure states with micronutrient supplementation, screening and care of severe and moderate acute malnutrition (with and without complications), deworming and support to Infant and Young Child feeding (IYCF). At the state level, a work plan with Corporosalud Táchira, the state health authority, was developed to support 13,000 children, and 3,640 pregnant and lactating women with the same activities.

Protection

- UNHCR has strengthened cross-border protection networks through the establishment of coordination mechanisms between UNHCR Field Offices and partner NGOs on both sides of the Venezuelan-Colombian border. These mechanisms provide capacity building, information sharing regarding protection mechanisms along the main transit routes and destination countries, and the identification of cross-border referrals of vulnerable cases. Several community groups have been established and will be strengthened through capacity-building activities to provide information on protection and identify/refer vulnerable cases and people at risk.
- UNICEF developed partnerships with several NGOs to scale up child protection actions and programs in prioritized municipalities. During the reporting period, at least 1,633 children and adolescents (790 girls and 843 boys) have received psychosocial support through UNICEF-supported child-friendly spaces in the Capital District, Miranda, Lara, Yaracuy, Anzoátegui and Zulia states. Among these children, those with child protection needs were identified and referred to appropriate services through the child protection system. UNICEF and its partners have started training community promoters to work with families for prevention of family separation. Some 59 promoters from organizations in Zulia and Miranda were trained and will reach 7,080 persons in various communities.
- UNFPA has conducted training workshops on Gender Based Violence in borders states of Táchira, Bolívar, Apure and Zulia for 1,751 people. Moreover, specialized trainings on the same topic have been conducted for 74 staff from the Network of Safe Spaces that work with women in transit.
- A mission from the Global Shelter Cluster and from the Global Camp Coordination and Camp Management (CCCM) Cluster was deployed to assess potential needs, with field visits in Caracas, Zulia, and Táchira. The mission identified shelter needs to support vulnerable populations living in collective accommodations, in areas close to the border and in overcrowded housing and for Non-Food Items (NFIs) and energy support sector such as solar lamps, to vulnerable households. These needs were presented to the ECCA and there was an agreement to create a Shelter, Energy and NFI Working Group under the protection sector and led by UNHCR, to mobilise and coordinate the response to these needs. Needs related to CCCM are currently being addressed by the protection sector.

1,633

children and adolescents
receive psychosocial
support

Water, Sanitation and Hygiene

- Between Jan-March, WASH activities provided access to safe drinking water and hygiene supplies to over 28,000 people. Priority was given to densely populated and border areas in Táchira and Zulia states as well as in hospitals, bus terminals and protection centres in Caracas. Distribution of water purification tablets is ongoing in vulnerable areas affected by electricity cuts and the disruption of water supply systems. The UN and partners are working with water service providers to contribute to the recovery, continuity and quality of water supply systems.
- Additionally, UNICEF and partners supported four priority hospitals with water tanks and trained health centre focal points for water quality monitoring and water chlorination. The MPPS ensures daily water trucking for health facilities.
- UNICEF carried out WASH needs assessments in 15 hospitals in February and March, with cleaning and hygiene supplies currently under local procurement to support asepsis at the hospital level. Water and sanitation systems in Táchira, Zulia and Bolívar have been assessed, with measures underway to support the water supply system.
- During the electricity blackouts, UNICEF provided drinking water to 1,438 children - for approximately ten days - in four protection centres. Additionally, UNICEF installed eight 1,500 litres capacity water tanks in four priority hospitals and trained health centre focal points for water quality monitoring and water chlorination. Water purification tablets were distributed to more than 14,000 people.

28K

Receive safe water and
hygiene supplies

Education

- During February, in Anzoátegui State, Independencia Municipality, UNICEF and partners reached 6,313 children (3,202 boys and 3,111 girls) in 14 schools with educational and recreational materials. In April, UNICEF plans to reach an additional 35 schools (totaling 49 out of 52 schools in the municipality). Two recreational spaces at community level

ALMOST **50K**
children receive
education support

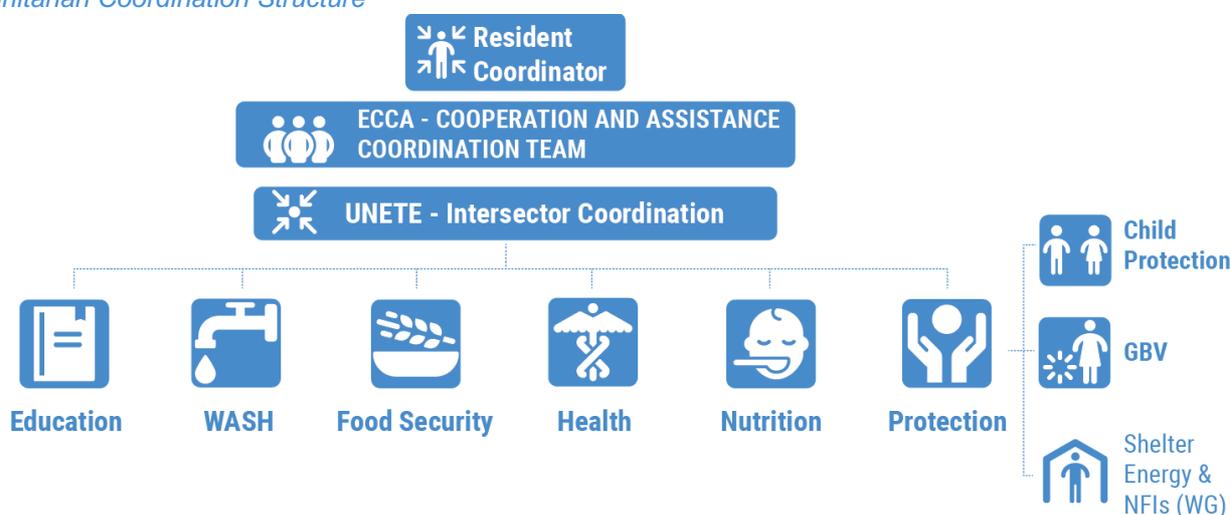
provide psychosocial support to 55 children and adolescents. 240 children and adolescents attended four community feeding centres, thus promoting school attendance.

- In Caracas, 656 children and adolescents were supported by UNICEF and its partners with the provision of recreational kits.
- In Amazonas State, UNICEF and partners supported different municipalities with education materials distributed in 10 schools benefitting 3,417 children and adolescents (including 2,416 indigenous children). In addition, UNICEF reached 159 young people and adults with catch-up literacy programs.
- In the District Capital, Libertador Municipality, and in Miranda, Sucre Municipality, 4,770 children and adolescents from pre-school and primary education, attending eight schools managed by Fe y Alegría, have received school supplies.
- During February and March, UNICEF and partners distributed 33 recreational kits, 20 early childhood development kits and 3,200 backpacks (with notebooks and pencils). UNICEF also contributed to the training of 47 community educational promoters, benefitting 17,635 children and adolescents (9,068 boys and 8,567 girls) attending 26 schools. Also, in the municipalities of Sifontes, Caroni and Heres in Bolívar state, 16,965 children (including 2,105 indigenous children) were provided with educational supplies.

Coordination

- To support coordination, the ECCA, a national strategic level coordination body, was established in February and is led by the UN Resident Coordinator with support from OCHA. The ECCA includes representatives of UN agencies and NGOs and has members of the Red Cross/Red Crescent movement as observers. The ECCA meets on a weekly basis and is currently overseeing the implementation of humanitarian assistance programmes in Venezuela.
- The ECCA is supported by an intersectoral forum, UNETE, which is chaired by OCHA and includes six sectors and two subsectors: health (led by PAHO/WHO), food security and agriculture (led by FAO), nutrition (led by UNICEF), water, sanitation and hygiene (led by UNICEF), protection (led by UNHCR and including child protection (UNICEF) and GBV (UNFPA)) and education (led by UNICEF). The UNETE is tasked with identifying multi-sectoral humanitarian needs, coordinating the response, formulating sector response plans and prioritizing activities for funding purposes. Regular inter sector meetings have taken place during the reporting period, and efforts are underway to develop a Humanitarian Response Plan (HRP) for Venezuela, which is based on humanitarian principles and developed under the framework of General Assembly Resolution 46/182. This includes consultations to with partners to define sectoral, geographic, and population groups priorities.
- Field coordination is currently being strengthened, especially in Caracas, Táchira, Zulia and Bolivar states, with plans to develop field coordination hubs to improve needs assessments, implementation and monitoring of the response.
- Three training workshops have been conducted by OCHA for the Civil Protection authorities, focused on humanitarian coordination, information management in emergencies and on international search and rescue standards and classification (INSARAG). Furthermore, OCHA has organized several training workshops on humanitarian principles, coordination and information management for around 50 national NGOs.

UN Humanitarian Coordination Structure



Source: UN

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