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Reporting Period: 1 January to 31 March 2021

## Children on the move, including from Venezuela, and COVID-19

### Humanitarian Situation Report No. 1



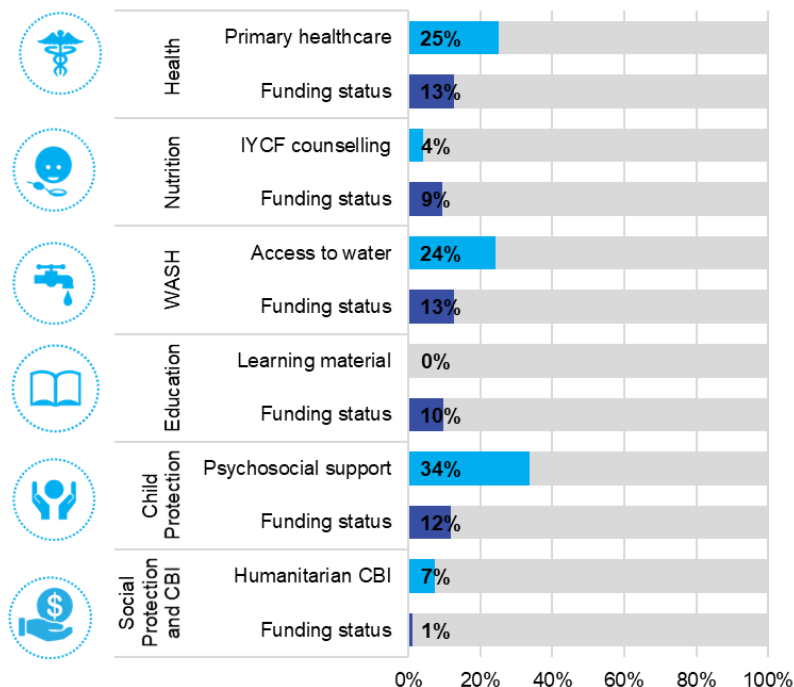
## Highlights

- In 2021, an estimated 14.7 million people, including 5.5 million children, will need humanitarian assistance related to: migration flows from and returns to Venezuela; needs related to the COVID-19 pandemic; violence; and internal displacement. UNICEF aims at reaching 2.49 million people, including 1.82 million children from the most vulnerable groups of Venezuelan migrants, and other vulnerable populations affected by violence and COVID-19 in Bolivia, Brazil, Colombia, Ecuador, Guyana, Peru and Trinidad and Tobago.
- As of March 2021, about 3.4 million Venezuelan migrants and refugees had been recorded in Bolivia, Brazil, Colombia, Ecuador, Guyana, Peru and Trinidad and Tobago. Despite movement restrictions related to COVID-19 containment measures, Venezuelan children and families continue displacing across borders in South America and the Caribbean. Many of them have taken irregular routes, exposed to concerning protection risks and lacking access to basic services.
- During the reporting period, with UNICEF support, nearly 1 million children have accessed formal and informal education opportunities, over 23,000 children and women received primary health care, child feeding counselling was provided to over 2,200 parents and caregivers, 61,000 people were reached with critical water, sanitation and hygiene (WASH) supplies and services, 94,000 children and caregivers received psychosocial support, over 3,300 families received humanitarian cash transfers and nearly 896,000 people were reached with key information on access to services.
- By March 2021, UNICEF's appeal was 91 per cent underfunded. Urgent support is needed to maintain and further scale-up response actions in the field. Without adequate funding, UNICEF will not be able to achieve its targets to reach the most vulnerable migrants and refugee families, and other extremely vulnerable children and families facing the effects of diminished livelihoods and limited access to services due to COVID-19.

## Situation in Numbers

- 5.48 million** children in need of assistance (UNICEF HAC 2021, based on RMRP 2021 and country estimates)
- 14.73 million** people in need of assistance (UNICEF HAC 2021, based on RMRP 2021 and country estimates)
- 4.6 million** Venezuelan migrants in Latin America and the Caribbean (RMRP 2021)
- 5.4 million** Venezuelan migrants worldwide (RMRP 2021)

## UNICEF's Response and Funding Status

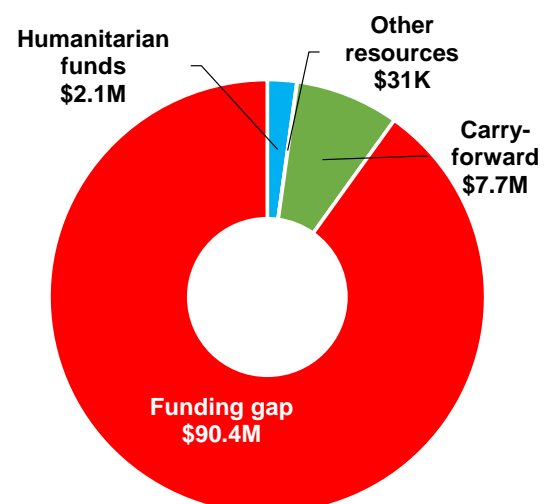


■ **Results** achieved as of March 2021 for one specific indicator (see Annex A for full report on performance indicators).

■ **Sector** funding status. Includes carry-forward and funds received in 2021 allocated to the overall HAC sector, which comprises several countries and other activities not necessarily reflected in the featured indicator. Cross-sectoral funding has been proportionally allocated to sectors.

## UNICEF Appeal 2021 US\$ 100.3 million

### Funding Status (in US\$)



\*Funding available includes: funds received in the current year; carry-over from the previous year; and other non-emergency funds contributing to the emergency response.

## Regional Funding Overview & Partnerships

In December 2020, UNICEF launched its 2021 Humanitarian Action for Children (HAC), which appeals for US\$100.3 million.<sup>i</sup> The purpose of this HAC is trifold: (a) meet the humanitarian needs – including COVID-19-related needs – of Venezuelan migrants, refugees and host communities (66 per cent of the total appeal) - in line with the 2021 Regional Refugee and Migrant Response Plan (RMRP);<sup>ii</sup> (b) respond to other vulnerable children and their families affected by COVID-19 in Colombia, Ecuador and Peru (24 per cent);<sup>iii</sup> and (c) meet the needs of internally displaced and violence-affected children and their families in Colombia and Ecuador (10 per cent).<sup>iv</sup> As of March 2021, UNICEF had US\$9.5 million available, including US\$7.5 million carried over from 2020 and US\$2.2 million received in 2021. Critical funding received to kick-start the response in 2021 include a flexible contribution from Sida – Sweden for addressing the needs of Venezuelan migrants and refugees, and host communities across all countries part of the appeal. In addition, allocations from UNICEF Global Humanitarian Thematic Funds were made to boost migration-related response, and COVID-19 support with focus on gender-based violence (GBV) prevention. Private funds were received in Peru from the Spanish Committee for UNICEF for the COVID-19 response in Peru. The results achieved so far would have not been possible without the continued support from key partners, nevertheless with a funding gap at 90 per cent, additional flexible funds are urgently needed to: ensure capacity to adapt programming to the different countries' priorities; establish adapted mechanisms to identify and assess the situation of children in need; and, further expand its presence and integration efforts. A prolonged period of funding gap hinders UNICEF capacity to respond to existing and emerging needs in a timely fashion. Approximately 80 per cent of resources received in 2021 and 53 per cent of carry over funds, are intended to address the needs of Venezuelan migrants, including those related to COVID-19.

## Regional Situation Overview & Humanitarian Needs

In 2021, UNICEF has prioritized actions in Bolivia, Brazil, Colombia, Ecuador, Guyana, Peru and Trinidad and Tobago, where some 14.7 million people, including 5.4 million children, will need humanitarian assistance due to migration from and to Venezuela.<sup>v</sup> COVID-19 pandemic,<sup>vi</sup> and violence and internal displacement in Colombia and northern Ecuador.

There are 5.5 million Venezuelans on the move, and approximately 3.4 million in the countries covered by this HAC.<sup>vii</sup> Since 2020, many migrants have started returning to Venezuela because they were unable to cover their basic needs in host countries, creating the risk of circular migration. There are over 135,000 returnees, often in need of humanitarian assistance, and more are expected in the coming months.<sup>viii</sup> Children on the move, who are often unaccompanied, are extremely vulnerable. Despite countries' efforts, children and adolescents on the move are at risk of family separation, insecurity, trafficking, exploitation, child recruitment and GBV. The scale and urgency of the needs have strained limited national capacities to absorb additional demand and is preventing children from enjoying their basic human rights.

Vulnerable groups in the region are also confronting COVID-19, as well as violence and internal displacement in Colombia and Ecuador. Among those affected, local indigenous people and people in the poorer wealth quintiles, particularly women and girls, are most vulnerable. COVID-19, at its second or third wave, has decreased government capacities to deliver services, which were already stretched by pre-existing crises. In Colombia, Ecuador, and Peru, approximately 7.5 million vulnerable people<sup>ix</sup> are estimated to be in need of assistance due to the socio-economic effects of COVID-19.

Despite the challenging context, UNICEF is focusing efforts to ensure continuity of services for vulnerable people, including health, nutrition, water, sanitation and hygiene (WASH), education, protection, and psychosocial support services, as well as implementing cash transfer programmes. UNICEF responses, which vary based on the countries' context, continue to focus on the most in need.

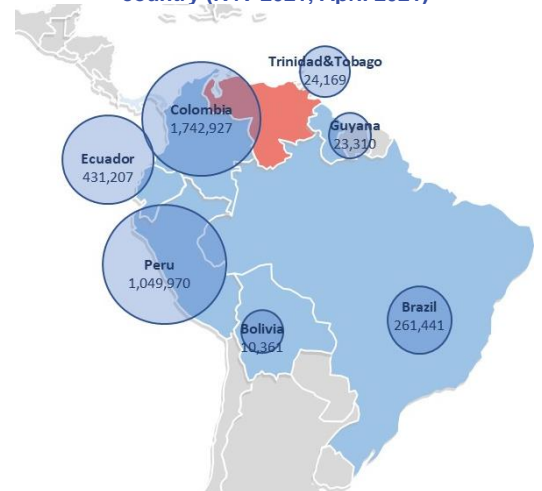
## Regional Humanitarian Leadership and Coordination

UNICEF, with governments and partners, is implementing a strategy that rests on two pillars:

1. **Migration and displacement:** (1) promote and advocate for the rights of migrant, refugee, host community and internally displaced children and their families; (2) ensure their access to child and social protection, education, prevention of gender-based violence, early childhood development, health, nutrition and WASH services; and (3) promote social inclusion and integration linking humanitarian action and development programmes.
2. **COVID-19:** (1) limiting human-to-human transmission and minimizing COVID-19 morbidity and mortality by supporting public health response for prevention, care and treatment, including through provision of supplies; and (2) preventing and addressing the socio-economic impacts of COVID-19 and ensuring the continuity of critical services for children.

In consideration of the complex context, and drawing on its long-term presence in the countries part of this HAC, UNICEF is linking humanitarian actions and development programming to ensure strengthened policies and systems. Across sectors, national and partner capacities are strengthened to respond to the needs on the ground. UNICEF prioritizes protection against sexual exploitation and abuse (PSEA) and GBV, and the provision of age-, gender- and disability-appropriate services. As per

Map 1: Venezuelan migrants and refugees per country (R4V 2021, April 2021)



This map is stylized and not to scale. It does not reflect a position by UNICEF on the legal status of any country or area or the delimitation of any frontiers.

its Grand Bargain commitments,\* UNICEF mainstreams cash-based interventions, community engagement, accountability to affected populations and the localization of interventions. At regional level, UNICEF Latin America and the Caribbean Regional Office (LACRO) supports Country Offices (COs) to adopt adequate preparedness and response measures, and collaborates with other United Nations agencies and partners.

Sector	UNICEF LACRO's role in inter-agency coordination mechanisms and recent developments
<b>Child Protection</b>	LACRO, together with World Vision, co-leads the Subgroup on <b>Child Protection in Emergencies (CPiE)</b> , where it coordinates and works actively with the Protection sector of the Coordination Platform for Refugees and Migrants from Venezuela (R4V). The regional sub-group provides technical support to national platforms and supports coordination of activities between the members at regional and national level. The 2021 work plan has been reviewed.
<b>Gender</b>	LACRO is an active member of the R4V <b>GBV and Human Trafficking</b> sub-sectors, and has supported the development of work plans and different tools. Within the framework of the R4V GBV and CPiE sub-groups, UNICEF, in partnership with HIAS, finalized the remote psychosocial support model for refugee and migrant GBV girl survivors. In the framework of the GBV sub-group, HIAS and UNICEF are developing a regional report on the challenges, including violence, faced by girls and adolescents in situations of human mobility in LAC.
<b>Education</b>	LACRO supported R4V countries to develop national chapters of RMRP and definition of indicators for each national R4V Education chapter. As part of capacity building efforts outlined in its 2021 work plan, the <b>Regional Education Group</b> supported the facilitation of core skills training. Participants of Education / <b>Education in Emergencies (EiE)</b> coordination groups gained theoretical knowledge and practical skills on coordination and information management for EiE (including refugee and migration EiE response).
<b>Nutrition</b>	LACRO leads the R4V <b>Nutrition sector</b> , where it coordinates and works actively with other regional sector partners and supports national actors. In January, UNICEF conducted a capacity needs assessment to better understand the specific capacity development needs of the national nutrition sectors/platforms. Based on results, in March, UNICEF organized and conducted a webinar series on Nutrition in Emergencies in the context of COVID-19 and migration, in collaboration with the Global Nutrition Cluster Technical Alliance, with the objective of training partners on how to adapt programmatic nutrition activities to these contexts. Some 775 people participated in one or more webinars.
<b>Health</b>	LACRO supports R4V countries and works with the R4V <b>Health Cluster</b> . The Cluster organized a series of technical webinars. An assessment of the HIV services for refugees and migrants was conducted, in close collaboration with UNAIDS, it revealed the need for a stronger health information systems able to capture and ensure the needed follow-up on pregnant women part of the Prevention Mother to Child Transmission strategies in hosting countries.
<b>WASH</b>	UNICEF leads the <b>WASH sector</b> of R4V, supports national sectors and is actively looking for a co-lead agency to share the workload; several actors have expressed interest. Communication material was shared with COs to support promotion activities and campaigns around the World Water Day (22 March).
<b>Social Protection (Cash-based Intervention CBI)</b>	LACRO acts as <b>Technical Secretariat of the Regional Cash Working Group</b> of R4V, maintaining linkages with REDLAC in what pertains to social protection and cash transfers at the regional level and, by extension, in those countries where cash groups have been established. Moreover, LACRO actively participates in Cash Learning Partnership (CaLP) monthly meetings with national cash working groups leaders.
<b>C4D/AAP</b>	The C4D LACRO team is the co-leader of the <a href="#">Communication with Communities (CwC) / C4D - R4V Regional Working Group</a> , contributing to strengthen the CwC/C4D regional cross sectoral coordination mechanism, aligning and leveraging individual initiatives to expand and improve reach and support to the population on the move, and facilitating knowledge sharing and best practices exchange among over 30 organisations.
<b>Communications</b>	LACRO's Communications team co-leads R4V <b>Regional Communications Working Group</b> .

#### Content Summary – Quick links

[Bolivia](#) | [Brazil](#) | [Colombia](#) | [Ecuador](#) | [Guyana](#) | [Peru](#) | [Trinidad and Tobago](#) | [LACRO](#)

[Annex A: Summary of Programme Results](#)

[Annex B: Funding Status](#)

[Annex C: Infographic Funding Overview](#)

## Situation Overview & Humanitarian Needs

According to the R4V, as of December 2020, nearly 10,500 Venezuelan migrants had settled in Bolivia, of whom approximately 10 per cent were girls and 16 per cent boys; by December 2021, it has been estimated that they will be around 12,500 and it is expected that 94 per cent of them will be in need of humanitarian assistance.<sup>2</sup> 12,500 and it is expected that 94 per cent of them will be in need of humanitarian assistance.<sup>xi</sup> Considering the increase of the migrant and refugee outflow, UNICEF humanitarian response requires a holistic approach to effectively respond to health, WASH, education, child protection, GBV prevention, and social protection needs.

## Summary Analysis of Programme Response

### Health

According to the baseline of the EUROPANA project, for 86 per cent of Venezuelan migrants and refugees access to public health care is the most pressing need after documentation.<sup>xii</sup> Although they are entitled to access private health services, the high cost is unaffordable due to their limited access to livelihood and financial resources. Lack of quality and affordable health services leads to delays in immunization schedules for children and adolescents, scattered paediatric control, and limited disease treatment, including for malnutrition. This situation has worsened due to the COVID-19 pandemic, which diagnosis, treatment, and now vaccination, are too often limited for Venezuelan migrants and refugees.

In this context, UNICEF Bolivia will offer economic assistance to Venezuelan migrants and refugees to contribute to ensure access to primary health care services. Planned activities for 2021 encompass provision of health services, including emergency care, hospitalization and distribution of medicines to migrants and refugees children and their families who cannot access public or private national health care systems.

### WASH

Almost 86 per cent of Venezuelan migrants and refugees surveyed within the framework of the EUROPANA project have access to tap water; however, tap water is not safe in some parts of the country. Only 23 per cent of Venezuelans can afford to buy safe bottled water. The reminder, thus, is drinking water not safe for human consumption. Furthermore, 85 per cent of migrants and refugees surveyed have access to handwashing facilities, but only 4 per cent of female respondents received female hygiene supplies.<sup>xiii</sup> Most Venezuelan migrants and refugees live in rented houses or shelters with access to sufficient sanitation services.

UNICEF response in 2021 will focus on: improving the delivery of essential hygiene supplies, including female hygiene items, which is a key priority; promoting best hygiene practices; and distributing personal protection equipment (PPE) to migrants at border locations. All WASH interventions are designed to be gender and age-sensitive and relevant.

### Education

Venezuelan migrants and refugees consider that lack of school enrolment (87 per cent), high cost (71 per cent), and limited information available (57 per cent), are the main barriers to access to education services in Bolivia. They recognize that one of the most critical need would be provision of information on the process of school enrolment (89 per cent).<sup>xiv</sup>

Other factor hindering the possibility of migrants and refugees to fully enjoy their right to education is the lack of connectivity. As many of their Bolivian peers, Venezuelan children have limited access to internet and poor availability of electronic devices. This prevents the continuity of their learning paths during the COVID-19 pandemic, when many school activities are implemented online, and, in some cases, leads to school dropout. Another challenge is the lack of academic records from previous education institutions in Venezuela and/or their recognition, that often results in the impossibility to be enrolled in schools in Bolivia.

During 2021, UNICEF aims at delivering essential learning materials to Venezuelan migrant and refugee children, supporting their access to online and in-person learning; and elaborate a route for the educational care of migrant and refugee children, including the application of regional integration mechanisms (Convenio Andrés Bello - CAB).

### Child Protection, GBViE and PSEA

The granting of refugee status and the migration regularization processes continue with great difficulties, especially after a pause in the implementation of the resolution 148/2020<sup>xv</sup> due to change of administration. However, according to the Ombudsman's Office, unaccompanied and separated children are beginning to be identified and referred to services. Almost 60 per cent of Venezuelan migrants and refugees consider legal support, child protection and psychosocial and emotional support as relevant needs.<sup>xvi</sup>

UNICEF response will focus on the identification, attention, and referral of child protection cases, through case management methodologies. There will be three multi-disciplinary teams in the field and two national advisers (legal and psychosocial) working on the planned activities. Additionally, all implementing partners will be trained on PSEA and on identifying and referring cases of violence against children and women to relevant services. UNICEF is currently in the process of hiring personnel.

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<sup>1</sup> For Bolivia, the current report includes only information on UNICEF's response to needs related to the Venezuelan migration situation. UNICEF Bolivia's COVID-19 response is part of the LACRO HAC appeal and results will be reported on a different SitRep.

<sup>2</sup> UNHCR - IOM (18 March 2021). *Plataforma de Coordinación para Refugiados y Migrantes de Venezuela. Obtenido de Refugiados y migrantes de Venezuela*. More information is available



## Social Protection and Cash Transfers

During 2020, due to the COVID-19 confinement measures, job opportunities were scarce, especially within the informal sector. This severely affected a high percentage of both the Bolivian population and the Venezuelan community. Almost 61 per cent of a group of surveyed Venezuelan migrants and refugees are unemployed, while 35 per cent have a job in the informal sector (vendor, cleaning, general services, and gastronomy).<sup>xvii</sup> The socioeconomic impact of the pandemic drastically reduced Venezuelan households' income, generating further barriers to cover accommodation, food, transportation, telecommunication, and clothing expenses. In this unprecedented context, UNICEF and its implementing partners plan to deliver in-kind support to families in transit and those living in shelters. These include: food baskets, clothes, transportation tickets, and sim cards.

## Communications for Development (C4D), Accountability to Affected Population

In November 2020, Bolivia joined the U-Report regional platform, *Uniendo Voces*, aimed at informing and promoting the participation of Venezuelan adolescents and young people on the move. The roll-out of the U-Report is planned for 2021. A committee has been already established to produce adequate information and surveys on topics of interest for Venezuelan migrants and refugees. An accountability to affected populations (AAP) approach was used to design this activity. Reports based on the analysis of data from the U-Report surveys are expected in June 2021, and Infobot technology will be used concerning health, education, COVID-19, immigration procedures and other topics of interest.

## Humanitarian Leadership and Coordination

Bolivia is part of the southern cone chapter in the R4V platform. In 2020, the national coordination environment was established with all the actors that provide humanitarian assistance for Venezuelan migrants and refugees. Since 2021, three thematic subgroups were established: education and integration; protection; and basic needs and health. UNICEF participates in all these subgroups and is also the leader of the basic needs and health subgroup. UNICEF and all partners recognize that this organizational structure is favourable for optimizing interventions.

For more information: [www.unicef.org/bolivia/](http://www.unicef.org/bolivia/)



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## BRAZIL<sup>3</sup>

### Situation Overview & Humanitarian Needs

Pre-existing disparities and vulnerabilities of migrants and refugees, particularly indigenous populations, have been exacerbated by the pandemic. Brazil remains one of the worst COVID-19 affected country in the world, with the second-highest number of COVID-19 confirmed cases.<sup>xviii</sup> The Northern States of Amazonas, Para and Roraima, hosting over 50,000 Venezuelan migrants and refugees (34 per cent children), have been severely impacted by the pandemic, with overstretched social services, restricted resources and precarious health system capacities. Amazonas recorded more COVID-19 deaths in the first two months of 2021 than in the entire 2020, while Roraima - one of the poorest states - has the highest incidence rate in the country. The borders remain closed, though influx continued through unofficial and hazardous routes, resulting in a significant number of undocumented migrants (in February alone, 1,700 undocumented people were registered in Boa Vista, of whom approximately 600 were children). Since December 2020, the number of migrants in Boa Vista and Pacaraima living in shelters, spontaneous occupations and in the streets, doubled (over 12,000 as of end March) and *Operacaco Acolhida* (OA)<sup>xix</sup> activated phase III of its contingency plan, with four new shelters being constructed and requiring multi-sectoral services, while facing a budget reduction of 60 per cent. In Manaus, due to poor living conditions and regulations, migrants moved out of shelters, spreading across municipalities, making coverage of critical services more challenging.

### Summary Analysis of Programme Response

#### Nutrition

Nutritional assessments conducted by UNICEF-supported teams on 1,203 children living inside and outside shelters in Boa Vista, Pacaraima, Manaus, Belem and Ananindeua, identified 19 children with severe acute malnutrition (SAM) and 64 children with severe stunting. These children were referred to a primary health care facility to receive proper treatment. Children living in shelters in Boa Vista received special meals prescribed by a nutritionist. Nutritional assessments on 333 pregnant women, including 80 pregnant girls, and 486 lactating women, identified 34 pregnant women and 19 lactating women as underweight. A total of 385 children received food supplements through micronutrient powders and 727 women received ferrous sulphate and folic acid to prevent micronutrient deficiencies. In addition, 2,034 caregivers (80 per cent female) of children up to 5 years of age benefitted from nutrition counselling on adequate breastfeeding, complementary feeding and adequate dietary practices. Practical training on healthy food preparation within the *shelters' kitchens initiative* reached 159 caregivers (80 per cent female) in Boa Vista, promoting sustainable adequate dietary practices and nutrition among Venezuelan refugees and migrants. Given the positive results obtained in improving feeding practices of caregivers of children under 5 years old,

<sup>3</sup> For Brazil, the current report includes only information on UNICEF's response to needs related to the Venezuelan migration situation. UNICEF Brazil's COVID-19 response is covered by a [country-specific HAC appeal](#) and results will be reported on a different SitRep.

UNICEF plans to scale-up this initiative at in other geographical areas. The interruption of the ministry of health (MoH) micronutrient programme NutriSUS, which started in 2019, is a key challenge affecting vulnerable migrants and refugees. However, the resumption of the programme is expected during the second half of 2021.

## Health

In total, 3,570 children under 5 years old (47 per cent girls), 3,053 children and adolescents (53 per cent girls) and 1,568 women received primary health care services – with a total of 13,102 consultations provided during the reporting period. Among pregnant women assessed, 56 per cent received at least one prenatal consultation. Approximately 24 per cent of the pregnant women evaluated presented risk factors for their pregnancies. Only 53 per cent of pregnant women were tested for HIV at least once during pregnancy. In the reporting period, 15,317 vaccination monitoring activities were carried out: 10,886 in Boa Vista, 1,187 in Pacaraima and 3,244 in Manaus. In total, 2,950 people received vaccines. Specific attention was given to vaccination against measles and polio. In 2021, 953 people have been vaccinated against measles and 159 against polio.<sup>xx</sup> A key strategic priority remains strengthening local health systems, namely 19 primary health care units, where a total of 5,740 Venezuelan women and children in Boa Vista received 17,744 health services. UNICEF supported the monitoring of suspected cases of COVID-19 in 16 shelters, with 9,630 interviews carried out and 2,139 referrals to specialized care.

## WASH

Nearly 1.5 million litres of drinking water have been delivered by UNICEF through water trucking, reaching 3,300 Venezuelan migrants and refugees in spontaneous settlements in Boa Vista. Approximately 6,900 people living in shelters accessed sufficient safe water. Some 5,300 people accessed improved sanitation while over 9,400 benefitted from hygiene promotion activities and hygiene items in Roraima, Amazonas and Para states. UNICEF's household bleach factory supported 5,000 people in Boa Vista. Documented concerns indicate a grave state of disrepair of sanitation infrastructure in the Roraima shelters, which do not meet standards in terms of numbers of toilets available, quality of facilities, and final disposal of raw sewage. Roraima WASH Committee developed an emergency response plan, with priority works required. Approximately US\$ 2 million are needed to complete rehabilitation works, this action is yet to be funded.

## Education

School-aged children and adolescents (4 to 17 years old), particularly those belonging to indigenous populations, still face significant obstacles in accessing school enrolment. The 30 *Super Panas* – child-friendly spaces providing education, protection and psychosocial support (PSS) services – support the transition and integration of children and adolescents into the formal education system. *Super Panas* are currently managing the school enrolments of almost 1,000 Venezuelan students. Each day, an average of 300 children and adolescents attend *Super Panas* across the three northern states of Brazil. The *Radio Super Panas* initiative, developed in response to COVID-19 restrictions, including school closure in 2020, continues to broadcast educational content thereby ensuring learning continuity and connectivity for over 8,000 Venezuelan boys and girls in shelters and informal settlements.

## Child Protection, GBVIE and PSEA

During the reporting period, UNICEF supported 1,280 separated and unaccompanied children (607 girls and 673 boys) - representing 85 per cent of the 2020 caseload. Specialized teams secured timely case management and referrals to public services also through the software *Primero CPIMS+*,<sup>xxi</sup> in which 114 family reunification cases have been already conducted in collaboration with public authorities. As socio-economic vulnerabilities aggravated by the pandemic have increased family separation, a cash transfer project has been designed, benefitting 209 reunited children so far (114 girls and 95 boys). Strengthening national social assistance capacities remains a key priority, for which dedicated resources would allow to sustain access and ensure integration of Venezuelan children. COVID-19 restriction measures continue to hinder identification and referral of violence against children cases. PSS has been provided to 6,585 children and caregivers (2,966 girls, 3,352 boys, 232 women and 35 men) through *Super Panas*, while GBV prevention and response activities reached 247 people (125 girls, 108 boys and 14 women), with a tailored approach for indigenous communities. In addition, UNICEF trained 70 military staff on PSEA.

## Social Protection and Cash Transfers

The government announced a third round of COVID-19 emergency benefits through the cash transfer *auxilio emergencial*. However, this scheme targets only individuals, including Venezuelan migrants and refugees, who have already registered for this social benefit back in 2020, thus excluding migrants who entered the country in 2021. To ensure social protection services within the migration response, additional resources would be required to: secure dedicated technical support to implement the workplan elaborated with the ministry of citizenship in 2020; and ensure working relations with the newly appointed Social Assistance National Secretary. UNICEF is elaborating a framework which includes a comprehensive assessment and analysis of markets, regulations and financial services providers, to ensure risk-informed decisions and optimal cash transfers modalities.

## Communications for Development (C4D), Accountability to Affected Population

Messaging on access to services and life-saving practices reached over 21,500 Venezuelan migrants and refugees. Some 160 Venezuelan and Brazilian Students from public schools have been engaged on social and behaviour-change activities, jointly creating materials to promote positive behaviour, both through community and online campaigns. The Community Mobilization with Adolescent Participation Strategy so far has engaged 30 community mobilizers, with a coverage of over 9,000 migrants and refugees, including in indigenous communities and people in spontaneous shelters. Some 2,495 people

participated in accountability mechanisms, which have been mapped, and an automatized system for AAP records is being developed as one key step in implementing an integrated AAP-PSEA Framework.

### Human Interest Stories and External Media

- [Human Interest Story] [Nutrition: Dayse and her fight against malnutrition at the age of 6 \(Portuguese\)](#)
- [Human Interest Story] [CBI for family reunification: Juana is reunited with her grandchildren \(Portuguese\)](#)
- [Press Release] [PRIMERO: UNICEF launches innovative child protection case management system in Brazil for humanitarian action \(Portuguese\)](#)
- [Press Release] [Youth engagement and integration: over 150 Brazilian and Venezuelan adolescents participate in virtual competition in Roraima \(Portuguese\)](#)
- [Press Release] [Education for Children on the Move: UNICEF supports refugee and migrant families in enrollment of children and adolescents in Manaus \(Portuguese\)](#)

### Humanitarian Leadership and Coordination

UNICEF leads the R4V WASH, Nutrition and Education sectors, as well as the Child Protection Sub-sector and the CwC working group at both national and sub-national levels. UNICEF promotes the active engagement of over 25 key partners, including government stakeholders, and provides technical guidance for the elaboration of intersectoral contingency plans and response strategies, based on the identification of gaps and priority needs. In doing so, particular attention is given to community-based approaches, and inclusive services taking into account age, gender, language, ethnicity and culture. Data collection and analysis have been automatized to offer real time monitoring and visualization. Exchanges with Venezuela Country Office have intensified with regards to addressing the increasing numbers and protection concerns of separated and unaccompanied children and to coordinating C4D initiatives and materials.

For more information: [www.unicef.org/brazil](http://www.unicef.org/brazil)



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## COLOMBIA<sup>4</sup>

### Situation Overview & Humanitarian Needs

#### Children on the move from Venezuela

According to migration authorities (Migración Colombia), there are 1.7 million Venezuelans in Colombia, of whom approximately 56 per cent entered irregularly. The number of Venezuelan migrants in an irregular situation will likely increase. At end 2021, 2.08 million migrants are projected to be in Colombia, more than 160,000 people will transit to other destinations, in some cases walking through routes in extremely vulnerable conditions, and 1.87 million will be making pendular movements to access services and assistance. The government issued the Decree 216/2021 establishing the Temporary Protection Statute for Venezuelan Migrants under the Temporary Protection Regime, among other immigration actions. Since 21 March, armed activities have taken place in Venezuelan areas bordering Colombia. This has led to more than 5,000 Venezuelan and Colombian nationals living on the Venezuelan side of the border to move into Colombia. There are early signs of movements of displaced people to other municipalities, such as Arauca and Saravena, and in rural areas inhabited by indigenous populations. UNICEF has been responding in the areas of WASH, Protection, C4D; however, more support is required to tackle the growing needs.

#### COVID-19

According to MoH, more than 2.6 million COVID-19 cases and over 68,000 deaths have been confirmed. The government has adopted different measures to prevent and control COVID-19, such as movement restrictions, school calendar changes, border closures and curfew. The measures affect population movements and impact the transit of migrants within and between countries, increasing the use of illegal crossings and therefore the risks, especially for children. Some national service providers have suspended activities to avoid gatherings and prevent COVID-19 spread. The effect of these suspensions is an increase in the protection risks faced by children and adolescents, including violence, discrimination, and trafficking. In addition, there is an increased risk of stigma, xenophobia, and evictions due to late payment of rent in several cities, especially in border areas. This context forced a reduction of the scale and scope of interventions, requiring adapted provision of services.

#### Violence and internal displacement

According to OCHA reports,<sup>xxii</sup> between January and March 2021 the number of displaced people increased by 84 per cent as compared to the same period in 2020. The departments in the Pacific region account for 56 per cent of displacements and 86 per cent of those affected. In Nariño and Arauca, internal displacement is recurrent and mainly caused by the threat of armed confrontations between non-state actors. In 2021, at least 18,985 people have been victims of confinement as a protection mechanism or by imposition due to armed actions by non-state groups (142 per cent increase with respect to 2020). Restrictions and threats to humanitarian access have been recurrent. Between 1990 and 2021, Colombia had more than 12,000 victims of antipersonnel mines and unexploded ordnance. During the first quarter of 2021, armed actions by non-state groups against security forces with improvised explosive devices (IEDs) were reported.

<sup>4</sup> For Colombia, the current report includes information on UNICEF's response to needs related to the Venezuelan migration situation, support to other vulnerable populations affected by the impacts of COVID-19, and response to needs related to violence and internal displacement in parts of the country.

## Summary Analysis of Programme Response

### Nutrition

#### Children on the move from Venezuela

UNICEF has provided infant and young child feeding (IYCF) counselling to 20 families in shelters in Arauquita (Arauca department, Venezuela border). In Cucuta (Norte de Santander department), UNICEF and its partner Action Against Hunger (ACF) screened 237 girls and 234 boys aged 6 to 59 months, of whom seven cases of moderate acute malnutrition (MAM) and 43 children at risk of malnutrition were identified. In addition, 72 boys and 119 girls aged 5 to 10 years were screened, five children had acute malnutrition and 20 were at risk of malnutrition. All children received deworming treatment, micronutrient supplementation or food supplements to prevent malnutrition. Children with MAM received treatment depending on nutritional diagnosis. In seven border municipalities, 343 children and young people, aged 6 to 23 years, were screened for malnutrition, 404 pregnant and lactating women received micronutrient supplementation and 120 caregivers received personalized IYCF counselling. All nutrition activities were adapted to the COVID-19 context to reduce infection risks. UNICEF has also conducted two technical online webinars on IYCF in emergencies and prevention of malnutrition in children and pregnant and lactating women (PLW). A total of 303 physicians, paediatricians, nurses, and nutritionists attended these sessions.

#### COVID-19

UNICEF is in the readiness phase to kick start the nutrition interventions addressed to 3,000 boys and girls, 500 PLW and 1,000 caregivers in Tumaco, Barbacoas (Nariño department), Uribia and Manaure (La Guajira department). These municipalities have been heavily affected by COVID-19 impact, leading to food insecurity and instances of death due to malnutrition.

### Health

#### Children on the move from Venezuela

Health actions continue to focus on providing basic health services to children and PLW, in compliance with national guidelines, including growth and development care, vaccination, prenatal care, first-level medical care and oral hygiene. As of March, 3,161 children and women had received basic health care services (73 per cent children, of whom 55 per cent girls and 45 per cent boys). A total of 1,152 children were vaccinated as per national standards, 458 were vaccinated against measles. Additionally, 240 health workers received PPE. Technical assistance has been provided to partners at the national level, including on maternal mortality prevention programmes, and diagnosis and referral of gestational syphilis. Coordination of the response at the local level remains challenging due to the rotation of partners.

#### COVID-19

Colombia started the implementation of the National Vaccination Plan against COVID-19 in February 2021. UNICEF has been in constant communication with the MoH and with local authorities to identify actions to support the implementation of the Plan at the local level. This includes supporting local health authorities with human resources to: coordinate the implementation of the Plan; provide technical assistance in the cold chain; and support epidemiological surveillance processes. UNICEF has supported the MoH with information on the technical characteristics of supplies related to COVID-19 vaccination. Additionally, considering the negative impact of COVID-19 on routine vaccination of children, UNICEF is working with the MoH to support the Measles Vaccination Campaign. Preidentified needs include increasing the number of vaccinators and providing technical assistance at the local level to ensure the use of the vaccination registry system (PAIWEB 2).

### WASH

#### Children on the move from Venezuela

A total of 9,995 migrants returnees, refugees and host communities (1,482 girls, 1,517 boys, 3,457 women, 3,539 men) received WASH supplies and hygiene promotion messages in Cucuta, Villa del Rosario (Norte de Santander department) and Barranquilla (Atlántico department). In addition, UNICEF continues supporting community-level needs assessment, local agreements, definition of WASH technologies, among other key actions to improve water, sanitation and hygiene access in host communities.

Currently, the main gap in the WASH response is reaching migrants in transit. Beyond Pamplona municipality (Norte de Santander), there is no access to safe WASH services along the route that migrants usually take, meaning they travel around 400 Km towards the capital of the country, Bogota, and 1,000 Km to the Ecuadorian border, in extremely precarious conditions. UNICEF is expanding WASH services to a new transit point in Los Patios, near to the Venezuelan border, reaching up to some 400 people daily.

#### COVID-19

With UNICEF support, 2,567 people (1,141, girls, 656 boys, 489 women, 281 men) from indigenous communities in the Amazon have improved access to safe water for human consumption, cooking, and handwashing with soap. Some 9,987 people (3,734 girls, 3,258 boys, 1,601 women, 1,394 men) in seven municipalities across Amazonas, Atlántico, Chocó and La Guajira departments,<sup>xxiii</sup> accessed critical WASH services and were provided with key hygiene messages. In January, a second wave of COVID-19 started, and new measures were implemented restricting movements to and within the Amazon region, limiting UNICEF WASH response. UNICEF is working with the education sector to improve WASH services at school level.

#### Violence and internal displacement

In mid-March, Arauquita municipality received more than 5,000 people from Venezuela affected by armed conflict. UNICEF was able to rapidly deploy WASH response, providing critical, timely and life-saving services to this vulnerable population.



©UNICEF Colombia/2021/Arauca.  
UNICEF-supported handwashing station  
in border department Arauca.



Services included the installation of eight handwashing points, installation of water access connections at the main shelter, maintenance and cleaning of infrastructure, among other.

In violence-affected municipalities in Chocó and Nariño departments,<sup>xxiv</sup> also hit by La Niña phenomenon, a total of 2,753 people received hygiene kits and critical WASH items, such as water storage tanks. With the lack of visibility of the needs related to violence and internal displacement in Colombia within the humanitarian agenda, resource mobilization and response efforts are challenging.

## Education

### Children on the move from Venezuela

Access to education for migrant and refugee children has been heavily impacted by COVID-19 and the measures taken by the government to control its spread. UNICEF Colombia has focused efforts in supporting distance learning solutions in municipalities with a great number of migrant children, such as Arauca and Santa Marta, promoting basic competencies and socioemotional support. With UNICEF support, tutors follow up on children's learning status via phone calls and instant messaging applications, accompanying their learning process despite physical distance.

### COVID-19

In September 2020, the ministry of education (MoE) launched the nationwide guidelines for the reopening of schools and the progressive return of students. Since then, 11,755 schools are partially open, benefitting 1,215,934 students. Given that most children continue to receive distance learning, UNICEF has prioritized the training of teachers on pedagogical tools to best support students in basic competencies and socioemotional support. A total of 548 teachers have been trained.

### Violence and internal displacement

Children in municipalities affected by armed violence are in need of educational continuity, especially given the high risks of dropping out due, for example, to recruitment. UNICEF continued to provide educational services through *La Aldea*, a pedagogical tool that promotes learning and socioemotional support through stories that relate to children's lives and allow them to reflect on their own experiences while they learn math, science and languages.

## Child Protection, GBViE and PSEA

### Children on the move from Venezuela

According to figures from Migración Colombia, the announcement of the Temporary Protection Statute has increased the number of migrants, especially people seeking to reunite with their families in Colombia. The situation in Arauquita municipality is generating protection risks for children and adolescents, especially child recruitment, presence of landmines and other remnants of war, child separation and mental health issues.

As part of its humanitarian support, Drop-in Centres for children and adolescents living in street situation were established by UNICEF, in coordination with the Inter agency group on Mixed Migratory Flow (GIFMM in its Spanish acronym), local authorities, and Colombian Institute for Family Welfare (ICBF in its Spanish acronym). Some 1,324 children and adolescents participated in prevention of violence against children (VAC) activities, including GBV. These were offered in Riohacha, Maicao and Villa del Rosario municipalities, including community-based activities and family strengthening programmes. Implementing partners were trained on PSEA and, if in contact with children, received additional orientation on child safeguarding.

The following humanitarian actions have been carried out in Arauquita: (i) provision of pedagogical materials and methodologies for the prevention of VAC, including GBV, to ICBF and local organizations; (ii) provision of psychosocial support in temporary shelters and installation of child friendly spaces "Learning protects you"; (iii) technical assistance on the development and activation of protocols and routes for the protection of children, including routes for the protection of GBV survivors and prevention of child recruitment, as well as a protocol for reporting PSEA cases. The response capacity of local entities is still limited. Cases of unaccompanied or separated children are anticipated because mothers, in particular, are temporarily visiting their former residences to explore the possibilities of returning.

### COVID-19

The Drop-in Centres have been adapted to the pandemic context and specific protocols were developed, in collaboration with health authorities, UNICEF, and PAHO. In Los Patios (Norte de Santander), the national and local governments, with the support of GIFMM, created a Transitory Health Care Center (CASLP in its Spanish acronym) for the prevention of COVID-19. A special protocol for the prevention of VAC within the CASLP and access to protection services for identified unaccompanied or separated children was supported by UNICEF. Access to services and humanitarian assistance is hampered by curfews, mobility restrictions and strict quarantine.

### Violence and internal displacement

UNICEF leads the implementation of humanitarian actions for the prevention of child recruitment in Nariño and Chocó, which include strengthening the capacities of local actors to prevent and identify risk factors. Activities with children and adolescents will begin in April. These include life-skills and psychosocial programmes. The communities' capacity to activate recruitment



©UNICEF Colombia/2021/Arauca. UNICEF-supported child protection activities in border department Arauca.

prevention, response routes, and early warning systems in these territories has been strengthened. Clashes between armed actors limit access to communities. Norte de Santander, Antioquia, Guaviare, Caquetá and Cauca departments continue to present significant protection risks.

## Communications for Development (C4D), Accountability to Affected Population

### Children on the move from Venezuela

UNICEF is implementing the strategy *Somos Enlace*, based on community radios and alternative media, to reach population in the most remote areas. In Colombia, there are 2,186 public communication media, however, in 666 municipalities (60 per cent of the country), where about ten million people live, there is no access to local content and thus they only receive information produced in and for the capital or large cities. Thus, strengthening local production of information and community media has a great impact on reducing gaps of information and reaching the most vulnerable families. UNICEF has interacted with 25,050 people, ensuring the delivery of information; 416 people have participated in local production of information (22 girls, 19 boys, 205 women and 215 men); and 815 people have evaluated UNICEF response through AAP mechanisms (8 girls, 11 boys, 292 women, 303 men; and 201 more, that is not possible to disaggregated by sex or age because the information come from social media). Feedback has been received from the communities on the treatment, quality and relevance of the shared messages. This allowed to validate the different needs and guarantee that the information produced is in line with their needs.

### COVID-19

Since 2020, C4D has established a community-based rumour-tracking system. This allows UNICEF to avoid the dissemination of generic information, identify risky behaviours, lack of information, available communication channels among communities, and alert sectorial interventions regarding actions on communication. In 2021, UNICEF has identified 522 rumours and beliefs about vaccines (especially in indigenous communities), return to school, sexual violence, and mental health.

### Violence and internal displacement

Regarding the emergency in Arauquita, UNICEF rapid response included the provision of pedagogical materials to promote or reinforce safe behaviours among families; a local technical team works with families to identify rumours, promote safe behaviours and ensure implementation of AAP.

### Human Interest Stories and External Media

The second season of *Super Panas* digital campaign against xenophobia, created with UNCHR, was broadcasted on UNICEF digital channels. With the title “Super Panas in Coronavirus times”, it includes protection messages against COVID-19, reaching 60,848 people. The content of *Super Panas* and of the TV series *Amigos sin Fronteras* – which shows real friendship stories between Colombian and Venezuelan children – are also being used in other projects of partners. Messages were developed to showcase UNICEF results on the ground in response to the mixed migratory flows and COVID-19, with the hashtag #UNICEFenAccion.<sup>xv</sup> Overall, there were 27,236,286 Facebook impressions, 172,029 positive interactions and 3,552 views. On Twitter, 122,648 impressions, 662 interactions and 1,765 views were recorded. On Instagram, 108,754 impressions, 4,256 interactions and a reach of 122,143 were achieved.

### Humanitarian Leadership and Coordination

UNICEF participates in the GIFMM, at the national and local level, and in the inter-cluster group (GIC) led by OCHA and the local coordination teams in La Guajira, Norte de Santander, Choco, Arauca and Nariño. UNICEF is member of the national childhood group and leads the coordination of WASH and Education response. Through inter-agency coordination, progress has been reached to: prevent the risk of statelessness; promote actions for unaccompanied and separated children; implement needs assessment; prevent xenophobia; promote social integration, accountability to communities and integral response.

In Arauquita, the WASH response was led at the territorial level, developing joint workspaces with partners and coordination with national cluster. UNICEF, as EiE Cluster lead, organized meetings with local authorities, the MoE and cluster partners, with the objective of coordinating a need-based response, mobilize the partners and provide them with the same framework of information regarding the latest developments of the emergency. The EiE Cluster has launched an initiative to create and host an Early Childhood Development (ECD) in Emergencies working group. The working group is led by Sesame Workshop and UNICEF, with terms of reference and has been shared and coordinated with national government authorities to include their feedback; to date, the MoE, the ICBF and the CIPI (Intersectoral Commission for Early Childhood) have joined the working group and an open call to cluster partners is in motion. UNICEF is co-leading the CP Area of Responsibility (AoR) with Corporación Infancia y Desarrollo. The CP AoR coordinates response, manages information and provides capacity building for 19 members (national entities and international organizations).

For more information: [www.unicef.org/colombia](http://www.unicef.org/colombia)



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## Situation Overview & Humanitarian Needs

### Children on the move from Venezuela

As of March 2021, there were about 430,000 Venezuelan in Ecuador, according to estimations by the R4V platform. The latest UNHCR Protection Monitoring (October – December 2020), based on a sample of their programmes' beneficiaries, finds that of those who arrived in Ecuador in 2020, 68 per cent entered through irregular border crossing points. Migrants in an irregular migratory situation face additional challenges in terms of access to services and enjoyment of their rights. According to the same source, closure of schools to prevent the spreading of COVID-19 has affected more children already in a vulnerable situation: as a result, 26 per cent of children and adolescents of refugee/migrant households have not been enrolled in school in 2020. Also, 75 per cent of respondents mentioned they are mainly concerned about meeting the household basic needs (i.e. food, clothing).

### COVID-19

During 2020, Ecuador experienced an increase of deaths of over 42,000 (almost 60 per cent) as compared to previous years. This increase has not affected children and adolescents (Universidad de Cuenca – UNICEF). Nevertheless, families with children and adolescents have been the hardest hit. According to the latest national telephone survey supported by UNICEF and implemented in January 2021, 79 per cent of households with children and adolescents have seen their income decreased as compared to pre-pandemic levels, against the 63 per cent of those without children. By the end of March, Ecuador showed a slower COVID-19 vaccination rollout (1 per cent of the population had at least one dose) than its bordering countries Colombia (4 per cent) and Peru (2 per cent).<sup>xxvi</sup>

## Summary Analysis of Programme Response

### Nutrition

#### Children on the move from Venezuela

UNICEF, in coordination with its implementing partner *Desarrollo y Autogestión* (DyA), has supported nutrition initiatives for both migrant and host communities. In Guayaquil, DyA carries out nutritional screenings targeting both host community and migrant children under five years old, as part of a community-based surveillance strategy aimed at supporting the continuation of essential health and nutrition services. The screenings are implemented by nutritional brigades, benefitting families in the communities. From January to March 2021, over 847 children under five years old were screened for anaemia and acute malnutrition, of whom 200 children were diagnosed with anaemia and received treatment, and 5 children were diagnosed with acute malnutrition and were referred to health services for adequate treatment. UNICEF, through its implementing partner DyA, ensured that families of children were supported throughout their recovery and ensured they receive the adequate nutritional support. These efforts have been essential during the reporting period especially because national health services are challenged by COVID-19.

### Health

#### Children on the move from Venezuela

UNICEF, through its implementing partner DyA, works with the Venezuelan population in Guayaquil. Over 100 people (including pregnant women, children and adolescents) have benefitted from health promotion strategies, including HIV prevention, prenatal check-ups, and inclusion of teenagers in art activities to support their mental well-being and sensitise them regarding teenage pregnancies. These activities are carried out as part of larger strategies aimed at reaching both host and migrant communities and supporting efforts to provide universal access to health services. DyA, through its community volunteers, surveyed communities to identify migrant populations who might be left out from the health system, especially pregnant women. This activity is essential, given that migrants face challenges in accessing services due to, in some cases, lack of documentation. As the COVID-19 crisis has worsened and borders remain closed, UNICEF actions have been affected. However, the programme is reaching the migrant and refugee population through its regular development programme.

### COVID-19

UNICEF continues supporting the implementation of community-based surveillance models in Imbabura, Pichincha and Guayas. The surveillance model encourages community participation and engagement through community-based workers, and, to date, the programme has recruited and trained over 1,000 community volunteers on: COVID-19 control and prevention; risk communication; health promotion; and community surveillance. This programme reached over 5,000 children and 720 pregnant women to ensure (1) COVID-19 prevention, and (2) access to essential health maternal and child services. Despite good achievements, it is challenging to keep community volunteers involved in the project. To prevent this, UNICEF is identifying alternative strategies, like providing capacity building trainings to volunteers.

### WASH

#### Children on the move from Venezuela

The closure of the borders and the increase of COVID-19 cases in neighbouring countries generated specific WASH needs, particularly in Huaquillas, on the southern border with Peru. UNICEF participated in local coordination meetings, providing technical WASH assistance, and funding the distribution of hygiene kits and the installation of showers and toilets in Huaquillas, in coordination with the local government, benefitting 9,000 people (60 per cent women and girls), including 1,900 children.

<sup>5</sup> For Ecuador, the current report includes information on UNICEF's response to needs related to the Venezuelan migration situation, support to other vulnerable populations affected by the impacts of COVID-19, and response to needs related to violence and internal displacement in parts of the country.

Additionally, the conditional cash intervention to purchase essential hygiene items, carried out in partnership with WFP, reached 6,713 people (50 per cent women and girls), including 1,417 children on the move.

## **COVID-19**

The WASH Cluster, under the leadership of UNICEF,<sup>xxvii</sup> extended its response plan to May 2021, with updated targets. Upon request of the government, UNICEF, in partnership with Stockholm International Water Institute (SIWI), provided technical assistance to update the water and sanitation chapter of the Post-Disaster Needs Assessment (PDNA). UNICEF continued the implementation of WASH projects, in partnership with partners, focussing infection prevention and control (IPC) and risk communication and community engagement (RCCE), in communities, healthcare facilities, schools and ECD centres. UNICEF implemented a monitoring mechanism in Esmeraldas and Manabi provinces, with the following findings: time to collect water decreased from 27 minutes to 10 thanks to the water trucking service supported by UNICEF; weekly expenditure on water decreased from 6 to 3 dollars; and, monthly expenditure on hygiene items decreased by 25 per cent.

## **Education**

### **Children on the move from Venezuela**

There are approximately 90,000 Venezuelan school-aged girls, boys and adolescents, of whom 57 per are enrolled in the education system. Educational inclusion for the remaining population is of paramount importance. This challenge has been exacerbated by the pandemic due to the loss of livelihoods of Venezuelan households, the lack of connectivity and poor availability of technological resources to continue online education. UNICEF has been gathering information to monitor and advocate for these children. In this context, the campaign "Education is the path" began in January, seeking to promote the educational inclusion of this group. In addition, UNICEF works to ensure Venezuelan children access educational opportunities. With resources from ECW, around 11,300 migrant and refugee children were reached in 2020. For this year, with ECW MYRP resources, it is estimated that 20,000 Venezuelan students and the host community will be reached with interventions on socio-emotional wellbeing and prevention of xenophobia. The activities will be carried out in five cities, reaching approximately 50 schools and 1,300 teachers.

## **COVID-19**

The closure of educational institutions has affected approximately 4.3 million students, more than 210,000 teachers and at least half of Ecuadorian households. Before the pandemic, approximately 268,000 children were out of the educational system and approximately 187,277 were over-age of more than two years. Under current conditions, these numbers are likely to have considerably increased. To better respond to the context, adjusted planning of activities has been implemented to: promote a safe return to school; generate evidence on the return to school; reduce the effects on learning losses; support teachers with technological tools for their education process; and reduce the new barriers to access education. Psychosocial support programmes have reached 10,508 teachers and 300 Student Counselling Departments (DECE). Support was provided to improve connectivity through the delivery of mobile devices and sim cards to 4,342 teachers and DECE employees. UNICEF coordinated with the MoE the development of radio and TV content that supports the learning outcomes of 2 million children and adolescents. For the indigenous population that is in the intercultural bilingual educational system, 250,000 guidebooks with learning material were distributed. UNICEF will continue to monitor the implementation of the educational continuity plans of the 15,800 educational institutions at national level. UNICEF also plans to carry out four national surveys to monitor the situation of the educational community supporting the reopening of schools in at least four territories.

## **Child Protection, GBViE and PSEA**

### **Children on the move from Venezuela**

UNICEF continues to provide legal and psychosocial support to children on the move and their families in eight cities; implement comprehensive support spaces in the host communities of Tulcan and Manta;<sup>xxviii</sup> and support the "Special procedure of attention for unaccompanied and separated children and their families" with the Ministry of Social and Economic Inclusion. This work includes the implementation of alternative care arrangements for unaccompanied and separated children. Activities regarding legal and psychosocial support benefited 2,953 girls and 2,820 boys and their families. Overall, UNICEF is exceeding the planned results thanks to the invaluable support of the implementing partners. The main concern is related to the alternative care services and the possibility for the government to implement it.

## **COVID-19**

UNICEF leads the CP AoR, reaching more than 70,000 people with direct services during the pandemic, including legal advice on VAC cases, psychosocial and parenting support, and supply delivery to children in special protection services. A total of 1,200 boys, girls, and adolescents benefited from community-based actions to prevent violence against children. Also, 819 caregivers received psychosocial support and 299 men benefited from community activities to promote non-violent masculinity. Some 254 children victims of violence received legal support. Specialized training for 141 officials from the comprehensive protection services, care centres, and shelters for GBV survivors has been provided. This training was the result of an interagency effort between UN Women, UNFPA, and UNICEF, supporting the Human Rights Secretary. UNICEF implemented a monitoring mechanism in Esmeraldas and Manabi provinces, with the following findings: 92 per cent of parents that received psychosocial support were satisfied with the services provided; and, 70 per cent of participants believe that the information provided to prevent GBV was very useful. The CO finalized its implementing partners' evaluation and training in PSEA and proposed specific improvement plans for each partner.

## **Social Protection and Cash Transfers**

### **Children on the move from Venezuela**

UNICEF has started the implementation of a new CBI strategy to support Venezuelan families, in coordination with UNHCR and WFP. Unlike the one-time off cash assistance previously implemented, the new strategy provides support to the



households for nine months, on top of a one-time off support for each child attending school in the household. This shift is in line with the global United Nations Common Cash Statement and has a stronger emphasis on education and protection. This new modality was piloted in selected cities in the last quarter of 2020. An evaluation of 2020 CBI showed it increased school attendance (all age groups), and access to health services for children under five years of age, among other positive effects.

## Communication for Development (C4D), Accountability to Affected Population (AAP)

### COVID-19

UNICEF promotes community-based epidemiological surveillance models to prevent COVID-19 and ensure the timely access to essential maternal health and nutrition services for children and pregnant women. As part of these efforts, the CO promotes communication for development processes that emphasize the importance of evidence-based strategies (Knowledge, Attitudes and Practices studies). The C4D strategy also fosters social engagement through community leaders and through the creation of culturally appropriate communication materials. Moreover, the CO has been supporting the MoH in the planning stages of a National Communication and Edo-communication Plan to promote COVID-19 vaccination. The plan includes components related to public information, community engagement and mobilization, inclusion of indigenous populations, and the creation of a risk communication component to counteract misinformation. The CO has also been supporting the Cayambe Municipality in the implementation of this communication plan to promote COVID-19 vaccination at local level.

### Human Interest Stories and External Media

On 14 January, UNICEF launched the campaign “*La educación es el camino*” (Education is the path) to promote education for all children and adolescents in Ecuador, with emphasis on the most vulnerable groups, like migrants and refugees, in the context of COVID-19.<sup>xxix</sup> On Facebook and Instagram, UNICEF Ecuador reached a total of 629,399 people in January and February, and 1,065,198 in March. UNICEF continues to advocate to reopen schools. Between February and March, more than 86 articles, reports and interviews about this topic were published on national media, reaching 8,651,107 people.

- [Press release] Ecuador receives the first COVID-19 vaccines through the COVAX Mechanism: [here](#)
- [Press release] Children can't go on without going to school, says UNICEF: [here](#)
- [Press release] Prioritizing education for all children is the road to recovery: [here](#)
- [Human interest story] Joy returns to the classrooms of Zuleta: [here](#)
- [Human interest story] Protective Communities Project trained young people on the Ecuador-Colombia border in life skills: [here](#)
- [Human interest story] "I am excited to watch Aprender la Tele because they teach me many things and I understood what coronavirus is": [here](#)
- [Social media] Teachers and student counsellors are trained in methodologies of inclusion and psychosocial support: [here](#)
- [Social media] Protective Communities Project trained young people on the Ecuador-Colombia border in life skills: [here](#)
- [Social media] Why is it necessary to return to the classroom?: [here](#)
- [Video] Joy returns to the classrooms of Zuleta: [here](#)
- [Video] More than 80 community leaders from Mount Sinai help prevent and detect cases of COVID-19: [here](#)
- [Video] Education through NAP, #EducationIsThe Path: [here](#)
- [Video] [Comprehensive Support Space in Tulcán, inclusive services for local and people on the move](#)

### Humanitarian Leadership and Coordination

The Humanitarian Country Team (HCT) extended the 2020 COVID-19 response plan until May 2021, as the new government will take up its duties on 24 May. At least until then, the National Committee for Emergency Operations remains activated, and its sectoral subgroups continue coordinating with the respective clusters from the HCT.

In 2021, the Education Cluster has 52 participating organizations. The Cluster has been working on: advocacy for educational continuity; opening the debate to implement the educational service in the face of the emergency; joint coordination to start the active search for students; contributions to the intercultural bilingual education law; creation of psychosocial support tools; dissemination of statistical information and case studies on the educational situation.

The WASH Cluster partners have reached some 2 million people with critical WASH supplies, in 23 out of the 24 provinces of Ecuador. Some 414,349 people have been recorded in healthcare facilities where WASH Cluster partners implemented WASH improvements as a response to the COVID-19 emergency. Also, 76,627 primary school students and 9,897 teachers in nine provinces will find improved and COVID-19 adapted WASH facilities when they return to school, thanks to the interventions of the WASH Cluster. The WASH Cluster is currently preparing a national roadmap for Hand Hygiene for All, which will be the main planning and guiding instrument for WASH sector cooperation, once the transition towards the new government ends.

For more information: [www.unicef.org/ecuador](http://www.unicef.org/ecuador)



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## Situation Overview & Humanitarian Needs

Based on UN estimates through the R4V platform, the forecast is for a total of 39,991 Venezuelan migrants to be in Guyana by the end of 2021, which represents an additional 5 per cent of Guyana's total population. Migrants and refugees are projected to be concentrated mainly in the border hinterland areas. PSEA and GBV were identified as the priority humanitarian needs, which have been compounded by the socioeconomic impacts of COVID-19 on income generating opportunities, especially in the mining settlements where many migrants work. The government continues to facilitate free access to health services for all migrants, including COVID-19 vaccinations.

## Summary Analysis of Programme Response

### Nutrition

Nutritional status, along with ECD indicators, for the hinterland regions is below the national average (for children under five: approximately 10 per cent moderately underweight, 3 per cent severely underweight as compared to national averages of 9 per cent and 3 per cent),<sup>i</sup> therefore nutrition interventions continue to be a key priority for UNICEF, in close coordination with education and WASH sectors to maximise efficacy. With reduced income generating opportunities experienced by migrants, there is a need for increased focus on quantitative and qualitative data collection to better delineate the humanitarian needs. To address this gap, UNICEF is advocating with sector partners for a data collection aimed at determining the nutritional impact of COVID-19 in host communities, as only anecdotal reporting is currently available. During the reporting period, UNICEF has continued providing technical support through the development of communications materials for the MoH regarding nutrition, and prioritised resource mobilisation to sustain interventions.

### WASH

WASH IPC provision and access to sustainable safe drinking water and sanitation services in host communities continue to be the priority of UNICEF partnership with the national WASH service provider Guyana Water Inc. (GWI). Thanks to UNICEF support, a remote border host community has now access to safe water through a photovoltaic powered storage and distribution system. This provides an example for scale up and replication. Currently, the focus is on capacity development of GWI personnel and community leaders in the area of development and management of unconventional drinking-water supply systems. Through this intervention, interactive training and development of sustainable community-based drinking-water safety plans for host communities will be generated.

### Health

As of the 28 March, there have been 10,168 confirmed COVID-19 cases within hinterland host communities identified as hotspots requiring implementation of movement and economic activity restrictions. UNICEF continues to provide technical support for the integration of RCCE COVID-2019 awareness and prevention messaging, for both migrants and host communities, into national communications strategies, with government committing to ensure access to vaccinations for the entire population aged 18 years and above. Through the National COVID-19 Task force, UNICEF has maintained focus on IPC provision for frontline workers in facilities serving children, facilitating the donation of 40,000 high quality facemasks to health facilities and childcare centres.

### Education

Through UNICEF direct technical and financial support to the MoE within the Global Partnership for Education (GPE) Accelerated Funding Project and a new partnership with the Canadian High Commission, schools and ECD centres in hinterland host communities are being fully integrated within planning and intervention frameworks. Most migrant children enrolled are in Regions 1, 2 and 3 schools, where the increased populations further stretch coping capacities, especially in Region 1 host community schools. Therefore, UNICEF continues to advocate for priority to be placed in these vulnerable communities to ensure safe return to school post COVID-19, especially with WASH IPC.<sup>ii</sup>

### Child Protection, GBVIE and PSEA

The UNICEF-supported Migrant and Host Community Services initiative, implemented through Child Advocacy Centers (CACs), include: GBV (trauma counselling and referrals to services), PSEA (through community outreach visits, using bilingual advocacy materials), and monitoring of children at increased risk of violence, exploitation, abuse and neglect. The initiative is continuing in Regions 1, 2 and 7 host communities. With interventions covering in-person sessions and tele-psychosocial sessions, the CACs proved effective for facilitating referrals to the relevant state mechanisms, with 973 interventions facilitated to date in 2021. NGOs staff are reporting increasing demand for existing services due to the impacts of COVID-19 on migrants and the need to expand areas of support, including community sensitisation outreach missions, especially within Region 1.

### Social Protection and Cash Transfers

Partnering with UNICEF, the Ministry of Human Services and Social Security has responded to ensure that immediate needs faced by migrant families and host communities, compounded by the impacts of COVID-19, are addressed through the expansion of existing social protection system (CBI) to include migrant families who meet the set eligibility criteria. To sustain this intervention through 2021, UNICEF is advocating with the Ministry to mobilise resources to cover further disbursements.

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<sup>6</sup> For Guyana, the current report includes only information on UNICEF's response to needs related to the Venezuelan migration situation.

UNICEF is supporting the Civil Defence Commission (CDC) scope and develop an assessment to evaluate the institutional arrangements and architecture currently in place to facilitate humanitarian cash transfers nationally.

### Communications for Development (C4D), Accountability to Affected Population

Due to COVID-19 restrictions in hinterland host communities, UNICEF-supported Sports-Culture for Development (SC4D) programmes have had to be suspended. The NGO partner Blossoms Inc. operating the CACs, conducted five English/ Spanish language outreach sessions on accessing essential health, protection and education services, interacting with 194 migrants and host community members (155 female, 39 male) in Regions 1 and 7, as a key component of the migrant support programme. UNICEF is providing technical support to the national Disaster Risk Management coordination agency of the CDC to develop and operationalize an AAP framework for national preparedness and response, which will include migrants.

### Human Interest Stories and External Media

- [Media] External media coverage for UNICEF, Canadian High Commission partnership for interventions in host communities: [here](#)
- [Media] External media coverage for UNICEF, Canadian High Commission partnership for interventions in host communities: [here](#)
- [Media] Restoration of Venezuelan migration coordination committee: [here](#)

### Humanitarian Leadership and Coordination

Coordination for the Venezuelan migration response is led by the Ministry of Foreign Affairs with the Multi Agency Committee to address the Influx of Venezuelan migrants in Guyana, which is deemed to be the higher-level policy body. The Guyana R4V platform is the technical and operational forum and is tasked with systematically keeping both central and sub-national government entities informed of agencies interventions on the ground. For COVID-19, the National COVID-19 Task force leads the response with the CDC, providing cross sectoral coordination support. UNICEF is represented on all committees and forums for children related matters.

For more information: [www.unicef.org/guyana](http://www.unicef.org/guyana)



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<http://bit.ly/39bU7b3>

## PERU<sup>7</sup>

### Situation Overview & Humanitarian Needs

#### Children on the move from Venezuela

Peru has the second largest population of Venezuelan migrants in the region, hosting 1.05 million people, of whom over 190,000 are children and adolescents, according to the interagency Refugees and Migrants Working Group (GTRM) data. Since the COVID-19 outbreak, mandatory quarantine increased vulnerability and exposure to violence among incoming and settled Venezuelan families. Migrants and refugees continue to enter the country through irregular pathways in the northern border, in Tumbes, despite militarization of the border since January 2021. The lack of a valid identity document in Peru is a barrier to access critical services. Also, mostly in the informal labour market, parents can neither access national health system services nor social protection benefits, pushing them back to work often irregularly and increasing their risk of contagion in overcrowded living conditions favouring COVID-19 transmission. Moreover, the average school dropout rate of Venezuelan students is 20 per cent, significantly higher than for Peruvian students.<sup>iii</sup>

#### COVID-19

Peru has one of the highest COVID-19 mortality rates in the world. As of 31 March, there were with 1,561,723 confirmed cases and 52,161 deaths, of whom 93,076 and 314 respectively are children and adolescents.<sup>iv</sup> With a population of 32 million and less than 3,000 intensive care unit beds available nationwide, the health system is struggling to cope. The national state of emergency has been extended to 30 April 2021, and the mandatory national quarantine has been gradually lifted as of July 2020. These actions have been complemented by various health regulations, a remote mass public education strategy, social protection measures and an economic stimulus package. However, the socioeconomic effects of COVID-19 have been devastating. By December 2020, 1.2 million children were pushed into poverty as Peru GDP fell by 11 per cent, the worst setback in 30 years. Due to the pandemic, 705,000 children interrupted their studies or are at risk of doing so.

### Summary Analysis of Programme Response

#### Health

#### Children on the move from Venezuela

As part of the integrated COVID-19 response, vulnerable families have received educational material, hygiene and toy kits for new-born care and promotion of ECD. In Northern Lima, 335 vulnerable families with pregnant women, newborns and children under 2 years of age received home visits, of whom 82 were migrants. Migrant adolescents also participated in the

<sup>7</sup> For Peru, the current report includes information on UNICEF's response to needs related to the Venezuelan migration situation and support to other vulnerable populations affected by the impacts of COVID-19.

development of digital communication materials to promote adolescent rights to sexual and reproductive health, mental health and COVID-19 prevention.

## **COVID-19**

UNICEF provided technical assistance for the reactivation of early childhood and adolescent health services, including prenatal control check-ups, growth and development monitoring sessions, and the implementation of guidelines establishing the basic health packages. With the participation of adolescents in Northern Lima and Ucayali, UNICEF developed digital communication materials on sexual and reproductive health, mental health and COVID-19 prevention. This strategy included training of health personnel to develop their own materials and templates that can be updated as needed. In Loreto and Ucayali, UNICEF provided technical assistance to health authorities to develop vaccination plans in indigenous communities, and supported coordination to secure funding from subnational governments.

## **WASH**

### **Children on the move from Venezuela**

UNICEF delivered hygiene kits to 171 migrant children and adolescents (74 girls, 97 boys) in the northern Peru-Ecuador border, where closed borders are forcing migrants to enter irregularly and face new challenges. These kits are specific for babies, children and adolescents, differentiated by age and sex in the case of female adolescents. The kits include COVID-19 prevention material and were developed to complement the standardized hygiene kits agreed-upon in the Tumbes migrant coordination group including other UN agencies, government entities, and civil society organizations.

## **COVID-19**

UNICEF delivered 4,000 family hygiene kits in 94 Amazonian indigenous communities, benefitting 15,276 people (6,126 women, 5,332 men, 1,914 girls and 1,904 boys). Kits included hand gel and soap. Community leaders received bleach and masks. UNICEF also delivered 5,704 packages of sanitary towels to 2,852 women in 54 indigenous communities, in which there is a greater number of women and waste management possibilities.

As co-leaders of the WASH table in the National Humanitarian Network, UNICEF presented the actions carried out during 2020 and the foreseen challenges and plans for 2021. UNICEF coordinated with GRTM to develop a study on water provision and quality in migrant shelters.

## **Education**

### **Children on the move from Venezuela**

UNICEF supported regular and special enrollment to boost access of migrant and refugee students to education services. Support included training, a communication campaign, and articulation with the GTRM's Education Subgroup.

To prevent school dropout, UNICEF delivered presentations to Education authorities about results and lessons learned from its Active Search pilot programme in 60 schools concentrating migrant students. UNICEF also provided technical support to the MoE in the initial design of a Dropout Prevention and Recovery programme, which was presented to all regions and will be implemented in April.

## **COVID-19**

Through the Coalition for Education, UNICEF promoted the involvement of civil society organizations, private companies, and international organizations in providing technical support for gradual, safe, flexible and voluntary school reopening, and advocated consultations with teachers and specialists. UNICEF supported the MoE territorial, decentralized school return plan, participating in Intersectoral Work Commissions and supporting their communication strategy with spokespersons, evidence, and guidelines for principals and communities to plan and carry out school openings.

With the MoE, UNICEF promoted enrollment of children with disabilities by disseminating messages and videos and supporting direct communication with the families. UNICEF also proposed regulatory changes to make education more inclusive in the country and accompanied MoE consultation with civil society organizations and families of people with disabilities.

## **Child Protection, GBViE and PSEA**

### **Children on the move from Venezuela**

Due to the policy of the Peruvian government to promote regularization of migration status, with UNICEF support, the National Migration Authority provided consultation, legal support and regularization services to a total of 6,298 children and their families in first three months of 2021. In Tumbes, psychosocial kits and information on access to services were delivered to migrants and refugees in transit, reaching 20 adult caregivers, 43 girls and 37 boys.

## **COVID-19**

With Ministry of Justice and the Ministry of Women and Vulnerable Populations (MIMP), UNICEF is implementing psychosocial activities in residential care facilities and juvenile detention centers. Support has reached 1,553 youth and adolescents in conflict with the law (57 girls and 1,496 boys). With the MoH, UNICEF has been implementing a telephone counselling for adolescents and their families, including referral to other services as required. In 2021, the telephone line attended 708 people: 46 per cent were adolescents, of whom 43 per cent called the line more than once. Some 41 referrals have been made to other services. UNICEF continues to support MIMP 1810 hotline to report child protection concerns respond to over 1,500 calls. A four-hour virtual course is being developed with MIMP National Programme to Eradicate and Prevent Violence Against Women, for professionals attending *Línea 100* and *Chat 100* hotlines dedicated to family and sexual violence reports. The course aims to provide remote psychosocial assistance in cases of gender violence against children, girls and adolescents.



## Social Protection and Cash Transfers

### Children on the move from Venezuela

UNICEF Peru concluded its first cash transfer programme, reaching 400 vulnerable migrant families with six monthly transfers of USD 217 and information on nutrition, COVID-19 and violence prevention, and access to education, health, protection, and migration services. A total of 1,577 migrants benefitted from the programme: 300 girls, 384 boys, 516 women and 377 men (23 with disabilities, 12 pregnant and 116 lactating women, 37 seniors). A total of 48 beneficiaries received psychological support, 59 regularized their migratory status, and 84 out-of-school children enrolled in school. There were 326 referrals to implementing partner HIAS services: 13 to GBV protection, 65 to mental health, and 204 to economic inclusion.

### COVID-19

UNICEF presented its study "COVID-19: Impact of the fall in household income on children's health and education in Peru - 2020-2021 Estimates". In child health, anemia prevalence among children between 6 and 35 months could increase by almost 11 percentage points nationally, 15 in rural areas, and vaccination would decrease by 8 percentage points nationally, 13 in rural areas. In education, reading comprehension would reduce by 5 percentage points among second-grade students, while school dropouts would increase by 6 percentage points. The study identifies the geographic areas and types of households most affected and provides policy recommendations to face this situation.

## Communications for Development (C4D), Accountability to Affected Population

### Children on the move from Venezuela

UNICEF implemented the *Somos Geniales* (We're Awesome) digital campaign to spread COVID-19 prevention messages and promote migratory integration in 4 targeted neighborhoods. The campaign included 83 digital pieces, with a reach of 169,131. Workshops, informative sessions, and intergenerational leader dialogues gathered 376 community leaders, parents, service operators, children and adolescents. After the activities, Peruvian respondents showed promising results: 73 per cent perceived equal treatment between Peruvians and Venezuelans; 64 per cent did not observe discriminatory behavior towards Venezuelans; and 45 per cent perceived Peruvians in their districts as having a positive attitude towards Venezuelans. Finally, two C4D workshops were held for public servants in northern Lima.

### COVID-19

UNICEF complemented the delivery of hygiene kits in Amazonian indigenous communities with COVID-19 preventive and informative messages, reaching 15,407 people (6,126 women, 5,332 men, 1,988 girls and female adolescents, and 1,961 boys and male adolescents). These kits included banners on solid waste management. The strategy, implemented in coordination with local leaders and authorities, in addition to the Ministry of Culture, had a strong intercultural approach: communication materials consisted of banners and radio spots with messages in their native tongue (Shipibo Conibo).

## Human Interest Stories and External Media

UNICEF COVID-19 related messages on social media had a total reach of 94.2 million, as well as 425,853 engagements and 675,731 video views.

UNICEF ran a campaign to promote the new UNICEF-supported mental health helpline for adolescents, reaching an estimated 86,863 adolescents via TV and 35,802 via radio in four subnational regions, and 22,179 in the webinar held to promote the line. The campaign resulted in a significant increase in the number of calls from adolescents, while wide media coverage coincided with an increase in calls from stay-at-home mothers.

With the MoE and UNESCO, UNICEF co-presented an international seminar on the challenges and opportunities in planning the return to classes. UNICEF also co-presented with the World Bank a [webinar](#) to disseminate new research on the pandemic's impact on child well-being in Peru. The webinar had 4,845 views and the [publication](#) had over 15,000 web visits.

In March, UNICEF generated 154 media mentions, with USD 255,695 in free press, to raise awareness of COVID-19's impact on children and advocate for a child-centered response. UNICEF ran workshops on the pandemic's impact on education of migrant children with 116 journalists from four major media outlets.

In partnership with PAHO and the United Nations in Peru, UNICEF promoted vaccine confidence by sharing stories of vaccinated [older adults](#) expressing their joy, hope and relief. UNICEF also promoted vaccine equity through coverage of [COVAX's first shipment to Peru](#) and a [multimedia story](#) on how the Government of Peru procured solar-powered freezers through UNICEF to help ensure the cold chain.

For more on COVID-19's impact on children in Peru and UNICEF's response, see these stories and videos:

[In Peru, the sun helps vaccines keep their cool](#)

[In Peru, migrant families face the pandemic with the help of cash transfers](#)

[In the Peruvian Amazon, loudspeakers help keep indigenous children learning](#)

[Getting oxygen to the heart of the Amazon](#)

[In Peru's Amazon, It Will Take More Than Soap And Water](#)

[Solidarity and care in confinement in northern Lima](#)

[The challenge of virtual education in the Andes](#)

Videos: Delivery of kits for newborns and young children in [Lima](#) and the [Peruvian Amazon](#)

[Video: Delivery of hygiene kits to indigenous communities in the Peruvian Amazon](#)

[Video: Providing education and psychosocial support kits to students in northern Lima](#)

## Humanitarian Leadership and Coordination

UNICEF response focuses on supporting the national and local health, education, social protection and child protection systems through policy development and capacity-building, especially for the most vulnerable populations, including indigenous communities and Venezuelan migrants.

Within the National Humanitarian Network, cluster involving Government, civil society organizations and the United Nations System, UNICEF leads Education, Protection and WASH working groups, and participates in the Health and Nutrition & Food Security working groups. These working groups developed COVID-19 specific gap and capacity analyses in case there is an activation requirement from the Government of Peru, following the network's activation protocol.

UNICEF and UNESCO co-lead the MoE-spearheaded Peru chapter of the "Global Coalition for Education", which aims to channel support and leverage funds to implement the MoE COVID-19 response, and where UNICEF advocates for Venezuelan children as a group in particular vulnerability. Active participation continues in the GTRM, where UNICEF coordinates with agencies, organizations and State entities in the Protection, Basic Needs, Social Integration, Information Management and Communication subgroups.

For more information: [www.unicef.org/peru](http://www.unicef.org/peru)



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[/unicefperu](https://www.youtube.com/unicefperu)

## TRINIDAD AND TOBAGO<sup>8</sup>

### Situation Overview & Humanitarian Needs

The government continued to provide a limited response to the 19,867 Venezuelan migrants and refugees (52 per cent male and 48 per cent female). In March, the Ministry of National Security announced the re-registration of people who were issued national registration cards in the 2019 process. Renewal of the registration excluded the possibility of registering children who were not part of the 2019 process. The result of this exclusion is a situation of extreme vulnerability for over 6,000 people that are left without access to a pathway for the regularization of their status and thus without access to basic services.

### Summary Analysis of Programme Response

#### Nutrition

COVID-19 restrictions had an impact on the food security situation among migrants. WFP<sup>9</sup> reports a significantly higher percentage of Spanish-speaking respondents, when compared to English-speaking respondents, who experienced job loss or reduced salaries (89 per cent compared to 63 per cent) and limited access to markets (63 per cent compared to 28 per cent). This directly impacts the nutrition of 1,261 children under the age of 5 (656 boys and 605 girls). The nutritional screening and early stimulation activities, conducted in partnership with Living Water Community, enabled the identification that about 1-in-4 children need to access emergency nutritional support. A total of 45 caregivers (1 male and 44 females) received QR codes to purchase food items, as well as nutritional information to better support nutrition of young children.

#### Education

Pathways to sustainable access to education continue to be elusive for 2,877 school-age children (50 per cent boys and 50 per cent girls), 47 per cent of whom participate in Equal Place (EP), an alternative educational initiative supported by UNICEF. Approximately 150 students (50 per cent boys and 50 per cent girls) from this programme are awaiting permits from the Ministry of National Security to access the national education system. In partnership with Trinidad and Tobago Solidarity Network (TTVSoNet), Panamerican Development Foundation (PADF) and Living Water Community (LWC), and as part of a diversified approach to education, 163 students are enrolled in DAWERE to obtain their high school diploma in Spanish. Another 88 children (48 boys and 40 girls) are attending virtual child-friendly spaces due to COVID-19 restrictions.

#### Child Protection, GBVIE and PSEA

As borders and child establishments remain closed, UNICEF and other members of the Child Protection Working Group continue to work to strengthen child protection systems to support migrant children's protection and wellbeing. In January, a virtual child friendly space was launched in partnership with the Catholic Commission for Social Justice (CCSJ) and other community-based organisations aimed at providing a collaborative hybrid approach to intersectoral programming. A total of 1,026 children were provided with psychosocial support, two unaccompanied and separated girls (UASC) were supported with durable solutions through best interest determination procedures, and 230 children (108 boys and 122 girls) received GBV response services, including risk mitigation interventions and prevention. Unable to attend public schools, migrant children particularly adolescents are susceptible to neglect, violence and exploitation. The child-friendly spaces are a child protection response to reduce these risks. UNICEF delivers intersectoral programming that includes teaching children about GBV, how to report, and how to avoid/identify risky behaviours, such as sharing private information, online abuse, pornography, etc. UNICEF mobile counselling unit also provides emergency assistance to families in vulnerable situations that have either fell

<sup>8</sup> For Trinidad and Tobago, the current report includes only information on UNICEF's response to needs related to the Venezuelan migration situation. UNICEF's COVID-19 response in Eastern Caribbean countries and territories is part of the LACRO HAC appeal and results will be reported on a different SitRep.

<sup>9</sup> WFP, Caribbean COVID-19 Food Security & Livelihoods Impact Survey TRINIDAD AND TOBAGO, Summary Report, November 2020.

victim to or are at risk of violence and exploitation. Finally, efforts are ongoing to strengthen alternative care options for UASC and trafficked children.

### Social Protection and Cash Transfers

To date, humanitarian partners have provided limited cash assistance to migrants and refugees in Trinidad and Tobago, hindering the ability of families to meet the critical and increasing needs of children. In February, UNICEF convened a workshop with key humanitarian stakeholders to explore ways to increase the provision of cash-based assistance to vulnerable Venezuelan migrant and refugee families with children, in a collaborative manner. As a result, UNICEF and UNHCR agreed to work jointly on key cash preparedness activities, and UNICEF will work on cash-plus interventions in the areas of nutrition and education, and alternative care for unaccompanied and separated children.

### Communications for Development (C4D), Accountability to Affected Population

UNICEF took leadership to conduct a mapping of the mechanisms towards AAP, in partnership with UNHCR and IOM. The mapping highlighted that there are numerous efforts ongoing to communicate with the affected populations, but that these efforts are unidirectional and not articulated among the different humanitarian partners. This has a limiting effect on the engagement of affected populations and on results achieved. A proposal was brought forward by UNICEF to use U-Report to better share information, engage with affected populations and gather feedback on the services they receive.

### Human Interest Stories and External Media

UNICEF ECA developed a communication and a C4D strategy that aligns with its integrated approach encompassing social protection, education and child protection. The strategy identifies the products, key messages and channels that will be used to share information with the affected populations and the host community. HIS, photo essays and video animations are some of the materials that are going to be produced. Social media content is scheduled to appear every Wednesday starting in May 2021.

### Humanitarian Leadership and Coordination

UNICEF has been contributing to the Regional Migration Working Group in key areas, like contingency planning, evidence generation, roll-out of PSEA and strengthening of mechanisms for Accountability towards Affected Populations. UNICEF also provides leadership and technical support to the Child Protection and Education Working Groups (CPWG and EWG respectively). The CPWG has consolidated a 2021 Action Plan that addresses the protection needs of children on the move, and the capacities needed for system's strengthening. The EWG has generated evidence on the 5 W's (who, what, where, when, and for whom), and is drafting a Position Paper on inclusion of all children in education.

For more information: [www.unicef.org/easterncaribbean](http://www.unicef.org/easterncaribbean)



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[/UNICEFeastcaribbean](https://www.youtube.com/UNICEFeastcaribbean)

## Summary Analysis of Regional Response

UNICEF LACRO continues its technical and coordination role across sectors, ensuring: child rights at upheld at COs level; fundraising efforts are continuing; planning, monitoring and evaluation efforts follow UNICEF standards and guidelines; and humanitarian efforts on the ground are timely, effective and meaningful for vulnerable children and their families.

LACRO provides technical assistance and promotes the sharing of knowledge and good practices on: community-based mental health and psychosocial support; appropriate alternative care arrangements; violence prevention; implementation of national and local guidelines to assist migrants; and engagement of regional partners. In the reporting period, LACRO promoted transnational coordination for the protection of migrant children in the framework of the Quito Process, including support for the development of technical workshops. Within the R4V CP subgroup, and in partnership with other organizations, LACRO CP and Gender sections have developed a model for remote psychosocial care for refugee and migrant girls and adolescent survivors of GBV. In the framework of the Canada-funded project "Protection and Equal Opportunities for Venezuelan Children on the Move in Colombia, Ecuador and Peru" LACRO, together with the COs, is conducting a situation analysis of unaccompanied and separated girls. In addition, a guideline for strengthening the identification of unaccompanied or separated girls, adolescent girls, and LGBTIQ+ adolescents on the move is being developed. Together with the *Convenio Andres Bello* (CAB), a campaign has been developed within the First Emergency response (FER) project of Education Cannot Wait (ECW). The objective of this campaign is to inform and promote the use of the CAB Equivalency Table as a reference to achieve a more agile and efficient integration of children and adolescents in migration situations in the educational systems of host countries. Technical guidance on continuation of health services for migrants and refugees is also provided to COs. UNICEF is one of the key players in provision of primary care in Brazil, Peru, Colombia and Ecuador. UNICEF, in collaboration with UNAIDS, conducted an assessment on HIV-related services for migrants and refugees, particularly on availability of services, aimed to prevent mother-to-child transmission. During the reporting period, LACRO led technical discussions around the barriers for acceptance and use of the middle-up arm circumference tape for early identification and admission to treatment of acute malnutrition, and possible solutions.

LACRO continues its work through the regional WASH LAC Group platform. Specific support has been given to strengthen COs knowledge management skills to further improve knowledge exchange. Support to roll out the Global Hand Hygiene for All initiative is being provided to support the construction of roadmaps to ensure handwashing stations are available, with water and soap, in all public places. A second training on cash transfers in emergencies for 30 UNICEF staff in the region will

be held on May and preparatory work is ongoing. LACRO, in partnership with WFP and International Policy Centre for Inclusive Growth, carried out a systematic review and analysis of access to social protection programmes for migrant families in nine countries, including the ones part of this HAC. Also, the delivery of harmonized, useful, reliable, timely and lifesaving information to refugees and migrants from Venezuela on safety and protection continued. Social media posts on COVID-19 vaccination responding to information needs identified through different activities of R4V members have been developed and initiatives to provide information and receive feedback from people on the move through U-Report “*Uniendo Voces*” have been implemented. The latter includes: the first regional survey to identify the information needs of adolescents and youth, with 334 participants from LAC; and, the first survey on perceptions on COVID-19 vaccines. LACRO Communications team developed and produced the second phase of the regional Antixenophobia Campaign *One Step Closer*, to be released on April, including a new landing page, social media active listening and a social experiment featuring seven children on the move, among other multimedia assets. A new digital campaign to raise awareness against violence against migrant girls and women, *Ser hombre de 1000 maneras*, was produced and released in March. Finally, LACRO data strategy to strengthen the information management mechanism, at both regional and COs levels, includes data collection instruments, centralized databases, data visualization, as well as direct support to COs. LACRO has also developed a multi-campaign solution for information management, which is being used by the COs part of this HAC to swiftly report progress against targets of programme indicators.

UNICEF Latin America and the Caribbean Regional Office: [www.unicef.org/lac](http://www.unicef.org/lac)

UNICEF LAC Facebook: [www.facebook.com/uniceflac](https://www.facebook.com/uniceflac)

UNICEF LAC Humanitarian Action for Children Appeal: <https://www.unicef.org/appeals/children-on-the-move-venezuela>

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## Annex A: Summary of Programme Results

Sector Indicator   Country	UNICEF Target 2021	Total Results 2021						
		Girls	Boys	Women	Men	% Migrant <sup>10</sup>	Results	% Progress
<b>Nutrition</b>								
# children aged 6 to 59 months with severe acute malnutrition admitted for treatment	600	13	17	-	-		30	5%
Brazil	60	8	12			100%	20	1%
Colombia	520	5	5				10	0%
Ecuador	20							
# primary caregivers of children aged 0 to 23 months receiving infant and young child feeding counselling	53,210	-	-	1,812	443		2,255	4%
Brazil	2,500			1,654	380	100%	2,034	81%
Colombia	36,238			98	58	79%	156	0%
Guyana	14,172						-	0%
Trinidad and Tobago	300			60	5		65	22%
# children aged 6 to 59 months screened for acute malnutrition	33,415	1,222	1,169				2,391	7%
Brazil	3,000							
Colombia	22,215	435	440				875	
Ecuador	8,200	787	729				1,516	18%
<b>Health</b>								
# children aged 6 to 59 months vaccinated against measles	8,735	478	512			91%	990	11%
Brazil	3,000	249	283			100%	532	18%
Colombia	5,735	229	229			80%	458	8%
# children and women accessing primary health care in UNICEF-supported facilities	93,383	7,752	7,620	8,049	-		23,421	25%
Bolivia	1,400						-	0%
Brazil	21,000	3,882	3,908	5,312		100%	13,102	62%
Colombia	40,683	1,282	1,057	822		93%	3,161	8%
Ecuador	30,300	2,588	2,655	1,915			7,158	24%
# children receiving the minimum set of vaccines	47,912	1,047	990	-	-		3,189	7%
Brazil	10,000	1,047	990			100%	2,037	20%
Colombia	36,912						1,152	3%
Guyana	1,000						-	0%
# of health workers reached with personal protective equipment	6,940	-	-	150	90		240	3%
Brazil	1,800						-	0%
Colombia	1,140			150	90		240	21%
Ecuador	4,000						-	0%
<b>Water, sanitation and hygiene</b>								
# people accessing a sufficient quantity of safe water for drinking, cooking and personal hygiene	329,800	2,775	2,400	2,324	2,121		39,092	12%
Brazil	40,000	1,604	1,714	1,790	1,795	100%	6,903	17%
Colombia	73,800	1,141	656	489	281		2,567	3%
Ecuador	210,000						29,472	14%
Guyana	6,000	30	30	45	45		150	3%
# children accessing appropriate WASH facilities and hygiene services in learning facilities and safe spaces	161,954	-	244	228	-		472	0%
Brazil	50,000		244	228		100%	472	1%
Ecuador	101,812						-	0%
Guyana	10,142						-	0%
# people reached with critical water, sanitation and hygiene supplies (including hygiene items) and services	609,736	9,717	9,184	13,837	12,164		61,092	10%
Bolivia	4,200						-	0%
Brazil	80,000 <sup>11</sup>	2,490	2,396	2,631	1,884	100%	9,401	31%
Ecuador	50,000						16,190	
Colombia	73,800	5,266	4,800	5,080	4,948	16%	20,094	27%
Guyana	24,314						-	0%
Peru	377,422	1,961	1,988	6,126	5,332	1%	15,407	4%
<b>Child protection, GBVIE and PSEA</b>								
# children and caregivers accessing mental health and psychosocial support	280,005	2,966	3,352	232	35		94,016	34%
Bolivia	3,490						-	0%
Brazil	32,000	2,966	3,352	232	35	100%	6,585	21%
Colombia	179,477						1,920	1%

<sup>10</sup> This disaggregation does not include host communities, which are though part of the migration response, At the time of this report, this disaggregation was not available for many indicators and will be reported in next SitReps.

<sup>11</sup> After a need assessment, this target was lowered by the Brazil CO to 30,000.

Sector Indicator   Country	UNICEF Target 2021	Total Results 2021						
		Girls	Boys	Women	Men	% Migrant <sup>10</sup>	Results	% Progress
Ecuador	8,000						4,672	58%
Guyana	1,000						482	48%
Peru	53,300						80,040	150%
Trinidad and Tobago	2,738						317	12%
# unaccompanied and separated children accessing family-based care or a suitable alternative	2,150	607	673	-	-		1,306	61%
Brazil	1,200	607	673			100%	1,280	107%
Colombia	750						11	1%
Ecuador	100						15	15%
Trinidad and Tobago	100						-	0%
# children identified as in need of specialized services who are referred to health, social welfare and justice services	26,130	688	728	-	-		3,920	15%
Bolivia	970						-	0%
Colombia	360						-	0%
Ecuador	5,100						2,504	49%
Guyana	200	16	24				40	20%
Peru	19,500	672	704			2%	1,376	7%
# children, adolescent, and women received GBV response services, including risk mitigation interventions and prevention	27,568	808	826	190	-		1,843	7%
Bolivia	1,320						-	0%
Brazil	15,000	125	108	14			247	2%
Colombia	5,290	676	706	150		75%	1,532	29%
Ecuador	2,500						-	0%
Guyana	1,000	7	12	26			45	5%
Trinidad and Tobago	2,458						19	1%
<b>Education</b>								
# children accessing formal or non-formal education, including early learning	1,319,762	473,857	481,516	-	-		969,731	73%
Bolivia	890						-	0%
Brazil	20,000	2,977	3,307			100%	6,284	31%
Colombia	111,449						14,315	13%
Ecuador	1,124,445 <sup>12</sup>	470,880	478,209				949,089	84%
Guyana	4,578						-	0%
Peru	56,000						-	0%
Trinidad and Tobago	2,400						43	2%
# children receiving individual learning materials	110,514	200	138	-	-		338	0%
Bolivia	890						-	0%
Brazil	10,000	200	138			100%	338	3%
Colombia	39,624						-	0%
Ecuador	60,000						-	0%
<b>Social protection and cash transfers</b>								
# households reached with humanitarian cash transfers across sectors	47,880	-	-	-	-		3,034	6%
Bolivia	3,380						-	0%
Brazil	5,000							
Colombia	5,000						-	0%
Ecuador	29,000 <sup>13</sup>						2,634	1%
Peru	1,000						400	40%
Trinidad and Tobago	4,500 <sup>14</sup>							
# households reached with cash transfers through an existing government system where UNICEF provided technical assistance	21,300	-	-				-	0%
Brazil	20,300						-	0%
Guyana	1,000						-	0%
<b>C4D, community engagement and AAP</b>								
# people reached with messages on access to services	4,176,339	3,173	3,026	8,406	6,917		895,383	21%
Brazil	110,000	3,173	3,026	8,406	6,917	100%	21,522	20%
Colombia	406,339						25,050	6%
Ecuador	3,650,000						847,299	23%
Trinidad and Tobago	10,000						1,512	15%

<sup>12</sup> Target modified after the publication of the HAC. Results include direct and indirect support.

<sup>13</sup> After a need assessment, this target was lowered to 14,000 by Ecuador CO. This includes 396 households receiving CBI and 2,238 households receiving conditional cash for hygiene kits.

<sup>14</sup> After a need assessment, this target was lowered to 380 by Trinidad and Tobago CO.

## Annex B: Funding Status\*

TOTAL REGIONAL						
Sector	Requirements	Funds available			Funding gap	
		Humanitarian resources received in 2021**	Other resources received in 2021***	Humanitarian resources available from 2020 (Carry-over)****	US\$	%
Health	12,035,460	144,532		1,369,039	10,521,889	87%
Nutrition	5,504,155	47,544		610,367	4,846,245	88%
WASH	10,937,886	273,949	15,658	1,181,642	9,466,637	87%
Education	22,523,159	762,591	15,641	1,598,685	20,146,242	89%
Child protection, GBViE and PSEA	19,729,090	829,864		1,435,896	17,463,331	89%
Social protection and cash transfers	17,192,648			141,706	17,050,942	99%
C4D, community engagement and AAP	6,115,191	122,604		280,459	5,712,128	93%
Regional Support	6,317,801			1,088,738	5,229,064	83%
<b>Total</b>	<b>100,355,391</b>	<b>2,181,083</b>	<b>31,299</b>	<b>7,706,533</b>	<b>90,436,476</b>	<b>90%</b>

\* As of 31 March 2021. As defined in Humanitarian Appeal of December 2020 for a period of 12 months. Cross sectoral costs are embedded in sectors.

\*\*Includes emergency funds received against the HAC.

\*\*\*Includes non-emergency funds directly contributing to the emergency response. .

\*\*\*\*Includes only emergency funds received under the 2020 appeal for the response to the Venezuelan migration situation and emergency funds received in 2020 for COVID-19 response (in Colombia, Ecuador, Peru).

## Funding Status by Country

BOLIVIA						
Sector	Requirements	Funds available			Funding gap	
		Humanitarian resources received in 2021	Other resources received in 2021	Humanitarian Resources available from 2020 (Carry-over)	US\$	%
Health	46,000				46,000	100%
Nutrition						
WASH	70,000				70,000	100%
Education	92,000				92,000	100%
Child protection, GBViE and PSEA	445,500	92,200			353,300	79%
Social protection and cash transfers	514,000				514,000	100%
C4D, community engagement and AAP	50,000				50,000	100%
<b>Total BOLIVIA</b>	<b>1,217,500</b>	<b>92,200</b>			<b>1,125,300</b>	<b>92%</b>
BRAZIL						
Sector	Requirements	Funds available			Funding gap	
		Humanitarian resources received in 2021	Other resources received in 2021	Humanitarian Resources available from 2020 (Carry-over)	US\$	%
Health	1,566,432	122,254		285,672	1,158,506	74%
Nutrition	1,669,816	35,178		661	1,633,977	98%
WASH	1,879,718	52,767		286,392	1,540,559	82%
Education	2,986,664	246,401		196,775	2,543,487	85%

Child protection, GBViE and PSEA	3,195,521			248,955	2,946,566	92%
Social protection and cash transfers	1,681,304				1,681,304	100%
C4D, community engagement and AAP	814,545				814,545	100%
<b>Total BRAZIL</b>	<b>13,794,000</b>	<b>456,600</b>		<b>1,018,455</b>	<b>12,318,944</b>	<b>89%</b>

COLOMBIA						
Sector	Requirements	Funds available			Funding gap	
		Humanitarian resources received in 2021	Other resources received in 2021	Humanitarian Resources available from 2020 (Carry-over)	US\$	%
Health	3,896,971			493,046	3,403,925	87%
Nutrition	3,339,029	7,460		583,104	2,748,465	82%
WASH	3,886,517	36,201	15,658	446,780	3,387,877	87%
Education	9,895,818	395,130	15,641	460,923	9,024,123	91%
Child protection, GBViE and PSEA	8,854,389	75,808		783,435	7,995,147	90%
Social protection and cash transfers	5,712,548				5,712,548	100%
C4D, community engagement and AAP	4,302,101	153,582		93,357	4,055,163	94%
<b>Total COLOMBIA</b>	<b>39,887,373</b>	<b>668,181</b>	<b>31,299</b>	<b>2,860,645</b>	<b>36,327,248</b>	<b>91%</b>

ECUADOR						
Sector	Requirements	Funds available			Funding gap	
		Humanitarian resources received in 2021	Other resources received in 2021	Humanitarian Resources available from 2020 (Carry-over)	US\$	%
Health	2,084,604			96,934	1,987,670	95%
Nutrition	302,848				302,848	100%
WASH	2,236,028	26,375		389,698	1,819,955	81%
Education	2,872,009			136,194	2,735,815	95%
Child protection, GBViE and PSEA	2,182,323	387,994		324,653	1,469,676	67%
Social protection and cash transfers	6,056,962			55,919	6,001,043	99%
C4D, community engagement and AAP	747,025				747,025	100%
<b>Total ECUADOR</b>	<b>16,481,800</b>	<b>414,369</b>		<b>1,003,399</b>	<b>15,064,033</b>	<b>91%</b>

GUYANA						
Sector	Requirements	Funds available			Funding gap	
		Humanitarian resources received in 2021	Other resources received in 2021	Humanitarian Resources available from 2020 (Carry-over)	US\$	%
Health	169,836				169,836	100%
Nutrition	122,070				122,070	100%
WASH	291,906				291,906	100%
Education	318,443				318,443	100%

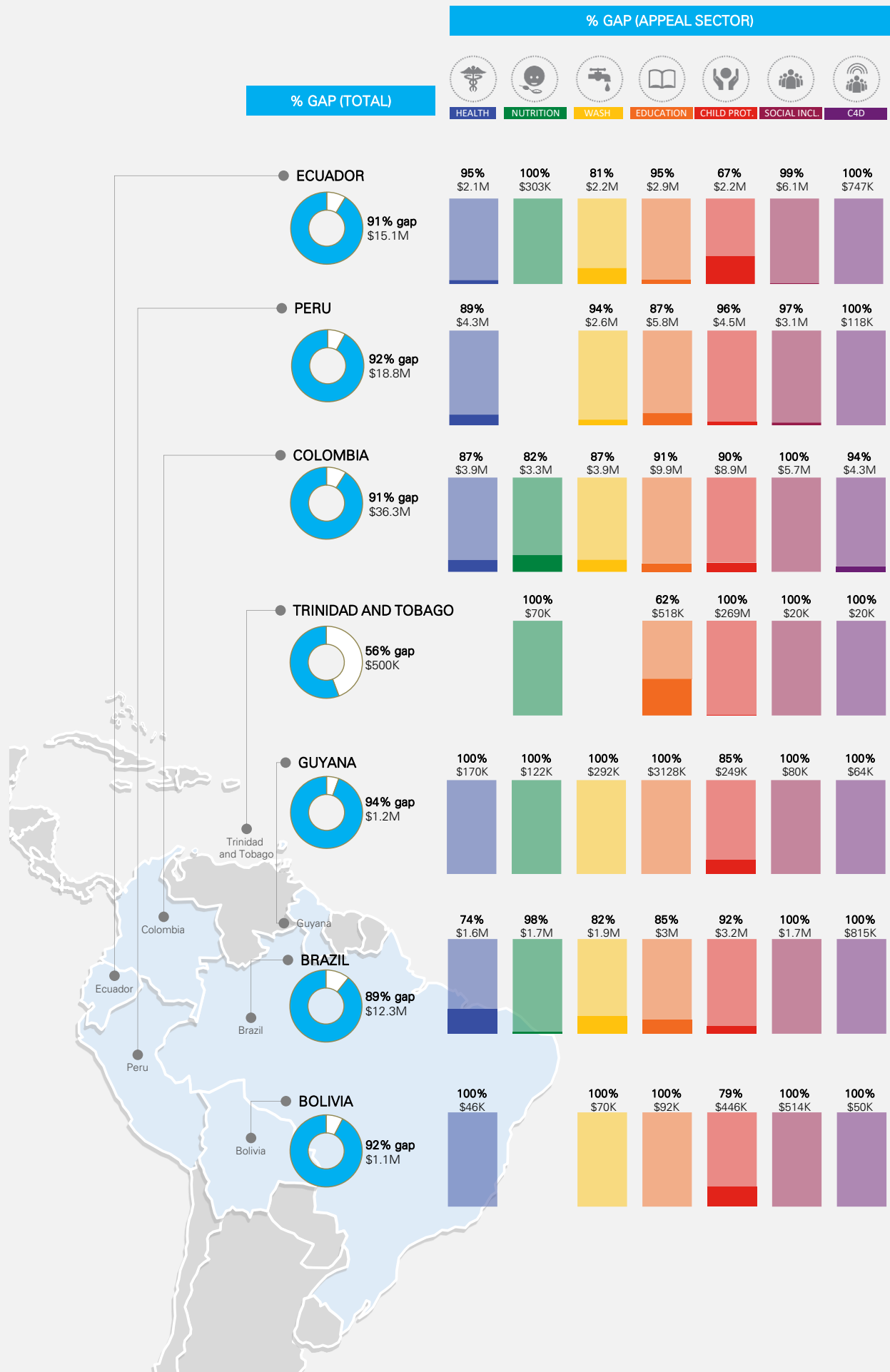


Child protection, GBViE and PSEA	249,447	36,760			212,687	85%
Social protection and cash transfers	79,611				79,611	100%
C4D, community engagement and AAP	63,689				63,689	100%
Cross-sectoral support		34,890				
<b>Total GUYANA</b>	<b>1,295,000</b>	<b>71,650</b>			<b>1,223,350</b>	<b>94%</b>

PERU						
Sector	Requirements	Funds available			Funding gap	
		Humanitarian resources received in 2021	Other resources received in 2021	Humanitarian Resources available from 2020 (Carry-over)	US\$	%
Health	4,271,617			480,438	3,791,179	89%
WASH	2,573,717	143,325		10,343	2,420,048	
Education	5,840,340	125,089		615,854	5,099,397	87%
Child protection, GBViE and PSEA	4,532,911	149,668		19,915	4,363,328	96%
Social protection and cash transfers	3,128,112			88,412	3,039,700	97%
C4D, community engagement and AAP	117,720				117,720	100%
<b>Total PERU</b>	<b>20,464,417</b>	<b>418,083</b>		<b>1,214,961</b>	<b>18,831,372</b>	<b>92%</b>

TRINIDAD AND TOBAGO						
Sector	Requirements	Funds available			Funding gap	
		Humanitarian resources received in 2021	Other resources received in 2021	Humanitarian Resources available from 2020 (Carry-over)	US\$	%
Health						
Nutrition	70,392				70,392	100%
WASH						
Education	517,885	20,000		179,212	318,673	62%
Child protection, GBViE and PSEA	268,999				268,999	100%
Social protection and cash transfers	20,112				20,112	
C4D, community engagement and AAP	20,112				20,112	100%
Cross-sectoral support		40,000		158,273		
<b>Total T&amp;T</b>	<b>897,500</b>	<b>60,000</b>		<b>337,486</b>	<b>500,014</b>	<b>56%</b>

# Annex C: Funding Gap by Country and Sector



## Endnotes

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<sup>i</sup> UNICEF, 'Humanitarian Action for Children 2021 - Children on the move, including from the Bolivarian Republic of Venezuela, and people affected by COVID-19, December 2020, < <https://www.unicef.org/appeals/children-on-the-move-venezuela>>.

<sup>ii</sup> Funding requirements for migrant and refugee response (including COVID-19) are approximately: Bolivia (US\$1.2 million), Brazil (US\$13.8 million), Guyana (US\$1.3 million) and Trinidad and Tobago (US\$897,500), Colombia (US\$28.6 million); Ecuador (US\$10.1 million); Peru (US\$6.4 million).

<sup>iii</sup> Funding requirements for COVID-19 response for other affected populations are approximately: Colombia (US\$2.7 million); Ecuador (US\$6 million); Peru (US\$14 million).

<sup>iv</sup> Funding requirements for violence/displacement response are approximately: Colombia (US\$8.6 million); Ecuador (US\$0.3 million).

<sup>v</sup> According to the RMRP 2021, 7.2 million people (30 per cent children) are in need of assistance across 17 countries in LAC.

<sup>vi</sup> COVID-19 response considered under this appeal includes actions in Colombia, Ecuador and Peru.

<sup>vii</sup> R4V, 'Latin America and the Caribbean: Venezuelan refugees & migrants in the region', March 2021.

<sup>viii</sup> R4V, 'COVID-19 Flash Update October-November 2020', 14 January 2021.

<sup>ix</sup> This figure does not include migrants, refugees and host communities. It includes other vulnerable people in Colombia (1.4 million), Ecuador (3.2 million) and Peru (3 million). The figure includes approximately 3.3 million children.

<sup>x</sup> The Grand Bargain is a unique agreement between some of the largest donors and humanitarian organizations, who have committed to getting more means into the hands of people in need and improving the effectiveness and efficiency of humanitarian action.

<sup>xi</sup> UNHCR - IOM (18 March 2021). Plataforma de Coordinación para Refugiados y Migrantes de Venezuela.

<sup>xii</sup> Caritas, Munasim Kullakita, Caritas CH., 'La situación actual de los venezolanos en Bolivia. Línea Base Proyecto EUROPANA', March 2020, <<https://r4v.info/es/documents/details/77757>>.

<sup>xiii</sup> Idem.

<sup>xiv</sup> Idem.

<sup>xv</sup> Administrative Resolution 148/2020 provides for the exceptional acceptance of a copy of the birth registration of children and adolescents of Venezuelan nationality under the age of 18 and an expired travel document for adults to facilitate their entry, transit and staying in the country.

<sup>xvi</sup> 'La situación actual de los venezolanos en Bolivia. Línea Base Proyecto EUROPANA'.

<sup>xvii</sup> Idem.

<sup>xviii</sup> WHO, Coronavirus disease (COVID-19) pandemic dashboard.

<sup>xix</sup> Brazilian Government strategy to support refugees and migrants from Venezuela.

<sup>xx</sup> It is worth noting the fact that the vaccination coverage rates estimated for these diseases are below the minimum standards recommended by the World Health Organization.

<sup>xxi</sup> CIMPS+ is a software platform of Primero for humanitarian and development protection programmes.

<sup>xxii</sup> OCHA, 'Colombia: Impacto y tendencias humanitarias entre enero y marzo de 2021 (a 16 de abril de 2021)', April 2021.

<sup>xxiii</sup> Leticia, Barranquilla, Soledad, Tadó, Medio Baudó, Alto Baudó and Uribia.

<sup>xxiv</sup> Tado, Medio Baudo, Quibdo, Rio Quito, Roberto Payan and Barbacoas.

<sup>xxv</sup> This activity has 27,236,286 impressions, 172,029 positive interactions and 3,552 views on Facebook; 122,648 impressions, 662 interactions and 1,765 views on Twitter; and, 754 impressions, 4,256 interactions and a reach of 122,143 on Instagram. In general, on Facebook, UNICEF had 27,236,286 impressions, 172,029 interactions and 3,552 views. The public interacted much more with the content than last year, resulting in greater connection with communities. On Twitter, UNICEF had 12,528 impressions, while on Instagram 21,209 impressions reaching 20,580 people.

<sup>xxvi</sup> Our World in Data, accessed 1 April 2020.

<sup>xxvii</sup> WASH Cluster Ecuador, <<https://www.humanitarianresponse.info/en/operations/ecuador/wash/documents>>.

<sup>xxviii</sup> In Tulcan, 656 people received information. Also 3,134 cases were managed to refer cases for legal advice and psychosocial support. 301 boys and girls participated in the child-friendly spaces.

<sup>xxix</sup> As a result of the launch, there were at least 50 publications, reaching 2,858,237 people. On social media the campaign reached 383,170 people in January and February, and 734,957 people in March. In total, there were 626 positive mentions in online media and 354 mentions on print and broadcast media (including radio and TV).

<sup>i</sup> UNICEF, '2014 Multiple Indicator Cluster Surveys (MICS)'. 2014. Latest MICS data will be available and shared with the next SitRep.

<sup>ii</sup> The latest figures compiled before school closure in January 2020 show a total of 1,434 Venezuelan migrants (721 boys and 713 girls) enrolled across all grades of the prioritized schools.

<sup>iii</sup> Statistics Unit – Ministry of Education 2020.

<sup>iv</sup> Ministry of Health, 31 March 2021.

<sup>v</sup> R4V, 'Monitoreo de Indicadores regionales de salud RMRP 2020'.