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Children on the move, including Venezuelans and communities affected by COVID-19

Consolidated Emergency Report

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for every child

Expression of thanks

UNICEF's work is funded entirely through the voluntary support of millions of people around the world and our partners in government, civil society and the private sector. Voluntary contributions enable UNICEF to deliver on its mandate to protect children's rights, to help meet their basic needs and to expand their opportunities to reach their full potential. We take this opportunity to thank all our partners for their commitment and trust in UNICEF.

On behalf of children and families in Latin America and the Caribbean, UNICEF expresses sincere gratitude to all public, private and individual donors for the sustained support to UNICEF's efforts in response to the needs of children in the context of migration across the region and the most vulnerable communities affected by the health and socio-economic impacts of COVID-19. With this crucial support, UNICEF has been able not only to provide immediate assistance to affected children and communities but has also contributed to strengthening the capacities of governments and other partners to provide life-saving assistance and protection, as well as to be better prepared for future shocks.

UNICEF would also like to acknowledge the value and importance of thematic funding support whose flexibility has allowed the organization to timely breach the most pressing gaps in the fulfilment of UNICEF's commitments to children's rights.



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Abbreviations and acronyms

AAP	Accountability to Affected Population
AIS	Indigenous Health Agents
AMMR	Archdiocese Ministry for Migrants and Refugees
BPRM	Bureau of Population, Refugees and Migration
CAB	Convenio Andres Bello
C4D	Communication for development
CBI	Cash-based intervention
CCCs	Core Commitments for Children
CERF	Central Emergency Response Fund
CFM	Child functioning module
CFS	Child-friendly spaces
CHW	Community health workers
CMAFS	Community Mobilization with Adolescent Participation Strategy
CO/s	Country Office/s
CSOs	Civil Society Organizations
DIRESA	Regional Health Directorate
DSEI	Special Indigenous Health District
DTM	Displacement Tracking Matrix
ECD	Early childhood development
ECW	Education Cannot Wait
ECHO	European Commission's Civil Protection and Humanitarian Aid Operations
EiE	Education in Emergencies
EMOPS	Office of Emergency Programmes
GBV	Gender-based violence
GBViE	Gender-based violence in emergencies
GHT	Global Humanitarian Thematic
GIFMM	Interagency Group on Mixed Migration Flows
GTRM	Working Group for Refugees and Migrants
GWI	Guyana Water Inc
HAC	Humanitarian Action for Children
HCF	Health care centres or facilities
HCT	Humanitarian Cash Transfers
HCW	Health care workers
HIAS	Hebrew Immigrant Aid Society
HPM	Humanitarian Performance Monitoring
HRP	Humanitarian Response Plan
IFRC	International Federation of Red Cross and Red Crescent Societies
IOM	International Organization for Migration
IPC	Infection prevention and control
IPS	Implementing partners
ISNAC	Inter-sectoral Multi-partner Rapid Needs Assessment with a focus on Children
IYCF	Infant and Young Child Feeding
KAP	Knowledge, attitude and practices
LAC	Latin America and the Caribbean
LACRO	Latin America and the Caribbean Regional Office
LCT	Local Coordination Teams
LWC	Living Water Community
MEPyD	Ministry of Economy, Planning and Development
MHPSS	Mental Health and Psychosocial Support
MoE	Ministry of Education
MoH	Ministry of Health
MYRP	Multi Year Resilience Programme
NGO/s	Non-governmental organization/s
OCHA	Office for the Coordination of Humanitarian Affairs
PAHO	Pan American Health Organization

PPIN	People in need
PPE	Personal protective equipment
PSEA	Prevention of sexual exploitation and abuse
RCCE	Risk communication and community engagement
RCWG	R4V Cash Working Group
RMNA	Regional Migration Needs Analysis
R4V	Regional Inter-agency Coordination Platform
RMRP	Refugee and Migrant Response Plan
SAM	Severe acute malnutrition
SBC	Social behaviour change
SEIA	Socio-economic Impact Assessment
SISBEN	Identification System for Potential Beneficiaries of Social Protection Programmes
SOPs	Standard operating procedures
UASC	Unaccompanied and separated children
UNHCR	United Nations High Commissioner for Refugees
UNFPA	United Nations Population Fund
UNESCO	United Nations Educational, Scientific and Cultural Organization
UNV	United Nations Volunteers
WASH	Water, sanitation and hygiene
WASH FIT	Water and Sanitation for Health Facility Improvement Tool
WFP	World Food Programme

Executive summary

The Latin America and the Caribbean region suffers from several overlapping complex emergencies, including the internal and regional impact of the protracted deterioration of the political, socio-economic situation in Venezuela, which continued to lead to a flow of refugees and migrants during 2022. The post COVID-19 economic context and the indirect impact of the war in Ukraine have increased the vulnerabilities of refugees and migrants, most likely creating continued movements of those who are neither employed nor able to access basic goods and services in their temporary or final destinations.

According to the 2022 Humanitarian Action for Children (HAC) for Children on the Move, including Venezuelans and communities affected by COVID-19, an estimated 41.4 million people, including 13.4 million children, were in need of humanitarian support related to ongoing crises including migration flows from the Bolivarian Republic of Venezuela and other countries, and needs related to the COVID-19 pandemic, in Bolivia, Brazil, Chile, Colombia, Dominican Republic, Ecuador, Guyana, Peru, Trinidad and Tobago, and Uruguay.

In line with its Agenda for **Refugee and Migrant Children** and the Core Commitments for Children, the UNICEF 2022 strategy was founded on three strategic objectives:

1. Promote and advocate for the rights of migrant, refugee and internally displaced children and their families, including indigenous populations.
2. Ensure access to child protection, social protection, education, gender-based violence prevention and response, early childhood development, health, nutrition and water, sanitation and hygiene services for migrant, refugee, internally displaced and host community children.
3. Promote social inclusion, integration and prevention of xenophobia.

Following the global strategy, the **COVID-19 response** focused on vulnerable affected populations and included: (1) limiting human-to-human transmission and minimizing morbidity and mortality by supporting the public health response for prevention, care and treatment; and (2) preventing and addressing the socio-economic impacts and ensuring the continuity and strengthening of critical services for children.

Through HAC, UNICEF appealed for US\$185.7 million to address the humanitarian needs of the most vulnerable migrants and refugees, including Venezuelans, other nationalities and host communities, the most vulnerable children and families affected by COVID-19, and people affected by violence and displacement.

UNICEF's response plans at country and regional levels contributed to the 2022 inter-agency Refugee and Migrant Response Plan (RMRP) and, as part of RMRP coordination mechanisms (regional/sub-regional/national platforms), UNICEF leads/co-leads the sectoral working groups in Child Protection, Education, Nutrition, WASH and the R4V Cash Working Group.



Peru, 2022

UNICEF, with the support of implementing partners, launched the project "With my documents in order" in Peru. The initiative promotes the migratory regularization of Venezuelan families whose daughters and sons are enrolled in a school.

1 Humanitarian context

The Latin America and Caribbean (LAC) region faces multiple crises due to migration movements, violence, civil unrest, climate change, the residual impacts of COVID-19 pandemic, rising inflation, increase in energy and food prices and the slowdown in the region's economic growth as an indirect effect of the war in Ukraine. All of these factors, combined with the limited emergency preparedness and response capacity of some governments, have compounded people's exclusion and vulnerabilities, severely impacting migrant and refugee children. In Colombia, besides the migration flow crisis, vulnerable communities continue facing humanitarian needs due to the violence of armed groups – which has caused internal displacement – and because of climate-related disasters and the residual impact of the COVID-19 pandemic. By the end of 2022, it was estimated that 7.7 million people (31 per cent children and 34 per cent women) were in need of humanitarian assistance in the country.ⁱ

The region has witnessed one of the largest refugee and migration crises in the world, largely due to the socio-economic and political crisis in the Bolivarian Republic of Venezuela. Nearly 7 million people had migrated from the country during the year and around 6 million migrants and refugees are now living in the region,ⁱⁱ including children requiring protection and assistance. In 2022, there was a significant increase in the number of refugees and migrants engaging in onward movement within different countries. Most countries of the region have implemented entry restrictions. This has led migrants to travel along irregular pathways, which in turn has exposed them to various forms of violence, augmenting the risk (particularly among women and girls) of gender-based violence (GBV), trafficking and smuggling. Children and their families crossing border points often lack access to safe water, sanitation and hygiene (WASH), child protection, health, nutrition and education appropriate services.

Despite host governments' efforts to undertake comprehensive integration processes, refugee and migrant populations have been disproportionately affected by the region's current socio-economic situation. Many have lost their livelihoods and are not able to meet their most urgent needs including access to social protection systems and basic income support. This has fostered harmful coping strategies, including sexual exploitation. The situation affects migrants' prospects for socio-economic integration, because it has contributed to a rise in discrimination and xenophobia. In addition, many refugee and migrant children and adolescents in the region still face multiple obstacles to accessing education services in the host countries, due to the lack of resources and the widespread lack of documentation, which often undermines their ability to enrol. Refugees and migrants in transit, especially those undertaking long journeys, have great difficulties accessing essential WASH services along their routes and those at their destination also suffer from inadequate access to WASH services.

In 2022, UNICEF appealed for US\$185.7 million to address the humanitarian needs of the most vulnerable migrants and refugees, including Venezuelan, other nationalities and host communities, the most vulnerable children and families affected by COVID-19, and people affected by violence and displacement. By the end of December 2022, UNICEF's Humanitarian Action for Children (HAC) appeal for Children on the Move including Venezuelans, and other crisis-affected communities was only 31 per cent funded (\$57.3 million, including funds carried over from 2021, as well as funding received in 2022). In 2022, UNICEF received generous contributions from the United States Bureau of Population, Refugees, and Migration (BPRM), the European Commission's Directorate-General for European Civil Protection and Humanitarian Aid Operations (ECHO), the United States Bureau for Humanitarian Assistance, the government of Belgium, the government of Norway, the government of Sweden, UNICEF National Committees in Austria, Belgium, Germany, Hong Kong, Luxembourg, Italy, Netherlands, New Zealand, Norway, Spain, Sweden, and Portugal, plus allocations from the Central Emergency Response Fund (CERF), as well as from pooled Global Thematic Humanitarian funds. UNICEF expresses sincere gratitude for the generous and important contributions from all public and private sector donors.

UNICEF will continue advocating for flexible and sustained funding, critical to be able to adapt its response strategy to the ever more complex humanitarian context.

2 Humanitarian results

In 2022, UNICEF prioritized interventions in Bolivia, Brazil, Chile, Colombia, Dominican Republic, Ecuador, Guyana, Peru, Trinidad and Tobago and Uruguay, where some 41.4 million people, including 13.4 million children, were in need of humanitarian assistance due to migration flows from Venezuela and other countries; needs related to the COVID-19 pandemic; violence; and internal displacement.

UNICEF worked to ensure continuity of services for vulnerable people including health, nutrition, WASH, education, protection and psychosocial support services, as well as implementing cash transfer programmes. To date, 242,953 girls and boys have accessed mental health and psychosocial support, around 600,000 have gained access to education, while 998,786 children and women have received primary healthcare in UNICEF supported facilities and 1,014,531 people were reached with critical WASH supplies (including 438,477 children). UNICEF responses, which vary based on the countries' context, continue to focus on the most in need.

At the regional level, UNICEF provided technical assistance and quality assurance in the field. UNICEF also contributed to the inter-agency 2022 Refugee and Migrant Response Plan (RMRP), ensuring strategic leadership in the child protection, education, nutrition, WASH, cash transfers and social protection sectors.

2.1 Humanitarian Results

Sector		UNICEF Target 2022	Total Result 2022						
Indicator	Country		Boys	Girls	Men	Women	% Migrants	Result	Progress
Nutrition									
# children aged 6–59 months with SAM admitted for treatment									
Colombia		660	103	96		63%	199	30%	
Dominican Republic		500				0%	288	58%	
# primary caregivers of children 0–23 months receiving with IYCF counselling									
Bolivia		56,500			77	125	100%	202	0%
Brazil		5,250	132	596	1,849	5,400	100%	7,977 ¹	152%
Colombia		33,420	403	448	1,274	3,357	80%	5,482	16%
Dominican Republic		1,000					0%	4,475	448%
Ecuador		3,600					0%	0	0%
Guyana		10,000					0%	18,050 ²	181%
Trinidad & Tobago		675			178	917	100%	1,095 ³	162%
# children 6–59 months receiving multiple micronutrient powders									
Bolivia		102,850	84	120			100%	204	0%
Brazil		4,000	409	433			100%	842	21%
Colombia		21,117	1,582	1,580			61%	3,162	15%
Ecuador		6,000					0%	0	0%
# children 6–59 months screened for wasting									
Brazil		5,400	2,164	2,116			100%	4,280	79%
Chile		1,800	207	219			100%	426	24%
Colombia		21,028	2,529	2,534			72%	5,063	24%
Dominican Republic		6,500					0%	19,173	295%
Ecuador		5,000	335	215			34%	625	125%
Peru		10,400					0%	4,767	46%
Health									
# children vaccinated against measles									
Brazil		455,382	244	244			0%	488	0%
# children and women receiving primary healthcare in UNICEF supported facilities									
Bolivia		67,730	581	730		295	100%	1,606	2%
Brazil		29,500	6,765	6,948		16,942	100%	30,655 ⁴	104%

¹ In 2022, there was a lack of resources to hire nutrition professionals as planned. In the context of this challenge, the teams focused on carrying out activities by community health agents, including great emphasis on these activities.

² IYCF is provided in all MCH clinics.

³ In 2022 there was a surge in the need for emergency nutritional support. One of the entry points to receive this cash assistance was through receiving counselling. The surge in need for cash assistance led to an increase in the demand of counselling services.

⁴ In 2022, UNICEF made important progress in cooperation with the Municipal Health Secretariat of Boa Vista, so information flows about the services provided with UNICEF support could be better carried out. In this sense, UNICEF began to receive monthly reports with more accurate numbers. This data

Sector		UNICEF Target 2022	Total Result 2022						
Indicator	Country		Boys	Girls	Men	Women	% Migrants	Result	Progress
Chile		2,520	15	36		43	100%	94	4%
Colombia		60,000	9,267	11,298		6,424	88%	26,989	45%
Dominican Republic		16,000					0%		0%
Ecuador		33,968	4,159	4,160		6,104	0%	14,423	3%
Guyana		25,652					0%	300	1%
Peru		297,000	225,420	240,558		459,041	4%	925,019 ⁵	311%
# healthcare facility staff and community health workers trained in infection prevention and control (IPC)									
Brazil		18,000					0%		0%
Colombia		180					0%		0%
Ecuador		557			200	79	0%	279	0%
# children receiving the minimum set of vaccines									
Bolivia		750,000	125	155			100%	280	0%
Brazil		8,250	5,663	6,470			100%	12,133 ⁶	147%
Colombia		24,792	17,176	21,114			34%	38,290	154%
Guyana		11,000					0%	16,791	153%
Water, sanitation and hygiene									
# people accessing a sufficient quantity of safe water for drinking and domestic needs									
Brazil		30,110	9,450	8,622	9,049	9,845	100%	36,966 ⁷	123%
Chile		8,000	461	483	243	370	100%	1,557	19%
Colombia		53,260	13,853	13,711	9,864	10,493	28%	47,921	90%
Ecuador		52,280					0%	52,385	4%
# children use safe and appropriate WASH facilities and hygiene services in learning facilities and safe spaces									
Bolivia		16,000					0%		0%
Brazil		128,900	29,511	24,146			7%	53,657	42%
Chile		4,000	340	359			100%	699	17%
Colombia		83,000	5,698	6,480			27%	12,178	15%
Dominican Republic		20,000					0%	23,522	118%
Ecuador		50,000					0%	20,016	27%
Guyana		4,000					0%	200,000	5000%
# people reached with handwashing behaviour-change programmes									
Bolivia		110,000	1,755	1,793	1,144	1,184	0%	5,876	5%
Brazil		2,700,000					0%	1,744,536	65%
Chile		400	130	129	204	352	100%	815	204%
# people reached with critical WASH supplies (including hygiene items)									
Bolivia		274,800	212,753	197,954	276,671	257,455	0%	944,833 ⁸	344%
Brazil		20,066	3,048	2,863	3,733	3,460	100%	13,104	65%
Chile		1,090	350	369	253	520	100%	1,492	137%
Colombia		72,000	10,669	10,471	18,014	15,948	47%	55,102	77%
Ecuador		16,280					0%	50,535	98%
Guvana		38,000					0%	32,000	84%

also allowed a better characterization of the distribution of refugees and migrants living in the municipality of Boa Vista, and the volume of demand implied in health services. Based on this data, it was possible, for example, to identify that an average of 26.1% of the health care required in the Basic Health Units of the municipality is required by refugees and migrants from Venezuela.

⁵ UNICEF has greatly expanded the stations where health services is provided (in Ucayali, for example, thanks to the ECHO SM210770 project, or in North Lima with other service stations of the DIRIS where care, accompaniment, material, and PPE have been provided).

⁶ In 2022, UNICEF made important progress in cooperation with the Municipal Health Secretariat of Boa Vista, so information flow about the services provided with UNICEF support could be better carried out. In this sense, UNICEF began to receive monthly reports with more accurate numbers. In addition, UNICEF actively collaborated in vaccination campaigns and vaccine blockade responses to outbreaks of diseases such as chickenpox, COVID-19, influenza and meningitis C. Data from vaccination campaigns were not received in previous years, and their inclusion favoured the overachievement.

⁷ In 2022, there was a significant increase in the flow of migrants and refugees compared to 2020 and 2021. In addition, UNICEF has expanded its work in informal settlements outside the shelters of the "Operação Acolhida".

⁸ 260 family hygiene kits were delivered in Pisiga (Oruro), the border with Chile – 160 families were migrants, and the other 100 people were from host communities. Other family kits were delivered by IPs in Beni, Cochabamba, La Paz and Santa Cruz.

Sector		UNICEF Target 2022	Total Result 2022						
Indicator	Country		Boys	Girls	Men	Women	% Migrants	Result	Progress
Peru		377,421					0%	332,054	88%
Child protection, GBViE and PSEA									
# children, parents and caregivers accessing mental health and psychosocial support									
Bolivia		30,610	4,455	7,798	9,890	17,418	5%	39,561	129%
Brazil		119,450	80,629	80,424	1,691	3,587	17%	166,331 ⁹	139%
Chile		16,500	3,705	3,614	1,901	3,713	43%	12,933	78%
Colombia		542,750	21,291	23,539	7,205	16,238	55%	68,273	13%
Dominican Republic		3,331					0%	1,930	58%
Ecuador		15,990	4,851	5,663	416		0%	25,097	77%
Guyana		2,200	200	400	300	300	0%	1,200	55%
Peru		13,650	2,115	2,158			100%	4,273	31%
Trinidad & Tobago		2,738	1,056	1,055			57%	2,111	77%
Uruguay		2,950					0%	0	0%
# women, girls and boys accessing GBV risk mitigation, prevention or response interventions									
Bolivia		1,800	548	486		719	24%	1,753	97%
Chile		860	1	7		195	100%	203	24%
Colombia		16,946	4,646	5,693		3,710	80%	14,049	83%
Ecuador		6,103					0%	8,525	19%
Guyana		300					0%	0	0%
Peru		125,000	35,021	11,121		66,565	0%	112,707	90%
Trinidad & Tobago		1,000	2,107	2,868			42%	4,975 ¹⁰	498%
# unaccompanied and separated children provided with alternative care or reunified									
Brazil		2,500	1,140	1,087			100%	2,227	89%
Chile		580					0%	36	6%
Colombia		750	924	661			95%	1,585	211%
Dominican Republic		700	752	164			0%	916	131%
Ecuador		150					0%	104	69%
Guyana		60					0%	0	0%
Trinidad & Tobago		50	22	62			63%	84 ¹¹	168%
# children identified as in need of specialized services who are referred to health, social welfare and justice services									
Bolivia		1,140	779	721			56%	1,500	132%
Brazil		28,389	3,979	4,034			52%	8,013	28%
Chile		1,800	76	75			9%	151	8%
Colombia		18,888	1,882	2,355			86%	4,237	22%
Dominican Republic		3,000					0%	19	1%
Guyana		900					0%	0	0%
Peru		33,400	8,540	8,829			0%	17,369	52%
# people reached with awareness activities and community mobilization interventions on PSEA									
Bolivia		20,000	4,252	5,089	2,114	3,507	4%	14,962	75%
Brazil		202,000	58,048	57,698	4,413	12,337	2%	132,496	66%
Chile		18,300			34	97	0%	131	1%
Colombia		48,500	3,863	4,834	467	2,826	85%	11,990	25%
Ecuador		893					0%	1,135	15%
Guyana		500			140	140	0%	280	56%
Education									
# children accessing formal or non-formal education, including early learning									
Bolivia		61,250					0%	0	0%
Brazil		127,000	16,719	16,271			55%	32,990	26%

⁹ BCO prioritized results on mental health support as part of 2022 activities of UNICEF Seal initiative and included an online course on this issue in the new Virtual Learning Environment allowing more people to be directly involved.

¹⁰ In 2022 UNICEF ECA, which covers Trinidad and Tobago, partnered with the Archdiocese Ministry for Migrants and Refugees (AMMR) for Refugee Day which consists of a monthly one-day event where refugees and migrants come to receive services in a one-stop shop. These events are well attended and have provided an outlet to share GBV risk mitigation, prevention or response interventions to the population.

¹¹ As part of partnership agreements with the Children's Authority of Trinidad and Tobago and AMMR there is now a case worker. This has led to better reporting and case management of unaccompanied and separated children (UASC).

Sector		UNICEF Target 2022	Total Result 2022						
Indicator	Country		Boys	Girls	Men	Women	% Migrants	Result	Progress
Chile		400	419	388			100%	807	202%
Colombia		76,646	25,916	26,895			31%	52,811	69%
Dominican Republic		44,000	54,679	54,678			0%	109,357	249%
Ecuador		121,750	131,618	141,587			0%	273,205 ¹²	214%
Guyana		85,500	498	438			0%	1,536	2%
Peru		415,000					0%	135,000	33%
Trinidad & Tobago		975	699	713			49%	1,412 ¹³	145%
Uruguay		700					0%	0	0%
# children receiving learning materials									
Brazil		10,000	343	302			100%	645	6%
Colombia		45,500	3,208	3,094			18%	6,302	14%
Ecuador		7,204	3,722	3,835			2%	7,557	68%
Guyana		40,500	498	438			0%	1,536	4%
# children/adolescents accessing skills development programmes									
Brazil		18,974	6,350	5,720			0%	90,810	479%
Ecuador		161,593	45,779	46,418			0%	92,197	3%
Guyana		2,600	498	438			0%	1,736	67%
Trinidad & Tobago		2,600	667	671			100%	1,338	51%
Social protection and cash transfers									
# households reached with cash transfers through an existing government system where UNICEF provided technical assistance and funding									
Bolivia		650					0%		0%
Brazil		36,000					0%	3,820	11%
Chile		3,000					0%		0%
Colombia		50,000					0%		0%
Dominican Republic		1,000					0%	35,000 ¹⁴	3500%
Ecuador		4,000					0%		0%
Guyana		1,100					0%		0%
Trinidad & Tobago		1,329					0%	639	48%
# households reached with UNICEF-funded humanitarian cash transfers									
Brazil		600					0%	180	30%
Dominican Republic		750					0%		0%
Ecuador		10,000					0%	143	1%
Peru		1,000					0%		0%
# households benefitting from new or additional social transfers from governments with UNICEF technical assistance support									
Peru		15,000					0%		0%
C4D, community engagement and AAP									
# people reached through messaging on prevention and access to services									
Bolivia		2,048,600					0%		0%
Brazil		40,000	64,819	63,478	136,148	135,068	0%	161,259,053 ¹⁵	403148%
Chile		33,330	6	5	114	279	100%	404	1%
Colombia		312,500					0%	104,220	33%
Dominican Republic		40,000					0%	47,246	118%
Ecuador		68,280	1,173	1,116	2,560	2,211	0%	9,473	4%
Peru		70,000					0%	195,287	279%
Trinidad & Tobago		10,000					0%	118,478 ¹⁶	1185%

¹² This includes distance learning.

¹³ In 2022 UNICEF ECA and partners rolled out different strategies to close the gap in education for refugee and migrant children. This included scaling up accredited online education.

¹⁴ UNICEF supported the Government of the Dominican Republic with the development and piloting of the standard operating procedure for the activation of cash transfers in the event of an emergency. On the occasion of Hurricane Fiona, which impacted the eastern and northeaster areas of the Dominican Republic, standard operating procedures (SOPs) have been activated and UNICEF supported the emergency survey of households affected by the hurricane, so that the initial target of 1,000 people was achieved. Based on this survey, the SUPERATE programme carried out a vertical and horizontal expansion of the regular cash transfer programme to eventually reach 35,000 affected households.

¹⁵ The partnership with Meta and University of Yale, which offered to UNICEF a large sum of ad credits, allowed the COVID-19 prevention campaign Cola Bora and the COVID vaccination campaign to reach an audience way beyond the initial organic target.

¹⁶ For the first time in 2022, UNICEF ECA implementing partners boosted posts on social media, yielding very positive results for the reporting period.

2.2 Health

Bolivia

Children on the move, including Venezuelans

UNICEF provided support for the registration with the Universal Health System for primary health care of at least 1,727 beneficiaries, 76 per cent were children and adolescents in 5 departments and 3 border localities, both in temporary shelters and transit stations. Services provided included diagnostic and laboratory tests, as well as treatment for those cases that required it. During the reporting period, workshops with healthcare personnel were carried out to raise awareness about healthcare services available to migrants and to facilitate access to those in transit. In addition, a workshop on primary healthcare services was held for the host communities which provided an opportunity to sensitize the population living in these border towns on the reception of migrants

COVID-19

UNICEF delivered personal protective equipment (PPE) supplies for 1,643 health workers in the city of El Alto. A total of 100,000 nitrile gloves and 19,200 N95 masks were delivered in coordination with the Regional Health Service (MoH) and the Municipal Authority. UNICEF also delivered hygiene supplies to 58 healthcare facilities improving the prevention and mitigation of infections. These actions were complemented by vaccination strategies to achieve optimal regular schedule immunization coverage, including the COVID-19 vaccine, for children under 5 years.

Brazil

Children on the move, including Venezuelans

UNICEF supported the Municipal Health Secretariats of five municipalities largely affected by the Venezuelan migratory crisis to promote the culturally sensitive and integral inclusion of migrant, refugee and indigenous living in urban context into the local primary health care facilities. UNICEF supported the design, organization and implementation of vaccination campaigns and routine vaccination services. UNICEF also supported the inclusion of 15,437 new refugee and migrant health care users and the provision of 97,088 consultations and primary health care package activities to 31,727 migrant and refugee women and children.

COVID-19

UNICEF supported indigenous organizations and the Special Secretariat for Indigenous Health of the Brazilian Ministry of Health (MoH) to organize community-based health surveillance committees. The activities took place in the regions of Alto Rio Solimões, Leste de Roraima, Maranhão and Rio Tapajós, and promoted the training of 120 indigenous leaders. Four Surveillance Committees were set-up with an action plan, timeline and quarterly agenda.

Chile

Children on the move, including Venezuelans

In 2022, nutritional evaluations were carried out on 289 children, adolescents and pregnant women, in addition to food and nutritional counselling for 312 people from the target audience. Only one severely underweight case was identified which was referred to the public health system and followed up until it received care.

Colombia

Children on the move, including Venezuelans

Health actions continued to focus on providing basic health services to children, adolescent, pregnant and lactating women in compliance with official guidelines including growth and development care, vaccination, prenatal care, psychology, health education and general odontology. As of December 2022, in Arauca, Barranquilla, La Guajira, Norte de Santander and Santander, 24,971 children and women have received basic health care services (24 per cent migrant women, 39 per cent migrant girls, 31 per cent migrant boys). A total of 6,259 children were vaccinated as per national standards and 3,327 were vaccinated against measles. Additionally, 3,281 persons participated in accountability mechanisms supported by UNICEF. UNICEF provided technical assistance to 553 health professionals (73 per cent women, 27 per cent men) who participated in training process related the integrated management of acute malnutrition in girls and boys from 6–59 months in Arauca, Barranquilla, La Guajira, Nariño, Norte de Santander and Santander.

COVID-19

UNICEF supported MoH in the vaccination campaign against measles and regular vaccination, with logistical support, vaccinators, coordination in territories, and information and communication actions. A total of 117,704 doses applied contributed with the increase in vaccination coverage for boys and girls in the departments of Atlántico, Arauca, Bolívar, Chocó, La Guajira, Magdalena and Nariño.

Other situations

UNICEF supported access to basic health care to 1,519 girls, boys and women in the municipalities of Barbacoas, Manaure Tumaco and Uribia, including growth and development control services and deworming. During the rainy season and the La Niña phenomenon, UNICEF provided a local hospital in La Guajira with medicine for 340 girl and boys, with ready to use therapeutic food to support the attention of acute malnutrition in 11 children aged 6–59 months, the dissemination of key messages for prevention the diseases in communities and training for 115 health professionals to care for acute malnutrition.

Ecuador

Children on the move, including Venezuelans

UNICEF, jointly with the World Health Organization and Pan American Health Organization (PAHO), promoted the quality of maternal and child services provided by MoH through the Establecimientos de Salud Amigos de la Madres y del Niño (child and mother friendly health facilities) strategy. UNICEF, in coordination with MoH and non-governmental organizations (NGOs), implemented the intersectoral community-based approach with local governments to improve health and nutrition in early childhood and for pregnant women. In Monte Sinaí, Guayaquil, the community epidemiological surveillance models facilitated the identification of 900 migrants, including 400 children and adolescents under 18 years of age who received medical care, HIV screening and COVID-19 prevention messages.

COVID-19

UNICEF contributed to the national government improving the conservation of vaccines in difficult access areas, indirectly benefiting around 3 million people and 350,000 children under 5 years. In addition, MoH personnel's capacity was enhanced and 197 first-level operating units were supported in monitoring the regular vaccination conditions and processes in prioritized areas with low immunization coverage, leading to improved immunization coverage indicators.

Guyana

Children on the move, including Venezuelans

In Guyana, strengthening of the health system is ongoing with more focus on the hinterlands and vaccine-hesitant regions to ensure improved immunization services and COVID-19 response. There has been an enhanced demand for COVID-19 vaccines and routine immunization vaccines in communities, as well as an increase in the number of children and adolescents vaccinated against HPV vaccine following community dialogue/sensitization campaigns held in the 10 administrative regions.

COVID-19

National capacity and delivery of routine immunization through COVID-19 investment was strengthened during the reporting period. In 2022, storage capacity at the service delivery point has been improved. Storage volume has also been upgraded by an additional 140 litres thereby ensuring storage for new vaccines and COVID-19 vaccines. This was achieved through coordination meetings, high-level advocacy by UNICEF and the Expanded Programme on Immunization team, and full procurement and installation by UNICEF. UNICEF has provided an additional ultra-low temperature freezer for storage of the COVID-19 vaccine at the national store thereby boosting the country's capacity for storage of this type of vaccine, 450 vaccines carriers/20 cold boxes for transport of vaccine for outreaches and storage sites, plus financing the transportation of vaccines to ensure potent vaccines reach everyone. UNICEF also supported the maintenance of 38 solar refrigerators across the country, providing 100 per cent functionality. UNICEF conducted four vaccine hesitant workshops (three at the sub-national level and one at the national level) in collaboration with MoH. The workshops were attended by 60 community leaders, 70 healthcare workers, 7 Civil Society Organizations (CSOs), 30 peer educators, 40 religious leaders and other prominent influencers. The engagement with the invited stakeholders created a platform that provided a better understanding of the misconceptions around COVID-19 vaccines from different perspectives including religious, racial, social-cultural and ethnic views as well as providing solutions to address these misconceptions.

Peru

Children on the move, including Venezuelans

UNICEF delivered 37 oxygen concentrators to 9 health care centres or facilities (HCFs) that attend migrants and refugees in Tumbes, as well as evaluation and diagnostic equipment. Vaccination brigades provided 12,170 vaccine doses (5,502 to migrants) for COVID-19, HPV and for the regular vaccination schedule. A dissemination campaign through the Regional Health Directorate (DIRESA)'s social media reached 79,000 people and 18,000 brochures and leaflets on vaccination, COVID-19 and access to services were distributed. UNICEF contributed to the reopening of the psychoprophylaxis service in two maternity centres.

A total of 2,033 home visits (210 to migrant families) were carried out during the year which have been increasingly strengthened thanks to training and opportunities for reflection on the cases, strengthening the link between users and health professionals. Migrant families also received information on their legal status to improve their employment and income. The [AFINIDATA platform](#), shared in all soup kitchens of Carabayllo district, also helped 1,186 families (1,416 children) to download 6,575 activities for children.

COVID-19

UNICEF continued to provide support in the reactivation of primary health care through training, technical assistance, equipment and donations. In Northern Lima, targeted HCFs extended their opening hours to meet the demand for early childhood development (ECD); some prioritized children under 1 when staffing was lacking. A total of 167,264 children and adolescents also received 3 COVID-19 vaccination doses thanks to UNICEF-backed brigades in Northern Lima.

In Ucayali, UNICEF strengthened the information system for registration, monitoring, scheduling appointments and quotas, which consist of mobile devices to track and monitor the health of the prioritized population through training and technical assistance. Approximately 239 health technicians were trained in information management and using the E-qalhy information system, 135 health care workers (HCWs) and technicians were trained in primary health care during COVID-19, accompanied by 441 monitoring visits. 12 community health workers (CHWs) were also trained in comprehensive care of children, pregnant women and adolescents. HCFs in Northern Lima and Ucayali received equipment and furnishing in their specialized attention spaces for ECD, Sexual and Reproductive Health and Rights, pre-natal, neonatal and adolescent care.

2.3 Nutrition

Bolivia

Children on the move, including Venezuelans

Within the nutrition interventions, the main support activities for the migrant population have been the delivery of supplementation and complementary food for about 1,240 beneficiaries; 75 per cent children and adolescents. Fathers, mothers and caregivers of children (125 women, 77 men) have also been supported with workshops on complementary feeding in early childhood. In addition to direct support activities for the migrant population, a study on the nutritional situation of the migrant child population is also being finalized to evaluate their main needs and optimize support.

Brazil

Children on the move, including Venezuelans

UNICEF supported the Municipal Health Secretariats of five municipalities largely affected by the Venezuelan migratory crisis through technical support in the organization of nutrition services: 2,276 malnutrition screenings for 890 children under 5, nutrition supplementation to prevent stunting and wasting for 842 children under 5, iron and folic acid supplementation to 1,183 pregnant and lactating women and 11,346 Infant and Young Child Feeding (IYCF) counselling and training activities to 7,607 caregivers of young children to promote appropriate feeding for children and prevent malnutrition. The lack of appropriate resources resulted in the need to reduce support teams and it was impossible to reach the target number of children being screened, leading to a reduced capacity for early detection and timely care of malnutrition cases.

COVID-19

A total of 130 people were trained on the implementation of the National System of Nutritional and Food Surveillance of MoH within the scope of the Special Indigenous Sanitary Districts in four territories. The activity had the participation of the following

audiences in each of the territories: Indigenous Health Agents (AIS), Indigenous Sanitation Agents, indigenous leaders and local health advisors.

Chile

Children on the move, including Venezuelans

UNICEF, with partner World Vision, has provided nutritional evaluations and sexual and reproductive health services, reaching 426 beneficiaries (207 male, 219 female). These workshops focus on the gender approach whose function is to detect critical conditions of malnutrition in boys and girls, and a detection and response plan for pregnant and lactating women and children with nutritional problems: a local network of referral streams and alerting the local health system has been successfully established. UNICEF has also trained health workers to deliver health care from a rights-based perspective. UNICEF's actions, which are coordinated with other United Nations organizations, help provide information to families and facilitate registration in the public health system. There is constant communication with the public health system at the local and national levels to improve the government's response. The workshops are aimed at children and adults with a programmatic offer that stands out with workshops on the prevention of gender violence, nutritional health, parenting skills and birth control.

Colombia

Children on the move, including Venezuelans

Nutrition activities were implemented in Arauca, Barranquilla, La Guajira, Norte de Santander and Santander along with the provision of health services in local hospitals, as well as through extramural health teams. A total of 5,482 caregivers of children aged 0–23 months received IYCF counselling (69 per cent women, 31 per cent men), 3,939 children between 6–59 months were screened for acute malnutrition (51 per cent girls, 49 per cent boys) and 1,893 pregnant women received preventive iron supplements. A total of 144 children aged 6–59 months were identified with malnutrition and admitted for treatment and 2,081 received multiple micronutrient powders. Considering the mobility and contact situation of the migrant population, monitoring children with malnutrition continues to be a challenge.

COVID-19

Following the increase in the risk of malnutrition due to the impact of the COVID-19 pandemic, nutritional interventions were initiated in municipalities of Barbacoas, Manaure, Tumaco and Uribia. Through nutrition services provided by public hospitals, 1,124 children between 6–59 months were screened for acute malnutrition and 278 pregnant women received iron and folic acid supplementation. Four hospitals received anthropometric equipment and nutrition supplements for children and pregnant women. A total of 44 children between 6–59 months were identified with malnutrition and admitted for treatment. In addition, UNICEF contributed to the recovery of 2,685 children at risk of malnutrition in the department of Nariño through joint work with local health authorities for the delivery of nutritional supplements. Considering the mobility and contact situation of the migrant population, monitoring children with malnutrition continues to be a challenge.

Dominican Republic

Children on the move, including Venezuelans

In 2022, 33,923 boys and girls were screened: 3 per cent were diagnosed and treated for severe acute malnutrition, 5 per cent were diagnosed and treated for moderate acute malnutrition and 16 per cent for risk of acute malnutrition. The NUTRE MUAC App that collects this data does not record the nationality of the child since the current situation with migrants in the country could put them at risk.

Ecuador

Children on the move, including Venezuelans

UNICEF continued focusing on a nutrition response to support locals and people on the move to ensure equitable access to healthcare and nutrition services. As part of a regular programme including the migrant population in Monte Sinaí, Guayaquil, UNICEF volunteers involved in a community-based surveillance strategy provided nutritional screening and support to identify the migrant population with cases of anaemia and malnutrition benefiting 115 children under 5.

COVID-19

As the prevention strategy to control COVID-19, UNICEF has implemented a community epidemiological surveillance strategy to monitor access to essential health services and immunizations in communities benefiting 4,300 vulnerable families and training 246 tutors in prioritized territories. This strategy has shifted to include chronic malnutrition and is being scaled up by MoH. It has so far benefited 2,838 children under 2 and 1,367 pregnant women at the local level.

Guyana

Children on the move, including Venezuelans

In Guyana, UNICEF supported the infusion of the nutrition interventions through a training in basic nutrition, breastfeeding and complementary feeding literacy for 28 CHWs and Community Service Officers from hinterland villages. This skilled-up group will serve 884 children (477 boys, 407 girls) and their parents including migrants from 17 hinterland communities in regions 1 and 9.

COVID-19

Overcrowded living conditions increases the transmission of COVID-19 and risk of violence. Border closures saw a rise in entries through irregular pathways and routes, exposing migrants – especially children and adolescents – to more risks. Migrants are seen as a burden on the host communities because of sharing the (limited) resources and opportunities they have. The lack of a valid identity document is a barrier to accessing public health services and government social protection measures. UNICEF provided support in the rollout and vaccination of COVID-19 by ensuring a continuous availability of the COVID-19 vaccine through the COVID-19 Vaccines Global Access mechanism as well as the donation of 450 vaccine carriers and 20 cold boxes to ensure vaccines spread far and wide, especially to hard-to-reach areas and underserved communities to ensure no child is left behind.

Peru

Children on the move, including Venezuelans

UNICEF assisted migrants settled in Northern Lima through the strengthening of services for prenatal care, pregnancy and newborn care, ECD, growth and development controls, and home visits. During 2022, 1,093 children in Lima and Tumbes were surveyed for severe acute malnutrition (SAM) and moderate acute malnutrition – the latter received nutritional supplements. In addition, UNICEF worked with 2,095 teachers and ECD specialists to address the post-COVID-19 school return considering the comprehensive early childhood approach.

In Tumbes, 18,450 people were reached with information on nutrition and health services through radio spots and 1,240 people through 5 health fairs. UNICEF repaired and donated equipment to nine HCFs including infantometers, anthropometric measuring tapes and foetal heartrate detectors, among others.

COVID-19

UNICEF continued to strengthen HCFs reactivation and their adequate care for pregnant women, children and adolescents. In the Amazonian region of Ucayali, in close coordination with DIRESA, UNICEF provided technical assistance, training, accompaniment, furnishing and materials in 18 prioritized health centres. A total of 1,640 children under 5 were surveyed for acute malnutrition, of which 41 cases were identified and referred. In addition, 350 kits for pregnant women and 320 ECD-family kits were delivered with items for children under 2 and newborns. UNICEF also worked at a national level providing technical assistance in the elaboration of MoH's guidelines for treating malnutrition.

Trinidad and Tobago

Children on the move, including Venezuelans

Utilizing three different strategies, the Living Water Community (LWC) and UNICEF delivered counselling on IYCF to 963 caregivers (159 males, 824 females). The first strategy is the delivery of the standard counselling plan for families with young children. Noting the challenges with birth registration and as part of integrated programming, the counselling now includes key information about registering children at birth. The second strategy utilized professionals to deliver webinars on nutrition during the pregnancy, breastfeeding, feeding and development of children, food allergies and preparation of local foods. The third strategy is embedded as part of the food assistance programme.

2.4 Water, sanitation and hygiene

Bolivia

Children on the move, including Venezuelans

UNICEF delivered family hygiene kits (including menstrual hygiene items) in Beni, Cochabamba, La Paz, Pisiga (on the border with Chile) and Santa Cruz with the support of implementing partners, benefiting 1,083 people (124 girls, 123 boys, 425 women,

411 men). Hygiene kits were delivered to migrant children and their families in transit, host communities and families in destination: a total of 1,083 people benefited (124 girls, 123 boys, 425 women, 411 men). By the end of 2022, UNICEF supported the rehabilitation of the WASH infrastructures of Pisiga's healthcare facility.

COVID-19

In 2022, WASH infrastructures in all HCFs in the municipality of El Alto (57) were rehabilitated. These HCFs provide primary health services to 943,000 people. In addition, a handwashing with soap strategy was implemented in El Alto reached 5,876 people (1,793 girls, 1,755 boys, 1,184 women, 1,144 men). A total of 190 health workers were trained in infection prevention and control to serve people in HCFs.

Brazil

Children on the move, including Venezuelans

In the states of Amazonas, Pará and Roraima, UNICEF actions impacted 36,966 migrants and refugees (46 per cent children) in shelters, informal settlements and indigenous communities receiving migrants with an adequate water supply, access to sanitation, promotion of improved personal and environmental hygiene, menstrual hygiene, solid waste management, and critical materials for cleaning and disinfection. Actions taken this year under UNICEF's WASH sector leadership at the state and national levels are setting the stage in 2023 for increased local government participation in basic service delivery, and greater cross-sector interventions with education, health and child protection.

COVID-19

UNICEF supported strategies aimed at improving WASH services in health care facilities and communities. Actions to improve access to drinking water in 63 indigenous communities and 59 HCF in the states of Amazonas, Pará and Roraima were supported benefiting more than 15,000 indigenous people from various ethnic groups including the training of 381 health public sector professionals and partners on Infection Prevention and Control and application of the Water and Sanitation for Health Facility Improvement Tool (WASH FIT) tool. A total of 34 HCFs benefited from action plans elaborated thanks to the implementation of WASH FIT. For the development of these projects, climate resilient technologies were prioritized using solar-powered water harvesting systems, aiming to ensure water security in villages affected by extreme hydrological events intensified by climate change.

Chile

Children on the move, including Venezuelans

UNICEF, in collaboration with World Vision, achieved successful results in hygiene and sanitation in northern Chile in 2022, reaching 1,557 people (461 boys, 483 girls, 243 men, 370 women) using safe and adequate sanitation facilities. At the beginning of the year, UNICEF prepared a report with a basic assessment of the WASH situation in temporary shelter centres in Colchane and Lobito. An agreement was signed with World Vision to implement a response plan in three axes: guidelines for temporary sanitation solutions, promotion of hygiene practices and distribution of hygiene kits. This plan was successful in delivering the necessary infrastructure improvements with 699 boys and girls (340 boys, 359 girls) in improved learning facilities, the delivery of 3 specialized handwashing structures for girls and boys. Hygiene and sanitation kits, differentiated by gender and age for distinguished needs, reached 1,492 people (520 women, 253 adults, 719 children). Informative workshops were also held to influence the behaviour of children and their families reaching 815 people (130 boys, 129 girls, 204 men, 352 women).

Colombia

Children on the move, including Venezuelans

During 2022, UNICEF's response was focalized in the departments of Antioquia (Necoclí), Arauca, Atlántico, La Guajira, Nariño, Norte de Santander and Vichada reaching 58,263 beneficiaries (approximately 38 per cent children). Activities included the provision of critical WASH supplies including hygiene kits with Menstrual Hygiene Management items, hygiene practices promotion and the improvement of WASH services in schools and other learning spaces. In territories such as La Guajira, Vichada, and North of Santander, UNICEF work with migrant and binational indigenous communities such as Amorúa, Bari, Piapoco, Sikuni, Wayuus, Yarurosand and Yukpas. With these communities, a differential ethnical approach was included which led to an in-depth coordination process, the creation of demand on WASH services and community empowerment. UNICEF's emergency response to migrants and refugees has a strong nexus with the development actions such as advocacy with national and departmental authorities to improve the access to water and sanitation on informal human settlements, and with the development of a human settlement detection system that will allow identification of the availability of WASH services in the settlement's surroundings.

COVID-19

The COVID-19 response focused on facilitating quality WASH services in school in four departments (Chocó, La Guajira, Nariño and Norte de Santander) including rural and peri urban areas. UNICEF prioritized key activities such as the rehabilitation of WASH facilities (including handwashing points), delivery of critical WASH supplies and behaviour change strategies mainly focused on handwashing with soap and COVID-19 prevention measures. A total of 25,049 people participated in these activities (60 per cent children).

Other situations

Regarding violence, internal displacement and disasters, WASH activities reached 25,343 people, 56 per cent of whom were children. WASH activities focused on facilitating sufficient access to safe drinking water and household needs, provision of hygiene items (also hygiene promotion activities), access to basic sanitation systems according to local contexts mainly at the rural level and the strengthening of local capacities to operate and maintain the WASH infrastructure. During 2022, humanitarian trends continued in relation to violence, internal displacement and confined communities, so the main gap was the response to all humanitarian situations due to limited funding and limited presence of the WASH cluster partners. The UNICEF WASH team was trained on the WASH FIT, WASH'EM and WASH in emergencies methodologies to improve their capacity to response and coordinate WASH actions in health centre and humanitarian contexts.

Dominican Republic

COVID-19

In the framework of the COVID-19 response and thanks to the support of ECHO, 590 WASH solutions were implemented in Primary Health Care Units, schools, churches, markets and community centres in territories selected by its high percentage of migrant population: 24 per cent out of these were education facilities. Improvements of WASH and sanitation access benefited an estimated of 28,600 children and adolescents.

Regarding hygiene, a social listening study was conducted on knowledge and attitudes in basic and menstrual hygiene. A communication campaign on basic hygiene and menstrual management was conducted with 26 workshops for training 367 promoters, who delivered the message of basic hygiene and menstrual management. A total of 24,941 people participated in this campaign and 700 basic and menstrual hygiene kits were distributed considering family composition, effect on their income and other social vulnerability issues.

Ecuador

Children on the move, including Venezuelans

Within the national migration response platform, UNICEF served as the WASH focal point supporting the Joint Needs Assessment for migrants and refugees and ensuring proper planning and reporting of WASH. UNICEF interventions improved WASH services and accessibility for children with disabilities at 10 peri-urban schools benefiting 11,992 students including 650 migrants. Sanitation services were enhanced in strategic sites along the migration route improving the availability and accessibility of drinking water for the migrants. Hygiene kits for women and babies were also distributed to 1,187 migrants on the northern migration route near the Ecuador-Colombia border. The intervention was carried out in intersectoral coordination with WASH through the rehabilitation of sanitary batteries, infrastructure adaptation for those with disabilities and personnel training in menstrual hygiene incorporating a focus on climate change and waste management module.

COVID-19

To mitigate COVID-19, WASH infrastructure and capacities at 31 rural schools (3,875 students), 34 rural ECD centres (1,340 children), 8 healthcare facilities and 12 rural water service providers in Cayambe municipality were improved reaching up to 26,311 people including 18,664 children and adolescents. In Imbabura, Manta and Tulcán, UNICEF led local child protection and WASH working groups to plan regular field assessments on the main migration route.

Guyana

Children on the move, including Venezuelans

Strengthening partners and community capacity and creating an enabling environment for the establishment and management of WASH systems remained a key focus in 2022. Key activities included the training of 100 CSOs to better equip them with the knowledge and skills to operate and maintain the water supply systems in their villages. This included building new capacities to maintain photovoltaic systems to provide climate resilient, safe water for 15,000 persons. Other support included the provision of 100 water tanks, 10,000 collapsible water containers and 2 million water purification tablets to ensure the provision of safe

drinking water to thousands of people, including migrants, with a focus on increasing the accessibility and availability of safe water in areas where people need it.

UNICEF supported implementing partner Guyana Water Inc. water utility (GWI) to conduct a diagnosis of the WASH situation in new areas where migrants had settled including recommendations and supplies to improve the situation of migrant children and their families. UNICEF is working with GWI to implement the recommendations including installation/improving of WASH infrastructure, hygiene promotion and distribution of hygiene kits. UNICEF delivered a WASH in emergencies preparedness training for 20 Guyana participants from several agencies as part of the sector coordination strengthening, WASH stakeholders and emergency responders, with the collective elaboration of the new WASH Rapid Assessment Tool, now harmonized for the sector with the Stockholm International Water Institute's support.

Peru

Children on the move, including Venezuelans

UNICEF implemented WASH services across shelters, healthcare centres and schools in Tumbes. This included the installation of 1 mobile container with 4 toilets and 2 showers, and 4 drinking water points along the migrant route for people on the move reaching 7,886 people. A total of 35 healthcare workers (26 female, 9 male) were trained on solid waste management and use of disinfection supplies, and sanitization kits were distributed to 7 healthcare facilities and shelters in Tumbes. The WASH FIT methodology was applied to evaluate the WASH conditions in one health centre which attends migrants. Based on the results, a preliminary improvement plan was proposed which includes capacity-building, new personnel, coordination with the local government to establish regular waste collection routes and water provision, infrastructure repairs and amplification, furnishing and materials, signage and menstrual hygiene items.

COVID-19

UNICEF provided WASH services in Ucayali to schools, healthcare centres and communities consisting of restroom repair and the WASH FIT diagnostic application. Our activities included training for staff, technical assistance in updating the Regional Sanitation Plan and advocacy actions to include WASH in the public agenda (Roundtable for the Fight against Poverty). UNICEF also carried out workshops with students and organized a WASH challenge among schools in coordination with the Local Education Management Unit. A stand was set up at the 'The Water Route' Fair, with games, videos, photos and prizes. Field actions also included the provision of health kits and culturally adapted communication strategies to promote hygiene practices and prevention of COVID-19. In total, 9 health facilities were intervened and WASH FIT was applied to 18 HCFs. This resulted in the elaboration of improvement plans and training of 48 members of the Sanitation Services Administration Boards, 60 CHWs, 10 municipal officials and 36 HCF operators. A total of 4,200 hygiene kits were delivered to 62 indigenous communities reaching 16,311 people.

2.5 Education

Bolivia

Children on the move, including Venezuelans

During the last quarter of 2022, an International Workshop (both face-to-face and virtual) on the use and scope of the Convenio Andres Bello (CAB) Equivalence Table was held in coordination with the Ministry of Education (MoE), with the participation of regional representatives of Instituto Internacional de Integración de la Organización Convenio Andrés Bello. This included technical staff from MoE, Departmental Directorates and District Education Directorates. A total of 809 participants were engaged from 9 departments. Material for mass dissemination regarding simplified administrative procedures for registration of migrant children in schools and technical aspects of the equivalence tables were distributed at border points, schools and urban centres, and through social media.

Brazil

Children on the move, including Venezuelans

In 2022, efforts continued for the provision of adequate, tailored and sufficient education services for Venezuelan students. Advocacy strategies for education public policies' improvement, including the need to properly address indigenous specificities were reinforced by the training and sensitization of over 700 education professionals. A total of 4,973 children and adolescents – part of the governmental interiorization strategy – were assisted on their transference processes to other states and destination schools through the Passport for Education initiative. In Roraima and Amazonas, 26 child-friendly spaces (CFS) and 6 local Boa

Vista schools benefited from non-formal and formal education services respectively, reaching over 14,000 refugee and migrant girls and boys. School Active Search has identified and enrolled 962 migrant and refugee out-of-school students.

COVID-19

In 2022, the safe reopening of schools was the beacon to recover education losses, including the readiness of schools and education professionals to properly respond to the post-pandemic increased level of vulnerabilities also stressing the specific needs of indigenous children and adolescents. Strategies such as Education that Protects for the identification and referral of violence cases; Active School Search for the identification and enrolment of out-of-school children and adolescents; and Successful School Pathway that addresses the causes of interrupted education, have reached over 20 schools and 2,200 students in the state of Roraima.

Chile

Children on the move, including Venezuelans

At the beginning of the year, UNICEF committed to foster local-level coordination among public institutions to ensure access to early childhood education, advise national-level MoE teams and partner with Valoras UC (Pontificia Universidad Católica de Chile) to pilot a socio-emotional support programme in host communities. In addition, UNICEF signed an agreement with World Vision to implement two temporary learning spaces in Iquique and Lobitos. By the end of the year, UNICEF had achieved significant results including supporting coordination and adaptation of the offer of early childhood education in the region, providing close technical assistance to MoE, generating useful material with Valoras UC and providing informal education to children and adolescents in Iquique and Lobitos. As a result, MoE committed to fund the educational response in the north of Chile.

Colombia

Children on the move, including Venezuelans

UNICEF focused its education response for migrants on regularization and learning levelling at school and community level and kept its response on ECD. In 2022, 730,000 Venezuelan children advanced in their regularization process in Colombia (225,000 children with the support of UNICEF). UNICEF provided assistance on data quality control and verification, registration campaign at schools and biometric registration across the country. UNICEF also prioritized curricular flexibility for learning levelling and adapted the Todos a Leer programme implementing it in 14 human settlements, strengthening the educational capacity of 51 community leaders.

COVID-19

In 2022, 64,000 children did not return to school and 301,445 were reported as “dropouts” during the year (MoE, 2022). UNICEF supported the retention of 98,275 children (51 per cent girls, 14,741 migrants) in 115 schools in 26 municipalities by: (1) promoting the implementation of formative evaluations which allow planning tailored-made pedagogical practices; (2) training 551 teachers in strategies to level and catch-up learning outcomes of children and (3) designing individual plans for 26,911 children with critical language outcomes. As a result, boys and girls improved on average, by 5.6 percentage points in language.

Other situations

Giving the systematic increase on internal displacement due to armed conflict events and natural disasters across Colombia, UNICEF began the design of a resilient education curriculum that will protect school trajectory of children in contexts of human mobilization and natural disasters. By the end of 2022, 660 teachers have been part of this process. UNICEF also provided more than 4,165 learning materials such as school supplies, pedagogical and learning kits to support the learning crisis activities.

Dominican Republic

Children on the move, including Venezuelans

UNICEF and the Dominican Institute for Integral Development established four CFS to improve well-being, integration and school placement of Venezuelans: there are currently 163 children attending activities in such spaces. Children were expected to be out of school, however, most of them have managed to get into school even though they do not have formal enrolment. The CFS service schedule was therefore adjusted to the school schedule and the families' needs. UNICEF has delivered 450 school supply kits and 450 Juega Conmigo guides for parents and caregivers to stimulate their children under 5 years old while offering them loving and sensitive care.

Ecuador

Children on the move, including Venezuelans

In a coordinated effort with the United Nations Educational, Scientific and Cultural Organization (UNESCO) and UNHCR with support from the Education Cannot Wait global fund, the Government of Canada and ECHO, interventions were developed to increase the inclusion in education of the population in a situation of human mobility in seven provinces where more than 80 per cent of this population is concentrated. The interventions benefited 98,000 boys and girls on the move and their host community as well as 3,600 teachers in 70 educational institutions. Interventions focused on the elimination of barriers to access the education system, improvements in infrastructure and accessibility, support and mentoring for teachers, recovery of learning losses and development of transferable skills. In conjunction with the National Institute for Educational Evaluation, an innovative educational evaluation model was developed to monitor the results of interventions to improve holistic learning.

COVID-19

UNICEF, together with MoE, led the process of generating evidence to demonstrate the severe effects of school closures during the COVID-19 pandemic and to promote the urgency of returning 4.3 million students to face-to-face learning in the education community. UNICEF started the implementation of a formative evaluation model that will provide teachers with tools to reduce learning losses and enhance the development of transferable skills in their students. To coordinate the mitigation actions caused by the COVID-19 pandemic, UNICEF led the education working group in which some 40 organizations participate to advocate for the return to face-to-face learning and promote the articulation of their interventions to achieve educational inclusion of children. In support of the safe return of children and adolescents to face-to-face education, UNICEF assisted 11,992 students, including 650 migrant children, in improving their WASH services and accessibility for children with disabilities as part of the Education Cannot Wait programme. UNICEF also supported the Pedagogical Levelling and Acceleration Programme for the 4,300 students to get back into the educational system.

Guyana

Children on the move, including Venezuelans

In 2022, the most significant result was the increased ECD coverage by 22 per cent to the migrant children and those in their host communities in an additional 17 villages and offering nurturing care strategies to their parents and other family members. This was achieved through the identification and training of community-based facilitators to boost sustainability, ownership and cultural appropriateness. The added result was the enhanced competencies and pro-bono services by CHWs, Community Service Officers and a few villagers engaging children and their parents in ECD stimulation and positive parenting in health centres/clinics and their homes.

COVID-19

Focussing on continuity of learning for all children was the biggest achievement in this output in 2022, with the return to school for face-to-face learning measuring an average daily attendance of 85 per cent of children across the country. For the first time, the Schools Welfare System utilised gender responsive counselling strategies to address the psycho-social and mental health needs of children and teachers. To date, 150 children and 15 teachers across the education districts have received priority counselling for a range of GBV infractions – incest, trauma, bullying, self-harm and suicidal tendencies. Competencies in digital learning and teaching have improved in 2022 with 912 teachers trained to deliver distance learning content delivery, assessments and monitoring and using online platforms thus offering on a more efficient scale a hybrid approach to learning.

Peru

Children on the move, including Venezuelans

UNICEF and its partners, through the Multi-year Education Cannot Wait (ECW) (+Diversity) Programme, have improved educational services for over 129,000 students including migrant and host community students. In 2022, UNICEF's communication and advocacy with MoE contributed to an increase in the number of Venezuelan students in the Peruvian education system to more than 135,000 this school year. Likewise, joint work with MoE and other partners has made it possible to expand access and support the process of reinsertion of 6,936 Venezuelan students that are out of school. To close gaps in access and permanence of children in the school system, 1,587 families received cash transfers and 1,458 school supplies kits were given to the most vulnerable students, especially migrants.

During the reporting period, 51 teachers and 50 school directors and authorities from the Local Education Management Units and Regional Education Directorate were trained in strategies to ensure the integration of migrants and on planning and using school materials, namely in the prefabricated classrooms and addressing migrants' special needs. In Northern Lima, the learning recovery programme reached 433 migrant students (211 female, 222 male) and 1,566 students from host communities (808 female, 758 male).

COVID-19

During 2022, UNICEF concentrated its work on school returns and learning recovery post-COVID-19, mostly through technical assistance, media presence and communications support. UNICEF continued its collaborative work with MoE through the Active Search campaign to identify out-of-school children or those at risk of dropping out and support their re-entry and retention. Workshops and meetings supported by UNICEF reached 1,164 parents and caregivers with a focus on parents in education, addressing school return, COVID-19 care and prevention (vaccination, handwashing) and psychosocial support for loss-related grief.

Trinidad and Tobago

Children on the move, including Venezuelans

In partnership with LWC, UNICEF reached over 2,000 children on the move from early childhood through secondary school (1,018 boys, 1,025 girls), with 24 obtaining their high school diploma (11 girls, 13 boys). 738 devices were distributed as part of continued support for online education. Collaboration between implementing partners resulted in over 100 teachers (91 females, 12 males), volunteers and facilitators trained on identifying red flags that suggest development and special learning needs. Forty-eight facilitators and volunteers were trained on adolescent participation using the tools from Plan 12, an initiative for global citizenship and sustainability. Students benefiting from online education indicated a high level of satisfaction (81 per cent with the programme and 54 per cent indicated they have an increased interest in learning).

2.6 Child protection, gender-based violence in emergencies, and prevention of sexual exploitation and abuse

Bolivia

Children on the move, including Venezuelans

A total of 1,732 children (915 girls, 817 boys) and 1,293 migrant families and 405 children (168 girls, 327 boys) in 5 capital cities and 3 border points received support in case management, mental health and psychosocial care, and learned about the Safe Family service. UNICEF also carried out activities about violence prevention, socio-legal counselling, immigration regularization, obtaining identity documents, child development care, access to health insurance and specialized health services. As part of the direct services that benefit migrant and local children, sociocultural activities have been developed promoting integration actions in cultural, recreational, pedagogical and sports spaces, strengthening their integration into the host community. 269 public servants from the child protection system were sensitized and informed on the care and protection of migrant children and adolescents.

COVID-19

The [Safe Family](#) programme continued to provide psycho-social support to people of all ages. In 2022, the helpline received 37,566 calls, 33 per cent from children and adolescents. UNICEF continued to link the helpline with 10 new municipal services reaching 16 municipalities during the 3 years of this initiative. The child protection services were trained to ensure that all calls related to violence against children and women were directly and efficiently referred to the relevant services. UNICEF also collaborated with MoE to develop 18 Safe Family workshops that reached 24,675 parents, 8,225 teachers and 41,125 students. School communities were provided with tools to manage emotions better, improve parenting skills, prevent violence, identify conflicts, develop abilities for their resolution, and access proper mental health referrals.

Prevention of sexual exploitation and abuse

All child protection partners were assessed on the prevention of sexual exploitation and abuse (PSEA) and received training. All partners are medium or low risk and are very aware of UNICEF's policy on prevention of sexual exploitation and abuse. In 2022, a protocol to respond and safely refer cases of GBV is being developed and will be implemented by all partners in 2023.

Brazil

Children on the move, including Venezuelans

UNICEF reached 5,603 children, adolescents and young people inside and outside shelters with individual child protection case management. Through best interest determinations, 2,386 children received alternative care or were reunited. The Super Panas strategy provides psychosocial support and GBV prevention to 43,926 children, adolescents and caregivers. A total of 2,361 people were reached with awareness activities and community mobilization interventions on PSEA. UNICEF reinforced advocacy and technical guidance work in the leadership of the Child Protection Subsector in the Response to the Venezuelan Migration

Emergency (R4V) Platform, including on PSEA with 326 military personnel and 101 people from civil society organizations trained in Roraima.

COVID-19

UNICEF reached 110,595 adolescents and young people for mental health and psychosocial initiatives as COVID-19 impacts mitigation activities. With the support of ECHO, UNICEF has supported the training of 360 professionals and indigenous leaders/people on mental health. A total of 39 people were reached in the Special Indigenous Health District (DSEI) Alto Solimoes (Amazonas), 251 in DSEI Leste (Roraima) and 70 in DSEI Yanomami. Following the projection of 75 people reached by each professional trained, 27,000 were reached. With respect to ethnic-cultural diversity, each training session first aimed to identify the mental health demands of the communities, as well as to identify spaces available from case management services in the community.

Chile

Children on the move, including Venezuelans

The intervention at Hogar de Cristo in Colchane and Iquique was strengthened to guarantee essential services and protection to migrants who transit through irregular crossings. By 2022, 11,300 people have received support in the temporary accommodation centres in Colchane and Iquique. As of March 2023, the government will be in charge of implementing the UNICEF reception centres on the northern border. The agreement with the Jesuit Service for Migrants ended in December, benefiting 230 children from Antofagasta, Arica and Tarapacá along with 134 adults identified as adults/caregivers who agreed to individual case management to guarantee referral to public services and humanitarian support networks, support socio-emotional and migratory information. In addition, 202 children were assisted through the Migrapp application that provided information on immigration regulations and access to public services. The agreement also included training for 131 officials (34 men, 97 women) from the state programme for specialized legal assistance for children and adolescents on intercultural approaches to the family, children's rights on the new immigration law and access to immigration regularization for children. The agreement with Fútbol Mas provided socio-emotional support through sports to 500 children who are sheltered in Playa Lobitos and the first reception centre in Iquique. Regarding strengthening the response to PSEA, UNICEF staff, implementing partners and frontline government employees were trained in fulfilling their responsibilities to prevent and respond to SEA through a total of 6 training sessions (3 virtual and 3 face-to-face) reaching 115 people. Inter-institutional SOPs have been established for the Lobitos shelter; approval from state authorities is pending. Finally, 203 people reached were with an outbreak of risk mitigation, prevention or response related to gender-based violence, reaching a total of 195 women.

Colombia

Children on the move, including Venezuelans

During the reporting period, 19,188 children and 10,476 adults participated in child protection activities through child-friendly spaces, drop-in centres and community activities. Around 70 per cent of the participants were Venezuelan, the rest belonged to host communities and other nationalities. The Venezuelan population received information and support to access the temporary regularization mechanism, still in force for children in child protection or education systems, reaching 174,500 children who advanced in the process to obtain their permits.

At least 10,339 children and adolescents and 4,346 adults participated in interventions to mitigate GBV. Of these, 864 government officials (50 per cent), civil society members (31 per cent) and implementing partners (19 per cent) participated in training to prevent and respond to GBV against children. The response to children on the move included the delivery of key messages about risks on the roads, prevention of violence against children and access to Colombian child protection services. A total of 4,224 children in need of specialized services and 1,585 unaccompanied or separated children were identified and referred to the child protection system. Actions also include violence prevention strategies in host communities, humanitarian support and reestablishment of family contacts in Colombia (30 per cent were reunited with their families).

A Child Protection Management tool was designed to identify protection risks for children on the move. Initially implemented in Necoclí, it is expected to be extended to other territories and transferred to the official institutions. In 2022, 342 people from 24 implementing partners (IPs) in 43 municipalities of 16 departments received and completed the training programme on PSEA.

COVID-19

UNICEF participated in updating the protocols and action plans for the identification and activation of routes. Also in 2022, the toolbox to promote the prevention of violence in times of COVID-19 was updated to and continued to be transferred and shared with IPs and communities.

Other situations

A strategy to prevent recruitment and accidents from landmines, unexploded ordinance and booby-traps was developed in Arauca, Cauca, Chocó, Nariño and Norte de Santander. A total of 7,719 children (37 per cent girls, 63 per cent boys) and 2,673 adults participated in awareness workshops about the risks for children in armed conflict context, access to state protection services and, as a development of the Mental Health and Psychosocial Support Minimum Service Package, in training on life skills and psychosocial support. A total of 22 children identified as in risk of recruitment were referred to the authority's protection mechanisms and had access to humanitarian support. In 2022, 5,286 anti-personnel mine victims had access to humanitarian support and 91 victims were attended.

Dominican Republic

Children on the move, including Venezuelans

In 2022, UNICEF supported 129 Venezuelan children and adolescents in obtaining a student visa and one case in obtaining a certificate of live birth for subsequent birth registration. A total of 88 Venezuelan migrants received specialized mental health services through Línea Familiar, coordinated by the Institute of Mental Health and Telepsychology. There is a continuing need for support for access to immigration regularization documentation and other legal identity documents that facilitate formal registration in education.

Other situations

In 2022, UNICEF assisted 5,174 children (65 per cent boys) detained by migration or law enforcement agencies of which 2,126 (79 per cent boys) were unaccompanied. A total of 686 children were reunited with their families in the Dominican Republic (66 per cent boys), while 1,650 children (81 per cent boys) with no connections in the country were referred to Haitian consular authorities and UNICEF Haiti for family reunification. Thanks to a presence at the border, UNICEF assisted 2,681 accompanied children (55 per cent boys) who were not admitted into the Dominican Republic and 153 pregnant and lactating women were able to return to their homes in the Dominican Republic, thus avoiding family separation.

Ecuador

Children on the move, including Venezuelans

The Protocol for Special Attention to Children and Adolescents in Contexts of Human Mobility is acknowledged as good practice at the regional level for protection of children on the move that guarantees their entry and protection in the country regardless of their documentation or migratory status – benefiting approximately 130,000 children on the move. As the lead of the Child Protection Area of Responsibility within R4V, UNICEF has been able to channel the attention of approximately 50,000 children in 2022. UNICEF implemented Comprehensive Support Spaces in Esmeraldas, Manta and Tulcán and where specialized care is provided to children on the move and host communities with a focus on integration in coordination with local government. These spaces have provided specialized care to 48,000 people including children (65 per cent), parents, caregivers and public servants. UNICEF has provided legal attention (protection and migratory regularization) to 11,000 people and psychosocial attention to 20,000, focusing its efforts on the attention of 3,000 children with special protection needs (including unaccompanied and separated children).

Gender-based violence in emergencies

UNICEF continues strengthening the resilience of vulnerable households with children in the peri-urban neighbourhoods of Manabí and Esmeraldas with emphasis on prevention of GBV. Psychosocial support services were provided through individual therapy sessions and direct attention to parents, children and adolescents. The new masculinities project and parenting programme increased awareness to prevent violence, mainly against adolescent women and girls. A gender programmatic review has been carried out according to the UNICEF Gender Action Plan 2022–2025 to implement, monitor and evaluate the tailored gender programmatic priorities to meet the specific humanitarian needs of girls, women and other marginalized populations in all the programmatic result areas. Proposed interventions include covering preventing and responding to sexual violence, early teenage pregnancy and promote girls' participation in decision making.

Prevention of sexual exploitation and abuse

UNICEF has continued to evaluate its partners on PSEA policy compliance. This process includes training partners' teams and creating follow-up plans in each case. UNICEF also promoted the online course among partners, the Child Protection Cluster, local and national public institutions.

COVID-19

UNICEF has worked with more than 20 civil society organizations as part of the Child Protection Subgroup of the Country Humanitarian Team. At the local level, UNICEF worked with various Decentralized Autonomous Governments especially working closely with the municipal decentralized autonomous governments of Esmeraldas, Manta and Tulcán. This response also aimed at preventing mental disorders among children, adolescents and caregivers as there was a rise in mental health problems attributable to the COVID-19 pandemic.

Guyana

Children on the move, including Venezuelans

Provision of services for the reporting/treatment of child sexual abuse for 72 migrants (GBV services with at least 60 per cent being girls) and over 5,000 persons for birth registration services in 4 regions. No official data is available on the number of cases related to child protection/GBV and PSEA. Issues regarding the need for strengthened services (including access to translation services) has been raised by partners as an area for priority in 2023. UNICEF is also supporting the revision of training programmes in Social Work and the introduction of new training courses on migration which would aid in the response.

Peru

Children on the move, including Venezuelans

During 2022, UNICEF provided support in strengthening the work of the National Migration Authority to guarantee a focus on children and adolescents in its migration policies and management including in the process to request migratory regularization, migration protection measures, and improving protocols for attention and referral of cases of vulnerable persons.

In Tumbes, UNICEF provided technical assistance to the local Special Protection Unit in identifying and treating children in vulnerable conditions, focusing on children in human mobility and unaccompanied and separated adolescents. A total of 267 cases were identified by the end of the year. Through fixed and mobile CFS, seven children in vulnerable situations (disabilities, pregnant, unaccompanied, separated and HIV+) were identified and referred to organizations, agencies or state entities that provide specialized assistance. CFS also provided psychosocial support and messages of violence prevention, family separation and activation of the protection system in case of violation of rights. During 2022, 2,312 children accessed child-friendly spaces at least once in 26 fixed or mobile interventions. In Tumbes, two workshops on dignified management of menstruation were carried out with implementing partners, counterparts and UNICEF staff.

COVID-19

After working with implementing partner Fútbol Más, UNICEF transferred the sports-for-development methodology to an elite working group created by the national programme of youth centres to escalate the initiative to the national level. In total, 33 sessions of the methodology were carried out with 85 per cent of adolescents in two juvenile deprivation of liberty centres in Lima (76 female, 435 male). UNICEF also supported the pilot of the model of accompaniment for children and adolescents orphaned because of COVID-19.

Trinidad and Tobago

Children on the move, including Venezuelans

In tandem with a hybrid approach to CFS that benefited 1,700 children, another 2,000 children and caregivers had access to Mental Health and Psychosocial Support (MHPSS) services. Over 4,900 women and children received GBV risk mitigation through 12 community outreaches. A total of 3,103 persons (1204 males, 1899 females) benefited from awareness activities and community mobilization interventions on PSEA. A total of 84 unaccompanied and separated children (22 males, 62 females) were provided with case management bridging the humanitarian-development nexus. Solutions included family reunification and alternative care in partnership with the Children's Authority of Trinidad and Tobago and the Archdiocese Ministry for Migrants and Refugees (AMMR).

Uruguay

Children on the move, including Venezuelans

UNICEF and IOM have launched a service for migrant children and adolescents that seeks to provide them with support and social and educational services during the migration process and which aims to generate knowledge on the best ways to support the psycho-emotional development of migrant children and adolescents. The project was launched in December 2022 together with Montevideo's Municipality B and is scheduled to run for 11 months providing support to 100 children and their families. Project implementation will also be an input for advocacy work on specific public policies for this population. Within the framework

of the R4V platform, an online course on Care for Children and adolescent survivors of GBV in contexts of human mobility was held between August and October with the objective of providing practical tools with which to detect and begin to address these situations. Approximately 70 people from CSOs and public institutions from different border departments of the country registered for the course.

2.7 Social protection and cash transfers

Bolivia

COVID-19

Through the agreement with the Federation of Municipalities of Bolivia that promotes vaccination against COVID-19, UNICEF held a workshop with the participation of central-level institutions to present the progress made by three consultancies on communication, normative and planning. The aim was to generate joint interventions at the local level. UNICEF also developed a knowledge, attitude and practices (KAP) study to identify the main barriers to COVID-19 vaccination in 11 municipalities, 3 indigenous communities and 2 migrant communities.

Brazil

Children on the move, including Venezuelans

As a result of the additional social workers provided to the most demanded Social Assistance Reference Centres in Boa Vista and Pacaraima, more than 1,400 migrants and refugees received support to access social protection services and benefits, including regular cash transfer programmes, throughout the year. The Humanitarian Cash Transfers (HCT) to Venezuelan migrants and host communities and technical assistance for municipalities planned for 2022 remained on hold due to the lack of dedicated financing.

COVID-19

Following the HCT that reached 1,433 families in the first semester, UNICEF provided technical assistance to strengthen social protection shock-responsiveness in 12 municipalities. The initiative resulted in the development of a tool to assess the shock-responsiveness of the social protection system at the municipal level, a protocol to deliver municipally owned HCTs, a distance learning course to scale up to other municipalities in Brazil and more than 70 social workers trained in shock-responsiveness tools. The additional HCT planned for 2022 remained constrained due to the lack of dedicated financing.

Chile

Children on the move, including Venezuelans

In 2022, distribution of cash transfers for migrants was not implemented and two areas of work were pursued instead. The first, linking migrants with institutions that provide basic social services such as identification, health and education. With the protection area, work has been done on the enrolment of migrants that allows progress in their migration regulation process. The second area of work focused on advancing the incorporation of migrant children into the Social Register of Households, the gateway to Chile's Social Protection System. The objective of this work is to facilitate the incorporation of these children into the register and allow them access to any necessary social protection programmes. To this end, a meeting was held with the Ministry of Social Development to explore ways to streamline the process.

Colombia

Children on the move, including Venezuelans

UNICEF supported the National Planning Department in accelerating the integration of regularized migrant families into the national database of potential beneficiaries of social protection programmes – the Identification System for Potential Beneficiaries of Social Protection Programmes (SISBEN). A community-based communication strategy was designed in partnership with the social behaviour change (SBC) team to clarify rumours, doubts and information gaps among migrants about the convenience of requesting the SISBEN survey. Between July and December, 214,062 people were reached with messages through community media, there were 16,350 interactions on social networks and 6,267 SISBEN survey requests were received, of which 62 per cent were from migrant families in the municipalities of Arauca, Barranquilla, Cúcuta and Riohacha.

COVID-19

In response to the request for support from the Department for Social Prosperity (Departamento para la Prosperidad Social), UNICEF developed an analysis of bottlenecks and access barriers for migrant families to the Social Protection System. Priority was given to the monetary transfers that the Government offers to highly vulnerable populations, and the expansion capacity of

these programs to integrate regularized families. This is based on the interest in transforming and expanding the Solidarity Income program, which was created in mid-2020 in response to the COVID-19 crisis.

Ecuador

Children on the move, including Venezuelans

To support the social protection system, UNICEF continued a cash transfer programme to protect vulnerable Venezuelan migrant and refugee children and their families. In 2022, 143 new families benefited from this strategy, in addition to the families who were already benefitting from the previous year, which is a cash transfer for nine months, top-up for education and early childhood, and continuous accompaniment to the families to access education, protection among other services.

COVID-19

UNICEF has contributed to building evidence on the situation and impact of COVID-19 on children and their families through rapid telephone surveys since October 2020, aiming at promoting dialogue to prioritize children and adolescents and policies to address their challenges. In 2022, UNICEF implemented three surveys in February, June and October.

Guyana

Children on the move, including Venezuelans

In support of the Civil Defence Commission, UNICEF developed an assessment to evaluate the institutional arrangements and existing mechanisms to facilitate humanitarian cash transfers nationwide. UNICEF has provided capacity building in value for money and child friendly budgeting and continues to advocate for a more targeted social protecting system.

COVID-19

The COVID-19 pandemic has exacerbated equity issues and it is likely that the increasing frequency of infectious disease outbreaks will continue to threaten progress and will impact on the ability to allocate sufficient resources for social programmes benefitting the most marginalized populations. Recent floods in communities in the interior has further impacted the lives of the most marginalized children, including migrants.

Peru

COVID-19

UNICEF developed three studies that analyse the strategies implemented by the social programmes Cuna Más, Contigo and Juntos during COVID-19 to strengthen the system in emergency situations: (1) Cuna Más created the non-face-to-face modality of the Family Care Service and innovated in the use of information and communication technology for both user care and facilitator training; (2) Contigo created Contigo te Escucha consisting of online support for users and/or caregivers and (3) Juntos created the Temporary Intervention for the Strengthening of Child Development which expanded geographic coverage from 1,325 districts (2020) to 1,849 districts (2022), and programme coverage from 698,206 to 722,193 affiliated households in the same period. The recommendations for the institutionalization of the strategies implemented in the short term are being incorporated by the programmes.

Trinidad and Tobago

Prices swelled in 2022 impacting the purchasing capacity of migrant and refugee families. A total of 178 households with children under 5 years old (28 headed by males, 150 headed by females) benefited from emergency nutritional support. A real time review was undertaken on this initiative to serve accountability and learning functions, which will inform improved programming in 2023.

In partnership with the Trinidad and Tobago Red Cross Society, 100 households with children between the ages of 11–17 who are enrolled in DAWERE, an online education programme, were successfully registered to receive humanitarian cash assistance. HCT is designed to remove the financial barriers to their learning.

2.8 Social Behaviour Change, Accountability to Affected Population Bolivia

Bolivia

Children on the move, including Venezuelans

UNICEF studied knowledge, attitudes and practices about discrimination and xenophobia with host populations including neighbours, carriers, merchants, community authorities, health, education, migration and police personnel in two cities and two

border [towns](#). The results are the primary input for developing the xenophobia prevention strategy that is being carried out in a participatory manner with the population. UNICEF also carried out 10 integration activities between migrant and host communities in 5 cities and 2 border towns reaching 570 people (215 girls, 173 boys).

COVID-19

Two vaccination campaigns were carried out specifically for the migrant population in agreement with MoH and strategic partners. In 2 days of the campaign, 180 people, including children and adolescents, received at least 1 dose of the COVID-19 vaccine. Through this campaign and through UNICEF's advocacy, migrants and refugees from Venezuela can receive the vaccine at any health centre.

Brazil

Children on the move, including Venezuelans

The SBC programme reached over 48,000 refugees and migrants with information on rights and access to services using digital and interpersonal strategies including the information point at the border. In shelters, informal settlements and indigenous communities, UNICEF engaged 30 community mobilizers to disseminate messages, conduct assessments and collect feedback, triggering programme response on different occasions. [U-Report Uniendo Voces](#), managed within the R4V platform, is being prepared to become the first interagency accountability to affected population (AAP) tool of the response. During 2022, UNICEF strengthened implementing partners' capacity to integrate AAP in programming, providing technical support for the implementation of a child functioning module (CFM). In addition to dedicated training, a guide and toolkit were developed.

COVID-19

In the semi-arid region, UNICEF supported the safe return to in-person education with 55,000 students benefitting from instructions on handwashing and personal hygiene for COVID-19 prevention. UNICEF developed a Guidebook on Community Mobilization which was included in the UNICEF Seal official cycle. On immunization, different tones of digital messages were tested in partnership with Meta and the University of Yale. The results will be used to support the incoming government in strengthening routine immunization and reducing the number of Zero Dose children. UNICEF also tested offline engagement approaches for vaccine promotion with young communicators in Rio de Janeiro and with indigenous partners in the Amazon region.

Chile

Children on the move, including Venezuelans

UNICEF worked to ensure that migrant families, especially those with children, had access to information about their rights and access to social services. UNICEF partnered with World Vision to implement a plan which included setting up a web platform and providing internet access at the Lobito shelter. However, the web platform was not developed since families preferred to receive information from a social worker in individual or group settings. Five tablets with internet connection were provided but they were not heavily used. The AAP feedback mechanism was also not successful as the mailbox that was installed with this purpose was not perceived as useful by the families. In the end, UNICEF was able to provide tailored information through messaging on prevention and access to services through the social worker.

Colombia

Children on the move, including Venezuelans

According to the focus of the Colombian government to ensure access to services to migrant families and prevent risks of statelessness, SBC concentrated its actions in three areas: (1) promoting community integration; (2) delivering information to migrant families on the move jointly with education and child protection areas and, (3) ensuring implementation of accountability to affected population mechanisms. The SBC area focused on promoting community participation to demand more and better services; youth empowerment as positive agents of change; delivery of information to increase knowledge of risks; and AAP to inform the programmes and reduce risks of PSEA. A total of 16,838 people (3,859 boys, 4,248 girls) participated in SBC strategies to promote local integration and 3,728 gave feedback to UNICEF actions through AAP mechanisms.

COVID-19

To promote access to meaningful and relevant information, SBC continued its focus on strengthening local capacities to produce information lead by communities, especially indigenous communities, LGBTI, youth and migrant organizations; implementing and tracking community information systems to gather rumours, misinformation and beliefs regarding COVID-19; and implementing AAP mechanisms to promote participation and inform and adapt the strategy. By 2022, the communication

strategy, Somos Enlace, based on community and alternative media ended after two and a half years of work in 17 departments of the country and gathering 40 community media producers. A total of 176,000 people interacted with the information delivered by UNICEF, 1,668 people directly participated in the local production of information and 7,153 people gave feedback to the UNICEF strategy.

Other situations

By the end of the year, Colombia faced a strong rainy season where multiple territories were affected by floods and communities, especially small children, were affected by vector-borne diseases. The UNICEF response was led by the health sector and SBC supported the intervention with delivery of information to raise awareness of risks and action recommendations to caregivers through community media in La Guajira territory. SBC works with implementing partner Fuerza de Mujeres Wayuu Foundation in La Guajira focusing on providing information to migrant communities and indigenous Wayuu communities on rights and services in the migration context and implementing activities to prevent violence against children including GBV. Due to the context, the work of the implementing partner was adapted to support and reinforce safe practices in emergency contexts. A total of 21,636 people received information and 344 participated in AAP mechanisms.

Dominican Republic

Children on the move, including Venezuelans

UNICEF, working with Venezuelan CSOs, reached 7,193 Venezuelan families through an information campaign about access to education, birth registration and protection services. Each publication generated threads of conversation and questions that were answered, but also raised new concerns that served to identify new humanitarian and information needs. Regarding AAP, 137 children, adolescents and caregivers who benefited from the different actions reported feeling confident and satisfied with the assistance received; however, most of them were unaware of the mechanisms for expressing complaints. Steps are being taken to develop accessible mechanisms and make beneficiaries aware of their needs.

Ecuador

Children on the move, including Venezuelans

UNICEF strengthened inter-institutional work with the International Organization for Migration (IOM), UNHCR and other CSOs to implement U-Report Uniendo Voces regional initiative as AAP in humanitarian responses and as a regional strategy articulated to the R4V response, reaching 44,954 people, 84 per cent of whom are between 15 and 29 years of age and 60 per cent are women. Among them, 6,751 young people including adolescents on the move constantly receive relevant, sensitive and pertinent information about their access to services and rights.

COVID-19

In a strategic alliance with IOM and MoH, a nationwide communication campaign was carried out to improve immunization coverage emphasizing the migratory population. Technical assistance and logistical support were provided to run the Yo me refuerzo campaign aimed at improving vaccination coverage against COVID-19. As a result, the campaign improved immunization coverage indicators both in the regular schedule and boosters of the COVID-19 vaccine, benefiting 38,924 inhabitants in both urban and rural areas.

Guyana

Children on the move, including Venezuelans

UNICEF continues to provide technical support for the integration of risk communication and community engagement (RCCE), COVID-19 awareness and prevention messaging into national communications strategies for both migrants and host communities, with the government committing to ensure access to vaccinations for the entire population.

COVID-19

Enhanced demand creation for COVID-19 vaccines and routine immunization vaccines in communities as well as an increase in the number of children and adolescents vaccinated against the HPV vaccine following community dialogues/sensitization campaigns were held in the 10 administrative regions. UNICEF collaborated with MOH to conduct four vaccine hesitant workshops (three at the sub-national level and one national). They were attended by 60 community leaders, 70 healthcare workers, 7 CSOs, 30 peer educators, 40 religious leaders and other prominent influencers. The engagement with the invited stakeholders created a platform that provided a better understanding of the misconceptions around COVID-19 vaccines from different perspectives including religious, racial, social-cultural and ethnic views, as well as solutions to address these misconceptions. UNICEF also supported social media messaging, Google Ads, and other public service announcements reaching more than 300,000 persons on the COVID-19 vaccine and HPV vaccines to improve vaccine uptake. Messages included testimonies from persons who had COVID-19 and encouraged people to become vaccinated. Some messages

targeted parents and encouraged them to involve children in the decision about vaccination and the duty of care; others focused on vaccine safety.

Peru

Children on the move, including Venezuelans

Across all interventions, 619 people participated in feedback activities related to the COVID-19 vaccination promotion strategy and access to services for Venezuelan migrants and refugees in Tumbes and Northern Lima. UNICEF implemented community activities and dissemination of messages through local media for CHWs and HCWs. In WASH, UNICEF implemented awareness-raising and behavioural change strategies to guide the proper use of water, reaching 1,552 girls and 1,363 boys. In child protection, a 5-month communication campaign was carried out in 2022 with products and messages on migration regularization and how to access basic services, reaching 331,586 people. The campaign dealt with school bullying, access to education for migrant children, access to documentation for migrant children, etc.

In Tumbes, with the organization Venezolanos Informados and with the participation of children, adolescents and their mothers, the recipe book *Con Mucho Gusto* (a fusion of Peruvian and Venezuelan dishes) was presented and distributed. The booklet includes dishes prepared by Venezuelan migrants living in Peru, showing how they have brought together Peruvian and Venezuelan cuisine, flavours and ingredients. In Northern Lima and Tumbes, UNICEF implemented community activities such as information fairs and dissemination of messages through local media. The partner institutions were the DIRESA in Tumbes, the Integrated Health Directorate of Northern Lima, and their areas of Health Promotion, Quality and Communications.

COVID-19

UNICEF conducted a KAP survey of perceptions in rural native communities of Loreto on COVID-19. Significant barriers were found in the provision of health services, population access and cultural appropriateness of services. The perception of adolescents towards vaccination was positive, despite the influence of the negative opinion of some family members, friends or religious leaders in their communities.

Trinidad and Tobago

Children on the move, including Venezuelans

During the reporting period, emphasis was given in communicating with the affected population with critical messages on the birth registration of children born to Venezuelan parents. The 2021 OIM [Displacement Tracking Matrix](#) (DTM) captured that 18 per cent of persons interviewed knew children born in Trinidad and Tobago who did not have a birth certificate. The video communicates the critical steps that should be taken for the successful obtention of birth certificates and has over 9,200 views. Other critical information shared with the population of concern was on the preparation of meals using local products and handwashing, both for children under 5.

2.9 Coordination

UNICEF's response plans at country and regional levels contributed to the 2022 inter-agency RMRPⁱⁱⁱ and, as part of RMRP coordination mechanisms (regional/sub-regional/national platforms), UNICEF leads/co-leads sectoral working groups in Child Protection, Education, Nutrition, WASH and the R4V Cash Working Group.

Sector	UNICEF's role in inter-agency coordination mechanisms, recent developments in coordination
Child Protection, GBVIE and PSEA	UNICEF co-leads the regional child protection subsector with Word Vision within the Interagency Coordination Platform for R4V. During 2022, the regional child protection subsector supported the development of the Regional Migration Needs Analysis (RMNA) , provided all year support to national child protection subsectors in their coordination issues, supported capacity building initiatives, the revision of child protection indicators, and facilitated exchanges of experience meetings between subsectors. The regional child protection subsector participated in the development of the 2022 and 2023 regional chapter of RMRP. The subsector coordinated the execution of two regional studies on child labour and organized crime in conjunction with the protection sector and an analysis of child labour among Venezuelan migrant and refugee children, both to be launched in 2023. In addition, the subsector carried out the regional campaign Unaccompanied Footsteps to raise awareness of the risks faced by unaccompanied migrant and refugee children and adolescents in Latin America. At the intergovernmental level, UNICEF provided support to the South American Conference on Migration where progress has been made in the development of a consensus index among countries to generate a guide for specialized protection of unaccompanied children within the Quito Process , the Guide for Transnational Cooperation in the Specialized Protection of Children in Processes of Human Mobility has been validated. The document could be included in the instruments and guidelines that have been developed and shared within the Quito Process.
Education	UNICEF co-leads the regional education coordination group with Save the Children within R4V. During 2022, the regional education group supported the development of the regional summary of RMNA, provided support throughout the year to

	national education platforms in their coordination role, supported capacity building for national education coordination mechanisms (core skills training 1 and 2 delivered during 2022), supported the revision of national education indicators and facilitated several exchanges of experience meetings between the national platforms. Furthermore, the regional education group supported the development of the regional chapter of the 2023–2024 RMRP. In addition, the regional Early Childhood Education and Development team supported country offices to strengthen their capacities around the ECD Core Commitments for Children (CCCs), including early childhood education and assisted to actively incorporate actions and strategies to include young children and their parents in their humanitarian plans and responses.
Nutrition	UNICEF, as the R4V Nutrition sector lead, held coordination meetings with regional nutrition partners and national nutrition sectors in 2022 to share knowledge and experiences among countries and nutrition sector partners. Additionally, in collaboration with the Global Nutrition Cluster Technical Alliance, a webinar was organized to strengthen nutrition data in the migration context to better characterize the nutrition situation of refugees and migrants, advocate for additional support to the response and guide programmatic efforts. UNICEF called for a meeting with the R4V Nutrition and Protection sectors to discuss action on humanitarian needs of Indigenous populations from Venezuela, generating the opportunities for both sectors to progress in this field. Also, UNICEF led the development of lessons learnt from the RMRP 2022 development process, documenting good practices, challenges and recommendations for the RMRP 2023–2024. The lessons learnt document were reviewed and validated with national nutrition sectors and shared and discussed with the R4V platform to improve the RMRP 2023–2024 planning process. Based on these, UNICEF developed a document introducing the R4V Nutrition sector and guidance on the Nutrition People in Need (PIN) estimation tailored to the migration context with support from the Global Nutrition Cluster. In addition, UNICEF led the development of an advocacy strategy for the R4V Nutrition sector, to enhance support to the nutrition response. Finally, UNICEF LAC Regional Office (LACRO) supported the Brazil nutrition sector in documenting the lessons learnt on supporting positive young child feeding practices among Venezuelan migrants and refugees.
WASH	UNICEF led the R4V WASH sector in collaboration with the International Federation of Red Cross and Red Crescent Societies (IFRC). During 2022, WASH LACRO team provided dedicated operational and technical support to WASH national coordination platforms for the development of plans and needs analysis, review of planned partners project submissions and key PIN figures for national and regional chapters of RMNA and RMRP 2023–2024. An in-person WASH in Emergency training with a migration chapter was held in 2022, allowing UNICEF Country Offices' (COs) staff to improve their understanding and capacities on emergencies. A WASH Inclusion webinar for the region was delivered to improve and ensure inclusive WASH responses. LACRO WASH team reviewed the indicators and provided support to countries in this area. Furthermore, the regional sector WASHLAC group end year plenary meeting counted with a situation update on WASH and Migration regionally, and presented to partners innovative approaches developed by COs, concluded from the analysis of the "hygiene shops" which allows access en-route to key life-saving hygiene supplies in Colombia.
Health	UNICEF Regional Office was an active member of the health sector coordination group within the R4V led by PAHO. UNICEF shared the results of studies about access to and quality of health services for migrants in Colombia, Ecuador and Peru conducted between end 2021 and early 2022, the latter two in coordination with UNAIDS. UNICEF participated in a meeting on digital health solutions for migrants organized by IOM.
Social Protection (Cash-based Intervention)	UNICEF co-led with Save the Children the R4V Cash Working Group (RCWG). As part of this role, UNICEF carried out coordination, monitoring, planning and reporting of cash activities in response to the Venezuelan outflow, through consultations with national working groups. UNICEF also supported knowledge exchange among national platforms, and worked jointly with other regional actors, such as the CALP Network, in organizing regional trainings, webinars (e.g., on the definition of Minimum Expenditures Baskets) and producing a study on coordination mechanisms between local Cash Working Groups and Government actors leading social protection programmes in LAC . UNICEF also supported dedicated joint sessions between the RCWG and the Child Protection Sub-Sector to learn about cash-based assistance to unaccompanied children, inviting country teams and Government representatives to share experiences.
Gender	The regional report Affective Cartographies: Migrant, Displaced and Refugee Girls and Adolescents in Latin America and the Caribbean developed by UNICEF and the Hebrew Immigrant Aid Society (HIAS) (2021), was launched on 16 June 2022 as one of the key events to mark World Refugee Day. In 2022, as part of the Child Marriage and Early Unions event during the Fourth Regional Conference on Population and Development in Latin America and the Caribbean, the story of Manu, migrant teenage mother-wife was shared. This story shows how adolescent girls flee Venezuela due to emotional abandonment and lack of socio-economic opportunities and walk ("las caminatas") from Venezuela to find an alternative life. In partnership with IOM, UN Women, UNHCR, Quito Process, CRM, COMMCA, CELADE, representatives of states and civil society, UNICEF organized the XV Regional Women's Conference side event, The role of migrant women and girls in the ecosystem of care work and human mobility in Latin America and the Caribbean: evidence and pending challenges. A training based on the 'Guide for service providers' was carried out virtually in 2022 with 20 UNICEF participants. With the aim to enhance the capacities of GBV service providers and under the framework of the R4V platform, two virtual training sessions of the regional model for the implementation of GBV remote support services for girls and adolescent's girls on the move were conducted in Uruguay, and Trinidad and Tobago (also covering Aruba, Curacao and Guyana). Additionally, GBV training was carried out for UNICEF staff.
Social and Behaviour Change, Accountability	UNICEF has recovered its presence in the Accountability for Affected Populations and Communications with Communities (AAP/CwC) R4V Regional Group co-led by OIM and IFRC and collaborated on the development of the AAP section in the 2023–2024 RMRP. In 2022, UNICEF reactivated the interagency regional steering committee of the U-Report Uniendo Voces, with OIM, ACNUR and IFRC achieving two strategic products: (1) a participatory rapid assessment of the initiative involving the national steering committees of Brazil, Ecuador, Bolivia and Mexico, and (2) the regional action plan for 2023.

to Affected Population	The SBC programme reached over 48,000 migrants and refugees with information on rights and access to services, using digital and interpersonal strategies, including the information point at the border. In shelters, informal settlements and indigenous communities, UNICEF engaged 30 community mobilizers to disseminate messages, conduct assessments and collect feedback, triggering programme response on different occasions. U-Report Uniendo Voces , managed within the R4V platform, is being prepared to become the first interagency AAP tool of the response. During 2022, UNICEF strengthened IPs capacity to integrate AAP in programming, providing technical support for the implementation of CFM. Besides dedicated training, a guide and toolkit were developed.
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2.10 Regional support

UNICEF Latin America and the Caribbean Regional Office (LACRO) provided direct support to Country Offices to respond to the humanitarian needs of the most vulnerable migrants, refugees and host communities, the most vulnerable children and families affected by COVID-19, and people affected by violence and displacement. LACRO closely monitored the situation through continuous communication with teams in the field, deploying significant expertise, missions and financial resources to support the humanitarian response.

In child protection, the Regional Office provided on-going technical support to the Country Offices for adaptations to interventions with regard to identification of new child protection risks, development of tools and analysis of interventions especially on alternative and transitory care practices, review of interventions from a rights approach, review of the response modalities provided in psychosocial support during the different stages of the journey.

During this period, several virtual training sessions were conducted to enhance UNICEF capacities in delivering GBV programming through training based on How to work with adolescent Gender-Based Violence survivors on the move. A Guide for service providers was carried out with 20 UNICEF participants, and Gender-Based Violence in Emergencies (GBViE) training was carried out with 25 participants. LACRO, in partnership with HIAS and R4V, supported tUruguay and Trinidad and Tobago Country Offices to enhance the capacities of GBV service providers on the regional model for the implementation of GBV support services for girls and adolescent girls on the move.

LACRO provided close accompaniment to three countries (Colombia, Ecuador and Peru) in the implementation of the Multi Year Resilience Programme (MYRP) focused on access for education for Venezuelan migrant and refugee children, including the regional MYRP component with key capacity building, advocacy and data access components. In addition, several advocacy and capacity building initiatives have been rolled out for all Venezuelan outflow countries (a guide to adapt the curriculum in emergency situations, a right to education in times of crisis course, teacher training course and the core skills training for education cluster coordination). LACRO also facilitated the core skills coordination and education in emergencies (EiE) onsite training in Quito, Ecuador (November 2022). Core Skills Training 2, adapted to the LAC region, was organized by the Regional Office, Ecuador Country, with the support of the Global Education Cluster, the Regional Education Group for Latin America and the Caribbean, Save the Children and the Office for the Coordination of Humanitarian Affairs (OCHA). The course was very well received and was attended by members of the humanitarian coordination mechanisms of the education sector: UNICEF, Save the Children, UNESCO and MoE, among others (15 different countries and territories of the region). Participants had the opportunity to exchange experiences, strengthen their knowledge and understand the need for harmonized coordination among key stakeholders in the education sector.

A regional advocacy strategy narrative on nutrition in emergencies was developed, including generating evidence on the cost of inaction on nutrition in emergencies (to be launched in 2023). LACRO coordinated the R4V nutrition sector and developed a webinar series to improve capacities of nutrition partners responding to the Venezuelan migrant crisis, to promote, protect and support feeding practices of children under 2 which reached 350 professionals including those in Colombia. LACRO's technical support to Country Offices, including the Dominican Republic and Peru, on simplified approaches for child wasting was critical, especially in countries where children on the move are at higher risk.

During 2022, LACRO provided dedicated operational and technical support to WASH national coordination platforms for the development of plans and needs analysis, review of planned partners project submissions and key PIN figures for national and regional chapters of RMNA and RMRP 2023–2024. An in-person WASH in Emergency training with a migration chapter was held in November 2022, allowing UNICEF COs staff to improve their understanding and capacities on emergencies. Additionally, a specific WASH in Migration online training for UNICEF WASH in LAC staff developed in 2022 with the objective of increasing technical capacities and granting access to key tools for the response, is going to be held in March 2023.

The Regional Office also supported COs in the implementation of cash-transfers, including in response to migration flows and compounding crisis. In Ecuador, LACRO supported CO in the revision and continuity of its integral support to migrant and

refugee children, through multipurpose cash, case management and supported access to services. In terms of capacity building, LACRO organized a five-day regional training course on humanitarian cash transfers for UNICEF programme and operations staff and sponsored CALP's training for NGOs and government staff in Guatemala, facilitating an innovative module on linkages to social protection systems. UNICEF published a Technical Note analysing digital innovations in social protection during the COVID-19 response and its implications to more responsive and inclusive systems with partner International Policy Centre for Inclusive Growth.

Regional support included strengthening IPs capacity to integrate AAP in programming, providing technical support for the implementation of CFM. Besides dedicated training, a guide and toolkit were developed.

The Regional Office also developed a package for Rapid Need Assessment, including a multi-cluster/sector digital instrument based on the MIRA principles, CCCs indicators and benchmarks, that can be used in sudden onset emergencies, focused on data collection and analysis during the first 72 hours. The package includes the following: (1) specific sectoral questions in a digital form; (2) a monitoring framework to be used in the different stages of a humanitarian crisis; (3) a methodological guide that explains how the form should be used and applied for each sector; and (4) a dashboard fed in real time by the data collected with the digital form. This toolkit aims to support countries in identifying key issues for each of the sectors, thus enabling them to develop and apply more accurate sectoral need assessments. UNICEF has also developed a training package for its staff and partners focused on data collection, analysis, transformation and visualization. This includes a set of presentations in technologies such as Kobo toolbox, Excel, PowerBI, QGIS and ProcessMaker. Each of the presentations will be accompanied by an explanatory video which is currently being prepared by UNICEF.

LACRO supported the strategic production and dissemination of multimedia assets of UNICEF's response to migration of children in several countries and thematic areas such as integration of children in Roraima (Brazil), [psychosocial support through child friendly spaces in Colchane](#) (Chile) and others, ensuring visibility to donors. The regional communication team has also provided support in donor field visits amplifying the reach of their missions. The regional team has also contributed to the visibility of partners by sharing in regional social media accounts the content generated at CO level and has supported the elaboration and dissemination of regional press releases focusing on the situation, needs and UNICEF response to children on the move.

2.11 Other countries

In addition to UNICEF's response targeting children on the move, including Venezuelans and communities affected by COVID-19 in Bolivia, Brazil, Chile, Colombia, Dominican Republic, Ecuador, Guyana, Peru, Trinidad and Tobago, and Uruguay, actions benefitting communities affected by COVID-19 were also implemented in Argentina and Paraguay.

As part of a multi-country humanitarian response project funded by ECHO, UNICEF provided urgent humanitarian assistance to indigenous communities and other vulnerable populations at high risk of COVID-19 through an integrated and adapted approach focused on Health and WASH in Argentina, Bolivia, Brazil, Colombia, Ecuador, Paraguay and Peru.

In [Argentina](#), the action enabled the rehabilitation of WASH facilities in 209 rural schools in indigenous areas of the Gran Chaco and the promotion of hygiene practices related to hand hygiene, safe water management and COVID-19 prevention for 17,788 students, teachers and members of the educational communities. The project linked targeted schools and educational communities with local networks of civil society actors working on topics related to access to water for indigenous communities and governmental actors, to ensure continuous support and sustainability of the action. 100 per cent of the 209 schools involved participated in handwashing workshops aimed at community referents (indigenous and community leaders, parents, etc) and students. Educational workshops engaged school teachers from the 209 schools on the provision of curricular activities on good water handling practices, handwashing and COVID-19 precautionary measures. Each school received hygiene kits and educational materials: a water manual, educational booklets and "Cajas de Aguas" containing a set of educational materials on hygiene and safe water management.

In [Paraguay](#), the project's intervention in the prioritized territories of the Chaco reached 112,658 beneficiaries, with an area-based approach and the involvement of different levels of government and community-based organizations, fostering inclusive leadership among women and men. UNICEF worked with implementing partners with operational capacity in the Chaco to speed up the humanitarian response in the intervention area. Local consultants were employed on several strategic lines of action: capacity building of health staff, community agents and indigenous health promoters, community empowerment, water and sanitation improvements in community centres and the distribution of critical inputs to health facilities and communities.

To strengthen health facilities for the timely care of COVID-19 and continuity of maternal and child health services, equipment was purchased for the care of pregnant women and new-borns and complementary training was carried out. In the framework

of improving access to water, sanitation and promotion of handwashing in priority health establishments and indigenous communities, water and sanitation improvements were made in 18 health services through the installation of sanitary devices in bathrooms, latrines, reconditioning of cisterns and gutters, sewage drainage systems, and installation of fixed and portable sinks. To improve access to water in communities, solar panels were installed to ensure continuity and strengthen climate resilience of water distribution networks in indigenous communities. Likewise, rainwater harvesting systems were rehabilitated through the repair of community cisterns, installation of a water supply systems and rehabilitation of pipes and gutters. Solar pumping systems and water purification plants were installed. To promote handwashing and correct infection prevention and control (IPC) measures, hygiene kits, soap, alcohol, disinfectants, sanitary supplies, water purification tablets, buckets and oral hygiene kits were distributed in communities and to health facilities. Menstrual hygiene kits for adolescents and women were also delivered and complemented with awareness sessions. Capacity building with an intercultural approach was implemented with health professionals, community agents and indigenous health promoters to support the prevention and control of infection by COVID-19 improving the response capacity of health services and primary care for families served by the Family Health Units and priority hospitals.

2.12 Innovations and lessons learned

Bolivia

Participation and feedback from beneficiaries is still limited. UNICEF established a mechanism to interact with adolescents and young people, migrants and refugees from Venezuela. The U-Report Unifying Voices initiative provides reliable, accurate and illustrative information. Through online consultations, UNICEF and other actors received feedback from youth and adolescents that is used to improve the response interventions.

Integration and social cohesion between migrant and refugee children and their Bolivian peers are limited by xenophobia and discrimination. UNICEF carried out a KAP study about discrimination and xenophobia with host communities in two cities and two border [towns](#). The results are the primary input for developing the xenophobia prevention strategy that is being carried out in a participatory manner with the population.

In Bolivia, the migratory flow is not yet considered a humanitarian crisis. With other United Nations agencies (UNHCR, IOM), UNICEF increased the situation's visibility with national and subnational authorities. A coordination platform called Solidarity Networks was established between the United Nations and governmental institutions. In 2022, UNICEF promoted inter-agency coordination for humanitarian response to human mobility, with other United Nations agencies (IOM, United Nations Population Fund – UNFPA, UNHCR), allowing more effective and efficient interventions by maximizing funding. The migration crisis made it clear that many institutions providing social services to children were not fully prepared. UNICEF prioritized actions to improve the environment and institutional framework for migrant children and their families to exercise their rights.

Brazil

In 2022, UNICEF focused part of its resources to children and adolescents living in spontaneous settlements, precarious rented houses or in street situations. In Roraima State, a vulnerability assessment was carried out in partnership with Boa Vista Health Secretariat which showed that around 45 per cent of health services were dedicated to refugee and migrant population.

In addition, nutritional services for migrant populations living out of official shelters were promoted. The priority was to strengthen the family health strategy of the municipalities to link migrants to local health services. This strategy has allowed a process of transition from emergency actions to working with local health services strengthening the humanitarian-development nexus.

In alignment with the UNICEF-UNHCR global strategic collaboration framework, the WASH strategy prioritized engagement with local authorities to address the needs of migrants and refugees living outside shelters. The agreement reached between CAER (state water provider) and DPE (state public defender) to connect informal settlements to the public water network is a successful initiative that enable the transition from water trucks depending on humanitarian funds to a sustainable safe water access.

The use of a case management information system, such as PRIMERO, requires constant training with implementing partners and UNICEF has elaborated specific guides to assist in this effort. Innovatively, UNICEF integrated a mandatory field about the school situation of migrant and refugee students aligned with the School Active Search. Out of 3,075 cases registered from January to November, 2,610 were not attending school (representing 84 per cent of the cases). To address this need, the Súper Panas strategy (<https://www.unicef.org/brazil/super-panas-na-radio>) was implemented in 6 public schools in Boa Vista, assisting teachers, offering tutoring services and support in Portuguese classes for Venezuelan students. This outreach approach allows for a better connection of formal education and migrants students. It is now expanded to other schools supporting the Education Secretariat of Boa Vista.

Chile

During 2022, valuable lessons were obtained in collaborative work and emergency dynamics. The migratory reality in Chile is diverse and is subject to social and environmental contexts including periods with massive flows of people entering Chile through unauthorized passages, generating collapses in the reception spaces, or moments when the flow was minimal and diverse. UNICEF became aware of challenges to carry out interventions and prepared itself together with the rest of the actors to better respond to the crisis, generating contingency plans and friendly spaces (CAT – transitory shelter centres) for the protection of children and adolescents. UNICEF should also improve its existing feedback mechanisms. Although there are complaint collection systems, these must be strengthened to fully collect all the observations of the attendees, helping to improve UNICEF evidence-based programming.

Colombia

During the government-led enrolment process of migrant families into SISBEN, UNICEF identified the need to engage with potential beneficiaries using an active search, one-to-one community-based approach in partnership with the National Planning Department, considering that all potential beneficiaries are required to initiate the process. This need became evident through local level interventions where it was clear that those who needed to enrol had no specific information or comprehension about the process or the social protection programmes. The UNICEF initiative used an SBC approach to reduce rumours, demand services and foster trust among beneficiaries. UNICEF supported the enrolment process in Arauca, Barranquilla, Cucuta and Riohacha integrating active search with community-based information for behavioural change to address rumours and misinformation. This accelerated the enrolment process and expanded the number of migrants who can now access social protection benefits. Overall, the strategy reached over 214,000 people through community-based media, over 16,300 people through information-sharing interactions and 293 people who participated in the local content development.

In 2022, UNICEF's role in ensuring a child focus in emergency preparedness and response became an utmost critical need when the affected population showed overlaps between those affected by natural disasters (floods), conflict-related forced displacement, and migration not only from Venezuela into Colombia but also from about 45 countries towards Central and North America, through the Darien gap. Although the UNICEF response was evidence-based through Multi-cluster Initial Rapid Assessment exercises, the overlap between the multiple emergencies demands a more proactive forecasting and a real-time system that incorporates differentiated approaches to cater the needs of children, migrants from different nationalities, people from ethnic minorities and people with disabilities considering that the more traditional information and data collection systems are quickly outrun in such dynamic and fluid settings.

Dominican Republic

Lessons learned during the year 2022 are summarized as follows:

Important challenges on coordination and leadership of national entities persist. UNICEF must continue strengthening the sectoral coordination platforms, strengthening capacities of local NGOs and humanitarian partners, and collaborating with the Emergency Operations Centre, helping them to lead the response to emergencies of a similar or greater magnitude, considering the needs of children and adolescents.

In the case of recent emergencies, in most cases state interventions excluded undocumented Dominicans, those stripped of a nationality or migrant communities, being these the most vulnerable in the current context. At the same time, the Social Protection System is capable of vertical and horizontal expansion of its cash transfer programme in case of emergency, although it is necessary to increase the budget allocated to ensure availability for the expansion.

The AAP system has also to be strengthened to allow for a more adequate and efficient response, based on the beneficiary population real needs. Planning efforts should also be strengthened to ensure a stronger humanitarian-development nexus as existing weaknesses in development interventions (i.e., access to documentation) increases vulnerabilities for those already behind.

An innovation example in the Dominican Republic has been the approach of the Ministry of Economy, Planning and Development (MEPyD), as the main governmental counterpart, to initiate a methodological transfer of the Socio-economic Impact Assessment (SEIA) survey, as a key tool to generate timely information in times of crisis, mainly because it allows a quick collection of specific variables, with a flexible methodology, and with deep territorial representativeness and adaptable questionnaires. Another innovation was the strengthening of local Venezuelan organizations, especially the inclusion of community promoters trained in children's rights, case management and referral, which was vital to achieve the results.

Ecuador

In the wake of the social movement that took place in Ecuador in June 2022, the vulnerability of children and adolescents was exacerbated as interlocked with humanitarian challenges fuelled by the pandemic crisis and its socio-economic impact.

Consequently, this event motivated UNICEF Ecuador to launch the #ChildrenFirst initiative to unite the society and promote children's right, which aimed at contributing to make the country more equitable, prosperous, and peaceful by encouraging society to take concrete actions in favour of children, as a priority for the country. To enhance the advocacy for #ChildrenFirst, UNICEF strived for constructive dialogues with 100 actors from CSOs, the private sector, women's rights organizations, the diplomatic corps, the media and female adolescents' leaders by disseminating campaigns through mass media, out of home advertisement, jingles produced with local singers, a press conference and a video about children in vulnerable situations in Ecuador. In parallel with this innovation, UNICEF with the private sector promoted the adoption of family-friendly policies; with the academy society to research children's issues; with civil society to monitor the situation of children; and with political actors, national and local authorities to improve quality and increase the investment in children. A lesson learned is that it is critical to strengthen the role of the government in the implementation of robust public policies that could improve the lives of children and mobilize all the actors within the society to act in favour of children.

Guyana

UNICEF continued its work at community level, particularly in the areas of access to birth registration services and to strengthen the prevention and reporting of child sexual abuse, particularly for migrants and host communities in key areas of Guyana's interior regions. Through this direct engagement with the community and local government structures, more than 1,000 children (at least 50 per cent girls) were able to access services relating to the reporting and treatment of child sexual abuse and about 5,000 people benefited, including more than 1,000 children, from access to birth registration services.

In the area of WASH, UNICEF has prepositioned supplies with Guyana's Civil Defence Commission to support local authorities to increase the accessibility and availability of safe water in areas where people are in need, including migrants. Through this prepositioning, supplies are readily available when needed. Through collaboration with UNICEF and other agencies, the Civil Defence Commission is now able to support vulnerable people with a holistic package, inclusive of WASH supplies.

On ECD, a cadre of 49 ECD implementers – CHWs and Community Service Officers – were trained, coached and mentored in the practices of ECD and are actively engaging 1,368 children in hinterland communities and in the ECD spaces which were created to provide opportunities for early learning and play therapy. A total of 1,039 parents, health professionals and community stakeholders in regions 1 and 9 have benefited from capacity strengthening programmes in ECD Nurturing care and parenting programmes and have displayed abilities to integrate ECD strategies into their daily routine. In addition, ECD spaces were created at the Health Care Facilities in the 22 communities and ECD stimulation materials have been distributed to all active selected ECD locations.

UNICEF provided support to the MoH Adolescent Unit to expand the Schools Health Programme (specifically the Schools Health Clubs) to dormitory and primary schools in the hinterland, especially in areas where migrant adolescents are located. This programme allows adolescents and young people to actively engage in positive development and healthy lifestyle choices through participation and empowerment. Prior to the expansion of the Schools Health Programme, 405 students and 46 teachers from 16 schools were oriented to the Schools Health Programme. A total of 70 teachers and health providers were also trained to implement the Schools' Health Clubs and the training resulted in the establishment of 16 Schools Health Clubs in both primary and secondary schools. 120 hygiene kits and sports equipment were provided to children who live in the dormitory.

Peru

In 2022, UNICEF response focused on addressing the urgent needs of the migrant population in transit. However, to increase the scope and impact of the interventions, a community approach to care for the settled migrant population and the host population was incorporated. This included partnerships with Venezuelan community leaders in the areas of health, nutrition and education. Community care centres were also activated to provide psychosocial workshops for adolescents and treatment with Plumpy Nut for malnourished children. A strategy called the Comprehensive Services Fair has been developed to respond quickly to the most urgent needs of the population, especially migrants. These are places where they receive guidance on available humanitarian assistance and how to access public services and social protection programmes, and information on employment opportunities. The importance of creating synergies between WASH, gender and SBC interventions was emphasized in order to create spaces for participation and encourage sustainable behaviour change (e.g., in the elimination of open defecation and other hygiene practices).

Involving the migrant and refugee population not only as beneficiaries but also as active participants in the implementation of activities is important to achieve ownership and represents a key lesson learned. To build trust among the beneficiary population, the participation of migrants as community leaders was crucial. It is also important to use spaces with comprehensive interventions that address most of the migrants' problems. For example, the WASH point, which is also used as an education, protection, and health intervention space. In education interventions, it is important to work with many actors in the community to achieve the planned goals: school principals, because their commitment is critical to ensure results; teachers and other school staff, who work directly with children and are very important in addressing discrimination and xenophobia; parents and

caregivers, who received messages and direct attention to support their children; and finally, children themselves, because student participation was critical to ensure an inclusive environment in schools.

Trinidad and Tobago

In Trinidad and Tobago, the legal, administrative, financial and language barriers faced by refugee and migrant children have been the main driver for scaling-up accredited online education via DAWERE. To address these barriers, UNICEF led a multi-stakeholder strategy involving AMMR and LWC to identify 222 out-of-school children in need of support, to bridge educational gaps and support the transition to accredited online education.

A total of 237 students (138 girls and 99 boys) are registered in the DAWERE platform that provides self-paced accredited high school combined with tutoring, digital and transferrable skills and volunteering opportunities that enable adolescents to develop community projects. A satisfaction survey among students revealed that 81 per cent considered their learning experience as good or excellent. Students valued their tutoring experience as highly good or excellent (80 per cent) along with learning through videos introducing content (52 per cent). Some 54 per cent of the students indicated they are more invested in online learning and are enthusiastic about how it will help shaping their future.

To address the financial barriers linked to food inflation compounded with energy prices, and the deterioration of the national socio-economic situation, UNICEF and the Trinidad and Tobago Red Cross Society are implementing Programme TEEN (Transferencias en Efectivo para la Educación de los Niños/as). This programme is supporting educational permanence and mitigating the emergence of adolescent labour. Around 150 households are benefiting from this integrated approach to programming that contributes to towards educational expenses like connectivity, transportation and other educational commodities.

Uruguay

UNICEF's various interventions highlighted the fragility of the state response to the arrival of migrants in vulnerable situations. On both the Rivera and Chuy borders, state responses were mostly focused on temporary needs created by the COVID-19 pandemic. Families with children and adolescents in extremely vulnerable situations continued to enter through the northern border but most of them later moved to Montevideo, the only major city in the country and the main labour market.

Another lesson learned in recent years is that in Uruguay the impact of migration on children and adolescents is often an invisible reality. The rush of migrating families to meet their urgent needs, resolving food, housing, work and documentation issues often leads to 'children's problems' getting placed on the back burner; 'children's or adolescent concerns' become neglected and invisible among the humanitarian assistance the families receive.

2.13 Grand Bargain commitments

In line with Grand Bargain commitments to donors, UNICEF invests efforts to mainstream humanitarian cash-based transfers; community engagement, two-way communications and/or feedback and complaint mechanisms; localization and working with first responders; and strengthening the humanitarian-development nexus programming. This section describes some of the efforts of COs to contribute to these commitments throughout 2022.

Bolivia

UNICEF strengthened its intervention by including the humanitarian-development nexus programming. In child protection, the capacities of the protection system at the municipal level were improved to manage cases of human mobility. UNICEF contributed to the protocol to care for separated and unaccompanied children, focused on migration institutions and child protection services. In addition, 269 public workers from the child protection system were sensitized and informed on the care and protection of migrant children and adolescents.

UNICEF, in coordination with IOM and UNHCR, consolidated the two-way communication mechanism called U-Report Uniendo Voces (Unifying Voices). In 2022, an online survey was conducted on the perceptions of migrant youth and adolescents on education. 123 youth and adolescents participated in the survey (67 per cent female). Seventy per cent of them dropped out of education for more than one year, and almost half of the young and adolescent migrants want to continue studying. Almost 68 per cent of the respondents indicated that the biggest problem is the cost of education.

In addition, the staff offering humanitarian assistance at the Pisiga (Chilean border) assistance and orientation centre encourages beneficiaries to complete a satisfaction survey on the services offered. This feedback allowed UNICEF and IOM to adjust their intervention.

Brazil

Through cash assistance, UNICEF ensured more sustainable family reunification during the pandemic, protecting unaccompanied and separated children in extremely vulnerable situations. The cash-based intervention (CBI) initiative proved itself more than just a transfer modality, with specialized child protection teams and psychosocial support for the families being an efficient means to guarantee the monitoring of families and their insertion in the child protection local system. The monitoring teams became a reference point for the community, the public services and the families in different regions of Brazil and enabled an improved assessment of the families who were being reallocated in the country by the “Interiorization”^{iv} process. As a result, the capacities of local systems were strengthened and the risks for institutionalization were minimized. The possibility of assuring income also made the project an entry way for the most excluded migrant and refugee families who were not being contemplated by the official mechanisms of the Operação Acolhida (Operation Welcome), especially to those who were living outside of shelters.

Two rounds of AAP consultations received feedback and complaints from 3,747 people. Through the Young Communicators Network – a group of 178 Venezuelan and Brazilian adolescents fighting xenophobia and promoting social cohesion – 4,019 refugees and migrants in Roraima were directly reached with life-saving information through interpersonal communication. The network organized the Exploring a new home photo exhibit, displayed in the largest shopping mall of Boa Vista (seen by 3,000 people), reaching 1.1 million people on social media and 164,527 in media coverage.

UNICEF provided support to mental health for children and caregivers of indigenous communities through capacity building of AIS. However, the consultation with indigenous organizations recommended to expand the training to other categories of health professionals in the communities so that people in need could consult and be referred to care services by multiple channels. A total of 123 relevant health professionals were trained and participated in the collective sessions on mental-health well-being and co-elaboration of care flows and action plan: 63 nurses and health technicians, 37 indigenous health agents, 12 psychologists, 2 social assistants, 1 nutritionist, 1 medical doctor and 7 odontologists. In average, it is estimated that each professional may attend or refer 75 people in need, making a total of 9,225 persons reached.

UNICEF was the backbone of the National Resolution for the protection of unaccompanied and separated children in the National Council of Children’s Rights. Because of UNICEF’s contribution, the resolution also encompasses the protection of undocumented children and adolescents throughout the national territory.

Chile

UNICEF has implemented a wide range of actions in different sectors including child protection, social protection, education, health and nutrition, WASH and cross-sectoral interventions. The implementation has been carried out in partnership with specialized organizations in each of these sectors.

At the beginning of 2022, UNICEF collaborated with IOM, UNHCR, the Undersecretariat for Children to implement Hogar de Cristo, a child protection project. UNICEF became a pivotal actor in the first reception in two territories – Colchane, the migration gateway in the Tarapacá region, and Iquique – to respond to hundreds of migrants who had entered the city. UNICEF’s response grew in magnitude and incorporated another implementing partner, Fútbol Más, which delivered the programmatic offer for the children and adolescents present in CAT, reinforcing their psychosocial development through practicing sports.

Another implementing partner was identified, Servicio Jesuita Migrante, to manage individual cases and provide legal advice from experts which has strengthened the protection sector response. In the second semester, UNICEF partnered with World Vision expanding the programmatic offer and services in education, WASH, health and nutrition. This multi-sectoral response emerged to benefit more than 13 thousand people throughout the year.

Colombia

As the government began the registration of the migrant population covered by the temporary protection statute into the national social protection system, UNICEF identified the need to ensure that families with children would be enrolled to protect them from shocks, foster resilience and provide enhanced opportunities for these families to break with the cycle of poverty. This was a significant opportunity to transition from the humanitarian cash transfers schemes set up mostly by international cooperation actors as part of an immediate response, towards a long-term scalable solution into the national social protection system.

Also, in response to the request for support from the Department for Social Prosperity (Departamento para la Prosperidad Social), UNICEF developed an analysis of bottlenecks and access barriers for migrant families to the Social Protection System.

Priority was given to the monetary transfers that the government offers to highly vulnerable populations, and the expansion capacity of these programmes to integrate regularized families. This is based on the interest in transforming and expanding the Solidarity Income programme, which was created in mid-2020 in response to the COVID-19 crisis.

Dominican Republic

As part of the response to the Venezuelan migrant population during 2022, two consultations were carried out with the beneficiary population to gather information on safety and satisfaction at the time of receiving assistance. As a result of these consultations, participation and complaints mechanisms were strengthened. In addition, a diagnosis was made on the psychosocial needs of the Venezuelan migrant population which served to redirect actions, promote and maintain specialized assistance in mental and emotional health, and strengthen partner and local organizations in the approach, referral and care of the caregiver. Different mechanisms for participation and accountability have been established through accompanying visits, WhatsApp groups with local Venezuelan organizations and monitoring the interaction of digital communication campaigns.

To improve the effectiveness and efficiency of humanitarian aid in the Dominican Republic, during Hurricane Fiona, UNICEF collaborated with the Emergency Operation Centre to develop the needs assessment and risk analysis, the Needs Assessment at the household level carried out by the Social Protection System and joined the interagency Needs Assessments focused on the identified information gaps. With this actions UNICEF contributed to generate the necessary impartial information allowing response planning tailored to the needs of the population.

During and after the response, some interviews and focus groups took place to increase the participation of population and receive feedback from AAP by the hurricane. Although this was an initial exercise, the CO confirmed the effectiveness of these consultations and the need to strengthen capacities to achieve results. During the preparation of this report, UNICEF disaster response is designing an AAP action plan for emergencies.

Ecuador

UNICEF has worked closely with UNHCR and the World Food Programme (WFP) under the United Nations Common Cash Statement to implement a humanitarian cash-based transfers assistance programme for households with vulnerable children and adolescents on the move. As a result, in 2022, the cash-based transfer programme contributed to building the resilience of 1,400 families and 5,500 people of whom 60 per cent were children and adolescents. At the national level through the multi-purpose cash transfer, UNICEF supported 206,000 new direct assistance to refugees and migrants in 84 cantons, focusing on monetary support for temporary accommodation, food assistance, medicines, documentation process, access to health and WASH.

In response to the migration and refugee crisis, UNICEF, as a working subgroup on child protection, continued to support the Interagency Coordination Platform for Refugees and Migrants from Venezuela, led by UNHCR and IOM. Within the R4V platform, UNICEF coordinated with local governments and CSOs to implement the support spaces in Esmeraldas, Manta and Tulcán. As a result, 48,000 people, including children (65 per cent), parents, caregivers and public officials benefited from the programme aimed at assisting children on the move and host communities with a focus on integration. UNICEF has also provided legal assistance (protection and migratory regularization) to 11,000 people and psychosocial attention to 20,000, focusing on 3,000 children with special protection needs (including unaccompanied and separated children).

Aiming at enhancing feedback mechanisms, in partnership with MoE and the Human Rights Secretariat on violence and diversity, UNICEF implemented the surveys of U-Report and Uniendo Voces reaching 44,954 people, including 6,751 children and the youth on the move, (15–29 years (84 per cent) and women (60 per cent)). To enhance community engagement in violence prevention against children, UNICEF operated two ways of communication at the community level in Manabí and Esmeraldas: (1) prevention of GBV within a framework of new masculinities, and (2) provision of psychosocial support and lifesaving skills of adolescents. As a key component of the interventions in youth violence prevention and attention, UNICEF worked with the government to strengthen its attention services and create prevention mechanisms at the community level. UNICEF also implemented the community epidemiological surveillance strategy helping 4,300 families of vulnerable communities in Guayas, Imbabura and Pichincha benefit from the programme to prevent and control COVID-19 and other diseases, and access maternal and new-born health services. Along with these efforts, UNICEF contributed to giving 900 migrant and refugees, including 400 children and adolescents, access to health care and nutrition services. An important achievement of this intervention is that MoH has adopted this intervention and its methodology as its own and has scaled up the coverage of the intervention. It has now a dedicated budget and staff.

Guyana

In Guyana, through a partnership with the University of Guyana and the Guyana Professional Social Workers Association, there is a consensus on the need to support the training needs of social workers, and paraprofessional social workers given their limited capacity, especially in the interior courses. The first set of training is targeting faith-based leaders given their presence in

almost every community so that they have a basic understanding of services and reporting mechanisms including child sexual abuse. UNICEF continues to support and work with the National Multisectoral Coordination Committee for Migrants from Venezuela.

Peru

Strategies and activities were developed to improve nine priority primary health care centres in terms of materials and supplies, improvement of basic health, water and sanitation infrastructure, and capacity building and training of staff. This strategy helped improve the health system to meet the needs of the host population, as well as responding to migration.

In the area of education, in addition to addressing the needs of specific migrant communities, UNICEF provides technical assistance to national and local education authorities (MoE, Regional Directorates of Education and Local Education Units) to improve education policies in the interest of migrant and host community children. UNICEF has been instrumental in improving MoE's 2022 Student-Well-being Strategy, as well as a policy to ensure that students who have dropped out of school are able to return (school retention).

At national level, UNICEF implemented a massive campaign to regularize the migration status of Venezuelan children and their families in coordination with the National Migration Authority. As a result, a total of 4,828 children and 761 adult members of their families started the process, 1,650 children and 238 parents and caregivers regularized their status, 16,759 families received legal orientation on regularization and 670 vulnerable children and their family members received special protection visas. The campaign also reached a total of 524,955 people with information on regularization. In Tumbes (on the border with Ecuador), a total of 3,851 children received psychosocial care in 3 UNICEF-supported child-friendly spaces during the year 2022, and 490 unaccompanied children and adolescents were identified by child protection services and received regular communication until they reached their destination.

The Comprehensive Services Fair strategy, which is a bridge between humanitarian assistance and more permanent integration of the population into social services, was developed to provide services in different geographical spaces, mostly at weekends. Information on the population attending these fairs revealed that although they were designed for the immigrant population, almost half of the attending population were local.

Trinidad and Tobago

In 2022, UNICEF and LWC conducted a survey to assess the educational needs of migrant and refugee children. The results highlight that 36 per cent of parents face financial barriers that will prevent them from sending their children to face-to-face learning activities. Transportation and other out of pocket expenses challenge the aspiration of regular attendance to a learning space. Focus group discussions with adolescents also highlighted the need to have cash support to enable educational permanence and better academic results. With this input from the population of concern, the involvement of local stakeholders and the Cash Working Group, UNICEF designed an education + cash initiative called Programme TEEN.

There are four mechanisms in place to get feedback from the population of concern related to the education + cash integrated approach. Adolescents have participated in two rounds (of four planned) of a student feedback survey. The survey covers areas related to the registration process, the academic process in the platform, pedagogical tools and methodologies they prefer, etc. Students revealed that 71.2 per cent considered the enrolment process to DAWARE was good or excellent.

Households benefiting from Programme TEEN (humanitarian education + cash) have a Grievance Redress Mechanism, a payment verification survey based on Rapid Pro, and a third-party monitoring mechanism in partnership with Caribbean Evaluators International. The population of concern have provided feedback on how the cash was supportive of the educational goals of their children as it enabled connectivity, purchase of prescription glasses and transportation to the learning spaces.

Uruguay

IOM and UNICEF have launched a service for migrant children and adolescents that seeks to provide them with support and social and educational services during the migration process and which aims to generate knowledge on the best ways to support the psycho-emotional development of migrant children and adolescents. The project was launched in December together with Montevideo's Municipality B, and is scheduled to run for 11 months, providing support to 100 children and their families. Project implementation will also form an input for advocacy work on specific public policies for this population.

2.14 Cluster/sector leadership

Bolivia

UNICEF consolidated itself as an important partner of the national R4V platform. It co-leads the sub-cluster of basic needs (WASH, nutrition, food security, shelter, humanitarian transport and health), and it is an essential partner in the Solidarity

Networks platform established by the Ministry of Foreign Affairs and the Office of the Resident Coordinator. In this space, UNICEF is a referent for children's issues in human mobility and also promotes coordinating humanitarian response activities with other actors and agencies. With IOM and UNFPA, UNICEF maintains a multisectoral service for migrants at the border with Chile. Together with IOM, the second DTM round was launched throughout the country.

Brazil

Dedicated personnel allowed for leadership on R4V's WASH, Nutrition, and Education sectors, as well as co-leadership on Child Protection sub-sector and the Communicating with Communities working group. Sector response plans and strategies were elaborated with the government, while the Inter-sectoral Multi-partner Rapid Needs Assessment with a focus on Children (ISNAC) has been conducted counting on Community Mobilization with Adolescent Participation Strategy (CMAPS) community mobilizers, contributing to 2023–2024 R4V planning. Partnerships with CSOs were also essential to strengthening community engagement.

Chile

As part of the Working Group on Refugees and Migrants (GTRM in Spanish), UNICEF and the Regional Secretariat for Social Development lead the Child Protection Subgroup which works to strengthen the response capacities of local authorities and civil society on the rights and protection needs of children on the move. In 2022, UNICEF provided technical guidance to the Ministry of the Interior to incorporate a child-centred approach in humanitarian mechanisms in the northern region (at the border with Peru and Bolivia). This initiative led to the establishment of specialized rooms for family court hearings and an improvement in the protective perspective in shelter attention flow. UNICEF also monitors the situation of children in the state's first reception facilities in Tarapacá and reports the challenges of its implementation to the government.

Colombia

UNICEF and its implementing partners constantly articulate their actions at the territorial level with humanitarian organizations such as the Colombian Red Cross, Norwegian Refugee Council, Action Against Hunger, Doctors of the World, Médecins Sans Frontières, International Committee of the Red Cross or the Geneva Call, as well as with United Nations agencies, OCHA, UNHCR, WFP and members of the Local Coordination Teams (LCT). UNICEF is part of LCT and the Interagency Group on Mixed Migration Flows (GIFMM in Spanish), the National Migrant Children Panel, the child protection subgroup, the EiE Cluster (and its mirror coordination mechanisms in the territories), where it constantly follows the humanitarian situation, and shows and positions the child protection agenda in contexts of humanitarian crisis while at the same time accompanying efforts for interagency coordination to improve response in the territories. In the territories referred to, UNICEF leads or co-leads various sectoral spaces for humanitarian coordination. With the support of iMMAP, some information management initiatives of the humanitarian coordination mechanisms (GIFMM and Grupo Intercluster) have been accompanied, strengthening the clusters led by UNICEF (WASH, education and childhood protection). Likewise, UNICEF provided support to both platforms with the collection and analysis of information on children for needs assessments and multisectoral analysis of inputs for the construction of the Humanitarian Needs Overview and the R4V RMNA, fundamental documents for the construction of the Humanitarian Response Plan (HRP) and RMRP.

Dominican Republic

UNICEF maintains close coordination and collaboration with both IOM and UNHCR through interagency activities implemented both during emergencies and in development programmes. UNICEF takes part in the R4V activities and leads the Child Protection sector. At the local level, UNICEF maintains collaboration with several government institutions. Activities are implemented in collaboration with MoE, Instituto Nacional de Atención Integral a la Primera Infancia, the Ministry of Women, CONANI and the Public Ministry.

Ecuador

UNICEF worked with several ministries such as the Ministry of Economic and Social Inclusion, the Ministry of the Interior and the Ministry of Foreign Relations, as well as local governments and CSOs with the aim of ensuring that public policies and care services include children in human mobility. In addition, UNICEF developed partnerships with HIAS, Cooperazione Internazionale, the Daniel Children's Fund and international cooperation organizations to provide comprehensive responses at the local level. Finally, sectoral coordination groups from the GTR, with strong support from UNICEF, continue to respond to the ongoing migration crisis.

Guyana

The United Nations Resident Coordinator requested other United Nations agencies to work with UNICEF leveraging its multisectoral capacities, presence and convening role with several key ministries on the approach to migrants in the country.

The National Multi-Agency Coordinating Committee on Migrants from Venezuela is led by the Ministry of Foreign Affairs and the Ministry of Governance and Parliamentary Affairs. UNICEF is a key member in the multi-agency coordinating committee to address the needs of migrant children from Venezuela and host communities. The government has maintained an open-door policy to all migrants coming from Venezuela and continues to lead in the coordination efforts through a Multi-Agency Task Force led by the Ministry of Foreign Affairs/Ministry of Parliamentary Affairs and Governance. UNICEF's role in emergency response, including flood emergency, has plugged gaps in the partners' (government) coordination mechanisms and has proven integral in the joint United Nations response by ensuring effective and timely actions for the impacted population. There is a continuing need for technical – including capacity building – and financial support to ensure the equitable provision of WASH services in the most vulnerable communities, including where migrants have settled.

Peru

UNICEF actively participates in the IOM-UNHCR-led Refugee and Migrant Working Group, co-leading the education subgroup and the child protection and nutrition subgroups, at the national level, and the child protection and WASH sub-subgroups in Tumbes (on the border with Ecuador). UNICEF has provided input and assistance in gathering information for the upcoming 2023–2024 RMRP. UNICEF co-leads the MoE-spearheaded Peru chapter of the Global Coalition for Education, which aims to channel support and leverage funds to implement the MoE's COVID-19 response strategy, and where UNICEF acts as an advocate for Venezuelan children as a vulnerable group. UNICEF also participates in the ECW initiative which includes promotion of migrant children and adolescents' integration in the school system. UNICEF keeps close coordination with, and provides technical assistance to government agencies, local and regional governments and services, United Nations agencies and other NGOs/grassroots organizations.

Trinidad and Tobago

The newly established Cash Working Group was used as sounding board for designing cash interventions and to add value on issues related to the financial inclusion of the population of concern. UNICEF is currently leading efforts with the Ministry of Social Transformation on evidence generation on the minimum expenditure basket to sharpen decisions about transfer values, and the potential complementarity of designing HCT interventions. The role of the ministry is key in bridging the humanitarian-development nexus as the evidence highlights areas in which costs differ for the local and the refugee and migrant population.

Under UNICEF's leadership, the Child Protection Working Group worked collaboratively to address bottlenecks to birth registration, prevent detention of children, and support best interest determination for resettlement. Under the Alternative Care Sub-Working Group there is progress towards the design of HCT for foster families providing 84 children on the move with care and support.

The Education Working Group elaborated standards for programmatic interventions and jointly developed a communication and advocacy strategy for the right to education of children on the move led by the Catholic Education Board of Management. In addition, under UNICEF's leadership, it developed a strategy to identify out-of-school children on the move and provide them with a pathway through online education as part of a collaboration with the Archdiocese Ministry for Migrants and Refugees and LWC.

Uruguay

UNICEF is part of the R4V Platform and co-led the Protection sector with UNHCR in 2022. Within this sector, the development of a virtual course on Care for children and adolescent victims of GBV in contexts of human mobility was promoted with the aim of acquiring practical tools for the detection and initial approach to these situations. People from CSOs and public institutions that act at the border with Brazil took part in it.

3 Results achieved from humanitarian thematic funding

Thematic funding remains a critical source of resources to ensure timely and flexible humanitarian action. This section highlights some of the achievements reached by COs with humanitarian thematic funding during 2022. These results may be attributed to new global thematic funding allocated in 2022; thematic funds carried over from 2021; or allocations received by COs in 2022 from thematic funds available from previous year at regional level.

Bolivia

The humanitarian thematic funds have made it possible to provide holistic attention to human mobility emergencies. Global humanitarian thematic funds contributed to migrant children's access to nutrition, health, child protection and education services in Bolivia. Within the nutrition interventions, the main support activities for the migrant population have been the delivery of

supplementation and complementary food for about 1,240 beneficiaries; 75 per cent are children and adolescents. Parents and caregivers of children (125 women, 77 men) have been supported with workshops on complementary feeding in early childhood.

UNICEF supported the enrolment process in the Universal Health System for primary health care of at least 1,727 beneficiaries, 76 per cent were children and adolescents in 5 departments and 3 border localities, both in temporary shelters and transit stations. Services provided included diagnostic and laboratory tests, and treatment for those cases that required it. Workshops with health personnel were carried out to raise awareness about the health services available for migrants and to facilitate access to these services, especially for the population in transit. A workshop on primary care services for the host communities was also held which provided an opportunity to sensitize the general population living in these border towns on the reception of migrants. As part of the WASH intervention, UNICEF delivered family hygiene kits (including menstrual hygiene items) in border localities and other cities through implementing partners. The hygiene kits were delivered to migrant children and their families in transit, host communities and families in final destination. A total of 1,083 people benefited (124 girls, 123 boys, 425 women, 411 men). UNICEF improved the WASH infrastructures of Pisiga's healthcare facility. Also, sanitary modules were installed for migrant children and their families in transit to Chile.

In education, an International Workshop on the use and application of CAB Equivalence Table was held in coordination with MoE. A total of 1,368 participants were engaged from 9 departments. Material for mass dissemination regarding simplified administrative procedures for registration of migrant children in schools and technical aspects of the equivalence tables is being prepared and distributed at border points, schools in urban centres and through social media. In child protection, 1,732 children (915 girls, 817 boys) and 1,293 migrant adults received support in case management, mental health and psychosocial care; and learned about the Safe Family service. In addition, UNICEF carried out activities about violence prevention, socio-legal counselling, immigration regularization and child development care. As part of direct services that benefit migrant and local children, sociocultural activities have been developed promoting integration actions in cultural, recreational, pedagogical and sports spaces, strengthening their integration into the host community. A total of 269 public workers from the child protection system were sensitized and informed on the care and protection of migrant children and adolescents.

Brazil

The humanitarian thematic funds contributed to reaching 4,075 children and 50 schools on WASH, Health and Child Protection in Brazil. In December 2021, unexpectedly heavy rainfall hit the states of Bahia and Minas Gerais affecting 168 municipalities across Bahia and 341 municipalities in Minas Gerais. Heavy rains contributed to two dam collapses in Bahia state, as well as to river overflows across Bahia, disrupting and destroying cities and traditional communities, leaving riverine population houses fully flooded and even destroyed with most appliances and belongings being lost, including documentation. Schools and health centres served as shelters but with very little preparation for shelter management and almost no data on affected children.

UNICEF has been one of the first agencies to reach affected municipalities and participate in the Inter-institutional Crisis Committee for the Hidrological Emergency for Bahia, advocating and technically supporting for finding the preliminary figures of 37,477 children in need among 101,256 displaced people who have been temporarily transferred to shelters and other communities. From April to December 2022, UNICEF worked with Children's Village SOS who provided mental health services, also advocating with municipal actors, to increase access to public services and mental-health support beyond the emergency efforts, as well as supporting schools and child-specific services for returning to their regular activities after functioning as temporary shelters. UNICEF is currently planning support for child-inclusive contingency plans, for local governments increased awareness on child-related and gender specific issues for preparedness and prevention strategies.

Chile

In 2022, UNICEF focused on two key areas of work through the humanitarian thematic funds. The first area involved facilitating access for migrants to institutions providing essential social services such as identification, health and education. Within the protection sector, efforts were made to support migrant enrolment that can assist them in progressing towards migration regularization. The second area of work concentrated on advancing the inclusion of migrant children into Chile's Social Register of Households, the portal for accessing the country's social protection system.

UNICEF successfully conducted nutritional evaluations, and sexual and reproductive health services for a total of 426 beneficiaries (207 male, 219 female). Additionally, a nutritional assessment was conducted on 289 children, adolescents and pregnant women, and nutritional guidance was provided to 312 individuals from the target group.

In collaboration with World Vision, UNICEF achieved successful results in hygiene and sanitation in northern Chile in 2022, reaching 1,557 people using safe and adequate sanitation facilities.

UNICEF committed to foster local-level coordination among public institutions to ensure access to early childhood education, advise national-level MoE teams and partner with Valoras UC to pilot a socio-emotional support programme in host communities. In addition, UNICEF signed an agreement with World Vision to implement two temporary learning spaces in Iquique and Lobitos.

The intervention of UNICEF, in collaboration with Hogar de Cristo in Colchane and Iquique was strengthened to guarantee essential services and protection to migrants who transit through irregular crossings. By 2022, 11,300 people received support in the temporary accommodation centres in Colchane and Iquique. By 2023, the government will oversee implementing the UNICEF reception centres on the northern border. The agreement with the Jesuit Service for Migrants ended in December, benefiting 230 children from Antofagasta, Arica and Tarapacá along with 134 adults identified as adults/caregivers who agreed to individual case management to guarantee referral to public services and humanitarian support networks, support socio-emotional and migratory information. Finally, the agreement with Fútbol mas provided socio-emotional support through sports to 500 children who are sheltered in Playa Lobitos and the first reception centre in Iquique.

UNICEF collaborated with World Vision to facilitate access to information on social services and migrant rights for families, particularly those with children.

Colombia

Humanitarian thematic funds made it possible to strengthen actions to protect children and adolescents from recruitment, use and utilization, and accidents caused by anti-personnel mines and explosive devices in territories affected by the armed conflict. Funding for these territories tends to be prioritized by migration issues without covering issues of multiple affectation such as the conflict.

The thematic resources made it possible to complement resources received from other donors and thus expand coverage in the departments of Arauca, Magdalena, Nariño, Norte de Santander and Vichada. A strategy was developed to prevent the recruitment and use of children and adolescents by armed groups, and accidents caused by antipersonnel mines, unexploded ordnance and booby traps. In this regard, 9,920 children (53 per cent girls and 47 per cent boys) and 2,301 adults participated in awareness-raising and capacity-building workshops for risk management in the context of armed conflict (25 per cent attributed to the complementarity of thematic resources). It also reinforced protection mechanisms in institutional environments of the territorial order, educational institutions and rural headquarters affected by the armed conflict, and community environments where at-risk children and adolescents live, both migrants of Venezuelan nationality, indigenous and Afro population, as well as binational and host populations.

One of the strategy components to highlight is the capacity for immediate response to situations of imminent risk of recruitment, use and utilization, as well as attention to child victims of antipersonnel mines, unexploded ordnance and improvised explosive devices for access to state protection services and the activation of care routes. It is complemented with community psychosocial support actions and the strengthening of more than 12 initiatives led by adolescents and young people from both migrant and host populations. The strategy strengthened the rapid response of 11 Immediate Action Teams and more than 120 officials for the prevention of recruitment and allowed the activation and humanitarian support to 26 cases of children and adolescents identified at risk of recruitment and disengaged who were attended through the protection routes. A total of 77 victims of antipersonnel mines, unexploded ordnance and improvised explosive devices also received attention.

The thematic funds allowed UNICEF to strengthen the information management capacity of the humanitarian sectors led by UNICEF (WASH, Education and area of responsibility for children in the Protection Cluster) by strengthening sectoral reports, participating in needs assessment exercises and facilitating visibility of children's needs in the different humanitarian planning exercises. Thematic resources flexibility allows UNICEF to reach territories and communities with little cooperation presence and with needs that impact the quality of life of children.

Dominican Republic

In 2022, 1,870 Venezuelan children, adolescents or their caregivers were supported by UNICEF implementing partners to access education, health and protection services including support to regularize their legal status. Four CFS have been established to support children and adolescents for school reinforcement, facilitate their integration and life skills. Through these spaces, mothers, fathers and caregivers are strengthened with positive parenting practices and other assistance needs are identified and linked to available services. In addition to the Venezuelan migrant population, Haitian families and the host population participate in CFS.

As a result of advocacy actions, MoE, with the support of UNICEF, developed a protocol to facilitate access to education for migrant children and adolescents with problems in obtaining the documents required for formal inclusion or validation of studies.

More than 30,000 people were reached through a communication campaign with information on access on children rights and child protection services in the Dominican Republic.

Ecuador

In 2022, from the humanitarian thematic funding, UNICEF procured a contingency stock for emergency response such as tents and latrine add-ons for children and disabled people affected by disaster risks. The same fund was used to cover internal capacity-building training on Emergency Preparedness in October and December 2022. On this occasion, the staff of UNICEF prepared emergency plans including a supply and financing plan, and an earthquake response plan and scenario. During the workshop, UNICEF staff reviewed and evaluated the Multisectoral Operational Plan for Response, Advocacy Strategy, supply and logistics strategy, advocacy and resource mobilization.

UNICEF also continued to provide response for the COVID-19 emergency during the first quarter of 2022. UNICEF focused on the migration emergency response to provide refugees and migrants on the move with baby hygiene kits and personal hygiene supplies in prioritized border territories. UNICEF also implemented the strategy for the sustainability of Community-Based Epidemiological Surveillance for the prevention and control of COVID-19 and provided health and nutrition services aimed at children and pregnant women.

Guyana

Migrants and host communities were supported through mobile birth registration outreaches which accelerated access to birth certificates. Over 5,000 people benefited (including more than 1,000 children) from this decentralized service. The outreach also provided an opportunity for the central and local governments (including the Village Chiefs/ "Toshaos") to collectively work to promote the importance of registering all children and 'early' birth registration, which would also facilitate access to other services, e.g., access to open a bank account and employment services. Key partners included the Ministry of Home Affairs, the General Registrar's Office, the Village Councils and the Ministry of Local Government. Although civil society partners were not implementing agencies, they played a role (where the agencies exist in the regions) in the referral of cases and encouraging awareness of the importance of having a right to a name and identity (i.e., a birth certificate).

UNICEF supported the reporting and treatment of reported cases of child sexual abuse for more than 100 children, and over half of the children being girls, through the Child Advocacy Centres. Funding was critical for agreeing on targeted training to Professional Social Workers through the Guyana Association of Social Workers for planned training on trauma, as part of strengthening the capacity of social workers to respond to the needs of migrant and host communities. UNICEF also continued to advocate for the development of protocols for safe spaces for children who may need alternative care, and the development of material for children/families to increase their awareness of the local Sexual Offences Act, 2010.

Peru

The humanitarian thematic funds have enabled UNICEF to provide humanitarian assistance to meet the most urgent needs of migrants at the northern border. UNICEF provided hygiene kits for children, adolescents and lactating women, in addition to WASH services. A total of 7,000 people affected by migration accessed safe WASH services in friendly spaces in 2022.

The fund also supported UNICEF's purchase, in coordination with WFP, of additional nutritional supplements for the prevention and treatment of acute malnutrition among vulnerable populations. In total, some 5,000 children have benefited from this support. Similarly, the health authorities were supported to improve vaccination indicators in the regular scheme and COVID-19 through the implementation of three vaccination brigades aimed at actively targeting the migrant population in transit and settled, including the hiring of a person to record the data of persons who have been vaccinated. A total of 17,000 doses were administered during the year 2022. UNICEF also worked to strengthen the capacity of health workers in nine primary health facilities.

Thematic funds have also enabled UNICEF to strengthen strategic humanitarian actions including:

- **Capacity building** of professional staff in the field, partners, staff related to the humanitarian response in different sectors, health, WASH, child protection and migration including UNICEF staff in Tumbes. It has reached 100 professionals with content on CCC, gender equality, including measures for the prevention and reduction of risks of GBV against children and adolescents in the context of humanitarian response.
- A **humanitarian information management system** has been developed for the visualization of information on UNICEF and its partners' interventions in the field.
- **Communication activities** were carried out to integrate and involve the community. A [report on migrant children in Tumbes](#) was published on social networks, [videos](#) on Venezuelan-Peruvian food recipes were posted and animation videos promoting social programmes for migrants and information on access to health care for adolescents were used. In addition, useful materials were distributed to migrants passing through UNICEF's care centres in Tumbes such as backpacks, reusable water bottles, information flyers, etc.

4 Assessment, monitoring and evaluation

UNICEF LAC Regional Office commissioned an independent regional evaluation to specifically assess and draw lessons learned from its response to the Venezuela outflow in Brazil, Colombia, Ecuador and Peru as well as at the regional level. The formative evaluation assessed the appropriateness, effectiveness, coverage, efficiency, coherence and connectedness of UNICEF in responding to the needs of the most vulnerable migrant and refugee children, their families, host communities as well as advocating for their rights. A summary of the multi-country evaluation of UNICEF's response to the Venezuela Outflow Crisis and key recommendations can be found [here](#).

Bolivia

UNICEF interventions were aligned with RMRP 2022. Bolivia is part of the Southern Cone sub-region of the R4V platform. During 2022, the human mobility situation was dynamic. By February, UNICEF, together with IOM and UNHCR, had conducted analyses of humanitarian needs at borders at various times. These inputs were considered in UNICEF's humanitarian response planning. Additionally, IOM and UNICEF monitored migration flows through the IOM DTM. More than 600 surveys were conducted in major and intermediate cities, as well as in border locations.

UNICEF consolidated programmatic monitoring of the humanitarian response made by implementing partners. Information is collected in the field by the partners' technical teams, reported monthly, and systematized in UNICEF. This information is submitted semi-annually according to highly recurrent humanitarian performance indicators.

At the end of 2022, UNICEF conducted a study on the nutritional situation of children, lactating and pregnant women. Anthropometric and anaemia measurements were made on children and women in transit in Desaguadero (at the border with Peru), El Alto and La Paz. The study determines that 6.0 per cent of the evaluated Venezuelan migrant boys and girls aged 2–59 months have a high prevalence of acute malnutrition; 65.4 per cent of children aged 6–59 months have some anaemia, and pregnant and breastfeeding women have malnutrition.

Brazil

UNICEF has a real-time Humanitarian Performance Monitoring System for the migration response, using the Kobo Humanitarian Response tool for data collection with automatized analysis, resulting on Dashboards that inform programmatic areas and implementing partners on main indicators, significantly reducing double-counting and paper usage. Kobo is also used for CMAPS assessments, gathering data on the opinion of communities on programmes and subjects of interest, to shape information campaigns and adjust strategies.

UNICEF contributed to R4V Platform planning through the third round of ISNAC, also comprising devolution meetings with communities and joint analysis with R4V sectors, supporting sector leaders to make evidence-based decisions on main priorities for 2023.

CMAPS has been subject to a case study, supporting reflections and decisions on the continuity of the strategy, that showed to be effective in its four pillars with room for improvement: community-based surveillance, Accountability to Affected Populations, SBC and Adolescent Participation in Monitoring and Evaluation. The strategy was effective for addressing communities' information needs and connectivity support for educational and work opportunities. AAP mechanisms also use Kobo for collection of feedback and complaints, in addition to suggestion boxes on main migrants and refugees' registration stations.

Chile

In 2022, UNICEF prioritized strengthening its Monitoring and Evaluation team, which included a dedicated United Nations Volunteer (UNV) focused on Humanitarian Performance Monitoring (HPM). This team provided continuous technical support to implementing partners in data collection and reporting, through training in the utilization of data collection tools such as KOBO and POWER BI for visualization. The collected information primarily focused on the demographic and social background of migrants who were beneficiaries of implemented projects. UNICEF also collaborated with UN Women, IOM and UNHCR in the preparation and use of DTM to collect relevant information. This monitoring tool was implemented through 12 rounds of data collection focusing on various themes such as demographics, gender, work and a section dedicated to childhood by UNICEF.

Colombia

The main achievements in supporting coordination platforms for the visibility of needs and prioritization of the response to children and adolescents included the collection of information, analysis and technical assistance for the construction of the Humanitarian Needs Overview 2023, Needs Analysis of Refugees and Migrants, Multi-sectoral Needs Assessment – MSNA

2022, 6th Round of Needs Assessment of GIFMM, sectoral chapters of the 2023–24 RMRP and the 2023 HRP. Additionally, at the national and territorial level, UNICEF provides technical assistance and coordination of actions through strategic leadership in child protection, education, nutrition, water, sanitation and hygiene, accountability, and sexual exploitation and abuse prevention practices.

- [GIFMM Colombia: Resumen de resultados- Evaluación Conjunta de Necesidades 2022 | R4V](#)
- [GIFMM Colombia: Evaluación Conjunta de Necesidades para Población con Vocación de Permanencia y Colombianos Retornados - 2022 | R4V](#) (page 22).
- [GIFMM Colombia: Evaluación Conjunta de Necesidades para Población en Tránsito - 2022 | R4V](#) (page 16)
- [GIFMM Colombia: Resultados situación alimentaria y nutricional en Evaluación Conjunta de Necesidades población refugiada y migrante pendular - 2022 | R4V](#)

Dominican Republic

In coordination with the Sistema Único de Beneficiarios (Integrated System of Beneficiaries) and MEPyD, UNICEF, along with UNDP, generated evidence in May 2022 through the sixth round of the survey on the socio-economic effects of the COVID-19 pandemic. The survey was conducted on a nationally and regionally representative basis with the aim of informing decision makers on the most effective course of action to mitigate the effects of the pandemic and to restore basic services and livelihoods of the most vulnerable populations. For more details see: [Encuesta SEIA](#)

UNICEF used several channels to monitor the response to the Venezuelan communities in the Dominican Republic. Routine field visits, presential meetings and a WhatsApp group were established to keep the support and direct communication with implementing partners. In addition, two consultations conducted directly with beneficiaries were held over the year, alongside phone calls, interviews and focus groups to assess the quality and importance of the initiatives conducted.

Ecuador

Throughout the year, monitoring activities were carried out by UNICEF in line with the Humanitarian Performance Monitoring mechanism, the latter being itself aligned with HAC appeal 2022 targets. To this end, UNICEF used a mechanism for continuous review of partner's performance that included partner reporting (regular reports and field visits to enable monitoring progress). Simultaneously, monthly reports have been submitted through Activity Info, a reporting tool implemented by GTRM.

With its physical presence in affected areas through its field offices, UNICEF has been monitoring and verifying progress reports through field visits and observations. The monitoring field visits allowed UNICEF to verify progress reports submitted by UNICEF's implementing partners and to assess the quality of services as per agreed standards. Along with direct monitoring by UNICEF staff and meeting implementing partners, it also entailed talking to key informants and meeting with affected populations. UNICEF carries out transparent and systematic field monitoring through its field staff in Carchi, Imbabura, Esmeraldas and Sucumbíos who accompany implementing partners and have close contact with affected communities. The systematic approach to field monitoring provides timely and accurate information for decision making, as well as quality assurance of interventions and ensuring progress towards achievements.

UNICEF directly supported the National Government and GTRM Sectorial Groups in the emergency response by identifying affected populations' most pressing needs and gaps while advocating with the children to support their rights in safe and inclusive communities. In 2022, UNICEF participated in the fourth edition of the R4V Joint Assessment of Needs to gather information on the rates of labour informality, protection risks and coping mechanisms, and accessing public services of the Venezuelan refugee and migrant population in Ecuador. With the participation of 21 GTRM partner organizations, the assessment reached 8,555 people through 2,240 interviews in 23 provinces nationwide.

In cooperation with UNESCO and the World Bank, UNICEF implemented the COVID-19 education response monitoring system to monitor the progress of students, families and teachers in order to improve local/national policy responses. In 2022, UNICEF conducted a joint monitoring survey of National Education response to COVID-19. In 2021, with MoE, the joint survey team carried out the household survey at the national level using virtual and face-to-face methods, reaching 5,909 households with children and adolescents nationwide.

The Cash Transfer Programmes Working Group utilized the Evaluation and monitoring study of the market system for goods and basic supplies in Ecuador that aimed at the refugee and migrant population to find out the most consumed products for their subsistence, average consumer spending, vulnerability and sociodemographic characteristics; and, to merchants and markets, for the analysis of prices and availability of goods and services in each territory. UNICEF continued to monitor its CBI through a third-party monitoring entity that uses an independent call centre to reach out to families who receive the assistance to assess their satisfaction with the service provided as well as their needs and their situation settling in their host communities.

Guyana

UNICEF programme activities are monitored through active partner reporting on a quarterly or monthly basis to adjust the results, where needed, based on the demands on the ground. While there are no formal inter-agency needs assessments mechanisms (in place as yet), UNICEF provides feedback to other United Nations agencies working in the area which would help to jointly resolve any difficulties which may arise. UNICEF also provides active feedback to government and other partners where direct intervention is needed. For example, in cases where an agency may not be an implementing partner but can assist in the resolution of cases.

For WASH specifically, interventions are guided by GWI Situation Analysis of water services in communities, in addition to more specific needs assessment in areas where migrants have settled. The regular/ongoing monitoring of indicators focuses primarily on quantitative reporting aspects.

The ECD component of the programme currently has a checklist which is part of the monitoring package, and which informs how the programme is being implemented. For the adolescent component, the monitoring component is imbedded into the schools' health programme.

Peru

UNICEF has developed an information management system for progress reporting from implementing partners through the office's Sharepoint platform. This system has two tools: a Kobo form for data collection and a dashboard for visualization of information on humanitarian response and assistance. These tools will allow for a better monitoring of the operations in the different territories and in a standardized way. Similarly, in the education sector, to monitor the results of the partners, an agreement has been reached with MoE to have direct access to its data on the enrolment and retention of students in school, especially for migrant children.

Trinidad and Tobago

During the 5 years of response to the Venezuelan outflow in Trinidad and Tobago, UNICEF and its implementing partners have accumulated key lessons learned related to the provision of education and child protection services. While the response initially had a siloed approach, it has been slowly evolving into an integrated approach covering nutrition, ECD, education, child protection, social protection, and risk communication and accountability to affected populations. The key learnings have been used to stir strategic shifts and scale-up online education, discontinue some interventions and/or redesign others with more integrated approaches.

In 2022, for example, UNICEF conducted a Real-Time-Review of the Emergency Nutritional Support provided to families with children 0–5 years in partnership with LWC. The review identified areas for improvement related to communicating the criteria for eligibility to benefit from the emergency nutritional support, and hybrid modalities for nutritional and other forms of counselling. UNICEF is in the process of redesigning this intervention following the recommendations.

There are also current efforts to characterize the Venezuelan children on the move based on 2019, 2020 and 2021 data set of IOM's DTM. This will provide key information about the socio-economic conditions of the family unit and the children in Trinidad and Tobago. The assessment is critical to refine inter-sectoral programming and support inter-agency analysis of the situation of children on the move.

Uruguay

UNICEF will continue to collaborate with the Migration and Childhood Observatory at the Faculty of Social Sciences of the University of the Republic, which focuses on monitoring the migrant population through surveys and administrative records. The project with IOM includes knowledge generation about the impact of the migration process on the psycho-emotional development of migrant children and adolescents and the best ways to contribute to their well-being. A research team will be made up of therapists working directly with children and families, psycho-educational component referents and researchers in the social and psycho-emotional areas who will provide the research component with the relevant methodological externalities. The questions that they will aim to answer are the following: what are the perspectives of children and adolescents on the migration process they are going through; what psycho-emotional discomforts afflict them; how do they ask to be supported and accompanied; what can we do to contribute to their psycho-emotional well-being through humanitarian aid programmes for migrants?

5 Financial analysis

UNICEF appealed for US\$185.7 million^v in 2022 to address the humanitarian needs of the most vulnerable migrants and refugees,^{vi} including Venezuelan and other nationalities and host communities,^{vii} the most vulnerable children and families affected by COVID-19,^{viii} and people affected by violence and displacement.^{ix}

By the end of December 2022, UNICEF's HAC appeal for Children on the Move including Venezuelans, and other crisis-affected communities was only 31 per cent funded (\$57.3 million, including funds carried over from 2021, as well as funding received in 2022). In 2022, UNICEF received generous contributions from BPRM, the European Commission's Directorate-General for ECHO, the Bureau for Humanitarian Assistance, the government of Belgium, the government of Norway, the government of Sweden, UNICEF National Committees in Austria, Belgium, China – Hong Cong, Germany, Italy, Luxembourg, Netherlands, New Zealand, Norway, Spain, Sweden and Portugal, allocations from CERF, as well as from pooled Global Thematic Humanitarian funds. UNICEF expresses sincere gratitude for the generous and important contributions from all public and private sector donors.

In 2023, UNICEF requests US\$160.5 million to deliver humanitarian assistance to 2.2 million people in Bolivia, Brazil, Chile, Colombia, the Dominican Republic, Ecuador, Guyana, Peru, Trinidad and Tobago, and Uruguay. This appeal covers those affected by human mobility from Venezuela, as well as vulnerable populations in need of support in Colombia. UNICEF will continue advocating for flexible and sustained funding, critical to be able to adapt its response strategy to the ever more complex humanitarian context.

See [Annex 1](#) for [Table 1: 2022 Funding status against the appeal by sector \(Revenue in US\\$\) by country](#) and [Table 2: Funding received and available by 31 December 2022, by donor and funding type \(in US\\$\) by country](#).

Table 1: 2022 Funding status against the appeal by sector (Revenue in US\$)

TOTAL REGIONAL						
Sector	Requirements	Funds available			Funding gap	
		Humanitarian resources received in 2022**	Other resources received in 2022***	Humanitarian resources available from 2021 (carried over)****	US\$	%
Health	15,552,754	3,137,540		3,852,802	8,562,412	55%
Nutrition	8,810,206	2,949,800		436,221	5,424,185	62%
WASH	31,004,821	3,746,830		4,289,292	22,968,699	74%
Education	45,355,693	7,394,926	9,899,756	2,780,339	25,280,671	56%
Child Protection, GBViE and PSEA	36,886,665	10,218,383		1,801,016	24,867,266	67%
Social protection and cash transfers	31,078,085	1,618,616		912,516	28,546,953	92%
Regional Support + other countries	5,700,000	2,007,803	991,307	98,341	2,602,549	46%
Cross-sectoral support (HCT, C4D, RCCE and AAP)	11,361,353	792,350		350,927	10,218,076	90%
Total	185,749,577	31,866,249	10,891,063	14,521,454.10	128,470,811	69%

* As of 31 December 2022. As defined in Humanitarian Appeal first published in December 2021 for a period of 12 months and later updated in June 2022. Cross sectoral costs are embedded in sectors.

** Includes emergency funds received against HAC.

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

**** Includes only emergency funds received under the 2021 appeal for the response to the Venezuelan migration situation and emergency funds received in 2021 for COVID-19 response.

Table 2: Funding received and available by 31 December 2022, by donor and funding type (in US\$)

Donor name/type of funding	Grant reference	Overall amount
I. Humanitarian funds received in 2022		
a) Thematic humanitarian funds		
Global Humanitarian Thematic Fund	SM189910	420,000
Global Humanitarian Thematic Fund	SM229910	1,272,333
Regional Humanitarian Thematic Fund	SM229920	318,836
Country Humanitarian Thematic Fund	SM229930	0
b) Non-thematic humanitarian funds		
USA (State) BPRM	SM220098	210,400
USA (State) BPRM	SM220115	450,000
USA (State) BPRM	SM220097	5,000,000
USA (State) BPRM	SM220100	50,000
USA (State) BPRM	SM220101	6,524,600
USA (State) BPRM	SM220102	490,000
USA (State) BPRM	SM220103	3,400,000
USA (State) BPRM	SM220105	190,000
USA (State) BPRM	SM220108	900,000
USA (State) BPRM	SM220106	2,300,000
USA (State) BPRM	SM220107	40,000
European Commission/ECHO	SM210990	179,136
European Commission/ECHO	SM220335	6,515,448
SIDA – Sweden	SM220150	1,058,873
Norway	SM220307	342,740
Belgium	SM210890	54,000
Bureau for Humanitarian Assistance	SM200664	113,400
Spanish Committee for UNICEF	SM210030	37,723
Spanish Committee for UNICEF	SM220669	250,501
German Committee for UNICEF	SM220281	178,367
The United Kingdom	SM170463	108,000
UNICEF Brazil	SM220045	55,370
UNICEF Brazil	SM220450	20,765
UNICEF Brazil	SM220340	23,456
UNICEF Brazil	SM220339	105,197

UNICEF Peru	SM220619	76,511
United Nations Multi Partner Trust	SM220028	180,288
Total non-thematic humanitarian funds		28,854,774

c) Pooled funding		
(i) CERF grants		
(ii) Other pooled funds including Common Humanitarian Fund, Humanitarian Response Funds, Emergency Response Funds, United Nations Trust Fund for Human Security, Country-based Pooled Funds etc.		
UNOCHA – CERF	SM220661	585,000
d) Other types of humanitarian funds		
UNICEF Peru	KM220011	33,969
UNICEF Peru	KM220035	801,338
e) Other resources – development funding towards HAC (SH grant)		
N/A	N/A	0
f) Other resources – development funding towards HAC (SC grant)		
Education Cannot Wait Fund	SC210215	704,326
Education Cannot Wait Fund	SC220095	569,363
Education Cannot Wait Fund	SC220156	2,460,032
Canada	SC220203	7,157,342
Total humanitarian funds received in 2022[7] (a+b+c+d+e+f)		42,757,312
II. Carried over – humanitarian funds available in 2022[8]		
g) Carried over – thematic humanitarian funds		
Thematic humanitarian funds	SM189910	2,517,966
h) Carried over – Non-Thematic Humanitarian Funds[9] (list by donor, grant and programmable amount being carried forward from prior year(s) if applicable)		
European Commission/ECHO	SM210271	967,701
European Commission/ECHO	SM210676	49,314
European Commission/ECHO	SM210770	5,719,706
European Commission/ECHO	SM210990	728,800
British Government (Department for International Development)	SM200202	787
Bureau for Humanitarian Assistance	SM210837	370,370
Canadian UNICEF Committee	SM200707	153,900
Consolidated Funds from NatComs	SM210896	453,704
Consolidated Funds from NatComs	SM210928	304,129
Dominican Republic	SM210170	241,028
Norway	SM210406	146,530
Republic of Korea	SM210490	462,963
Spanish Committee for UNICEF	SM211007	32,300

Spanish Committee for UNICEF	SM210651	181,188
Spanish Committee for UNICEF	SM210030	28,577
The United Kingdom	SM170463	13,236
UNICEF Brazil	SM211002	64,523
UNICEF Brazil	SM211001	174,749
UNICEF Brazil	SM210023	160,474
UNICEF Brazil	SM210912	763,126
UNICEF Brazil	SM210995	53,265
UNICEF Brazil	SM210628	6,684
UNICEF Brazil	SM210930	39,852
UNICEF Brazil	SM210567	224,918
UNICEF Brazil	KM210065	55,996
UNICEF Brazil	KM210070	22,265
UNICEF Brazil	KM210077	8,696
UNICEF Brazil	KM210078	36,000
UNICEF Brazil	KM210125	207,000
UNICEF Brazil	SM210627	19,885
UNICEF Brazil	SM210225	110,059
UNICEF Brazil	SM210430	146,034
UNICEF Brazil	SM210607	21,968
UNICEF Brazil	SM210783	24,080
UNICEF Brazil	SM210205	29,009
UNICEF Uruguay	SM210155	16
United States Fund for UNICEF	SM200452	33,950
USA (State) BPRM	SM210456	18,809
UNOCHA	SM210777	240,653
USA (State) BPRM	SM210457	737,455
United Nations Multi Partner Trust	SM220028	168,493
United Nations Multi Partner Trust	SM200882	9,706
Total carried over – non-thematic humanitarian funds		13,231,897
Total carried over – humanitarian funds		15,749,863
III. Other sources		
N/A	N/A	0
Total other resources		0

* Programmable amounts of donor contributions, excluding recovery cost.

Table 3: Thematic humanitarian contributions received in 2022 (in US\$)

Donor Name/Type of funding	Grant Reference	Total Contribution Amount (in USD)
Allocation from global thematic humanitarian*	SM189910	420,000
Allocation from global thematic humanitarian	SM229910	1,272,333
Sub-total (received from EMOPS/HQ):		1,692,333
German Committee for UNICEF	SM2299200074	88,172
Austrian Committee for UNICEF	SM2299200175	14,643
Belgian Committee for UNICEF	SM2299200176	9,126
Canadian UNICEF Committee	SM2299200177	32,116
Italian Committee for UNICEF	SM2299200178	23,344
Luxembourg Committee for UNICEF	SM2299200179	6,649
Netherlands Committee for UNICEF	SM2299200180	11,106
New Zealand Committee for UNICEF	SM2299200181	5,376
Spanish Committee for UNICEF	SM2299200182	14,431
Turkish National Comm for UNICEF	SM2299200183	8,347
Hong Kong Committee for UNICEF	SM2299200184	49,235
UNICEF Malaysia	SM2299200185	10,824
UNICEF Mexico	SM2299200186	5,942
UNICEF Philippines	SM2299200187	8,205
UNICEF Thailand	SM2299200188	11,814
United States Fund for UNICEF	SM2299200293	19,506
Sub-total (received from Regional Office):		318,836.00
Country thematic contributions	N/A	-
Sub-total (received directly at CO level):		-
Total:		2,011,169.00

* Global Thematic Humanitarian Funding contributions are pooled and then allocated to country and regional offices by the Office of Emergency Programmes (EMOPS). A detailed list of grants will be available in the 2021 Humanitarian Action Global Annual Results Report.

6 Future work plan

Bolivia

Prioritized actions in 2023 include:

- Continuity of holistic humanitarian assistance at the borders, mainly in Pisiga (border with Chile).
- Implement micronutrient supplementation programmes in vulnerable groups of migrants in transit: micronutrient powder supplementation for children under 5 years old, iron for children 5– 19 years old, and micronutrient powder or iron and folic acid supplementation for pregnant and lactating women.
- Analyse the opening of friendly spaces at the borders for migrant and transit infants and children.
- Contribute to the hiring of support staff from the Ombudsman's Office at the borders.

Brazil

- UNICEF is starting the implementation of a project that aims to support the development of disaster preparedness and response plans for the Yanomami Indigenous Territory contributing to Yanomami communities overcoming climate change and socio-environmental impacts, considering also its consequences to the health, nutrition, sanitation and social protection from a community perspective.
- Integration of PRIMERO data into HPM dashboards are envisioned for one-stop-shop of data on people reached and services provided.

Chile

In 2023, UNICEF aims at expanding the ongoing response throughout the northern macro-zone of Chile. This region serves as the prelude to migration in the Country and comprises three locations – Antofagasta, Arica and Parinacota, and Tarapacá. Through this initiative, UNICEF will reach new territories and provide a multisector humanitarian response to the ever-evolving

challenges faced by migrants. The response will also address the situation of the indigenous population in the southern zone of Chile. This will include conducting a comprehensive needs assessment survey and taking measures to safeguard the rights of children and adolescents. In addition, emphasis will be placed on enhancing educational and healthcare facilities specifically for the indigenous communities.

Colombia

UNICEF will continue to assist migrants and refugees as well as people affected by violence and displacement, including women and children, particularly unaccompanied and separated children, children with disabilities, and those belonging to indigenous and Afro groups. In line with RMRP, HRP and the UNICEF Agenda for Action for Children, in coordination with United Nations agencies, governments and partners, UNICEF will:

- Promote and defend the rights of migrant, refugee and internally displaced children and adolescents and their families, including indigenous and Afro populations.
- Ensure access to child protection, social protection, education, GBV prevention and response, ECD, health, nutrition and WASH services for migrant, refugee, internally displaced and host community children and adolescents.
- Promote social inclusion, integration and prevention of xenophobia by ensuring access to social services and long-term solutions, regularization of the legal status and legal identity of children and families and strengthening social systems for children and families and reinforcement of social policies and national and local capacities.
- Strengthen the capacities of local and national governments, social organizations and communities in preparedness and contingency planning.
- UNICEF will be accountable to affected populations and ensure the equitable participation of women and girls in the design of interventions and the representation of women and girls in all community feedback and complaint mechanisms.
- At the national and territorial level, UNICEF will continue to provide technical assistance and coordination of actions through strategic leadership in child protection, education, nutrition, WASH, accountability and prevention of sexual exploitation and abuse practices.

Dominican Republic

Based on the results and assessments of child protection affected populations, the work plan for 2023 will focus on continuing to provide emotional and mental health assistance to affected populations at the specialized and community level; support for legal identity and immigration status regulation; and strengthening child protection case management from the community to the national level.

To respond to the increasing of cholera cases, UNICEF prepared an immediate response plan to cholera due to the risk factors related to mobility between Haiti and Dominican Republic and the high level of contamination of drinking water affecting 56 per cent of children and adolescents. The total amount requested is US\$ 602,000 to support WASH sector coordination, improvement of WASH access and hygiene kits, SBC with community engagement, cholera attention cases at the primary health care level, and monitoring and evaluation.

Ecuador

The needs of children and their families on the move and their host communities continue to be dire with significant detriments caused by the impacts of the COVID-19 pandemic. Currently, the crisis has no foreseeable end, on the contrary, there are several aggravating factors on the rise, such as the socio-political instability, the increase in organized crime and violence rates, localized sudden emergencies such as earthquakes and flooding, among others.

UNICEF will continue to provide humanitarian assistance in response to the Venezuelan migration crisis with special attention to the families with children and adolescents on the move and their host communities while providing technical support to national and local governments to enhance capacity and promote intersectoral interventions. The CO will strengthen nexus programming during 2023 by UNICEF and will continue working with national and local partners in identifying and addressing the different risks faced by children and adolescents, ensuring safer and more resilient conditions for them, and strengthening the preparation and response phases, primarily through capacity building.

Ecuador's Country Programme 2023–2026 aims at creating equitable opportunities for all children and adolescents with particular attention children in a highly vulnerable situation. Building on the lessons learned from the achievements, UNICEF interventions will be undertaken at three different levels during the next cycle. At the national level, UNICEF will exercise advocacy to influence public policies to promote and protect child rights with a special focus on early childhood. Intersectoral and comprehensive interventions both focused on development and humanitarian interventions will be carried out in the provinces of Chimborazo, Esmeraldas and Sucumbíos with a strengthened field presence. UNICEF will also continue humanitarian interventions for the children on the move in the northern and southern border territories such as Esmeraldas, Huaquillas, Manta and Tulcan where an increasing number of migrants have been encountered and violence has increased. In

Manta and Tulcán specifically, UNICEF will continue to strengthen its long-term commitment through the comprehensive support spaces already in place working with local governments on their approach to integration of families on the move.

Guyana

For WASH, per R4V, the People in Need (PIN) in 2023 amounts to 11,620. UNICEF, in partnership with GWI, is focusing on scaling up access to safe drinking water and sanitation facilities for vulnerable communities including those hosting Venezuelan migrants. UNICEF also continues to support GWI in promotion of proper hygiene practices among migrant and host communities. UNICEF will support MoE to strengthen WASH infrastructure in key schools attended by migrants and support MoH to strengthen WASH facilities at ECD centres/sites. Additionally, in Child Protection, based on the demand for services (especially for the reporting of child sexual abuse and access to birth registration services) and in line with PIN as per R4V, UNICEF will continue to invest in these services, in at least three interior locations (six villages) so that migrants and host communities have access. This is also in line with state plans to ensure that the country can gain universal birth registration and have access to critical child protection services.

As part of the on-going collaboration with MoH and MoE, components of the current programme are expected to be imbedded into Health and Education programmes.

Peru

In 2023, UNICEF will continue its strategies to address the needs of the migrant population in transit and settlement, and to strengthen community and social inclusion with the host population. To this end, it will be important to maintain comprehensive care points at the border and strengthen local actors, both in Tumbes and North Lima:

- WASH activities will continue with the consolidation of the migrant attention point (PAO Pueblo Nuevo) to provide safe water, sanitation, showers and hygiene promotion to the population in transit. In addition, work will be done with SBC to achieve greater impact and improve healthy hygiene habits.
- Interventions aimed at improving the health status of the migrant population will continue. These include early childhood care, immunisation, mental health, adolescents and sexual and reproductive health.
- Nutritional supplements to prevent and treat migrant populations at risk of acute malnutrition will continue to be purchased.
- Educational centres and health facilities that receive migrant populations will also be strengthened to improve their acceptance and care.
- Humanitarian aid will be complemented by financial assistance (cash transfers through a cash plus approach). This will allow vulnerable households with children and adolescents to avoid coping strategies that deprive them of adequate food and/or access to health and education services or regularisation of their migration status.
- In the area of child protection, UNICEF will continue to work in coordination with the National Migration Authority to implement activities for the regularization of the migratory status of Venezuelan children and their families.
- Support to education authorities will continue, including distributing tablets for the new school year. The tablets will be used for learning recovery activities and learning projects, as face-to-face education has resumed in almost all schools. The learning recovery activities were crucial in helping children develop skills that are critical for the school year. UNICEF will deliver 700 school kits that were purchased last year and will provide 6 additional temporary school rooms.
- Implementing the U Report *Uniendo Voces* in Tumbes, applying the APP strategy and SBC technical support for designing activities and content.

Trinidad and Tobago

UNICEF and its partners will move towards more integrated approaches to deliver services to families with children under 5. The service package will include nutritional counselling; counselling for breastfeeding/responsive feeding based on local foods; counselling on childrearing practices, fatherhood; GBV prevention during the first and second thousand days; and MHPSS care for the parent/caregiver.

On the child protection front, work will continue to deliver integrated programming through child-friendly spaces. UNICEF, UNHCR, LWC, Pan American Development Foundation and the Women's Institute for Alternative Development will work to address bottlenecks to birth registration ensuring that the administrative and financial gaps are addressed. The Alternative Care Sub-Working Group will define an integrated service package for foster families providing care and support to 84 children on the move and will also design a cash intervention that will enable foster families to deliver on their commitments.

The workplan in education for 2023 follows two strategic objectives: one geared towards UNICEF's commitments to deliver humanitarian assistance, and the other to build the systems that would enable a harmonious transition into the national education system. This nexus aligns the first strategic objective which is to deliver services that ensure the acquisition of numeracy and literacy skills/key competencies aligned with the national curricula and flexible enough that it can support the transition to other education pathways. Following on the need to have a durable solution to the right to education, UNICEF and other stakeholders

in education are moving to scale-up system strengthening efforts started in 2021 around widening the engagement of denominational boards furthering English-language competency, integration into national schools, assessment and training, and capacities for supported transitions. Skills development through YOMA will also seek to connect young migrants and refugees with entrepreneurial and employability opportunities.

Social protection will contribute to leverage sectoral results in nutrition, education and child protection.

Uruguay

In 2023, UNICEF aims at providing services for migrant children and adolescents in cooperation with IOM and Montevideo's Municipality B. The main goal of the project is to provide psycho-emotional and social support to migrant children and adolescents and to generate knowledge to guide on the best ways to contribute to healthy psycho-emotional development during the migration process.

The specific goals are to provide psycho-emotional support to children and adolescents, to socio-educationally accompany the migration process of children and adolescents and to generate knowledge on the best ways to contribute to the psycho-emotional development of migrant children and adolescents.

Following these goals, the project has three components:

- Psycho-emotional listening will be provided by therapists specialised in childhood and adolescence, will operate in spaces set up for intimate and calm conversations (two consulting rooms) and will intervene on the basis of a triage system that will allow assistance to be organised around large groups, according to their needs.
- Accompaniment in everyday life which involves making visible, making available, showing the opportunities that migrant children and adolescents have to integrate into Uruguayan society and build a project of inclusion and full social participation. The actions of this component are carried out by a psycho-educational team, made up of social educators, social workers or people with experience in working with migrants.
- Systematization and research with the aim of generating relevant knowledge for policies, programmes and plans that work with migrant populations and for Uruguayan institutions in the integration of migrant children and adolescents.

This project is being developed in coordination and with the support of the [Municipality B](#), which is providing the space where psychological care for children and adolescents will be provided.

Annexes

Thematic funding case studies

The following case studies illustrate some of the achievements reached by COs with humanitarian thematic funding during 2022. These results may be attributed to new global thematic funding allocated in 2022; thematic funds carried over from 2021, or allocations received by COs in 2022 from thematic funds available from previous year at regional level.



Case study: Bolivia

Top level results:

In Bolivia, Global Humanitarian Thematic (GHT) funds allowed 1,732 migrant children (915 girls, 817 boys) and their families to access specialized health, education, social welfare and legal services. A total of 1,293 parents and caregivers of migrant children received psychosocial support and parenting guidance. Host communities also benefited from psychosocial support and education along with migrant families. Some 269 public workers from the child protection system participated in sensitization campaigns on the care and protection of migrant children and adolescents. In addition, 1,300 people (222 boys, 182 girls, 472 men, 424 women) had access to mental health and psychosocial support through the Safe Family call centre and interventions by implementing partners trained on the provision of such services.

Issue/background:

In 2022, the human mobility situation was very dynamic in Bolivia. In February, there were flows of up to 600 people per day irregularly crossing the border with Chile. In the last quarter of 2022, the flows were up to 200 people per day. The migratory profile is mostly in transit through localities with limited social services. UNICEF adapted its interventions to respond to the changing dynamics, ensuring continuity of service provision. In addition, UNICEF provided legal services, migratory regularization, case management, early childhood care orientation, violence prevention, and emotional and mental health support. UNICEF also carried out sociocultural activities, promoting social cohesion actions in cultural, recreational, pedagogical and sports spaces.

Resources required/allocated:

To effectively respond to the humanitarian needs of migrants and refugees, UNICEF allocated US\$71,100 of GHT to the Child Protection programme to implement three humanitarian cooperation agreements with national CSOs. The CSOs implemented activities in five cities including Cochabamba, El Alto, La Paz, Santa Cruz and Tarija, and the border points at Desaguadero, Guayaramerín and Pisiga. GHT funding also contributed to achieving results through funds earmarked for essential supplies, hiring of specific consultants, a National UNV assignment, training and technical support. A total of US\$128,900 of GHT contributed to health, nutrition, WASH and SBC humanitarian interventions, facilitating an integral/intersectional intervention.

Progress and results:

With the provision of GHT funds, 1,732 migrant children (915 girls, 817 boys) had access to social services. Also, 1,293 parents and caregivers of migrant children now have access to the same services. UNICEF provided integral case management that includes specific interventions about legal support, migratory regularization, early childhood care orientation, registration in the National Health Services, primary health services, nutritional supplements and counselling, GBV prevention, emotional and mental health care, and pedagogical/educational support.

Promoting social cohesion, UNICEF and their implementing partners conducted cultural, recreational, pedagogical and sports activities involving migrant children and the host communities. To strengthen the child protection system, UNICEF trained 269 public workers, increasing knowledge on the care and protection of migrant children and adolescents. GHTs also contributed to ensuring the institutionality of the border with Chile. UNICEF contributed with resources to have Defensoría del Pueblo staff in the border town of Pisiga.

GHTs allowed UNICEF to provide humanitarian assistance in Desaguadero (on the border with Peru), Pisiga (on the border with Chile) and Guayaramerín (on the border with Brazil). The intervention was coordinated with IOM and UNHCR making efficient use of funding.

[Follow link to access photos](#)



A Venezuelan migrant family attends the Migrant Attention Centre in Pisiga - Bolivia, bordering Chile, which is coordinated between UNICEF, IOM and the Ombudsman's Office. At the Centre, migrants receive humanitarian assistance in health and protection, hygiene supplies, shelter, and food for the youngest children.

Criticality and value addition:

The migratory flow through Bolivia was impacted by socio-political events in the region such as the one in Peru in December 2022. The migratory profile is now mostly in transit through localities with limited social services. Nowadays, most migrant families are young parents with children mostly under 11 years old and led by women. Legal assistance for migration regularization to access social services is one of the main needs of people in human mobility. Many children are unable to access education due to a lack of documentation. Likewise, many children require assistance from child protection services, often unavailable in border towns. Children in transit suffer psycho-emotional impact due to all the situations they go through in their journey.

According to a diagnosis carried out by UNICEF in 2022 on the perceptions of the host community on migration, evidenced that there are principles of xenophobia and discrimination mainly in border localities. The intervention sought to remedy the absence of social services comprehensively, such as case management. Additionally, many actions included caregivers and parents of children in human mobility.

Challenges and lessons learned:

An important challenge in 2022 was to provide humanitarian assistance for the population in transit because the urgency to continue their way toward other countries, the time to assess needs, or engage in case management and provide adequate support was limited.

Inter-agency coordination was essential to ensure provision of basic humanitarian assistance. Together with IOM and UNHCR, UNICEF established the actions to be carried out by each organization and the geographical split. This made the use of funding more efficient.

Strengthening the institutions of the child protection system was a priority for UNICEF. Human mobility is still a new situation for which government institutions were unprepared. UNICEF has been conducting training for child protection services at central cities and border points to enhance their capacity to cater for the needs of children on the move.

Moving forward:

UNICEF is focusing its intervention on strengthening the institutionality of the child protection system. Municipal child protection services at the border have limited capacities (knowledge, equipment, institutional framework) to guarantee the exercise of the rights of children in human mobility. In the same way, UNICEF prioritizes actions for the National Ombudsman's Office to exercise its functions for the prevention and attention of child protection services. The actions of the child protection programme are more framed in the humanitarian-development nexus. In this sense, UNICEF develops actions to strengthen institutional mechanisms for caring for unaccompanied or separated children.



Issue/background

In June 2022, indigenous groups led by the Confederation of Indigenous Nationalities of Ecuador held nationwide protests against public policies of the national government. Violence and clashes between protesters and security forces gradually increased during the 18 days of protests. Indigenous and human rights organizations reported people injured and five people dead by excessive repression in the demonstrations that were mostly concentrated in Quito. Approximately 18,000 people, including children and adolescents, participated in the protests. Two of the main universities in Quito opened their doors to provide shelter to the people who participated – mainly women, children, adolescents and the elderly. Some 11,500 people, including 1,000 children, and pregnant and lactating women, were sheltered by these universities. However, during the 18 day-strike, the most challenging situation faced by the people at the shelters was a lack of access to sanitation and water facilities: safe WASH services, protection and health services were the most pressing needs. There were roughly 240 daily medical attentions provided by volunteer groups in these spaces.

Top level results

In response to this humanitarian crisis, providing the affected population with psychological support in coordination with their psychology teams and three specific case of unaccompanied adolescents and one person who was severely injured. To improve WASH conditions and prevent disease outbreaks, UNICEF cooperated with the municipality to install chemical toilets in open spaces, and chemical toilets and sinks with water containers to provide the people sheltered in universities with adequate access to water and sanitation services at Universidad Central. UNICEF provided 2,850 baby hygiene kits and 2,400 menstrual hygiene kits. In coordination with MoH and PAHO, UNICEF provided three tents and supplies for primary medical care and PPE. PPE for COVID-19 for health workers was also provided.

UNICEF has closely monitored the crisis since the beginning and anticipated a humanitarian response according to similar events in previous years. UNICEF permanently liaised with the Resident Coordinator's Office to align advocacy strategies with the United Nations system. Given the violent incidents of 24 June, UNICEF successfully advocated at the highest levels with ministers and presidential advisers to avoid the police from entering and evicting people (including women and children) from the universities. UNICEF also tweeted to call for the protection of boys and girls in the universities (safe havens). The tweet reached over 500,000 impressions, 5,000 likes and almost 4,000 retweets.



©UNICEF/ECU/2022/Carrion
UNICEF supported the installation of a child-friendly space in Universidad Central

Resources required/allocated

UNICEF initially reoriented Regular Resources funds to provide immediate life-saving response. Thanks to global humanitarian thematic funding, the response could quickly scale up allowing UNICEF to continue to provide assistance to families in need, especially by funding lifesaving supplies. UNICEF relied on its internal capacity for emergency response as well as implementing partner ADRA for child protection activities. Internal technical staff and the Cos management leadership was key to achieve results in a timely manner.



©UNICEF/ECU/2022/Carrion
Women in line waiting to receive menstrual hygiene kits in Universidad Central provided by UNICEF

Progress and results:

To address the most pressing needs of WaSH, UNICEF supported the installation of chemical toilets in open spaces to prevent disease outbreaks, and simultaneously installed 20 chemical toilets and 15 sinks in Universidad Central and 50 water containers (20 litres each) with 3 boxes of 2,800 aqua tabs for drinking water needs. Some 2,000 personal hygiene kits including soap bars, dental paste, toilet paper and menstrual hygiene supplies are being distributed. UNICEF adapted six existing showers at Universidad Central to open them for people sheltered in this university. UNICEF also provided 2,850 baby hygiene kits and 2,400 menstrual hygiene kits. In coordination with MoH and PAHO, UNICEF provided three tents and supplies for primary medical care and personal protective equipment.

UNICEF installed child-friendly spaces in each university in which psychosocial support was provided to them in coordination with the psychology teams of the universities. Clear signage for peace zones, protection routes and PSEA messages were installed in these spaces and assistance for the activation of protocols for UASC. UNICEF provided case management up on three specific cases of unaccompanied adolescents, one of them severely injured. Two of these adolescents were successfully reunited with their families.

These spaces were properly equipped with four ECD kits and educational material for children sheltered in these spaces. A total of 8,600 blankets and mattresses were provided.

Criticality and value addition

The conditions of the shelters that accommodated the indigenous boys, girls and women were harsh since there were no adequate shelter conditions, WASH services or protection measures in place. As the crisis was political, there were significant humanitarian assistance gaps. UNICEF stepped up providing life-saving assistance while remaining impartial and protecting its credibility.

Challenges and lessons learned:

The crisis was highly political and controversial, and thus had several reputational risks if UNICEF's interventions were too visible. UNICEF's strategy was based on humanitarian principles of humanity, impartiality, neutrality and independence; and what guided the intervention was UNICEF's humanitarian mandate and Core Commitments for Children in Humanitarian Action. Having internal technical staff with specific emergency experiences was key to the success in the response, as was having constant assessments of the political and communicational developments.



Moving forward

UNICEF CO in its next Programme Cooperation Cycle in 2023–2026 will focus primarily on indigenous and afro descendant communities who have historically been excluded of the full exercise of their rights. UNICEF will continue to re-stock its contingency supplies to be prepared for similar or other emergency events



Top level results:

UNICEF is committed to provide a comprehensive response for children on the move in the northern border of Chile, particularly those with irregular migratory status passing through Colchane and settling (permanently or temporarily) in the city of Iquique. By the end of 2022, UNICEF had achieved the following results: informal education provided to 666 children and adolescents, 513 learning kits distributed, and referral and access to formal education system for 400 children and adolescents of whom 115 were eventually enrolled. The project also provided health and nutrition support, conducting nutritional assessments of 300 children and referral of 21 children and adolescents, 54 young women and 4 young men to the national primary health care system. A total of 973 people were provided with essential WASH supplies and 382 people provided with information on access to services. In addition, 6,084 children and 5,145 adults have received support in the first reception centres in Colchane and Iquique.

Issue/background:

The foreign population in Chile has had a considerable increase in recent times. By 2022, the Instituto Nacional de Estadísticas estimated that 1,482,390 people would reside in the country, representing 7.5 per cent of the population, increasing the total number of foreign residents to more than 14 per cent compared to 2018. The northern macrozone is the prelude to entry through unauthorized routes, with an increase of 80 per cent since 2010 with 35,400 admissions until 2021, where 37.2 per cent are children and adolescents. According to IOM DTM in Colchane, 50 per cent of them feel unsafe on the way. A lack of opportunities, protection and health continue to be crucial issues in addressing the response to migration and contemplating the well-being of children and adolescents. Along with this, gender gaps are key points to intervene. By 2020, 42.3 per cent of migrant women in Chile indicated that they had been victims of GBV and 11.6 per cent of femicides in Chile correspond to migrant women, without detracting from the fact that there are a growing number of disabled children and adolescents with multiple needs in Chile.



Migrants walk along the Chile-Bolivia border located in Colchane, Chile, on April 27, 2022.

Resources required/allocated:

Humanitarian Thematic funding received by UNICEF allowed for the immediate humanitarian response to migrants and refugees in the northern border of Chile. US\$ 200,000 received by CO in 2022 was allocated to the Child Protection and Education component of the response plan.

Progress and results:

In the education and health areas UNICEF is working in partnership with World Vision in two temporary learning spaces established between July and December 2022: one at the Campanario Parish in the city of Iquique, and the other at the Lobito shelter in the Tarapacá region. Activities include providing informal education (for levelling learning) as well as providing health, nutrition, hygiene and sanitation information for families. By the end of 2022, UNICEF had achieved the following results: informal education provided to 666 children and adolescents, 513 learning kits distributed, referral and access to formal education system for 400 children and adolescents of whom 115 were eventually enrolled. The project also provided health and nutrition support, conducting nutritional assessments of 300 children, and referral of 21 children and adolescents, 54 young women and 4 young men to the national primary health care system. An additional 973 people were provided with essential WASH supplies and 382 people provided with information on access to services.

In the child protection sector UNICEF operates two first reception centres through a partnership agreement with the National Undersecretariat for Children, implemented by local partner Hogar de Cristo. Reception centres provide basic humanitarian services and protection needs assessment of children on the move and their families. During 2022, 6,084 children and 5,145 adults have received support in the first reception centres in Colchane and Iquique. The child friendly space at the Colchane border crossover provides a protective space for families waiting for police entrance procedures. It also provides food, hygienic kits and general information. A longer stay (15 days) temporary shelter for migrant families in Iquique provides humanitarian assistance to fulfil basic humanitarian needs including food, hygiene, information, childcare for early childhood, recreation and leisure for children, and relocation funds (countrywide) for family reunification within the country. It also provides referrals with the public health and education systems and advice on obtaining visas for children. Temporary lodging for families of Iquique reception centre is provided jointly with IOM and the Ministry of Social Development and Family.

Criticality and value addition:

For the past couple of years, UNICEF has committed to provide a comprehensive response for children on the move in the northern border of Chile, particularly those with irregular migratory status passing through Colchane and settling (permanently or temporarily) in the city of Iquique.

Challenges and lessons learned:

A major challenge was to find implementing partners with experience in migratory emergency and children's rights intervention. This required a major effort by CO to build their capacity. Difficulties were also observed for the field teams to adequately meet the goals. A lesson learned was that it is essential to have a territorial presence to be able to monitor and follow up the correct implementation of projects. These efforts made possible to strengthen the capacities of Hogar de Cristo, which is the State's main implementer on providing humanitarian assistance to children in the context of mobility.



Andrelis Álvarez is a young migrant mother who arrived at the Colchane camp with a family
@ UNICEF/UN0652464/Vera-Lisperguer/AFP-Services

Moving forward:

- **Education:** As a result, MoE committed to fund the educational component of the programme for 2023 and is presently collaborating at national and regional levels to maintain the temporal learning space at the Lobito shelter and open a new initiative in the Campanario Parish to address the learning gaps of children on the move.
- **Child protection:** On March 2023, the Undersecretariat for Children will take over the implementation of the first reception centres in Iquique and Colchane. When the centres were established, there was no state funding or presence to respond to the protection needs of children on the move and their families.



Top level results:

In 2022, the number of victims of accidents with antipersonnel mines, unexploded ordnance and improvised explosive devices has increased, which is why UNICEF has intensified its Mine Risk Education activities in the most affected territories of Cauca, Chocó, Nariño and Norte de Santander, accompanying a total of 144 civilian victims with activities aimed at covering transportation, food and lodging expenses of survivors and at least one companion in the care route. A total of 5,286 children and adolescents have been trained in accident prevention, 139 teachers have been trained and 1,596 parents have participated in mine risk education activities.

Issue/background:

Colombia continues to be one of the five countries in the world in which the use of antipersonnel mines, unexploded ordnance and improvised explosive devices (Landmine Monitor, 2022) generates more than 100 victims annually. At the national level, a total of 123 victims were reported for 2022 with 75 per cent being civilians. Of these victims, 61 per cent are concentrated in the departments of Chocó, Nariño and Norte de Santander. Children and adolescents accounted for 12 per cent. Of these, 100 per cent are located in the departments prioritized for UNICEF's Mine Risk Education project (Chocó, Nariño and Norte de Santander), and 66 per cent of the child and adolescent victims belong to indigenous communities.

Resources required/allocated:

Mine Risk Education actions have been developed with the support of the Peace and Democracy partner, as well as the complementary work with state institutions that are part of the Integral Victim Attention Routes, and the coordination with agencies and organizations within the framework of the local coordination teams led by OCHA. Coordination with the Secretariats of Education, Ombudsman's Office, Emergency Education Board and other inter-agency spaces has been essential to strengthen the institutional routes and the sustainability of actions.

The sources of information on victims of anti-personnel mines, improvised explosive devices and unexploded ordnance are scarce and in many cases, there are no exact figures on the number of survivors in the country's municipalities and departments. Prioritizing the territories in which to offer Integral Attention to Victims is a challenge due to information biases among official sources and logistical difficulties, such as: lack of access roads, low connectivity, and constant threats due to armed conflict and climate change.

Thematic resources have complemented other funding sources such as ECHO and BPRM, expanding the range of interventions to other territories and responding to remote areas and sudden-onset emergencies.



Activity at Palpa La Unión, Las Lajas Educational Institution Roberto Payán, Nariño.

Progress and results:



Cualala Educational Institution, in the municipality of Magui Payán, Nariño.

Route for Integral Attention to Victims

From the area of Mine Risk Education in educational environments and complementary assistance to victims in the departments of Cauca, Chocó, Nariño and Norte de Santander, a total of 144 civilian victims were accompanied in 2022. Complementary support to direct victims (survivors) and indirect victims (families) of MAP/MSE/AEI, refers to all those activities aimed at covering transportation, food and lodging expenses of survivors and at least one companion in the care route. In this sense, UNICEF's response also considers the survivors' families as indirect victims. Providing assistance to the families helps to improve the processes of accompaniment and emotional management derived from the effects caused by an accident with anti-personnel mines, improvised explosive devices or unexploded ordnance.

The institutional route for comprehensive attention to victims is divided into the following stages:

Stage 1:

Pre-hospital care. In this stage, the victim of the accident is evacuated from the site and given relevant first aid. One of the great challenges of this stage is to certify the accident through the institutional route. Identifying the victim is in many cases complex because most of them do not have an identity document. UNICEF, together with Corporación Paz y Democracia, provides assistance to the victims' families so that they can be helped with transportation and lodging (in case the victim is transferred) and can accompany the victim through this process. By 2022, assistance was provided to a total of 47 indirect victims.

Stages 2 and 3:

Emergency and hospital care is provided, as well as medical, physical and psychological rehabilitation of the victim. In this process, legal advice is given to the victims since the compensation procedures do not have an easy orientation on the steps of registration and certification. Likewise, medical treatment is accompanied, due to the lack of knowledge about the steps to follow in order to continue with their treatment. This information component is provided by UNICEF and La Corporación Paz y Democracia, once the victim begins medical treatment.

Stage 4:

At this stage, medical and psychological care is provided on an ongoing basis. According to the experiences of UNICEF and La Corporación Paz y Democracia, most of the victims do not have access to psychological care, which is why the project carries out workshops and survivors' meetings to provide psycho-emotional support to the victim.

Stage 5:

In this stage, the social, educational and economic inclusion of the victim is carried out, where UNICEF and Corporación Paz y Democracia accompany people in search of new sources of funding and training. Often the victims of antipersonnel mines, unexploded ordnance and improvised explosive devices lose their jobs and/or skills that allow them to have an economic income.

Criticality and added value:



Activity at Julio Mejía Velez Educational Institution Alto Baudó, Chocó.

At the end of 2021, Colombia reported 2.96 km² of areas contaminated by antipersonnel landmines in 66 municipalities and 12 departments. Contamination, mainly by improvised mines, covered 219 confirmed dangerous areas (1.63 km²) and 188 suspected areas. In Colombia, landmine clearance began in 2005. However, the continued use of improvised explosive devices prevented Colombia from meeting the demining deadline, originally agreed for 2011. Currently, Colombia has until 31 December 2025, to achieve demining of the territory. Between 1990 and 2021, a total of 12,147 mine victims were recorded (2,340 killed, 9,807 injured). Most of the victims were recorded in the departments of Antioquia (2,628), Caquetá (950), Meta (1,146), Nariño (1,043) and Norte de Santander (951).

Colombia continues to be one of the countries with the highest mine contamination in the continent and in the world. Mine Risk Education was implemented mainly in municipalities accessible to clearance operators. Programme challenges included reaching remote communities and ensuring that approaches were adapted to the needs, culture and language of different indigenous ethnic groups. Landmines continue to affect local communities in the most contaminated departments of Antioquia, Arauca, Caquetá, Chocó, Meta, Nariño and Norte de Santander.

The most important challenges in the attention to victims, apart from the difficulties in the prioritization of attention by territories given the information gaps, also lie in the lack of follow-up and institutional trust and security of the victims. In the case of the municipalities of Chocó (Alto Baudó, El Litoral del San Juan and Riosucio) and Nariño (Contadero, Funes, Ricaurte, La Llanada, Linares, Los Andes and Samaniego), these are the territories where there is the greatest difference in information between the different sources regarding the registration of victims. In these territories, the Mine Risk Education project is being carried out, specifically in the Acandí and Baudó regions in Chocó and in the municipalities of Barbacoas, Magüí Payán, Roberto Payán in Nariño, where a total of 89 victims have been assisted. In Cauca, the project has managed to expand its coverage in terms of Comprehensive Attention to Victims, reaching 28 victims by 2022. It should be noted that there are still differences between the records of victims from official sources (OCHA-OCAP) in the departments of Arauca, Chocó and Meta. UNICEF has provided legal and humanitarian assistance to 14 victims. In the case of Nariño, 39 victims have received counselling and humanitarian assistance, of which 5 are children and adolescents.

Challenges and lessons learned:

Limited access to connectivity and conditions of access to the territory due to environmental or security conditions have posed challenges for project monitoring. UNICEF, with the support of its partners, has prioritized the hiring of local staff to ensure presence in the prioritized communities, as well as the use of offline tools for the consolidation of information and subsequent progress reporting. Security conditions have implied the need to reschedule activities and establish actions to mitigate the impacts of the activities carried out. The support of the security focal points, as well as the monitoring of situations and guidance on risk mitigation measures have been essential to ensure the safety of personnel and participants in the activities. There are no local suppliers to

guarantee the delivery of the supplies needed to carry out the activities. In some cases, this has made it necessary to identify suppliers outside the territory that can guarantee delivery under the required terms which has meant an increase in prices also linked to the increase in the dollar. This has made it difficult to obtain the materials needed for the intervention, causing extensions in the times foreseen in the procurement process.

The strengthening of the accountability strategy has ensured the inclusion of participants' opinions in the interventions. Among the main conclusions, the need to expand the scope of the project has been identified, as well as to take advantage of different dissemination tools so infographics, billboards and posters with prevention messages are being designed to be shared through WhatsApp. Complementary work with local authorities and other allies in the territory such as communities and organizations has contributed to the cost-effective use of resources and expansion of the project's scope: to strengthen child protection tools as a cross-cutting mechanism for partner interventions in contexts of multiple impacts; the strengthening of the ethnic and gender approach in the interventions to meet the needs of the communities participating in the project; and strengthening coordination between the different lines of intervention to provide a comprehensive response to the communities.

Moving forward:

Mine Risk Education actions are currently funded until June 2023 and are expected to be extended until 2024. Likewise, the work with state institutions present in the territory, seeks to strengthen the route both at institutional and community level, as well as the training and strengthening processes for teachers in educational institutions at risk and communities in areas with presence of mines, with the aim of generating safe behaviours and accident prevention actions.





Top level results

In 2022, a total of 8,002 migrants traveling through Tumbes had access to safe WASH services in friendly spaces provided by UNICEF. A mobile container with toilets, showers, handwashing stations and access to safe water was installed, including an SBC strategy to guide proper use of the services. UNICEF also provided hygiene kits for children, adolescents and lactating women. In coordination with WFP, 5,000 additional nutritional supplements were purchased to prevent and treat malnutrition among vulnerable migrant children. UNICEF also worked to strengthen the capacity of health workers in nine primary health centres and supported health authorities to improve regular immunization indicators and COVID-19 through the implementation of three immunization brigades aimed at actively engaging the migrant population in transit and settlement, including the hiring of a data collection officer.

Issue/background

The flow of migrants and refugees through the northern border remains constant, mostly through irregular crossings, which increases their vulnerability to GBV, trafficking, malnutrition, and others. In November 2022, IOM counted an average of 805 arrivals and 368 departures per day in Tumbes. According to UNHCR, the main needs were access to food, shelter, transportation, WASH and hygiene items (including menstrual hygiene items). The intervention of UNICEF intensified in the second half of the year, including humanitarian assistance in health, nutrition, WASH, child protection and education in Tumbes. Special attention was given to making services inclusive and gender sensitive.

Resources required/allocated

To effectively address the health, nutrition and WASH needs of women and children, UNICEF required US\$4.46 million, of which nearly US\$920,000 was needed to implement the nutritional surveillance strategy for children under five and the immunization brigades. However, only US\$500,000 was received for this purpose. Therefore, the contribution from the Humanitarian Thematic Fund was crucial to cover the unmet needs, namely communication campaigns for child nutrition surveillance and immunization.



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In 2022, the strategy to prevent and treat wasting in children under 5 years began with the Ready-to-Use Supplementary Food Plumpy Doz and Plumpy Nut.



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Vaccination Brigade of the Regional Directorate of Tumbes vaccinate migrant and Peruvian children

Progress and results

A total of 8,002 migrants with urgent basic needs had access to WASH services in friendly and safe spaces. A total of 12,170 doses of vaccines were administered to migrant children and adults in transit and settled in Tumbes, as well as to the host community. Guidelines were developed with the local health authority (DIRESA TUMBES) for treating malnutrition, assessing nutritional status, and providing nutritional supplements to migrant and local children (prevention with Plumpy Doz and treatment with Plumpy Nut). Nearly 5,000 children have benefited from this support. Three Community Care Centres were established to provide promotional activities and health, nutrition and hygiene messages to the migrant population to ensure a community-based approach to the follow-up of malnutrition cases.

Additionally, a humanitarian information management system for the visualization of information on field interventions has been developed for the monitoring of the implementation of our partners' activities. Communication activities have also been carried out with the aim of community integration and participation. A report on migrant children in Tumbes ([see here](#)) and videos on Venezuelan-Peruvian food recipes ([see here](#)) were published on social networks. Animation videos for the promotion of social programmes for migrants and information on access to health care for migrant youth have been used. Additionally, useful materials like backpacks, reusable water bottles and flyers were distributed to migrants passing through UNICEF centres in Tumbes.

Criticality and value addition:

Due to their situation of forced mobility and lack of access to basic services, migrating people face fundamental problems such as malnutrition, infectious diseases, GBV, human trafficking and other risks. The objective of the intervention was to improve the living conditions and health of vulnerable migrants on the northern border through the provision of essential humanitarian services with a community-based, inclusive and gender-sensitive approach. In addition, it was crucial to strengthen the capacity of community-based service providers, community health workers and local leaders to provide the necessary tools to ensure access to services for the migrant population. UNICEF's intervention was intensified in the second half of 2022 and will continue to work in the areas of water, sanitation, health and nutrition, as well as the regularization and integration of migrants.

Challenges and lessons learned:

One of the main challenges was the importance of creating synergies between nutrition, health, WASH, gender and SBC interventions to create spaces for participation and encourage sustainable behaviour change. It is also important to use spaces with comprehensive interventions that address most of the migrants' problems. For example, the WASH point is also used as an education, protection and health intervention space. Similarly, the misinformation campaign about the COVID-19 vaccine generated mistrust among the population, therefore the community mobilization and mass communication strategies included an intercultural approach to promote the participation of local leaders with influence in the community and the use of local languages to disseminate messages. Bringing well-known public figures to the field to promote vaccination generates more empathy, better reception of the message and interest in the users to learn more about the services offered to the community.

Moving forward:

In 2023, UNICEF will continue to work to strengthen primary health care services for children and mothers and to ensure access to safe water for the most vulnerable people, including migrants and host communities. To this end, UNICEF will reproduce the strategies developed in 2022 such as comprehensive care points, mobile service fairs and immunization brigades, which made it possible to reach the population with the most limited access to health, nutrition, water and sanitation services.



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Water and sanitation mobile services for migrants in Tumbes

Human interest stories and communication

Bolivia

Press:

- For 7 out of 10 schoolchildren, face-to-face classes are the best option for studying – Latest U-Report consultation on safe return to the classroom – [Link](#)
- Street theatre for children and adolescents promotes vaccination against COVID-19 – A theatre play that informs, sensitizes and moves people – [Link](#)
- Eight out of 10 teens experience distress, depression and anxiety, but do not seek psychological support – According to U-Report survey – [Link](#)

Social media:

- Refugee Day 2022 – [Link](#)

Videos:

- Venezuelans in La Paz – Bolivia. Stories of Dayimar and Néstor – [Link](#)
- Karen's story, Venezuelan migrant in El Alto – [Link](#)
- Uniendo voces, Yamile story, Cochabamba – [Link](#)
- Being a migrant is splitting your heart in two – Stories of Venezuelans who found their new home in Bolivia – [Link](#)

Brazil

Videos:

- [Video made by adolescent communicators at Super Panas](#) – Portuguese subtitles
- [Valentina in Super Panas](#) – Portuguese subtitles

Human interest stories:

- [Coming from Venezuela, siblings want to go back to school \(Story\)](#) – English
- ["It's worth fighting for what we want" \(community mobilization strategy\)](#) – English
- [Strengthening indigenous medicine for the response to covid-19 and other diseases](#) – Portuguese
- [A safe return to in-person classes](#) – Portuguese
- [Missing school so much! \(Photo essay\)](#) – Portuguese
- [Back to school with safety and hope](#) – Portuguese

Press release:

- [With coalition "Roraima against Polio", UNICEF and partners unite against the return of the disease to Brazil](#) – Portuguese
- [UNICEF provides course for young refugees and migrants from Venezuela who dream of entering university](#) – Portuguese
- [UNICEF supports the guarantee of Warao boys and girls' rights to education](#) – English
- [More than 600 children vaccinated against the COVID-19 in refugee and migrant shelters in Roraima](#) – English

Social media:

- ECHO visit to informal settlement in Roraima – [Facebook](#), [Instagram](#), [Twitter](#) – Portuguese
- International Migrants Day (thank to donors) – [Facebook](#), [Instagram](#), [Twitter](#) – Portuguese
- 16 days of activism – [Facebook](#), [Instagram](#), [Twitter](#) – Portuguese
- [Workshop on Citizenship, Rights and Consultation of Indigenous Peoples \(recorded event\)](#) – Portuguese

Chile

In 2022, UNICEF produced the video "A migrant mother crossing the desert on foot with her children: Andrelis' journey to Chile" (see link below). Andrelis Álvarez is a young migrant mother who arrived at the Colchane camp with her family. The decision to seek a better life for her children led her to leave her native Venezuela and cross the Andean desert on foot.

Also, during the reporting period UNICEF produced the following human stories, and video stories:

Web:

- [A migrant mother crosses the desert on foot with her children: Andreli's journey to Chile](#)
- [UNICEF supports the dreams of girls and boys who cross the desert to reach Chile](#)
- [Information from United Nations agencies reveals that 1 out of every 3 people in a situation of migration that enters the country through Colchane is a child or adolescent.](#)
- [The needs of migrant families in northern Chile](#)
- [Migrant children in northern Chile and access to education](#)

Press:

- [Venezolanos, jóvenes y con la meta puesta en la RM: Encuesta de la ONU perfila a migrantes que ingresan por Colchane](#)
- [UNICEF: 1 out of every 3 migrants who enter through the Colchane pass are minors](#)

Social media:

- [Valeria and Education](#)
- [Paula Pacheco talks about Migration](#)
- [Thank you letters Temporary Accommodation Centres \(I\)](#)
- [Thank you letters Temporary Accommodation Centres \(II\)](#)
- [Andreli's Journey](#)
- [1 out of every 3 migrants who enters Chile through Colchane is a child or adolescent](#)

Colombia

In 2022 for the commemoration of International Migrants Day UNICEF prepared a special content for website that included 4 life stories and 4 videos that had 33,049 views. The content was also published on UNICEF 6 social networks (Colombia).

[Día Internacional del Migrante | UNICEF](#). Other publications include:

Social media:

- https://web.facebook.com/45235597147/posts/489546139872694?_rdc=1&_rdr. Impressions: 6.156
- https://web.facebook.com/45235597147/posts/498585022302139?_rdc=1&_rdr. Impressions: 13.591
- https://web.facebook.com/45235597147/posts/499303758896932?_rdc=1&_rdr. Impressions 12.834
- <https://www.instagram.com/p/CjvoQJyqOvt/>. Reached 2.888
- <https://www.instagram.com/p/CjyCkd1qXPn/>. Reached 2.652
- <https://www.instagram.com/p/CkWOdQxqgRQ/>. Reached 2.925
- <https://www.instagram.com/p/CkWOdQxqgRQ/>. Reached 2.155
- <https://twitter.com/UNICEFColombia/status/1574882023201710092>. Impressions: 660
- <https://twitter.com/user/status/1580947964461473792>. Impressions: 288
- <https://twitter.com/UNICEFColombia/status/1581669062991806467>. Impressions 277
- <https://twitter.com/UNICEFColombia/status/1586439034544455680>. Impressions 509
- <https://twitter.com/UNICEFColombia/status/1587151243708866563>. Impressions 392

Video

- [Dairelis and why it is so special to play Golombiao](#)
- [Luis, one of the brilliant players of Golombiao 2022](#)

Web:

- The Journey of Miranda to Pasto. [La Travesía de Miranda a Pasto | UNICEF](#)
- Yelimar and his grandmother's garden. [Yelimar y el jardín de su abuela | UNICEF](#)
- Roberto: The young leader in the settlement La Concepción and Maduro's Border
- A flower that is reborn in Colombia. The Story of Gardenia [Una flor que renace en Colombia | UNICEF](#)

Dominican Republic

Social media:

- <https://www.instagram.com/p/Cj8cDofusZp/?igshid=YmMyMTA2M2Y=>

- <https://www.instagram.com/p/CjwM-hauh-Z/?igshid=YmMyMTA2M2Y=>
- <https://www.instagram.com/p/CjvePbfO72-/igshid=YmMyMTA2M2Y=>
- <https://www.instagram.com/p/Cjx3wN9OCxG/?igshid=YmMyMTA2M2Y=>
- <https://www.instagram.com/p/Cj1QewlulQu/?igshid=YmMyMTA2M2Y=>
- <https://www.instagram.com/p/Cj3CuXtu-le/?igshid=YmMyMTA2M2Y=>
- Child Friendly Spaces – <https://www.instagram.com/reel/CmgwjnWoylA/?igshid=YmMyMTA2M2Y%3D>
- Child Friendly Spaces – <https://www.instagram.com/reel/Cmfaz56la5o/?igshid=YmMyMTA2M2Y%3D>

Ecuador

In 2022, UNICEF produced the following human stories and external media:

- [Recuperar el aprendizaje tras dos años de pandemia](#)
- [Empoderamiento comunitario, la apuesta de UNICEF para lograr intervenciones sostenibles e integrales](#)
- [Las familias con niños, las más afectadas por la pandemia](#)
- [Los efectos de la pandemia en el bienestar de los hogares en Ecuador](#)
- [Perder el miedo a la vacunación contra COVID-19](#)
- [Encuesta nacional sobre el bienestar de los hogares ante la pandemia de Covid-19 en el Ecuador \(Encovid-EC\)](#)

Video:

- [Comprehensive interventions in Cayambe and Imbabura](#)

Web:

- [Fabiana focuses on her studies for better opportunities in Ecuador](#)
- [Together with their father, Félix and Wilneydis seek new opportunities in Ecuador](#)
- [Migrate and grow: Mirlenis and Elio dream of a better present for their son](#)
- [Reciclaje e inclusión para que la infancia viva en un ambiente más sano y seguro](#)
- [Recuperar el aprendizaje tras dos años de pandemia](#)
- [Las familias con niños, las más afectadas por la pandemia](#)
- [Los efectos de la pandemia en el bienestar de los hogares en Ecuador](#)
- [Perder el miedo a la vacunación contra COVID-19](#)

Guyana

In 2022, UNICEF has produced the following human stories, and external media:

Social media:

- [Community Support Officers trained to operate and maintain the water supply systems in their communities](#)
- [Emergency flood relief supplies handed over](#)
- [Court renovated and upgraded to provide safe rooms to better serve women and children](#)
- [Schools Welfare Officers trained to address the psychosocial needs of children in Guyana](#)
- [Healthcare workers trained to tackle vaccine hesitancy](#)

Web:

- [UNICEF donates water tanks, portable containers, and water purification tablets to Civil Defence Commission](#)
- [Water, Sanitation and Hygiene personnel trained to address WASH needs in emergencies](#)
- [Community, religious leaders join healthcare workers to tackle vaccine hesitancy in Region 2](#)

Peru

Social media:

- [Axlyn's story. Venezuelan student in a school in Tumbes. Published for Migrants' Day.](#)
- [Spot for social media on the project "Con Mis Documentos en Regla".](#)
- Spots [1](#), [2](#) and [3](#) about the project "Con Mis Documentos en Regla".
- [Teacher's Day. Testimonies of teachers trained through the Education Cannot Wait project.](#)
- [Refugee Day. Testimony of 3 migrant students.](#)

Web:

- [Delivery of nutritional supplements in the Tumbes Regional Health Directorate DIRESA for vulnerable population, including migrants in transit.](#)
- [ECW Global Note on the need for budget to continue caring for children -especially migrants- in the world.](#)
- [Migratory regularization of migrant children and adolescents through the project "Con Mis Documentos en Regla".](#)
- [Joint communiqué with the Refugee and Migrant Working Group for World Refugee Day.](#)

Trinidad and Tobago

Information sharing on the scaling-up of online learning as an innovative proposal for EiE was part of a Yammer session during the reporting period. Other knowledge and human-interest stories communication products will be forthcoming. The Yammer can be found [here](#).

ANNEX 1

Table 1: Funding status against the appeal by sector and country

BOLIVIA						
Sector	Requirements	Funds available			Funding gap	
		Humanitarian resources received in 2022	Other resources received in 2022	Humanitarian Resources available from 2021 (Carry-over)	US\$	%
Health	2,518,360	41,523	-	-	2,476,837	98%
Nutrition	905,960	58,671	-	-	847,289	94%
WASH	2,128,890	74,506	-	685,050	1,369,334	64%
Education	923,360	69,345	-	-	854,015	92%
Child Protection, GBViE,	1,140,280	251,188	-	-	889,092	78%
Social protection and cash transfers	505,760	-	-	-	505,760	100%
Cross-sectoral support (HCT, C4D, RCCE and AAP)	1,032,400	-	-	-	1,032,400	100%
Total BOLIVIA	9,155,010	495,233	-	685,050	7,974,727	87%

BRAZIL						
Sector	Requirements	Funds available			Funding gap	
		Humanitarian resources received in 2022	Other resources received in 2022	Humanitarian Resources available from 2021 (Carry-over)	US\$	%
Health	4,593,600	809,523	-	1,589,361	2,194,716	48%
Nutrition	2,200,520	744,412	-	9,747	1,446,361	66%
WASH	9,465,152	1,125,395	-	1,875,376	6,464,381	68%
Education	13,688,000	2,598,750	-	1,233,723	9,855,528	72%
Child Protection, GBViE,	9,850,140	1,728,832	-	485,860	7,635,449	78%
Social protection and cash transfers	6,840,252	-	-	681,040	6,159,212	90%
Cross-sectoral support (HCT, C4D, RCCE and AAP)	3,757,973	-	-	228,238	3,529,735	94%
Total BRAZIL	50,395,637	7,006,912	-	6,103,343	37,285,381	74%

CHILE						
Sector	Requirements	Funds available			Funding gap	
		Humanitarian resources received in 2022	Other resources received in 2022	Humanitarian Resources available from 2021 (Carry-over)	US\$	%
Health	92,800	-	-	-	92,800	100%

Nutrition	232,000	57,849	-		174,151	75%
WASH	846,800	39,111	-		807,689	95%
Education	1,058,748	21,722	-	113,532	923,494	87%
Child Protection, GBViE	3,651,702	165,816	-	86,468	3,399,418	93%
Social protection and cash transfers	232,000	9,077	-		222,923	96%
Cross-sectoral support (HCT, C4D, RCCE and AAP)	290,000	26,425	-		263,575	91%
Total CHILE	6,404,050	320,000	-	200,000	5,884,050	92%

COLOMBIA						
Sector	Requirements	Funds available			Funding gap	
		Humanitarian resources received in 2022	Other resources received in 2022	Humanitarian Resources available from 2021 (Carry-over)	US\$	%
Health	2,204,054	1,114,337	-	316,058.83	773,658	35%
Nutrition	2,647,126	919,636	-	203,562.06	1,523,928	58%
WASH	6,899,891	2,174,884	-	940,322.20	3,784,685	55%
Education	8,469,066	2,642,412	3,193,459.39	325,605.67	2,307,589	27%
Child Protection, GBViE,	9,315,183	3,257,813	-	669,476.75	5,387,893	58%
Social protection and cash transfers	9,927,360	260,918	-	-	9,666,442	97%
Cross-sectoral support (HCT, C4D, RCCE and AAP)	5,547,860	749,018	-	122,689.00	-	0%
Total COLOMBIA	45,010,540	11,119,018	3,193,459	2,577,715	23,444,195	52%

DOMINICAN REPUBLIC						
Sector	Requirements	Funds available			Funding gap	
		Humanitarian resources received in 2022	Other resources received in 2022	Humanitarian Resources available from 2021 (Carry-over)	US\$	%
Health	684,400	179,136	-	553,888	(48,624)	-7%
Nutrition	574,200	51,360	-	222,912	299,928	52%
WASH	620,600	-	-	9,955	610,645	98%
Education	1,287,600	173,894	-	230,026	883,679	69%
Child Protection, GBViE	1,467,400	552,241	-	68,207	846,952	58%
Social protection and cash transfers	893,200	57,823	-	181,335	654,042	73%
Cross-sectoral support (HCT, C4D, RCCE and AAP)	220,400	-	-	0		0%
Total DOMINICAN REPUBLIC	5,747,800	1,014,454	-	1,266,324	3,246,622	56%

ECUADOR						
Sector	Requirements	Funds available			Funding gap	
		Humanitarian resources received in 2022	Other resources received in 2022	Humanitarian Resources available from 2021 (Carry-over)	US\$	%
Health	1,218,000	-	-	415,425	802,575	66%
Nutrition	266,800	387,320	-		(120,520)	-45%
WASH	5,329,620	286,144	-	615,823	4,427,653	83%
Education	9,794,808	208,302	2,294,457.83	27,586	7,264,463	74%
Child Protection, GBVIE,	5,391,680	2,765,760	-	64,931	2,560,989	47%
Social protection and cash transfers	6,960,000	859,169	-	50,141	6,050,690	87%
Cross-sectoral support (HCT, C4D, RCCE and AAP)	353,800	-	-			0%
Total ECUADOR	29,314,708	4,506,695	2,294,458	1,173,906	20,985,849	72%

GUYANA						
Sector	Requirements	Funds available			Funding gap	
		Humanitarian resources received in 2022	Other resources received in 2022	Humanitarian Resources available from 2021 (Carry-over)	US\$	%
Health	278,400	-	-		278,400	100%
Nutrition	382,800	-	-		382,800	100%
WASH	348,000	46,789	-	14,548	286,663	82%
Education	574,200	-	-		574,200	100%
Child Protection, GBVIE,	429,200	215,571	-		213,629	50%
Social protection and cash transfers	150,800	-	-		150,800	100%
Cross-sectoral support (HCT, C4D, RCCE and AAP)	139,200	-	-		139,200	100%
Total GUYANA	2,302,600	262,360	-	14,548	2,025,692	88%

PERU						
Sector	Requirements	Funds available			Funding gap	
		Humanitarian resources received in 2022	Other resources received in 2022	Humanitarian Resources available from 2021 (Carry-over)	US\$	%
Health	3,963,140	993,021	-	978,070	1,992,050	50%
Nutrition	1,571,800	730,551	-	0	841,249	54%
WASH	5,365,868	-	-	148,217	5,217,651	97%
Education	7,041,200	1,358,072	4,411,839.23	612,165	659,124	9%

Child Protection, GBViE,	5,017,000	1,168,793	-	416,350	3,431,857	68%
Social protection and cash transfers	3,765,012	-	-		3,765,012	100%
Cross-sectoral support (HCT, C4D, RCCE and AAP)	-	16,907	-		(16,907)	#DIV/0!
Total PERU	26,724,020	4,267,344	4,411,839	2,154,802	15,890,036	59%

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	-	-	-		-	0%
Nutrition	29,000	-	-		29,000	100%
WASH	-	-	-		-	0%
Education	2,498,411	322,431	-	237,686	-	0%
Child Protection, GBViE,	226,200	18,369	-		207,831	92%
Social protection and cash transfers	1,803,701	431,631	-		1,372,070	76%
Cross-sectoral support (HCT, C4D, RCCE and AAP)	19,720	-	-		-	0%
Total T&T	4,577,032	772,431	-	237,686	3,566,915	78%

URUGUAY						
Sector	Requirements	Funds available			Funding gap	
		Humanitarian resources received in 2022	Other resources received in 2022	Humanitarian Resources available from 2021 (Carry-over)	US\$	%
Health	-	-	-		-	#DIV/0!
Nutrition	-	-	-		-	#DIV/0!
WASH	-	-	-		-	#DIV/0!
Education	20,300	-	-	16	20,284	100%
Child Protection, GBViE,	397,880	94,000	-	9,723	294,157	74%
Social protection and cash transfers	-	-	-		-	#DIV/0!
Cross-sectoral support (HCT, C4D, RCCE and AAP)	-	-	-			#DIV/0!
Total URUGUAY	418,180	94,000	-	9,739	314,441	75%

Table 2: Funding Received and Available by 31 December 2022 by Donor and Funding type (in USD)

Bolivia		
Donor Name/Type of funding	Grant reference	Overall Amount
I. Humanitarian funds received in 2022		
a) Thematic Humanitarian Funds		
Thematic Humanitarian Funds	SM229910	200,000
b) Non-Thematic Humanitarian Funds		
USA (State) BPRM	SM220098	210,400
SIDA - Sweden	SM220150	108,000
Total Non-Thematic Humanitarian Funds		318,400
c) Pooled Funding		
NA		
d) Other types of humanitarian funds		
NA		
e) Other resources – development funding towards HAC (SH grant)		
NA		
f) Other resources – development funding towards HAC (SC grant)		
NA		
Total humanitarian funds received in 2022		495,233
II. Carry-over of humanitarian funds available in 2022		
g) Carry over Thematic Humanitarian Funds		
NA		
h) Carry-over of non-Thematic Humanitarian Funds		
European Commission / ECHO	SM210770	685,050
Total carry-over non-Thematic Humanitarian Funds		685,050
Total carry-over humanitarian funds		685,050
III. Other sources		
NA		

Brazil		
Donor Name/Type of funding	Grant reference	Overall Amount
I. Humanitarian funds received in 2022		
a) Thematic Humanitarian Funds		
N/A		
b) Non-Thematic Humanitarian Funds		
SIDA - Sweden	SM220150	108,000
UNICEF-Brazil	SM220045	55,370
UNICEF Brazil	SM220450	20,765

UNICEF Brazil	SM220340	23,456
UNICEF Brazil	SM220339	105,197
German Committee for UNICEF	SM220281	178,367
European Commission / ECHO	SM220335	611,375
USA (State) BPRM	SM220097	5,000,000
European Commission / ECHO	SM220335	904,383
Total Non-Thematic Humanitarian Funds		7,006,912
c) Pooled Funding		
NA		
d) Other types of humanitarian funds		
NA		
e) Other resources – development funding towards HAC (SH grant)		
NA		
f) Other resources – development funding towards HAC (SC grant)		
NA		
Total humanitarian funds received in 2022		7,006,912
II. Carry-over of humanitarian funds available in 2022		
g) Carry over Thematic Humanitarian Funds		
Thematic Humanitarian Funds	SM189910	1,226,775
h) Carry-over of non-Thematic Humanitarian Funds		
UNICEF-Brazil	SM211002	64,523
United States Fund for UNICEF	SM200452	33,950
British Government (DFID)	SM200202	787
UNICEF-Brazil	SM211001	174,749
UNICEF-Brazil	SM210023	160,474
UNICEF-Brazil	SM210912	763,126
UNICEF-Brazil	SM210995	53,265
Spanish Committee for UNICEF	SM211007	32,300
Consolidated Funds from NatComs	SM210896	453,704
UNICEF-Brazil	SM210628	6,684
Bureau for Humanitarian Assistance	SM210837	370,370
UNICEF-Brazil	SM210930	39,852
UNICEF-Brazil	SM210567	224,918
UNICEF-Brazil	KM210065	55,996
UNICEF-Brazil	KM210070	22,265
UNICEF-Brazil	KM210077	8,696
UNICEF-Brazil	KM210078	36,000
UNICEF-Brazil	KM210125	207,000
UNICEF-Brazil	SM210627	19,885
UNICEF-Brazil	SM210225	110,059
UNICEF-Brazil	SM210430	146,034

UNICEF-Brazil	SM210607	21,968
UNICEF-Brazil	SM210783	24,080
UNICEF-Brazil	SM210205	29,009
European Commission / ECHO	SM210770	1,592,581
Norway	SM210406	91,096
European Commission / ECHO	SM210271	114,389
USA (State) BPRM	SM210456	18,809
Total carry-over non-Thematic Humanitarian Funds		4,876,569
Total carry-over humanitarian funds		6,103,343
III. Other sources		
N/A		0

Chile		
Donor Name/Type of funding	Grant reference	Overall Amount
I. Humanitarian funds received in 2022		
a) Thematic Humanitarian Funds		
NA		
b) Non-Thematic Humanitarian Funds		
SIDA - Sweden	SM220150	108,000
Norway	SM220307	162,000
USA (State) BPRM	SM220100	50,000
Total Non-Thematic Humanitarian Funds		320,000
c) Pooled Funding		
NA		
d) Other types of humanitarian funds		
NA		
e) Other resources – development funding towards HAC (SH grant)		
NA		
f) Other resources – development funding towards HAC (SC grant)		
NA		
Total humanitarian funds received in 2022		320,000
II. Carry-over of humanitarian funds available in 2022		
g) Carry over Thematic Humanitarian Funds		
Thematic Humanitarian Funds	SM189910	200,000
h) Carry-over of non-Thematic Humanitarian Funds		
NA		
Total carry-over non-Thematic Humanitarian Funds		
Total carry-over humanitarian funds		200,000

III. Other sources		
NA		

Colombia		
Donor Name/Type of funding	Grant reference	Overall Amount
I. Humanitarian funds received in 2022		
a) Thematic Humanitarian Funds		
UNICEF Global Humanitarian Thematic	SM229910	695,500
b) Non-Thematic Humanitarian Funds		
SIDA - Sweden	SM220150	433,553
The United Kingdom	SM170463	108,000
Belgium	SM210890	54,000
Bureau for Humanitarian Assistance	SM200664	113,400
European Commission / ECHO	SM220335	1,346,669
USA (State) BPRM	SM220101	6,524,600
Spanish Committee for UNICEF	SM220669	250,501
European Commission / ECHO	SM220335	1,007,795
Total Non-Thematic Humanitarian Funds		9,838,518
c) Pooled Funding		
UNOCHA - CERF	SM220661	585,000
d) Other types of humanitarian funds		
NA		
e) Other resources – development funding towards HAC (SH grant)		
NA		
f) Other resources – development funding towards HAC (SC grant)		
Education Cannot Wait Fund		569,363
Canada		2,624,096
Total humanitarian funds received in 2022		14,312,477
II. Carry-over of humanitarian funds available in 2022		
g) Carry over Thematic Humanitarian Funds		
Thematic Humanitarian Funds	SM189910	660,155
h) Carry-over of non-Thematic Humanitarian Funds		
European Commission / ECHO	SM210770	268,196
The United Kingdom	SM170463	13,236
UNOCHA	SM210777	240,653
Spanish Committee for UNICEF	SM210651	181,188
Norway	SM210406	55,434
European Commission / ECHO	SM210271	216,171
USA (State) BPRM	SM210457	737,455
Consolidated Funds from NatComs	SM210928	155,913

European Commission / ECHO	SM210676	49,314
Total carry-over non-Thematic Humanitarian Funds		1,917,559
Total carry-over humanitarian funds		2,577,714

Dominican Republic		
Donor Name/Type of funding	Grant reference	Overall Amount
I. Humanitarian funds received in 2022		
a) Thematic Humanitarian Funds		
NA		-
b) Non-Thematic Humanitarian Funds		
United Nations Multi Partner Trust	SM220028	180,288
European Commission / ECHO	SM220335	165,030
USA (State) BPRM	SM220102	490,000
European Commission / ECHO	SM210990	179,136
Total Non-Thematic Humanitarian Funds		1,014,454
c) Pooled Funding		
NA		-
d) Other types of humanitarian funds		
NA		
e) Other resources – development funding towards HAC (SH grant)		
NA		
f) Other resources – development funding towards HAC (SC grant)		
NA		
Total humanitarian funds received in 2022		1,014,454
II. Carry-over of humanitarian funds available in 2022		
g) Carry over Thematic Humanitarian Funds		
Thematic Humanitarian Funds	SM189910	9,955
h) Carry-over of non-Thematic Humanitarian Funds		
Canadian UNICEF Committee		90,000
European Commission / ECHO		728,800
United Nations Multi Partner Trust		168,493
Dominican Republic		241,028
European Commission / ECHO		28,047
Total carry-over non-Thematic Humanitarian Funds		1,256,369
Total carry-over humanitarian funds		1,266,324
III. Other sources		
NA		

Ecuador		
Donor Name/Type of funding	Grant reference	Overall Amount
I. Humanitarian funds received in 2022		
a) Thematic Humanitarian Funds		
NA		0
b) Non-Thematic Humanitarian Funds		
SIDA - Sweden	SM220150	108,000
European Commission / ECHO	SM220335	611,375
USA (State) BPRM	SM220103	3,400,000
European Commission / ECHO	SM220335	387,320
Total Non-Thematic Humanitarian Funds		4,506,695
c) Pooled Funding		
NA		-
d) Other types of humanitarian funds		
NA		-
e) Other resources – development funding towards HAC (SH grant)		
NA		-
f) Other resources – development funding towards HAC (SC grant)		
Canada	SC220203	2,294,458
Total humanitarian funds received in 2022		6,801,153
II. Carry-over of humanitarian funds available in 2022		
g) Carry over Thematic Humanitarian Funds		
NA		-
h) Carry-over of non-Thematic Humanitarian Funds		
Canadian UNICEF Committee	SM200707	63,900
European Commission / ECHO	SM210770	956,525
Total carry-over non-Thematic Humanitarian Funds		1,020,425
Total carry-over humanitarian funds		1,020,425
Thematic Humanitarian Funds	SM189910	153,481
III. Other sources		
NA		

Guyana		
Donor Name/Type of funding	Grant reference	Overall Amount
I. Humanitarian funds received in 2022		
a) Thematic Humanitarian Funds		
NA		-

b) Non-Thematic Humanitarian Funds		
Norway	SM220307	72,360
USA (State) BPRM	SM220105	190,000
Total Non-Thematic Humanitarian Funds		262,360
c) Pooled Funding		
NA		-
d) Other types of humanitarian funds		
NA		-
e) Other resources – development funding towards HAC (SH grant)		
NA		-
f) Other resources – development funding towards HAC (SC grant)		
NA		-
Total humanitarian funds received in 2022		262,360
II. Carry-over of humanitarian funds available in 2022		
g) Carry over Thematic Humanitarian Funds		
Thematic Humanitarian Funds	SM189910	14,548
h) Carry-over of non-Thematic Humanitarian Funds		
NA		-
Total carry-over non-Thematic Humanitarian Funds		-
Total carry-over humanitarian funds		14,548
III. Other sources		
NA		

Peru		
Donor Name/Type of funding	Grant reference	Overall Amount
I. Humanitarian funds received in 2022		
a) Thematic Humanitarian Funds		
NA		-
b) Non-Thematic Humanitarian Funds		
SIDA - Sweden	SM220150	108,000
Spanish Committee for UNICEF	SM210030	37,723
European Commission / ECHO	SM220335	611,375
USA (State) BPRM	SM220106	2,300,000
UNICEF-Peru	SM220619	76,511
European Commission / ECHO	SM220335	298,428
Total Non-Thematic Humanitarian Funds		3,432,037
c) Pooled Funding		
NA		-

d) Other types of humanitarian funds		
UNICEF-Peru	KM220011	33,969
UNICEF-Peru	KM220035	801,338
e) Other resources – development funding towards HAC (SH grant)		
NA		-
f) Other resources – development funding towards HAC (SC grant)		
Education Cannot Wait Fund	SC220156	2,460,032
Canada	SC220203	1,951,807
Total humanitarian funds received in 2022		8,679,183
II. Carry-over of humanitarian funds available in 2022		
g) Carry over Thematic Humanitarian Funds		
Thematic Humanitarian Funds	SM189910	253,035
h) Carry-over of non-Thematic Humanitarian Funds		
European Commission / ECHO	SM210770	890,602
Consolidated Funds from NatComs	SM210928	148,217
Republic of Korea	SM210490	462,963
European Commission / ECHO	SM210271	371,408
Spanish Committee for UNICEF	SM210030	28,577
Total carry-over non-Thematic Humanitarian Funds		1,901,767
Total carry-over humanitarian funds		2,154,802
III. Other sources		
NA		

Trinidad and Tobago		
Donor Name/Type of funding	Grant reference	Overall Amount
I. Humanitarian funds received in 2022		
a) Thematic Humanitarian Funds		
NA		-
b) Non-Thematic Humanitarian Funds		
European Commission / ECHO	SM220335	322,431
USA (State) BPRM	SM220115	450,000
Total Non-Thematic Humanitarian Funds		772,431
c) Pooled Funding		
NA		-
d) Other types of humanitarian funds		
NA		-
e) Other resources – development funding towards HAC (SH grant)		

NA		-
f) Other resources – development funding towards HAC (SC grant)		
NA		-
Total humanitarian funds received in 2022		772,431
II. Carry-over of humanitarian funds available in 2022		
g) Carry over Thematic Humanitarian Funds		
NA		-
h) Carry-over of non-Thematic Humanitarian Funds		
European Commission / ECHO	SM210271	237,686
Total carry-over non-Thematic Humanitarian Funds		237,686
Total carry-over humanitarian funds		237,686
III. Other sources		
NA		

Uruguay		
Donor Name/Type of funding	Grant reference	Overall Amount
I. Humanitarian funds received in 2022		
a) Thematic Humanitarian Funds		
NA		-
b) Non-Thematic Humanitarian Funds		
SIDA - Sweden	SM220150	54,000
USA (State) BPRM	SM220107	40,000
Total Non-Thematic Humanitarian Funds		94,000
c) Pooled Funding		
NA		-
d) Other types of humanitarian funds		
NA		-
e) Other resources – development funding towards HAC (SH grant)		
NA		-
f) Other resources – development funding towards HAC (SC grant)		
NA		-
Total humanitarian funds received in 2022		94,000
II. Carry-over of humanitarian funds available in 2022		
g) Carry over Thematic Humanitarian Funds		
Global - Thematic Humanitarian Resp	SM189910	17
h) Carry-over of non-Thematic Humanitarian Funds		
United Nations Multi Partner Trust	SM200882	9,706
UNICEF-Uruguay	SM210155	16

Total carry-over non-Thematic Humanitarian Funds		9,722
Total carry-over humanitarian funds		9,739
III. Other sources		
NA		

Donor feedback form

[English version](#)

ⁱ OCHA, Colombia: Plan de respuesta humanitaria 2022.

ⁱⁱ R4V, Latin America and the Caribbean, Venezuelan Refugees and Migrants in the Region, as of September 2022, 12 October 2022, available at <www.r4v.info/es/document/r4v-america-latina-y-el-caribe-refugiados-y-migrantes-venezolanos-en-la-region-sept-2022>.

ⁱⁱⁱ R4V, 'Regional Refugee and Migrant Response Plan for Refugees and Migrants from Venezuela 2022'.

^{iv} The "Interiorization" programme is a national integration strategy of Operation Welcome that enables refugees and migrants from Venezuela living in Roraima state to safely move to other parts of Brazil, so to ease pressure on the northern region and facilitate socio-economic integration. The process is voluntary, free and accessible to those refugees and migrants who obtained a temporary residence or were registered as asylum-seekers.

^v Migration: US\$114,505,337; COVID-19: US\$58,455,457; Other crisis: US\$12,788,783; Regional support: US\$5,700,000.

^{vi} UNICEF revised the appeal in June 2022 to include Chile's response to the humanitarian needs of the most vulnerable migrants and refugees entering the country. In Chile an important increase in the number of refugees and migrants, majority from Venezuela, enter the country from the northern borders with Bolivia and Peru, has been recorded since February 2022 with an average of 600 persons daily. These migrants don't have access to basic needs and services such as protection, education, housing, nutrition, and adequate WASH services. On February 14 an Emergency Decree allowed the military to take control of the Colchane border crossing and increase its presence in the region.

^{vii} Including response targeting Venezuelan migrants in Bolivia, Brazil, Chile, Colombia, Dominican Republic, Ecuador, Guyana, Peru, Trinidad and Tobago, and Uruguay; and other nationalities in Colombia, Dominican Republic, Ecuador and Uruguay.

^{viii} In all countries covered by this appeal.

^{ix} Internal displacement in Colombia and potential displacement of Colombians to Ecuador, where a contingency response has been planned.